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 **BASICS**

Mystery Clients: Engaging Community Members in Evaluating Private Sector Providers

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For better health worldwide

Outline

- Background on assessment of the home-based management of malaria program in Rwanda
- Mystery client methodology and role of community members
- Mystery client results from Rwanda
- Opportunities for improving services by private providers
- Added value of community member participation as mystery clients

Malaria in Rwanda

- Malaria is an important cause of morbidity and mortality in Rwanda
- Children under 5 make up 31% of consultations and 40% of hospital deaths due to malaria
- Prompt access (within 24 hours) to antimalarial treatment is essential, but in 2003, a situational analysis identified delayed treatment as a problem
- Medicine outlets in the community (private sector) are an important source of treatment

Home-Based Management of Fever (HBM)

- In 2004, the National Malaria Control Program (NMCP) adopted a HBM strategy
- 6 pilot health districts were chosen to select and train community health workers
- After 2 years of implementation, NMCP requested technical support from BASICS and RPM Plus to conduct an interim external evaluation (2006)
 - Purpose to evaluate HBM and inform scale up as well as to identify other sources of medicines and the treatments provided.
- No previous intervention in the private sector

Assessment Components (2006)

- Review of existing information
- Focus groups and interviews with caretakers, community members, health facility staff, and community health workers
- Pharmaceutical management system (health facilities and community health workers)
- Investigation of private sector providers

Private Sector Methodology

- Interviews with private medicine sellers from all types of private medicine outlets to assess knowledge of appropriate medicines and treatment protocols as well as availability of key medicines
- Mystery clients to assess actual practices of the private sector sellers and engage the community
- Sample—the 4 districts of the survey and all private outlets that could be identified

Background to Mystery Client Methodology

- “Simulated clients” or “undercover care seekers” used commercially and within health programs for over 30 years
- Used in physicians’ and medicine retailers’ studies and for family planning services
- Researcher or data collector visits a provider, requests assistance and records the response
- RPM Plus has developed, tested, and applied mystery client assessment tools for child health and malaria in several countries as part of larger assessments (PMCI and PMM)

Mystery Client Methodology in Rwanda (1)

