



 ignite

2018

ANNUAL REPORT



Ministry of Foreign Affairs of the
Netherlands



Healthy lives. Measurable results.

TRIGGERISE

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

Outcome 3: Improve enabling environment for youth and young women for improving their sexual and reproductive health and rights (including safe abortion)

Outcome 4: Create wealth (via improved depth and reach of the ecosystem)

Outcome 5: Improve lives (via improved SRHR health outcomes)

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abbreviations

AGYW adolescent girls & young women
FP family planning
IPC inter-personal communications
LARC long-acting reversible contraceptive
MDA market development approach
MdM Medecins du Monde
OHMaSS Organisation haitienne de marketing social sur la sante
PE peer educators
PBCC provider behavior change communications
SRH sexual & reproductive health
SRHR sexual & reproductive health rights
YFHS youth friendly health services

2018 has been a year of sustained growth for Ignite. In the third quarter, we reached the **100,000th** new contraceptive user generated by the project since its inception, largely thanks to the school program in Mozambique implemented in 60 schools in three different provinces. Cote d'Ivoire has ramped up activities after the official launch of the program in late 2017 and is also focusing outreach and service delivery in schools, complemented by a popular Facebook page. Despite repeated unrest and a socio-political crisis that have slowed down activities in Haiti in 2018, the program has kept innovating with the setup of the interactive voice recording system, the redesign of the 'Djanm' Facebook page. Triggerise has kept refining its ecosystems in India and Kenya, adapting rewards and systems to local contexts. The **mid-term review** conducted in 2018 helped gain insights into how to improve the project, such as fostering greater involvement of parents and involvement of young people in the program, and reviewing the Triggerise theory of change.

Outcome 1 All market development approach countries have developed **engaging brands** to create demand for contraception and to provide young people with a reliable yet engaging and accessible source of information to answer their questions on SRHR. In Cote d'Ivoire, the Entre Nous Facebook page has over 50,000 followers, in Haiti, the Djanm page nearly 40,000, and PSI/Mozambique has built from last years' work to develop the 'Aquila Papo' ('that' talk) campaign including mass media, events and social media components. Outreach through peer educators reached over 25,000 girls in Haiti, over 125,000 in Mozambique and nearly 9,000 in Côte d'Ivoire.

Outcome 2 PSI/Mozambique delivered impressive results in 2018, mostly thanks to their work in schools. Over 600 peer educators were trained, which allowed the program to more than double the number of new contraceptive reached (nearly 70,000 new users and over 85,000 continuing users of contraception in 2018 only). Unfortunately, following parent's complaints, PSI/Mozambique had **to stop activities in schools**. However, the program team found a solution to continue delivering needed contraceptives and health services to young people by setting up service delivery points in the vicinity of schools, and by working more with parents. OHMaSS continued its work in mobile clinics, reaching nearly 1,000 new contraceptive users, and continued its fruitful collaboration with the local Disprophar by launching 3rd generation oral contraceptives and branded emergency contraception. PSI continued to train a significant numbers of health service providers to provide quality service adapted to young people: 92 professionals trained in Haiti, 142 in Mozambique, and 74 in Cote d'Ivoire.

Outcome 3 OHMaSS continued supporting Medecins du Monde (Mdm) France to advocate for the decriminalization of abortion in partnership with the SRHR collective, which provided contributions to the **revision of the abortion bill** by the parliamentary and senatorial health committees. In Mozambique, PSI conducted trainings on the new abortion guidelines for health providers issued by the Ministry of Health. PSI/Côte d'Ivoire led a training focused on abortion and post abortion care that incorporated value exploration sessions for 82 providers from Abidjan and Yamoussoukro.

Outcome 4 In India, Triggerise enrolled 1,450 new Tiko Pros in its ecosystem during 2018, and launched the **Tiko Explore membership**, and kept refining its system to ensure that young women were enrolled. In Kenya, the ecosystem had 8,000 Tiko Pros. While Tiko Pros in India found selling products much easier than creating demand for SRH services because of taboos around SRH, it was the opposite in Kenya, where Tiko Pros reported cultural stigma associated with women selling products household to household and preferred referring women to health services.

Outcome 5 In Kenya, Tiko Pros reached 262,666 women ages 15 to 24 (nearly double the 2018 targets), leading to 150,154 adopting a contraceptive method, and generating 143,425 CYPs. In India, the ecosystem supported women in accessing 43,474 SRH services, which provided 3,145 CYPs.

OUTCOME 1:

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

Social and Interactive Media

The OHMaSS team decided to focus its communication strategy on social media with the objective to improve social engagement with AGYW around SRH through the DJANM Facebook page. Topics of interest, which were identified during the previous year and were regularly posted on the DJANM Facebook page, include menstruation, masturbation, sexual drive, and feminine hygiene. This focused content led to an increase from 7,000 followers in March 2018, to 38,027 followers by December 2018, reaching about two million young people, 60% being girls between the ages of 15 and 24. The project utilized Facebook's video algorithm to create original marketing content, partnering with a high-profile local comedian as the OHMaSS youth champions. The most successful of the multi-media content was a web series about hygiene, sexuality, and contraception, with more than 600,000 minutes of video viewed.

In addition to the DJANM Facebook page, OHMaSS has laid the groundwork for an Interactive Voice Responds system (IVR) with VIAMO to make information accessible to anyone at any time through a phone. IVR will allow those without access to the Internet to have answers to their SRH questions and to express their concerns over the phone. The team has developed content on five categories - hygiene, family planning, menstrual cycle, pregnancy and abortion. The IVR system will be a free service available 24/7 and is expected to launch in Q2 2019.

Interpersonal and Community-based Communication

OHMaSS has relied on interpersonal communication agents to correct the image of DJANM, which was perceived as a youth movement, not specifically focused on SRHR. These IPC agents have promoted DJANM to AGYW as a way to achieve their life goals by avoiding unwanted pregnancies and encouraging them to adopt a safe and healthy sexual lifestyle. In 2018, IPC agents have conducted 2,029 small group information sessions, reaching 26,253 girls with education on SRHR, and have posted the information shared at their sessions to the DJANM Facebook page.

At the community level, a conference on "Advocacy for Female Leadership in Addressing the Problem of Youth Access to Reproductive Health Services" brought youth and young adults together with public leaders and representatives of other SRH organizations. The conference gave young people a platform to voice their needs and concerns about SRH, and to discuss topics of SRH with providers, parents, and religious and education leaders.

Mass Media and point of sale materials

OHMaSS invested in traditional mass media channels-billboards, radio, and sponsoring key youth events-to increase its reach and promote the range of contraceptives distributed through pharmacies. Communication materials have also been created to inform clients of the availability of various methods and brands at the points of sale.

OUTCOME 2:

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

Sales

During 2018, OHMaSS, through its partner Disprophar, sold: 205 IUDs, 518 implants, 250 injectables, 8,679 oral contraceptives, 15,700 emergency contraceptive pills, and 95 MVA kits. These numbers were mostly below 2018 objectives for a variety of reasons: delays in the procurement of Sayana Press, slow economic activity due to the unrest, as well as the launch of Meuri-branded 3rd generation of OCs and branded EC in Q3 (sales for new brands take time to take off).

Service provision

Issuing contracts with private sector OBGYN clinics to create a network of quality SRH service providers took a lot longer than anticipated, partly because of legal complexities and partly because of the unrest. OHMaSS could only rely on mobile services to provide health services, and objectives had been established with a functional network of private health providers in mind. As a result, OHMaSS fell short with 32% of its annual new user objectives through the provision of quality SRH services. 965 AGYW received a contraceptive of their choice at the mobile clinic with the following split: 184 new implants, 104 new OC, 124 new IUD, 135 new injectables and an additional 169 implants, 64 OC, and 185 injectables for continued users. Adopters of short-term methods are referred to pharmacies or nearby providers for continued use. During Q4 2018, OHMaSS was able to finalize the selection of its 25 providers that will form the DJANM network. With this network of providers, OHMaSS expects a higher uptake of new adopters in 2019.

