















This document is intended to bring alive what we learned during the inspiration phase in Ethiopia. It reflects the voices of the people the teams spoke with and provides the A360 Consortium with a springboard for design opportunities and further inquiry through prototyping.

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CONTEXT
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# CONTEXT

# Sexual Activity

OF GIRLS AGED 15-19

25%

OF GIRLS
HAVE HAD
SEX

(GUTTMACHER, 2013)

23 %

OF GIRLS
HAVE BEEN
MARRIED

(GUTTMACHER, 2013)

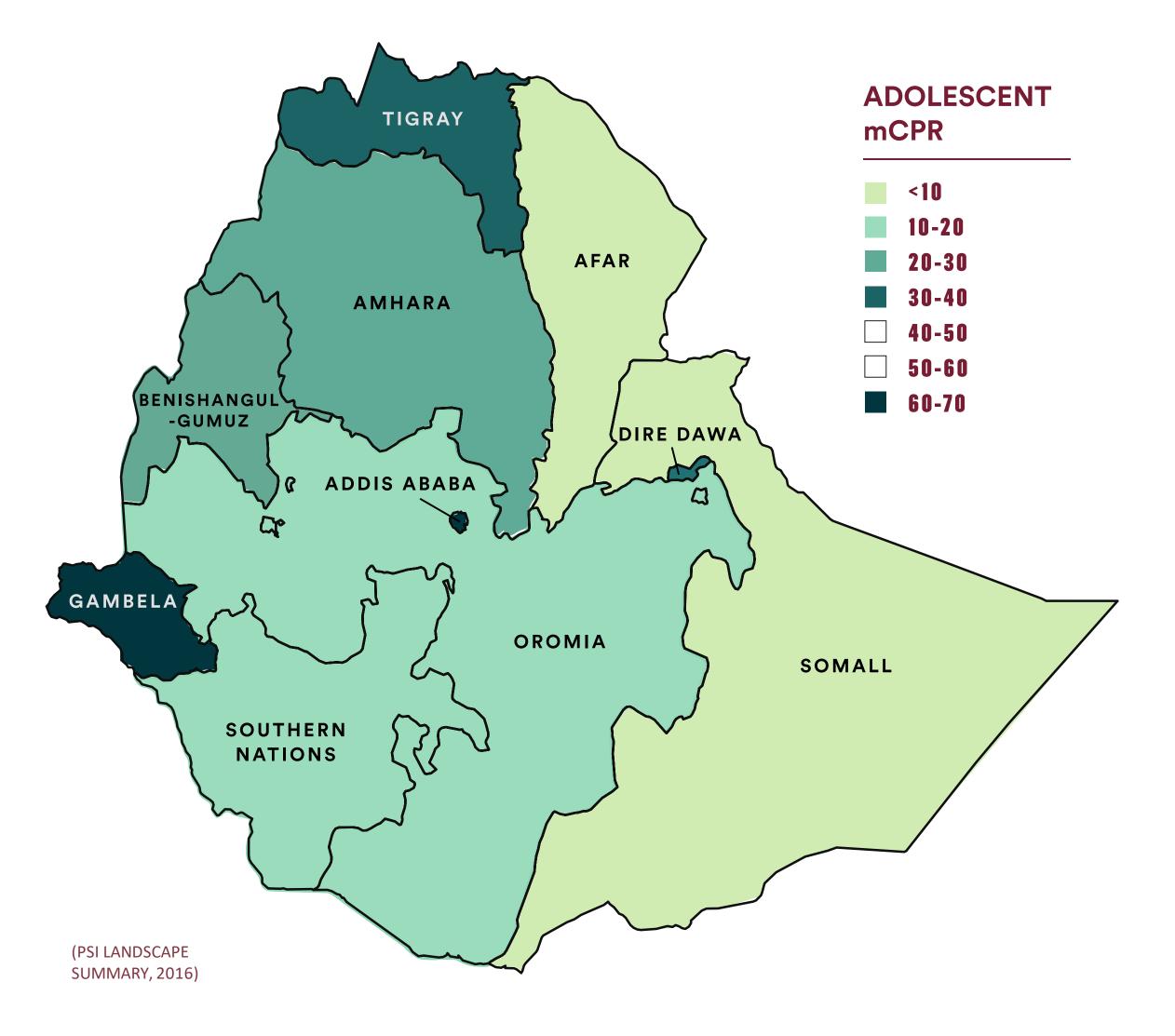
46%

OF GIRLS
WITH A CHILD
REPORTED THE
LAST CHILD AS
UNWANTED /
MISTIMED

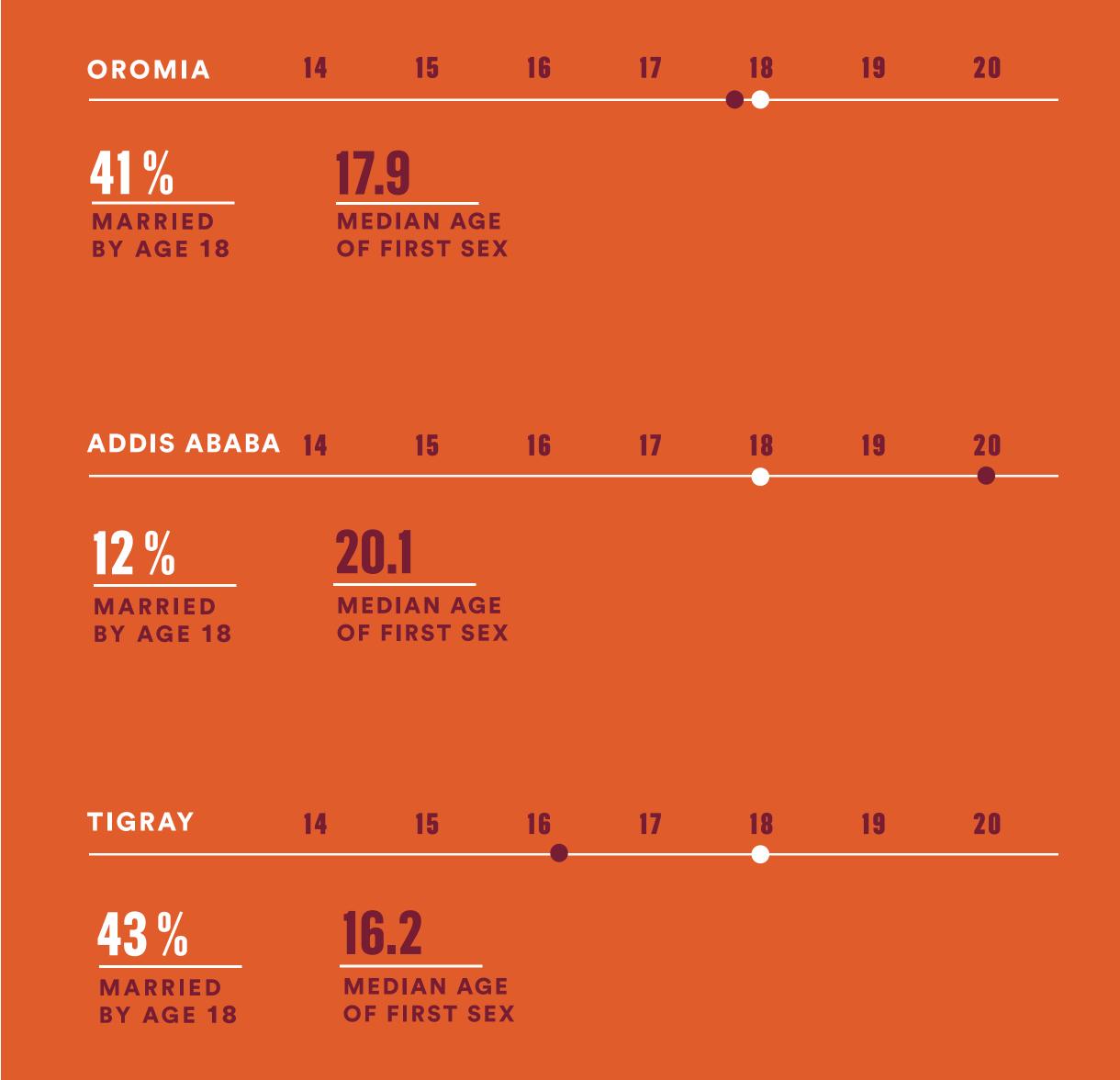
(PMA, 2014)

