

10 Tips for Conducting Good Quality Data through a Verbal Autopsy (VA)

1) Preparing in Advance

Conducting a successful verbal autopsy starts with being fully prepared. Before you set out to collect information from the community, make sure you are:

- *Familiar with the verbal autopsy tool* so that you are confident about the information you will collect. Think about different ways to ask questions to make them easy to understand.
- *Clear on the purpose of the verbal autopsy* so that you can explain it to the household. You should be able to describe how the VA is part of the MDSR and might help prevent future deaths.
- *In contact with local Health Extension Workers* who can help arrange your visit to the community, locate the household and provide additional information about the case (e.g. whether the baby is alive). The HEW can inform the family in advance of your visit and accompany you.
- *Carrying all necessary materials* with you, including Informed Consent forms, Annex 1 (the VA data collection tool), a pen, and background information (e.g. the name of the deceased woman, the date of her death, and how to find the household).
- *Know what language* is spoken at the household. Make sure you speak the same language or can bring someone to interpret for you!

2) Approaching a Household

Families may be nervous about your visit. You are also coming at a sad and difficult time, so you need to introduce yourself sensitively and show respect for their loss and bereavement. A sample introduction is provided at the end of this document. When you visit the household of the deceased woman, consider the following:

- *Groups of people* from the neighbourhood may gather as you arrive, because they are interested in what you are doing or want to be present during the visit. You need to manage this carefully to ensure the VA occurs in privacy.
- *Someone local* should introduce you to the household. This can be the HEW or a local respected person who is close to the family (religious leader, kebele representative, school teacher).
- *A professional but compassionate manner* will help to build trust with the family. You should give your condolences to the relatives of the deceased woman.

3) Selecting Appropriate Respondents

There may be several people in the household with information about the death of the woman. Interviews are best when conducted with just a few people at a time – too many respondents can lead to confusion or even disagreement. It is important to determine who will be the *best respondent(s)*. International experience shows:

- *The husband, mother, sister or mother-in-law* often have the most information. They may have been present during illness and care prior to the death, or participated in making key decisions.

- *Different people may have attended the woman at different times.* In this case, each person should be interviewed and this can be done one at a time or together, depending on the circumstances.
- *The best respondents may not be present,* either because they are not at home or have moved. Sometimes others will still be able to provide all the necessary information, but if not, it may be necessary to return at another time or find the respondents.

4) Building Rapport

“Building rapport” refers to creating a comfortable environment and a relationship of trust to make the verbal autopsy interview easier. Some good ways to build rapport include:

- *Expressing sympathy* to show that you understand how difficult the time after a family member’s death can be, and that you perceive each woman’s death to be a tragedy and not a statistic.
- *Reassuring household members about confidentiality.* Right from the beginning of the interview you should make very clear that no identifying information will be recorded beyond the date of the woman’s death and the location of the local Health Centre. No names of respondents will be recorded, and the information is being collected solely to help understand maternal deaths in the area and prevent similar deaths occurring in future.
- *Starting with friendly conversation.* Before the interview, it will help respondents feel at ease to have a brief casual conversation. You can ask about household members, the respondent’s occupation, or anything that seems appropriate and shows you are interested in the family.

5) Handling Multiple or Disruptive Respondents

As mentioned previously, sometimes there may be more than one person who would like to be the respondent. Some family members may try to dominate the conversation, or there may be children who interrupt. Your visit might attract attention from neighbours and others. These situations can reduce the quality of the information, either by distracting the respondent or by reducing the privacy. You can try to:

- *Suggest moving to another location* to find some privacy for the interview
- *Ask to reschedule the verbal autopsy* and return at a time that is more convenient for the respondent, and when s/he can make arrangements to be alone.
- *Politely request bystanders to leave.* You can remind local people that the family has undergone a bereavement and needs privacy to talk about difficult circumstances. If you have been accompanied by a HEW or other community leader, that person can help to occupy others who are not directly participating in the interview.
- *Interview respondents one at a time.* If it appears that different family members have different views on the circumstances leading to the woman’s death, it may be easier to interview them one at a time rather than together. In this case, make a note of what family member provided which information, and whether they were direct witnesses to the reported events or not.

