TESTED SOLUTIONS FOR
Although an unplanned pregnancy can adversely affect an adolescent’s future health and education, use of modern contraception among adolescents aged 15-19 remains low. Effective solutions empowering adolescents to make informed choices about family planning (FP) services are limited. Peer referral is a promising channel to reach youth, but does not always succeed in improving access to services.

In close collaboration with providers, community mobilizers, and adolescent girls in Uganda we developed an evidence-based peer-referral and clinic welcome program using behavioral design. Findings from a randomized controlled trial showed an increase in adolescent uptake of FP counseling and services as a result.
How to Use This Guide

This tool guides you through the how-to of the program components so you can see if you may want to adapt and implement this program in your own setting.

1. Learn more about the design components of the program.
2. Consider how these could be useful for your programming.
3. Download the actual files of the designs for implementation.
4. Read more about the formative research or pilot test results.
How the Program Works

1. A girl who has received FP counseling or a method receives a refer-a-friend (RAF) card from a provider or community-based mobilizer.

2. Girl shares the RAF card with a friend, spurring a conversation about why girls like them may choose to use contraceptives.

3. Friend redeems RAF card at the clinic for a pair of wristbands and is offered FP counseling.

4. Clinic environment and welcoming care from providers emphasize to young clients that they belong.

5. Youth clients who choose to receive FP counseling receive a new RAF card to give to another friend.
Program Components

Refer-A-Friend Card
A card to encourage information sharing among peers.

Friendship Wristbands
A small incentive to visit the clinic now, rather than procrastinating.

Clinic Environment Materials
Staff nametags and posters that create a welcoming environment for adolescents.

Youth-Friendly Services
A provider training to build capacity in delivering quality sexual and reproductive health services to adolescent clients.
Peer education initiatives that rely on formal training and roles to approach potential beneficiaries of a program have had limited success. A friend’s personal endorsement is uniquely valuable in supporting girls to envision themselves using FP and empowering them to visit a clinic to learn more. However, girls who use (or consider) FP don’t always discuss it with their friends.

The RAF card creates an opportunity to discuss FP and share information and advice. By articulating their own reasons for using FP, referrers build their confidence and solidify their motivation, while recipients receive an endorsement from a trusted peer.

“I felt very good because all along I wanted family planning because I did not want to have another child immediately when this one is still so young. So when she gave me the card, I felt good since I wanted family planning so much.”
- Client

“After taking them through counseling and explaining the whole process of family planning they ask for the RAF cards to be able to refer their friends.”
- Provider
How the Refer-A-Friend Card Works

1. Providers or community-based mobilizers distribute RAF cards to girls who have received FP counseling or a method.

Leverages girls as FP advocates to their peers and signals that girls are invited to and welcome at clinics.

2. Girl shares the RAF card with a friend who does not use FP.

Provides girls with an endorsement from a trusted peer and builds confidence for the referrer.

3. Card spurs a conversation about why girls like them may choose to use contraceptives.

Illustrates FP as an option within their choice set and solidifies the referrer's motivation to access FP services.

4. RAF cards can be redeemed at the clinic for a pair of friendship wristbands.

Motivates girls to visit clinics with a small incentive and a commitment to their peers.

5. Youth clients who choose to receive FP counseling receive a new RAF card to give to another friend.

Drives additional peer referrals by satisfied clients.
Refer-A-Friend Card

Considerations for Adaptation and Implementation

• Ensure that the card design is attractive and appealing to the target population, and that the reasons for using FP resonate in the local context.

• Encourage girls to check off their own reasons for using FP on the card before giving to a friend.

• Discretion and anonymity are often important to adolescents, so it is important that the card does not include space for a name or any identifying information.

• Consider whether any other groups (such as adult women or boys) could also be trusted advocates for FP. The best advocates are those who can speak about how they have used or considered FP and have a close personal relationship with girls who may benefit from services.
Friendship Wristbands
Giving adolescents a reason other than FP to visit the clinic now

Adolescents are rarely prompted to make decisions about whether FP is right for them. Even if they have a desire to use FP or seek more information, they often fail to follow through on visiting the clinic. Furthermore, without a specific prompt or motivation, girls who already use FP may decide not to share their experience with friends.

The friendship wristbands invite conversations between peers, prompt girls to consider the reasons FP may be right for them, and signal that adolescents are invited and welcome at the clinics.

“The process is easy, you know girls like these wristbands so much. So when they get it, their friends ask them, ‘Where did you get it from?’ and they say ‘Deffa clinic. I went to get family planning to avoid early pregnancies or delay pregnancy and was given this.’ So they also request to come and get services and then get the wristband.” - Provider

“If someone sees you putting on the wristbands they can easily ask for the details about them. Now neighbors who are my age at times ask me and I explain to them to come to the facility for more information.” - Client
How the Friendship Wristbands Work

1. Girl redeems a RAF card for two wristbands at the clinic.
   
   Provides a small incentive for girls to give RAF cards and to redeem at the clinics sooner rather than later.

2. Girl gives one of the wristbands to the friend who referred her.
   
   Fulfills a sense of commitment to the referring friend and prompts additional discussion.

