**Interview details**

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| --- | --- |
| Participant ID | MLKAP01A |
| Municipality | Kapilvastu |
| Occupation | Housewife |
| Education (grade) | 0 |
| Type of household | Joint |
| Ethnicity | Hill Dalit |
| Nb of pregnancies before this one | 0 |
| Gestation age in months | 9 months and 3 weeks |
| Start time | 11:17 |
| End time | 11:55 |
| Interviewer | Bibhu Thapaliya |
| Date | 24/01/2023 |
| Name of transcriber | Bipana Shrestha |
| Name of translator | Bipana Shrestha |

**Background**

The mother-in-law was interviewed outside the house, while her pregnant daughter-in-law was interviewed inside. The mother-in-law was initially reluctant but later agreed to participate. She was reluctant because she did not want to talk about HIV; it was a taboo topic for her. She agreed after we informed her it was only for information for a study.

# INTERVIEWER:

Have you lived here long?

# PARTICIPANT:

Yes. Our families are from here. We were also born here.

# INTERVIEWER:

Were you born in Kapilvastu?

# PARTICIPANT:

Yes. We were born in Kapilvastu.

# INTERVIEWER:

How old are you?

# PARTICIPANT:

I am about 42, 43 or 44 years old. I was born in 2035 B.S (1978).

# INTERVIEWER:

Did you go to school?

# PARTICIPANT:

Where could we go? We were girls at the time. We couldn't study. We just worked.

# INTERVIEWER:

You live in a joint household right?

# PARTICIPANT:

Yes.

# INTERVIEWER:

You live together, the mother-in-law, the daughter-in-law, the father-in-law, and the son. Has she been pregnant before?

# PARTICIPANT:

This is her first pregnancy.

# INTERVIEWER:

How many weeks pregnant is she?

# PARTICIPANT:

The pregnancy started in Baisakh. The birth was expected on the 4 or 5 of January.

# INTERVIEWER:

How is her health? How was her health during the pregnancy? Now it's time for delivery. Before this moment, was there any vomiting or any bad feelings?

# PARTICIPANT:

Let's not talk about the vomiting. She didn't eat for four months. She vomited a lot. She had given so much trouble and after that, she became like this.

# INTERVIEWER:

Did it last for 9 months?

# PARTICIPANT:

She had vomiting problems for 4 months.

# INTERVIEWER:

After that, did she start eating again?

# PARTICIPANT:

Yes, after that, she started eating again. She was used to eating nothing.

# INTERVIEWER:

Was she used to go to the health post from the beginning?

# PARTICIPANT:

I used to take her to the hospital.

# INTERVIEWER:

So this means that her husband was not there most of the time?

# PARTICIPANT:

No, he was in Pokhara.

# INTERVIEWER:

Does he live there?

# PARTICIPANT:

Yes.

# INTERVIEWER:

Does this mean that you used to take your daughter-in-law to the nearest hospital or health post?

# PARTICIPANT:

I took her to the Taulihawa hospital, sometimes to the Gauri health post.

# INTERVIEWER:

Gauri health post?

# PARTICIPANT:

In the Gauri health post, we were referred to Taulihawa hospital.

# INTERVIEWER:

Does that mean you were taking her or did she go to the hospital alone?

# PARTICIPANT:

No, sometimes she went with her older sister-in-law and sometimes she went with me.

# INTERVIEWER:

Does his sister-in-law live with you?

# PARTICIPANT:

We all live together in the same house.

# INTERVIEWER:

How do the conversations of the mother-in-law and daughter-in-law go? As a mother-in-law, you already have experience with motherhood. How many sons and daughters do you have?

# PARTICIPANT:

I have a daughter and four sons.

# INTERVIEWER:

It means you have a lot of experience.

# PARTICIPANT:

My oldest is a daughter and I have four sons. Now I don't want to give birth to children anymore. I was still a child when I had my children. At 24 I had my youngest son and at 25 I had an operation [laparoscopy]. After giving birth to 6 children, I had an operation [laparoscopy] at 25.

# INTERVIEWER:

So by the time you were 25, you had already given birth to 6 children?

# PARTICIPANT:

Yes, at 15 I gave birth to my daughter.

# INTERVIEWER:

When everyone else starts, you were finishing [laughing].

# PARTICIPANT:

I became a mother of 6 children. Because of my age, I don't look like I gave birth to 6 children. That's the way it is. At that time it was supposed to happen. What should you do when you have children as a child?