6) Good Communication Skills

Effective communication will help establish rapport and gain comprehensive information. Some examples of good communication skills include:

- *Active listening.* Show that you are paying attention to what respondents say by nodding your head, and making occasional responses such as “mmm” or “I see”.
- *Maintaining eye contact* with respondents to show that you are listening and taking what they say seriously.
- *Encouraging speech.* Some respondents will be naturally quiet or brief in their responses. Ask follow-up questions when necessary such as “Can you tell me a little more about that?” or “Please explain.”
- *Not rushing.* Give the respondent time to think through the question or try to remember the details. Moving quickly from one question to another can make people nervous and miss an opportunity to get more information.

7) Remaining Non-Judgmental

The purpose of the VA is to collect information, and not to express your own opinions. Some family members may feel bad about decisions made during the woman’s illness or care. It is important not to allow any personal feelings to get in the way of the interview, by:

- *Remembering that the MDSR system requires a “no blame” approach.* Even the worst experiences can teach us something about how to prevent deaths in future. Respondents need to feel they can tell you anything without being blamed.
- *Remaining focused on data collection.* You should concentrate on covering each topic and getting accurate information for each question, without reacting to what is being described.
- *Having a friendly facial expression.* Smiling and looking interested will make the respondent feel more at ease and will also help you to remain professional.

8) Dealing with Respondents’ Emotions

People who have recently lost a family member and are grieving can become emotional, especially when they are discussing the events leading up to the death. You should be prepared to deal with the following:

- *Tearful and upset respondents.* An interview might bring up upsetting memories. Allow the person to collect their thoughts and pause the interview to give them time to cry or compose themselves. Explain that you understand how difficult the VA process can be. Ask permission to continue the interview but if the respondent is too upset, then the verbal autopsy should be stopped. See if you can find someone in the household to comfort the respondent. Attempt to reschedule a continuation of the interview at another time, or interview others instead.
- *Angry outbursts.* There may be disagreements between household members about the care of the woman. Some respondents might blame the health care system and express their anger at you. Let the person express their anger, but explain that now, it is important to learn from their negative experience.

9) Getting Good Information

Sometimes respondents do not want to answer certain questions. There can be many reasons for this, including distrust of the verbal autopsy process, not wanting to look bad if the respondent feels they did not make good decisions at the time of the death, or avoiding painful memories. You can try to overcome this by:

- *Probing.* Think of follow-up questions such as “what happened next” or “can you tell me a little more about that” to encourage answers.
- *Returning to questions later.* For some respondents, it can take a little longer to build rapport. If a respondent skips some questions you can try to ask them again at the end of the interview when the person feels more comfortable then.
- *Accepting the refusal.* As stated in the Informed Consent form, participating in a verbal autopsy is entirely voluntary. Respondents can refuse to answer questions and can stop the interview at any time. Never insist on an answer.

10) Learning from Experience

Not all verbal autopsies will go well. It is important to reflect on the process after *each VA interview* to learn from the experience and improve your skills. VA interviewing takes practice. After conducting a verbal autopsy:

- *Review Annex 1.* Look through your completed form to identify which parts of the interview produced all the required information, and which were more difficult. Think about whether there are other ways of asking the question or probing for more information that could help the next time.
- *Identify strengths and weaknesses.* Think about the whole visit to the household from start to finish – what do you feel you did well? How did you build rapport and make the respondent feel comfortable? What did not go so well and how could you change your approach in future?
- *Discuss the verbal autopsy with the Health Centre Head.* Talking about the process of the VA as well as its content with someone else can help identify some of its strengths and weaknesses and also will help others interpret the information that you collected within the context of the interview.

Sample Introduction (before administering the Informed Consent Form)

My name is [say your name]. I am a nurse/midwife in the _____ Health Centre, and an interviewer. I have been informed that a woman in your household died. I am very sorry to hear this. Please accept my sympathy. In order to improve health care in our district, we are collecting information on recent deaths of women. I would like to talk to the person in your house who took care of [say the woman’s name] during her illness before death, or who was present at the time of her death. I assure you that any information you or your family provide will be kept confidential.