OHMaSS continued carrying out much-needed trainings for health professionals. Disprophar and OHMaSS conducted four training sessions for 92 health professionals, nurses and doctors, on FP and Long-Acting Reversible Methods (LARCs). OHMaSS also sponsored two events to promote a portfolio of contraceptives, which was the largest portfolio made available to the private sector. The first event was the 2018 congress of the Haitian Society of Obstetricians and Gynecologists. The OHMaSS-Disprophar partnership was introduced with the portfolio of contraceptives to participating OBGYNs

and midwives. A kiosk was present to field questions and comments from attendees. The second event was World Contraception Day on November 26, 2018, commemorated in collaboration with the Division of Family Health of the Ministry of Health. The event drew a wide range of stakeholders including donors, partners, government officials, etc. and young people, many who were students. The attendees were presented with information on SRH in Haiti and informed on the contributions of the Dutch Ministry of Foreign Affairs.

OUTCOME 3:

Improve enabling environment for youth and young women for improving their sexual and reproductive health and rights

Medecins du Monde (MdM) France continued its work to advocate for the decriminalization of abortion. This included the creation of working groups of young advocates mobilized on SRHR. More than 30 meetings took place between MdM and the SRHR collective in Haiti, and the following results were achieved: three advocacy trainings, one strategy proposal, one committee comprised of eight members of key organizations, one group of young litigants identified, two conference debates, five radio program broadcasts, and four published press releases.

The conferences, debates and targeted media campaigns were implemented in anticipation of the revision of the abortion bill by the parliamentary and senatorial health committees. The results of the revision process are not yet official, though some leaks have indicated that the right to abortion will be recognized in cases of rape, incest, and if the life of the woman is in danger. However, the recommendations seem to be very restrictive for minors, including the need for approval of a parent or of the Institute of Social Welfare and Research (IBSR) for orphans.

mozambique

OUTCOME 1:

Increased informed demand for SRH services by girls and young women

Increase demand for YFHS centers

The Aquele Papo campaign (formerly Maria & Roberto) was developed from the first piloting phase of Maria & Roberto, building on successes and lessons learned. The campaign has developed an adolescent drama, called "Aquele Papo" meaning 'The Talk', a 13-minute film telling the story of a Mozambican girl and boy dealing with SRH themes.

Strengthen peer educator networks

The first half of 2018 was a period of growth for school activities. A focus was kept on the Peer Educators network for demand creation of SRH services. 125,686 adolescent girls were reached in peer to peer sessions with information on sexuality, HIV, STIs, pregnancy, and contraceptives. Compared to last year, there was however, a 10% decrease in the number of adolescent girls reached related to the end of the Mobiz program, which had a larger network of Peer Educators.

In 2018, PSI/Mozambique increased the number of schools Peer Educators worked in to 60 schools in three different provinces, with an average of 10 Peer Educators per school. 656 Peer Educators in total were trained to increase the scope of the peer to peer program.

In 2018, the referral system changed from Movercado to Connecting with Sara (CwS). CwS is an android app that allows continuous tracking of the interactions between providers and young women, capturing useful information from field activities and providing teams with detailed information in real time, which helps optimize activities.

Strengthen peer educators' capacity to implement informed choice and SRH rights protocols

To strengthen the Peer Educator's capacity and the quality of sessions, PSI has conducted values explorations sessions with Peer Educators working in different schools. In these sessions, PSI focuses on informed choice, including the benefits of the different contraceptive methods, as well as current information on safe abortion. Peer Educators are also trained on the use of the referral system (CwS).

Based on the information collected, PSI/Mozambique made some changes to the school teams. Peer Educators have been recruited and trained from different grades. New IEC material was created to support the Peer Mobilizers with the key messages to Focus on the Future (Foco no futuro) and Expect the Unexpected. The material was created with AG to ensure messaging was targeted to youth. School teams now include school counselors, as they ensure a more permanent presence in the school corners and can support peer educators' activities.

OUTCOME 2:

Increased access to a wide range of SRH products and services for girls and young women

Increase access for contraception in YFHS centers

In 2018 PSI Mozambique operated its FP services in 42 clinics and 60 schools, reaching 69,698 new contraceptive users and 86,809 continuing users. Youth Friendly Services trainings were conducted with all providers to ensure services were adapted to AGYW.

Unfortunately, by the end of 2018, SRH services were suspended in schools by the Ministries of Health and Education, due to parents' objections. To address this challenge, PSI started to involve parents and care givers in youth activities in late 2018. To continue providing much-needed health services, PSI/Mozambique has setup service delivery points in front of schools, in agreement with school management. Early Q4 2018 results seem to indicate that relocating services right outside of schools does not have such a severe impact on number of additional and continuing users.

OUTCOME 3:

Improved enabling environment for youth and young women for improving their SRHR

After the national training of trainers held in November 2017, the different safe abortion partner organizations started to implement provincial trainings for health providers, procurement of commodities, facility assessment and capacity building ensuring that protocols are followed and quality is assured.

During the year of 2018 PSI trained 142 public sector health providers in 4 provinces (Gaza, Inhambane, Sofala and Niassa). In 2019, PSI TEM+ nurses will be trained on the job.

A PSI supervision team has kept an open communication channel with the provincial teams to mark the start of services and provide support. Service Delivery started in 2018 but only at district level. The other health centers must refer to the district unit.

For accurate reporting on safe abortions, orientations on using registration books have been developed and shared by the MoH to all districts.

côte d'ivoire

OUTCOME 1:

Increased informed demand for SRH services by girls and young women

Implementation of Communication Activities

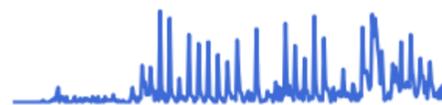
After finalizing a communication plan in collaboration with local leaders including the Jeunes Ambassadeurs, youth-NGO MESSI, the *Programme National de la Santé de la Mère et de l'Enfant* (PNSME) and PNSSU, in 2018, PSI-CI launched the "Mon Topo" campaign and created Entre Nous, an engaging Facebook page with a focus on sexual and reproductive health information for girls aged 15-24.

The campaign messages: "Mon Topo c'est la contraception" (My secret ingredient is contraception) and "J'adore Mon Topo" (I love my secret ingredient), encouraged AGYW to take an active role in making their own informed decisions around SRH, to attend health facilities, and to use contraceptive methods. Girls in Côte d'Ivoire often lack trusted sources to access health information. But with the Entre Nous Facebook page, created March 7th, 2018, girls can find the information they need to make their SRH choices. Entre Nous had 50,260 followers in December 2018 and leveraged real-time social media analytics to track how best to inspire and serve Ignite's target consumers.

In addition to serving AGYW with content on contraception using the Mon Topo messaging, Entre Nous shares motivational quotes and posts about beauty, love, and health. Every Tuesday, Entre Nous hosts "Sage-femme Gabi" where a PSI midwife answers girls' health queries via post or direct message. The youth-friendly midwife Gabi—a scripture-inspired name to appeal to girls of all faiths—also posts her picture, a component integrated based on girls' expressed desire to chat with an actual person. Seven in 10 of the page's followers are under 24 years old and 98% are women. Sage-femme Gabi Tuesdays are an essential part of IPC activities as Entre Nous receives significantly more messages on Tuesday than any other day of the week.

2,014

New Messaging Connections ▲ 100%



[Photo Caption: In 2018 Entre Nous received 2,014 messages. The peaks above correspond to messages received on Tuesdays.]

In 2019, the Entre Nous trademark will be registered and Entre Nous' YouTube channel will launch to reach more AGYW by diversifying the communication medium and elevating SRH content for consumers.

Peer Mobilization Approach

In 2018 PSI-CI reached 8,853 youth in Abidjan and Yamoussoukro with comprehensive SRH information. PSI-CI trained and deployed 39 peer mobilizers (PMs) (including nine midwives) in five health Districts in Abidjan and 18 PM (including four midwives) in one Yamoussoukro district. The mixed approach with young midwives alongside PMs aims to support technical aspects during interpersonal communication (IPC) activities in the community.

