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# Acronyms

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<th>Description</th>
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<tr>
<td>RA</td>
<td>Research Assistant</td>
</tr>
<tr>
<td>FP</td>
<td>Family Planning</td>
</tr>
<tr>
<td>SRHR</td>
<td>Sexual and Reproductive Health and Rights</td>
</tr>
<tr>
<td>HCD</td>
<td>Human-Centered Design</td>
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Acknowledgment

Philosophy

The Africa Alliance of YMCAs (AAYMCA) is driven by the philosophy of Moving young people from Subjects to Citizens (S2C). The philosophy is a rights based approach to empowering young people in Africa to take lead of the Renaissance of Africa. S2C is therefore a broad thematic framework which has provided the fuel for all YMCAs in Africa who make up the AAYMCA.

Youth Empowerment

The embodiment of the S2C philosophy is through its four thematic components namely Transformative Masculinity, Economic Renaissance, Civic Action and Youth Justice. Each of the thematic areas are designed to respond to pertinent issues facing young people, broadly around Gender Justice, Wealth creation, Community engagement and conflict with the law respectively. These thematic areas have since 2010 become embedded into the programmatic structure of the YMCA in Africa.

Strategy

In 2016, African YMCAs launched the YMCA 3.0 Gameplan. The Gameplan became the blueprint for growth of the African YMCA Movement, both as a sustainable Institution and as a relevant, impactful Movement. Our intent in drawing out this Blueprint was in setting ourselves up for massive growth well into the millennium, with a vision to achieve significant milestones by the close of the year 2026. The Gameplan was the African YMCA’s best co-created strategic endeavour in recent times, having all possible permutations of leaders, partners and youth represented in critical thought and work processes – all the way from the inaugural workshop in Nairobi in May of 2016 to very recent country specific workshops. The YMCA 3.0 Gameplan is stratified into 5 pillars:

1. A Sustainable Ecosystem
2. An Impactful YMCA
3. The Family of Growth
4. The Powerspace Youth Methodology
5. Prototyping as process and as a principle

The Africa Alliance of YMCAs has since taken up the task of establishing each of the Pillars as co-dependent functions of the greater YMCA whole. One of the most successful has been the establishment of the Powerspace as a youth Methodology of empowerment. In this process, ThinkPlace Kenya has played a very vital role, first by working with us in the technical conceptualization of the methodology, and then later by practical implementation of some key elements of the Powerspace. The Sex Manenoz project whose report is outlined herein represents the most comprehensive iteration of the Powerspace so far. The project also embeds within it a second less developed pillar of the YMCA 3.0 Gameplan, the Prototype.
Acknowledgment

The Sex Manenoz project

In a previous project titled “A Real Man Is” (2015 – 2018 in Kenya and Zambia), we realized a gap in the uptake of Sexual and Reproductive health services by young women in the implementing countries. We became aware of a possible role of young men in the prevention of eventual uptake of these services by young women – their partners. Working with ThinkPlace Kenya, Kenya YMCA and Zambia YMCA, the AAYMCA set out to test the hypothesis that through using the Powerspace methodology, the YMCA can empower young men to act as partners to young women in securing their Sexual Reproductive Health and Rights (SRHR). It is the testing of this hypothesis that makes up the content of the research results represented in this document.

A reading of the document will reveal the intricate relationship between youth and their SRHR, youth and the community and the role of the YMCA. The Zambia phase of the project was implemented in Kitwe and Livingstone, and this document is an assessment of the results of the research. Very key to the process is that this process is backed by a very deliberate prototyping process, which is intended to provide a proof of concept for the scaling of the Powerspace in implementing youth centered projects in SRHR across the continent.

Lantonirina Rakotomalala
General Secretary, Africa Alliance of YMCAs.
Introduction
The Project Background

Gender roles for a long time have set expectations for men and women that directly influences behaviors and choices people make within the society. Men are less likely to seek health services or take charge of their personal well-being due to social expectations set which they feel obliged to adhere to.

Transformative masculinity is an approach used by AAYMCA to counter male disempowerment by allowing for a broader understanding of what it means being a real man. Transformative masculinity explores the different sides of what it means being masculine and how men can find their role as men in a changing society.

The program is being implemented through the power space methodology a conversational space that allows for conversations around gender matters.

The focus is on identifying and addressing issues around gender through education, challenging social cultural norms and influence policy change.

