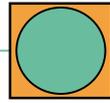




Understanding Referral Networks for Adolescent Girls and Young Women

Emily Weaver, Data for Impact
American Evaluation Association Conference
November 2019

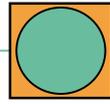




Data for Impact (D4I) is a United States Agency for International Development-funded associate award under MEASURE Evaluation.

D4I works to:

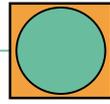
- Generate strong evidence for program and policy decision making
- Strengthen institutional and technical capacity of local organizations
- Facilitate and enhance the use of data for decision making through visualization and communication of data in ways that are compelling, user-friendly, and actionable



Understanding AGYW referral networks for adolescent girls and young women (AGYW)

Study motivation

- AGYW are an at-risk group
- At-risk AGYW frequently require various services that are not all available in a one-stop shop
- Referrals are necessary to serve AGYW needs
 - Safe Spaces established to serve as hub for referrals



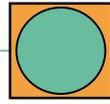
AGYW DREAMS services

Clinical services

- HIV testing
- Family planning
- Pre-exposure prophylaxis (PrEP)
- Post-GBV

Nonclinical services

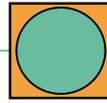
- HIV prevention
- Gender-based violence (GBV) prevention
- Social asset building



Addressing complexity in the evaluation

- Limited understanding of referrals across service sectors
- Many components of the program
- Contextual cultural and structural factors

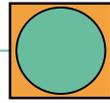




Purpose of this study

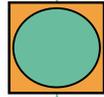
- To understand current referral networks for at-risk AGYW in the Determined, Resilient, Empowered, AIDS-free, Mentored and Safe (DREAMS) program
 - Through mapping existing referral networks
 - Through learning about AGYW preferences



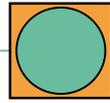


Method selection

- Organizational network analysis is a method well-suited to understanding referrals as it identifies connections between organizations
- Participatory mapping used as a facilitation tool to guide the discussion with AGYW
 - Interactive
 - Provides a visual guide for discussion
 - Provides a tangible point of reference



Mapping referral networks



Organizational network analysis (ONA)

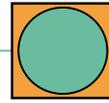
Methods

- ONA is a technique used to understand group dynamics, patterns of relationships, and the structure of groups (Eisenberg & Swanson, 1996)
- Involves surveying all organizations in a defined network



