2019 ANNUAL REPORT
OUTCOMES

OUTCOME 1: Increase informed demand for SRH services by adolescent girls and young women

OUTCOME 2: Increase access to a wide range of SRH products and services for adolescent girls and young women

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ABBREVIATIONS

AGYW adolescent girls & young women
CYP couple-year protection
FP family planning
IPC inter-personal communications
LARC long-acting reversible contraceptive
MVA manual vacuum aspirator
OC oral contraceptive
OHMaSS Organisation haitienne de marketing social sur la sante
PAC post abortion care
PE peer educators
SRH sexual & reproductive health
SRHR sexual & reproductive health rights
YFHS youth friendly health services
IGNITE IN 2019

2019 has been a year of consolidation and scale-up for project Ignite. Together, in the five countries of implementation (Cote d’Ivoire, Haiti, India, Kenya and Mozambique), PSI and Triggerise have generated a cumulative **674,000 couple-year protection** (number of couples protected from unwanted pregnancies for a year), helping thousands of young women stay in control of their own life choices, free of the burden of early motherhood or unwanted children. Over **54,000** young women became **new contraceptive users** through Ignite in 2019, bringing the total number of women who adopted contraception through the project close to **200,000**. This was done through a combination of mobile services and **157** youth-friendly service delivery points, which provided access to contraception and reliable information about SRHR to young people. Project Ignite also ensured that women who were already using contraception could continue using it, by providing access to contraceptives to over **63,000 continuing contraceptive users** (over 281,000 since the inception of the project). Effective demand generation and awareness raising campaigns, on social media as well as in communities with peer mobilizers, and quality-assured service delivery have motivated young women to voluntarily adopt an increasing number of long-acting reversible contraceptives (LARCs) such as implants or intra-uterine devices (IUD). In Mozambique for example, the use of oral contraception has decreased from 51% at the beginning of the project to 37% at the end of 2019, while the use of **implants has grown from 14% to 23%** over the same period.

**Outcome 1: Increase informed demand for SRH services by adolescent girls and young women**
The ‘Aquele Papo’ (‘That talk’ in Portuguese) film and campaign carried out in Mozambique have been very successful, with over **21,000 adolescents** who saw the film in the month following its launch. In Cote d’Ivoire, the ‘Entre Nous’ brand, which surpassed the milestone of 100,000 Facebook followers in 2019, has leveraged its presence in social media to expand its reach in a diversity from communities, including deaf young people. In Haiti, with over **69,000 followers**, Djanm continues being a major channel to engage young people, with a second season of Djanm Enfo videos, and live sessions with doctors.

**Outcome 2: Increase access to a wide range of SRH products and services for adolescent girls and young women**
Ensuring easy access to high-quality SRHR services for young people remained a major focus of the project in 2019, with increased focus on parents’ involvement. In Mozambique, PSI continued to operate near schools, while in Cote d’Ivoire a big focus of 2019 was on quality assurance. In Haiti, OHMASS launched its network of youth-friendly service providers, using its social media presence, but the socio-political crisis has made it difficult to motivate young Haitians to go.

**Outcome 3: Improve enabling environment for youth and young women for improving their sexual and reproductive health and rights (including safe abortion)**
In Mozambique, PSI continued partnering with the Ministry of Health to support three out of the 10 provinces in the country in the implementation of Safe Abortion. PSI/Cote d’Ivoire managed to register misoprostol for safe abortion in 2019 and also successfully advocated to remove a MoH directive issued in June 2019 requiring all health centers to refer PAC cases to larger facilities. This allowed nurses and midwives to continue treating PAC cases within their facilities.

**Outcome 4: Create wealth (via improved depth and reach of the ecosystem)**
In 2019, a total of **€887,000** was earned by all actors in both Kenya and India Tikosystems. The bulk of income was earned by SRH service providers for the provision of either subsidized (in the case of Kenya) or discounted services (in the case of India), followed by TikoPro, Rafiki and retailers/traders. Over **€217,641** were earned by Tiko Pros in both markets either from referral of Rafiki for SRH services or through profit margins from the sale of impact services and products. Kenya contributed 65% of the total income earned by TikoPro during the period.

