

**IDEAS Phase 2 Birth attendant survey  
Gombe State, 2018**

**SECTION 1: Birth attendant identifiers**

1.1	Date	_ _  /  _ _  /  _ _ _ _
1.2	State code	_ _
1.3	LGA name (select from PDA drop down list)	_____
1.3a	Ward name (select from PDA drop down list)	_____
1.4	EA name (select from PDA drop down list)	_____
1.5	EA number (automatically generated by PDA)	_ _
1.5a	BA unique id (automatically generated by PDA – write on consent form)	_ _ _ / _  EA/person
1.6	BA type (1) Medical officer (2) Community Health officer (3) VHW (4) TBA (5) Doctor in facility (6) Nurse/midwife in facility (7) Junior CHEW (8) CHEW (9) Other facility worker	_
1.6A	Where does the BA usually provide services (1) Community (2) Health facility	_
1.6B	Apart from government, who provides support to this facility (1) SFH (2) PACT/SAQIP (3) JPHIEGO (4) Evidence for Action (5) None of the above (6) Others (specify)	_
1.7	Is the BA trained by SFH or PACT/SAQIP? (1) Yes (2) No	_
1.7a	ALL What is the name of the health facility? Enter facility name	_____
1.8	GPS Longitude Take coordinates of health facility	_ _  :  _ _ _ _ _
1.9	GPS Latitude Take coordinates of health facility	_ _  :  _ _ _ _ _
1.10a	Interviewer Initials	_ _
1.10b	Did you read the BA the consent form? (1) yes (2) no	
1.10c	Did the BA agree to be interviewed? (1) yes (continue with interview) (2) no	_
1.10d	If not Why not? _____ <b>END</b>	_____

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**SECTION 1: Service provision by the BA (Prompt for responses)**

		Service provided by BA (1=yes; 2=no)
1.11	ANC: Awon ciki	<input type="checkbox"/>
1.12	Delivery: Haihuwa	<input type="checkbox"/>
1.13	Post partum care (care given to mother within 42 days after childbirth): Kulawar lokacin jago	<input type="checkbox"/>
1.14	Post natal care (care given to newborn within 42 days after birth): Kulawada jariribayan haihuwa	<input type="checkbox"/>
1.15	Referral : Turawa zuwa gaba domin samun karin kulawa	<input type="checkbox"/>
1.16	Breast feeding counselling: Bada shawara domin shayar da nonon uwa	<input type="checkbox"/>
1.17	Skin to skin (KMC): Renon jarirai jiki da jiki domin jin dumin uwa	<input type="checkbox"/>
1.18	Identification of LBW babies: Gano jarirai da basu da cikakken nauyi	<input type="checkbox"/>
1.19	Family planning (contraceptive): Tazarar haihuwa/Hanyoyin tsara iyali	<input type="checkbox"/>
1.20a	HIV education/information: Ilmantarwa/bayanai dangane da cutar Kanjamau/SIDA	<input type="checkbox"/>
1.20b	PMTCT services: Dabarun kare jarirai daga kamuwa da kwayar cutar Kanjamau daga mahaifiya	<input type="checkbox"/>
1.20c	Malaria related activities: Ayyukan da suka shafi zazzabin cizon sauro	<input type="checkbox"/>
1.20d	Vaccinations: Alluran riga kafi	<input type="checkbox"/>
1.20e	Syphilis testing during ANC?: Gwajin ciwon sanyi lokacin awon ciki	<input type="checkbox"/>
1.21	Personal hygiene (for families): Tsabtanta jiki	<input type="checkbox"/>
1.22	Community mobilization: Hada kan jama'a domin cimma buri	<input type="checkbox"/>

**SECTION 2: BACKGROUND AND TRAINING OF BIRTH ATTENDANT**

**Explain to the respondent that the first questions are about his/her background and training**

Q2		
2.1a	What is the gender of the BA? (1)male (2)female	<input type="checkbox"/>
2.1	What is your birth date? Menene ranar haihuwar ka/ki? (enter on PDA)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
2.2	What is your age now? Nawa ne cikakkun shekarun ka/ki yanzu? (confirm using PDA prompted age in years)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
2.3	What is the highest grade of schooling that you completed? Menene matakin karatu mafi zurfi da ka/kika kammala? Enter number	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
2.4	For how many years have you worked as a BA? Tsawon shekaru nawa kayi/ki kayi a matsayin jami'in kiwon lafiya na zangon farko? Write number of years	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
2.5	For how many years have you worked in the place you are working now? Enter total number of years Tsawon shekaru nawa kayi/ki kayi a wannan wurin a matsayin ka/ki na jami'in kiwon lafiya na zangon farko?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
2.6	In the last 12 months, have you received any training (On the job or outside workplace) for MNCH services? (1)yes (2)no if no go to 2.16 A cikin watanni 12 da suka gabata, ko ka/kin sami wata horarwa kan aiyukan inganta rayuwar iyali na (MNCH)? (1)yes (2)no if no go to 2.16	<input type="checkbox"/>
	If 2.6 is yes, from whom? If 2.6 is yes, Daga wajen wa ka/kika samu horarwar?	

