

TRADITION + TRUSTED SOURCES

DESIGN BRIEF

March 21, 2016: FINAL

A woman's **fertility and ability to bear children is central to her identity**. Most major milestones in her life center around fertility.

"We practice ngoma through three processes, when a girl reaches menses, when she is preparing to get married and when she is preparing to deliver a child."

Nyakanga, Dar es Salaam

"This is part of our culture and tradition - helping women develop."

Nyakanga, Dar es Salaam

It's culturally taboo to talk about sex with youth, and especially for parents to do so. Post-menarche teens are considered "grown," but not adults and need to be protected through withholding information and fear.

"When my daughter found a condom and asked what it was, I couldn't answer. I just told her to put it back."

Parent

"Girls at 14-15 to some extent are considered grown up, but also considered (too young to make) their own decisions."

Mother, Dar es Salaam

"Before I was danced, I couldn't hang out with girls [who had gone through ngoma] of my same age because I wasn't grown-up."

Girl (23), Dar es Salaam

While it's taboo to talk about sex with youth, in some specific, narrowly defined circumstances, it is considered culturally appropriate for girls to receive information about their sexual and reproductive health. Often times these circumstances coincide with key milestones in a girls' life, but she may receive some information at other times as well. If information is appropriate can be determined by several factors:

Who gives the information. An auntie, nyakanga or other trusted female can often give information parents and other cannot.

"Aunts typically educate girls on this [family planning]. It would be OK to talk to her [my daughter] now even at 13."

Mother, Morogoro

"Sometimes a Nyakanga [traditional initiation instructors] is better because she can tell you things your parents cannot. But your mother told you you can go to the Nyakanga."

Girl (21), Dar es Salaam

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What topics are covered. Certain topics are considered appropriate at different times in a girl's life. Personal hygiene and abstinence are considered appropriate at a young age.

How information is delivered. Talking about reproductive health or sex explicitly is almost never appropriate. Most information is given through metaphor, song, insinuation or fear.

"It's like when you are on the football pitch, and you tell them: 'You have to shoot outside.'"

Madrasa teacher, Morogoro

What point in a girl's life the message is delivered. Girls are allowed to receive information on certain topics depending on which key milestones she has achieved. Typically, girls learn about personal hygiene and abstinence at menarche; sex and fertility at marriage; and childbirth, parenting and (sometimes) family planning when preparing to give birth.

Despite the widespread discomfort talking about reproductive health and sex, there is a **long tradition of family planning in Tanzania** (herbal medicines, beads/belts, spouse separation). **Yet modern contraception methods are considered foreign and imposed.**

"It's [family planning] in our tradition, just different ways." *For example, separation (husband and wife stay in different places), abstinence, charms and herbal medicines.*

Provider, Bagamoyo

"I can't remember the name [of the contraception method] because the person was teaching it in English."

Girl (21), Dar es Salaam

"Why is an NGO interested in making teen girls use contraception?"

Parent, Dar es Salaam

But Tanzanian authority figures and structures **have the power to influence what is acceptable** and considered Tanzanian.

"If the law says it's OK, then I would give."

Pharmacy Assistant, Dar es Salaam

How might we leverage traditional milestones and trusted sources to deliver consistent and accurate information and linkages to services?

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ASSETS + OPPORTUNITIES

Girls receive bursts of information about their reproductive health at important moments in their lives. However, this information rarely includes relevant and correct information about health, sexuality and contraception. For example, girls usually receive heavy fear-based messaging about sex until they are ready to get married, at which point they receive extremely explicit sexual information. There's a big risk of misinformation and confusion with the changing messages girls hear at various points in their lives.

"This generation knows many things, so they are confused!"

Nyakanga, Dar es Salaam

"People are getting pregnant because they don't have enough information."

Nurse, Bagamoyo

There is an opportunity to leverage these moments and milestones when girls are traditionally allowed to receive information and to add in accurate and relevant ASRH (adolescent sexual and reproductive health) information. Nyakangas we spoke with were very excited about the prospect of adding this knowledge to their teachings.

"We have been telling them [about family planning methods], but in a nutshell. We need a seminar or training to be more knowledgeable... This will make us famous."

Nyakanga, Dar es Salaam

In addition, some girls get their periods at very young ages, but key milestones and ceremonies are delayed until the family can save enough money or the girl finishes school. Furthermore, most girls do not get information before getting their first menses, and it often comes as a scary surprise. For this reason we're learning that **some girls are going years between receiving these crucial bursts of information.**

"I had my first menses at 16 and was danced at 19. I went inside for 7 days after my menses, and went to school and directly home for three years. I didn't think I was grown-up. I was scared because I never learned what it was or what to do."

Girl (22), Dar es Salaam

For example, a girl who has menarche at 16 years old might wait three years until completing ngoma, and therefore three years before she learns about menstruation, how to keep herself clean and how to protect herself against unwanted pregnancy. We also learned that some new traditions have been created within the last several years, such as kitchen parties. **There is an opportunity to create new milestones and traditions** for girls during the points of their lives when they are currently not receiving information.

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While girls are receiving bursts of information during milestone ceremonies, there is also an **opportunity to create a way to support girls through their entire journey from pre-menarche through adolescence**. A system that allows her to participate in a dialogue that aligns with what she is already learning can be an opportunity to **link a girl to services**. We tested a clinic-based program to teach girls about their health, and in two days of promotion in one clinic's catchment area, 61 girls showed up with their parents to register. There's a big desire for information.

Rarely is sex ever explicitly discussed with girls. However, **speaking through metaphor, song and insinuation are often allowed**.



There's an opportunity to create tools, narratives and guides for those trusted members of the community who are allowed to talk about these issues (aunties, nyakangas, trusted women) **in ways that they feel comfortable and appropriate**. Reaching trusted people who give girls information at different points in their lives creates the opportunity for a more consistent narrative and dialogue, and an opportunity to link girls to facilities and services through these trusted and appropriate sources.

Lastly, given the sensitivities around talking to youth about contraception, there's an opportunity to leverage the fact that HIV testing is a more culturally acceptable reason for a girl to go to a clinic (rather than seeking contraception). As a recent UNICEF article pointed out:

- AIDS is the #1 cause of death among adolescents in Africa.
- Prevalence is highest in sub-Saharan Africa.
- Girls are vastly more affected, accounting for 7 in 10 new infections among 15-19yo's.
- Most adolescents who die of AIDS-related illnesses **acquired HIV as infants**.

Meaning, **HIV testing could be leveraged to drive traffic to clinics for contraception**.