**Outcome 5: Improve lives (via improved SRHR health outcomes)**
In 2019 Triggerise’s health interventions in both India and Kenya supported Rafiki’s in accessing 279,095 SRH services. Self-enrolment was either initiated or scaled-up in both countries. While growth continued in Kenya, some challenges in the second half of the year led Triggerise to make some changes to the approach. In India, Grand Challenges Canada (GCC) matched Ignite funding, which helped increase reach.
HAITI

OUTCOME 1: INCREASED INFORMED DEMAND FOR SRH SERVICES BY GIRLS AND YOUNG WOMEN

DJANM ENFO Season 2 and LIVE AK DOK

The popularity of the comprehensive sexual health DJANM ENFO video series, covering a range of topics relevant to sexually active young people, expanded with the release of six episodes for the second season. Several videos were produced with a local comedian who presented content on sexuality, hygiene, family planning and contraception through frankness and humor, which appealed to a larger audience and expanded reach. Episodes were premiered every two weeks, from May to July. Following each episode, comments or questions posted on the page were answered by providers the following week in a Facebook Live event called “Live ak dok” sessions, meaning Live with the doctor. This ignited traffic on the Facebook page, which achieved more than 69,000 followers, compared to 38,000 in 2018, with posts to the page reaching more than 200,000 people. In culmination, the six videos, along with “Live ak dok” sessions, have recorded a total of four million minutes viewed, compared to 600,000 minutes viewed in 2018. 63% of DJANM followers are girls and women. The success of the DJANM Facebook page has given greater exposure to SRH products and services and has promoted the mobile clinics.

VIAMO

DJANM offers on-demand SRH information through Interactive Voice Response (IVR) called Viamo, a free phone service with information on family planning, sexuality, pregnancy, abortion and DJANM providers. This hotline gives callers information through a menu of prerecorded messages, or has the option of speaking to a counselor, and is accessible 24/7. Prerecorded topics include sexual and reproductive health, sexuality, family planning, menstruation, pregnancy, abortion and DJANM clinic locations. Viamo went live in late August 2019. Solely through Facebook promotion, from August to December, IVR has received 1,142 calls, with 659 of those callers interested in sexual and reproductive health. 31% of calls were about sexuality, 20% on family planning, 16% about menstrual cycles, 10% about pregnancy, 10% about abortion and 13% about DJANM clinics.

IPC

Peer educators, or “mentors”, have conducted several SRH sessions through interpersonal and community-based (IPC) communication throughout the year. The strategy in 2019 was to focus mainly on schools and universities. For about three months a partnership was developed with a local organization, “Négès mawon”, which granted mentors’ access to some schools and universities in Port-au-Prince areas to conduct the IPC sessions. In total, the group of mentors has reached 7,507 young women and men aged 15–24, 5,091 (approximately 68 percent) of which were young women. During the sessions, mentors raised awareness about the importance of contraceptive methods.

MEDIA

A workshop was held in April for a network of more than 30 health journalists, which aimed to present the portfolio of methods available through Project Ignite as well as introduce program initiatives, including the partnerships made with private sector OBGYNs. This event briefed the media with basic information on contraception, Ignite’s program to promote access to SRH services for young women in Haiti, and what was taking place in the SRH field with local government and various partners. As a result, three Haitian media channels (National TV TNH, Caraibes TV, Ginen TV) reported on the event and one online article was published.

OUTCOME 2: INCREASED ACCESS TO A WIDE RANGE OF SRH PRODUCTS AND SERVICES FOR GIRLS AND YOUNG WOMEN

In 2019, OHMaSS, through its partner Disprophar, has sold 349 IUDs (Confiance Plus), 170 Implants (Implanon NXT), 878 Injectables (Sayana Press), 19,075 Oral Contraceptives (Meuri), 25,801 Emergency Contraceptive pill (Pronta1) and 60 MVA Kits.