Using adapted IPC training materials from PSI Mali and PNSSU, PMs learned communication and basic contraceptive and reproductive technology during initial trainings and technical re-fresher meetings. To ensure quality, PSI-CI performed nine supervision visits in 2018 and shared constructive feedback to improve content delivery, participant engagement and information retention. To address gaps in demand creation during the holiday season, PSI-CI also expanded IPC activities outside of schools to markets, beaches, bars and homes—leading to a significant increase of youth clients (i.e. 51.6 % of AGYW clients in July to 96.9% by the end of August).

In November 2018, PSI-CI updated and revamped all training tools and guides for PMs to be more efficient, clear and interactive (i.e. Mid-wives will present the methods in order of effectiveness and provide additional information regarding return to fertility). In addition, in October 2018, PSI-CI hired a Youth Technical Advisor to support project activities and enforce youth engagement.

OUTCOME 2:

Increased access to a wide range of SRH products and services for girls and young women

After completing a learning visit in November 2017 to PSI Mali, PSI-CI launched mobile service delivery in February 2018 with two mobile service units in Abidjan and one unit in Yamoussoukro. Prior to mobile service visits, peer mobilisers share upcoming service dates and referrals for YF health centers in the area during sensitization activities. Mobile service units are led by two PSI-CI's mid-wives and in collaboration with the Health District SRH Coordinator and health facility mid-wives (when available).

In February 2018, 42 health providers were trained in Abidjan in collaboration with PNSSU and national data trainers from PNSME, and 32 health providers were trained in Yamoussoukro in July. Trainings contained information on contraceptive technology, youth friendly services and data collection tools. PNSME also supported mobile services by providing 100% of the FP products. In 2018 PSI-CI received a total of 8,644 FP products. Distributions included 864 male condoms, 2,000 female condoms, 1,500 Depoprovera, 1,440 Microgynon, 1,440 Microlut, 150 DIU, 650 Jadelle, and 600 Sayana Press.

In 2018 there were 3,412 new users of modern contraceptive methods (1,801 aged 15 -19 years and 1,611 aged 20 - 24 years). 2,267 new users were from mobile services, 403 from medical schools, 550 from health centers, and 192 from private clinics.

To ensure service quality and to build providers in SRHR, Ignite midwives conducted nine supervision visits (eight in Abidjan and one in Yamoussoukro) at 43 health

LARC and PAC knowledge, increase skills and practices of health providers, provide additional guidance to health providers on clinical skills as needed and assist providers trained in IUD insertion techniques.

PSI-CI submitted the appropriate paperwork to obtain Marketing Agreement Authorization (MAA) for Avertiso (PSI's brand for misoprostol) on May 2, 2018. PSI-CI passed the MOH's administrative and technical analysis review, but the local registration process is still pending. PSI-CI awaits approval from the Direction de la Pharmacie, du Medicament et Laboratoire (DPML).

OUTCOME 3:

Improved enabling environment for youth and young women for improving their SRH rights

Throughout 2018 PSI-CI collaborated with local partners to mobilize support for PAC and safe abortion. In January 2018, PSI-CI drafted a memorandum of understanding (MOU) between PSI-CI, health centers, CSSU and Société de Gynécologie et Obstétrique de Côte d'Ivoire (SOGOCI). On June 20th, 2018, the MOH signed a Circulaire (memorandum) which aims to harmonize the prices of contraceptive products in all public health centers.

In August 2018, PSI-CI led a training focused on abortion and post abortion care that incorporated value exploration sessions for 82 providers (two doctors, 24 nurses and 56 mid wives) from Abidjan and Yamoussoukro and representatives from national programs PNSME and PNSSU, and SOGOCI.

In order to increase national level advocacy for SRHR issues, PSI-CI attended 10 ministerial meetings—with members from PNSSU and PNSME to the Ministry of Health and Public Hygiene (MSHP)— to 1) develop the Accelerated FP Action Plan to achieve a contraceptive prevalence rate of 36% in 2020; 2) discuss safe abortion initiatives with members of the National Technical Committee of Health (including FP and PAC); and 3) revise the SRH/FP Law. The law addresses the age to access to contraception without parental consent, free distribution of contraceptive products, removal of the authorization of three medical doctors in order to access voluntary interruption of pregnancy and task shifting for community health workers.

The weekly meetings for the review of SRH law were stopped by the MOH in March 2018 without further notice. In July 2018, the Minister stepped down and PSI-CI is working to build rapport with the new appointee. In November 2018, PSI-CI submitted a request to meet with the new MOH, but he was unavailable. A second request was submitted in January 2019. PSI-CI awaits confirmation, but in 2019 PSI-CI will continue to build rapport and provide technical support to the MOH.

Triggerise kept growing and evolving its ecosystem in 2018, refining incentives and creating new hypotheses. The theory of change was reviewed as per recommendations from the mid-term review, and the new one can be found in annex 10.

OUTCOME 4:
 Create wealth (via improved depth and reach of the ecosystems)

Triggerise created wealth in target communities by expanding Tiko Pro implementation. Over 1,450 new women (in India, Tiko Pro exclusively targets women) enrolled as Tiko Pros during 2018, and over 2,391 Tiko Pros completed at least one earning activity. More than 120 Tiko Pros (60 in Agra, five in Ajmer and 58 in Jaipur) who joined in 2016 are still active today. And by the end of 2018, India-based Tiko Pros earned an average of 19 Euros per month - and quite a few Tiko Pros earned over 50 Euros per month.

Tiko Pro underwent several transitions in India 2018, which sometimes proved challenging. Some of the key changes we implemented in 2018 were:

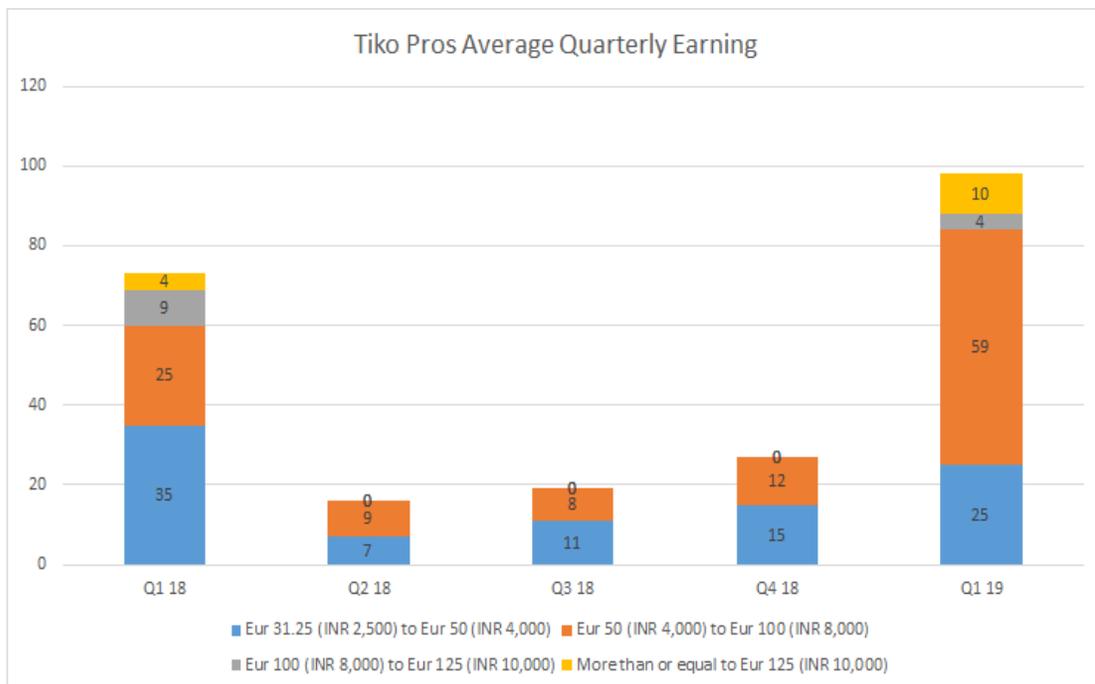
- **Launch of Tiko Explore**, which required Tiko Pros to use smartphones to enroll members. Triggerise partnered with mobile shops to allow Tiko Pros to use Miles to buy smartphones.
- **Re-alignment of target group and Tiko Miles:** Triggerise India reviewed its rewards for Tiko Pros and conducted trainings to ensure that women aged 15-24 would be enrolled into the system.
- **Removal of restocking Miles when buying products at stockist:** In Q2 2018, Triggerise India removed rewards given to Tiko Pros when they were restocking, as these rewards proved difficult to track. As a result, the total product value distributed indicator decreased from 27,561 Euros in Q1 to 7,035 Euros in Q2. Other forms of incentives were piloted in 2018.