Gender norms are a major hindrance to Men seeking knowledge on SRHR. Men are predominantly seen as providers which puts them at a distance in being able to address their own psychological problems, but also that of women.

Gender norms that regulate behavior makes women susceptible to early pregnancy, early marriage and abuse both physical and mental abuse. Likewise gender norms lead men and boys in risky and unsafe behavior thus undermining healthy practices (Joar, 2019).

Male engagement is therefore very vital in achieving SRHR goals and gender equality.

This study aims to deeply understand the current paradigms of masculinity and the role it plays in shaping the current norms on sexual reproductive health for men and women in general.

This understanding will form a foundation to develop evidence-based interventions for transformative masculinity which will positively impact overall uptake of SRHR products and services.
The Project Background

Study Title

Applying Human-Centered Design to develop interventions for positive masculinity to promote adoption of sexual reproductive health and rights products and service for women of reproductive age Zambia.

The study objectives focused on:

• Generating qualitative insights into how do the current paradigms of masculinity impact women’s adoption of Sexual reproductive health and rights products, services and behaviors.
• Gaining insights to inform subsequent stages of the Human-Centred Design project, and the design of interventions for transformative masculinity and ultimately increase the uptake of voluntary family Sexual Reproductive Health and Rights (SRHR) services among women of reproductive age in Zambia.
• Identifying evidence-based interventions that would be effective for transformative masculinity in order to positively impact women’s adoption of SRHR products and services.
• Identifying the social norm changes required to create a paradigm shift in the understanding and definition of masculinity.

Areas of Inquiry

• Gender roles & how they influence perceptions and behaviors of men and women in society: Particularly looking at how is masculinity defined and impacting men.
• Experiences and views on romantic relationships: What challenges are young people experiencing within relationships?
• Future aspirations of young people: What goals and dreams do they hope to achieve in the future (career, family etc).
• Health seeking habits, experiences & views on family planning and contraceptives uptake as well as challenges they experience affecting SRHR access.
• Thoughts on male engagement in SRHR: Should men be involved in family planning and in what ways?
Research Design
Overview of the Human-Centered Design Process

Human-Centered Design (HCD) is about improving products and services from a user’s perspective. It is about taking a human centered view from the beginning to the end of any improvement journey. Taking a Human-Centered Design approach simply means taking time to explore, innovate and evaluate our products and services with the human in mind.

HCD considers the practicability and resources available to implement solutions. It allows the process of testing ideas early, failing, learning & iterating to improve ideas while building them. The final product is a solution that is desirable, practical, implementable and scalable with demonstrable value.
Research Overview

The project was conducted across two localities in Zambia – Livingstone and Kitwe respectively. ThinkPlace researchers worked in collaboration with Africa Alliance of YMCAs (AAYMCA) research teams from the two regions to conduct exploratory research study applying Human-Centered Design as its methodology.

Multiple Locations

Research was conducted in Kitwe and Livingstone, Zambia.

Capacity Building

Five Research Assistants were recruited from both regions and trained on the HCD design process. This included empathy building, data collection methods, ethics, synthesis and insights generation.

Research Teams

Two ThinkPlace researchers worked alongside local coordinators and 10 Research Assistants.

Data Collection

Multiple methods were used for data collection such as in-depth interviews, focus group discussions, debates & observations, among others. All the sessions were done in locations that were most convenient for our participants.
**Geographical Comparison**

Below is a comparison of the two locations highlighting the differences in participant profiles based on social backgrounds, economic structures and level of exposure.

<table>
<thead>
<tr>
<th>Kitwe</th>
<th>Livingstone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kitwe is a sparsely populated rural area with open swath of land with few homes or buildings.</td>
<td>Livingstone is more of a peri-urban to urban setting. Most community members embrace the city life. There is more development, hence the high population in the area.</td>
</tr>
<tr>
<td>The people of Kitwe area are educated but up to Secondary / Tertiary level. Majority have multiple skills and are hence business-oriented.</td>
<td>Majority of the people are educated up to University level. Literacy levels are high due to the availability and access of Universities and technical colleges in the region.</td>
</tr>
<tr>
<td>Access to mobile technology is limited. They rely on information from friends and media channels such as radio and television.</td>
<td>Most of the population have access to internet and high-powered technology devices.</td>
</tr>
</tbody>
</table>
Overview Of Our Participants

During the research phase, the team engaged with a total of 250 participants from Livingstone and 500 participants from Kitwe respectively. In depth interviews and focus group discussions were conducted with participants from both YMCA membership and the community level to provide a representative sample that reflects the community state as accurately as possible.

