

Nai Umang WhatsApp Forum

MODERATOR GUIDE

Introduction

Beyond Bias's Nai Umang project aims to reduce healthcare providers' negative biases toward young, unmarried or recently married girls in Pakistan that prevents youth clients from receiving contraception information and their method of choice. One of the main ways it will achieve this goal is through a training program delivered via the WhatsApp forum you will be moderating.

This guide should be read both by regular moderators AND guest moderators to ensure fidelity, continuity of voice, and a thorough understanding of moderator expectations.

Moderator Role

As a moderator, you will ultimately be responsible for leading each day's discussion, keeping users goal-oriented and on task, and facilitating participants' learning. More specifically, the moderator role includes:

1. Introducing the topic of discussion, guest speakers, activities, and multimedia.
2. Asking open-ended questions that encourage participation and promote reflection.
3. Reviewing lessons learned by summarizing the main points of each discussion.
4. Making sure the discussion stays on subject and keeping track of time.
5. Holding users accountable to the ground rules set at the beginning of the forum.
6. Remaining neutral in cases of conflict and using differences of opinion to drive discussion (e.g. "We seem to have a difference of opinion here. Let's talk about it together. Why do we all think differently on this topic?").
7. Managing group dynamics and ensuring dominant participants give other users the opportunity to participate.
8. Keeping the tone and messaging of the forum in line with the Nai Umang Brand, 6 Principles of Quality Care, and our overall goals (please see below for guidance).

Goal of the Forum

Keep the following goal in mind as you work to moderate the Nai Umang forum:

Providers will be motivated and better-equipped (in terms of knowledge, attitudes, and skills) to provide welcoming, non-judgmental, confidential contraceptive counseling and services to young people (ages 15-24) regardless of age, marital status, or parity.

In addition to this goal, please refer to the weekly moderator guides for specific learning objectives and attitude change objectives.

6 Principles of Quality Care for Adolescents

The following 6 Principles should guide your dialogue with participants. Please review Appendix A: Overview of Six Principles and work to reinforce these Principles whenever possible.

1. Safe, Welcoming Space
2. Sensitive Communication
3. Simple, Comprehensive Counseling
4. Seek Understanding and Agreement
5. Say Yes to a Safe Method
6. Security of Information

The Nai Umang Brand

You and your fellow moderators will be the voice of Nai Umang. For maximum efficacy, this voice should be consistent amongst all moderators. As you work with forum participants, please uphold the following guidelines.

The overall voice of Nai Umang's content reflects its brand values. It should...

- Leave each user feeling empowered and respected
- Elicit user participation through supportive language and encouragement
- Take a strengths-based, celebratory approach
- Feel approachable, professional, and reputable
- Be a positive addition to a user's day, rather than a drain on their already limited time
- Elevate each person's unique contribution to her community
- Feel like a trusted, knowledgeable colleague rather than an authority figure inspiring and cheering providers on in their day-to-day work and professional growth

Our medium also dictates our voice. WhatsApp messaging necessitates...

- A short, quippy, conversational style
- Friendly greetings and sign-offs ("Hello everyone!")
- Informal but professional language ("We'll give a run-down of the most common side effects")
- Avoiding overly technical jargon and unnecessarily complicated language

Tone: The moderator's tone will change depending, of course, on the individual moderating and on the intended audience to whom the content is tailored. For instance, if one day's content is aimed at correcting misconceptions about contraceptives, that day's tone will be more direct and assertive than if it were simply seeking to elicit questions or discussion from participants.

Content Types and How to Moderate

The weekly moderator guide will provide a more detailed look into each days' tasks and scripts. Use the following guidelines as you moderate the various content types.

- IN GENERAL:
 - Keep text messages short. They should not take up more than one screen's worth of space.
 - Let users know how much time they have to respond to questions, case studies, and calls for discussion.
 - At the end of each week, provide a summary of lessons learned. Use 6 Principles and the week's learning/attitude change objectives to guide your summary. Address any particularly notable responses/experiences of the week.