# Regional Breakdown

ADOLESCENT MCRP, GIRLS AGES 15-19

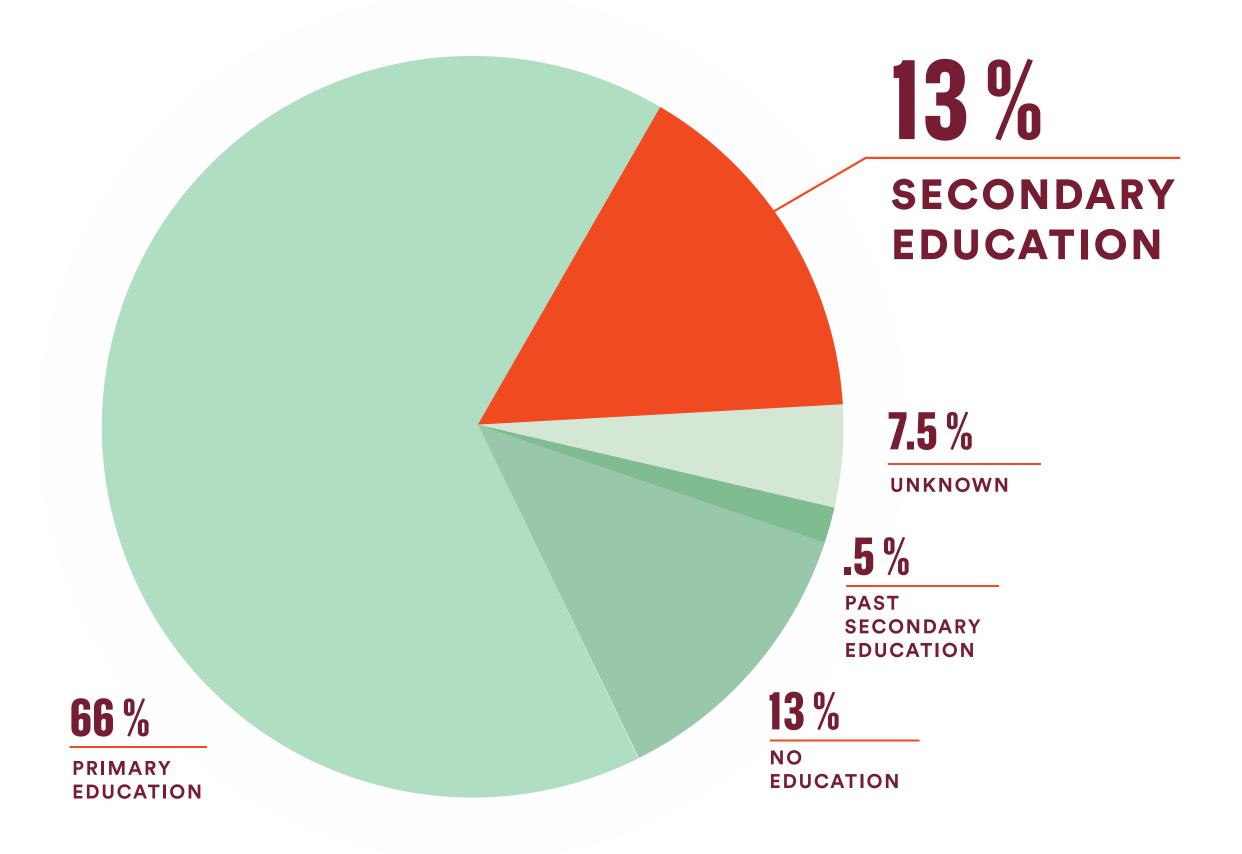


#### AGE OF MARRIAGE AND SEXUAL DEBUT



## Education Level

OF GIRLS AGED 15-19



Only 13% of girls achieve secondary education.

(GUTTMACHER, 2013)

# Technology Access

OF GIRLS AGED 15-19

50%

HAVE WEEKLY
ACCESS TO A
MOBILE PHONE

(GATES, 2016)

(GUTTMACHER, 2013)

26%

HAVE WEEKLY
ACCESS TO
RADIO

HAVE WEEKLY
ACCESS TO
TELEVISION

(GUTTMACHER, 2013)

HAVE WEEKLY
ACCESS TO
NEWSPAPER

(GUTTMACHER, 2013)

# INSIGHT GATHERING AND RESEARCH











## Where we went

# 

# INTERVIEW SESIONS



29

**ADDIS ABABA** 

40 OROMIA 20

**AFAR** 

38

**TIGRAY** 

## Who we talked to

# PEOPLE INTERVIEWED

83

ADOLESCENT GIRLS

13

MALE PARTNERS

49

ADOLESCENT BOYS

35

COMMUNITY INFLUENCERS

55

**MOTHERS** 

32

**FATHERS** 

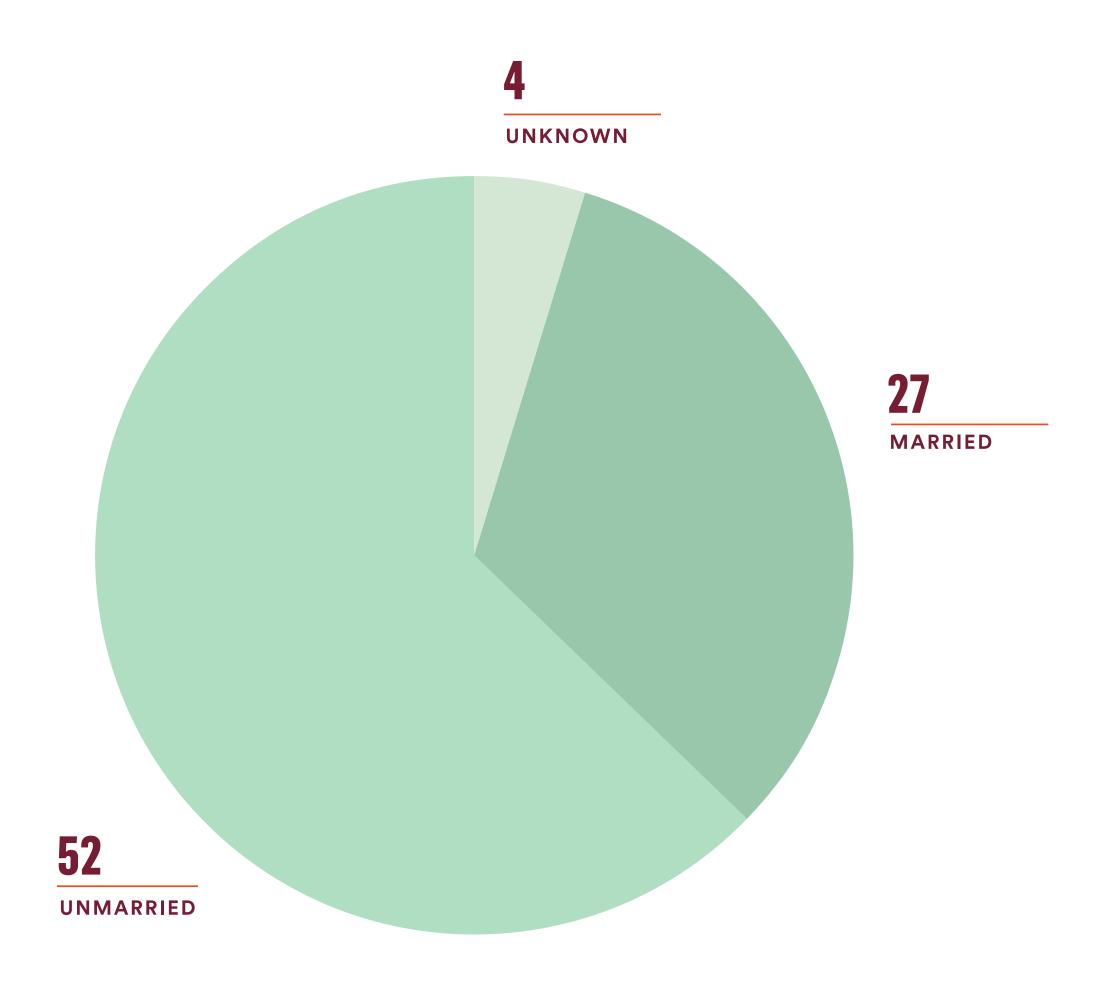
6

HEALTH EXTENSION WORKERS 21

OTHER SERVICE PROVIDERS

# Who we talked to

# MARITAL STATUS OF GIRLS WE TALKED WITH



### Research methods toolbox

#### PHOTO NARRATIVE

A tool in which the audience takes photographs that illustrates their life e.g. typical day, things or places that make them feel happy, worry, people and events that are important to them, etc. Photos are then discussed in group or one-to-one settings in order to generate insights.

#### TRUSTED SOURCES

A tool used to facilitate discussion about girls' most and least trusted sources of information or service delivery related to sexual and reproductive health, particularly contraception.

#### **TOPIC SPECTRUM**

A tool used to understand girls' perspectives on sources of SRH information. During interviews, discussion of sensitive topics were limited to those appropriate or comfortable to the research participants.

#### STORYTELLING

A tool that introduces hypothetical stories and discussion about those stories, in order to determine research participants' reactions to adolescent girls' needs, and health-seeking behaviors and services.

#### **CARD SORT**

A method in which individuals sort different topics by their level of importance to them in order to better understand values surrounding sexuality, owning property, and/or future family preferences.

#### CONTEXT QUESTIONS

An interview tool used to start conversations about the perceived value, status and associations related to adolescent girls in the community.







## Synthesis Process

### DAILY DOWNLOAD

At the end of each day in the field, each research team member captured their top learning, ideas, and stories on sticky post-it notes.

The team shared inspiring stories, learnings, and quotes and observations.

