



PATHFINDER INTERNATIONAL TOOL SERIES

*Monitoring and Evaluation – 3*

**USING MYSTERY CLIENTS:  
A Guide to Using Mystery Clients  
for Evaluation Input**

By  
Carolyn Boyce, MA, *Evaluation Associate*  
Palena Neale, PhD, *Senior Evaluation Associate*

May 2006

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## **What are Mystery Clients?**

Mystery clients are trained people (usually community members) who visit program facilities in the assumed role of clients, and then report (by completing a survey or through an interview) on their experience. For example, an adolescent might be sent to a health clinic looking for contraceptive services, and then be interviewed to find out about the quality of the visit.

## **When is the Use of Mystery Clients Appropriate?**

The use of mystery clients is primarily for the monitoring of site improvements, rather than as an evaluation tool. Information from the mystery client is fed back to the clinic so that the clinic can improve its service provision. It is recommended that clinics are involved in the planning of the mystery client visits, in addition to being informed of the potential visits (though they will not be informed which clients are the mystery clients), to increase the use of the findings (and thus improve service provision where necessary).

Mystery clients might be used in an effort to avoid the bias in the service delivery process that often results from having service transactions observed. They can also serve to gather a sufficient number of observations of service transactions when the actual volume of service visits is low.

It should be mentioned that some researchers believe that the use of mystery clients is problematic because the process involves misrepresentation. For example, though consent might be obtained from clinic management, service providers may not have given their consent and may find it deceitful. However, others believe that the benefits outweigh the concerns. Because mystery clients are used to assess and improve the quality of services, they serve the interests of both clients and the program by highlighting the ways that the facility can serve its target audience. Mystery clients should not undergo any type of medical exam or procedure during their visits.

## What are the Advantages and Limitations of Mystery Client Interviews?

The primary advantages of using mystery clients, as described above, are for avoiding bias in service delivery observation and increasing the number of observations of service provision for program improvement. However, there are a few limitations and pitfalls, each of which is described below.

*Recruitment can be difficult:* In smaller communities, it may be difficult to recruit mystery clients. Mystery clients are community members that should not be recognized by the facility staff, and finding community members that will not be recognized in a small community could be difficult.

*Dependent on mystery client recall:* Mystery clients are either interviewed or surveyed following their clinic visits, but depending on the length of time, it might be difficult for them to recall their experience during the service visit. Though they may take notes following the visit, these notes are dependent on their ability to recall facts and information they saw or experienced (i.e., recall bias). Sometimes mystery clients make visits in pairs to aid their recall.

*Need to ensure reliability:* Reliability refers to the extent to which an experiment, test, or any measuring procedure yields the same result on repeated trials. This means that the interview/survey results would be the same if two mystery clients went to the same clinic and experienced the same interaction. In order to ensure reliability, mystery clients should be given instruction on how to rate the facility. One way to do this is to define any criteria for the elements being assessed and discuss these in the mystery client training. An additional way to ensure reliability is by asking mystery clients to give explanations of their ratings on the survey or during the interview. For example, a mystery client may respond that staff was friendly; when asked why, she might explain that the provider smiled a lot and treated her with respect.

*Information produced can be limited:* Because mystery clients do not undergo any medical exams or procedures, they cannot collect information on provision of these services. Information collected about the service provider includes friendliness during the visit, whether the provider corrects false information that the mystery client has presented, whether the provider ensures the client's comprehension of information, etc. Note that information on provision of exams or procedures, however, could be collected through the method of exit interviews with "real" clients.

# What is the Process for Conducting Mystery Client Interviews?

The process for using mystery clients follows the same general process as is followed for other research: plan, develop instruments, train mystery clients, collect data, analyze data, and disseminate findings. More detailed steps are given below.

## ***1. Plan***

- Identify potential clinics and obtain consent, preferably written, from each. (See Appendix 1 for “Sample Clinic Consent Form.”)
- Identify potential mystery clients and obtain consent, preferably written, from each youth and their legal guardians/parents. (See Appendix 2 for “Sample Mystery Client Consent Form.”)
- Develop a schedule of facility visits and corresponding debriefing interviews.
- Ensure research will follow international and national ethical research standards, including review by ethical research committees. For more information, please see the *International Ethical Guidelines for Biomedical Research Involving Human Subjects*, available at [http://www.cioms.ch/frame\\_guidelines\\_nov\\_2002.htm](http://www.cioms.ch/frame_guidelines_nov_2002.htm). See also *Ethical Approaches to Gathering Information from Children and Adolescents in International Setting: Guidelines and Resources*, available at <http://www.popcouncil.org/pdfs/horizons/childrenethics.pdf>.