OUTCOME 5:
 Improve lives (via improved SRHR health outcomes)

Improving Offers and Benefits through Tiko Explore

Tiko Pros found selling products much easier than creating demand for SRH services because of India's taboos around SRH. To address these taboos, Triggerise created, prototyped and piloted lifestyle offers to add to the Tiko Explore membership. These offers provided users with more opportunities to engage with our platform - outside of SRH. As lifestyle offers built loyalty, we gradually encouraged women to consider learning more about SRH benefits at outreach sessions and online. In 2018, our health interventions supported Rafikis in accessing 43,474 SRH services, which provided 3,145 CYPs.

In 2018, sanitary pads and baby care were the highest selling product categories. In the family planning category, pregnancy test kits were the key selling product. The Family Planning category accounted for just 6% of product sales but contributed to 39% of Tiko Pro profit due to high profit margins. Our objective is to coach Tiko pros to maximise profit by balancing fast moving/low margin products (like sanitary pads) vs high margin products (like pregnancy test kits). Our 2018 growth resulted from several concurrent strategies: added pharmacies to the ecosystem, improved Tiko Explore offering, more activities targeted to girls, new partnerships, and new geographic area (Delhi).



OUTCOME 4:

Create wealth (via improved depth and reach of the ecosystems)

In Kenya, Tiko Pros reported cultural stigma associated with women selling products household to household and preferred referring women to health services. Triggerise leveraged this insight by designing and prototyping Tiko Pro+ 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. Initial testing found significant interest among providers and Tiko Pros - but also minor technical complications associated with running parallel offers on the Tikosystem. Triggerise technical and operational teams are finalizing solutions that we expect to implement in Q2 2019.

In 2018, over 90% of Kenya's 8,000 active Tiko Pros in 2018 earned most of their income by creating SRH demand rather than by selling products. Triggerise Kenya used this data - as well as previous learnings - to build a healthier Tiko Pro network that emphasized SRH demand creation. Tiko Pros have responded positively to this change - currently, their SRHR conversion rate (the percentage of clients they refer who take up an SRHR service) is 68%. [In 2018, Tiko Pros reached 262,666 women ages 15 to 24, with 150,154 adopting a contraceptive method, generating 143,425 CYPs.](#)

OUTCOME 5:

Improve lives (via improved SRHR health outcomes)

Since April 2017, Triggerise has implemented the In Their Hands membership in Kenya, which is branded as t-safe¹.

Through t-safe, girls under 20 can access free SRH counselling, pregnancy tests, contraception, and HIV tests at select clinics and pharmacies. In 2018, Triggerise expanded t-safe to include 90 wards in 19 counties. Each ecosystem includes two clinics, two pharmacies, six traders (who sell a diverse range of products and services) and 50 active Tiko Pros. Key learnings from the expansion include:

- Clarity that the ideal Tiko Pro is a satisfied client who has fully experienced t-safe and/or Tiko Explore benefits;
- Invest in high-quality and repeat trainings for agents, clinics, and pharmacies using the platform;
- Implement a risk management and control process to prevent suspicious activity on the platform with speed and efficiency;
- Automate as many control processes as possible and ensure restrictions are in place to minimize gaming of the system;
- Include multiple checkpoints throughout the user journey to ensure that women and girls meet the correct age profile (under 20).

[In 2018, the results nearly doubled the original annual targets set, with 262,666 young women actively using t-safe Tikosystem platform and 150,154 of them accessing an SRH service. This generated 143,425 CYPs. By the end of 2018, 8,026 Tiko Pros, 238 clinics and 308 traders were active on the platform.](#) In 2019, Triggerise will use additional cost share funds from KfW to fund the VIVA project to expand the platform to 29 new wards. This additional funding will allow us to amplify the impact we've already created through the Ignite and In Their Hands projects.

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



[Girls learning about contraceptive methods in Haiti. Photo by Evelyn Hockstein]

annex 1

TRIGGERISE**Brands - Tiko Explore, Tiko Pro and Tiko Miles**

In 2018, Triggerise continued to refine Tiko, the consumer facing brand, by adding two new main types of users: Esther, an adolescent girl or young woman with an unmet need for contraception; and Tahira, a married woman with kids who wants to earn extra spending money and potentially delay future pregnancies.

Tiko Explore Redesign: Optimizing Ecosystem Development for Creating Wealth and Improving Lives

Tiko Explore is the SRH and lifestyle-oriented membership that Esther joins when she enrolls into the platform. In 2018, Triggerise prototyped Tiko Explore in each market. Since SRHR products and services are not always a priority for Esther, it was hypothesized that a more comprehensive offering would build an ongoing relationship with our users, broaden our positioning, and ultimately improve SRHR outcomes. Recent data from our programs in Kenya and India supports this hypothesis, though each country has required market-specific adaptations.

Tiko Pro: Entrepreneurship Program to Create Wealth

Tiko Pro allows entrepreneurs to use the ecosystem to earn an income through product sales and SRH demand creation. Tiko Pros use an app to manage their businesses. They stock fast moving consumer goods with participating stockists, sell products at a markup, refer members of our target audience for SRH consultations, and earn based on consultation attendance. In 2018, Tiko Pro product baskets expanded to include more fast-moving impact products. Tiko Pro was also tailored to both country contexts - in India, providing Tiko Pros with entry points to discuss stigmatized SRH conversations, and in Kenya, emphasizing SRH demand creation given stigma associated with door-to-door sales.

Tiko Miles: Virtual Rewards to Motivate Positive Behaviour

Tiko Miles are virtual rewards that users - Rafiki, Tiko Pros, providers, etc. - earn immediately after verifying positive behavior. Users spend Tiko Miles as they spend cash in the local market - at retailers we enroll into our ecosystem or with Tiko Pros. In 2018, we decreased the amount of Tiko Miles issued for certain behaviours and began to approach motivation more holistically. Quantitative user data and qualitative insights showed that Esthers responded more enthusiastically to non-financial nudges - like in-person reminders or the opportunity to feel heard when rating a service - than nominal amounts of Tiko Miles. Tiko Miles proved particularly effective when used to build loyalty and

motivate consistent use. In 2019, we plan to apply more behavioural economic rigor to Tiko Miles and motivation in general - determining how to most effectively and sustainably motivate behaviours.

Using Technology Pathways to Expand User Accessibility and Providing Client Feedback

While SIM penetration and phone ownership rates are growing rapidly in the Ignite markets,¹ Triggerise continued to develop three technology pathways - high tech, low tech, and no tech - in order to engage younger and more rural users with minimal or no phone access.

High Tech: High tech solutions include Triggerise apps, integrations with popular messaging apps, and mobile-friendly websites designed by partners like RNW (Love Matters) and Girl Effect. In 2018, all providers and Tiko Pros in our Tikosystems validated transactions using apps. Although providers and Tiko Pros were previously reluctant to use apps, they transitioned to using apps for two reasons: 1) Changes we made in our apps' user interface; and 2) Our focus on enrolling tech savvy Tiko Pros, who appreciate how apps facilitate product stocking and referrals.