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2.7.1	(1)SFH: <i>Kungiyar Lafiyar Iyali (SFH)</i>	<input type="checkbox"/>
2.7.2	(2) PACT/SAQIP	<input type="checkbox"/>
2.7.3	(3) <i>Ward Development Committee: Kwamitin Cigaban Gunduma</i>	<input type="checkbox"/>
2.7.4	(4) <i>Other – specify: Wani abin daban</i>	<input type="checkbox"/>
2.7a	Specify <i>Ka/ki ambata</i> _____	
2.8	<b>If 2.6 is yes</b> , for how many days were you trained in total? ( <i>if less than 1 day enter 0</i> ) <b>If 2.6 is yes</b> , <i>Horarwar ta kwana nawa ne ka/kika samu?</i>	<input type="checkbox"/>
2.9	<b>If yes:</b> Did that training include the immediate care of the newborn (1)yes (2)no <b>If yes:</b> <i>Horon da kika samu ya hada da dabarun gano jarirai masu karancin nauyi ko wadanda aka haifa kafin cikan watannin haihuwa (wato sati 37)?</i> (1)yes (2)no	<input type="checkbox"/>
2.10	<b>If yes:</b> Did that training include promoting healthy behaviours for mothers and newborns (1)yes (2)no <b>If yes:</b> <i>Ko Horarwar ta hada da dabarun dorewar ingantattun dabi'un da zasu tabbatar da lafiyar uwa da jariri?</i> (1)yes (2)no	<input type="checkbox"/>
2.11	<b>If yes:</b> Did that training include use of the MNH call centre (1)yes (2)no <b>If yes:</b> <i>Ko horarwar ta kunshi yadda za'a yi amfani da cibiyar inganta rayuwar iyali ta (MNH Call Centre)?"</i> (1)yes (2)no	<input type="checkbox"/>
2.12	<b>If yes:</b> Did that training include use of the emergency transport scheme (1)yes (2)no <b>If yes:</b> <i>Ko koyaswar ta kunshi yadda za'a yi amfani da shirin direban taimakon gaggawa</i> (1)yes (2)no	<input type="checkbox"/>
2.13	<b>If yes:</b> Did that training include learning about quality improvement? (1)yes (2)no <b>If yes:</b> <i>Ko horarwar ta kunshi koyar da dabarun kara ingancin aiki??</i> (1)yes (2)no	<input type="checkbox"/>
2.14	<b>If yes:</b> Did that training include learning about using data for decision making? (1)yes (2)no <b>If yes:</b> <i>Ko horarwar ta kunshi koyar da dabarun amfani da alkalumma domin zartar da shawara?</i> (1)yes (2)no	<input type="checkbox"/>
2.15	<b>If yes:</b> Did that training include learning about working with community groups/women's groups to improve MCH services? (1)yes (2)no <b>If yes:</b> <i>Ko horarwar ta kunshi koyar da dabarun ayyukan hadin kai da kungiyoyin sa kai na al'umma da kungiyoyin mata?</i> (1)yes (2)no	<input type="checkbox"/>
2.15a	<b>If yes:</b> Did that training include learning about resuscitation of newborns with a bag and mask? (1)yes (2)no <b>If yes:</b> <i>Ko horarwar ta kunshi koyar da dabarun yadda za'a farfado da jarirai ta amfani da famfon bada iska?</i> (1)yes (2)no	<input type="checkbox"/>
2.15b	<b>If yes:</b> Did that training include learning about administration of magnesium sulfate for the treatment of severe pre-eclampsia or eclampsia? (1)yes (2)no  <b>If yes:</b> <i>Ko horarwar ta kunshi koyar da dabarun yadda za'a bada sinadarin magnesium sulfate domin tsaida alamu ko ciwon taune-taune?</i> (1)yes (2)no	<input type="checkbox"/>
2.15c	<b>If yes:</b> Did that training include learning about management of postpartum haemorrhage? (1)yes (2)no <b>If yes:</b> <i>Ko horarwar ta kunshi koyar da dabarun yadda za'a gudanar da tsaida matsanancin zubar jini bayan haihuwa?</i> (1)yes (2)no	<input type="checkbox"/>
2.15d	<b>If yes:</b> Did that training include the active management of the third stage of labour? (1)yes (2)no <b>If yes:</b> <i>Ko horarwar ta kunshi koyar da dabarun yadda za'a duba nakuda a mataki na ukku?</i> (1)yes (2)no	<input type="checkbox"/>

