This document is intended to capture what we learned during the inspiration phase in Nigeria. It reflects the voices of the people the team spoke with and provides the A360 Consortium with a springboard for design opportunities.
INSPIRATION PHASE SO FAR

**SCOPE:** In October 2016, our multi-disciplinary field team set out to learn about the lives of adolescents in Nigeria, focusing on their access to, and attitudes towards, reproductive health services. We conducted research in the south in Lagos state and in the north in Kaduna state. These locations were selected because they were considered representative of the target populations of northern and southern Nigeria, respectively.

**METHODS:** We used IRB–approved research methods to spark conversations with girls and community members about values, community norms, and experiences.

**LIMITATIONS:** We were inspired by the girls’ stories and narratives that we heard, but our research was limited to the types of girls who were available at the research communities. The insights and opportunities outlined here are not comprehensive of everything we heard, but are highlighted for design potential.

**ETHICS:** All participants gave consent or assent to talk with us. No names have been used to assure confidentiality and anonymity.
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 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.
## Contents

<table>
<thead>
<tr>
<th>Page</th>
<th>Section</th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
<td>OUR PROCESS</td>
</tr>
<tr>
<td>12</td>
<td>CONTEXT</td>
</tr>
<tr>
<td>19</td>
<td>A360 FORMATIVE RESEARCH NIGERIA</td>
</tr>
<tr>
<td>25</td>
<td>PROLOGUE</td>
</tr>
<tr>
<td>30</td>
<td>NORTHERN NIGERIA: EMERGING INSIGHTS</td>
</tr>
<tr>
<td>98</td>
<td>SOUTHERN NIGERIA: EMERGING INSIGHTS</td>
</tr>
<tr>
<td>170</td>
<td>DESIGN OPPORTUNITIES</td>
</tr>
</tbody>
</table>
OUR PROCESS
Inspiration bootcamp & formative research
Synthesis in San Francisco
Synthesis in Kaduna
Abuja Insights Workshop
FANTASTIC!
CONTEXT
Sexual Activity
OF GIRLS AGED 15—19 IN NIGERIA

35% OF GIRLS HAVE HAD SEX
17% OF GIRLS HAVE BEEN MARRIED
11% OF GIRLS HAVE BEGUN CHILDBEARING
16 MEDIAN AGE OF SEXUAL DEBUT
16 MEDIAN AGE OF MARRIAGE

(NATIONAL DEMOGRAPHIC HEALTH SURVEY, 2013)
Contraceptive Use
OF GIRLS AGED 15—19 IN NIGERIA

ADOLESCENT mCPR BY STATE

CONTRACEPTION USE & INTENTION

1%
USE TRADITIONAL METHOD

7%
USE MODERN CONTRACEPTIVE METHODS

36.6%
USE NO METHOD, BUT INTEND TO USE

56%
USE NO METHOD, DO NOT INTEND TO USE

(PSI LANDSCAPE SUMMARY, 2016)

(NATIONAL DEMOGRAPHIC HEALTH SURVEY, 2013)
Only 12% of girls complete secondary education, and 1% complete post-secondary education.
Technology Access
OF GIRLS AGED 15—19 IN NIGERIA

78% OWN A MOBILE PHONE
37% HAVE WEEKLY ACCESS TO RADIO
37% HAVE WEEKLY ACCESS TO TELEVISION
10% HAVE WEEKLY ACCESS TO NEWSPAPER
**Segmentation: North**

**SARATU**
Saratu is Christian, lives in a city, is unmarried, and has no children. She is probably sexually active, has had more than one sexual partner, and is the most likely to have experienced sexual violence.

**AISHA**
Aisha is Muslim and Hausa-Fulani. She is likely married, lives in a rural environment, and has children. She is the least likely to be in school.

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**Segmentation: South**

**OMOLARA**
Omolara is Christian, unmarried, and sexually active but does not have children. She has finished secondary school and lives with her parents.

**MOPELOLA**
Mopelola is among the most diverse of the sample populations. She is likely a Christian, lives in a rural environment, is not yet sexually active or married. A small proportion are married with children.
The A360 segmentation helped us orient to the research context. During our research, we spoke with girls reflective of the four segments. However, as stories emerged, we found that the reality of girls’ lives is more nuanced than allowed for by the segmentation.
A360
FORMATIVE RESEARCH
NIGERIA
Where we went

INTERVIEW SESSIONS

217

123
KADUNA STATE

94
LAGOS STATE
Who we talked to

365
PEOPLE
INTERVIEWED

105
ADOLESCENT GIRLS

72
ADOLESCENT BOYS

34
MOTHERS

38
FATHERS

31
MALE PARTNERS

50
COMMUNITY INFLUENCERS

24
CLINICAL PROVIDERS

11
OTHER SERVICE PROVIDERS
Girls we talked to

- **NORTH**

- 20% MARRIED
- 18% HAVE BEGUN CHILDBEARING
- 38% MUSLIM
- 61% CHRISTIAN

**AGES OF GIRLS**

- 8% (16 YEARS)
- 12% (16 YEARS)
- 22% (17 YEARS)
- 44% (19 YEARS)
- 14% (18 YEARS)

**EDUCATION LEVELS OF GIRLS**

- 62% SECONDARY
- 20% PRIMARY
- 10% PAST SECONDARY
- 6% QURANIC
- 2% NONE

**Religions of Girls**

- 61% MUSLIM
- 38% CHRISTIAN

**Primary Education Levels**

- 20% PRIMARY
- 10% PAST SECONDARY
- 6% QURANIC
- 2% NONE
- 62% SECONDARY
Girls we talked to

6% MARRIED
6% HAVE BEGUN CHILDBEARING
40% MUSLIM
59% CHRISTIAN

AGES OF GIRLS
- 20% 19 YEARS
- 21% 16 YEARS
- 14% 18 YEARS
- 18% 17 YEARS

EDUCATION LEVELS OF GIRLS
- 53% SECONDARY
- 41% PRIMARY
- 4% PAST SECONDARY
- 2% NONE

SOUTH
A NOTE ON LANGUAGE:

In this document, our reference to “adolescents” is based on our field interviews and may not be representative of the larger country context.
PROLOGUE
Adolescents in Nigeria have a clear vision for their futures.

They know who they want to be and what they want to achieve.
In the north, many adolescent girls dream of finishing secondary school, getting married, having a family, and then continuing their education.

In the south, many adolescent girls dream of finishing school, learning a trade, gaining financial independence, and then getting married and having a family.
However, there are economic, social, and contextual factors that often stand in the way of achieving these dreams.
By protecting and improving girls’ sexual and reproductive health, we can mitigate some of the barriers they face on their journeys, and empower them to work towards the futures they envision.
Northern Nigeria: EMERGING INSIGHTS for Design
NORTH TRAJECTORIES
The ideal trajectory for an adolescent girl in the north includes finishing secondary school, and then getting married and having a family.

In reality, early marriage and childbearing is common, often due to parental concern with morality. In addition, many girls undergo abortion to protect her and her family’s reputation and complete school.
The ideal trajectory

14 15 16 17 18 19 20 21 22 23 24 25

FOCUS ON SCHOOL 
& MAINTAIN ABSTINENCE
GRADUATE SECONDARY SCHOOL
GUIDED COURTSHIP
GET MARRIED
HAVE FIRST CHILD
WORK, LEARN A TRADE, RETURN TO SECONDARY SCHOOL, ATTEND POST-SECONDARY SCHOOL, OR CARE FOR FAMILY FULL TIME
HAVE SECOND CHILD
For girls who do not go to school, marriage is usually arranged in adolescence.
When a girl is discovered to be sexually active, her parents may arrange an early marriage.
Pregnancy leads to many paths.