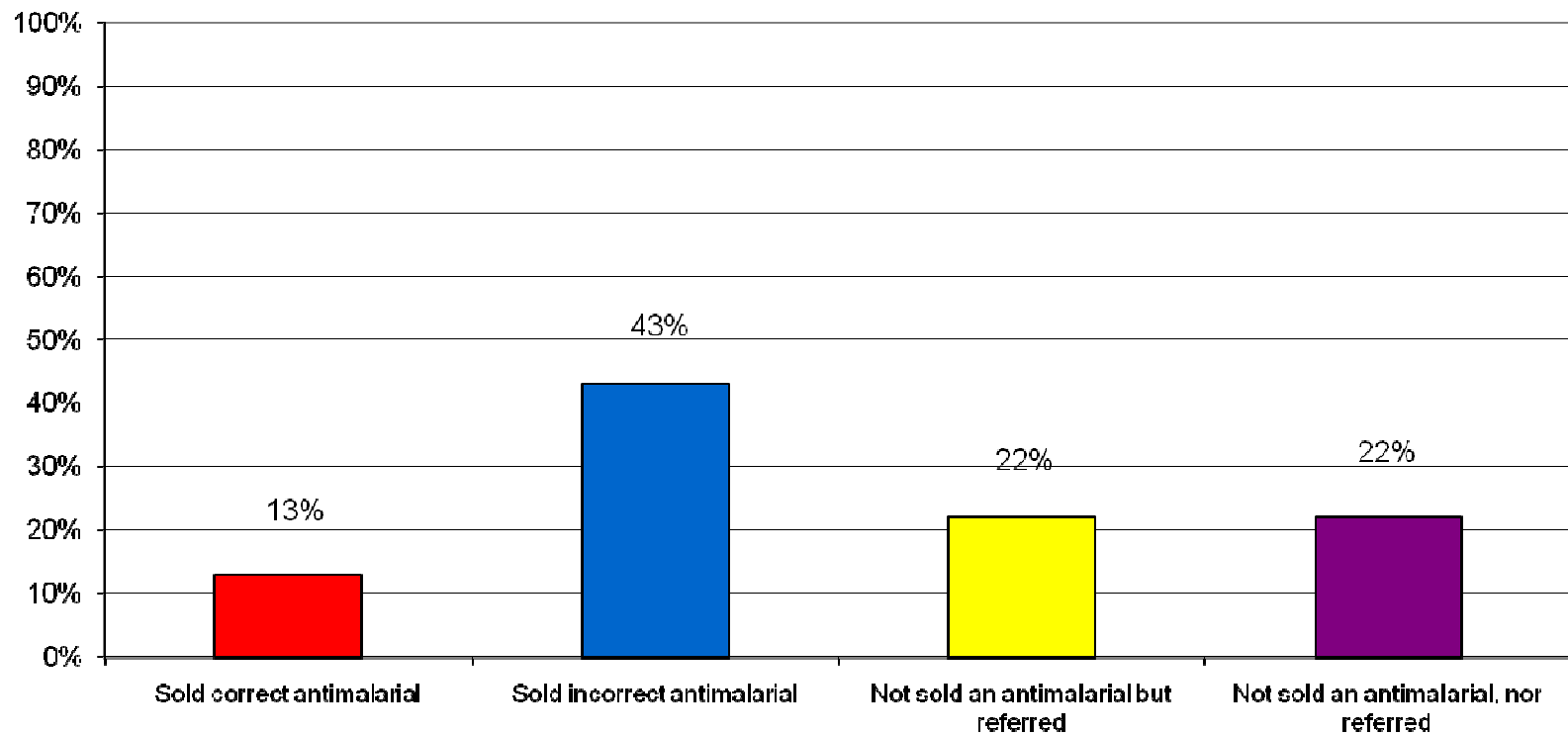
- Recruited local community members or drivers that fit the “caretaker” profile and the local setting
- Selected community members were briefed on the standard script
 - Two-year old child at home with fever for the last 2 days
- Scripted responses based on seller questions
 - No other symptoms
 - No other medication

Mystery Client Methodology in Rwanda (2)