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2.15e	<p><b>If yes:</b> Did that training include the monitoring of labour using partographs? (1)yes (2)no</p> <p><b>If yes:</b> Ko horarwar ta kunshi koyar da yadda za'a duba nakuda ta amfani da zane a takardar 'partographs' ? (1)yes (2)no</p>	<input type="checkbox"/>
2.15f	<p><b>If yes:</b> Did that training include screening and or testing for syphilis? (1)yes (2)no</p> <p><b>If yes:</b> Ko horarwar ta kunshi koyar da yadda za'a tantance ko gwajin cutar ciwon sanyi? (1)yes (2)no</p>	<input type="checkbox"/>
2.15g	<p><b>If yes:</b> Did that training include learning about the management of unsafe abortion? <b>If yes:</b> Ko horarwar ta kunshi koyar da yadda za'a kula da cikin da aka zubar ba tareda bin ka'ida ba? (1)yes (2)no</p>	<input type="checkbox"/>
2.15h	<p><b>If yes:</b> Did that training include learning about respectful maternal care?</p> <p><b>If yes:</b> Ko horarwar ta kunshi koyar da yadda za'a girmama mata masu neman kulawar haihuwa? [Nuna jinkai kan mata lokacin jego da haihuwa]</p> <p>Ko horarwar ta kunshi koyar da yadda za'a nuna jinkai kan mata lokacin nakuda da lokacin haihuwa?</p> <p>(1) yes (2) no</p>	<input type="checkbox"/>

[Section 3 removed July/August 2018]

**SECTION 4. Birth attendant workload in last month (1<sup>st</sup> – 31<sup>st</sup> July 2018)**

	<b>If available, refer to record books to complete the following; only count events attended by the specific BA being interviewed. If record books are not available, ask the BA:</b>	
4.1	<p>Are record books available that show the number of visits made/ clients seen by the BA?(1)yes (2)no</p> <p>Ko akwai takardun adana bayanai dake nuna yawan ziyarar Jami'an lafiya na zangon farko zuwa gidaje?</p>	<input type="checkbox"/>
4.2	<p>How many women did you provide antenatal care to in the last month? A cikin watan da ya gabata, adadin mata nawa ka/ki yiwa awon juna biyu? Write number</p>	<input type="checkbox"/>
4.4	<p>How many women did you refer to higher level of care during pregnancy? A cikin watan da ya gabata, adadin mata nawa ka/kika tura gaba domin samun karin kulawa dangane da juna biyu? Write number</p>	<input type="checkbox"/>
4.5	<p>How many times did you call the Emergency Transport Scheme for a pregnant woman in the last month? Write number A cikin watan da ya gabata, sau nawa ka/kika kira shirin sufurin gaggawa domin taimakawa mata masu juna biyu? Write number</p>	<input type="checkbox"/>
4.6	<p>How many deliveries did you attend in the last month? Write number A cikin watan da ya gabata adadin haihuwa nawa ka/ki ka karba? Write number</p>	<input type="checkbox"/>
4.8	<p>How many women did you refer to higher level of care during delivery? A cikin watan da ya gabata, adadin mata nawa ka/kika tura gaba domin samun karin kulawa wajen haihuwa? Write number</p>	<input type="checkbox"/>
4.8a	List reasons for referral	

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	[request from SFH to add this. I am not sure whether this can be pre-coded or left as free-text. Please can you consult during training?]	
4.9	How many times did you call the Emergency Transport Scheme for a woman in delivery in the last month? <i>Write number</i> <i>A cikin watan da ya gabata, sau nawa ka/kika kira shirin direban gaggawa domin taimakawa mace domin haihuwa? Write number</i>	_
4.10	How many women did you provide postpartum care to in the last month? <i>A cikin watan da ya gabata mata nawa ka/ ki ka bawa gudunmawa lokacin jego?</i>	_
4.12	How many women did you refer to higher level of care for post partum care? <i>A cikin watan da ya gabata, adadin mata nawa ka/ki ka tura gaba domin samun karin kulawa dangane da jego? Write number</i>	_
4.12a	List reasons for referral [as for 4.8a. request from SFH to add this. Please consult during training]	
4.13	How many times did you call the Emergency Transport Scheme for a woman after delivery in the last month? <i>Write number</i> <i>A cikin watan da ya gabata, sau nawa ka/ki ka kira shirin sufurin gaggawa domin taimakawa mace bayan haihuwa? Write number</i>	_
4.14	How many newborns did you provide postnatal care to in the last month? <i>A cikin watan da ya gabata jarirai nawa ka/ki ka baiwa kulawa bayan haihuwa?</i>	_
4.16	How many newborns did you refer to higher level of care for post natal care? <i>A cikin watan da ya gabata, adadin jarirai nawa ka/ki ka tura gaba domin samun karin kulawa bayan haihuwa? Write number</i>	_
4.16a	List reasons for referral [as for 4.8a. request from SFH to add this. Please consult during training]	
4.17	How many times did you call the Emergency Transport Scheme for a newborn in the first month of life in the last month? <i>Write number</i> <i>A cikin watan da ya gabata, sau nawa ka/ki ka kira shirin direban gaggawa domin taimakawa jariri dan/yar' wata daya? Write number</i>	_

**SECTION 5. Recalled activities at the last delivery:**

**Use the record books to identify the last birth attended by the BA being interviewed. If no record books are available, ask the BA to recall the LAST BIRTH she attended**