<table>
<thead>
<tr>
<th>Target</th>
<th>Livingstone</th>
<th>Kitwe</th>
</tr>
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<tbody>
<tr>
<td>Adult men</td>
<td>114</td>
<td>240</td>
</tr>
<tr>
<td>Adolescent boys</td>
<td>45</td>
<td>115</td>
</tr>
<tr>
<td>Adult women</td>
<td>13</td>
<td>85</td>
</tr>
<tr>
<td>Adolescent girls</td>
<td>36</td>
<td>40</td>
</tr>
<tr>
<td>Community Leaders</td>
<td>12</td>
<td>20</td>
</tr>
<tr>
<td><strong>Total number:</strong></td>
<td><strong>250</strong></td>
<td><strong>500</strong></td>
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TOTAL NUMBER OF PARTICIPANTS FROM LIVINGSTONE AND KITWE

750
Our Key Findings
General Overview

General overview of the groups of themes that came from the research and co-design workshop outputs:

<table>
<thead>
<tr>
<th>About their lives</th>
<th>Sources of information</th>
<th>Role Models</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kitwe is predominantly rural with a higher rate of uneducated youth population reliant on casual labor as a way of income generation.</td>
<td>Adolescents learn of new information and trends mostly from social media than from their peers. Young men and women rely more on close peers and trusted social media channels for information. They are well informed on the risks of getting information from unverified sources.</td>
<td>Adolescents look up to peers and close relatives who they admire or aspire to be like and will often go to them for advice. While young men mostly admire celebrities, high profile businessmen, relatives such as their mothers, and partners have great influence on them.</td>
</tr>
<tr>
<td>Livingstone had a mix of both urban and rural youth. Majority of the participants from the urban setting were educated while those from the rural had not completed school.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Across both regions, finding time for leisure with peers was highly valued.</td>
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### General Overview

#### Family Planning
- Majority of young men have little knowledge on the various methods of family planning.
- Fear of experiencing side effects from family planning is a contributor towards men discouraging their partners from getting on any method.
- Family planning is perceived as something that is only acceptable for married couples, therefore causing FP service providers to show bias towards young unmarried women especially in public facilities.
- Young men are unhappy that their partners would get FP services without their consent or knowledge. Majority of them find out later after their partners have already been on a FP method.
- Men feel left out from SRHR information, training & messaging, regardless few have expressed desire for inclusion.

#### Relationships
- Most relationships are centered on financial benefits and perceived as casual for short-term benefits.

#### Masculinity
- Education and exposure contribute to an open-minded and liberal outlook amongst young men.
- Young men are bound by traditional gender expectations that dictate that men must provide financially as well as satisfy their partners sexually.
About Their Lives

Kitwe is predominantly rural with a higher rate of uneducated youth population reliant on casual labour as a way of income generation.

Majority of the young men were involved in agricultural related business for income among other casual jobs. The levels of education were significantly lower in comparison to Livingstone.

Across both regions, finding time for leisure with friends was valued.

In Livingstone, this was described as friends spending time at social spaces (walks in the parks, drinking spots, eat-outs etc.) mostly at sport activities (handball, rugby, basketball courts) where they frequently met.

In Kitwe, participants described leisure as time spent taking breaks with friends whenever they were free to be together and talk about various issues affecting them.
Adolescents learn of new information and trends mostly from social media than from their peers

Adolescents rely on social media sites such as Facebook to get their information while traditional media like television and radio is common among the older population. Those with limited access to smartphones or data rely on their trusted circles for information.

Adolescents are cognizant of the opinions of their peers. For example, in Livingstone, adolescent boys spoke of getting their peers’ opinions and approval before deciding to pursue a relationship with a girl they like.

Young men and women rely more on close peers and trusted social media channels for information. They are well informed on the risks of getting information from unverified sources.

Young men and women on the other hand rely on direct peers within their close circles. Trust is an important driver on who to seek advice from.

Once a young man or woman gets married, there is a shift in the peers they have. Young men are expected to stop having single friends and get friends who are married. Similarly, married women are expected to find similarly married friends. Social expectations define who your peers should be.
Adolescents look up to their peers and close relatives who they admire or aspire to be like and will often go to them for advice.