# INTERVIEWER:

You were married very young.

# PARTICIPANT:

The marriage took place at a young age.

# INTERVIEWER:

That means, at what age did you get married?

# PARTICIPANT:

I was married at 14.

# INTERVIEWER:

Is early marriage still common here? Or has it decreased?

# PARTICIPANT:

Nowadays, there are not many early marriages. In our time, there were early marriages. In the current generation, people don't get married until they are 20. I had my oldest grandson, I was 31. When I was carrying my grandson when I was 31, the neighbours said to me: 'Only now it's become proper for you, it looks like you're carrying your son [laughing]. Now my grandson is 12 years old. He is the son of my daughter.

# INTERVIEWER:

And how old is your daughter-in-law?

# PARTICIPANT:

She is 20 or 21 years old.

# INTERVIEWER:

And how many times did she go to the hospital during her pregnancy? How many times did she go for check-ups?

# PARTICIPANT:

Since the beginning of the pregnancy, she went… How many times should I say? We have a card for the appointments. She was not feeling well so she went to the hospital.

# INTERVIEWER:

And then they may have told you to come back on a certain day the following month. Do health workers say this?

# PARTICIPANT:

Yes, they did.

# INTERVIEWER:

And how long do you have to wait when you are there?

# PARTICIPANT:

Well, it depends on the time and how crowded it is. If it is crowded then we have to wait. Otherwise, you can be taken care of as soon as you arrive.

# INTERVIEWER:

Maybe you have to wait less in the health post?

# PARTICIPANT:

Yes, we have to wait for less. There are fewer people.

# INTERVIEWER:

In the health post, do they do blood tests?

# PARTICIPANT:

Yes, they do. But this month, they didn’t because they referred us to Taulihawa hospital. Blood tests were done there. We just went to Taulihawa hospital yesterday.

# INTERVIEWER:

Where did you go for the first ANC visit?

# PARTICIPANT:

We went to the health post. Then, she went there regularly, almost every month. She was used to doing her blood test and coming back home.

# INTERVIEWER:

It means a lot of tests have been done. Which tests were done?

# PARTICIPANT:

We don’t know which tests they performed. Health workers know which tests they did.

# INTERVIEWER:

They did not tell you which tests before doing them?

# PARTICIPANT:

Yes, they didn't tell us about the tests. The health workers said the baby was fine. The baby is normal. There is no weakness. They said that and sent us home. They told us that the baby is about 3,5 kilograms. And one or two weeks ago, they said that the baby could reach 4 kilograms. Everything is good and normal. There is no weakness in the blood. The results are good.

# INTERVIEWER:

Do they also do some tests related to reproductive health problems?

# PARTICIPANT:

They did some urine tests. They found an infection or something similar. Health workers gave medicines for this.

# INTERVIEWER:

Have you heard about the lack of blood?

# PARTICIPANT:

No, I have not.

# INTERVIEWER:

Lack of blood is also called anaemia. It is caused by a lack of iron. Your daughter-in-law is taking iron, isn't she?

# PARTICIPANT:

She is not short of iron. She has been taking it since the beginning. When she went to the health post, the health worker told her that she needed iron. Since then, she has not missed a single dose. When medicines are available for free, we take them from the health post. And I bought the medicines that are not available for free.

# INTERVIEWER:

So you gave her the medicines she needed?

# PARTICIPANT:

Yes, I gave her the medicine. I gave her all the medicine she needed. At first, she was sick and lost weight. After taking her to the hospital several times, the health worker said that the baby was big enough and that she should stop the medication. They told us to stop taking iron tablets because she could not give birth to a very big baby. From the time she was admitted to the hospital until now, she has not received any more tablets.

# INTERVIEWER:

Do they give calcium as well?

# PARTICIPANT:

Yes, calcium is also given for free by the health post.

# INTERVIEWER:

You said you heard about 2 or 3 people infected with HIV. Do you know them?

# PARTICIPANT:

Maybe they live in the next village. We don't know much about them.

# INTERVIEWER:

Do you know what are their symptoms such as fever for example?

# PARTICIPANT:

We don't know much. I met them once and we never saw each other again after that. They are not from here. When they got the information, they went to the health post. We were there with two or three other women and we learned about it. We don't know much about it.

# INTERVIEWER:

Are they alive? Has something happened to them?

# PARTICIPANT:

[Laughts]. Yes, they are alive.

