



Ni Zii!

A Toolkit for Implementors

September 2020



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Overview of Intervention Package

Summary of Formative Research and Barriers Addressed

The *Ni Zii!* package is designed to address the following behavioral challenges:

- Men who engage in risky behaviors do not get tested regularly for HIV.
- Adolescents who engage in risky behaviors do not get tested regularly for HIV.
- Men want to avoid HIV but do not use condoms every time they have sex.
- Adolescents want to avoid HIV and unintended pregnancy but do not use condoms every time they have sex.
- Adolescents want to avoid unintended pregnancy but do not use modern contraceptive methods.
- Providers do not offer HIV testing, condom provision, or family planning in a private, confidential setting.
- Providers do not offer quality, youth-responsive family planning services to all adolescents.

Specifically, this design package addresses the following behavioral challenges identified through Breakthrough ACTION's formative research:

- Men do not access condoms or HIV testing at health facilities because they are concerned about privacy and confidentiality.
- Adolescents do not seek family planning, condoms, or HIV testing from health centers because they are concerned about privacy and confidentiality.

The full Problem Definition Report conducted by Breakthrough ACTION can be found in the [Appendix](#).



Health provider with client

The Intervention Package

Overview of Design Components

The *Ni Zii!* program comprises multiple components: (1) a privacy and confidentiality **refresher training** for health providers and health facility staff; (2) a **confidentiality pledge** to be signed (voluntarily) by all health providers; (3) **badges** for health providers indicating their commitment to confidentiality; (4) a **client-provider promise** (containing three promises that clients and providers make to each other) to be displayed in providers' offices and read aloud at the beginning of each consultation; and (5) large *Ni Zii!* display plaques placed on the outside of the facility. The full package of design materials can be found in the Appendix.



Confidentiality poster and Client-Provider promise

Implementation

Training

Training Overview

Health worker training: A training-of-trainers should be conducted at the provincial level. Trainers will then implement trainings in their selected districts. At least one trainer from each district should be included in the provincial-level trainings.

- The training will include an introduction to privacy and confidentiality, advice for working with key populations (including how to engage adolescents and youth), a refresher on basic counseling skills, and an overview of how to implement the Ni Zii! intervention (including how to deliver the client-provider promise).
- Refresher trainings should be conducted annually.
- Trainers/mentors will conduct monthly supportive supervision visits and provide advice to providers on maintaining privacy and confidentiality. Providers will be asked to share challenges they experienced during the intervention, and the issue of maintaining confidentiality more generally, with trainers/ mentors.

Training Presentations

- [Overview of Privacy and Confidentiality](#)
- [Overview of Ni Zii](#)

Design Package FAQs

Q: Is this intervention a change in Ministry of Health policy?

- A: No. All MOH policies around privacy and confidentiality in the health system remain the same. The Ni Zii! intervention is intended to remind health workers of these policies and encourage them to maintain privacy and confidentiality on a regular basis.

Q: How often should health workers read the client-provider promise?

- A: Health workers should read the client-provider promise to **every** client during **every** consultation unless the client is experiencing a life-threatening emergency that requires time-sensitive treatment.

Q: Should clients read the client promises aloud themselves?

- A: No. Asking clients to read in English (even if they say they are able to) may cause unnecessary stress to the client. Health workers should read the promises aloud to each client.



Ni Zii Provider badge

Implementation Plan

Health Provider Confidentiality Pledge and Badge

Health worker recruitment: All health workers involved in HIV, family planning, or maternal and child health services at selected health facilities will be recruited to participate in a confidentiality training at the district level.

Signing the confidentiality pledge: Following completion of the training, each health worker will be asked to sit with a trainer on a one-on-one basis and reflect on the importance of confidentiality and privacy in their work. The trainer will ask the provider to watch a short video and then will use guiding questions to have the provider reflect on the importance of confidentiality in one’s own work. The trainer will then ask the health worker if they would like to take a pledge to maintain their clients’ confidentiality. If the health worker agrees, they will be given a confidentiality pledge to sign.