SERVICES

In 2019, DJANM advertised the launch of a network of partner providers from the private sector to increase coverage of quality SRH products and services. The DJANM network was launched following two training sessions with providers and nurses, on youth-friendly modern contraception services and managing side effects. One training session with 67 nurses was held to help medical professionals communicate to AGYW to improve youth-friendly modern contraceptive services. A total of 25 private sector providers (mostly OBGYNs) were brought into the DJANM network and they all met the requirements for PSI quality standards to increase quality services to youth. The providers and private clinics are promoted through the DJANM Facebook page and are highlighted in the DJANM video series. Inviting providers to partner with DJANM and provide content on
Facebook mediates the fear youth commonly have towards providers and destigmatizes conversations around sexual health, while promoting contraceptive brands and increasing demand in the private sector. However, most new clinic clients were over the target age of 15-24 years old. And due to ongoing political unrest, most clinics were closed for about two months. The free mobile clinic was more successful in reaching adolescents and young women with SRH services. Even though it is limited in providing only 10 percent of the total annual volume of sales planned for each method, 582 AGYW received a FP method of their choice through the mobile clinic.

To promote products, OHMaSS once again sponsored the annual Congress of the Haitian Society of Obstetricians and Gynecologists. OHMaSS’s distribution partner, Disprophar, was present to introduce its distribution partnership and the different types of contraceptive products available to the 80 provider attendees.

OUTCOME 3: IMPROVED ENABLING ENVIRONMENT FOR YOUTH AND YOUNG WOMEN FOR IMPROVING THEIR SRH

The component to improve SRHR for AGYW was implemented by Médecins du Monde France (MdM France). To advocate for the decriminalization of abortion, MdM France completed the following activities:

1. Developed and implemented advocacy strategies with partners.
2. Built and strengthened partnerships with local actors to participate in a collective advocacy strategy.
3. Fostered the emergence and/or support the work of group of young advocates mobilized on the DSSR.
4. Production of tools and documentation

Due to continued civil unrest creating an unsafe environment in Haiti, MdM France suspended all operations which brought all SRHR activities to a stop. Before pulling out in late July 2019, MdM France reported holding several meetings with partners DSSR collective and SOFA. They also had one steering committee meeting.

MOZAMBIQUE

OUTCOME 1: INCREASED INFORMED DEMAND FOR SRH SERVICES BY GIRLS AND YOUNG WOMEN

By August 2019, Aquele Papo, a multimedia 360° social behavior change campaign featuring a 35-minute independent film, was launched and aimed at generating demand for SRH while sparking dialogue among Mozambican youth aged 15-24 around topics relevant to them. From peer pressure around contraception to having “the talk” with parents, the film follows two Mozambican adolescents, Maria and Roberto, as they navigate the ups and downs of adolescence, including their evolving, and at times challenging relationship. The themes covered in the film were informed by a user-centered design approach, involving adolescents to collect insights on how they make health and life decisions.

Between September and October 2019, the film has been viewed by nearly 21,800 adolescents in school events. Other communication channels, such as radio, television (popular shows featuring Aquele Papo), and social media are creating a buzz sparking conversations on Aquele Papo themes. Involving the target group as well as stakeholders in the design and implementation of Aquele Papo has created a sense of shared ownership and maximized the scale and efficacy of the campaign.

The Aquele Papo campaign intentionally created an open brand, with no PSI branding, making it easy for partners to adopt and implement on a larger scale, beyond the initial scope of the project. Local production talent, musicians and actors, all contributed in creating a high-quality product that generated great interest among adolescents. With the growing adolescent involvement, young people are taking ownership of the Aquele Papo brand, recreating their own versions of the theme song and dance and posting them on social media such as WhatsApp. Aquele Papo is becoming a movement that supports youth in their life decisions, including the important decision to take modern contraception for a brighter future.