Adolescent boys and girls cited the fear of speaking with their parents about relationships and sex but felt comfortable to share with their close aunts or uncles. The was no fear of judgement with the latter, and that therefore led them to have a strong sense of confidence and trust in sharing private information with them. Additionally, the fact that they look up to or admire these relatives contributes to the willingness to confide in them and trust their opinions.

While young men mostly admire celebrities, high profile businessmen, relatives such as their mothers, and partners have great influence on them.

Majority of the young men that we spoke to told us that they looked up to number of local and international celebrities and businessmen. They attributed this to the level of social capital that these individuals had. It was noted that mothers also play a big role especially in the lives of young men who grew up in single-parent homes. They value the input of their mothers, and some admitted to seek partners that had similar traits or mannerisms to their own mothers. For married young men, their partners played a role in influencing them due to the level of intimacy and trust.

"My biggest influence is my mother because she gives the best advice."
- A 19-year-old boy from Livingstone
Family Planning

Majority of young men have little knowledge on the various methods of family planning

Most of the participants were familiar of methods such as condoms, emergency pills, and injections as family planning methods. It was evident that young men were not aware of the specific methods but knew that women and girls could go to facilities to get services. Findings from both regions suggest that sex education in school was low as majority of our participants reported not to having been exposed to the topic of family planning in a formal education setting. It was reported that the community and religious expectations are strictly against adolescents or young unmarried people from engaging in premarital sex.

Fear of experiencing side effects from family planning is a contributor towards men discouraging their partners getting on any method.

This fear is driven by community narratives that people uphold towards family planning. In addition to side effects, family planning is seen as something that may potentially cause infertility. For a couple, it is important that they ensure that they are able to bare children first before getting on any family planning method. Condoms ranked high in preference amongst unmarried partners as the men associated it as a safer method with the least side effects.

“Family planning can bring complications to a woman who has never given birth before, therefore condoms are the best compared to these other types.”

- A young man from Livingstone
Family planning is perceived as something that is only acceptable for married couples, therefore causing FP service providers to show bias towards young unmarried women especially in public facilities.

Young unmarried participants from both regions narrated cases of being mistreated by service providers when they went to inquire or request for SRH services.

As a result of the negative attitude from service providers, young unmarried men and women often shy away from going to openly request for these services. They instead opt for private clinics or pharmacies that are outside their communities where the providers will not recognize them. There is also lack of privacy with accessing contraceptives such as condoms from facilities. Young men spoke of condoms being kept in open counters where they were afraid to pick them. Youth-friendly centers were described as ideal places to access condoms compared to health centers.

The perception that family planning is only for married couples is fueled by the fear of side effects that may result cause one to be barren. Some participants spoke of service providers encouraging married women to have at least a child before taking up a method.

“
I was told because I wasn’t sexually active, I did not qualify for a HIV test.”

- A 17-year-old girl from Livingstone
Young men are unhappy that their partners would get FP services without their consent or knowledge. Majority of them find out later after their partners have already been on a FP method.

Adolescent boys and young men expressed their frustrations about their partners taking up family planning methods without informing them. However, this is because of misaligned expectations whereby women are afraid that their partners will disapprove, while feedback from the men indicated that they wished to be informed about it in advance. Older, and particularly married men did not seem to have any concerns as they saw family planning as a purely woman’s responsibility and decision to make.

Men feel left out from SRHR information, training & messaging, regardless few have expressed desire for inclusion.

Findings from both regions indicate that young men have peer conversations about relationships and sex more often compared to their female counterparts. It is within these peer groups that they share advise or guidance with each other. Therefore, some expressed the desire to be involved in such conversations and programs and not to be left out of these initiatives. This further contributes to the notion from men that family planning is a woman’s issue.

“Let’s teach men empathy for women through involving them from the inception stage when teaching SRHR topics such as reproductive diseases & the effects it’s having on women’s wellbeing.”

- A 26-year-old man from Livingstone
Relationships

Relationships are centered on financial benefits and perceived as casual for short-term benefits.