5.1a	Have you ever attended to a delivery? <i>Ko ka/kin taba karbar haihuwa?</i> <i>(1)yes (2)no- if no, go to section 6</i>	_
5.1b	On which date was the last delivery for this BA? <i>A wace rana ce ki/ka ka karbi haihuwar karshe? Enter date on PDA</i>	_ _ _
5.1c	Do you remember the delivery that took place on [date], that you attended? <i>Za ki/ka iya tuna haihuwar da ki/ka karba a ranar [date]?</i> <i>(1)yes (2)no - if no, go to section 6</i>	_
5.2	What type of delivery was it? <i>Wace irin haihuwa ce ki/ka karba?</i> <i>(1)spontaneous normal delivery (2) vacuum extraction or forceps delivery (3) other, specify</i>	_
5.3	If (3) other, specify _____ If (3) Wani abun daban _____	_
	About that delivery: <b>Interviewer – use the record book as well as questioning the worker to complete this information</b>	
5.4	What was the mother's age? <i>Menene cikakkun shekarun uwar?</i> <i>(Write in years, or write 99 if doesn't know/remember)</i>	_ _ _
5.5	Was it her first birth? <i>Wannan itace haihuwarta ta farko?</i>	_

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	(1)yes (2)no (3) don't know/remember	
5.7	Did the labour end in a live birth? <i>Ko an haifi dan/yar' da rai?</i> (1)yes (2)no	<input type="checkbox"/>
5.8	Where did the birth finally take place? <i>A wane wuri ta haihu?</i> (1)home (2)primary care facility (3)hospital (secondary care or higher)	<input type="checkbox"/>
5.9	Was the baby a girl or a boy? <i>Jaririn namiji ne ko mace?</i> (1) girl (2) boy (3) don't remember	<input type="checkbox"/>
5.10a	Did you weigh the baby using weighing scales? <i>Ko kin auna nauyin jaririn/jaririyar da sikeli?</i> (1)yes (2)no	<input type="checkbox"/>
5.10d	Was the baby low birth weight? (<2500g, or <2.5kg) <i>Ko jaririn/jaririyar bata da cikakken nauyi? (&lt;2500g, or &lt;2.5kg)</i> (1)yes (2)no (3) don't remember	<input type="checkbox"/>
5.11a	Did you use a method of estimating baby's gestational age? <i>Ko ka/kin yi amfani da wata hikima ta sanin watannin cikin?</i> (1)yes (2)no - <b>go to 5.11c</b>	<input type="checkbox"/>
5.11b	<b>If yes</b> What method did you use? <b>If yes:</b> <i>Wace irin hikima ki/ka yi amfani da ita? Select all</i> (1)neonatal assessment at birth (2)asked mother/LMP (3) physically examined mother while pregnant (4) ultrasound while pregnant (5) other	<input type="checkbox"/>
5.11c	Was the baby born prematurely (<37 weeks)? <i>Ko jaririn/jaririyar bai/ bata cika lokacin haihuwa ba?</i> (1)yes (2)no (3) don't know	<input type="checkbox"/>
5.13	Did you call the Emergency Transport Scheme for assistance during the labour? <i>Ko ka/kin tuntubi shirin direban gaggawa domin neman taimako lokacin da ki/ka ke lura da mai nakuda? (1)yes (2)no (3) don't remember</i>	<input type="checkbox"/>
5.14	Was the mother referred to a /another facility? <i>Ko kin/ka tura mai nakudar zuwa wani asibiti? (1)yes (2)no</i>	<input type="checkbox"/>
5.15	Was the newborn referred to a /another facility? <i>Ko kin/ka tura jaririn/jaririyar zuwa wani asibiti? (1)yes (2)no</i>	<input type="checkbox"/>
5.16	Was the mother alive after delivery? <i>Ko uwar ta rayu bayan haihuwar? (1)yes (2)no</i>	<input type="checkbox"/>
5.16a	Was the newborn alive after delivery? (1)yes (2)no <i>Ko jaririn/jaririyar ta/ya rayu bayan haihuwar? (1)yes (2)no</i>	<input type="checkbox"/>
5.18	Were you the main delivery attendant for this delivery? <i>Ko ke/kai ka shugabanci karɓar haihuwar? (1)yes (2)no</i>	<input type="checkbox"/>
5.18a	Who else was in the delivery room with you? <b>Select all that apply</b> (1)no-one (2)doctor (3)nurse/midwife (4)Junior CHEW (5)CHEW (6)other facility cadre (7)woman's husband (8)woman's other relative (9)woman's friend (10)other (specify)  <i>Wanene kuma ke tare daku a dakin haihuwar?</i> (1)no-one (2)doctor (3)nurse/midwife (4) Junior CHEW (5)CHEW (6)other facility cadre (7)woman's husband (8)woman's other relative (9)woman's friend (10)other (specify)	<div style="border: 1px solid black; width: 20px; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin-bottom: 2px;"></div>
5.18b	<b>If 5.18a (10) specify</b> Specify: _____ Wani abun daban:	
5.18b 1	<b>If response to 5.18a was 7,8,9 or 10:</b> Who allowed him or her to be in the delivery room?  (1)BA (2)doctor (3)nurse/midwife (4)Junior CHEW (5)CHEW (6)other facility cadre (7) no-one (8) don't know	
5.18b	<b>If response to 5.18a was 7,8,9 or 10:</b> Was it the woman that asked for them to	