## ***2. Develop Instruments***

- Brainstorm scenarios and personality traits for mystery clients to act out. (See Appendix 3 and 4 for “Sample Mystery Client Scenarios” and “Mystery Client Discussion/Role Play Questions.”) Mystery clients and their scenarios and personality traits need to be representative of the types of clients, services being sought, and other traits that the clinics chosen typically serve. For example, if most of the clients of a particular clinic are adolescent females, your choice of mystery clients should reflect this. The same holds true for factors such as urban/rural, married/unmarried, in-school/out-of-school. In addition, if the visits to a clinic are primarily for STI information and services, then the scenarios should also reflect this.
- Develop an interview protocol for the interviewers of the mystery clients—the rules that guide the administration and implementation of the interviews. Put simply, these are the instructions that are followed for each interview, to ensure consistency

between interviews, and thus increase the reliability of the findings. The following instructions for the interviewer should be included in the protocol:

- What to say to interviewees when setting up the interview.
  - What to say to interviewees when beginning the interview.
  - What to say to interviewees in concluding the interview.
  - What to do during the interview. (Take notes? Audiotape? Both?)
  - What to do following the interview. (Fill in notes? Check audiotape for clarity? Summarize key information for each? Submit written findings?)
- Develop an interview guide that lists the questions or issues to be explored during the interviews with the mystery clients. (See Appendix 4 for “Mystery Client Interview Guide.”)

### ***3. Train Interviewers and Mystery Clients***

- Mystery clients select their scenarios.
- Mystery clients discuss and/or role play their scenarios.
- Mystery clients are briefed on potential criteria being evaluated.
- Mystery clients are given reminders for visit (see “Reminders for Mystery Clients”).

#### *Reminders for Mystery Clients*

- Be “in character” upon going to the clinic.
  - Do not tell anyone at the clinic of your assignment.
  - Do not use your real name and age if you have to register for services.
  - Do not undergo any type of exam or procedure.
  - Record amount of time spent waiting and participating in the visit.
  - Collect educational materials.
  - Meet with an interviewer immediately after the experience (when possible).
- Identify interviewers and train (see “Training Tips for Data Collectors”<sup>1</sup>). The ideal interviewer is an experienced one, but could be a trained program staff member. The interviewer should not be anyone associated with the clinic(s) being visited.
  - Where necessary, use interviewers that speak the local language.

<sup>1</sup> Adamchak, S. et.al. (2000). *A Guide To Monitoring and Evaluating Adolescent Reproductive Health Programs*. Available at [http://www.pathfind.org/site/PageServer?pagenam=Publications\\_FOCUS\\_Guides\\_and\\_Tools](http://www.pathfind.org/site/PageServer?pagenam=Publications_FOCUS_Guides_and_Tools)

### *Training Tips for Data Collectors*

Staff, youth program participants, or professional interviewers may be involved in data collection. Regardless of what experience data collectors have, training should include:

- An introduction to the evaluation objectives,
- A review of data collection techniques,
- A thorough review of the data collection items and instruments,
- Practice in the use of the instruments,
- Skill-building exercises on interviewing and interpersonal communication, and
- Discussion of ethical issues.

#### **4. *Collect Data***

- Mystery clients go to assigned clinic.
- Mystery clients conduct clinic visit, using assigned scenario.
- Mystery clients make notes immediately after the visit on waiting times, what happened during the visit, and their assessments of cleanliness, friendliness, and information given.
- Mystery clients are interviewed as soon as possible following their visit (preferably immediately after the visit to aid in their recall of events). See “Mystery Client Interview Guide” (Appendix 5) for examples of questions.

#### **5. *Analyze Data***

- Review all interview data looking for patterns or themes among the responses.

#### **6. *Disseminate Findings***

- Prepare a summary of results (see “How are the Results of Mystery Client Interviews Presented?”).
- Discuss findings and possible improvements with clinic staff.
- Prepare result report.
- Disseminate to all stakeholders, including the clinic(s) visited.

## How are the Results of Mystery Client Interviews Presented?

Mystery client interview results are flexible in that they can be presented in a number of ways—there is no specific format to follow. As with all results, however, justification and methodology of the study should be provided, as well as any supporting information (i.e., copies of instruments used in the study). Mystery client interview results may stand alone or be included in a larger evaluation report. If presented as a stand-alone report, the following report outline is suggested:

1. Introduction and Justification
2. Methodology
  - a. How was the process carried out? (Describe the process of selecting and training the mystery clients, selecting the clinic(s), and conducting the visits.)
  - b. What assumptions are there (if any)?
  - c. Are there any limitations with this method?
  - d. What instruments were used to collect data? (You may want to include some or all in the appendix.)
  - e. What sample(s) is/are being used?
  - f. Over what period of time was this data collected?
3. Results
  - a. What are the key findings?
  - b. What were the strengths and limitations of the tools?
  - c. Where and how are the results similar and dissimilar to other findings (if other studies were done)?
4. Recommendations and Conclusion
5. Appendices (including instruments)