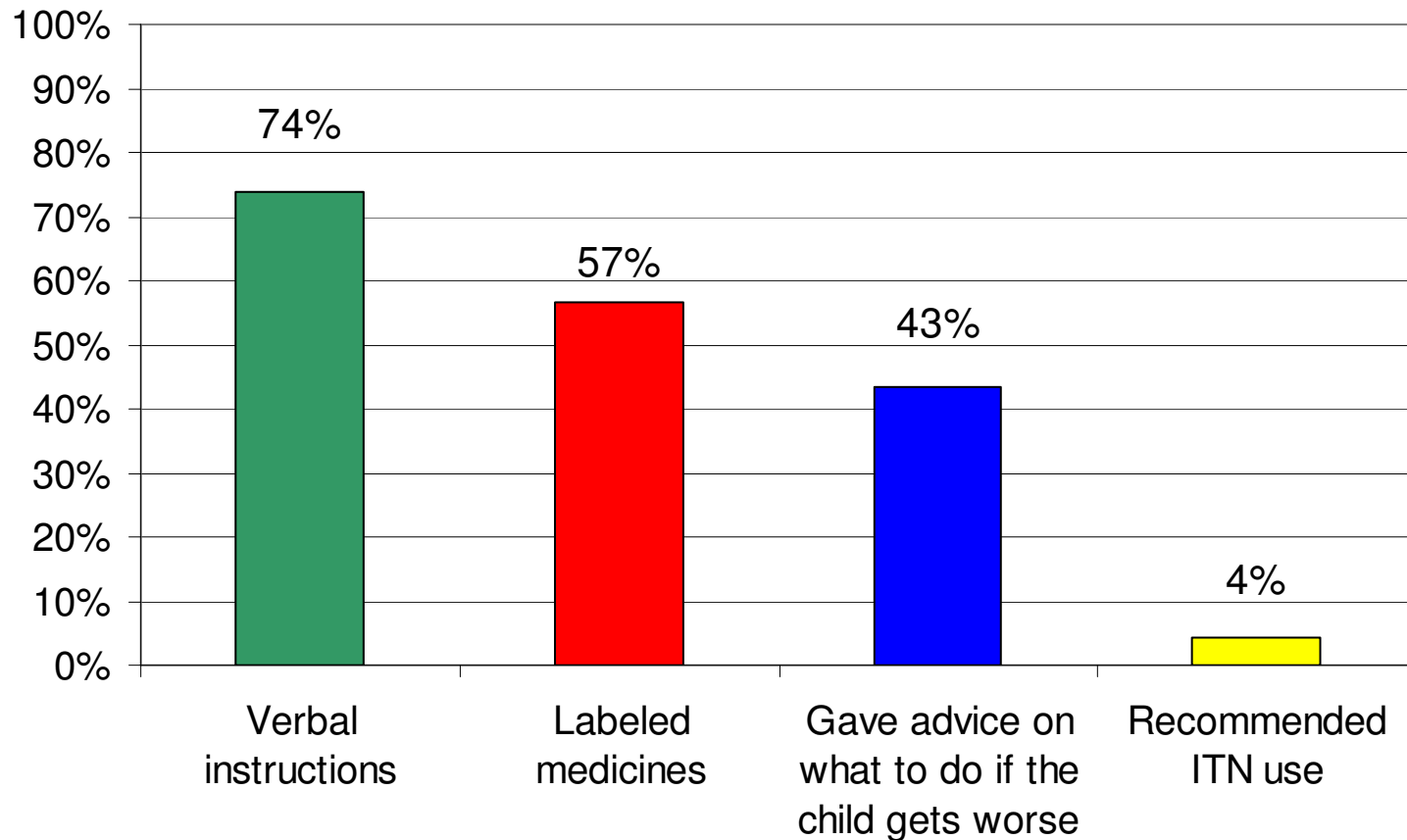
- Community members then reported back to data collectors who recorded the specifics including—
 - Questions asked by the seller
 - Instructions given by the seller
 - Actual products sold (purchased in the encounter)
 - Advice given by the seller



Mystery Client Results (N = 23)



Mystery Client Results (N = 23)



Summary of Findings

- Sellers demonstrated deficient practices in treating malaria
- Sellers gave little advice on managing or preventing the condition
- Mystery client results corroborated results from evaluator-led interviews with providers, such as—
 - From questionnaires—private sector sellers knew effective classes of medicines for treating malaria, but were often not aware of specific MoH recommendations

Opportunities for Strengthening Services of Private Providers

- ✓ Control the antimalarials available on the market
- ✓ Disseminate the MoH treatment protocols and orient the private sector providers
- Equip (train and supervise) the private sector sellers to provide quality services for rural and remote areas (e.g., accreditation)

Benefits of the Mystery Client Methodology

- Relatively simple, easy to design, implement, and analyze
- Important to accurately assess provider practices and client-provider interactions
- Reported practices of sellers can significantly differ from observed practices
- Complements and validates results from evaluator-directed knowledge assessments providing a comprehensive picture

Community Members as Mystery Clients

Added Value

- Reduces bias of data collectors
- Reduces suspicion from the sellers
- Captures and documents the actual dispensing practices of sellers
- Engages community members in the evaluation or monitoring process

Potential Limitations

- Ability to report back
- Availability of community members willing to participate

Key Points

- Used community members in the mystery client approach
- Mystery client assessment results need to be corroborated and complemented by other types of evaluation methodologies
- Received interesting and valuable results on objectively observed performance and stated knowledge that led to appropriate recommendations to address and resolve program weaknesses

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- USAID
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- Concern Worldwide
- International Rescue Committee
- World Relief
- Rwanda Ministry of Health
- Twubakane
- District and health center staff
- Community members
- Data collectors

SPS/RPM Plus Resources

- Website links to tools
 - SPS/RPM Plus website
 - <http://www1.msh.org/projects/rpmpplus/>
 - SPS/RPM Plus Child Survival Tools and Resources
 - <http://www1.msh.org/projects/rpmpplus/WhatWeDo/ChildSurvival/Tools-and-Resources.cfm>
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