# INTERVIEWER:

No, but if treatment is not taken in time and people don’t take the treatment for many years, they can die.

# PARTICIPANT:

They are taking treatment.

# INTERVIEWER:

Have you heard about Bhiringi[[1]](#footnote-1)?

# PARTICIPANT:

A little. I heard about it from my parents. I heard about it from older people but I didn't see it. Old people call it “Bhiringi” but now people use to call it HIV.

# INTERVIEWER:

Does this mean that you have not seen people with this disease?

# PARTICIPANT:

No, I have not. This means that it is not well known in this area. In this area, we don't know much about these diseases. In past, the person suffering from Bhiringi was sent to the jungle to live in isolation, far from the community. Some people with HIV are sent out of the house, too.

# INTERVIEWER:

Have you heard about hepatitis B?

# PARTICIPANT:

No.

# INTERVIEWER:

Hepatitis B is like jaundice. Do you know anyone who has had hepatitis B?

# PARTICIPANT:

No.

# INTERVIEWER:

I'll tell you a bit more about these diseases. You have already heard about HIV. Many people know about this disease. You can't see the symptoms of HIV very quickly. You can't tell if someone has HIV just by looking at them. The symptoms appear after many years. HIV does not make a person weak quickly. At first, people may suffer from symptoms like a simple cold and slowly it starts to get worse. When the virus enters the body and makes the person very sick, other diseases are not easily cured. But by taking the medicines that the government provides for free, people can be a little stronger. They can't cure the person, but they make them a little bit stronger. That's why they say early diagnosis is better for HIV. One of the ways in which HIV is transmitted is through the relationship between husband and wife. HIV is also transmitted through blood. If I get sick and take blood from someone who is infected with HIV, I can get infected.

# PARTICIPANT:

These things are said on the radio. HIV cannot be transmitted by kissing, sharing a toilet, or staying or eating together. You can transmit it by shaving your beard. If the machine is shared with someone else. The blood can be in the razor and that's how it can be transmitted, they said.

# INTERVIEWER:

Yes, a baby can also be infected through its mother's milk.

# PARTICIPANT:

Yes, through mother’s milk.

# INTERVIEWER:

If a pregnant woman is infected with HIV and the medication is not taken, the HIV can be transmitted to the baby in the womb. In this case, the baby does not survive long after birth. This is why all pregnant women should be tested for HIV.

# PARTICIPANT:

That's good, you gave a good suggestion.

# INTERVIEWER:

Yes. The baby can also be saved in that case.

# PARTICIPANT:

Once, there was HIV survey program held by the government in this village. Many people including my family went to participate in the survey. They haphazardly asked many questions to us. After completing the survey, they gave us biscuits and 100 rupees. We returned home while eating those biscuits.

# INTERVIEWER:

Unlike HIV, Bhiringi can be cured and symptoms are seen immediately. The symptoms are wounds that can be seen on the hands and legs.

# PARTICIPANT:

Yes, for Bhiringi, wounds are seen on hands and legs.

# INTERVIEWER:

Yes, that is true.

# PARTICIPANT:

(Whispering and giggling).

# INTERVIEWER:

Sores appear on the mouth. Then, sores and itching appear around urination sites in men and women, in the palms of the hands and feet and skin changes. Fever also occurs with headaches, fatigue and swelling of various parts of the body. But if diagnosed in time, medication can cure it. Hepatitis B is similar to syphilis. In the case of hepatitis B, the liver is infected and the nails, eyes and skin turn yellow.

# PARTICIPANT:

It is like jaundice.

# INTERVIEWER:

Yes, hepatitis B is like jaundice. Now we are going to talk about sexually transmitted diseases. If you feel very uncomfortable, you can choose not to share your opinion on this subject. Have you heard about sexual diseases?

# PARTICIPANT:

What is a sexually transmitted disease? I don't know.

# INTERVIEWER:

It is a disease that is transmitted from the relationship between husband and wife.

# PARTICIPANT:

What happens because of these diseases?

# INTERVIEWER:

HIV, syphilis and hepatitis B are also called sexually transmitted diseases. If the husband has one of these diseases and there is a sexual relationship between them, the wife will also be infected. Does this mean that you have never heard of these diseases?

# PARTICIPANT:

No, never. We are from the previous generation. At that time, we got married very young. We didn't know anything about these things and husbands were not used to leaving home and going abroad.

# INTERVIEWER:

Didn't the hospital tell you about it during the ANC visits?