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2	be in the delivery room? (1) yes (2) no (3) don't know	
5.18c	Which position was the woman in for the delivery? (1)standing (2)squatting (3)kneeling/leaning forward (4)lying down on back (5)lying down on side Wanne yanayin tsayuwa, durkuso, ko kwanciya, matar ta kasance lokacin haihuwar? 1)standing (2)squatting (3)kneeling/leaning forward (4)lying down on back (5)lying down on side	<input type="checkbox"/>
5.18d	Who made the choice about this position? (1)the birth attendant decided (2)the woman herself was given a choice (3)other  Wanene ya zaba mata wannan yanayin? (1)the birth attendant decided (2)the woman herself was given a choice (3)other	<input type="checkbox"/>
5.18d 1	If the choice of birth position was not made by the woman was it because (1) the woman was not asked for her preferred birth position (2) the BA knows which is the best birth position to deliver (3) the woman asked for a birth position that the BA does not accept	<input type="checkbox"/>
5.19	Thinking about the preparations for that delivery. Were you able to prepare the following items for use? <b>For each item, if not prepared indicate why not as follows:</b> (1)Not enough help available; (2) No supplies; (3)Not trained to do that; (4) Other  Yi tunani kan ko kin shirya wadannan kayan domin nakuda da haihuwar? <b>For each item, if not prepared indicate why not as follows:</b> (1)Not enough help available; (2) No supplies; (3)Not trained to do that; (4) Other	<input type="checkbox"/>
5.20	Sterile gloves (1) yes (2) no (3) don't know Safar hannu? (1) yes (2) no (3) don't know	<input type="checkbox"/>
5.21	If didn't prepare sterile gloves, why not? (1) (2) (3) (4) Me ye dalilin rashin tanadar safar hannu?	<input type="checkbox"/>
5.21a	Soap or sanitizing hand gel (1) yes (2) no (3) don't know	<input type="checkbox"/>
5.21b	If didn't prepare soap or sanitizing hand gel, why not? (1) (2) (3) (4)	<input type="checkbox"/>
5.22	Disinfectant (1) yes (2) no (3) don't know Sinadarin kashe kwayar cuta? (1) yes (2) no (3) don't know	<input type="checkbox"/>
5.23	If didn't prepare disinfectant, why not? (1) (2) (3) (4) Me ye dalilin rashin tanadar Sinadarin kashe kwayar cuta?	<input type="checkbox"/>
5.24	Gauze (1) yes (2) no (3) don't know Bandeji (1) yes (2) no (3) don't know	<input type="checkbox"/>
5.25	If didn't prepare gauze, why not? (1) (2) (3) (4) Me ye dalilin rashin tanadar bandeji?	<input type="checkbox"/>
5.26	Clean clothes/towel for drying the baby (1) yes (2) no (3) don't know Tsabtattun tufa/tawul domin tsane jarir/jaririya? (1) yes (2) no (3) don't know	<input type="checkbox"/>
5.27	If didn't prepare clean clothes/towel for drying, why not? (1) (2) (3) (4) Me ye dalilin rashin tanadin tsabtattun tufa/tawul domin tsane jarir/jaririya?	<input type="checkbox"/>
5.27a	Cloth to wrap the baby (1) yes (2) no (3) don't know Ko an tanadi kayan da za'a sa ma jarir/jaririya? (1) yes (2) no (3) don't know	<input type="checkbox"/>
5.27b	If didn't prepare cloth to wrap baby, why not? (1) (2) (3) (4) Idan ba'a tanadin tufar da za'a sama ma jarir/jaririya ba, menene dalili?	<input type="checkbox"/>
5.28	Sterile scissor or razor blade to cut the cord (1) yes (2) no (3) don't know Tsabtaccen almakashi ko reza domin yanke cibiya (1) yes (2) no (3) don't know	<input type="checkbox"/>
5.29	If didn't prepare sterile razor blade, why not? (1) (2) (3) (4) Idan ba'a tanadin tsabtaccen almakashi ko reza domin yanke cibiya ba, menene dalili?	<input type="checkbox"/>
5.30	Cord ligatures/clamp (1) yes (2) no (3) don't know Tsabtaccen zaren daure cibiya (1) yes (2) no (3) don't know	<input type="checkbox"/>