14

GET PREGNANT

KEEP BABY

PARENTS DISCOVER THAT SHE HAS SEX

DROP OUT OF SCHOOL

GRADUATE SECONDARY SCHOOL

GET MARRIED

HAVE FIRST CHILD

HAVE SECOND CHILD

POSSIBLE REPEATED ABORTIONS & USE OF TRADITIONAL CONTRACEPTIVE METHODS

WORK, LEARN A TRADE, ATTEND POST-SECONDARY SCHOOL, OR CARE FOR FAMILY FULL TIME

PARENTS DISCOVER THAT SHE HAS SEX

DROP OUT OF SCHOOL

GRADUATE SECONDARY SCHOOL

GET MARRIED

HAVE FIRST CHILD

HAVE SECOND CHILD

WORK, LEARN A TRADE, ATTEND POST-SECONDARY SCHOOL, OR CARE FOR FAMILY FULL TIME

MAYBE REPEATED ABORTIONS & USE OF TRADITIONAL CONTRACEPTIVE METHODS

WORK, LEARN A TRADE, RETURN TO SECONDARY SCHOOL, OR CARE FOR FAMILY FULL TIME

POSSIBLE REPEATED ABORTIONS & USE OF TRADITIONAL CONTRACEPTIVE METHODS

WORK, LEARN A TRADE, RETURN TO SECONDARY SCHOOL, OR CARE FOR FAMILY FULL TIME

WORK, LEARN A TRADE, RETURN TO SECONDARY SCHOOL, OR RELY ON FAMILY & MEN FOR SUPPORT

POSSIBLE REPEATED ABORTIONS & USE OF TRADITIONAL CONTRACEPTIVE METHODS
The Adolescent’s World
In general, adolescent girls want to finish school, learn a trade, and then get married and have children. Parents also see this as ideal, but believe early marriage protects moral standards.
“If a girl marries, even without education, at least you have given her out.”

— MOTHER, IGABI
Girls dream of finishing school to prepare themselves for their futures.

“My dream is to become a nurse to help the sick.”
— UNMARRIED GIRL, CHIKUN

“If my parents agree, I will like to further my education before getting married.”
— UNMARRIED GIRL, IGABI

“I want to go to school. Even if I do not work, I will help my children with their school work.”
— UNMARRIED GIRL, IGABI

“Finishing school is important, after which marriage should follow.”
— UNMARRIED GIRL, IGABI
Parents also prefer girls to finish school, but marriage is more important.

“Any girl that is not married at the age of 20 is considered a leftover.”
— UNMARRIED GIRL, IGABI

“My parents decided to get me married, but I wanted to further my education.”
— MARRIED GIRL, IGABI

“Most parents in this community do not allow their daughters to go past secondary school.”
— UNMARRIED GIRL, IGABI

“22 years is okay for a girl to marry, then she would have finished secondary school.”
— UNMARRIED GIRL, IGABI
Parents hope to marry girls off before they become sexually active to avoid shame on the family.

“Anytime my girl is 14, I marry her off so she doesn’t get into problems.”
— MOTHER, IGABI

“The most important thing is to get married right now, as it will help me not to follow boys.”
— UNMARRIED GIRL, IGABI

“Some parents marry off the adolescent girl as a means of security—to avoid pregnancy outside marriage and promiscuity.”
— MARRIED GIRL, IGABI

“Once a girl gives birth before marriage, she becomes second hand.”
— COMMUNITY INFLUENCER, CHIKUN
How might we help adolescents achieve their vision for their future?

**BRAINSTORM CONSIDERATIONS**

How might we:
- Promote and emphasize the benefits of contraception for married women and their families after their first child?
- Position contraception as a way to help married and unmarried girls finish secondary school?
- Create opportunities for SRH counseling and education for unmarried girls?
- Create a win-win platform valued by parents and girls because it enables girls to marry and stay in school?
Despite adolescent girls' trust of their mothers, there is limited or unclear discussion of SRH issues among parents and adolescents.
“Not all mothers feel comfortable or free to talk to their adolescents about sex or sexuality due to culture and religion.”

— PROVIDER, IGABI
Adolescents trust their mothers more than anyone.

“My mother is the most trusted person to talk to about sex issues.”
— UNMARRIED GIRL, IGABI

“I trust my mother most because she will tell me what is good.”
— UNMARRIED GIRL, IGABI

“Many mothers are aware of their daughters’ sexual relationship with boys.”
— MALE PARTNER, CHIKUN

“But mother is more than father, as she will know before father anything about the girls.”
— MOTHER, CHIKUN
Adolescents and parents are hesitant to discuss SRH with each other.

“Some fathers are very harsh and that drives adolescent girls from them. They cannot discuss together.”
— FATHER, CHIKUN

“Parents feel shy about sex education and they don’t teach in detail or communicate the right thing.”
— PROVIDER, CHIKUN

“Parents will be shy to talk to their children about reproductive health and sexual health.”
— PROVIDER, CHIKUN

“All the topics should be discussed with young girls from a professional point of view, but with my own children, I cannot.”
— PROVIDER, CHIKUN
Adults believe family members and teachers are appropriate sources for SRH education, but they are not providing it.

“Religious leaders should be talked to because people believe in them and if they are to enlighten then it will be less stressful.”
— PROVIDER, CHIKUN

“Fathers are also shy to talk to their children about such things.”
— PROVIDER, IGABI

“There should be improvement of sex education in schools, mosques, churches, and homes.”
— COMMUNITY INFLUENCER, CHIKUN

“Teachers are also most responsible to talk to adolescent girls about SRH and pregnancy, as there are some things parents cannot tell their children.”
— COMMUNITY INFLUENCER, CHIKUN
How might we build on adolescents’ trust for their mothers to enable informed, comfortable discussions on SRH?

BRAINSTORM CONSIDERATIONS

How might we:

- Build parents’ confidence to have conversations with their adolescents about SRH?
- Shift adults’ perception that discussion of SRH equals permission to have sex?
Access to technology—especially phones—connects adolescents to the outside world and provides privacy, but exposes them to sexual content at a young age. This access scares adults because it feels outside their control.
“Through WhatsApp boys communicate with girls without their parents knowing.”

— COMMUNITY INFLUENCER, IGABI
ON TECHNOLOGY:

Phones are a common source of sexual exposure for girls and boys.

“Boys here use social media to watch and see stuffs [pornography and nude pictures] and want to try it out.”

— BOY, CHIKUN

“Phone use exposes girls to contraceptives and pornography in the community.”

— PROVIDER, IGABI

“My friends use sex chats to get girls to bed.”

— BOY, CHIKUN

“Cell phones are used to download pornography.”

— FATHER, CHIKUN
ON TECHNOLOGY:

Phones allow girls and boys to discuss relationships and sex without parental interference.

“My phone is my privacy.”
— UNMARRIED GIRL, CHIKUN

“Girls know more than their parents. This info they learn through social media.”
— MOTHER, IGABI

“Phones are used to organize meetings and hook-ups between girls and men. A girl may have three men.”
— MOTHER, IGABI

“If my mum is not at home, I get information through my phone.”
— UNMARRIED GIRL, CHIKUN
ON TECHNOLOGY:

Parents want to protect their children from exposure to sex via phones.

“The use of phones makes some girls get involved in bad things.”
— FATHER, IGABI

“GSM has made it worse, now the girls will just receive a call and disappear.”
— FATHER, IGABI

“GSM phones make boys call girls; that is why I don’t allow them to have it.”
— FATHER, IGABI

“I’m not supposed to give her a phone because she will talk with the boyfriend.”
— FATHER, CHIKUN
How might we maximize the positive potential and limit the negative impact of technology on adolescents’ SRH knowledge?