The campaign has reached 61,000 followers on Facebook, with an average of 4,900 interactions per post. Adolescents developed trust in the campaign, sending private Facebook and WhatsApp messages about relationships and sexual health, including abortion. PSI staff provide individual answers and follow-up. Peer to peer sessions reached 229,097 adolescents, providing information on sexuality, HIV, STIs, pregnancy and contraceptives.

STRENGTHEN PMs CAPACITY TO IMPLEMENT INFORMED CHOICE AND SRHR PROTOCOLS

The PMs network is refreshed each year, with new students entering the school and older adolescents moving on. To improve the quality of PMs adolescent interactions and capacity, an annual training was held in May 2019, during the school vacation period. The training focused on adolescence and sexuality, SRH topics, informed choice, values exploration session on safe abortion and the use of the referral system (Connecting with Sara). A total of 417 new PMs and 183 continuing PMs were trained in 2019.
Prior to the launch of Aquele Papo campaign another training session was conducted. The agenda included a focus on the campaign messages, a step-by-step to guide PMs through “sessions with videos”, key themes from the film, “adolescents talk” in SRH topics and a brief on school activities at Aquele Papo Pop Up Events. PMs were an essential part of the Aquele Papo events and engagement with adolescents at school.

**OUTCOME 2: INCREASED ACCESS TO A WIDE RANGE OF SRH PRODUCTS AND SERVICES FOR GIRLS AND YOUNG WOMEN**

**INCREASE DEMAND FOR YFHS CENTERS**

In October 2018, there was a suspension of SRH services in schools, which prompted 2019’s activities moving away from the classroom model and instead adopting a community-based model that operates within close proximity to schools. In the community-based model, Peer mobilizers (PMs) remain the first contact with adolescents, creating awareness for SRH topics inside the school and inviting youth to talk to a Promoter and a nurse in the mobile clinic outside of the school. In 2019, PSI Mozambique operated its Family Planning Services in 40 clinics and in other service delivery points near 60 schools.

After the of the MoH and MoE suspended SRH services in schools, due to parents’ objections, PSI started to work on the involvement of parents and care givers in the activities developed for youth, in order to include them as positive influencers for modern contraceptive method adoption. Parents’ sessions were prototyped to learn how to effectively engage parents in the process. The first sessions involved the Schools Parents Counsels, but found these counsels are not available in all Mozambique schools, and were not an effective channel to reach and engage parents. Based on these learnings, parents were organized in Peer to Peer sessions, which included engaging the community leader, and proved to be more effective. In these sessions, storytelling is the key tool, for example, a mother shares her story with other parents about having been a teenage mother, all the challenges she went through and how they impact her decisions with her now teenage daughter.

The Aquele Papo pop-up events give girls the opportunity to take up a contraceptive method of their choice for free. In less than two months, the project has engaged over 7,900 adolescents, and 43% of girls who visited the pop-up tents voluntarily adopted a contraceptive method. There was a steady increase in the number of methods provided, with Q4 growing by 47% from the previous quarter.

**OUTCOME 3: IMPROVED ENABLING ENVIRONMENT FOR YOUTH AND YOUNG WOMEN FOR IMPROVING THEIR SRH**

Throughout 2019, PSI continued partnering with MoH to support three out of the 10 provinces in the country in the implementation of Safe Abortion. A survey was conducted in the provinces of Gaza, Inhambane and Sofala, assessing the level of implementation of Safe Abortion Services after the 2018 trainings. The results showed that from the staff trained in these provinces, 53% remained in their respective districts and the rest of the staff moved to other provinces or organizations. Other learnings indicated that Miso-Mife and Miso drugs were not always available in these provinces. Miso-mife has been facing a stock-out on a national level due to high demand.

Following this survey, visits were made to the Health Facilities to better understand the implementation conditions, comprehensive abortion service performance and disclosure of abortion law. Key health stakeholders were included in each visit to encourage engagement and commitment to SRH youth services. Meetings with the Provincial Head Physician, Head of Public Health Departments, SMI Head and Safe Abortion Focal Point were organized to present the Safe Abortion evaluation tools and to train the provincial team in filling out the assessment check lists. A meeting was also held with the district and Health Facility teams presenting a refresher on the safe abortion law and interacting with warehouse managers for materials, equipment, consumables and medicine.