There is the expectation that relationships should come with financial gains. Adolescent girls and young women expect their partners to be able to provide for their financial requirements. Transactional sex within relationships is present. Young women in their 20s will mostly date older men who can provide financially. The older men who in most cases are married will therefore play a role in facilitating the use of condoms or supporting the young women to take up a family planning method. This leaves young men with fewer options and a negative perception of relationships. In general, community perceives adolescents engaging in sex as promiscuous and a show of disrespect to their guardians. However, for young men and especially women at certain ages, they are encouraged to seek out sexual relationships but with the aim of it leading to marriage.

Teenage relationships despite being frowned upon are rampant and involves sex.

A number of adolescents are in relationships despite society expectations that they should not be. While girls expect financial gain from these relationships, boys in return expect sex. Guardians discourage teenage relationships and will advice their children, especially the girls, to stay away from early relationships but will often avoid discussing matters about sex. However, it is openly known that teenagers are getting into sexual relationships even though its is not widely accepted. The norm seems to be shifting as teenage relationships are becoming rampant and silently tolerated by the general community.
Masculinity

Education and exposure contribute to an open-minded and liberal outlook amongst young men.

There was an observable difference between educated and non-educated. Majority of the educated young men, especially in Livingstone, exhibited a liberal mindset. They were open to having equal power dynamics with their partners on financial, family planning decisions, among others. Resultantly, they are more likely to support and advocate for their partners’ freedom of choice and decision-making on SRH matters. Self-care was an important element for this audience as they saw the value for themselves as well as exhibited empathy for their partners.

On the contrary, the non-educated young men showed more of a traditional mindset whereby they showed unwillingness to equally share decision-making power with their partners. Therefore, hindering sexual reproductive health choices and they would not allow their wives or girlfriends to take up a method either because of the fear of infidelity or fear of side effects.

“ If women go 50/50, they will lose respect for the man, especially if she is more educated than him.”

- A 24-year-old man from Livingstone
Young men are bound by traditional gender expectations that dictate men must provide financially as well as satisfy their partners sexually.

Culture influences the expectations and behaviors that are seen as appropriate for men and women. Traditionally, men are seen as the providers while women are home caregivers. Despite the modern-day advancements in gender equality and equity, some of the traditional norms have held strong and evolved along with society.

Men are still seen as the providers and financial custodians and are therefore expected to provide for the women and dependants in their lives. Even with teenage relationships, girls expect their boyfriends to be able to buy them gifts and take them out on dates. Therefore, girls and young women will seek out partners that can provide for their financial and sexual needs.

Majority of young women mentioned that a partners’ financial status and sexual performance is a priority for a long-term commitment. Resultantly, there is pressure on the men to align with these set expectations.
This was a two-day virtual workshop that brought together the Co-investigators, Research Assistants and Branch Coordinators from Kitwe and Livingstone to iterate on the findings from their research phase with the aim of co-designing interventions based on user feedback.

This was an intense session that enabled the team to collaborate through a comparative analysis of the two regions to point out key differences and similarities.

The following section highlights personas that were developed during the Ideation Workshop.
Our Personas
Overview Of Our Personas

Personas are fictional characters that we created based on our research in order to have a representation of the different profiles of people we interacted with. Creating personas helped us understand their needs, experiences, behaviors and aspirations. They are an important tool for the continuation of empathy for our user profiles throughout the design process.

Below is an overview of the four personas that we developed in the Ideation Workshop.

<table>
<thead>
<tr>
<th>Ben</th>
<th>John</th>
<th>Joy Boy</th>
<th>Lulu</th>
</tr>
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</table>

### About me

I’m a 17-year-old form four student. I have two girlfriends, one is 15 and 24 years old. I hate studying, I’ve never been a fan of school. I often have transactional sex because I need the money to sustain my 15-year-old girlfriend since I don’t have a job. I don’t get along with my parents, they don’t seem to understand me. We are constantly fighting, with my mum always telling me how she wishes I’d change my behaviors. Let me just say, I don’t get along well with people in general.

### Family Planning Knowledge

I don’t know much about family planning. I’ve heard of other guys who use condoms with their sexual partners, but I’ve never used them with mine. Why should I?

### Sources of Information

I have a smart phone that I normally use to engage with my friends on Facebook. I find it easy to access and use, plus I get to keep updated with the latest news and gossip.

### Future Aspirations

Honestly, I don’t have any solid ambitions for my future. I don’t like school, I keep getting bad grades, and that has me constantly in problems with my folks who hope for a turn-around. They say I’m living a dangerous life and that change will help me for the better.
John - the conservative one

About me
I’m a 30-year-old farmer. I’ve been married for five years and together, we have one child. My farming business has its challenges since I live in a remote area, so getting to my customers is generally difficult, but it’s been good in that it has helped me provide for my family over the years.