3. Girl wears her wristband at school and in the community.
   
   Provides a visible yet discrete signal that peers use or consider FP and the clinic is welcoming to adolescents.

4. Friends compliment or inquire after the wristband.
   
   Serves as another prompt for information and RAF card sharing among peers.
Considerations for Adaptation and Implementation

• It should be stressed during program training and during RAF card distribution that girls are not required to take up an FP method to receive the friendship wristbands.

• The wristbands (or alternative item) should be attractive to adolescents, but they should not have great enough value that they would convince a girl who is not interested in FP to visit a clinic. In other words, they should offer some extra motivation for a girl to follow through on her intention, but not convince girls to change their minds.

• Consider girls’ privacy; wristbands should be neutral enough to not attract unwanted attention.

• Consider other small promotional items that might be appealing to the girls your program reaches – a scarf, hair bow, button, or other item might resonate more than a wristband.
Girls may believe that adult providers will judge them or refuse to deliver services, or feel intimidated about approaching a provider if they do reach the clinic. If they don’t see other girls in the clinic, they may assume they don’t belong.

**Materials in the clinic environment** signal that adolescents are welcome to and belong at clinics and that providers are committed to serving youth. Consistent branding across program materials reinforces that FP is an option for adolescents and consistent with a positive identity.

“*The clients like the poster very much and it builds their confidence. If it’s a girl, she feels like she’s not alone when taking up a method.*”
– Provider

“The name tag helps the young girls approach me easily for FP services.”
- Provider
How the Clinic Environment Materials Work

1. Girl arriving to clinic waiting room sees a signed poster stating a commitment to serving youth. Signals to adolescents they are welcome and belong at the clinic.

2. Girl is greeted by a provider wearing a name tag with the program logo. Makes providers appear more approachable and less intimidating.

3. Girl sees a poster illustrating range of reasons youth use FP inside the counseling room. Reinforces FP as an option consistent with a positive self-image.

4. Provider hangs girl’s redeemed RAF card (which does not identify her) on the poster with her permission. Signals to counseling recipients that other girls use or have considered FP.
Considerations for Adaptation and Implementation

• Clinic service providers should sign the welcome poster indicating their commitment to serving youth and it should be placed where it can be seen from the entrance or waiting area.

• All program materials should have consistent branding so that they are easily recognizable to youth first exposed to the RAF cards.

• The poster displaying redeemed RAF cards should be kept in the counseling room and not contain any identifying information to respect clients' confidentiality and privacy.

• Consider what other materials are displayed in clinics; where walls are crowded with other materials, a poster may be less effective in catching clients' attention.
Adolescents often have unique reproductive health questions and concerns and face unique barriers to accessing FP. Providers may have negative attitudes about adolescent sexual behavior or may simply not fully understand the context in which adolescents live because they do not serve many young clients or have not been trained specifically on sexual and reproductive health service delivery for young people.

When a new adolescent client receives a warm welcome and excellent service, she may be more likely to take up a method, return for other services, and refer her own friends.

Youth-friendly services training builds knowledge, skills, and capacity for service providers to deliver quality and appropriate sexual and reproductive health services to young clients in a way that respects their dignity, privacy, and autonomy to make an informed choice. It also builds providers’ confidence and reaffirms a commitment to serve youth.

“Yes it has helped me mostly in counseling because I have not been getting a chance to chat with the adolescents. Now when I am with them I see they have got some confidence in me.”
- Provider

“When I came I was warmly welcomed and served diligently.”
- Client
How the Youth Friendly Service Training Works

1. Service providers participate in a facilitated 3-day training dedicated to adolescent health. Emphasizes appropriate service delivery for adolescents as a clinic priority.

2. Providers clarify and articulate their values, beliefs, and attitudes that inform service delivery for adolescents. Separates personal beliefs, myths, and biases from professional responsibilities and factual information.

3. Providers engage in exercises to effectively build rapport and communicate with adolescents seeking services. Builds knowledge and skills for service providers to apply in their own work and to demonstrate empathy toward clients.

4. Participants write and share out personal commitments to improve services with the group. Affirms commitments to provide adolescent and youth friendly services.
Considerations for Adaptation and Implementation

• Any service providers that may come in contact with adolescent clients should receive some form of youth-friendly services (YFS) training.

• YFS training could be adapted, streamlined, or integrated into existing trainings depending on local needs and context.

• Consider building YFS training into the standard onboarding programs for new staff so that there is less disruption from trained staff turnover.
Additional Resources

LEARN MORE:

• Empowering Adolescent Girls as Peer Advocates for Family Planning
  Summary brief on the design and test of the program

• Empowering Girls as Agents of Change in Preventing Unplanned Pregnancy
  Narrative blog post on designing for girls’ agency

• Randomized Controlled Evaluation of the Program
  Research manuscript of evaluation results

• A Resilient Design in a Challenging Year
  Narrative blog post on implementation during the COVID-19 pandemic
Help empower adolescent girls to make informed choices about family planning. Take action now.

For more information about our tested solutions for adolescent FP uptake, contact the ideas42 Global Health Team at gh@ideas42.org