### IDENTIFY THEMES

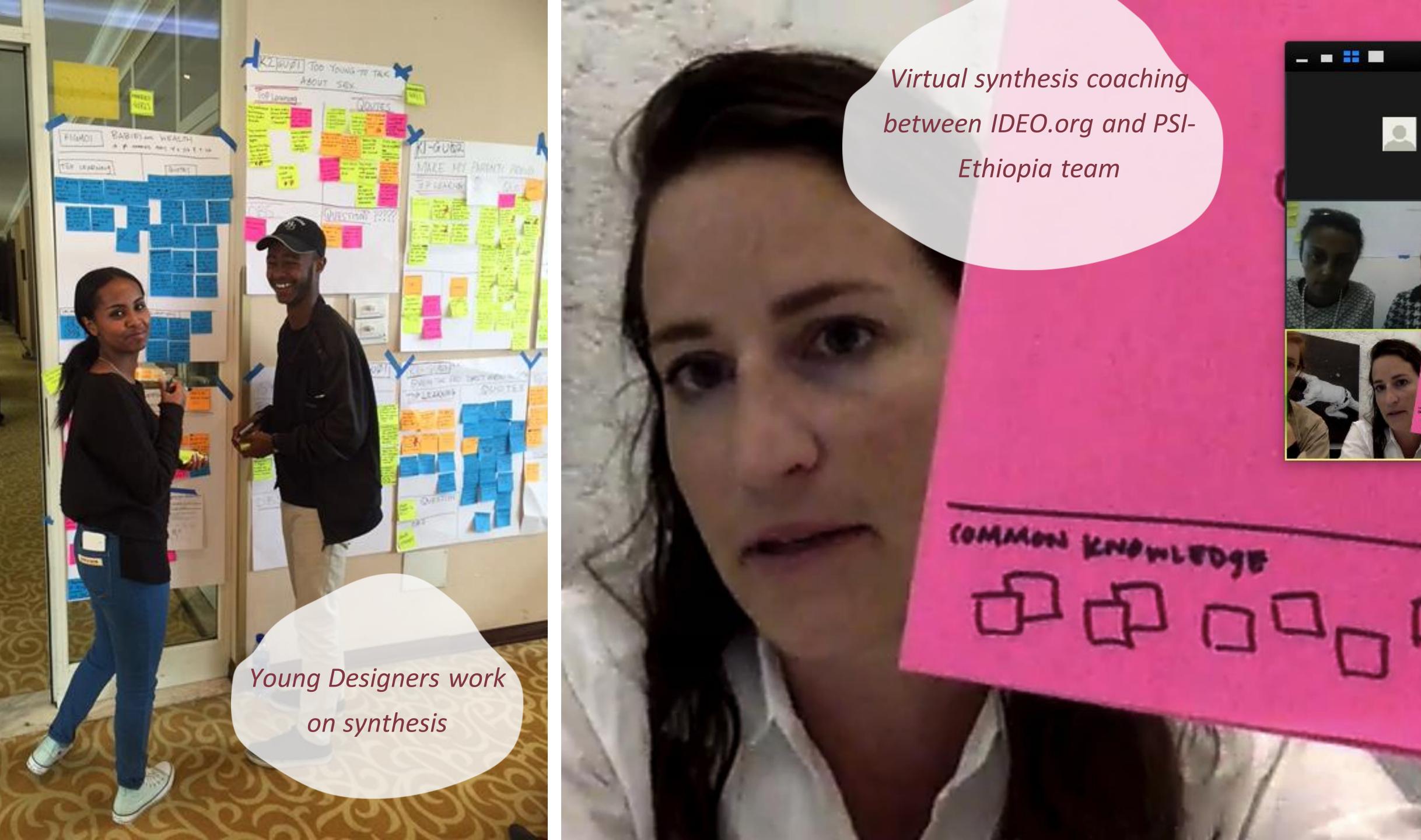
Review downloaded data to find patterns, compelling insights, consistent problems, tension between need and action, shifts in ways of thinking and action, and surprises.

# CREATE INSIGHT STATEMENTS

Taking all themes and rephrasing them into what felt like insights for the research. The team looked through the original design challenge and used the evaluation standard to refine insights.

# "HOW MIGHT WE..." QUESTIONS

Translate the insight statements into "how might we" (HMW) questions that were used to trigger innovative thinking towards potential solutions. HMW questions were used to generate a number of possible answers that became part of the launch pad for brainstorming.



# TRAJECTORIES

The A360 segmentation helped orient us to the research context. As we heard personal stories in the field, a complex narrative emerged.

#### **HIWOT**

Hiwot has never married and is not sexually active. She lives with her family and is a student.



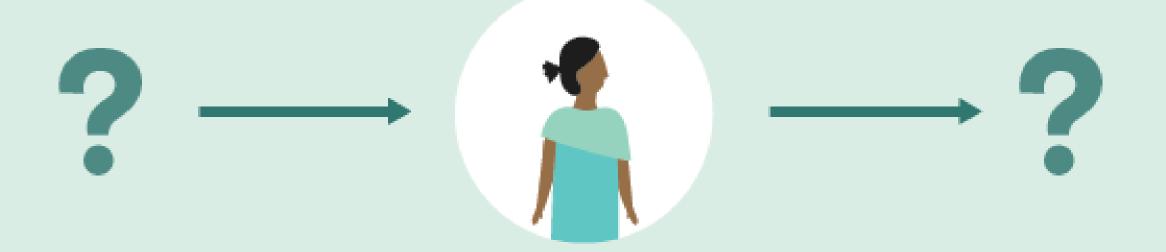
#### **TIGIST**

Tigist is married and sexually active, and may or may not have a child.