**COTE D’IVOIRE**

**OUTCOME 1: INCREASED INFORMED DEMAND FOR SRH SERVICES BY GIRLS AND YOUNG WOMEN**

**SOCIAL MEDIA**

Entre Nous: Since inception in 2018, the Entre Nous Facebook page has provided a platform for SRH discussions among AGYW in urban Cote d’Ivoire. The most popular feature on Entre Nous remains the personal interactions with Sage-femme Gabi” each Tuesday, where a PSI/CI midwife answers questions. The page’s success led to the expansion to Niger in Q1. This complemented the PSI/Niger youth SRH activities while being supported in part by Niger donors.
At the end of 2019, the Entre Nous Facebook page registered 107,364 followers surpassing the targeted 100,000, with 3,299 of those in Niger. The increase was caused by both Entre Nous community events and a geographical scale up in page promotion. The Facebook page has received an influx of messages on infertility, contraceptives methods and menstruation.

INTERPERSONAL COMMUNICATION
In 2019, PSI/CI continued to support the interpersonal communication (IPC) activities in six health Districts in Abidjan and Yamoussoukro by deploying 26 peer mobilizers (PM), including young midwives, to high schools, reaching the 15-19 age group. In June, IPC was expanded to the 20-24 year-old age group. Events took place in the vocational training centers and other professional training establishments such as hairdressing salons, fashion houses, etc. PSI/CI also increased reach and sustainability by partnering with several local organizations such as the Jardin Afrique/Kamissa, the Deaf Association of Cote d’Ivoire, and the Boy Scouts to host World Contraception Day by providing causeries and mobile services. From January to December 2019, a total of 26,724 youth (15-24) were reached in Abidjan and Yamoussoukro with a comprehensive SRH information at causeries during the free time in school and in the community events. (out of 13,824 of the annual target).

In August 2019 PSI/CI recruited additional staff to focus solely on IPC supervision and data collection in Abidjan and Yamoussoukro. Regular supervision visits were completed twice a month to improve the SRH sessions, answer participant questions and to feature nearby health centers and mobile services. PMs received additional training and developed increased confidence answering participant’s questions and the relationship between clinics and mobile services improved.

PARENTS
PSI/CI designed a communication strategy to include parents, to help them understand the value of communicating with their children, become more informed on the use of modern contraception and to improve communications on SRH between themselves and their adolescent girls. The PSI/CI Parent Manager led causeries speaking to the parents of girls who were interested in a method but wanted parental approval first in Abidjan and Yamoussoukro. In 2019, 1,150 parents (218 fathers and 932 mothers) were reached with information on sexuality, HIV, STIs, pregnancy, contraceptives to encourage their children to adopt a method of contraception.

CONNECTING WITH SARA
In 2019, the Connecting with Sara (CwS) app developed a chatbot linking to Entre Nous digital platforms and providing a decision tree of important topics like contraception, tracking metrics and connecting with Google maps to provide facility locations. The chatbot allows higher response times to AGYW comments and questions, while capturing user data.

OUTCOME 2: INCREASED ACCESS TO A WIDE RANGE OF SRH PRODUCTS AND SERVICES FOR GIRLS AND YOUNG WOMEN
In 2019 the Ignite program reached a total of 9,913 new FP adopters, meeting the target. Among these clients, 47% were under 15 age and 53% were 20-24 years old.

MOBILE SERVICES
PSI/CI operated mobile services with four midwives throughout Abidjan and Yamoussoukro. In partnership with the MoH’s maternal health program they were able to offer AGYW free contraceptives, including LARCs, through mobile services. The mobile team is also equipped to provide urgent post abortion care (PAC) while in the field by using Misoprostol before referring patients to one of the 42 nearby health facilities, 28 in Abidjan and 14 in Yamoussoukro. The mobile services also operated in eight youth centers, offering methods and focusing on PAC and 14 in Yamoussoukro. The mobile services also operated in eight youth centers, offering methods and focusing on PAC through use of MVA kits or Misoprostol. One challenge is a dependence on MoH commodities. PSI/CI anticipated a risk of an implant stock out early in Q4 2019, and as a precaution reached out to the IPPF representative to secure implants to carry into Q1 2020 stock. It’s important to prevent stock outs because the local market does not sell this product.

