# YOUTH POWERED





## Repositioning Contraception

Using **segmentation** to target the **right narratives** to the **right audiences** 

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# What's inside?

- 1. Background
- 2. Adolescents & contraception in Tanzania
- 3. Repositioning contraception: the role of data
- 4. Data's impact on program design & messaging
- Key takeaways





# 1. Background

#### **Adolescents 360**

**Goal**: We aim to increase voluntary, modern contraceptive use and reduce unintended pregnancy among adolescent girls between 15-19-years-old in Ethiopia, Nigeria and **Tanzania**.

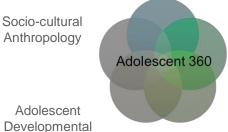


BILL & MELINDA
GATES foundation

- Trans-disciplinary
- Focus on youth-powered programming mandate to make SRH programming relevant for girls
- Speed and scale mandate for costeffectiveness of A360 designed interventions



Social Marketing



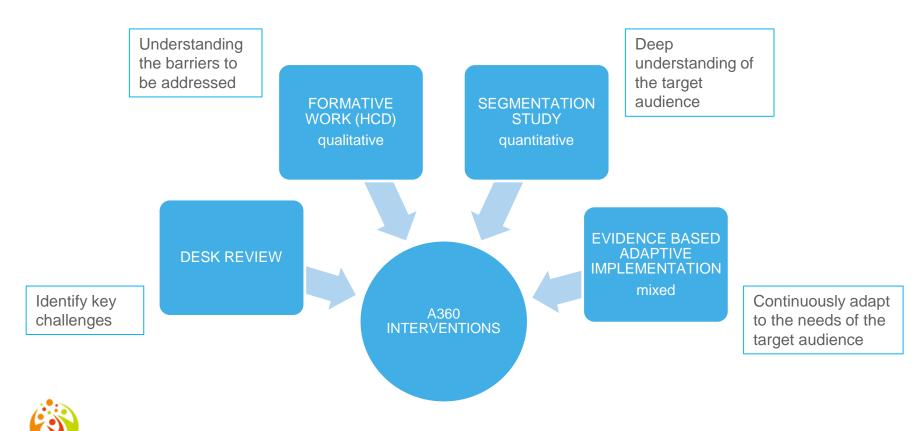
Science

Public Health

Human-Centered Design



#### Data: the key to A360 intervention design





## A360: At a Glance







Apply structured processes to quickly refine and ensure the intervention responds to the needs of girls, and the health system actors who serve them.



Aug - Dec 2016

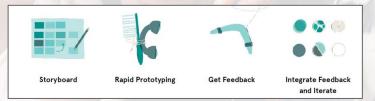


Data collection to inform design



#### January- Dec 2017

Prototyping, Vetting, & Refinement through the transdisciplinary approach



#### Jan 2018- present

Evidence-based adaptive implementation as engine for SCALE (Horizontal and Vertical)





2. Data Dive: Adolescents and Contraception in Tanzania





#### Sexual Behavior, Contraceptive Use and Childbirth

In Tanzania there are 2.3 million girls aged 15-19 of which...



**HAVE HAD SEX** 



REPORT UNMET NEED FOR FAMILY PLANNING



HAVE BEGUN CHILD BEARING



Source: Tanzania DHS 2015/2016

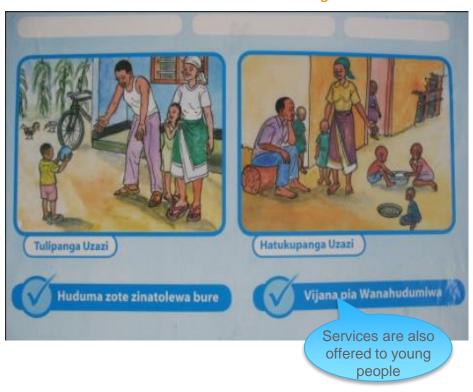
#### Family planning perceived as being for married women with children