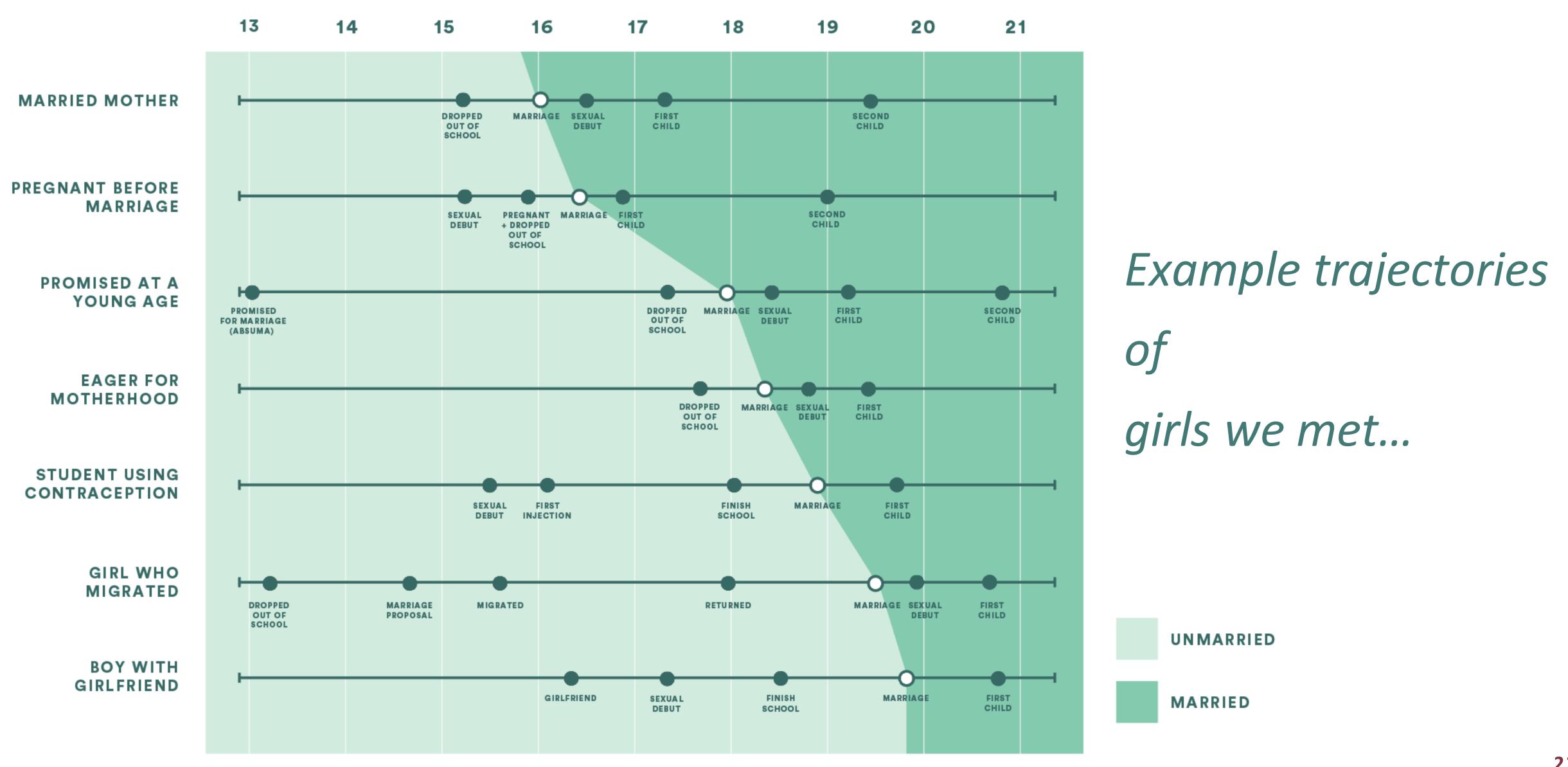


As we learned from Developmental
Science and confirmed in the field:
Girls

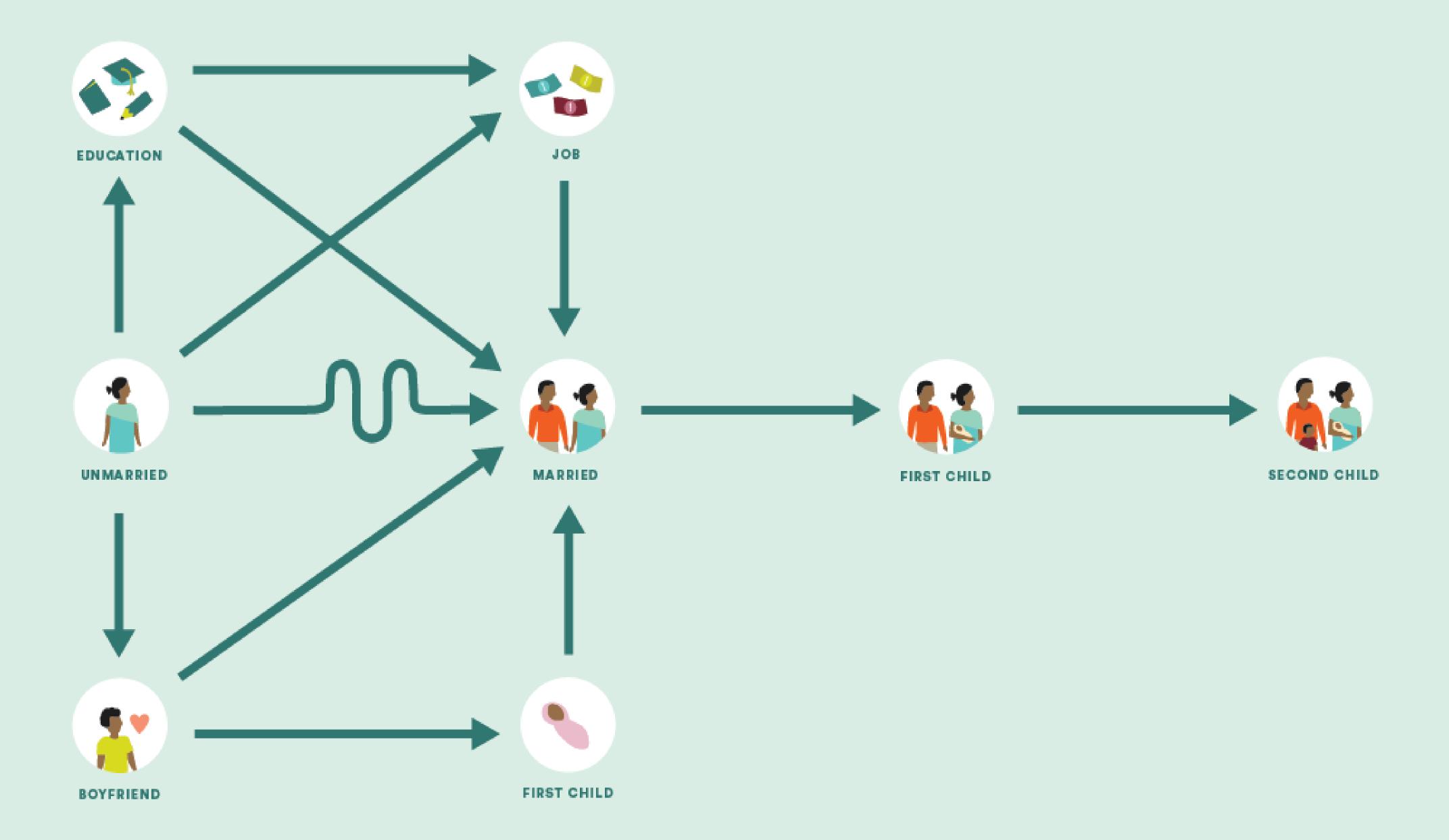
are not static—their needs, drivers, and environments change over time.