BRAINSTORM CONSIDERATIONS

How might we:
• Leverage the digital platforms used by adolescents to create a private, enjoyable SRH learning experience?
• Increase parents’ comfort with adolescents’ use of technology?
Sex & Pregnancy
Getting money to meet their personal and their parents' needs is a major driver of sexual activities amongst adolescent girls.
“If you don’t provide for a girl, she will sleep with men to get it.”

— BOY, CHIKUN
Money motivates girls to seek sexual relationships.

“Girls turn to sex as a result of poverty and hunger.”
— UNMARRIED GIRL, IGABI

“Some girls sell their body just to get money to buy a phone.”
— MALE PARTNER, IGABI

“Adolescent girls love money. That is what is pushing them into early sexual life and making them pregnant.”
— COMMUNITY INFLUENCER, CHIKUN

“Girls here sell their bodies in exchange for a meal.”
— BOY, CHIKUN
Men promise marriage in exchange for sex—and girls often believe it.

“Some big girls go to the men because they want something from the boys or the men promise them marriage.”
— UNMARRIED GIRL, IGABI

“Boys promise to provide but they end up deceiving girls.”
— UNMARRIED GIRL, IGABI

“Boys pretend they want to marry you and when you give them your body, they run away.”
— UNMARRIED GIRL, IGABI

“Some guys come and deceive the girls just to have sex with them.”
— UNMARRIED GIRL, IGABI
Some parents are financially dependent on their adolescents. This drives adolescents to meet those needs.

“Inability of her parents to provide food worries her, as it can make a girl go out and beg.”
— UNMARRIED GIRL, IGABI

“Parents don’t always provide, so the children end up stealing and prostituting.”
— UNMARRIED GIRL, IGABI

“Where I live, parents ask girls to bring money for them. Even boys are asked to bring money; they can ask the boys to carry guns.”
— PROVIDER, CHIKUN

“Some parents talk children into telling them how other girls at their age bring things and items home.”
— PROVIDER, CHIKUN
How might we create ways for girls to meet personal and familial financial needs other than through transactional sex?

BRAINSTORM CONSIDERATIONS

How might we:

- Shift parents' perception of girls' value as a source of income vis-a-vis their sexuality?
- Create a support network for young girls who hawk goods at night?
Girls feel vulnerable and powerless due to a lack of strong structures addressing sexual violence in their community.
“Rape cases are reported, but the authorities are not doing anything about it.”

— UNMARRIED GIRL, IGABI
A girl’s perception of the spaces in her community

- **Unsafe Spaces**
  - Parties
  - Streets
  - Police
  - Unfinished buildings
  - Night
  - Parents’ shop
  - Bars

- **Safe Spaces**
  - School
  - Home
  - Motor parks
  - Church/Mosque
Girls who are victims of sexual violence are often blamed for causing it.

“If you compose yourself by dressing decently, no one will harass you.”
— PROVIDER, IGABI

“Girls get raped for hawking, going out after 7pm, when they go to boys for money.”
— UNMARRIED GIRL, IGABI

“Some girls follow boys to their homes and this may lead to rape.”
— MOTHER, CHIKUN

“The girls do not dress well in this community.”
— BOY, CHIKUN
There are no consequences for men who commit rape.

“Girls are taken to the hospital when raped but parents don’t do anything after that.”
— UNMARRIED GIRL, IGABI

“A guy raped a girl and he was released without being punished by the authorities.”
— UNMARRIED GIRL, IGABI

“There are no consequences for men who commit rape. “Many guys are into rape cases but nothing is done to them by the authorities, you will see them walking freely.”
— UNMARRIED GIRL, IGABI

“Rape cases are reported to the police, but nothing comes out of it.”
— COMMUNITY INFLUENCER, IGABI
How might we leverage the acceptability of talking about sexual violence as a pathway to discussing contraception?

BRAINSTORM CONSIDERATIONS

How might we:
- Develop a safety network for girls that links to youth-friendly providers?
- Amplify the conversation about sexual violence more publicly?
Girls who get pregnant often resort to unsafe abortions because of the shame of pregnancy outside marriage.
“Some girls abort the pregnancy to avoid shame.”

— UNMARRIED GIRL, IGABI
Adolescents experience shame when pregnancy occurs outside of marriage.

“If you go to your husband’s house with pregnancy, the shame is on the family.”
— MOTHER, IGABI

“If a girl gets pregnant before marriage, it will cripple her life and the parents will be shamed by society.”
— MOTHER, IGABI

“There is shame on the family when a girl goes to her husband’s house with pregnancy.”
— MOTHER, IGABI

“Some parents secretly abort pregnancy of their daughters to avoid disgrace and shame.”
— FATHER, CHIKUN

“Some girls get pregnant before marriage which embarrasses their parents.”
— MARRIED GIRL, IGABI
Abortion is a common practice among adolescent girls.

“Most adolescents get pregnant and some have aborted two or more times.”
— UNMARRIED GIRL, CHIKUN

“Many girls are tested pregnant positive, but few give birth—I only know two. Most abort.”
— PROVIDER, IGABI

“The rate of abortion is more than the ones who keep the pregnancies.”
— MALE PARTNER, CHIKUN

“Some girls get pregnant and abort the pregnancy. They take drugs, fall sick, and all of a sudden lose the pregnancy.”
— UNMARRIED GIRL, IGABI
Girls think they know various ways to abort a pregnancy; however, many of them are misinformed.

“There is a high rate of abortion and they do it through D&C, salt water, herbs and hot water.”
— MALE PARTNER, CHIKUN

“Flagyl and lipton, or potash and neem and salt, are used for abortion.”
— UNMARRIED GIRL, CHIKUN

“They get misoprostol from chemists for abortion.”
— UNMARRIED GIRL, CHIKUN

“Traditional healers give them concoctions for abortions.”
— UNMARRIED GIRL, CHIKUN
Parents and providers are concerned about health risks from abortion.

“Some girls use traditional medicine to abort pregnancy, which can destroy all her eggs, plus she won’t be able to give birth again.”
— MOTHER, CHIKUN

“Some girls use traditional herbs for abortion, and lose their lives in the process.”
— MALE PARTNER, CHIKUN

“A girl tried to abort her pregnancy at 4 months but she died with the baby due to heavy bleeding.”
— UNMARRIED GIRL, CHIKUN

“Health workers should not talk of abortion. It is not good; they may meet a quack who will damage their uterus and fallopian tubes.”
— PROVIDER, CHIKUN
How might we frame contraception as a safe way to avoid abortion?

BRAINSTORM CONSIDERATIONS

How might we:
• Leverage post-abortion care as an entry point for new contraceptive users?
• Position contraception as a way to protect the girl and her family’s reputation?
Barriers to Contraception
Unmarried adolescents face barriers to accessing modern contraception.
“The health workers will not agree to provide single girls with contraceptives.”

— COMMUNITY INFLUENCER, IGABI
Adolescents believe contraception is only for married people.

“Family planning is meant for family people.”
— UNMARRIED GIRL, IGABI

“I am not married, why should I care about family planning?”
— BOY, CHIKUN

“If you are not married, why would you go for family planning?”
— MARRIED GIRL, IGABI

“Family planning is for planning the family so girls who are not married shouldn’t do it.”
— UNMARRIED GIRL, IGABI
Adolescents don’t trust that providers will keep their visit private and confidential.