QUALITY ASSURANCE
To uphold PSI’s global QA standard, PSI/CI conducted coaching visits to all providers for quality monitoring, including compliance with SRH/FP regulations. The coaching visits offered an opportunity to improve the quality of FP services by reinforcing provider capacity in the insertion and removal of LARCs and PAC services, included training on the use of MVA kits.

In July 2019, PSI/CI collaborated with Société de Gynécologie et d’Obstétrique de Cote d’Ivoire (SOGOCI) to complete the first quality assurance internal audit in Abidjan, Yamoussoukro and two other zones targeted by GAC project (Daloa and Bouaké). Eight SOGOCI members were trained on how to conduct quality assessment of RH/FP program and service. This audit aimed to both ensure the effectiveness of project’s interventions in the
field and assess compliance with quality standards for RH/FP service delivery. Of the observed cases in both mobile services and health centers, PSI/CI scored 76.4%. Overall, the results show that the standards of technical competence and informed choice are very high. Providers scored high on respecting informed choice with appropriate and comprehensive counseling on the whole range of contraception methods, with no coercion or incentives.

The three standards that need improvement are client security, confidentiality and continuity of care. Not all services were provided in a totally private space, some with open doors or windows. There were also problems with providers not instructing proper after-care or supplying contacts for emergency medical assistance. Support will continue to be given to providers to raise their scores in 2020.

In November 2019, PSI/CI disseminated the QA audit results during the 5th SOGOCI congress to share the best practices to an audience of more than 500 people, in Yamoussoukro. This put PSI/CI on the map as an authority of SRH/FP services in the region. One challenge faced in health centers is data incompleteness in patient records. Providers have been either unmotivated to capture all patient information or absent at the time of reporting. To help prevent this, PSI/CI began organizing data collection visits at the beginning of each month.

OUTCOME 3: IMPROVED ENABLING ENVIRONMENT FOR YOUTH AND YOUNG WOMEN FOR IMPROVING THEIR SRH

MISOPROSTOL REGISTRATION
Misoprostol product registration was completed in 2019. The registration will be used to support Misoprostol distribution in the Hewlett projects as well as different FP/RH projects implemented in Côte d’Ivoire.

PAC
Since 2007, the MoH authorized basic emergency obstetric care for trained nurses and midwives to include PAC, MVA and Misoprostol. In June 2019, the MoH issued a directive requiring all health centers to refer PAC cases to larger/more specialized facilities, effectively barring nurses and midwives from treating such cases within their facilities. As a result, trained PSI/CI providers for all FP/RH projects stopped PAC service delivery. Working with other organizations, particularly the SOGOCI, PSI/CI advocated for a modification and in August 2019, the MoH rescinded the restrictive directive. In Q4 2019, PSI/CI nurses and midwives reopened PAC services. A total of 152 clients received PAC with MVA kits or Miso, with 64 between the age of 15-24, and 88 women 25 years or older.

THE RH/FP LAW
Throughout the year, the latest version of the law was discussed within the parliamentary committee, but was rejected by religious leaders. The MoH will continue to lead dialogue with civil society, partners and religious leaders for an updated draft. However, the upcoming 2020 election may affect MoH support.

TRIGGERISE INDIA

OUTCOME 4: CREATE WEALTH (VIA IMPROVED DEPTH AND REACH OF THE ECOSYSTEM)

In India, Triggerise continued to utilize its ecosystem model providing entrepreneurs with access to products and services to promote, propose and sell in their communities at their convenience. Tiko Pros benefited from this model through greater flexibility in their schedules and offerings, acquiring new skills and earning an income. In order to provide Tiko Pros with diverse earning opportunities, and simultaneously strengthen local economies and supply chains, Triggerise partnered with 115 retailers/pharmacies, and 74 providers. In 2019, Triggerise India’s platform supported 2,709 active Tiko Pros, 1,691 of which were new users.