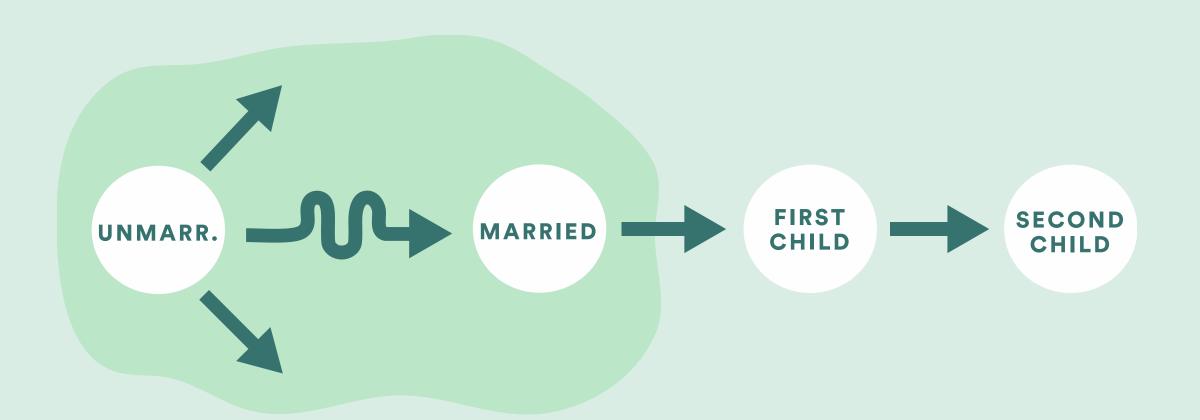


#### TRAJECTORIES

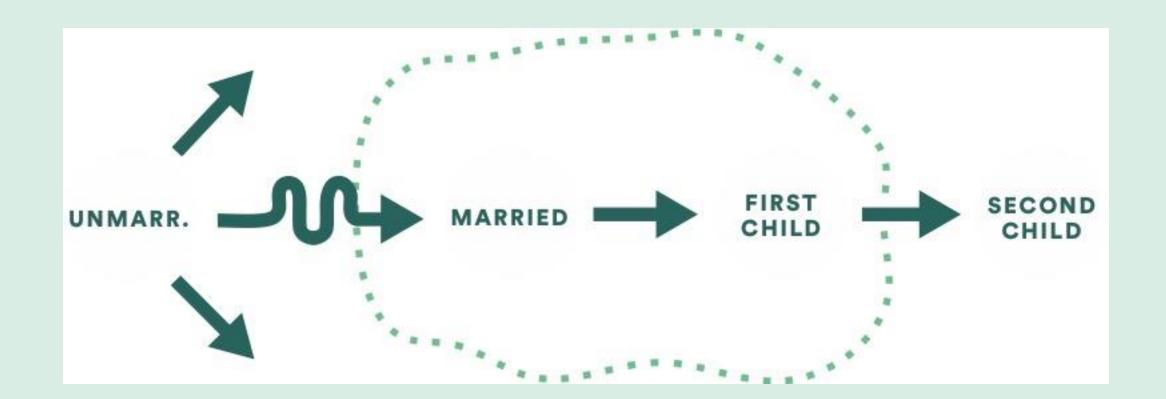


### VISUALIZATION OF TRAJECTORIES

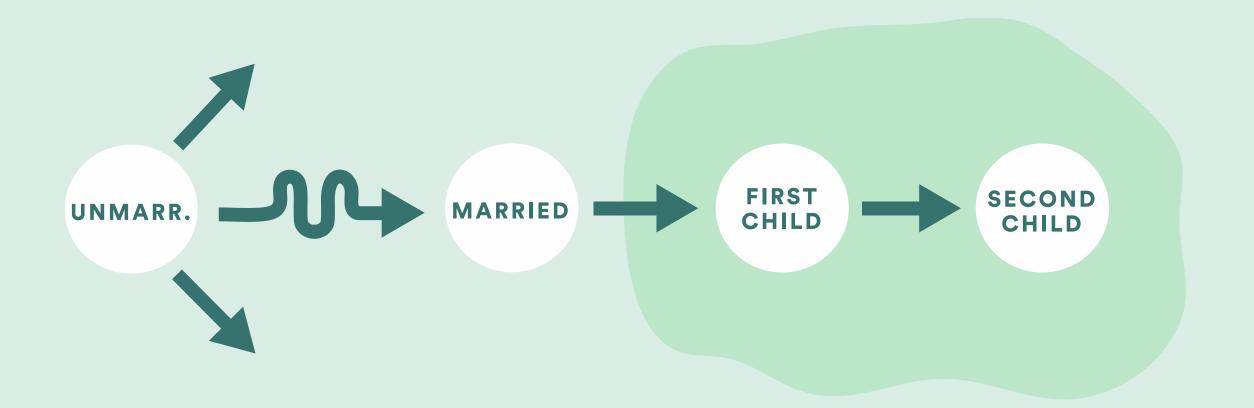




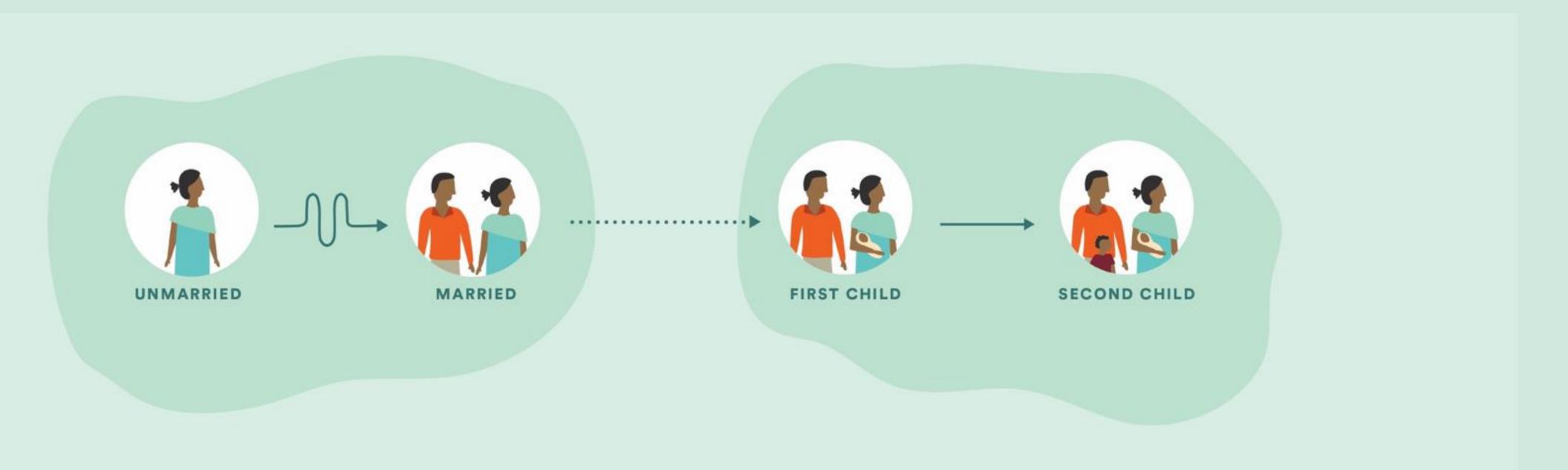
We found that there is a high level of variability in girls' trajectories *before marriage*, and there are opportunities to design for the breadth of these experiences.



We found proving a girl's fertility *immediately after marriage* to be a fixed cultural norm. Even though this is a period of low demand for contraceptive use, the inflection point of marriage can be leveraged as an entry point to introduce the value of contraception.



After giving birth to her first child, we found married girls open to considering birth spacing as a way to plan for their future with their husbands. There are opportunities to redesign this experience.



Regardless of where a girl is on her path, contraception must fit within the context of her life, the values she holds, and her view of herself. It must support her vision for the life she wishes to lead.

# EMERGING INSIGHTS for Design

#### WHAT ARE INSIGHTS?

INSIGHTS: Statements that help point the way forward and drive towards design solutions. Some may be novel while others not, the most important thing is that the combination of insights help launch the team into novel ideas.

FOCUS ON BEING ACTIONABLE: Through the course of our research, we heard about many many topics—from finance to living conditions to love. While we acknowledge that all topics are an important part of a girl's life, the insights that follow represent the strongest patterns that emerged across age and regions.

ETHICS: All participants gave signed consent to talk with us. No names have been used to assure confidentiality and anonymity.

1

AT ODDS

Contraception is at odds with a girl's identity and what is expected of her.



Girls can't and don't identify with being "sexually active" (even if they are having sex). As long as contraceptives are positioned as being for "sexually active" girls (girls who plan to have sex), they feel irrelevant.







"They don't have the intention to have sex but it happens."

— SERVICE PROVIDER, TIGRAY

"My girlfriend and I only have sex once every three months."

— BOY, OROMIA

"If a girl is sexually active, the community will hate her and isolate her."

— UNMARRIED GIRL, ADDIS

Marriage and children feel like every girl's immediate future— making contraception hard to relate to, especially long-term methods. These expectations are both internal and external.



"They think depo is better. It is easy— only three months."

— SERVICE PROVIDER, TIGRAY

"Why use it if she's not married?"

— UNMARRIED GIRL, OROMIA

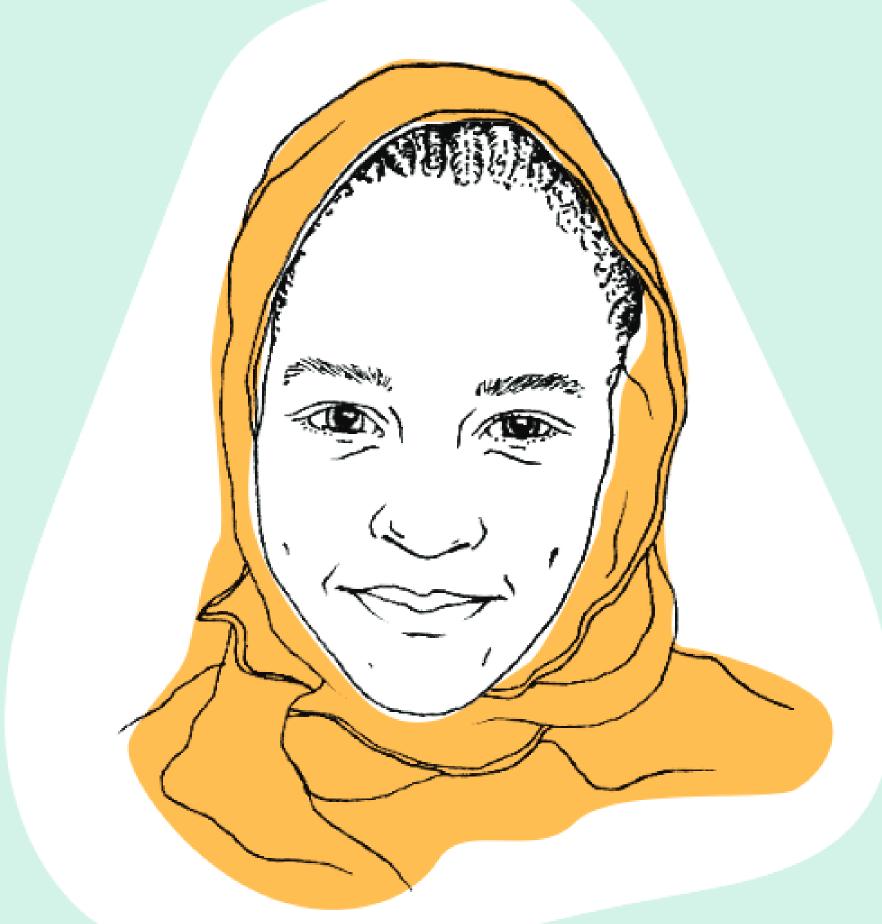
"I am proud to be a girl because I want to be a mother."

— UNMARRIED GIRL, TIGRAY

# EAGERLY ANTICIPATING MOTHERHOOD

Meseret is a 17 year old girl who has grown up in a rural community, an hour's walk from the nearest town. Her daily routine consists of making breakfast for her family, fetching water, and collecting wood for the fire.

She is approaching 18 years old, which is widely regarded by her community as the appropriate age to marry. After the first year of marriage, she expects to have a child. As many of her friends, she eagerly anticipates this milestone as the moment when she will gain respect in her community. She will be happy to have a child — it's seen as a gift from God.



"Having a child in the community is a big thing. It is being respected. They will not call me Meseret anymore.

They will call me [my child's] mother."

- MESERET, 17 YEAR OLD UNMARRIED GIRL

Girls who do seek contraception are forced to create workarounds because they fear being discovered.







"Girls take off their uniforms to get contraceptives."

— PROVIDER, ADDIS

"Adolescents are not confident to get family planning services because of the community."

— UNMARRIED GIRL, AFAR

"Because of shame, they go to another village from where they live."

— SERVICE PROVIDER, ADDIS

How might we design safe

and anonymous access points that fit

into the environments and lives of

girls?

## BRAINSTORM CONSIDERATIONS

- girls' town routines
- mindset and behavior of providers
- tools for decision-making
- available community channels
- technology behaviors

# 2

THE WORLD IS CHANGING

Parents and the community grapple with how to cope with changing times and the external influences young people are exposed to.



Outside influences are disrupting the perceived control the community holds on girls and shifting social dynamics.







GENDER TRANSFORMATIVE

"Parents are strict in two ways —they don't want their daughters to go out and see boys and they're not aware of the new generation."

— SERVICE PROVIDER, TIGRAY

"In modern times, people aren't sticking to religion and culture. That's why they are having problems."

— COMMUNITY INFLUENCER, ADDIS

"Before girls used to work in the home; now more are working outside."

— COMMUNITY INFLUENCER, OROMIA

Rural communities are becoming more connected to town centers, where girls are often exposed to outside influences.







"From grades 1-8 students attend the rural school, but after they go study in town, where parents rent a house for them."

— COMMUNITY INFLUENCER, OROMIA

"We go to the market once or twice a week. I go to see and be seen."

— BOY, OROMIA

"We go to town on Thursdays and have some free time after the market."

— UNMARRIED GIRL, OROMIA

While phones are not widespread, adolescents are finding creative ways to share mobile access, media, and new interactions.

DRIVERS





"I use my mom's cellphone to contact friends."

— UNMARRIED GIRL, ADDIS

"We have phones with no SIM to share and listen to music."