“They don’t like to go to hospitals to get contraceptives because the workers might know them.”
— COMMUNITY INFLUENCER, IGABI

“Many boys do not trust community health workers because they carry news to people.”
— BOY, IGABI

“Girls will not patronize PHCs because of familiarity issues at the facilities.”
— PROVIDER, IGABI

“They don’t like to go to hospitals to get contraceptives because the workers might know them.”
— COMMUNITY INFLUENCER, IGABI

“Many boys do not trust community health workers because they carry news to people.”
— BOY, IGABI

“Nurses cannot keep secrets, so I don’t trust them.”
— BOY, IGABI
Adolescents believe providers only serve married people.

“They ask if you are married in the hospital before attending to you.”
— UNMARRIED GIRL, CHIKUN

“Some girls lie that they are married when they go for contraception.”
— UNMARRIED GIRL, CHIKUN

“The healthcare providers usually ask the girls to bring their husbands before giving family planning to them.”
— MOTHER, CHIKUN

“The hospitals here do not give condoms to girls except the married ones.”
— BOYL, IGABI
There is a misconception that the use of contraception leads to infertility and promiscuity.

“The use of contraception promotes sexual promiscuity among unmarried girls.”
— PROVIDER, IGABI

“Contraception causes barrenness.”
— BOY, CHIKUN

“The girl will be toad-jumping if contracepted—from one man to another.”
— FATHER, CHIKUN

“Condoms encourage our girls to be promiscuous.”
— MOTHER, CHIKUN
Adolescents resort to condoms and traditional methods to prevent pregnancy.

“The majority [of adolescents] do not know about contraception except condoms.”

— BOY, CHIKUN

“I use condoms so that she will not get pregnant.”

— BOY, CHIKUN

“Alcohol will wash her system after sex.”

— BOY, IGBAI

“Some of my friends use herbs and other substances to prevent pregnancy.”

— MALE PARTNER, CHIKUN
How might we build on existing & accepted practices to encourage support for modern contraception?

BRAINSTORM CONSIDERATIONS

How might we:
• Dispel misconceptions about contraception, such as infertility, promiscuity, and only for married women?
• Leverage use of traditional methods and providers to encourage use of modern methods?
Providers' personal beliefs, coupled with limited knowledge, often prevent them from providing modern contraceptives, unless an adolescent is accompanied by a parent.
“We do counsel the girls and advise them to come with their parents and they don’t come back again, they go to shops.”

— PROVIDER, CHIKUN
Providers are willing to provide services to adolescents if their parents bring them.

“There was a father who took his daughter to the clinic for FP because he said the daughter aborted every 3–4 months. He was advised by a health worker.”

— COMMUNITY INFLUENCER, CHIKUN

“About four parents have brought their children to me to access contraceptives. I gave them long-acting contraceptives.”

— PROVIDER, CHIKUN

“The community will accept the concept of contraceptives; the parents need to be more oriented.”

— PROVIDER, CHIKUN

“If she cannot bring her parents then she shouldn’t be given contraceptives.”

— PROVIDER, CHIKUN
The provision of contraceptives by providers is influenced by their personal beliefs.

“Health workers may not agree to sell contraceptive pills to adolescents because of religion.”
— BOY, IGABI

“They asked if we are married in the hospitals or health centres before attending to us.”
— GIRL, CHIKUN

“If I advise a young person to abstain and she refuses, I will leave them with their God.”
— PROVIDER, CHIKUN

“I don’t give contraceptive injections.”
— PROVIDER, CHIKUN
Providers lack knowledge on contraceptive methods.

“It’s invasive using IUCD, they are not mature enough.”
— PROVIDER, CHIKUN

“I speak based on my perception.”
— PROVIDER, CHIKUN

“CHEWs have access to adolescent girls due to home visits, but [their] knowledge on SRH issues is 50% capacity.”
— PROVIDER, IGABI

“Not all contraceptives can be used by everyone, you have to test your blood to know which matches you.”
— PROVIDER, CHIKUN
How might we build a network of providers who are excited and equipped to serve adolescents?

BRAINSTORM CONSIDERATIONS

How might we:
- Increase provider knowledge about modern contraceptives so they can effectively serve adolescent girls?
- Make providers comfortable serving unaccompanied girls?
- Shift the provider mindset about providing contraception to unmarried adolescents from one of aiding and abetting sin to one of making a positive social contribution?
Married women who want to use contraception have to rely on decision makers in their lives, who may or may not support them due to religious barriers or lack of knowledge.
“In our culture here, the men and husbands make family planning decisions for their wives.”

— MALE PARTNER, CHIKUN
Lack of spousal support may hinder contraceptive use, yet some women secretly use contraception.

“If the husband did not agree to contraception, it can cause a crisis in the marriage.”
— PROVIDER, IGABI

“If the girls prefer chemists because the health workers ask for their husbands.”
— MALE PARTNER, IGABI

“Some wives use contraception without husband’s knowledge or consent.”
— PROVIDER, CHIKUN
Male support encourages the use of contraceptives.

“I like to have few children, so I will use FP with my wife.”
— MALE PARTNER, CHIKUN

“We can implant, so when she needs a child we remove it.”
— MALE PARTNER, CHIKUN

“I will like to use FP so that my wife can be resting. She suffers a lot with pregnancy.”
— MALE PARTNER, IGABI

“I know she will accept contraceptives if I approve.”
— MALE PARTNER, IGABI
Male partners often lack knowledge on contraceptive options.

“I don’t know how to prevent my wife from unwanted pregnancy.”
— MALE PARTNER, IGABI

“I don’t know where to buy contraceptive drugs.”
— MALE PARTNER, IGABI

“There is no other contraceptive methods aside from condoms.”
— MALE PARTNER, CHIKUN

“Male partners do not know other methods of contraception.”
— MALE PARTNER, IGABI
The withdrawal method is the contraceptive method supported by Islam.

“I use the withdrawal method as contraception. This is approved in Islam.”
— MALE PARTNER, IGABI

“It is better to use the withdrawal method than condom in Islam.”
— MALE PARTNER, IGABI

“Contraception is un-Islamic and Allah only approves of the withdrawal method.”
— MALE PARTNER, IGABI

“Withdrawal method is approved by Allah.”
— MALE PARTNER, IGABI
How might we educate married girls and the influencers in their lives about contraception, in order to foster support for contraceptive use?

**BRAINSTORM CONSIDERATIONS**

*How might we:*
* Educate pastors and imams on the safety of contraception, so they can aid married couples on healthy timing and spacing of pregnancies?
* Align contraception with existing religious values on familial care?
* Make contraception a joint decision between husbands / in-laws and wives?
Southern Nigeria: EMERGING INSIGHTS for Design
SOUTH TRAJECTORIES
In the south, adolescent girls strive to finish secondary school, learn a trade or attend higher education, gain financial independence, and get married and have kids.

In reality, few jobs, high poverty, and negative social influences mean adolescent girls have few opportunities after finishing secondary school and often have unplanned pregnancies.
The ideal trajectory

<table>
<thead>
<tr>
<th>Year</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>14</td>
<td>Work hard &amp; focus on school</td>
</tr>
<tr>
<td>15</td>
<td>Graduate secondary school</td>
</tr>
<tr>
<td>16</td>
<td>Learn a skill &amp; work</td>
</tr>
<tr>
<td>17</td>
<td>Attend higher education / trade school</td>
</tr>
<tr>
<td>18</td>
<td>Graduate higher ed / trade school</td>
</tr>
<tr>
<td>19</td>
<td>Build career &amp; financial stability</td>
</tr>
<tr>
<td>20</td>
<td>Get married</td>
</tr>
<tr>
<td>21</td>
<td>Have a small family &amp; work</td>
</tr>
</tbody>
</table>
In reality, many girls get married in their late teens and continue working.
Pregnancy leads to many paths.