- Story shares
 - TEXT: Welcome the group
 - TEXT: Introduce the day's prompt
 - TEXT: Invite users to share with comments, stories, questions. These responses can come via text, video, or audio
 - Wait ~4 hours. Provide light moderation if needed to keep people on subject, clear up any confusion or arguments, etc.
 - TEXT: Summarize main points and notable contributions
 - TEXT: Sign off

- Meet a member
 - TEXT: Welcome the group
 - TEXT: Introduce the guest with name, professional title, organization/clinic name, and city where the guest is from
 - TEXT: Provide a brief bio
 - TEXT: Ask questions
 - AUDIO: Record video/audio responses from guest depending on guest preference (video is ideal)
 - TEXT: Thank guest for participation. Invite reflection.

- Explainer videos
 - TEXT: Welcome the group and introduce the video topic via text
 - TEXT: Introduce the video
 - VIDEO: Send out the corresponding video to the group
 - TEXT: Summarize the main point in one or two texts
 - TEXT: Ask for questions/comments
 - Wait fifteen minutes.
 - TEXT/AUDIO: Address questions or comments
 - TEXT: Sign off

- Case studies
 - TEXT: Welcome the group

- TEXT: Inform users of the day's topic
 - TEXT: Invite users to participate in the day's case study
 - AUDIO: Send out case study
 - TEXT: Send out case study possible responses
 - TEXT: Let users know how much time they have to respond (usually an hour)
 - TEXT: As users deliberate, engage them and ask why they chose their answer
 - TEXT: Thank users for participating.
 - AUDIO: Send audio response with case study answer.
 - TEXT: Summarize audio message
 - TEXT: Sign off
- Personal narratives
 - TEXT: Welcome the group
 - TEXT: Introduce the story by saying what type of person the speaker is ("experienced provider from Temeke") . Because the speakers are actors, these details may be decided by the moderator. All stories are kept anonymous.
 - AUDIO: Send the audio message to the group
 - TEXT: Ask for questions/comments
 - TEXT/AUDIO: Address questions or comments
 - TEXT: Sign off
- Real-time Q&A with senior providers
 - Regular moderator:
 - TEXT: Welcome the group
 - TEXT: Introduce the guest moderator with name, professional title, organization/clinic name, and city where the guest is from
 - TEXT: Let users know how much time the guest moderator has to answer questions that day
 - Guest moderator
 - TEXT: Give a short introduction to yourself and the topic you will be covering
 - TEXT: Invite questions
 - AUDIO: Respond concisely, between 30 seconds and 1:30
 - Frequently asked questions have been covered in the weekly moderator guides. You do not need to respond word-for-word, but it is important that answers are objective, adhere to our forum goals, and reinforce the 6 Principles of Quality Care. If users ask a question that is not covered in the guide, please keep this in mind.
 - Answer questions in the time allotted.
 - TEXT: Thank users for their questions, encourage them to reach out with further questions. Provide any resources you think may be useful.

Troubleshooting

Common issue	Suggested action
User engagement is low.	<ul style="list-style-type: none"> - Ask open-ended questions. - Avoid questions that can be answered with a YES or NO, - Encourage participants to direct questions/responses at one another.
Only a few users are participating.	<ul style="list-style-type: none"> - Say something like "We've been getting excellent contributions from [username] and [username]. Could we hear from some others? Does anyone else have a similar/different experience?" - Encourage participants to talk to each other and comment on each other's responses.
Users are having a serious disagreement.	<p>Given the subject matter, controversy is expected. Participants will have many differing attitudes and biases.</p> <ul style="list-style-type: none"> - If discussion remains respectful and on topic, it is okay to see if users can resolve the disagreement on their own. - Use differences of opinion as a point of conversation. (e.g. you could ask: "Why do we tend to think differently about this subject?") - If discussion gets heated, suggest tabling it and circling back at a later time. It is possible later sessions will address the controversy. - Suggest the users address their differences of opinion as part of a separate group discussion. - Remind users of the group rules. Ensure these rules are reinforced. - Always avoid taking sides. - If a disagreement arises around medical protocol, guidelines, or Pakistan policies, immediately consult the Technical & Policy Lead for Nai Umang Connect and develop a response approach.
The conversation was left unresolved.	These conversations can be brought up again during subsequent sessions.
Users are taking the conversation in a different direction.	Thank users for their contribution but remind them of the goal or subject matter at hand. Ask a directing question or summarize points that have been made that contribute directly to the intended topic.
We are running out of time and users are still deep in discussion.	Praise users for being so engaged and interested. Note that due to time constraints, the conversation must move on but suggest users continue their discussion with each other in a separate group discussion or in person if possible.
WhatsApp is malfunctioning.	Contact the Pathfinder PK IT support team. You may need to uninstall the app and reinstall it.