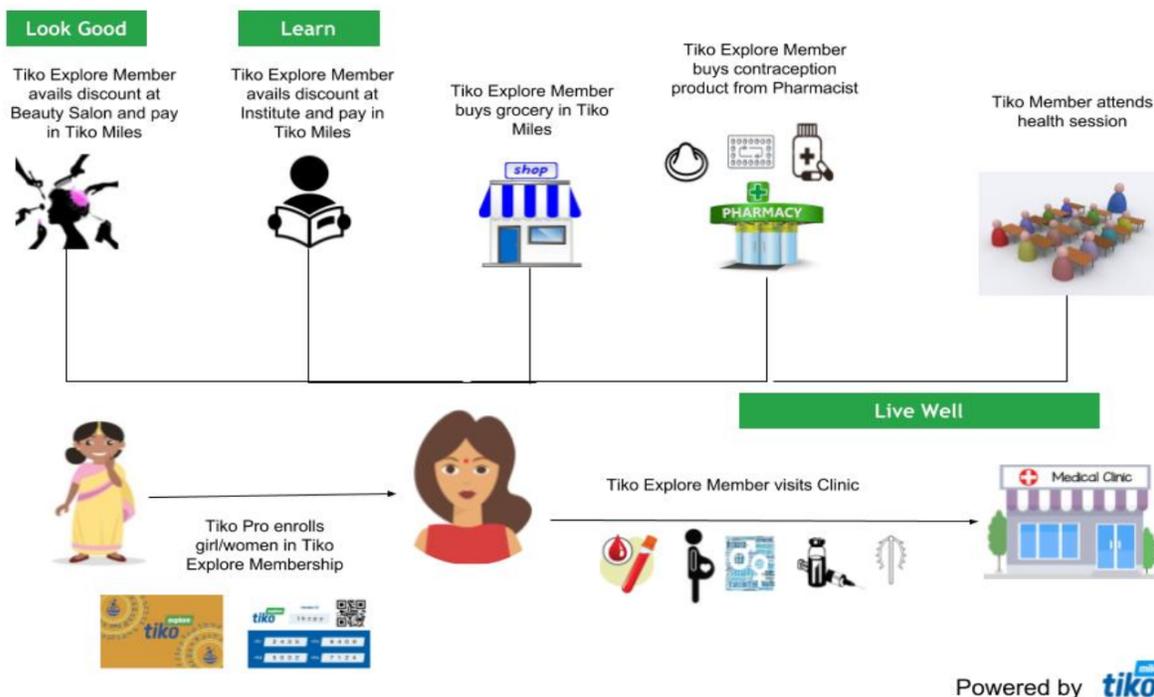
Low Tech: Low tech solutions include SMS and missed calls, designed to work on smartphones and regular cellphones. As in 2017, low tech was still the most popular pathway in 2018, though we expect low tech users to decrease as smartphones become more common.

No Tech: In order to accommodate users with minimal phone access, a no tech solution was developed in 2017 - a membership card with a QR code linked to the user's photo and unique PIN numbers. Agents and providers scan the QR code to enroll or verify the user. Unique PIN card numbers allow users to validate services or redeem Tiko Miles. In 2018, we successfully piloted membership cards and then fully implemented them as part of our India and Kenya programming. Although membership cards do not allow us to regularly follow up with users (which we frequently do with phone numbers), we have started to address this limitation by encouraging - and when possible, requiring - membership card users to provide a phone number.

¹ According to GSMA Intelligence (a leading organisation monitoring trends in mobile technology), the Q4 2018 SIM penetration rates (# SIM cards/population) in India and Kenya were 79% and 93% respectively. Mobile broadband rates, the percentage of SIMs with 3g or 4g capability - which is a good proxy for smartphone penetration - is growing exponentially.

INDIA
annex 2

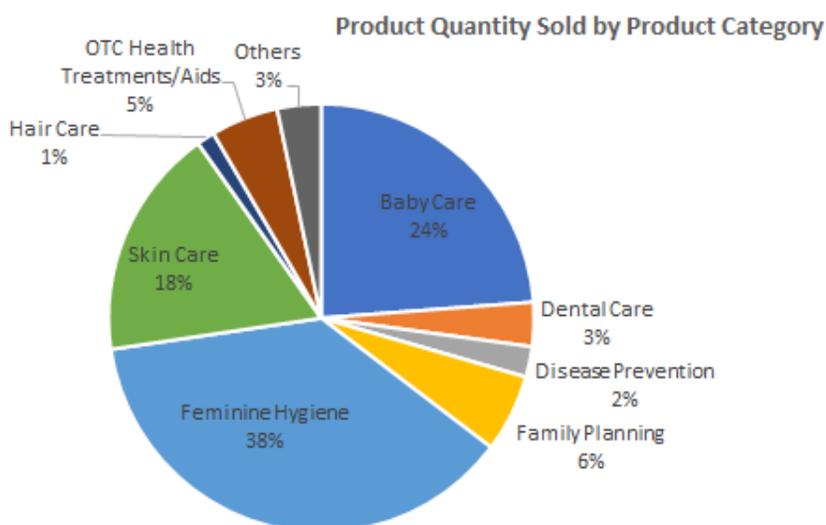
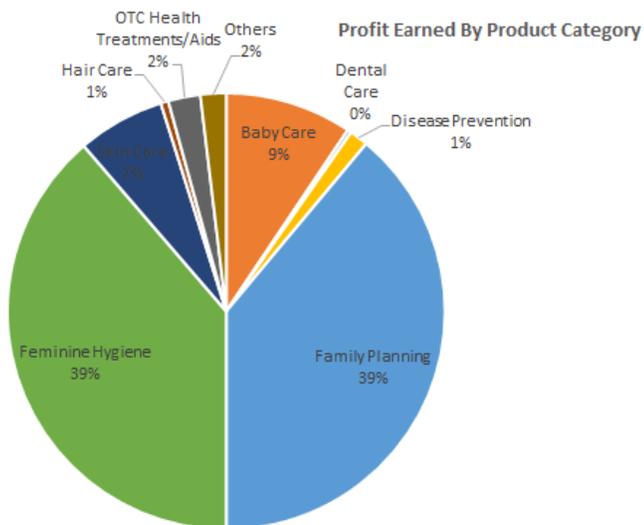
The following diagram demonstrates how Tiko Explore works in India:



annex 3

Improved Product and Service Basket in India:

Most Tiko Pros in India earned by selling fast moving consumer goods - including sanitary pads and other menstrual hygiene management (MHM) products, which not only addressed MHM needs but also provided Tiko Pros with an entry point for more difficult SRHR conversations. With the introduction of the Tiko Explore membership, Tiko Pros began to sell enrollment cards and earn Tiko Miles by referring clients for SRH services. Triggerise refined the Tiko Pro product and service basket to strengthen the brand's value proposition, diversify earning opportunities, increase our retention rate, and produce indirect health benefits.