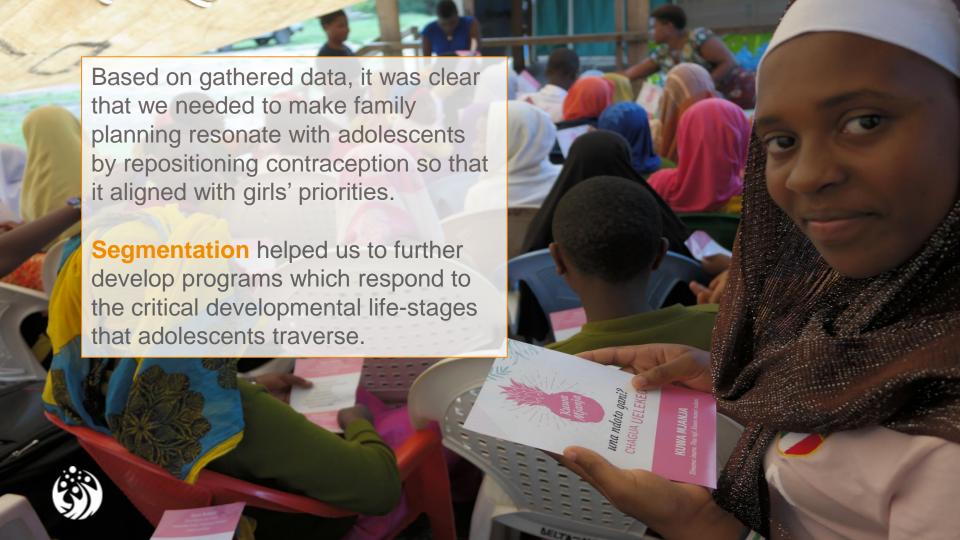
- We found through formative research\* in Tanzania that family planning is mostly considered appropriate for married women with children
- Family planning messages adolescent girls receive are not relevant and don't resonate.
   Most adolescents do not consider contraceptives to be 'for them' because they;
  - don't consider themselves sexually active and at risk of pregnancy,
  - aren't married (74% of girls have never been married),

\*PSI & Ideo.org, Insights, Feb 2015



A typical poster used in past family planning campaign that does not resonate with girls







3. Repositioning Contraception: Role of Data



Formative work identified the need for segmented messaging. The human centered design / qualitative research included in-person interviews, FGDs, roleplays, and journey mapping



Identified the need to reposition contraception for different segments of adolescents

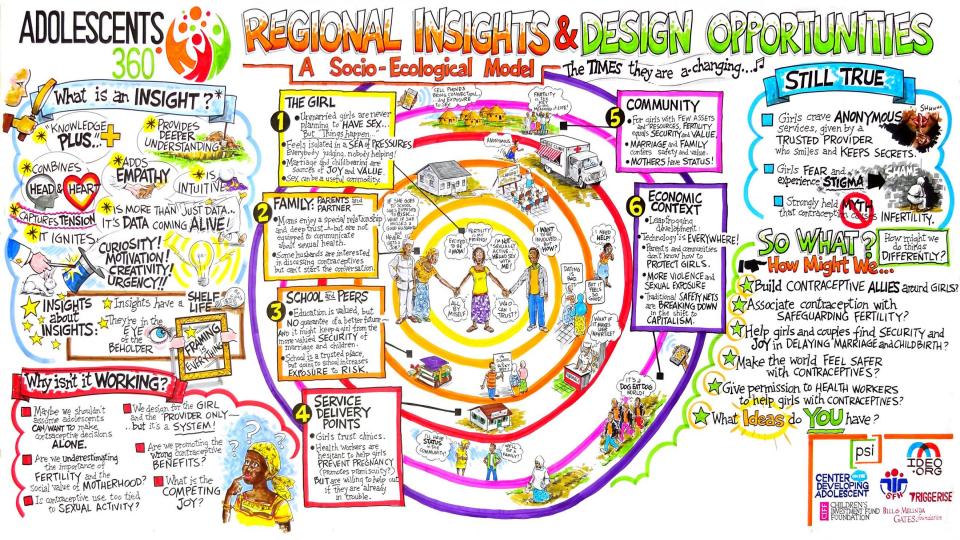
#### Large-scale segmentation study described segments amongst adolescents:

- Quantitative survey of 1,132 adolescent girls (15-19 years old was conducted in 10 districts from 5 regions of Tanzania, urban and rural
- Collected data on demographics, life stages / pubertal development, attitudes, decisionmaking, and power in relationships
- Segmentation analysis was conducted in partnership with Catalyst Behavioral Group



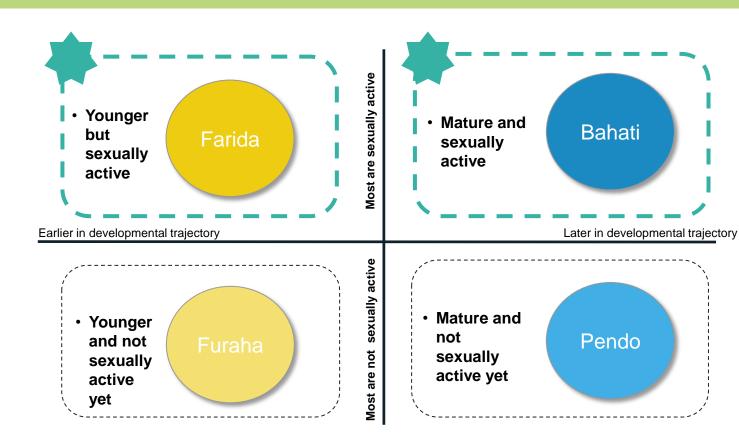
Described four segments amongst 15-19-yearold Tanzanians: Farida, Furaha, Bahati, Pendo.





#### Segmentation study insights: Farida, Bahati, Furaha & Pendo

4 segments that generally differ on their psycho-social development were identified









4. Data's Impact on Program Design and Messaging



Data from mixed methods helped to ensure program design and messaging remains relevant as girls move through different life stages

We created **Kuwa Mjanja** (Be Smart), **a brand with two intersecting tracks**, which allow us to meet the needs
of our four segments through separate
and shared moments.







- A clinic-based experience
- Menarche and puberty as an entry-point
- Engages parents and allows girls to build trust with providers.



#### **Bahati/Pendo:**

"Know your path"

- A Community-based experience
- Help girls discover dreams & goals, learn what's possible, and take action.
- Girls access vocational and financial skills classes alongside health information

Both experiences include an **opt-out private moment** with a Kuwa Mjanja provider for judgment-free counseling and contraceptive services.

Key elements for both interventions were developed through triangulating insights from formative research and the segmentation study

#### **Targeted Behavior Example**

Tablet based job aid to help community health educators deliver messages tailored to a girl's segment





#### **Job Aid Key Elements**

Interactive quiz to determine girl's segment – a non-intrusive typing tool (Farida, Bahati, etc.)



Videos and stories to share relevant info, targeted by segment







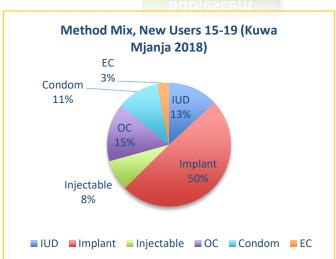
Personalized counseling for better decision-making



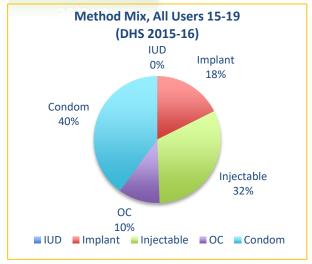


#### **Results to Date**















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