Workflow

<p>General supervisor [NAME]</p> <p>Responsibilities: Supervise the general tone and interactions of the group, make sure nothing seems too "risky, political, or stepping into unrelated content"</p>	<p>Technical supervisor [NAME]</p> <p>Responsibilities: Consult him when questions regarding clinical topics that need to be revised or confirmed</p>	<p>Policy supervisor [NAME]</p> <p>Responsibilities: Consult him regarding any policy questions such as: position of Pathfinder regarding a statement, country-wide announcements regarding SRH and FP</p>	<p>Technical content support [NAME]</p> <p>Responsibilities: Recruiting guest speakers and doing short audio interviews with providers</p>	
<p align="center">Moderator [NAME]</p>				
<p align="center">Responsibilities: Submit daily content according to the content calendar. Respond to questions. Manage the mood and address concerns. Implement protocols when needed.</p>				
<p align="center">Monday</p>	<p align="center">Tuesday</p>	<p align="center">Wednesday</p>	<p align="center">Thursday</p>	<p align="center">Friday</p>
<p>Responsibilities: Provide support to moderator around the dynamics of the group. Text the moderator privately or in person regarding something that was not properly address.</p>				

Nai Umang CONNECT RESPONSE PROTOCOLS:

Breaking ground rules

- ❖ **Example 1:** Not respecting other participants through verbal harassment, coercion, or threats.
 - **Action plan:**
 - **Contact the provider separately** and explain the ground rules:
 - Request the participant to provide a personal apology to the other person (or group) to encourage a safe space for communication
 - Advise them of consequences if not followed
 - **Consequence:**
 - Remove participant from the group.
- ❖ **Example 2:** Contact is sharing people's numbers or personal information outside of the group without permission
 - **Action plan:**
 - **Contact the provider separately** and remind them of the ground rules
 - Share the principles for this: "We'd like to remind you that Nai Umang Connect is a professional forum. Everyone here has explicitly agreed to join. You may not use the contact information for members of Nai Umang Connect without asking them and getting their explicit consent."
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- ❖ **Example 3:** Provider breaches confidentiality protocol from the industry such as providing identifiable information about individual patients.
 - **Action plan:**
 - **Contact the provider separately** and explain the nature for this: "Confidentiality is a key principle in the medical profession and it should not be breached under any circumstances. Please refrain from using any personal information about your patients. This ensures that Nai Umang Connect can be a useful professional learning space while also respecting the rights of our patients."
 - Advise of possible consequences.
 - **Consequences:**
 - Report to their direct facility in-charge and proceed with guidelines and protocols.
- ❖ Posting and sharing misinformation
 - **Example:** A provider shares content from a non-approved source for clinical behavior.
 - **Action plan:**