— UNMARRIED GIRL, TIGRAY

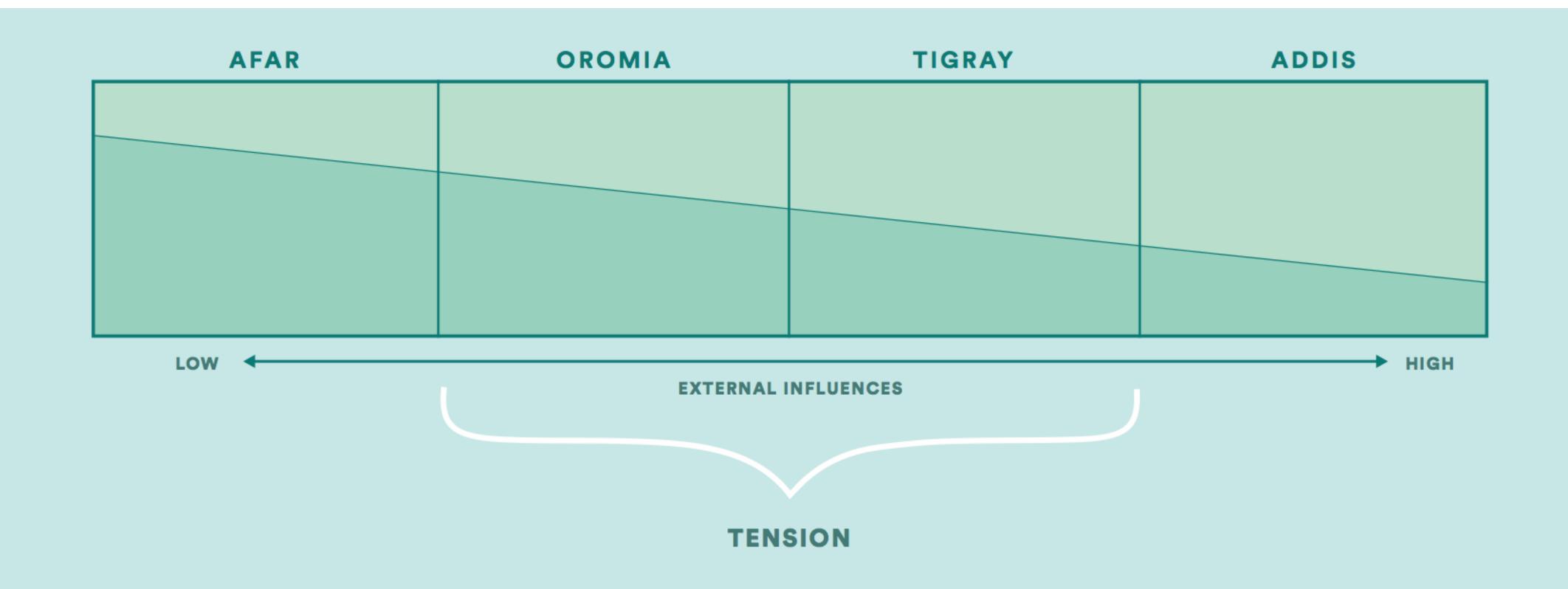
"You can use phones to flirt with girls and get a girlfriend."

-BOY, OROMIA

#### CULTURAL TENSION

Right now in Ethiopia, external influences are creating tensions with existing norms and values.

Understanding where a region is in regards to this tension may provide us with a new way to consider a strategy for scale.



# How might we position contraception as

being appropriate for all girls to safeguard

their futures?

### BRAINSTORM CONSIDERATIONS

- divorce contraception from sex
- connect contraception to fertility
- assure fertility
- across trajectories
- reposition LARCs messaging
- community perception
- Connect contraception with safety, protection

3

NEW RELATIONSHIPS

Traditional cultural and religious norms are at odds with new interactions between adolescent boys and girls.



Even though it is considered unacceptable by the community, secret relationships are becoming more common amongst adolescents.







GENDER TRANSFORMATIVE

"Nowadays, it is normal to start having relationships at an early age. Around 13, 14 or 15 it is normal."

— BOY, TIGRAY

"When you see phone lights in the bush you know couples are there."

— COMMUNITY INFLUENCER, OROMIA

"Having a girlfriend in the community is not 'halal' and religiously forbidden."

— COMMUNITY INFLUENCER, AFAR

School has given girls access to new social interactions and a taste of agency. DRIVERS





GENDER TRANSFORMATIVE

"We like school because it means we won't be working in the house."

— UNMARRIED GIRL, OROMIA

"Before it was hard for boys and girls to meet. Nowadays there are many occasions, including school."

— COMMUNITY INFLUENCER, OROMIA

"School is where girls are free."

— SERVICE PROVIDER, OROMIA

# How might we make secret relationships among adolescents safer and healthier?

### BRAINSTORM CONSIDERATIONS

- interactions between girls and boys
- parental support
- acknowledgement by the community
- perception of good girl vs. bad girl
- expanding definition of "sexually active"

4

AN UNCERTAIN PATH

Education is valued, yet it is not viewed as a secure and proven path for girls.



Tenth grade is a critical inflection point that determines an adolescent girl's trajectory for the next few years.

### DRIVERS





GENDER TRANSFORMATIVE

"If a girl fails in 10th or 12th grader her family forces her to get married."

— BOY, ADDIS

"They say 'why should I continue and fail at 10th grade? I should go there to get money and help my family."

— COMMUNITY INFLUENCER, TIGRAY

"I failed and can't continue school because my family can't afford it."

— BOY, ADDIS

# FEELING STUCK IN AN ARRANGED MARRIAGE

Meet Yeabsira. She is a 19 year old married girl with a young child.

In her community, families expect their daughters to get married after grade 10. Yeabsira really respects her parents, so when she did not do well on her exams, she felt the only way she could make her parents proud was to accept an arranged marriage. And without her education, she felt the only way to achieve greater respect in her community was to have a child.



"If you don't have a job and can't continue your education, then having a child is the only profit you have."

- YEABSIRA, 19 YEAR OLD MARRIED GIRL

Educational success is defined as achieving economic gain, yet employment opportunities are rare.

DRIVERS





"Moms aspire for their girls to finish school... but getting a job is 'luck.'"

— PARENT, ADDIS

"I don't know anyone from here who is a doctor, but I want to be one."

— UNMARRIED GIRL, TIGRAY

"We want to change ourselves to have a better future with lots of money."

— UNMARRIED GIRL, AFAR

Families value education, but are most comfortable when a girl's future is set through marriage.







GENDER TRANSFORMATIVE

"What disturbs our minds is that many of these kids whom we send to school, many end up neither having a good marriage or a good education."

— PARENT, OROMIA

"Wealth doesn't matter, babies are wealth by themselves."

— MARRIED GIRL, TIGRAY

"If I see my menstruation, my parents would make me marry someone & I won't be able to continue my education."

— UNMARRIED GIRL, AFAR

How might we use the school

environment to help girls

explore their agency and

aspirations?

### BRAINSTORM CONSIDERATIONS

- girls out of school
- 8th grade and 10th grade inflection points
- demonstrate immediatevalue of education
- community perception
- School as key access point

# 5

THE VALUE OF CHILDREN

Proving fertility and having children is culturally revered, yet couples are beginning to desire smaller families.



Having children is a fixed cultural norm and universal goal for both married and unmarried girls that brings girls status and joy.

#### DRIVERS





GENDER TRANSFORMATIVE

"Having the first child is respect. You start to be called by the name of your child."

— UNMARRIED GIRL, OROMIA

"Life is worthless without children."

— PARENT, TIGRAY

"Peer pressure of having babies is high."

-MARRIED GIRL, ADDIS

Proving fertility immediately after marriage is necessary to secure the union.

DRIVERS





"If a girl doesn't have babies, [the husband] will leave her."

— MARRIED GIRL, ADDIS

"The aim of marriage is to have children and make our husbands happy."

— PARENT, TIGRAY

"It's a must to have the first baby as soon as possible after marriage."

— MARRIED GIRL, OROMIA

The aspirations of couples are shifting from having large families to providing a higher quality of life for fewer children.







GENDER TRANSFORMATIVE

"Smart girls want to have fewer children and raise them well. We don't want to live a bad life by having children over and over."

— UNMARRIED GIRL, TIGRAY

"It is better to have a job and more wealth before having more children."

— HUSBAND, OROMIA

"I want 4 kids, 4-5 years for each baby. We can do that using contraception so my sons can live well."

— BOY, TIGRAY

## How might we create

new ways for girls to earn

social status and joy as they

delay childbearing?

### BRAINSTORM CONSIDERATIONS

- importance of staying healthy
- support of parents and community
- delaying marriage and/or first birth
- benefits of education before motherhood
- birth spacing
- help girls to find a competing joy and help the community to support it

6

IN IT, TOGETHER

Couples often desire joint decision-making in contraceptive use, yet in reality, knowledge and agency continue to be a barrier.



Husbands are uninformed about methods and the value of contraception, but some are eager to learn more.

#### DRIVERS



GENDER TRANSFORMATIVE

"It's good to learn [about contraception] together. I'd want us both to know!"

— HUSBAND, OROMIA

"When we got married, we didn't know about contraception."

— HUSBAND, TIGRAY

"I have heard it is a good thing, but I really don't know about it."