Family Planning Knowledge
I’m a strong supporter of family planning because it’s a good way of ensuring my wife can plan for our children. She’s on the traditional beads method that she learnt from my mother. Most women here, just like my wife, use this method because it is culturally and traditionally expected of them to do so.

Sources of Information
I have no access to a smartphone. Apart from my radio, I usually rely on my friends for information on current affairs.

Future Aspirations
I hope to grow my farming business and see it be the biggest in the region. I’m confident that will make me able to give my family a better life.
### Joy Boy - the cautious one

**About me**

I’m a 26-year-old man from the urban region of Livingstone. I have a fiancé to whom I’ve been dating for 4 years now. We are sexually active. I’m currently a student at a local teachers’ training institute, and I’ll be graduating in the next 2 years. I’m a part-time tutor for high school students who require tutoring services mainly on weekends. Apart from that, I take on any descent casual job that has good money.

### Family Planning Knowledge

My partner and I talk about family planning, though I’ve heard a lot of myths on contraceptives from my social circles that have resulted in making opt for the condom as the only form of pregnancy prevention for my partner and I, it has no side effects.

### Sources of Information

I have a smart phone that I use to mainly access social media platforms such as Twitter that I trust a lot. I’m not a big fan of Facebook because most accounts there are fake. I also get information from my friends in school, friends at work and friends from the soccer games that I attend once in a while.

### Future Aspirations

I hope to build a tuition centre where young people will be able to pay a small fee to learn various subjects. I also hope to build my own school one day. I’m deeply inspired by a lecturer at my school who has done the same, I’d like to be like him. My father is also my role model, he’s a good family man with very good morals.
Lulu - the self-aware

About me

I'm 16 years old, and I live with my grandmother. I perform averagely at school. I take a lot advice from my grandmother, we are very close. I’m social and I like hanging out with my friends who unfortunately like to party, take alcohol and are sexually active. I however chose to abstain from such activities and instead, run sessions at my Church in different youth groups. That helps me stay grounded.

Family Planning Knowledge

I’m single and not sexually active. I’m however aware of the different methods of family planning because they are taught in school. I talk about such things a lot with my grandmother and I’ve vowed to remain a virgin until marriage.

Sources of Information

I own a smart phone and I use social media platforms to get more information on what I’m learning at school. I like Facebook and WhatsApp as they help me connect with my friends.

Future Aspirations

I don’t particularly like my friends’ behaviors, despite them being close to me. I hope to help them turn around and change their ways one day. I currently assist with peer mentorship trainings in my Church, and so far this has helped change three of my friends. I see myself being a youth mentor in future!
Our Key Insights

This section comprehensively shares our deepest understanding of the areas we investigated in the research phase.
Insight number

01

Young women are afraid of sharing SRH-related matters with their partners in fear of not being supported. They result in secretly acquiring their preferred methods in hopes that their partners don’t find out.

Findings from both regions suggest that young women often fear discussing family planning-related issues with their partners due to their perception that they will not get the support that they need. The young men, however, have been reported saying that they hoped to be included in these issues as it equally involves them. It is also reported that these young men have low knowledge on SRHR-related issues and is attributed to the limited exposure to avenues where they would ideally learn from.

It is reported that young unmarried women often acquire these services from trusted sources, often out-of-community facilities or pharmacies, from providers who are not familiar with them. They do this in secret, and only share and discuss this with small trusted circles, often with their peers.

Design Opportunity

How do we create a safe space for young women to openly discuss issues around SRHR without fear of judgement or not getting the support they require?
Less-educated / exposed men are generally less supportive of SRHR-related matters due to their strong traditional and cultural ties. They have strong beliefs about equality, and often position the women in their lives as their dependants who’s primary role is to take care of the home as well as the children.

Well-exposed men had a strong sense of awareness on matters regarding equality. They openly spoke about the values of an all-inclusive approach when handling SRHR issues, adding that they fully supported their partners in accessing SRHR services as it was a good way of securing their wellbeing. This was however different between who were uneducated and less exposed. They were vocal about their stand against equality matters, terming them as practices that went against their traditional and cultural believes. In this setting, it’s strongly believed that a man’s position is as the head of the home, and that in return gives him autonomy and decision-making power in the family setting.