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5.31	If didn't prepare cord ligatures, why not? (1) (2) (3) (4) <i>Idan ba'a tanada tsabtaccen zaren daure cibiya cibiya ba, menene dalili?</i>	<input type="checkbox"/>
5.32	Oxytocine (1) yes (2) no (3) don't know <i>Allurar kare ko tsaida kwararar jinni ta Ozitosin (1) yes (2) no (3) don't know</i>	<input type="checkbox"/>
5.33	If didn't prepare oxytocine, why not? (1) (2) (3) (4) <i>Idan ba'a tanada allurar ozitosin domin kare ko tsaida kwararar jini ba, menene dalilin?</i>	<input type="checkbox"/>
5.35a	Misoprostol (1) yes (2) no (3) don't know <i>Kwayar kare ko tsaida kwararar jinni ta Miso (1) yes (2) no (3) don't know</i>	<input type="checkbox"/>
5.35b	If didn't prepare misoprostol, why not? (1) (2) (3) (4) <i>Idan ba'a tanada kwayar Miso domin kare ko tsaida kwararar jini ba, menene dalilin?</i>	<input type="checkbox"/>
5.35e	Chlorhexidine for the newborn cord(1) yes (2) no (3) don't know <i>Sinadarin kashe kwayar cuta na kulohezidin (1) yes (2) no (3) don't know</i>	<input type="checkbox"/>
5.35f	If didn't prepare chlorhexidine, why not? (1) (2) (3) (4)	<input type="checkbox"/>
5.36	Eye ointment (1) yes (2) no (3) don't know <i>Maganin ciwon ido mai kwantsa? (1) yes (2) no (3) don't know</i>	<input type="checkbox"/>
5.37	If didn't prepare eye ointment, why not? (1) (2) (3) (4) <i>Idan ba'a tanadi maganin ciwon ido mai kwantsa ba, menene dalili?</i>	<input type="checkbox"/>
5.37a	Sanitary towel for the mother (1) yes (2) no (3) don't know	<input type="checkbox"/>
5.37b	If didn't prepare sanitary towel, why not? (1) (2) (3) (4)	<input type="checkbox"/>
5.38	Did you monitor progress of labour? (1)yes - <b>go to 5.40</b> (2)no <i>Ko ka/ki kin lura da yadda nakudar ke gudana?</i> (1)yes - <b>go to 5.40</b> (2)no	<input type="checkbox"/>
5.39	<b>If no:</b> Why not? (1) (2) (3) (4) <b>Now go to 5.44</b> <b>If no:</b> <i>Idan ba ka/ki lura da yadda nakudar ke gudana ba, menene dalili?</i>	<input type="checkbox"/>
	<b>If yes:</b> Where did you register these observations? <b>If yes:</b> <i>Ko a ina ki/ka ke rubuta wadannan abubuwan da ki/ka ke lura da su?</i> <b>Do not prompt, select all mentioned</b>	(1)yes (2)no
5.40	On a partograph	<input type="checkbox"/>
5.41	On the partograph in the prenatal card	<input type="checkbox"/>
5.42	In the woman's clinical record :	<input type="checkbox"/>
5.43	No-where:	<input type="checkbox"/>
5.44	Did the woman receive ergometrine/syntometrine/oxytocin/misoprostol within 1-2 minutes of delivery? (1)yes (2)no <b>go to 5.45</b> <i>A cikin minti daya zuwa biyu bayan haihuwa, ko kin/ka baiwa matar maganin tsaida yankewar jini?</i>	<input type="checkbox"/>
5.44a	<b>If yes:</b> Which one?(1) Ergometrine (2) Syntometrine (3) Oxytocin (4) Misoprostol <b>If yes:</b> <i>Wanne daga cikin maganin?</i> (1) Ergometrine (2) Syntometrine (3) Oxytocin (4) Misoprostol	<input type="checkbox"/>
5.45	Did you practise controlled cord traction? (1)yes(2)no <i>Ko kin/ka taimaka wajen ciro uwar mahaifa (placenta) jim kaɗan bayan haihuwar? (1)yes(2)no</i>	<input type="checkbox"/>
5.46	Did you practise uterine massage? (1)yes (2)no <i>Ko kin/ka taimaka wajen shashshafa mahaifar jim kaɗan bayan haihuwar? (1)yes (2)no</i>	<input type="checkbox"/>
5.47	Was there a need for emergency intervention during the delivery? ( <b>PROBE:</b> manual removal of placenta, or administration of magnesium sulphate, parenteral oxytocics or antibiotics), (1)yes (2)no  <i>Ko akwai bukatar taimakon gaggawa da ta taso lokacin da ki ka karɓi haihuwar? (<b>PROBE:</b> manual removal of placenta, or administration of magnesium sulphate, parenteral oxytocics or antibiotics), (1)yes (2)no</i>	<input type="checkbox"/>
5.48	Did you perform manual removal of the placenta? (1) yes(2) no <i>Ko kin/ka taimaka wajen sa hannu domin cire uwar mahaifar (placenta)? (1) yes(2) no</i>	<input type="checkbox"/>
5.49	Did you administer parenteral antibiotics? (1) yes(2) no <i>Ko ka/kin ba ta allurar maganin kwayar cuta? (1) yes (2) no</i>	<input type="checkbox"/>