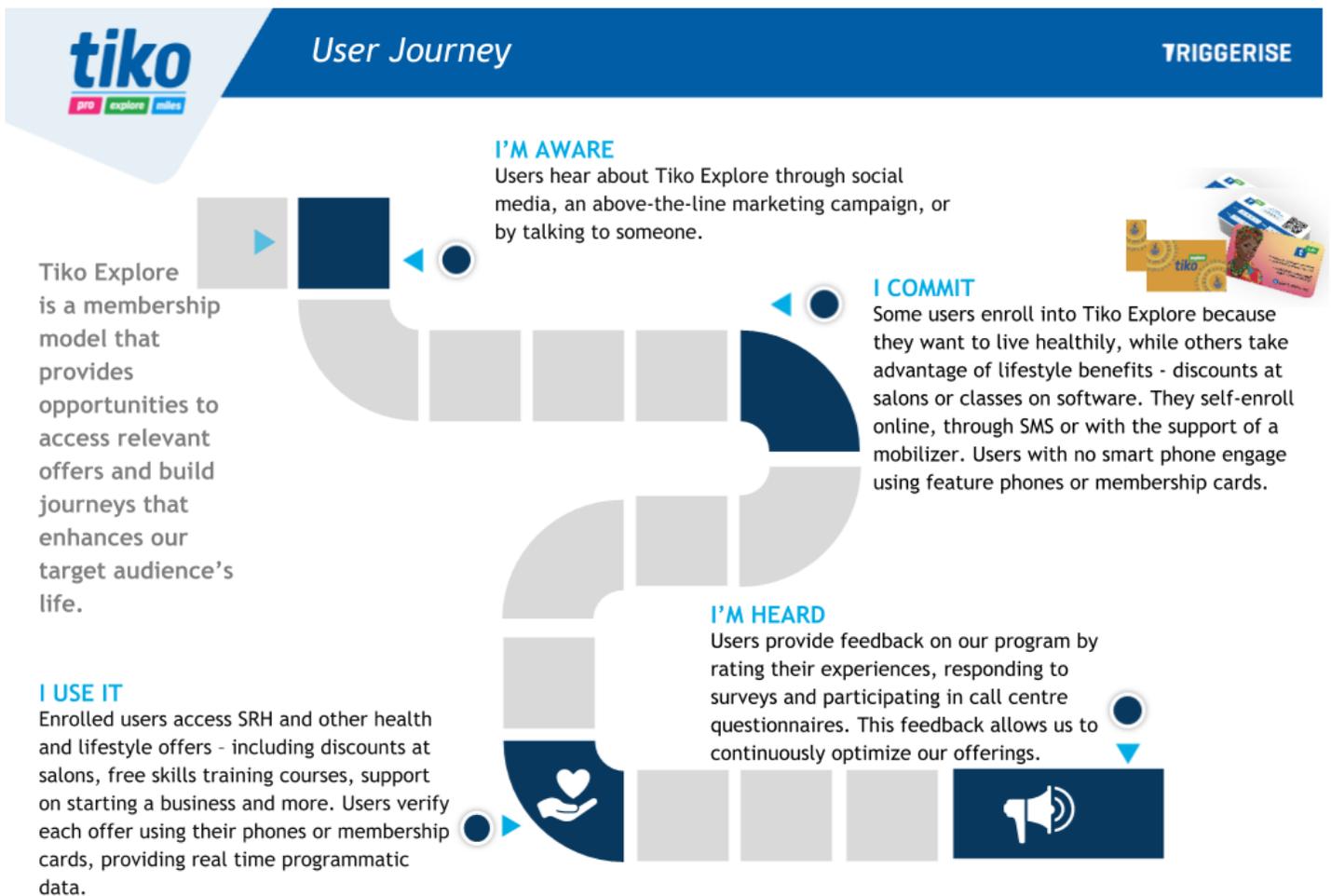


KENYA

annex 4

Applying the User Journey:

In June 2018, as Triggerise Kenya implemented the new Tiko Explore membership, conducting market research to understand the needs of Rafikis in different geographic areas - specifically in relation to healthy lifestyles. Triggerise then conducted a market landscaping of each ecosystem to determine the clinics, pharmacies, traders, and services (such as hair salons, internet cafes, and learning centers) that provided the most relevant offers. These insights were used to design a more relevant Tiko Explore offering and ultimately generate health impact.