# PARTICIPANT:

No, the health workers did not tell us about these diseases. When we go to the health post, the health workers give us injections of the vaccine. After checking the pregnancy status, we would just go home. We used to give birth at home.

# INTERVIEWER:

Did you give birth at home?

# PARTICIPANT:

Yes, we used to.

# INTERVIEWER:

Did you give birth at home to your 6 children?

# PARTICIPANT:

Yes, I did.

# INTERVIEWER:

Now suppose you have a sister in your neighbourhood. Her name is Sarita. She is the same age as your daughter-in-law. She is pregnant and she comes here to drink tea and ask for advice. She asks you where to go and what to do. She says, "I've never been to a hospital before. Should I go for a check-up?" What advice would you give her?

# PARTICIPANT:

What would I tell her? That she should have a blood test [laughs]. She should have a check-up. What other advice can I give her?

# INTERVIEWER:

Where would you suggest she should go?

# PARTICIPANT:

The health post. I would tell her to go there.

# INTERVIEWER:

And if she is very poor, will the health post ask her for money?

# PARTICIPANT:

No, you don’t need to pay there.

# INTERVIEWER:

What about the hospital? Do they ask for money there?

# PARTICIPANT:

If you go to a private hospital you have to pay, but normally in a public hospital you don't. But now they start asking for money. Yesterday I paid 1500 rupees.

# INTERVIEWER:

At the hospital?

# PARTICIPANT:

Yes.

# INTERVIEWER:

These fees may be for tests, such as blood tests and other examinations you have undergone?

# PARTICIPANT:

Blood test, urine test, video x-ray and for medicines. I paid 2000 rupees in total.

# INTERVIEWER:

Is the same thing more expensive in private hospitals?

# PARTICIPANT:

Yes, compared to the private hospital, what I paid yesterday is very little.

# INTERVIEWER:

Did you go to private hospitals?

# PARTICIPANT:

Yes, and I had to pay 2200 rupees.

# INTERVIEWER:

Let's go back to our story. "I'm not going to go in randomly without understanding. What happens when I go to the hospital until I get home? What happens there?" What would you say to him?

# PARTICIPANT:

What should I tell her? Now you should go and check your blood. Tell the doctor what problems you have in your body. He will give you treatment and then you will come back home. I would give him that suggestion. What more can I say? [Laughs].

# INTERVIEWER:

And whom would you recommend she meet at the health post?

# PARTICIPANT:

She should meet the nurses.

# INTERVIEWER:

There are nurses there?

# PARTICIPANT:

Auxiliary Nurse Midwives are there.

# INTERVIEWER:

Sarita tells you: "I feel despised there. Usually, the FCHVs and health workers are not pleasant. How could they treat me better, in the health post?" If Sarita said this, how would you respond?

# PARTICIPANT:

This kind of situation must be denounced.

# INTERVIEWER:

Do health workers act like that sometimes?

# PARTICIPANT:

Yes. Once, I took my daughter to Taulihawa public hospital. There was a long queue to pass through. People from India also visit this hospital. Until our turn comes, the service hour is already closed. I obviously got angry and even said some bad words to the health workers there.

# INTERVIEWER:

Does it mean management should be improved?

# PARTICIPANT:

Yes, management should be improved. Sick people who have money can go to hospitals which are far and where treatments are better. But how can poor people access treatment? We, poor people, have to go to the health post to get treatment. Nearby health post is our best support.

# INTERVIEWER:

In health posts, the nurse has to look after many patients, right? If someone suffering from Bhiringi goes to the health post, what do health workers do?

# PARTICIPANT:

I don’t know what they do in this case [laughs]. I don’t know these things. I did not study. If I had studied, I would know that. I could say what should be done. If I had studied there and worked in this field, I could have had experience. But this, I don’t know and I cannot say anything about it. I can tell you what I heard but about this, I don’t have experience.

# INTERVIEWER:

Would you recommend Sarita to go alone or would you tell her to go to the health post with a friend?

# PARTICIPANT:

If Sarita has a problem, then her friend should go with her. But if she does not need a friend, she can also go alone, right?

# INTERVIEWER:

Yes.

# PARTICIPANT:

Now, if Sarita feels extremely sad and has a lot of pain, then her friend should go with her.

# INTERVIEWER:

Your daughter-in-law had a lot of blood tests during her pregnancy, how long it takes to obtain the results?

# PARTICIPANT:

The report is available quickly.