Over €82,491 was earned by Tiko system actors. Disaggregated by actor, the bulk (92%) of the income was earned by TikoPro (€76,245), followed by Rafiki (€5,238), providers (€732) and retailers. TikoPro in India earned a significant portion of this income from referral of Rafiki for SRH services and from the sale of high impact, high margin products and services.

OUTCOME 5: IMPROVE LIVES (VIA IMPROVED SRHR HEALTH OUTCOMES)

In 2019, Triggerise’s health interventions supported Rafikis in accessing 49,045 SRH services, which provided 9,271 CYPs. The India ecosystem performance trajectory slowed down significantly in Q3 and Q4. This was due to a combination of three programmatic decisions.
In April 2019, because only 2% of users were enrolling via SMS, which was hard to track risk, the no tech (card only) feature in India was discontinued. It took a few months to reach out to new audiences and operationally shift Pros towards targeting the right girl. The decision limited reach with assisted mobilization. Data shows 48% of girls share phones with other family members and feedback from Pro agents confirm that often they can only enroll one female per household. Moving into 2020 two things became clear, the need to diversify Self Enrollment (SE) and Peer to Peer (P2P) enrollment strategies and a need to revisit a no tech option but with restrictions in place.

In June 2019, Tikomiles were reduced primarily to structure incentives for improved behavior (e.g. for repeat use and contraceptive continuation) and to further mitigate risk. The reduction in miles earned impacted the motivation of Pros and as a result the number of Active Pros dropped. In 2020 the miles structure will be increased and standardized in a scale to understand at what incentive level is the desired behavior optimized.

The first iteration of a more robust Risk Standard Operating Procedure (SOP) was created and tested. Field teams were trained on risk mitigation and response times were stricter, reducing the level of risk on the platform. A few areas of fraud were identified and eliminated, which impacted numbers in the short-term as well.

In addition to these programmatic decisions, external factors also hampered efforts in the short term in Q4, primarily in Uttar Pradesh where CAA/NCR protests and the spread of misinformation led to intermittent, government mandated internet shutdowns over a period of 10 days in December across parts of the State, including in Lucknow. Field teams also reported that misinformation around the missed call hotline meant certain of Rafikis were weary of making missed calls on the platform.

Triggerise successfully tested self-enrollment through online demand generation with Girl Effect (GE) to understand, iterate on and improve on the potential for an online to offline journey for AGYW. There were many learnings around content generation, how best to communicate to target audiences and the questions / types of services young girls have. Information gaps are large in target Rafiki use and the strategy of starting with menstruation as an entry point to discuss family planning with unmarried girls was confirmed effective.

Two franchisee clinics were onboarded to the platform, PSS and MSI clinics. Efforts are ongoing in exploring how to onboard more franchise clinics to sufficiently provide coverage.

Jaipur has had success working with local NGOs for demand generation including Helping Hand Foundation, IL&FS skill centers and Pratham Educational Institute. These learnings will influence efforts to expand partnerships across all regions.

Tiko Explore expanded to two new regions, Tonk, Rajasthan and Firozabad, in Uttar Pradesh. While Tonk is starting to see results Firozabad was closed out five months later given several operational challenges. The insights from the closure have been used to improve and strengthen the expansion strategy.

Grand Challenges Canada (GCC) matched Ignite funding which increased reach within the current network as well as new regions, such as Uttar Pradesh. The scale up will start with Lucknow launching in Q2 2020.