## Where Can More Information on Mystery Client Interviews be Found?

Adamchak, S., et. al. (2000). *A Guide To Monitoring and Evaluating Adolescent Reproductive Health Programs*. Available at [http://www.pathfind.org/site/PageServer?pagename=Publications\\_FOCUS\\_Guides\\_and\\_Tools](http://www.pathfind.org/site/PageServer?pagename=Publications_FOCUS_Guides_and_Tools)

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Palmer, Lucy. (2003). *Private Sector Providers: Do they behave the way they say they do?* Bath, U.K., Futures Group. (Futures Group Briefing). Available at <http://tfgi.com/Documents/PvtSecProvidersBrief.pdf>

## Appendix 1: Sample Clinic Consent Form

I want to thank you for taking the time to meet with me today. My name is \_\_\_\_\_ and I would like to talk to you about the possibility of having mystery clients visit your clinic as a means to improve youth-friendly service provision under the African Youth Alliance (AYA) project.

Within the next month, one or more youth will visit your clinic seeking sexual and reproductive health information. The mystery clients have been trained to examine key components of service provision during their visits, including clinic layout, friendliness of staff, and quality of sexual and reproductive health counseling. Following the clinic visit, the mystery clients will be interviewed by AYA project staff to record their observations. Here is a copy of the interview form that will be used (give clinic manager a copy of the interview form). Mystery client results will be summarized and discussed in a meeting of AYA project and clinic staff. Recommendations for improvement will be decided upon jointly.

I want to emphasize that mystery clients are not being trained to find mistakes or faults with the clinic, but as a key target audience of the clinic, can observe ways in which the clinic might improve to better serve them. Also, I want to note that mystery clients have been instructed that they are not to receive any services during the clinics visit (such as tests or exams), but are limited to receiving information and counseling on sexual and reproductive health topics only. This is intended to minimize mystery client use of the clinic's limited staff time and supplies.

Are there any questions about what I have just explained?

Is your clinic willing to participate in the mystery client exercise?

\_\_\_\_\_  
Clinic Manager

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date



## Appendix 3: Sample Mystery Client Scenarios

### *Scenario 1: Young adult female feeling pressured to have intercourse*

A 16 year-old woman comes to the facility to obtain birth control. She tells the provider that she has never had intercourse before. It becomes apparent that she is not sure if she really wants to have intercourse, but she is feeling pressured by her boyfriend to do so. She believes if she does not give in he will leave her, but she does not feel ready to initiate sexual activity.

*Her parents:* very strict, she does not want them to know anything about this.

*Her partner:* a schoolmate, has been her boyfriend for one year.

*Sexual history:* none

*Contraceptive knowledge:* very limited, has only heard of the pill and has many erroneous ideas about its use and possible side effects.

The young person acting as the mystery client should fill in the blanks about

- What types of things the boyfriend says to her to have intercourse with him,
- Why she is afraid to have sexual intercourse, and
- Her motivations for coming to the clinic.

### *Scenario 2: Young adult male seeking information regarding STIs*

An 18 year-old male wants information regarding Sexually Transmitted Infections (STIs). His motivation for coming to the clinic is that he heard of a guy who got an STI from having intercourse with a commercial sex worker.

*Sexual history:* he is sexually active and has had intercourse with approximately five women.

*Contraceptive use:* has used condoms only occasionally and does not like them.

*Reproductive health knowledge:* very limited, has heard of a few diseases. The only symptom he has heard of is itching. He has heard that AIDS can kill you and thinks that AIDS only affects prostitutes.

## Appendix 4: Mystery Client Discussion/Role Play Questions

After selecting their scenarios, mystery clients should take time to discuss and role play the scenarios in preparation for their client visit. The questions provided below might be used to guide this preparation process.

- What is the person like (personality traits)?
- How does this person feel about the situation s/he finds her/himself in?
- How does this person feel about speaking to a provider about his/her situation?
- What would you do in this person's situation?
- How does this person behave?
- What kind of body language does this person have?
- Where does this person live/go to school?
- Has this person talked to anyone else about their situation?
- Why has this person not talked to their parents?
- Why has this person not talked to their partner?
- How do you think this person's parents would react if they found out?
- Why did this person decide to come to this facility?
- Has this person ever had sexual intercourse?
- Is this person currently having sexual relations with anyone?
- Has this person ever used contraception?
- Has this person ever used a condom?
- How much does this person know about AIDS, contraceptives, and STIs?

