

TABS (Tracking Antibiotics in Society)
An LSHTM and Liver Foundation research initiative
In-depth-interview guide for informal providers/May 2017

General Instruction for Interviewers

Before the interview, please ensure the following

1. *You should have read this provider's survey form before going for the in-depth interview so that you are knowledgeable about his background information and whether he is a high/medium or low user of ABs. **Take a photocopy of the survey form.***
2. *The recording device is working and is set up properly*
3. *You have enough pages in your notebook to note the conversation, in case the provider does not consent to being recorded.*

At Beginning of Interview

4. *But explain all the required information about the research and the confidentiality issues before starting with the questions.*

During The Interview

5. *Please take one or two pictures of the clinic if the provider consents*
6. *Please use **the observation sheet guide** to write a brief description of each clinic and any patients who may visit, while you are there. This will be very useful for us to develop case studies later*
7. *Make sure you have read the topic guide several times before and are familiar with all the topics before each interview. Try not to refer to the guide during the interview, but at the end make sure you have covered all the topics.*
8. *Ask the questions in a logical manner, and not necessarily in the same order as the topic guide. If the provider has already fully answered a particular question spontaneously do not ask the same question again just because it is the next question in the topic guide.*
9. *Do not ask very sensitive questions in the beginning as this will make the provider suspicious. For example, do not ask too many questions about his training and certificates at the beginning. Questions about charges can also come later as asking them too early in the interview might make the provider nervous*
10. *Remain attentive and listen carefully to each answer. Do not interrupt when the provider is speaking unless the discussion is going into a totally irrelevant area.*

11. *Before asking any question, think about how you are wording the question. Please do not ask leading questions. Keep them open ended and do not give the answer in your question. For example, instead of asking ‘Do you get your ABs from MRs or from whole sellers’?, ask ‘Where do you generally get your antibiotics?’*

At the end of the interview

12. *You have a consent form and get the provider’s signature at the end of the interview.*

Do not ask questions in the same way as in the survey. Do not ask about names of formal doctors but just generally about background and locations of formal doctors and their relationships.

TOPICS, QUESTIONS AND PROBES FOR THE IN-DEPTH INTERVIEW

Easy starting questions

- What kind of illnesses do you see here? Tell us about the common ones as well as the not so common ones.

(Interviewer can use this question to lead to questions about AB use, economics of AB use and AB knowledge etc until you complete all the topics in the topic guide.)

- *(If you see a **product related to ABs in the clinic**, like a calendar from a pharma company or a leaflet, or a book on drugs lying on the table, ask a question about that, and then use that cue to lead into questions about AB knowledge, then about AB use etc until you have covered all the topics in the topic guide.)*

Example of a question: How did you get this leaflet or calendar? Can you tell us more about this source (company or MR etc) and your interactions with them? *(Then probe the frequency of visits, what happens in those visits, what new knowledge they learn, and then move on to the other questions about AB knowledge and use...)*

- *(If there is a **patient in the clinic**, after the provider completes the treatment, you can start by asking questions about that patient’s complaint, what medicines were given and why, were any antibiotic given and their dosages, and also ask about the charges later on in the interview once you have established some rapport, not right away)*

Examples of questions:

What is this patient suffering from?

What is your diagnosis and how did you diagnose the illness?

What medicines have you given him/her? Any antibiotics? Why or why not?

Are there any other antibiotics you could have given this patient? Tell us about those. Why did you not give those?

(Then move to the other questions about AB use, like asking about the other conditions in which he gives ABs...and keep a logical flow of questions until you have covered all the topics.)

1. USE OF ANTIBIOTICS

1. We would like to know more about your AB use. Can you tell us about when and how you use antibiotics?

Probe for:

1.1 Diagnosis

- Can you tell us how you decide. which AB is given for which symptom? Are there any situations when you might give different ABs to patients with the same symptoms? Why? Please give an example.
- How do you decide when to give an AB?
- How do you make your diagnosis?
- Are any patients sent for diagnostic tests? Which patients? How often and where? Do you have any testing facility in your clinic?
- Are there any centres where you regularly send your patients? How did you get to know about these and why do you send your patients here?

1.2 Types of ABs used

- Since when have you been using ABs in your treatment? Which were the first common ones you used? Which ones do you use commonly now?
- Brand names vs generics. What do you understand by brand and by 'generic'? What do you think about their quality? Where do you/patients obtain both types?
- Which ABs are the most frequently used, rarely used, most expensive, most effective, latest, cheapest, oldest and most recent, which is less effective now? Which one has been used for the longest dose (e.g. one month) by you? Why? Give an example.
- How do you decide whether to give an oral or an injectable AB? How often do you give an injectable and under what conditions?

-Alternative to ABs: What alternative actions/drugs do you consider to be effective in cases when you believe antibiotics are not needed?

1.3 Dosage given

- What dosage do you give for different ABs? Ask with examples if they have already mentioned the names of some ABs.
- How many doses do you give at one time? How do you decide how much to give at one time? Can you give any recent examples? What happens to the rest of the dose?