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5.50	Did you administer oxytocin parenterally? (1) yes (2) no Ko ka/kin bata allurar maganin kare/tsaida yankewar jini (ozitosin)?	<input type="checkbox"/>
5.51	Did you administer magnesium sulfate? (1) yes (2) no Ko ka/kin bata allurar maganin taune-taune na magnisium sulfate?(1) yes (2) no	<input type="checkbox"/>
5.52	Was there another birth attendant available to assist you when you delivered the baby? (1) yes (2) no Ko akwai wani jami'in karbar haihuwa da ya taimaka ma ki/ka lokacin da ki/ka ka karbi haihuwar? (1) yes (2) no	<input type="checkbox"/>
5.52a	Where was the newborn placed immediately after delivery?  A ina aka kwantar da jaririn da zaran haihuwar sa?  <b>Select one</b> (1)on the mother's body (2)given to other person in the room to hold (3)on the bed beside mother (4)on a newborn table (5)floor (6)other place (specify)	<input type="checkbox"/>
5.52b	<b>If 5.52a (6)other place</b> Specify: _____	
5.52c	Did you place the newborn skin to skin on the mother's chest/stomach before they were moved from the delivery place?  Ko an kwantarda jaririn akan kirji/cikin maihaifiyar sa, fatarsa na taba fatar mahaifiyarsa? (1)yes (2)no	<input type="checkbox"/>
	What immediate care did you give the newborn? <b>Do not prompt, select all mentioned</b> Wacce irin kulawa ta gaggawa kika baiwa jaririn/jaririyar da farko? <b>Do not prompt, select all mentioned</b>	(1)yes (2)no
5.53	Clean the baby's mouth before the shoulder comes out : Tsabtace bakin jaririn/jaririyar kafin fitowar kafada	<input type="checkbox"/>
5.54	Clean the baby's mouth, face and nose Tsabtace bakin jaririn/jaririyar, fuska da hanci	<input type="checkbox"/>
5.55	Ensure the baby is breathing Tabbatar da jaririn/jaririyar na numfashi	<input type="checkbox"/>
5.56	Ensure the baby is dry immediately: Tabbatar da jaririn/jaririyar ya/ta tsane	<input type="checkbox"/>
5.57	Observe for colour: Lura da launin jiki ko idon jaririn/jaririyar	<input type="checkbox"/>
5.58	Ensure the baby is kept warm (skin to skin) Tabbatar da cewa jaririn/jaririyar na cikin wuri mai dumi ( jiki da jiki)	<input type="checkbox"/>
5.59	Administer prophylaxis for the eyes Ko ka/kin bada maganin rigakafin ciwon ido (prophylaxis)?	<input type="checkbox"/>
5.60	Weigh the baby Auna nauyin jaririn/jaririyar	<input type="checkbox"/>
5.61	Care for the umbilical cord Kula da cibiyar jaririn/jaririyar	<input type="checkbox"/>
5.61a	Apply chlorhexidine to the cord	<input type="checkbox"/>
5.62	Initiate breastfeeding within the first 30 minutes after birth Fara shayar da nonon uwa cikin minti 30 na farko bayan haihuwa	<input type="checkbox"/>
5.63	Evaluate/examine the newborn within the first hour Binciken lafiyar jaririn/jaririyar cikin awa daya bayan haihuwa	<input type="checkbox"/>
5.64	None of the above Babu ko daya daga cikin wadannan da aka ambata a sama	<input type="checkbox"/>
5.65	Was there a need to resuscitate the baby? (1)yes (2)no( <b>go to 5.73</b> ) Ko an samu bukatar farfado da jaririn/jaririyar? (1)yes (2)no( <b>go to 5.73</b> )	<input type="checkbox"/>
	<b>If yes:</b> What action did you take? <i>Do not prompt, select all mentioned</i> <b>If yes:</b> Wane mataki ki/ka ka dauka? <i>Do not prompt, select all mentioned</i>	1)yes (2)no

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5.67	Opening the airways: <i>Bude hanyoyin shakar iska</i>	<input type="checkbox"/>
5.68	Cleaning the mouth/use suction devise: <i>Zuke majina daga bakin jaririn da wata na'ura</i>	<input type="checkbox"/>
5.69	Stimulating (e.g.rubbing/drying/wrapping) the baby <i>Farkarwa/tsane jiki/kudendune jaririn/jaririyar</i>	<input type="checkbox"/>
5.70	Use the ambu bag (bag and mask) <i>Amfani da famfon bada iska</i>	<input type="checkbox"/>
5.71	Heart massage Matsar zuciya	<input type="checkbox"/>
5.72	None of the above <i>Babu ko daya daga cikin wadannan da aka ambata a sama</i>	<input type="checkbox"/>
	How was the cord treated? <b>Do not prompt, select all mentioned</b> <i>Wace irin kula aka baiwa cibiyar jaririn? Do not prompt, select all mentioned</i>	(1)yes (2)no
5.73	Apply water <i>Zuba ruwa</i>	<input type="checkbox"/>
5.74	Apply alcohol <i>Saka sinadarin sifirit</i>	<input type="checkbox"/>
5.75	Apply other antiseptic <i>Saka wasu sinadarai masu kashe kwayoyin cuta</i>	<input type="checkbox"/>
5.76	Apply nothing <i>Ba'a sa komai ba</i>	<input type="checkbox"/>
5.77	Wrapped with a dry dressing <i>Lullubeta da busasshiyar sutura</i>	<input type="checkbox"/>
5.78	Other <i>Wani abun daban</i>	<input type="checkbox"/>
5.79	Apply chlorhexidine <i>Saka chlorhexidine</i>	<input type="checkbox"/>
5.80	Was the baby put on Kangaroo Mother Care?  <i>Ko jarrin/jaririyar an sa shi/ta a tsarin tabbatar da dumamuwan jiki, da shan non uwa kawai har na tsawon wata shida?</i>  (1)yes (2)no	<input type="checkbox"/>