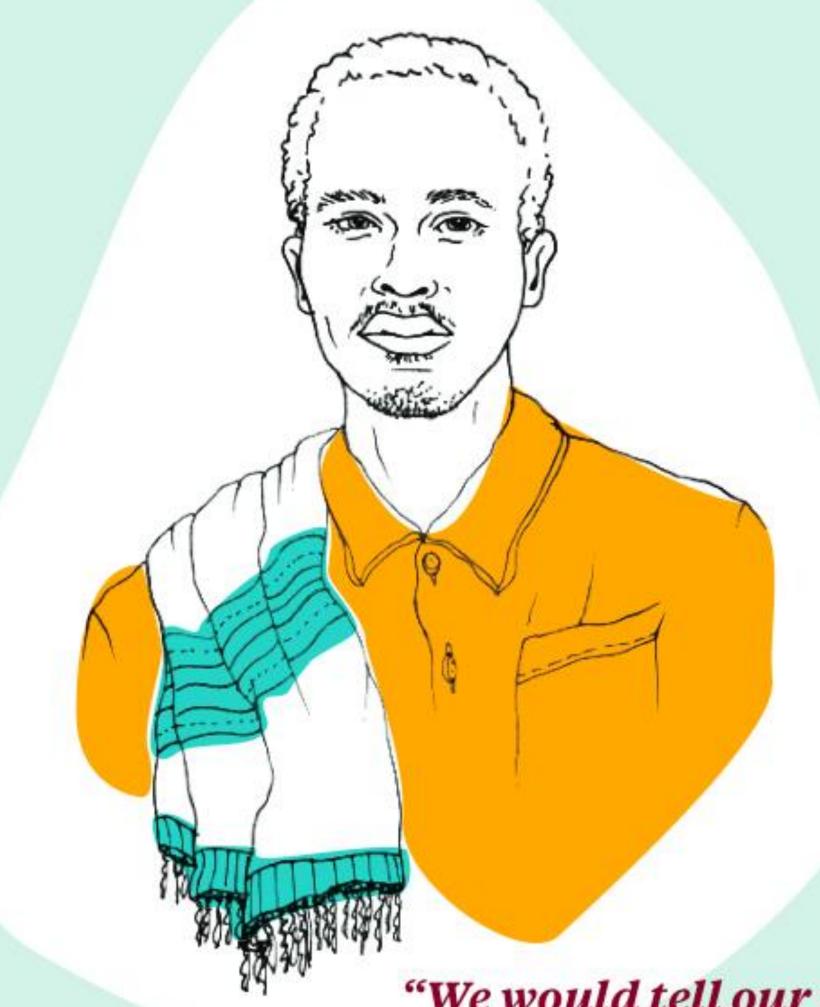
— HUSBAND, OROMIA

# CO-CONSPIRING WITH HIS FUTURE WIFE

Yadeta is 18. He lives with his parents, and his girlfriend lives with her parents in the adjacent village. Pastoralist responsibilities consume the majority of his days, giving him little time to see his girlfriend.

Herding his goats gives him the opportunity to meet up with her several times a week, and they find a quiet space out of view to talk about their future. Yadeta plans to marry his girlfriend within two years, and they will delay pregnancy using a contraceptive method that they will get from the pharmacist in the nearby town.

To defer their parents' judgment of being married without bearing children immediately, they plan to tell their parents fictional stories of a fertility journey wrought with miscarriages.



"We would tell our parents about 'pain in her womb' and they would stop asking us where our first child was."

- YADETA, 18 YEAR OLD PARTNER

Married girls are starting to feel more empowered to make contraception decisions on their own.







GENDER TRANSFORMATIVE

"I know a girl who removed her implant in front of her husband, but secretly took the injection."

— MARRIED GIRL, OROMIA

"Use the calendar method until you trust your husband."

— MARRIED GIRL, TIGRAY

"Everything is in the hands of the girls. She can go to the clinic if she wants."

—HUSBAND, OROMIA

## How might we create

- opportunities for couples to learn
- about contraception and plan for

their future?

### BRAINSTORM CONSIDERATIONS

- delay first birth
- birth spacing
- learning moments for husbands
- marriage as a key moment
- joint decision-making
- Protecting fertility of the family

7

SOURCES ARE SCARCE

Confirming what the literature tells us:
For unmarried girls, trusted and reliable
sexual reproductive health sources remain
few and far between.



Sexual reproductive health services do not serve or cater to the needs of unmarried girls.







"Almost all the girls that we reach through home to home service are married girls that have at least one child."

— SERVICE PROVIDER, TIGRAY

"I don't know the Health

Extension Worker... how could I

trust her?"

— UNMARRIED GIRL, OROMIA

"Women's Development Army talks to mature girls about family planning, not to people like us."

— UNMARRIED GIRL, TIGRAY

# Sex education is often vague, incomplete, or absent.

DRIVERS





"If we teach girls about contraception in detail, it will motivate them to have sex."

— COMMUNITY INFLUENCER, TIGRAY

"Health Extension Workers teach us about hand washing and to keep our clothes clean, but they don't tell us about other things."

— PARENT, AFAR

"We don't teach girls grades 5-8 deeply about contraceptive methods. We teach them about the problems of early pregnancy and just refer them to the HEW office."

— COMMUNITY INFLUENCER, TIGRAY

Myths of side effects and infertility drive fear of using contraceptives.





"You have to have two babies before you use contraceptives."

— MARRIED GIRL, ADDIS

"Most unmarried girls don't use contraceptives because of fear of infertility."

— PROVIDER, TIGRAY

"Methods will ruin your face and make you sterile."

— MALE PARTNER, ADDIS

### HEALTH CARE ACCESS CHANNELS

Based on our research, this is how we think the current channels are addressing the needs of adolescents in the community.

	ACCESSIBLE TO UNMARRIED GIRLS	ACCESSIBLE TO MARRIED GIRLS	ACCESSIBLE TO BOYS	SECRECY OF ACCESS	RURAL ACCESS	ACCESS TO METHODS
HEW (PUBLIC)						
PUBLIC CLINIC						
PRIVATE CLINIC						
PRIVATE PHARMACY						



### CONTRACEPTIVE METHOD ACCESS CHANNELS

		PHARMACY	HEALTH EXTENTION WORKER	CLINIC
SHORT TERM LONG TERM	IUD			
	IMPLANT			
	INJECTION			
	PILL			
	CONDOM			
	E-PILL			
•		PRIVATE ACCESS		PUBLIC ACCES

Most girls, both married and unmarried, prefer to access contraception through private channels. We considered which methods are available across different health care channels and how this preference for privacy affects contraceptive method options.



How might we introduce in-depth

and accurate sexual reproductive health

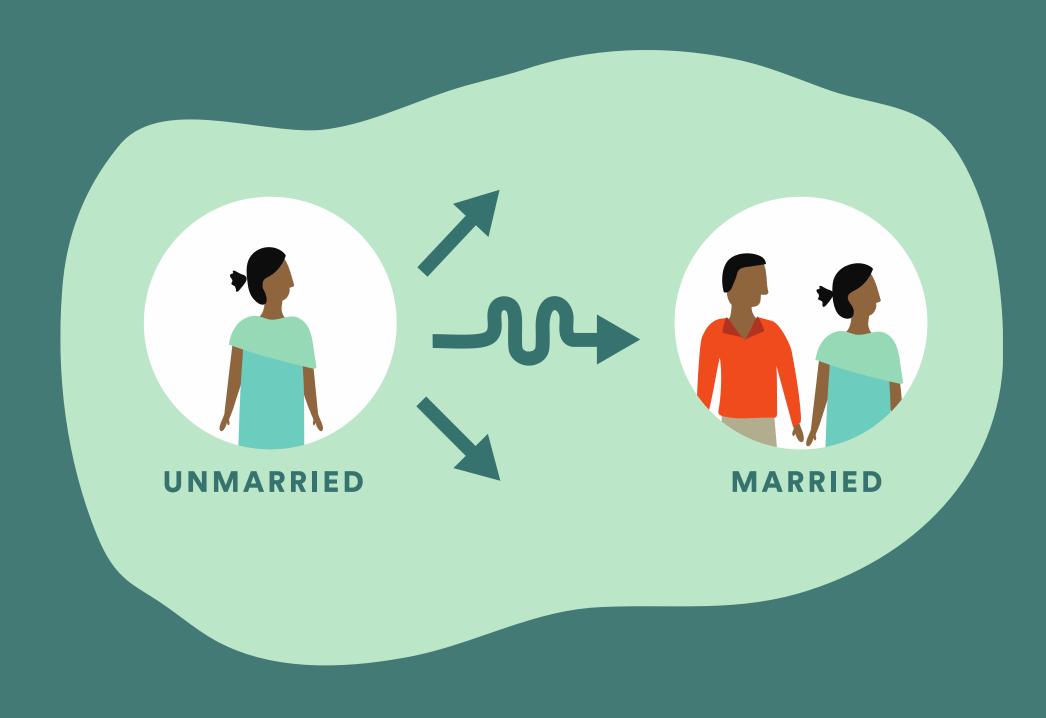
learning experiences that grow with the

girl?