- **14**: Get pregnant
- **15**: Keep baby
  - Baby’s father accepts pregnancy
    - Drop out of school
    - Move to Baby’s father’s house
  - Baby’s father does not accept pregnancy
    - Drop out of school
    - Receive support from parents
- **16**: Work, learn a trade, or return to secondary school
- **17**: Have first child
- **18**: Have second child
- **19**: Graduate secondary school
- **20**: Get married
- **21**: Have first child
- **22**: Have second child
- **23**: Have 3+ kids & work or learn a trade
- **24**: Drop out of school
- **25**: Work, learn a trade, or rely on family or men for support
The Adolescent’s World
Adolescents have a clear vision for their futures, which is driven by bringing pride to themselves and their families.
“I’ll be the light of my generation.”

— UNMARRIED GIRL, EPE
Education is a top priority. It’s a way to get out of poverty and achieve a better future.

“I’ll be the light of my generation.”
— UNMARRIED GIRL, EPE

“The most important thing for me is to finish school with good grades so I can get a good job.”
— BOY, SURULERE

“By believing in education, we are eradicating poverty.”
— MOTHER, SURULERE

“I want to finish school because I want to become something greater in the future.”
— UNMARRIED GIRL, EPE
ON TECHNOLOGY:

Increased access to technology is empowering youth and connecting them to information.

“It’s good to use social media to get the latest news, to expose you to things going on around the world.”
— UNMARRIED GIRL, EPE

“We view technology as our own advantage: kids have a bright future if they can use technology and education.”
— BOY, SURULERE

“You can go around the world sitting in one place.”
— UNMARRIED GIRL, SURULERE

“I try to encourage my kids to download textbooks because we can’t afford the hard copy.”
— MOTHER, SURULERE
Girls value financial independence. They see developing a trade or profession as a way to gain agency and provide for their families.

“If you work you can have freedom, then you don’t have to rely on your husband.”
— UNMARRIED GIRL, SURULERE

“Jobs make you busy, you don’t need a handout and people won’t ask you where you get money from.”
— UNMARRIED GIRLS, SURULERE

“Only a senseless parent would separate between boys and girls for giving them the opportunity to succeed.”
— FATHER, SURULERE
Boys and girls believe that dating is a distraction that will derail their dreams.

“A girlfriend would distract me from my studies.”
— BOY, EPE

“My mom says a good child should always abstain from sex.”
— UNMARRIED GIRL, EPE

“Girlfriends are an agent of destruction.”
— BOY, SURULERE

“Having a boyfriend can distract you as you will be thinking about him instead of reading.”
— UNMARRIED GIRL, EPE
Boys and girls believe that marriage, sex, and children should come in their mid-twenties, after finishing education and getting a career on track.

“She is 19 years old, she is supposed to go to school. She is too young to get married.”
— MOTHER, EPE

“It’s not that I don’t want to get married, but I shouldn’t think about it now . . . education first.”
— UNMARRIED GIRL, SURULERE

“A graduation gown turns into a marriage gown which turns into pregnancy gown.”
— UNMARRIED GIRL, SURULERE

“I’m pursuing my dreams now, sex is still far away.”
— BOY, SURULERE
How might we help adolescents achieve their vision for their future?

BRAINSTORM CONSIDERATIONS

How might we:
- Reframe SRH as a way to help girls achieve their educational goals of university or trade school?
- Position SRH as a tool for financial planning and stability?
- Connect SRH to achieving financial independence and a career?
Economic and social pressures make adolescents’ dreams hard to achieve.
“Poverty can make you do what you don’t normally do.”

— BOY, SURULERE
After secondary school, there is no clear path to higher education or jobs. Even ambitious adolescents become bored, and seek alternative resources to meet their social, economic, and emotional needs.

“If we could organize other things for teens after school, then there would be less time for them to get into trouble.”
— Community Influencer, EPE

“The reason young kids are having sex is because they are idle and have nothing else to do.”
— Community Influencer, Surulere

“Most 19 year old girls have finished secondary school. They are at high risk of getting pregnant when waiting at home for admission into college.”
— Father, Surulere

“Lack of financial power makes it impossible for boys and girls to reach their goals.”
— Father, Surulere
Without economic opportunities or support from their parents, girls often turn to men and sex for money and gifts.

“My parents give me N100 for breakfast, lunch, and dinner — it’s not enough. Not even enough for breakfast. So how do I eat? I need to take care of myself.”
— UNMARRIED GIRL, SURULERE

“Some parents make their children work at night. They get pregnant and drop out.”
— UNMARRIED GIRL, SURULERE

“Poverty can make you do what you don’t normally do.”
— BOY, SURULERE

“Sometimes, hunger leads girls to go from house to house seeking food. From there, things can start happening with girls.”
— FATHER, SURULERE
Communities recognize that girls begin maturing earlier, both biologically and socially, and adolescents are exposed to sex at a younger age.

“It’s hard to find a decent 15–16 year old girl in this community that hasn’t started having sex.”
— MALE PARTNER, SURULERE

“It’s hard to find a decent 15–16 year old girl in this community that hasn’t started having sex.”
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“13 years is the new 18 years . . . they are already sexually active at 13.”
— FATHER, SURULERE

“13 years is the new 18 years . . . they are already sexually active at 13.”
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“The girls of this generation are very smart. 15 year old girls are thinking like 20 year olds . . . they know how to find their way.”
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— FATHER, SURULERE
Girls and boys value what relationships and sex signal to their peers.

“60% of girls are wayward — they follow boys anywhere. They follow boys to be fashionable.”
— UNMARRIED GIRL, EPE

“[Sisters] see their older sister with a boyfriend who gives her money. The younger sister asks, ‘how’d you get that money?’ and then she’ll go and do the same.”
— BOY, EPE

“One of my friends said, ‘sex is one of the sweetest things I have ever tasted in my life.’”
— BOY, EPE

“Some people have a boyfriend just to belong to the clique.”
— UNMARRIED GIRL, SURULERE
How might we connect the potential realities and consequences of unsafe sex to their envisioned trajectories?

BRAINSTORM CONSIDERATIONS

How might we:
- Intervene during the gap following secondary school?
- Show teens a way to achieve their goals and date?
- Create financial opportunities for girls within SRH?
- Create meaningful ways for adolescents to engage and express themselves during “idle” time?
Adolescents have few people whom they trust.
“There is no one you can trust 100%.”

— UNMARRIED GIRL, EPE
A girl has few people in her life whom she can trust—and when she does have someone, it’s conditional.
Adolescents don’t trust their friends because friends can lead them astray.

“Your worst enemy might be your best friend.”
— UNMARRIED GIRL, EPE

“Girls get intimidated by friends to go to night parties, spend money lavishly, and buy the latest things.”
— UNMARRIED GIRL, EPE

“A friend can expose your secrets, put you into something bad in the community.”
— UNMARRIED GIRL, EPE

“Friends are dangerous; they can lead you astray.”
— BOY, SURULERE
It’s hard for boys and girls to establish trust with each other, even in their relationships.

“What will [a boyfriend] do for me — just waste my time and my emotions. If you don’t know better, he uses you and dumps you like a used orange.”

— UNMARRIED GIRL, EPE

“I don’t trust my boyfriend. I don’t trust men. Men are the worst!”

— UNMARRIED GIRL, EPE

“Boys don’t keep secrets among themselves.”

— UNMARRIED GIRL, SURULERE

“Females don’t know how to keep secrets.”

— BOY, EPE
Girls trust their moms, but they feel embarrassed talking to them about sex.