Ni Zii badges: Once each health worker has signed the confidentiality pledge, they will receive a badge to wear that indicates they have pledged to keep their clients’ information confidential. They will also receive a sticker to place on their door indicating that the room is a private and confidential zone (and indicating that other clients need to knock before entering).

Client-provider promise: There will be a client-provider “pop-up” display on each trained health worker’s desk.

- The front-facing side of the display will contain three promises for providers to make to clients and three promises for clients to make to the provider, each of which will be read aloud by the provider. The provider will then ask the client to confirm that they agree to each of the client promises. These promises should be read aloud to **each** client at the beginning of **each** visit.
- The opposite side of the display will contain key tips for providers on maintaining client privacy and confidentiality.

Illustrative Budget

NO.	ITEM	QTY	NO. OF PEOPLE	UNIT COST	TOTAL
1	Training for CBVs	1	12	2,825.00	2,825.00
2	Printing of job aids	10,000	--	18.00	180,000.00
3	Printing of confidentiality pledges	10,000	--	8.00	80,000.00
4	Printing of badges	10,000	--	15.00	150,000.00
5	Printing of plaques	100	--	15.00	150,000.00
Total ZMK					562,825.00

Monitoring and Evaluation

Monitoring and Evaluation Plan

To monitor changes motivated by the innovations developed, tested, and implemented, implementing partners should work closely with partners, communities, and health systems to apply community-based monitoring systems to record intervention results. Health facility data should be gathered to understand how and to what extent the innovations contribute to service access and use. Implementers should also use already existing health systems to track program reach and coverage as well as to monitor outcomes at the health facility and community level. Data collectors should therefore include health facility staff (e.g., EHTs), community health workers (e.g., NHCs, Safe Motherhood Action Groups), and implementing partner staff. The following tools should be employed to capture performance data:

- **Facilitators/health facility records/activity reports:** To track the number of clients participating, seeking and obtaining health services at the health facility that is implementing the *confidentiality pledge*.
- **Product inventory/distribution sheets:** To record number of materials produced and distributed to intended audiences and beneficiaries.
- **Mini-surveys (at community/household level):** To measure behavioral changes influenced by the intervention, including clients' access to health services (e.g., family planning and HIV testing), and early care seeking behavior.
- **Client exit interviews:** To assess changes in the perception of clients' interaction with facility-based providers, as well as the attitudes of health providers and clients' overall experience at health facilities and specifically of privacy and confidentiality.

Monitoring Data Collection

The following items illustrate performance indicators that the project employed to track results/changes at the output, intermediate-outcome, and outcome levels. The full list of indicators can be accessed in the monitoring and evaluation tools section.

DATA REQUIRED	DATA SOURCE
Output Indicators	
<i>No. of participants in program-related events and activities (disaggregated by sex)</i>	<i>Health facility records. Data collection form to be developed</i>
<i>No. that participated in capacity-strengthening activities</i>	<i>Project training attendance sheet</i>
Intermediate-outcome Indicators	
<i>% of health facility clients who report that facility based providers have nondiscriminatory attitudes towards their clients</i>	<i>Mini-survey</i>
<i>% of health facility clients who report having a good interaction with their provider during their last visit</i>	<i>Mini-survey</i>
Outcome Indicators	
<i>% of women of reproductive age (or their partner) using a modern contraceptive method</i>	<i>Mini-survey</i>
<i>No. of intended audience testing positive and referred for care and treatment at the health facility (HMIS indicator)</i>	<i>HMIS/Health Facility records</i>

Appendix

Implementation Tools

- **Design Materials**
- **Training Presentations**
 - [Overview of Privacy and Confidentiality](#)
 - [Overview of Ni Zii](#)

Monitoring and Evaluation Tools

- **Mini-Survey**
- **Exit Interview Data Capture Sheet**
- **Performance Indicators**

Key Results Under Breakthrough ACTION

- **Problem Definition Report**
- **Two-Pager**
- **Mini-Survey Phase 1 Report**