## Appendix 5: Mystery Client Interview Guide<sup>2</sup>

This interview guide could be used to collect information from the mystery client following their clinic visit. Mystery clients are either given a copy of the interview guide to make notes on or make separate notes immediately following the visit, and then are interviewed shortly after.

**Introduction:** I want to thank you for taking the time to meet with me today. My name is \_\_\_\_\_ and I would like to talk to you about your mystery client clinic visit. All responses will be kept confidential and the interview should take less than an hour.

I am taping the session because I don't want to miss any of your comments. I will be taking some notes during the session, but I can't possibly write fast enough to get it all down. Because we're on tape, please be sure to speak up so that we don't miss your comments.

Are there any questions before we begin?

QUESTIONS	RESPONSE	REMARKS
Scenario enacted: _____	A. Unwanted Pregnancy B. Information regarding contraceptives C. Information regarding STIs D. Counseling regarding premarital intercourse E. Other _____	
<b>A. LOCATION AND ENVIRONMENT</b>		
Health Facility (name and number):		
District (name and number):		
Region (name and number):		
Date of interview:	Date: ____/____/____	
Level of facility where mystery client went:	Referral hospital, Hospital, Pharmacy, Health center, Health post, Mobile health clinic, clinic in nonpermanent facility (e.g., schools, rotating rural outposts, youth centers, etc.), other _____	
Locality of facility:	Rural, Urban, Peri-Urban	
Age of mystery client:	_____ years	
Sex of mystery client:	Male, Female	
Name of interviewer:		
Time client arrived at clinic:		

<sup>2</sup> Adapted from the *Questionnaire for Debriefing Mystery Clients*, appearing in *A Guide to Monitoring and Evaluating Adolescent Reproductive Health Programs, FOCUS on Young Adults*.

QUESTIONS	RESPONSE	REMARKS
Did you find the facility easily?	Yes No	
Were there any directional signs outside the facility?	Yes No	
Were there any directional signs within the facility?	Yes No	
How did you find the welcoming?	Friendly Not friendly	
Was the outside of the facility clean?	Very clean Somewhat clean Unclean	
Was the inside of the facility clean?	Very clean Somewhat clean Unclean	
Was there a separate waiting room for adolescents?	Yes No	
Were there posters on STDs and other SRH issues in the facility?	Yes No	
Did you find any poster stating the rights of the client?	Yes No	
How many adolescents did you find waiting to see the provider at the facility?	Number _____	
How long did you have to wait before being attended to?		
How did you feel about the waiting time?	Just OK Too long	
<b>B. INSTRUCTION/EDUCATION</b>		
How many providers attended to you during the service delivery process?	Number _____	
How would you judge the attitude of each provider?	Security	a. friendly b. not friendly
	Registration	a. friendly b. not friendly
	History	a. friendly b. not friendly
	Consultation/examination	a. friendly b. not friendly
	Laboratory	a. friendly b. not friendly
	Dispensary	a. friendly b. not friendly

QUESTIONS	RESPONSE	REMARKS
Was your medical history taken?	Yes No	
Was your social record taken?	Yes No	
Was your sexual history taken?	Yes No	
Were you assured of confidentiality?	Yes No	
Were you counseled in a place where visual privacy was guaranteed?	Yes No	
Were you counseled in a place where auditory privacy was guaranteed?	Yes No	
Were you counseled on any contraceptive methods?	Yes No	
Did the provider physically examine you?	Yes No	
Were you examined in a place where visual privacy was guaranteed?	Yes No	
Did the provider give you any treatment?	Yes No	
Did he/she give you instructions on how to use the treatment?	Yes No	
Did you feel the provider had adequate time for you during consultation?	Yes No	
Did the provider talk about HIV/AIDS with you?	Yes No	
If yes, what did he/she say?		
If you reported an STI case, did the provider ask you to bring your partner for treatment?	Yes No	
Did the provider give you an opportunity to ask questions?	Yes No	
Were you given any educational materials to read?	Yes No	
Did you pay for the service you received?	Yes No	
What did you think about the cost?	Expensive Affordable Cheap	

QUESTIONS	RESPONSE	REMARKS
How much time did you spend with each provider?	Registration	
	History	
	1st Consultation	
	Laboratory	
	2nd Consultation	
	Injection	
	Dispensary	
In general, how did you find the counseling?	Satisfactory Not Satisfactory	
Did the provider ask you to return?	Yes No	
If yes, did he/she give you a specific date to return?	Yes No	
Will you recommend this facility to any of your colleague youth?	Yes No	
If no, what are your reasons?		

**Is there anything more that you would like to add?**

**Thank you for your time.**





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