“If you talk to your parents about sex, they’ll think you already started.”
— UNMARRIED GIRL, SURULERE

Q: “Has your father ever talked to you about sex?”
A: [LAUGHTER] “NO!”
— 4 BOYS, EPE

“My mom would understand, but she would scold me.”
— UNMARRIED GIRL, SURULERE

“I would talk to my mom about my period, but if I got pregnant, I would talk to my boyfriend, then my friend.”
— UNMARRIED GIRL, SURULERE
How might we facilitate trusted experiences and relationships to support adolescents?

BRAINSTORM CONSIDERATIONS

How might we:
• Design an SRH learning opportunity that is experienced individually?
• Initiate trusted and positive conversations about sex and dating through technology?
Sex & Pregnancy
Power dynamics influence every sexual and romantic relationship—through money, gender, and social status.
“Nothing goes for nothing.”

— MALE PARTNER, SURULERE
“Who thinks love from a boy to a girl would mean he foots the girl’s bill.”
— UNMARRIED GIRL, EPE

“Nothing goes for free. It is rare for a man to sleep with a girl without money.”
— UNMARRIED GIRL, EPE

“Nothing goes for nothing.”
— UNMARRIED GIRL, SURULERE

“Nothing goes for free. It is rare for a man to sleep with a girl without money.”
— UNMARRIED GIRL, EPE

Regardless of the type of relationship, there is always an expected exchange.

“When you collect money from a boy, one day he must collect something from you.”
— UNMARRIED GIRL, SURULERE
Men have disproportionate power when it comes to sex and contraception.

“If an older guy offers just a little money, she’ll have flesh-to-flesh.”
— COMMUNITY INFLUENCER, EPE

“Men pay a lot to have sex with adolescent girls without condoms.”
— PROVIDER, EPE

“Some men will threaten to leave their girlfriends if she won’t have sex with him.”
— UNMARRIED GIRL, SURULERE
Some adolescents are opportunistic about their relationships: they know how to use what they have to get what they want.

“I do not want to put all my eggs in one basket, so I have 3 boyfriends.”
— UNMARRIED GIRL, SURULERE

“Girls think once a guy is her boyfriend, he has a responsibility to provide money.”
— BOY, SURULERE

“When an adolescent girl gets a phone from her boyfriend, other girls who want to be like her are pulled into the trap.”
— MALE PARTNER, SURULERE

“When girls see money, they have seen their life.”
— BOY, EPE
How might we give girls the choice and power to choose contraception?

**BRAINSTORM CONSIDERATIONS**

How might we:

- Make contraception non-negotiable for every sexual encounter?
- Change what it means socially for a girl to use contraception?
- Present use of modern contraception by adolescents as “buzz” and “trendy?”
Girls feel powerless, vulnerable, and scared of the pervasive sexual violence in their community.
“My boyfriend invited me to his house to talk. He needed to ‘do something.’ We were alone in his house, and I was scared. He began kissing and touching me. I told him, ‘if you touch me, I’ll shout.’ I saw the door and ran home crying — I even left my purse there. I didn’t tell my mom, because I was afraid she would scold me. I did tell a sister at church who I know. But she doubted me, and then scolded me.”

— UNMARRIED GIRL, SURULERE
A girl’s perception of the spaces in her community

- **Unsafe Spaces**
  - BOYS ON THE STREET
  - CHURCH / MOSQUE
  - CLUBS, PARTIES, & HOTELS
  - ALLEYS
  - NIGHT
  - UNFINISHED BUILDINGS
  - FRIENDS’ HOUSES
  - BOYFRIEND’S HOUSE
  - PARENTS’ SHOP

- **Safe Spaces**
  - SCHOOL
  - PRIVATE PLACES & SOME TEACHERS AT SCHOOL
  - CLINICS
  - HOME
Girls live in constant fear of rape by strangers and by men they know.

“When I’m with my boyfriend alone and he might want sex, I look for an excuse to leave.”
— UNMARRIED GIRL, SURULERE

“If a girl is sent to stay with relatives, they aren’t treated well. They may be raped or abused.”
— UNMARRIED GIRL, EPE

“Some young girls leave secondary school as virgins but get spoiled by their lecturers in university after much pressure.”
— FATHER, EPE

“In our community, if they see a girl in a certain age range, they know she is a virgin, and they’ll get older brothers to rape her.”
— UNMARRIED GIRL, EPE
Moms talk to girls about rape and share ways to protect themselves.

“My mom said not to tell people I’m menstruating, because if you’re a virgin, they’ll rape you.”
— UNMARRIED GIRL, EPE

“Home is my hiding place. If people are chasing you, you can run to your house.”
— UNMARRIED GIRL, SURULERE

“Indecent clothes is not good for our health; it encourages the boys.”
— UNMARRIED GIRL, SURULERE

“Dress normal and cover your nakedness.”
— UNMARRIED GIRL, SURULERE
The community holds girls responsible for protecting themselves from rape, and if she is raped, the community blames her.

“Most girls don’t report rape because it would be an embarrassment to the community.”

— UNMARRIED GIRL, EPE

“I didn’t tell my mom, because I was afraid she would scold me. I did tell a sister at church who I know. But she doubted me, and then scolded me.”

— UNMARRIED GIRL, SURULERE

“Parents blame their children for being raped.”

— UNMARRIED GIRL, EPE

“A teacher cannot be trusted as they can use your experience to teach others.”

— UNMARRIED GIRL, EPE
#sexual_violence / OPPORTUNITY

**How might we leverage the acceptability of talking about sexual violence as a pathway to discussing contraception?**

**BRAINSTORM CONSIDERATIONS**

How might we:
- Normalize emergency contraception as part of the post-sexual violence protocol?
- Share stories of healthy and unhealthy sexual behavior and relationships?
The immediate benefits of having sex outweigh the potential risks of getting pregnant.
“Girls don’t use contraception, they abort.”

— MOTHER, EPE
Girls value being healthy, but don’t generally consider their sexual health.

“If I’m healthy, I’m able to do house chores. Mom and Dad will be proud and send me to school.”
— UNMARRIED GIRL, SURULERE

“Health is the most important because you can’t achieve anything else if you’re not healthy.”
— UNMARRIED GIRL, SURULERE

“Staying healthy is taking care of my body, protecting myself from boys’ advances, and no night parties.”
— UNMARRIED GIRL, EPE

“To be healthy, you eat good food, wear clean clothes, use good creams like shea butter, brush your teeth, and wear pads during your period.”
— UNMARRIED GIRL, SURULERE
If girls get pregnant, they believe their family or boyfriend will support them.

“If the pregnancy happens, it happens.”
— UNMARRIED GIRL, SURULERE

“Even if she gets pregnant before marriage, her family would still support her.”
— UNMARRIED GIRL, SURULERE

“Some girls aren’t worried about pregnancy because they believe the boy will care for them.”
— UNMARRIED GIRL, EPE
When a girl gives birth, she often drops out of school, doesn’t receive support from the baby’s father and his family, and may be kicked out by her parents.

“Girls who get pregnant should be beaten and punished and sent to the boy’s house to suffer.”
— MOTHER, EPE

“Boys don’t take care of girls that get pregnant. The girl goes back to the parents’ house to take care of the baby.”
— UNMARRIED GIRL, EPE

“Some girls end up getting pregnant and ending their goals.”
— UNMARRIED GIRL, SURULERE

“Guys deceive girls. They pretend to have money, wear nice clothes, but they don’t have jobs. Then [if she gets pregnant], they run away.”
— MALE PARTNER, EPE
Even though girls fear abortion, once they get pregnant, they frequently abort.

“If a girl is sexually active and has had several abortions, she may not be able to get pregnant, or they’ll send her away.”
— UNMARRIED GIRL, EPE

“Teenage pregnancy is not too pronounced, because many of the girls abort and go to the chemist shops to use drugs.”
— FATHER, SURULERE

“I used to perform 2-3 abortions every day.”
— PROVIDER, SURULERE

“Girls don’t use contraception, they abort.”
— MOTHER, EPE
How might we help girls internalize the risks of unplanned pregnancy?

