

VERBATIM TRANSCRIPTION: PARTICIPANT B

Quest: What are your experiences of being involved in termination of pregnancy?

Ans : ... *My experience as a TOP provider is that, eh, we don't have enough support from the management, from our colleagues and the most important one is that personnel doesn't have insight regarding termination of pregnancy. As a result clients are not well treated and others are being denied a service because of lack of information.*

Quest: What do you mean by not having support from management?

Ans : ... *Eh, management doesn't support us in the sense that institutionally we don't have ... eh, access to psychologists or even access from the, eh, access from managers supporting us re experiences that we get when doing termination.*

Quest : Ok, and what about not getting support from your colleagues? What did you actually mean?

Ans : ... *Our colleagues doesn't support us. Instead they give us names and I think because they also don't have enough information re termination of pregnancy, or even their attitude are the one that makes them not support us.*

Quest : Ok. When you said they are giving you names, what do you actually mean?

Ans : ... *Some of them are calling us serial killers, because termination of pregnancy is involving, involves killing or terminating a life of a baby.*

Quest : How do you feel about being called such names?

Ans : ... *I've got, eh, a religious background so I think if a person calls me names, names, she judges me. So since one of the ten commandments says you mustn't judge so I don't feel any bad because by mere judging me, she also is committing the very same mistake that she thinks I'm committing. She's judging me, I killing so ... to God we are all committing sins. Ok.*

Quest : Do your feelings affect the way you care for a woman undergoing termination?

Ans : ... *My feeling doesn't affect my providing a service but to some extent there are incidences where the, whereby there are teenagers undergoing termination of pregnancy. Those teenagers really affect me because I am still having a teenager, so I visualise the very teenager who came for the service as my own child. So that's where my most cases I am affected. Ok.*

Quest : How are you actually affected?

Ans : ... *I put myself in the boots of her mother, so as a mother I at times think, "hey, by the way, one of days my own teenager might be going through". This because most of the time they don't involve their parents and then keep this as a secret. Maybe one of the days my teenager can go somewhere else where the service provider undergoing the same procedure not aware that she's undergoing the procedure.*

Quest : Ok. So are you saying your actual care of these patients is not tampered with? You just have this feeling of being a mother and being fearful that your teenager might be in the same position at one stage or another?

Ans : ... *No, no, no. This feeling doesn't in fact affect my service, instead I think it even gives me more courage and support and to give more, because I put myself in the boots of the mothers so it's motherly mother would, would do that.*

Quest : What motivates you to take part in termination of pregnancy?

Ans : ... *What motivated me was I was working in the labour ward, whereby find that there are clients who are pregnant, planned pregnancies and who are even having conditions like hypertension whereby hypertension poses, eh, the pregnancies poses a threat to the mother and the pregnancy. So you find that these mothers are really, really affected because they don't want to lose this pregnancy and, due to their conditions, they are suppose to terminate pregnancies of clients who wants to terminate pregnancy, unlike when I was working in the labour ward whereby mothers who want their babies, due to circumstances are suppose to terminate their pregnancy. Ok.*

Quest : Do you experience any dilemma when taking part in the termination of pregnancy?

Ans : ... *I can say no because in most cases as a midwife you're supposed to do first trimester termination of pregnancy whereby the risk is small. So in most cases I don't have any dilemma. The baby is so small that you at time being unable to identify the body parts. So I don't have a problem.*

Quest : What disturbs you most during the termination procedure?

Ans : ... *What affects me most is when the client breaks down, because most of the time they decide to do termination of pregnancy but there's a stage where they are emotionally affected and you'll find that she hasn't decided to do the termination of pregnancy. But on the other hand she breaks up because she thinks she's guilty and the like.*

Quest : And how do you deal with that?

Ans: ... *We were given a training to comfort them. In most cases you will comfort her and try to make her think that she is not as guilty; that was reasons that forced her to do that, to terminate that pregnancy, not only that she killed the baby.*

Quest : Is it usually effective?

Ans : ... *At that time it's usually effective, but because emotionally, emotional trauma takes time, even if she can come back for re-counselling. With others it even goes beyond the 14 days to come for post-termination counselling.*

Quest : So if it goes beyond 14 days, do you make arrangements for extra counselling sessions?

Ans : ... *If it goes beyond 14 days, we usually involve the psychologist. Ok.*

Quest : How does taking part in termination of pregnancy have an effect on your relationship with your colleagues?