MOZAMBIQUE

annex 5

Aquele Papo campaign

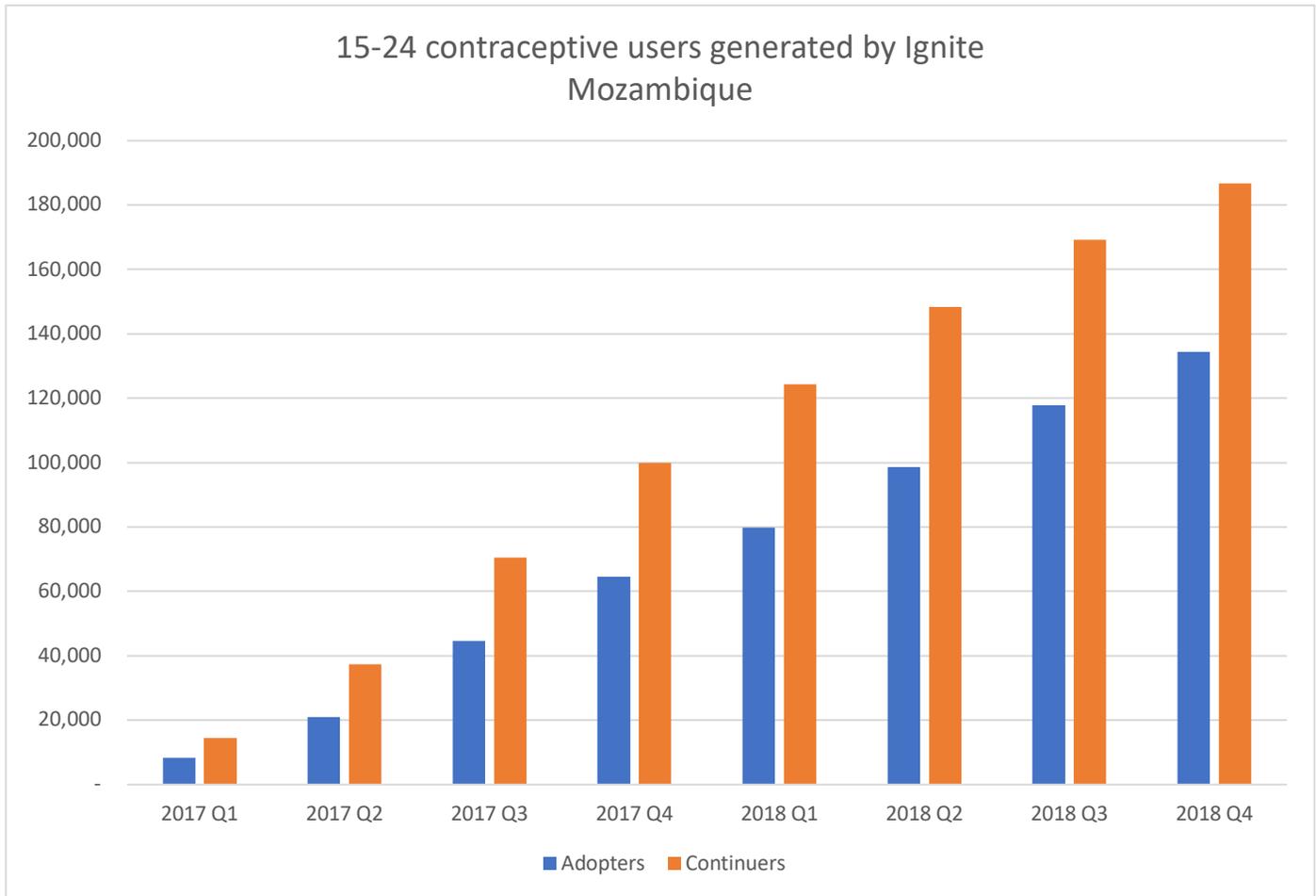


Julia Ideal Journey

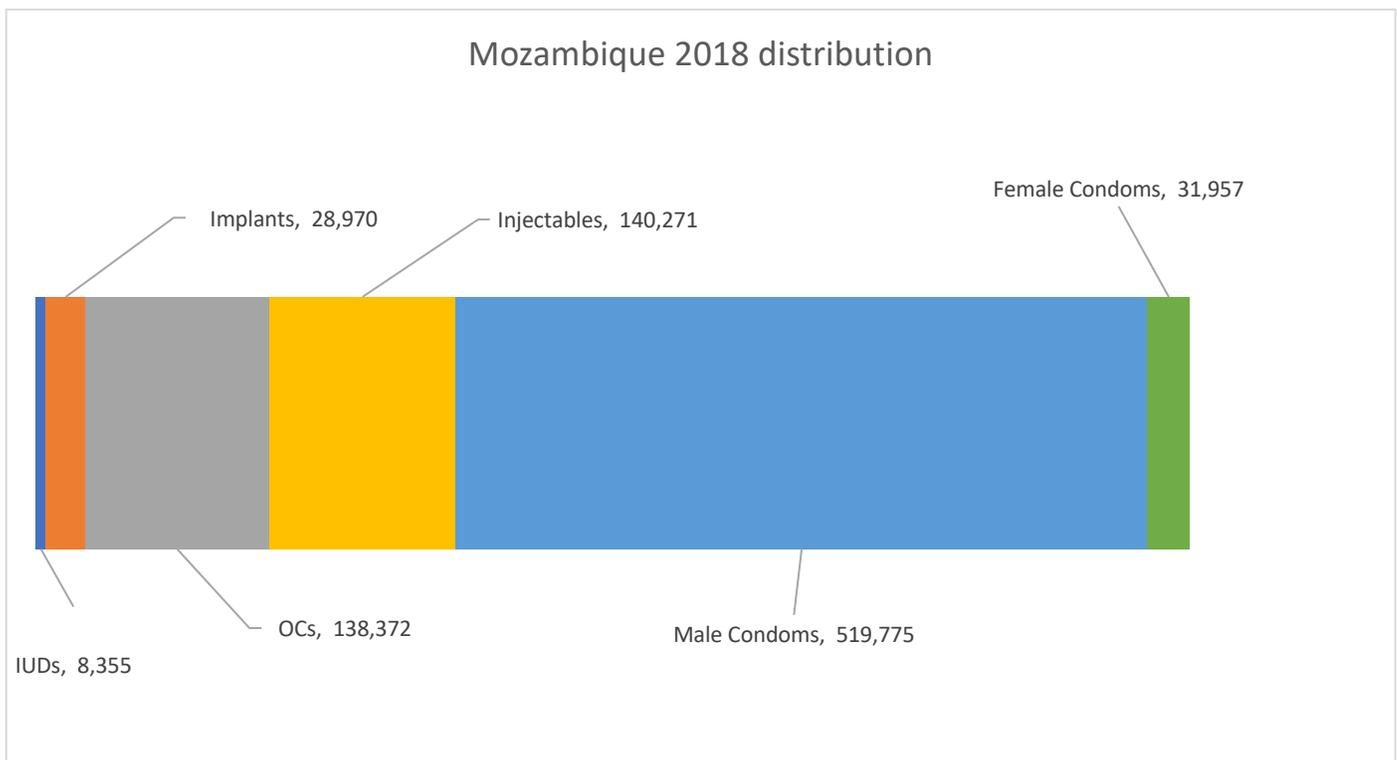
	MOTIVATION	AWARENESS	ACCESS	FIRST USE	CONTINUED USE
ACTIVITIES & TOUCHPOINTS	<p>Wanting to see more about Aquele Papo film</p> <p><i>Empathizing with Aquele Papo story</i></p> <p>Julia will listen to the radio spots on the television and radio, talking about the story Aquele Papo. She identifies her self with the issues of Maria. She will be curious and interested in knowing more about it.</p> <p>The Peer Educators start talking about the story to come, increasing the curiosity on Julia.</p>	<p>Learning about the contraceptives topic</p> <p><i>Identifying with Maria issues.</i></p> <p>I want to know more... Let me check Aquele Papo facebook page! Oh! They are coming here to show the film!</p> <p>When the Aquele Papo teams shows up, everyone is so excited about what's happening! There's music and a Big Tent!</p> <p>The film is awesome! At a point I was feeling really mad at Roberto! But then the end was great! And now I'll have more at the tent!</p>	<p>Choosing to access Aquele Papo tent</p> <p><i>I want to control my future</i></p> <p>There's more at the tent! And only for girls...</p> <p>The activities in the tent were really nice, but I'm not sure my mom would like to know that I have started a contraceptive... Let me talk to a friend first and then come back to the tent.</p>	<p>Initiating a Contraceptive Method</p> <p><i>I control my future</i></p> <p>I have done my decision. I will control my future. I don't want to stop my studies because I was not prevented.</p>	<p>Visiting the Schools Corner for follow up</p> <p><i>I know where to go</i></p> <p>The School Corner is great! Its private and completely accessible. I love that I don't have to go out of the school when I need to see a nurse.</p>
KEY MOMENTS	<ul style="list-style-type: none"> Aquele Papo Personal Knows about Aquele Papo from a PE Watches the teaser on TV/Radio Knows about Aquele Papo from a friend 	<ul style="list-style-type: none"> Access to Aquele Papo FB page to know more Goes to Aquele Papo website to know more Watches the movie at the Aquele Papo Pop Up Events Learns more about Aquele Papo with a PE 	<ul style="list-style-type: none"> Goes to the Aquele Papo Tent Talks with the nurse and learns about FP Discusses about FP with her parents/friends 	<ul style="list-style-type: none"> Decides to use a FP method provided by the nurse Nurse Initiates FP method 	<ul style="list-style-type: none"> Returns to School corner when needed Nurse provides counselling and FP method Nurse provides counselling and checks implant site
THINK & FEEL	<p>Curious</p>	<p>Happy</p>	<p>Excited</p> <p>Anxious</p>	<p>Confident</p>	<p>Comfortable</p>
PROJECT PHASES	<p>Phase 1: Teaser about the film about to come</p> <p>Phase 2: Film Launch @Pop Up Events</p> <p>Phase 3: Film Dissemination on TV. Disseminate Playbook</p>				
	<p>⚠ Pain Points</p>				