- Do you ever need to change the dose? How do you change this dose (probe further for..increase the course/increase the strength/ change the AB altogether/ change the brand/ combine two different ABs etc). Why – please can you tell us with some examples?

1.4 Explanations/counselling given to patients, and follow up

- Are the patients given any explanations about taking the ABs? What are they explained (probe for counselling for completing the full dose and the harm due to not taking the full dose, information about side effects, and coming back for a follow up)
- Are the patients asked to come for a follow up? When and why? Can you give some examples?

1.5 Procuring ABs and referring patients to pharmacies (for prescribed ABs)

- Where do you purchase your ABs? Why do you purchase from this source? (*If he says this source is cheaper, ask for an example of the price as bought from this source compared to another source, or if says he gets more discounts, ask for more details*)
 - How often do you buy your stock? How much stock is bought in each purchase, how much do you use in a week?
 - Which ABs are used the most, which ones the least? Why?
 - Where do your patients generally go to buy the prescribed ABs? Why do they buy from these places ? What relationship do you have with these shops? Do they ever have any difficulty buying any AB you have prescribed? Can you tell us with an example?
 - Can you tell us about the availability of ABs in grocery shops in your area?
 - Do you face any problems when you go to purchase antibiotics? Please tell us about these problems. Are these applicable to all antibiotics or only to a few? Are there any antibiotics that you cannot purchase easily at all? What would you do if you needed one of these restricted antibiotics urgently for a patient?
- Have you perceived any changes happening in the last couple of years, with respect to the antibiotics in the market and their sales? What changes are you aware of? Probe for new types of antibiotics, wider range of antibiotics, more expensive ones, some are restricted ones.

1.6. Patient related issues in treatment compliance

- What percentage of your patients would receive/purchase the full course of ABs from you?
- What percentage of your patients who do not buy the full dose from you, go and purchase from the pharmacy and complete the full dose?
- What percentage of patients come back for a follow up and why? What kind of problems do they have in taking ABs?
- What in your view are the various factors that influence whether patients take the full dose or not?
- Do patients ever ask for any specific medicines, or specific antibiotics?
- What are your experiences of patients' understanding and preferences of antibiotics? What understanding of antibiotics are portrayed in the media and advertising?

-What do the public need to know about antibiotics?

2. KNOWLEDGE OF ABs AND OF ANTIBIOTIC RESISTANCE

2.1. Can you tell us all that you know about ABs?

Probe for:

-How many different types of antibiotics do you know about? (Probe for names and brands) What do you know about each of these? Do you know which classes/generations they belong to? What is the difference between different types of antibiotics, for example, between azithromycin and cefixime?

- Which are the oldest ones and which ones have you come to know of recently?

- How do ABs act to cure an illness?

- What are the major advantages of using ABs?

- What are dosages for the ABs that you use with your patients? Give examples (to capture the factors that influence the dosage)

-What are some of the side -effects of using ABs?

- Are there any long-term effects of using ABs? What are these?

-What circumstances bring uncertainty or tension or doubt around antibiotic use and how do they resolve this? What do they think would help them in resolving these uncertainties?

2.2. What has been your experience with using antibiotics? Have you observed any changes with using any particular ABs? Can you give us examples of these changes? Why do you think this is happening?

2.3. Have you heard the term 'antibiotic resistance'? Please tell us all what you understand by the term.

Probe for:

-What happens in antibiotic resistance? To the human body? To antibiotics? To bacteria and viruses?

- Why does AB resistance happen? (Probe for all the possible factors including excessive use of ABs, use of strong third generation ABs and steroids, not completing full dose, not taking it at the right time, not taking it with or without food etc)

2.4. In your view, how sufficient is your knowledge of ABs ? What more would you like to know, and how can this be done?

3. SOURCES OF KNOWLEDGE/ UPDATES AND DISCUSSIONS ABOUT ABs AND AB RESISTANCE.

3.1. Can you tell us about all your sources of knowledge regarding ABs?

Probe for:

- **First source of knowledge about ABs:**
 - Training/educational programmes, formal doctors with whom you were attached/MR etc?
 - What did you learn about ABs from these sources?
 - How did you learn? (Probe for classroom teaching, observation, discussions etc)

- **Do you keep updating yourself about ABs? How?**

Interactions with MRs, whole sellers and chemists through

-workshops and CMEs (continuing medical education). Explore about these lectures: – who gives the lectures and what do they lecture on? Can you tell us about the most recent one you attended and who was the main resource person, and what was the lecture topic? Can you name two things you learned from this lecture?

-Pamphlets and leaflets, calendars

- frequent visits: How frequent are these visits? What happens when they visit or when you visit a whole sale shop or a chemist? What do you learn? Do you receive anything else from them apart from knowledge?

Interactions with formal providers

-How do formal providers help you to increase your knowledge?(*Probe for whether he calls them for advice, or on a regular basis or for referrals*)

-What is the background of these providers (their specialisation if any, whether govt or private)? Where are they located (Kolkata or nearby block or within the same block)? How did you get to know them?