Ans : ... *Taking part in termination of pregnancy, with regard to my colleagues, it doesn't affect me most any because they don't have information. I think is important for us as TOP providers to inform them because they are lacking most information. I think they don't affect me most, because what they are doing is because they lack information.*

Quest : Do you take any opportunity of trying to inform them on the job perspective?

Ans : ... *We don't have a forum to inform them but on individual basis I usually give them information, because I am aware that most of them don't have information and most of them don't even have interest of coming to the service. Ok.*

Quest : If given a forum to give them information are you in a position to do that?

Ans : ... *Yes (Nodding)*

Quest : Do you receive any emotional support to help you cope with your experiences?

Ans : ... *Institutionally no, but regionally we've got a support group that we goes to on a monthly basis.*

Quest : How often do you go?

Ans : ... *Once a month there is a debriefing session at the region whereby TOP providers meet monthly and there's a psychologist that come.*

Quest : Is it a one-to-one debriefing session?

Ans : ... *No, it is a group issue whereby we share experiences with the psychologist and TOP providers.*

Quest : From your perspective, is it effective?

Ans : ... *To some extent it is, but at times you will find that you need an immediate debriefing because the, the, the emotional issue has got to do with terminations of pregnancy but unfortunately we don't have, we are not provided with, that service. So I think it will be best if institutionally there are such services because well, at the group it does, but there are cases whereby you find that you need to be debriefed there and then.*

Quest : Have you ever highlighted this issue with your psychologist?

Ans : ... *Yes ... we have ... But because they also don't support us they also don't have information regarding this, nothing has been done.*

Quest : Have you ever talked to the psychologist who does the brief debriefing at the regional level about this issue?

Ans : ... *She's aware of it and there's nothing, there is nothing much that she can do, (Pause) because she is not, eh, a psychologist from the region. It was just, eh, a co-ordinator from the region who organised that social worker, that psychologist to help them so that there's not much that she can do.*

Quest : Do you think the support that you are getting from the debriefing session, is it adequate from your perspective or do you still need more?

Ans : ... *It is adequate but, eh, the co-ordinator that organised the, this debriefing session resigned, so as of next year, as of next month, we don't know if the session is going to continue. Ok.*

Quest : If it continues, what kind of support would you like extra?

Ans : ... *From the region?*

Quest : Yes.

Ans : ... *I think the region can persuade managers institutionally to organise, eh, hmm, psychologist for us institutionally because that's where we lack support most.*

Quest : What recommendation would you make about involvement in TOP in this clinic?

Ans : ... *Recommendation one is that there should be frequent in-service , in-service managers and colleagues. Recommendation number two...eh, I think because this service is emotionally and psychologically exhausting, I think we should get an incentive because as, eh, midwives, we are not getting any extra incentive and I think this a scarce skill, that the government have introduced something like remuneration for people who are doing scarce skills. So I'd recommend that managers around here should catch it from there and try to organise an incentive for TOP providers.*

Quest : So when you said it is emotionally taxing, what are you actually implying?

Ans : ... *As a person having emotions whereby they are being disturbed by the attitude, the behaviour of clients during termination of pregnancy...*

Quest : And by physically exhausting, what did you actually mean?

Ans : ... *The procedure itself is ..is physically taxing because there, the manual (clearing throat), the manual aspiration procedure is really taxing physically because there are two options you have to use , you can use a syringe or you can use a suction. So suction that we are having are mobile suction and....mobile equipments you have to move them around, unlike syringes whereby you just, you know, use it.*

Quest : Do you feel, if you can be given incentives, that will at least release the stress that you are experiencing?

Ans : ... *I think so, even if whereby you find that after.. you've got emotional and physical – you are remunerated, at least it will keep you going. You say all, "I'll do it" because somebody recognise scarce ... service, because very few midwives are trained in termination of pregnancy.*

Quest : What recommendation would you make about the support of nurses involved in TOP?

Ans : ... *Eh, institutionally, especially midwives should have access to psychologist anytime, especially when she's emotionally affected, there and then.*

Quest : Anything else with regard to the support that you might need, besides the psychologist?

Ans : ... *I think colleagues should even support us. They mustn't call us names, they should regard us as nurses who are giving a service, because TOP is a service. Just like any other services though there are emotional factors that are involved, but it is a service and somebody should provide that service.*

Quest : How would you want you and all nurses to be supported in your clinic? You have highlighted the issue of the psychologist and your colleagues being supportive; is there anything else that you feel you left out?

Ans : ... *Regarding the support, ja, I think the support from the colleagues and the support from managers especially, because if a manager doesn't support you, how do you expect the colleagues to support you while the person most in-charge doesn't support you in whatever.*