The woman in return is left with little or no bargaining power over issues such as uptake of family planning and her willingness to financially contribute and take part in supporting to the family.

Design Opportunity

How do we amplify the voices of pro-SRHR men among their peers who have a negative perception towards equality and inclusivity?
Health care providers advocate for SRHR services exclusively for married couples and not young men and women. They are vocal about their stand against the young accessing these services and often decline to offer these services to them based on their age, exposure and marital status.

It was reported that health care providers are against young unmarried men and women accessing SRHR services. Apart from stigma, it was reported that they are generally of the opinion that FP is ideally meant for married couples who have conceived as this is an ideal next step of child spacing after validating that they are able to get children.

This in return acts as an access barrier for young people who are sexually active from getting the services and information that they acknowledge and require.

Our findings further indicate that the lack of privacy in these facilities acts as a big barrier to access as majority of our participants stated that they preferred going to out-of-community facilities or pharmacies where are not known to access these services.

**Design Opportunity**

How do we break the norm around stigma from health care providers towards young men and women who require quality SRHR information and services?
This section provides an overview of suggested concepts that have been guided by our key insights. It has also factored in the location for testing, the profile of people we’ll test with, their level of desirability and the desired change after testing.
A safe space for couples as well as single men and women to openly discuss issues around SRHR without fear of judgement.

The idea

A forum for young people to share their experiences regarding SRHR with the aim of addressing issues such as myths and misconceptions, side effects, stigma, gender dynamics and general knowledge. It was reported that privacy and negative reception in local health facilities resulted in young women opting to go to neighboring communities to access these services. This forum will be structured in a way that it ensures these core issues are addressed by a trusted source.

Youth-friendly centres were reported to be the preferred location for accessing such services. We can therefore explore the option of collaborating with a selected number of them and running a series of small sessions facilitated by trained personnel who will run discussions with young men and women regarding their current pressing issues. It will not be a lecture-based session, but one that will allow the ones in attendance to freely share their opinions and testimonies for a group discussion and non-judgemental advice.

Objective

- To create a space for young people to get the right information on SRHR in regards to use, side effects, services, general issues such as gender dynamics amongst other relevant issues.
Amplifying the voices of pro-SRHR men among their peers who have a negative perception towards equality and inclusivity.

The idea

One of our findings around masculinity suggest that traditional norms create a space for men to justify their dominant position in society and in their family setting as the leaders who are expected to solely provide for their dependants. Majority of participants who shared these sentiments were from low-income areas, an indicator that the level of education and exposure was generally low.

This concept will look into exploring ways of mobilizing popular but less-vocal pro-SRHR men from these communities and engage them in an awareness campaign focused on them narrating the benefits of SRHR, not only from a health perspective, but from a family welfare angle in form of testimonies of the benefits of having their wives/partners also financially contributing to the family.

Objectives

- To break the current norm around masculinity as an individual role of financially providing for the family as well as being the sole decision-maker on issues that involve both the man and woman.
- To enable men to gain social capital amongst their peers from their level of all-round support towards their partners.
Changing norms around stigma from health care providers towards young unmarried populations who see them as a reliable and trusted source of SRHR service provision.

The idea
Our investigation on health seeking behaviors indicated that stigma and lack of privacy acted as two major barriers for access of SRHR information and services. Majority of our young and unmarried participants said that they wished to access these services from within their communities due to convenience and qualification of these providers, but were often faced with judgement from providers who profiled them for being too young for such services.

This idea will look into creating champions within the health care space by identifying young, renowned, youth-friendly providers who will echo the voice of the young community members through empathy-driven messaging campaigns aimed at creating awareness to other health care providers on the pressing issues in their communities.

Objective
• To establish champions who will encourage young couples to visit facilities together for SRHR information and services.
• To reduce cases of stigma against young populations who want to access trusted information and services from qualified service providers.
Next Steps
**Next Steps**

We will develop prototypes aided by the 3 design opportunities, taking into consideration the different design elements, study objectives and project area of inquiries that will be brought out in each concept. Testing will be done in the 2 study locations ideally across 8 days where 2 ThinkPlace designers will collaborate with the Research Assistants in developing and testing out the interventions. Further testing and monitoring will continue after the ThinkPlace designers hand over to the local YMCA team.