TRIGGERISE KENYA

OUTCOME 4: CREATE WEALTH (VIA IMPROVED DEPTH AND REACH OF THE ECOSYSTEM)

In Kenya, Tiko Pros continued to report cultural stigma associated with women selling products household to household. Consequently, All of Kenya’s 4,659 active Tiko Pros in 2019 earned their income by creating SRH demand rather than by selling products as is the case with the India Ecosystem. Tiko Pros have responded positively to this change and their SRHR conversion rate (the percentage of clients they refer who take up an SRHR service) in 2019 was up from 68% in 2018 to 88% in 2019.

Utilizing the insights from the findings on stigma associated with women, TikoPro+ was prototyped from late 2018 and the first half of 2019 in order to test a) the viability and feasibility of private providers paying marketing fees to Tiko Pros who create demand for primary health care services, and b) Tiko Pro interest in marketing health services and the potential income they could earn from doing so. Whilst initial testing found significant interest among providers and Tiko Pros, there was very little traction during the implementation phase of the prototyping
period with low uptake. Consequently during the Ignite project 2019 review meeting in Abidjan, it was decided to suspend the launch of TikoPro+ and to pivot instead in 2020 to a partnership with Healthy Entrepreneurs (HE) to give interested TikoPros the opportunity to earn an income from the sale of high impact health products. Triggerise and Healthy Entrepreneurs teams were finalizing a solution expected to be operational in Q2 of 2020.

TikoPro was implemented in 68 wards with the highest number of sexually active adolescent girls and greatest need for contraception, to continue to implement assisted mobilization. It was decided to stop implementation in one county, Kiambu, due to the high CPR among AGYW and low unmet need for contraception reported from the most recent PMA2020 survey reports. In 2019, over 285,310 Rafiki actively used the t-safe platform to access 230,050 services, generating 310,811 CYPs.

By the end of 2018, 8,026 Tiko Pros, 238 clinics and 308 traders were active on the platform. In 2020, Triggerise will use additional cost share funds from KfW to implement the VIVA project, expanding the platform to 29 new wards. The additional funding amplifies the impact already created through the Ignite and In Their Hands projects.

In 2019, over €804,511 was earned by Tikosystem actors in Kenya. Disaggregated by actor as the table below shows, 64% of the income was earned by Providers (a reflection of the fact that SRH services are fully subsidized in Kenya through the CIFF Investment), followed by TikoPro (18%), Rafiki (15%) and Retailers (3%).

At the end of 2019, there were 2,989 active Tiko Pros, 332 active retailers and 181 active providers, both pharmacies and clinics on the platform.

**OUTCOME 5: IMPROVE LIVES (VIA IMPROVED SRHR HEALTH OUTCOMES)**

Since April 2017, Triggerise has implemented the In Their Hands (ITH) membership in Kenya, which is branded as t-safe¹. Through t-safe, girls and young women under 20 can access free SRH counselling, pregnancy tests, contraception, and HIV tests at select clinics and pharmacies. t-safe is accessible through the three technology pathways (no-tech, low-tech, and high-tech) and users may either self-enroll or enroll with an agent (managed by either Marie Stopes Kenya, Well Told Stories, or Triggerise).

After expanding t-safe to 90 wards and 19 counties in 2018, as part of the Annual Program Review (APR) of the membership program, a decision was made to pivot on self-enrollment in four priority counties, Nairobi, Mombasa, Kisumu and Kajiado, to cover 72 wards.

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¹ The cost of the program is shared between Minbuza and CIFF under the In Their Hands project.
ANNEXES

CYPs generated by Ignite - all countries

15-24 contraceptive users generated by Ignite - all PSI countries
Cote d’Ivoire Entre Nous Facebook followers demographics

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<th>Femmes</th>
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<td>13-17</td>
<td>19-24</td>
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<td>35-44</td>
<td>45-54</td>
<td>55-64</td>
<td>65+</td>
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<tr>
<td>Vos fans</td>
<td>0.168%</td>
<td>0.806%</td>
<td>0.739%</td>
<td>0.256%</td>
<td>0.142%</td>
<td>0.071%</td>
<td>0.0884%</td>
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</tbody>
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<table>
<thead>
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<tr>
<td>Vos fans</td>
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*Image of a group of people smiling and waving.*