**SECTION 6: KNOWLEDGE**

[large number of questions removed July/Aug 2018]

6.40f	<p><b>READ ALOUD</b></p> <p>Now I would like to present you with a scenario you might encounter. A woman is brought to the emergency department of a health facility by her husband after she complained of a severe headache and blurred vision. She is 20 years old, this is her first pregnancy, and she is 37 weeks gestation. She had 2 ANC visits and no problems. She has no upper abdominal pain or decreased urine output, and fetal movement is normal. Her BP is 160/120. Her examination is normal. She has contractions 2 in 10 minutes, lasting 20 seconds by palpation. Her urine has 3+protein.</p> <p>Given this information, what is your working diagnosis?</p> <p><b>Do not prompt, select one answer</b></p>	<input type="checkbox"/>
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	<p>(1) Kidney infection (2) severe pre-eclampsia (3) eclampsia (4) malaria (5) in labour (6) don't know</p> <p>Yanzu ina son in gabatar ma ka/ki da wani yanayin da zai iya faruwa da kai/ke. Wata mata ce mijin ta ya kawo a sashen kula da lafiya na gaggawa bayan ta shaida masa cewa tana jin matsanancin ciwon kai kuma bata gani sosai. Shekurun ta 20 daidai, kuma wannan cikin farko ne kimanin sati 37. Taje awon ciki sau biyu kuma ba wata matsala, bata da matsalar ciwon mara ko raguwar fitar fitsari, sannan motsin ciki ba matsala. Lambar BP ta 160/120. Da aka auna ta ba wata matsala. Nakuda na taso mata sau 2 cikin minti 10 ko wacce tsawon dakika 20. Awon fitsarin ta ya nuna sanadarin 'protein' ukku. Idan aka gabatar ma ka/ki wannan bayanana, menene ya dace da ka/ki yi?</p>	
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**SECTION 7: Neonatalie Demonstration for resuscitation**

<p><b>Interviewer instruction:</b> Prepare and set up a simulation area with the following equipment:</p> <ul style="list-style-type: none"> <li>NeoNatalie doll (preferably filled with water)</li> <li>Table or other suitable flat surface</li> <li>2*cloth or baby blanket to wrap model</li> <li>2*cord ties (string)</li> <li>Suction apparatus</li> <li>Self-inflating bag (newborn)</li> <li>Infant face masks size 0 and size 1</li> <li>Stethoscope</li> <li>Time (watch or clock or phone)</li> </ul>
<p><b>Interviewer instruction:</b> For some providers this will be their first exposure to the NeoNatalie doll. Before conducting the simulation, briefly demonstrate how the doll works (show that it responds to provider actions) and allow the provider to touch and try it out. <u>Do not</u> give any instruction on how to perform the resuscitation. If the provider has not seen the 'penguin' suction device before, let them try that also.</p>
<p><b>Interviewer read aloud:</b> “The purpose of this activity is to provide a simulated experience for service providers to demonstrate management of an asphyxiated newborn. During the simulation, you should do and say everything the same as you would during an actual resuscitation. Pretend that I am the newborn’s mother. I am Fatima. Fatima has given birth to a 2,800g baby boy after a prolonged second stage of labour. This was her second pregnancy. Her first baby is alive. At birth, the newborn is blue and limp and does not breathe”.</p> <p><b>Interviewer read aloud:</b> Dalilin yin wannan shine domin a nuna maka/maki yadda ya kamata masu bada kiwon lafiya zasu yi a zahirance akan jariri ko jaririya da ya/ta kasa numfashi da zaran haihuwa. Lokacin yin wannan nunin, ya dace da ka/ki yi abubuwan da ya kamata ki/ka yi lokacin farfado da jariri/jaririya bayan haihuwa. Ka/ki dauka cewa nice uwar jariri/jaririya kuma suna na Fatima. Na haifi yaro mai nauyin 2,800g bayan doguwar nakuda., wannan itace haihuwata ta biyu. Haihuwar farko yana raye. A lokacin haihuwar jaririn yana da kalar ruwan bula, baya motsa gabban sa, kuma sannan baya numfashi.</p>
<p><b>Interviewer instruction:</b> When you are ready, tell the service provider that you are starting the simulation.</p> <p>Using a 24 hour clock, record the time the simulation starts in format hh/mm [__ __/ __ __]</p>

**Thank the respondent for taking the time to take part in the survey.**