-Any other ways in which you learn from formal providers (*probe for learning from prescriptions of formal providers*)

-*Probe if he receives any commissions from these providers in return for referrals etc.*

-What is your relationship with other formal providers in the area, those you don't know so well, including the government doctors? Do you discuss ABs with them? Please give us more details.

Other informal providers

What interactions do you have with other informal providers in the area? How often do you meet? Are there any that you are close to? Can you tell us what you discuss? Do you ever have any discussions about ABs? Do they influence your treatment in any way?

Any other training programs (besides the ones organised by pharma companies)

-Who organises these? What is taught in these about ABs?

Drug related literature

- What are these? Where do you get these? How often? What do you learn from these?

Self experimentation

- How do you decide whether an antibiotic is working or not? Do you try out different combinations or new types on your own? Please tell us about this in detail.

From patients

- Do patients ever ask you to give them a certain antibiotic? Can you give us an example?

From the Internet

- How did you learn to use the internet? How often do you access?
- Which sites do you use to learn about ABs? Can you show us how you use the internet? (*You could ask him to give a demo if he has access to internet*)

4. ECONOMICS

4.1. Please tell us how you charge for your treatment, and the role of ABs in your charges.

Probe for:

-What are all the costs that are included in your charges? (*Probe for cost of medicines, consultation, profits margins etc*)

-How do you cost the ABs that you give your patients? For example if there is a patient with diarrhea and fever, what are all the medicines that you will give him and what will be the patient have to pay you?

-How do ABs affect your charges? (*Probe whether adding an AB to the other medicines increases the charge and by how much. Ask for an example*)

-what is the profit margin, both in terms of % (e.g. 20% or 30%) as well as in terms of the total amount of money (e.g. 5 rupees or 10 rupees) for ABs as compared to other drugs? Can you give us an example by thinking of the medicines that you would give a patient with diarrhea and fever.

-Which is the most profitable drug/medicine from among all the medicines that you use?

-How does the pricing of different ABs differ? Which are the most expensive ones that you use and the least expensive? Which of these do you use the most and why?

-How do you decide how much to charge if you are selling ABs as loose tablets?

- What is the role of ABs to your overall income? What percentage of your income comes from ABs (e.g. 30% or 50% etc)?

-what is the profitmargin on ABs vs other drugs like paracetamol or antacid or multivitamin?What is the role of injectable vs oral antibiotics? Which one is the most profitable? And these as compared to other types of drugs?

-what is the profit difference between a drug package with an antibiotic and without an antibiotic?
Can you give an example?

-If you have to limit antibiotics to fewer patients, for example if you have to limit them to only one-third the number of patients that receive ABs from you at present, how will that affect your income?

5. REGULATIONS *(I have added all these questions from the first draft of the IDI)*

5.1. Are you aware of any standard treatment guidelines around the use of antibiotics? Please tell us anything you know. How would guidelines be useful for you? What kind of guidelines are needed for village providers like you?

5.2. Are you aware of any rules and regulations regarding the sales and use of antibiotics here?

6. INTERVENTIONS

6.1. What is your main motivation to use ABs? Of all the reasons that we have discussed so far which ones would you say are the most important ones?

6.2. What will be the future impact of AB resistance on your practice? What will happen if all ABs stop working?

6.3. What questions if any, do you have in your mind about AB resistance?

6.4. In your view, do informal providers like you have any role in contributing to antibiotic resistance? Please explain.

6.5. Who do you hold most responsible for causing antibiotic resistance?

What do you think can be done in general to address this increasing antibiotic resistance?
Probe about interventions that may be used with (a) informal providers (b) patients (c) govt./health department (d) pharma companies (e) formal doctors (f) pharmacy shops/grocery shops selling drugs

6.6. Which of these strategies would be the most important in your view? How would you prioritise the various ideas that you have given us so far?

For those who treat animals also

1. Last time we met, you said that you also treat animals. Can you tell us about the diseases of the animals you usually see here? And tell us something about the animals also – what types of animals are these, what is their role in the lives of people?

2. Can you tell us about the different types of health services for animals in this area? (are there any veterinary clinics or hospitals, formal vets and informal vets? Where are these located and how do they operate?)
3. What are the main differences between treating humans and treating animals?
4. Are there any differences and similarities in the drugs that you use with humans and with animals – please tell us with respect to the drugs used, including ABs, as well as the dosage of this.
5. What is the proportion in which you treat humans and animals? Whom do you treat more often?
6. Please tell us about your veterinary practices. (how did you learn about veterinary treatment? How long did you learn? which animals do you treat? What kind of disease do you treat? Dispense or prescribe? Do you do home visit or people bring them to your clinic?)
7. Please tell us about the use of ABs for veterinary treatment in your practice. (which ABs do you use for which conditions and how do you determine the dose of ABs? For how many days do you give ABs? Are they brought for follow up? Do they complete the full course of ABs?)
8. Can you tell us about all the different scenarios for which you may need to use ABs with animals.