- **Contact the provider separately** and inform him/her about the possible consequences of spreading misinformation: "Misinformation causes confusion on the other providers, it breaches protocols and guidelines, creates a stressful environment. We encourage to only use approved sources of information per guidelines and protocols"
 - Correct the misinformation and provide support evidence within the chat
- ❖ Proselytism and political views
 - **Example 1:** a provider shares information about a political campaign
 - **Action plan:**
 - **Share in the group** a general message: "We remind all participants that the objective of this group is to share professional tools to inform and improve clinical services around family planning and maternal reproductive health. We request that everyone to refrain from sharing any other content outside of this topic."
 - **Example 2:** A provider shares their personal views about a specific candidate, or takes on a side for a politician that doesn't align with the current protocol or guidelines.
 - **Action plan:**
 - **Share in the group** a message regarding the protocol of the group: "We would like to remind all of the users that Nai Umang Connect is intended only for professional discussions regarding sexual reproductive health and family planning. This is a safe space that requires respect and we ask everyone to refrain from sharing any personal political views that may interfere with the objective."
 - **Example 3:** A provider expresses concern about the impact of the Current state of the country (especially around the President's pronouncements against SRH and FP)
 - **Share in the group** that we are only taking formal responses from the government. "We'd like to remind the participants of the group that as an organization we are implementing policy and protocols approved by the government. When and if new policies or laws are enacted, we will take action accordingly, and support you to do your job in alignment with current policies."
 - Contact the Country Director to get more information about the specific topic and provide a supplementary answer if any.

- ❖ Sharing social, inappropriate or distracting information
 - **Examples:** A provider shares "memes", prayers, photos or any other non-related materials.
 - **Action plan:**
 - **Share in the group** a message regarding the protocol of the group:

"We remind all participants that the objective of this group is to share professional tools to inform and improve clinical services around family planning and sexual reproductive health. We request that everyone to refrain from sharing any other content outside of this topic."

- ❖ Contradictions from supporting organizations (education, government, other NGOs)
 - **Examples:** A provider comes with some information that is contradictory from an external source, this source may be a partnering NGO, the government, or potentially the internet itself.
 - Action plan:
 - Evaluate the source of the information, if it comes from a source that is not within the at-large community of Pathfinder in Pakistan we can address the topic by **sharing in the group**: "We value the active participation of all family planning providers in Nai Umang Connect. However, we can only support content that aligns with the current national guidelines and WHO standards for family planning counseling. We hold ourselves to the highest standards of the medical and technical accuracy, in order to support all providers to do their best work. Any content shared in Nai Umang Connect that is not based on verified medical evidence and/or current national guidelines will be removed."
 - If the source comes from an organization, government institution and is backed up in writing, contact Dr. Isihaka to evaluate the relevance of it, address the concerns if any arise.

- ❖ Fighting/arguing
 - **Examples:** Two or more people engage in what seems a heated discussion about a specific topic, going on and off with contradictory points of view, or expected imposition of knowledge which is creating friction.
 - **Action plan:**
 - **Share in the group** a message regarding the protocol of the group:

"We remind all participants that the objective of this group is to share our views and ask our questions in a professional way, that this is a safe space for everyone and that no disrespectful communication or aggressivity will be tolerated. We will take measurements with no previous notice if this continues to happen"

- **Contact the provider separately** and inform him/her about the possible consequences of participating in non-respectful communication. Let them know the next step will be to remove them from the group where he will no longer be able to participate in a professional network and this may impact the way people perceive them.
- **Consequence:** Remove them from the group.