**BRAINSTORM CONSIDERATIONS**

- How might we:
  - Shift contraceptive use from reactive to proactive?
  - Leverage post–abortion care as an entry point for new contraceptive users?
  - Connect girls’ health goals to their sexual and reproductive health?
Barriers to Contraception
Adolescents have to piece together their own sexual education, so what they know is cloudy and misinformed.
“Nobody teaches us about sex.”

—BOY, SURULERE
Formal sex education is abstract, biological, and abstinence-focused.

“They taught us about HIV in school, and taught us to be careful with sharp objects and to abstain from sex.”

— BOY, SURULERE

“Schools don’t teach condoms, only abstinence.”

— BOY, SURULERE

“If a boy touches you, you will get pregnant. Be careful if you move close to boys—you’ll get pregnant.”

— UNMARRIED GIRL, SURULERE

“Nobody teaches us about sex.”

— BOY, SURULERE
ON TECHNOLOGY:

Technology has shifted how adolescents learn about sex.

“Girls see sex as something playful because of TV.”
— COMMUNITY INFLUENCER, SURULERE

“You learn about sex styles from watching sex videos.”
— BOY, EPE

“There is a difference between 15 and 19, but because of the way the world is now the difference is not so much. Everyone is exposed.”
— UNMARRIED GIRL, SURULERE

“Social media makes girls skip school and go to their boyfriend’s house.”
— UNMARRIED GIRL, EPE
Adolescents know little about contraceptive methods beyond condoms.

“After sex they have a medicine to not get pregnant. Girls buy it at the chemist. I don’t know what it is.”
— UNMARRIED GIRL, SURULERE

“I know about condoms through TV, but I don’t know how it is used.”
— UNMARRIED GIRL, SURULERE

“I don’t know how you stop pregnancy. You can take drugs.”
— UNMARRIED GIRL, EPE
If adolescents have heard of modern contraceptive methods, they believe that the methods will damage their fertility and make them seem promiscuous.

“Family planning is for women who are done giving birth and prostitutes who don’t want children.”
— UNMARRIED GIRL, SURULERE

“They say contraception is good, but for me, it’s not good. It will destroy your womb.”
— UNMARRIED GIRL, EPE

“Girls that use contraception are promiscuous. They boast about it and talk about using protection.”
— UNMARRIED GIRL, EPE

“My mom says [contraception] can destroy your womb.”
— UNMARRIED GIRL, EPE
Traditional contraceptive methods are more acceptable than modern methods, even for adolescents.

“Boys will have girls drink a native drink after sex to not get pregnant.”
— BOYS, SURULERE

“I go around saying ‘If you don’t want to get pregnant, then come to me,’ not because of money but because I want a better future for them.”
— TBA, EPE

“I go around saying ‘If you don’t want to get pregnant, then come to me,’ not because of money but because I want a better future for them.”
— TBA, EPE

“Most people believe in traditional family planning.”
— PROVIDER, EPE

“The one contraceptive method that we do is through herbalists [use the ring].”
— FATHER, SURULERE
How might we increase knowledge of SRH in a way that resonates with adolescents?

**BRAINSTORM CONSIDERATIONS**

*How might we:*
- Connect with youth brands engaged in health education?
- Build on existing SRH programs in school?
Adults want young people to learn about sex, but are hesitant to teach anything beyond abstinence.
“I would scare my child [about] sex because my mother did that too.”

— COMMUNITY INFLUENCER, SURULERE
Adults believe that sex education is important and should be led by parents and schools.

“The government needs to do sex education just like Math and English.”
— FATHER, EPE

“When a child gets pregnant, it’s not a mistake. It’s the mother and teacher’s job to teach them.”
— PROVIDER, EPE

“Teachers and moms should educate girls about sex and condoms, but girls should direct questions to nurses.”
— PROVIDER, SURULERE

“Sex education should be a joint venture: family, schools, churches, peers.”
— COMMUNITY INFLUENCERS, EPE
When parents teach their children about sex, it’s either abstinence and fear, or reactive.

“I would scare my child [about] sex because my mother did that too.”
— COMMUNITY INFLUENCER, SURULERE

“Don’t tell the good ones about contraception, but it’s ok to tell girls who are already promiscuous.”
— MOTHER, SURULERE

“My parents tell me not to have sex.”
— BOY, SURULERE

“Mom talked about menses after menstruation started — then [it was] taught in school.”
— UNMARRIED GIRL, SURULERE
Adults believe teaching adolescents about contraception encourages promiscuity.

“If you tell a girl about family planning, she’ll think you want her to have sex.”
— MOTHER, EPE

“Family planning will be a license to become bold in going out for sex.”
— MOTHER, SURULERE

“A lady using contraception is a prostitute; it is not our culture.”
— FATHER, SURULERE

“Once we start teaching boys how to use condoms they act big and think they have power.”
— COMMUNITY INFLUENCER, EPE
Parents may want to guide their children, but feel powerless in this modern, technological world.

“Their eyes are wide open — even more than us, their parents. What they do is more than their age.”

— MOTHER, SURULERE

Parents are really powerless to stop the adolescents from doing things, even with much monitoring.”

— FATHER, EPE

“The world has changed; civilization is here. The children of these days are exposed very early.”

— FATHER, SURULERE

“Adolescents won’t allow their parents to see what they’re doing on their phones.”

— COMMUNITY INFLUENCER, EPE
How might we design the right roles for adults to play in SRH education?

BRAINSTORM CONSIDERATIONS

How might we:
- Use existing social structures to educate adolescents about SRH?
- Build a relationship between providers and a wider range of trusted adults to increase girls’ access to services?
Girls trust doctors and nurses, but that trust is not translating to uptake of contraception.
“If she can’t stop having sex, then contraception.”

— PROVIDER, SURULERE
Doctors and nurses want to help adolescents, but their morals and limited training get in the way of providing services to unmarried girls.

“A shy girl with little knowledge gets the abstinence talk, then is sent away.”
— PROVIDER, SURULERE

“If she can’t stop having sex, then contraception.”
— PROVIDER, SURULERE

“Injection is for married women with kids.”
— PROVIDER, SURULERE
Healthcare is reactive: girls visit clinics when they have a problem, and providers only feel comfortable serving girls when they have already made a “mistake.”

“Many girls come for post pills. Many use it immediately after sex, some people use it for abortion, though that’s not what it is made for.”

— PROVIDER, EPE

“Educated parents will take pregnant daughters for abortions. Uneducated parents don’t know.”

— MALE PARTNER, SURULERE

“Moms bring girls in for pregnancy confirmation after seeing something is ‘wrong’ with them.”

— PROVIDER, SURULERE
Girls fear the stigma of being seen as promiscuous, so they seek privacy for their sexual healthcare and contraceptive needs.

“Some adolescents stop using contraception if the community finds out; others don’t care.”
— PROVIDER, EPE

“Some girls keep contraception a secret because they are scared of their parents.”
— UNMARRIED GIRL, EPE

“Adolescents and young mothers come to me secretly for family planning services after having a child because they want to go to school.”
— PROVIDER, EPE

“Adolescent girls have code names for contraceptives. They use it when they come to buy [contraceptives] at the drugstore.”
— PROVIDER, EPE
How might we foster trustworthy, proactive, and supportive relationships between providers and girls?