annex 6

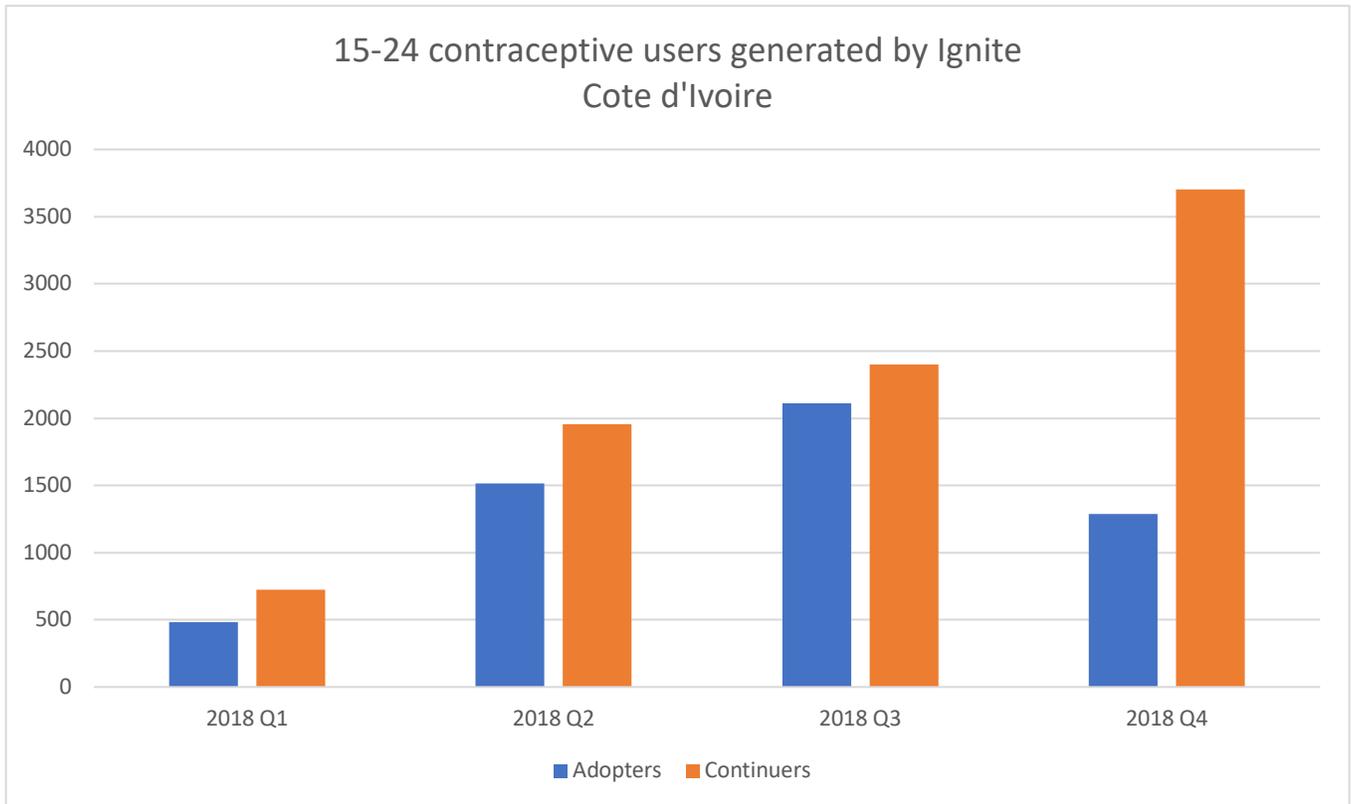


annex 7

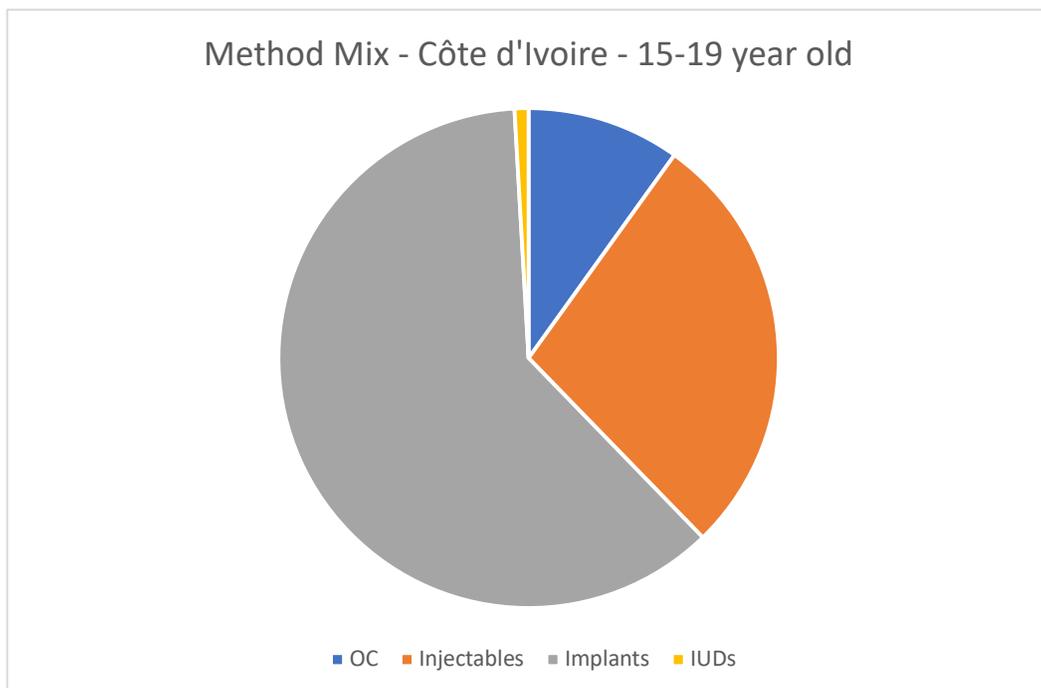


CÔTE D'IVOIRE

annex 8



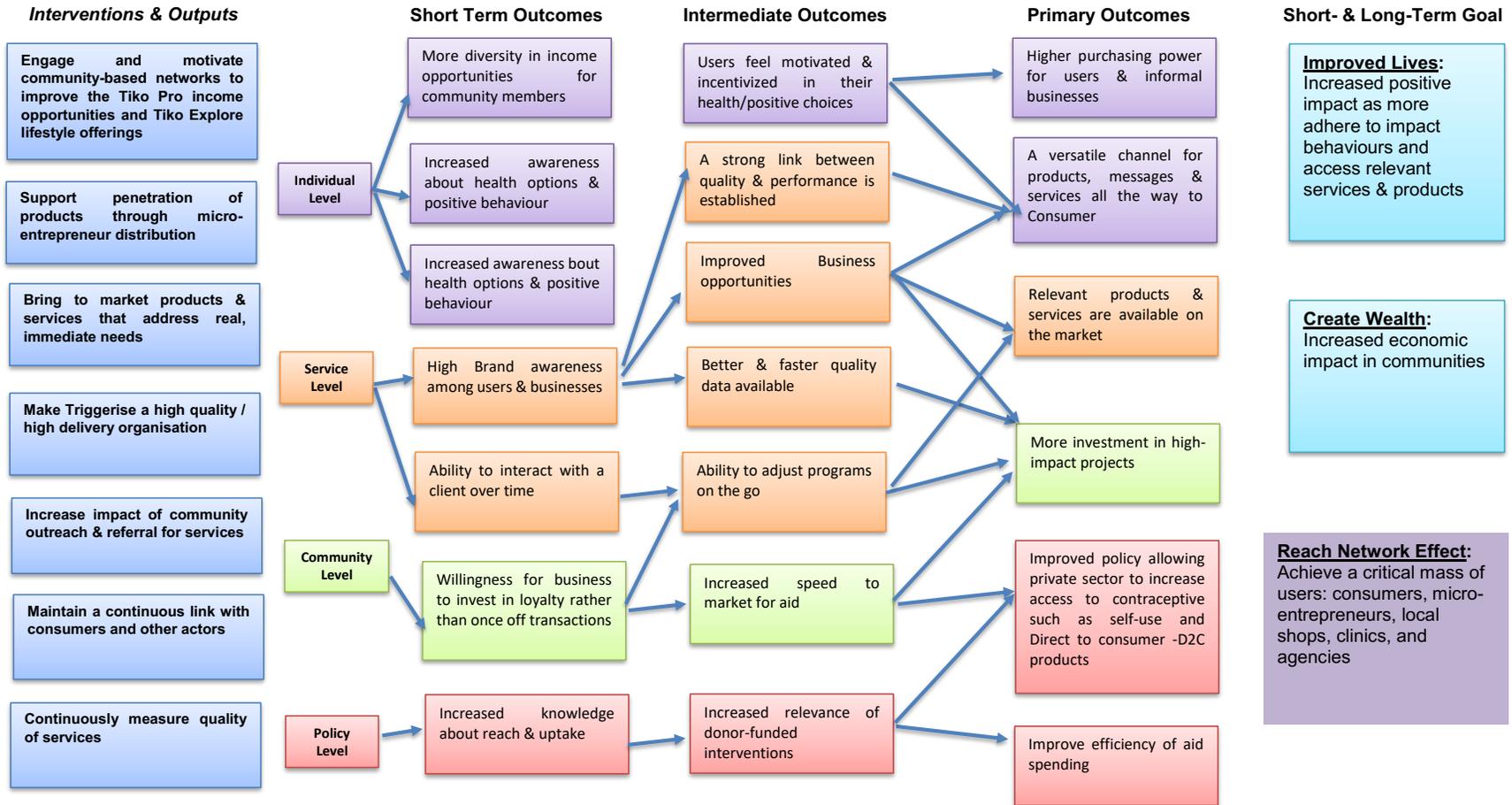
annex 9



annex 10 – revised theory of change for Triggerise based on feedback from the mid-term review

Triggerise Minbuza Ignite Theory of Change

Thriving communities supported by a foundation of engaged, motivated actors aligned along mutually supportive roles, enjoying increasingly relevant benefits and co-evolving in ways that accelerate positive impact while simultaneously unlocking further opportunities.





[Adolescents looking at a brochure about contraceptive methods in Haiti. Photo by Evelyn Hockstein]