### BRAINSTORM CONSIDERATIONS

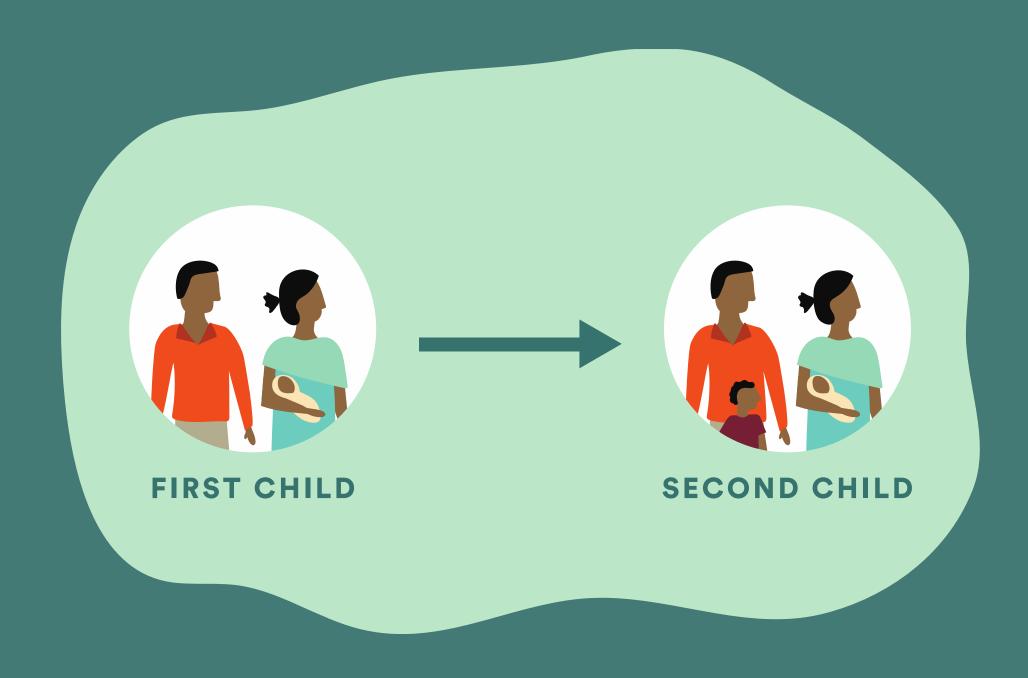
- address myths of side effects
- address myth of infertility
- assure and celebrate fertility
- developmentally appropriate
- existing channels
- technology behaviors

# DESIGN OPPORTUNITIES



UNMARRIED GIRLS

Unmarried girls are excited about educational opportunities and the prospect of starting a family, but there is no guarantee that school will lead them to a more secure future. They are experiencing more interactions with boys than the past generation which is creating tension in their communities. They grapple with wanting to be "good" girls and make their parents proud, while being a naturally curious about sex and relationships. They are largely underserved by current sexual reproductive health services, and think of themselves neither as sexually active, nor in need of contraceptives (though everyone acknowledges that accidents happen. They deeply fear that contraceptives and especially long-acting methods—will make them infertile and ruin their dreams of marriage and family.



MARRIED GIRLS

As soon as a girl gets married she faces intense pressure from her community to prove her fertility. Motherhood reliably brings a girl status and a sense of personal joy. At the same time, young couples today want their children to have better quality lives. This leads them to desire financial stability and smaller families. While health services are more available and acceptable for married girls, contraception is introduced to young couples only after after having their first child. Married adolescents may be extremely difficult to reach because of new child marriage laws.

Our research and the literature review present us with a wide range of design opportunities, some of which span across girls' trajectories and some of which highlight specific inflection points.

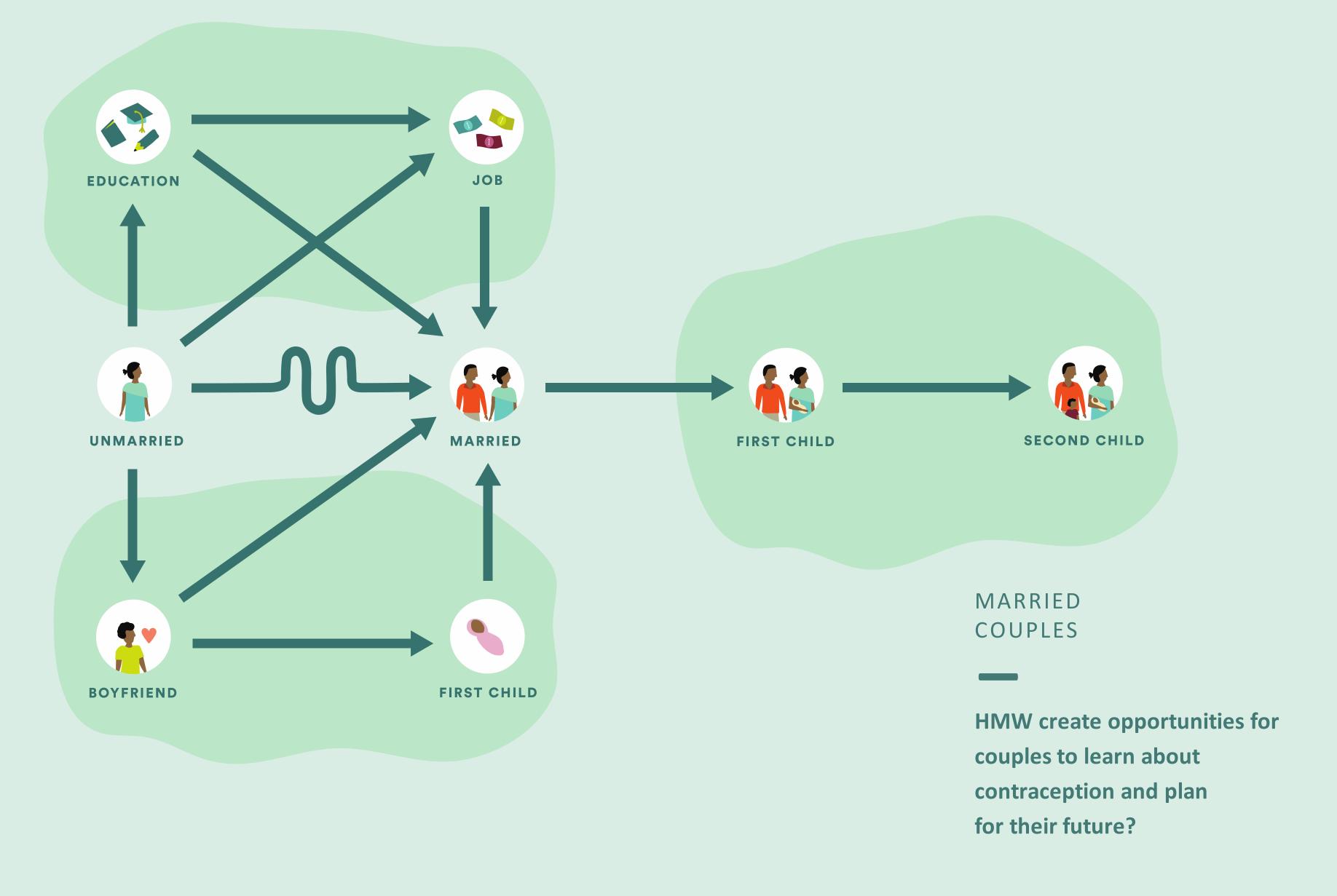
### TRAJECTORY MOMENTS

#### GIRLS & EDUCATION

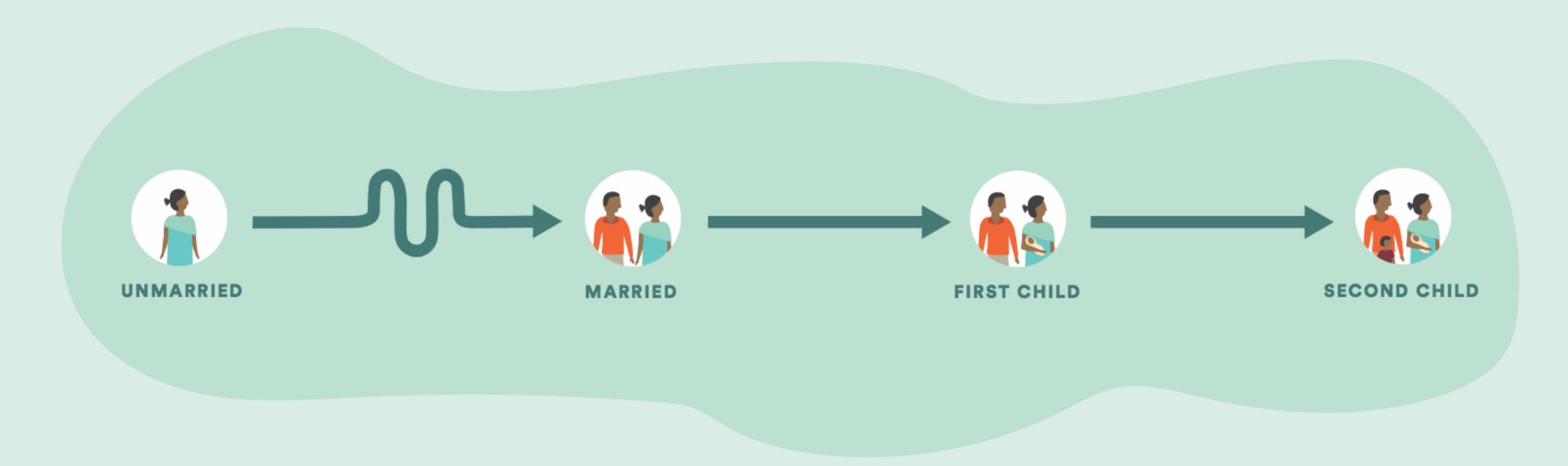
HMW use the school environment to help girls explore their agency and aspirations while accessing information and services?

ADOLESCENTS
IN RELATIONSHIPS

HMW make secret relationships among adolescents safer and healthier?



### ACROSS TRAJECTORIES





HMW introduce in-depth and accurate sexual reproductive health learning experiences that grow with the girl?



HMW create new
ways for girls to earn social
status whilte they delay
child-bearing? HMW help
them to find a competing
joy?



HMW position contraception as being safe and appropriate for all girls to safeguard their fertility and their future— whether they see themselves as sexually active or not?



HMW design safe and anonymous access points that fit into the environments and lives of girls?

Next Steps:

We are going to explore these opportunity areas in the first round of prototyping in January 2017.

# THANK YOU