BRAINSTORM CONSIDERATIONS

How might we:
- Make a girl’s experience private and confidential across the journey?
- De-stigmatize adolescents who go to the clinic?
DESIGN OPPORTUNITIES
Addressing sexual and reproductive health is one way to help adolescent girls in Nigeria achieve the futures they envision.
We have identified three areas of design opportunity to inspire solutions that will:

- Create an informed and empowered generation
- Connect girls to sexual and reproductive health at relevant moments in their journeys
- Foster trusted support systems for girls to access sexual and reproductive health services
OPPORTUNITY 1
CREATE A GENERATION
OF INFORMED AND EMPOWERED
ADOLESCENTS
HOW MIGHT WE
Give girls the choice and power to choose contraception?

HOW MIGHT WE
Build on existing & accepted practices to encourage support for modern contraception?

HOW MIGHT WE
Maximize the positive potential and limit the negative impact of technology on adolescents’ SRH knowledge?

HOW MIGHT WE
Design the right role for adults to play in SRH education?

HOW MIGHT WE
Create ways for girls to meet personal and familial financial needs other than through transactional sex?
How might we give girls the choice and power to choose contraception?

- Make contraception non-negotiable for every sexual encounter?
- Change what it means socially for a girl to use contraception?
- Present use of modern contraception by adolescents as “buzz” and “trendy”?
- Design an SRH learning opportunity that is experienced individually?

How might we create ways for girls to meet personal and familial financial needs other than through transactional sex?

- Shift parents’ perception of girls’ value as a source of income vis-à-vis their sexuality?
- Create a support network for young girls who hawk goods at night?

How might we build on existing & accepted practices to encourage support for modern contraception?

- Dispel misconceptions about contraception, such as infertility, promiscuity, and only for married women?
- Leverage use of traditional methods and providers to encourage use of modern methods?
- Connect with youth brands engaged in health education?
- Build on existing SRH programs in schools?

How might we maximize the positive potential and limit the negative impact of technology on adolescents’ SRH knowledge?

- Leverage the digital platforms used by adolescents to create a private, enjoyable SRH learning experience?
- Initiate trusted and positive conversations about sex and dating through technology?
- Increase parents’ comfort with adolescents’ use of technology?

How might we design the right role for adults to play in SRH education?

- Use existing social structures to educate adolescents about SRH?
- Shift adults’ perception that discussion of SRH equals permission to have sex?
- Build parents’ confidence to have conversations with their adolescents about SRH?
- Build on adolescents’ trust for their mothers to enable informed, comfortable discussions on SRH?

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Opportunity 1: Create a generation of informed and empowered adolescents.

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OPPORTUNITY 2
CONNECT GIRLS TO SEXUAL AND REPRODUCTIVE HEALTH AT RELEVANT MOMENTS IN THEIR JOURNEYS
OPPORTUNITY 2
CONNECT GIRLS TO SEXUAL AND REPRODUCTIVE HEALTH AT RELEVANT MOMENTS IN THEIR JOURNEYS

HOW MIGHT WE
Help adolescents achieve their vision for their future?

HOW MIGHT WE
Connect the potential realities and consequences of unsafe sex to their envisioned trajectories?

HOW MIGHT WE
Help girls internalize the risks of pregnancy?

HOW MIGHT WE
Leverage the acceptability of talking about sexual violence as a pathway to discussing contraception?
**OPPORTUNITY 2**

**CONNECT GIRLS TO SEXUAL AND REPRODUCTIVE HEALTH AT RELEVANT MOMENTS IN THEIR JOURNEYS**

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**HOW MIGHT WE**

Help adolescents achieve their vision for their future?

**NORTH-FOCUSED**
- Promote and emphasize the benefits of contraception for married women and their families after their first child?
- Position contraception as a way to help married and unmarried girls finish secondary school?
- Create opportunities for SRH counseling and education for unmarried girls?
- Create a win-win platform valued by parents and girls because it enables girls to marry and stay in school?

**SOUTH-FOCUSED**
- Connect girls’ health goals to their sexual and reproductive health?
- Reframe SRH as a way to help girls achieve their educational goals of university or trade school?
- Position SRH as a tool for financial planning and stability?
- Connect SRH to achieving financial independence and a career?

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**HOW MIGHT WE**

Connect the potential realities and consequences of unsafe sex to their envisioned trajectories?

**SOUTH-FOCUSED**
- Intervene during the gap following secondary school?
- Show teens a way to achieve their goals and date?
- Create financial opportunities for girls within SRH?
- Create meaningful ways for adolescents to engage and express themselves during “idle” time?

**HOW MIGHT WE**

Help girls internalize the risks of pregnancy?

- Shift contraceptive use from reactive to proactive?
- Frame contraception as a safe way to avoid abortion?
- Leverage post-abortion care as an entry point for new contraceptive users?

**NORTH-FOCUSED**
- Position contraception as a way to protect the girl and her family’s reputation?

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**HOW MIGHT WE**

Leverage the acceptability of talking about sexual violence as a pathway to discussing contraception?

- Develop a safety network for girls that links to youth-friendly providers?
- Normalize emergency contraception as part of the post-sexual violence protocol?
- Share stories of healthy and unhealthy sexual behavior and relationships?
- Amplify the conversation about sexual violence more publicly?
OPPORTUNITY 3

FOSTER TRUSTED SUPPORT SYSTEMS FOR GIRLS TO ACCESS SEXUAL AND REPRODUCTIVE HEALTH SERVICES
HOW MIGHT WE Educate married girls and the influencers in their lives about contraception, in order to foster support for contraceptive use?

HOW MIGHT WE Build a network of providers who are excited and equipped to serve all adolescents?

HOW MIGHT WE Foster trustworthy, proactive, supportive relationships between providers and girls?

Opportunity 3

Foster trusted support systems for girls to access sexual and reproductive health services.
OPPORTUNITY 3
FOSTER TRUSTED SUPPORT SYSTEMS FOR GIRLS TO ACCESS SEXUAL AND REPRODUCTIVE HEALTH SERVICES

HOW MIGHT WE
Educate married girls and the influencers in their lives about contraception, in order to foster support for contraceptive use?

• Educate pastors and imams on the safety of contraception, so they can aid married couples on healthy timing and spacing of pregnancies?
• Align contraception with existing religious values on familial care?
• Make contraception a joint decision between husbands/in-laws and wives?

HOW MIGHT WE
Build a network of providers who are excited and equipped to serve all adolescents?

• Shift the provider mindset about providing contraception to unmarried adolescents from one of aiding and abetting sin to one of making a positive social contribution?
• Increase provider knowledge about modern contraceptives so they can effectively serve adolescent girls?
• Build a relationship between providers and a wider range of trusted adults to increase girls’ access to services?
• Make providers comfortable serving unaccompanied girls?

HOW MIGHT WE
Foster trustworthy, proactive, supportive relationships between providers and girls?

• Make a girl’s experience private and confidential across the journey?
• De-stigmatize adolescents who go to the clinic?
CONNECT GIRLS TO SEXUAL AND REPRODUCTIVE HEALTH AT RELEVANT MOMENTS IN THEIR JOURNEYS

CREATE AN INFORMED AND EMPOWERED GENERATION

DESIGN OPPORTUNITIES

OPPORTUNITY 1
CREATE AN INFORMED AND EMPOWERED GENERATION

OPPORTUNITY 2
CONNECT GIRLS TO SEXUAL AND REPRODUCTIVE HEALTH AT RELEVANT MOMENTS IN THEIR JOURNEYS

OPPORTUNITY 3
FOSTER TRUSTED SUPPORT SYSTEMS FOR GIRLS TO ACCESS SEXUAL AND REPRODUCTIVE HEALTH SERVICES
We will explore these areas of design opportunity in the first round of prototyping in February 2017.
Thank You