# INTERVIEWER:

Is it available in a day?

# PARTICIPANT:

Yes, the report is available in 5 or 6 hours.

# INTERVIEWER:

And then you show the report to the doctor?

# PARTICIPANT:

Yes.

# INTERVIEWER:

Can you show the report on the same day?

# PARTICIPANT:

Yes, I show the report to the doctor on the same day. The doctor said the report is good. If necessary and if the results were not good, then the doctor would let us know. He would advise us and also give us medicines.

# INTERVIEWER:

If Sarita has hepatitis B symptoms and she got infected by her husband, then what should we do? When she gets the first symptoms, should she go for a blood test?

# PARTICIPANT:

She should accept to do the blood test to access treatment, for the safety of her body and for her family and children. She should do the blood test.

# INTERVIEWER:

Do you think, her husband should be tested too?

# PARTICIPANT:

Both of them should be screened. From whom does the disease get transmitted? It should be determined with the test.

# INTERVIEWER:

Now, if Sarita has wounds in her urination part, with whom she should share her problem?

# PARTICIPANT:

She should tell her best friend. Firstly, she should tell her husband and then her best friend.

# INTERVIEWER:

Do you think she will face negative comments or discrimination? Do you think people will ask her to live far from home? Will she experience this?

# PARTICIPANT:

People should avoid discrimination as much as possible. She should be provided some safety. She should be made aware. She should be given good advices about what is beneficial for her health.

# INTERVIEWER:

Who should provide her with such advice? Her husband?

# PARTICIPANT:

Her husband and her close friends. Neighbours too should provide her with such advice.

# INTERVIEWER:

Should they advise her?

# PARTICIPANT:

Yes.

# INTERVIEWER:

Does this mean that discrimination should not be practised?

# PARTICIPANT:

There should be no discrimination. People should not add tension to tension.

# INTERVIEWER:

You know a lot of things about check-ups. You went with your daughter-in-law and you helped her a lot.

# PARTICIPANT:

It is normal to help her like this. She left her father and mother and came to live with us as if we were her parents. We must help her and understand her pain. We also have daughters and they had to go and live with other people too. So we have to understand her pain and her feelings.

# INTERVIEWER:

If we say that every woman should be tested for HIV, syphilis and hepatitis B would you agree?

# PARTICIPANT:

It may be right.

# INTERVIEWER:

What do you think? Is it okay to say this?

# PARTICIPANT:

Yes, it is good to do such tests. If better results are obtained by advising and counselling, then it should also be done.

# INTERVIEWER:

Do you think it would be easier to do this check-up at the hospital or at the health post?

# PARTICIPANT:

It is much better the check-up is done in the health post rather than in the hospital.

# INTERVIEWER:

Why do you think?

# PARTICIPANT:

It would be better if we could get a discount at the health post.

# INTERVIEWER:

Is the health post nearer?

# PARTICIPANT:

Yes, it is.

I: What conditions would make it easier for you to visit nearby health posts?

# PARTICIPANT:

I feel like if we should not wait for longer, then it would be better. We feel like if we get the easier service, then it would be better. Every person thinks that.

# INTERVIEWER:

Did you have to pay for blood tests in the health post?

# PARTICIPANT:

No, I did not pay there but at the Taulihawa hospital I did. We paid for medicines, blood testing and everything.

# INTERVIEWER:

So maybe not everyone can afford the tests. It may be difficult for some people to afford it, even at 1500 rupees.

# PARTICIPANT:

Yes.

# INTERVIEWER:

What should people do in this case?

# PARTICIPANT:

If people cannot afford it, then what can they do? They can try to go to the health post and tell them their problems. That’s it.

# INTERVIEWER:

There is not a lot of option for people who cannot afford blood testing.

# PARTICIPANT:

No, there is not.

# INTERVIEWER:

For this reason, do you think it would be better if the government made these things free?

# PARTICIPANT:

Yes, it would be very good if the government provides all these things freely.

# INTERVIEWER:

At the hospital, we were told that blood tests were provided free of charge to all pregnant women.

# PARTICIPANT:

Maybe for HIV but services for other health problems are not provided free of charge.

# INTERVIEWER:

Urine tests are not free, right?

# PARTICIPANT:

Yes.

# INTERVIEWER:

What about a video x-ray?

# PARTICIPANT:

They ask for money for all the services provided.

1. Syphilis is called Bhiringi in Nepali [↑](#footnote-ref-1)