Appendix A: OVERVIEW OF SIX PRINCIPLES

PRINCIPLE	COMMITMENT	PROVIDER BEHAVIORS	OUTCOMES FOR YOUNG PERSON (YP)
SAFE, WELCOMING SPACE	<p><i>I commit to working with all facility staff to create a safe, welcoming environment for all young people regardless of wealth, gender, age, parity, marital status, ethnicity, and religion. I respect and value young people who come to this clinic seeking contraception for taking a positive step to protect their health and ensure their success.</i></p>	<ol style="list-style-type: none"> 1. Approach all adolescents, including those from marginalized and vulnerable populations, in a non-judgmental and non-discriminatory manner, respecting individual dignity. 2. Inform young people about their rights to seek respectful health services, including contraception 	<ol style="list-style-type: none"> i. YP feels welcomed by all clinic staff ii. YP feels able to freely express feedback on the services received.
SENSITIVE COMMUNICATION	<p><i>I commit to communicating clearly, respectfully and compassionately with all young people, so they can easily understand medical information, and freely voice their questions and concerns.</i></p> <p><i>I commit to listening attentively and responding to young people's needs, concerns and questions</i></p>	<ol style="list-style-type: none"> 1. Demonstrate active listening and gives time for questions. This means using verbal and non-verbal signs (such as eye contact, nodding) to build trust and rapport. 2. Show compassion, reassurance, and non-authoritarian communication. 3. Give information about what will happen during the clinic visit, including any physical examinations, tests or treatment 4. Encourages the young person to voice their questions and concerns and responds clearly. 	<ol style="list-style-type: none"> i. YP feels respected and not judged for seeking contraception ii. YP understands what will happen during the clinic visit iii. YP was able to ask questions to the provider and have them answered clearly.

<p>SIMPLE, COMPREHENSIVE COUNSELING</p>	<p><i>I will provide accurate information on a range of modern contraceptive methods, including long-acting methods and emergency contraception, in jargon-free language that young people can understand.</i></p> <p><i>I commit to giving young people the information they need to make a free, informed choice, without pressure or bias to choose one method over another.</i></p>	<ol style="list-style-type: none"> 1. Give counselling in language that is understandable 2. Present a range of modern contraceptive methods, including LARC and EC. 3. Checks young person's preference for care. 4. Avoid pressuring or biasing young person in their decision making 5. Address young people's questions, fears and concerns regarding contraceptive methods in full. 	<ol style="list-style-type: none"> i. YP is provided with a choice of contraceptive methods, including LARC. ii. YP can understand the information given. iii. Young people feel their concerns were addressed and they can make an informed choice. iii. YP does not feel pressured to choose one method over another.
<p>SEEK UNDERSTANDING AND AGREEMENT</p>	<p><i>I will check understanding before providing appropriate care.</i></p> <p><i>I recognize all young people's individual right to accept or refuse treatment, testing and physical examination.</i></p>	<ol style="list-style-type: none"> 1. Check young person's understanding of the services to be provided. 2. Seek verbal agreement from the young person for services provided. 3. Do not require the YP to seek additional agreement from a partner or family member. 	<ol style="list-style-type: none"> i. YP has the information they need to make an informed choice ii. YP feels ready and empowered to make their own choice.
<p>SAY YES TO A SAFE METHOD</p>	<p><i>I commit to providing the young person's chosen method of modern contraception, to all young people of reproductive age, regardless of age, parity, and marital status, in line with the World Health Organization guidelines.</i></p>	<ol style="list-style-type: none"> 1. Provide medically appropriate services, regardless of age, parity, and marital status. 2. Give clear and accurate information on method use and side effects 3. Assist clients if they wish to change or discontinue a method. 4. Ensure follow-up as needed 	<ol style="list-style-type: none"> i. YP receives method of choice after comprehensive counseling ii. YP was not refused contraception for a non-medical reason iii. YP understands how to use the method correctly and common side effects
<p>SECURITY OF INFORMATION</p>	<p><i>I commit to ensuring that all facility staff respect the confidentiality and privacy of young</i></p>	<ol style="list-style-type: none"> 1. Inform YP about their rights to privacy and confidentiality 2. Take active steps to 	<ol style="list-style-type: none"> i. YP care was private and confidentiality was respected ii. Every YP is seen and

	<i>people seeking care.</i>	deliver care privately, so others cannot see or overhear their consultation. 3. Keep client information confidential, except when clinically indicated. ¹	treated in a private place, where others cannot see or overhear their consultation.
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¹ The exception to the confidentiality rule is when a client tells the provider something that makes them believe that the YP may be at risk of harm. The provider may need to share confidential information with others outside of the medical team, to help protect the YP. Providers should always involve clients in this decision and seek their consent first.