A youth-friendly service facility, Kweneng East, Botswana

Photo: Emily Weaver, MEASURE Evaluation



Sociogram of potential referral connections from safe spaces

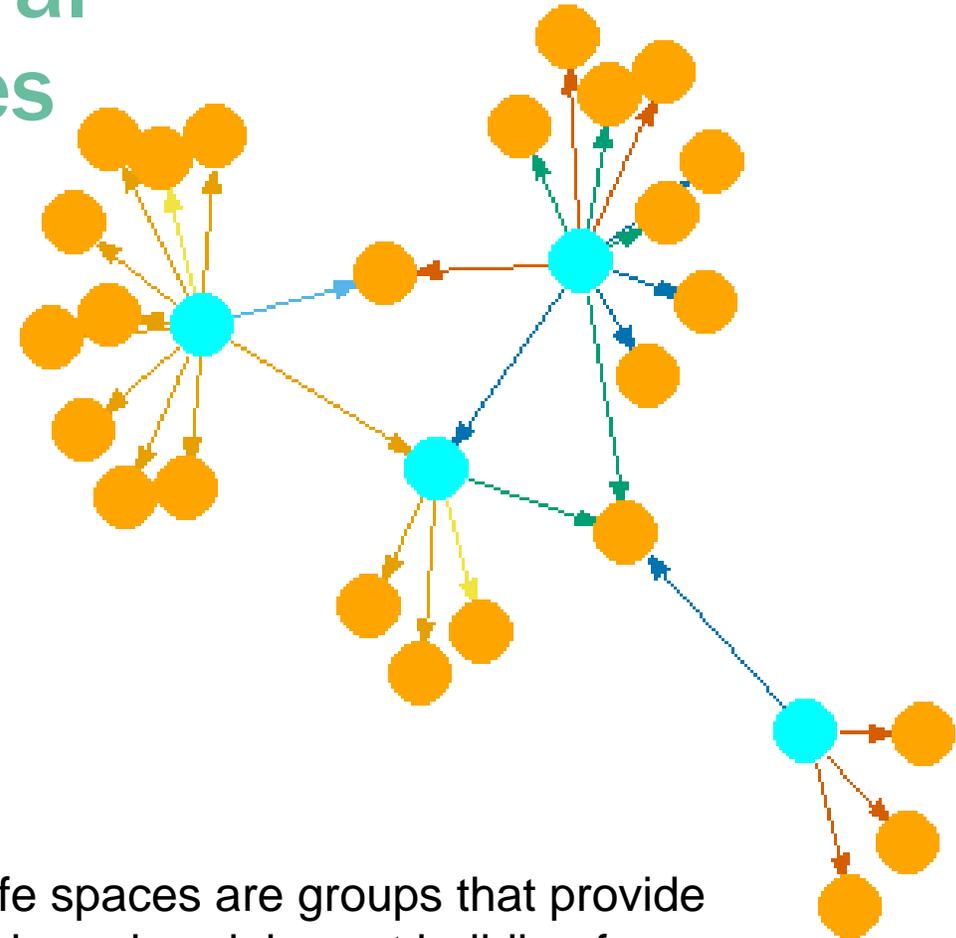
Legend

Referral type

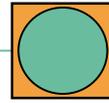
-  HIV
-  Family planning
-  GBV
-  PrEP
-  Multiple services
-  Missing information

Organization type

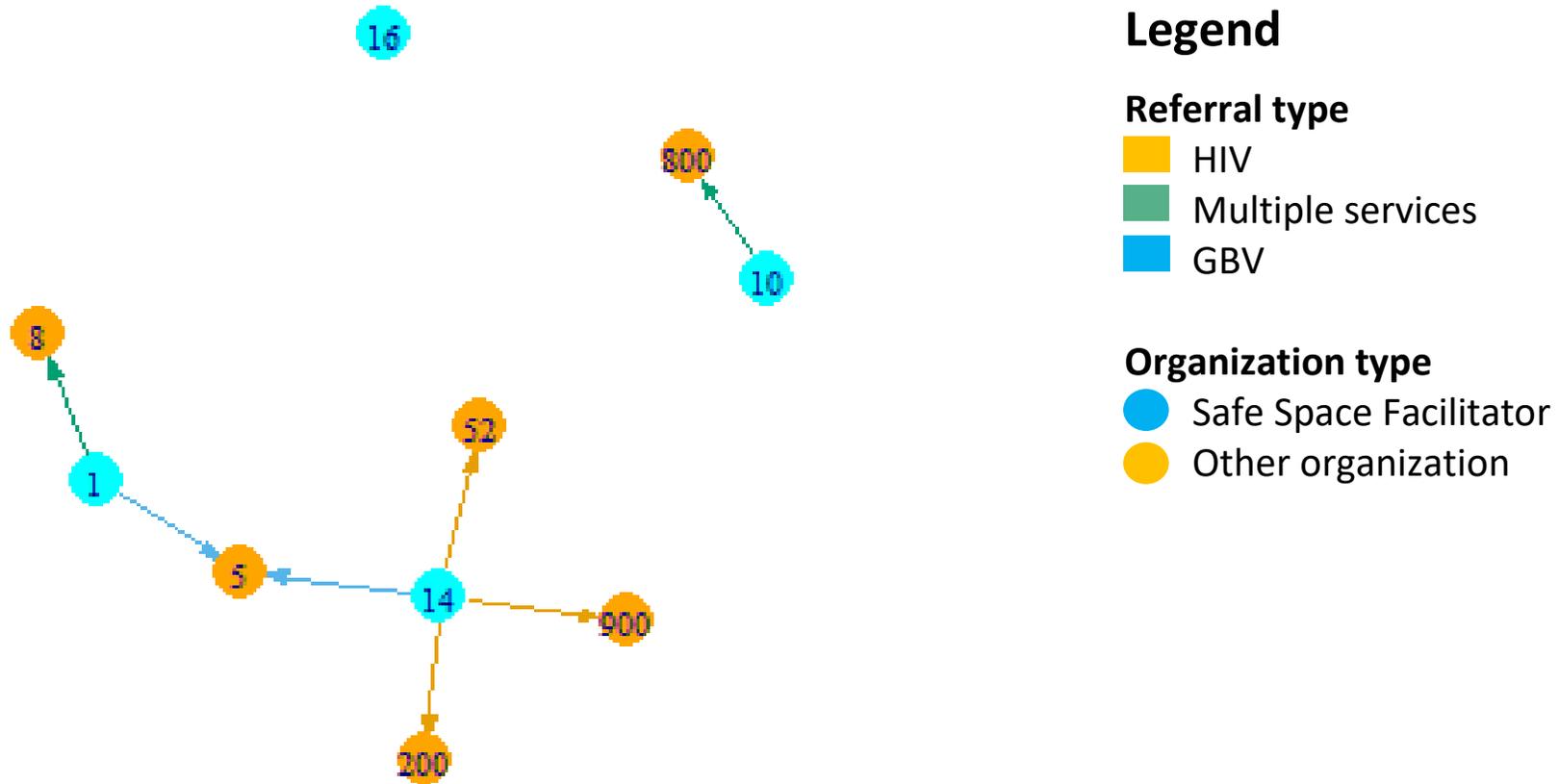
-  Safe Space Facilitator
-  Other organization

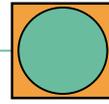


Note: Safe spaces are groups that provide mentorship and social asset building for AGYW in the DREAMS program

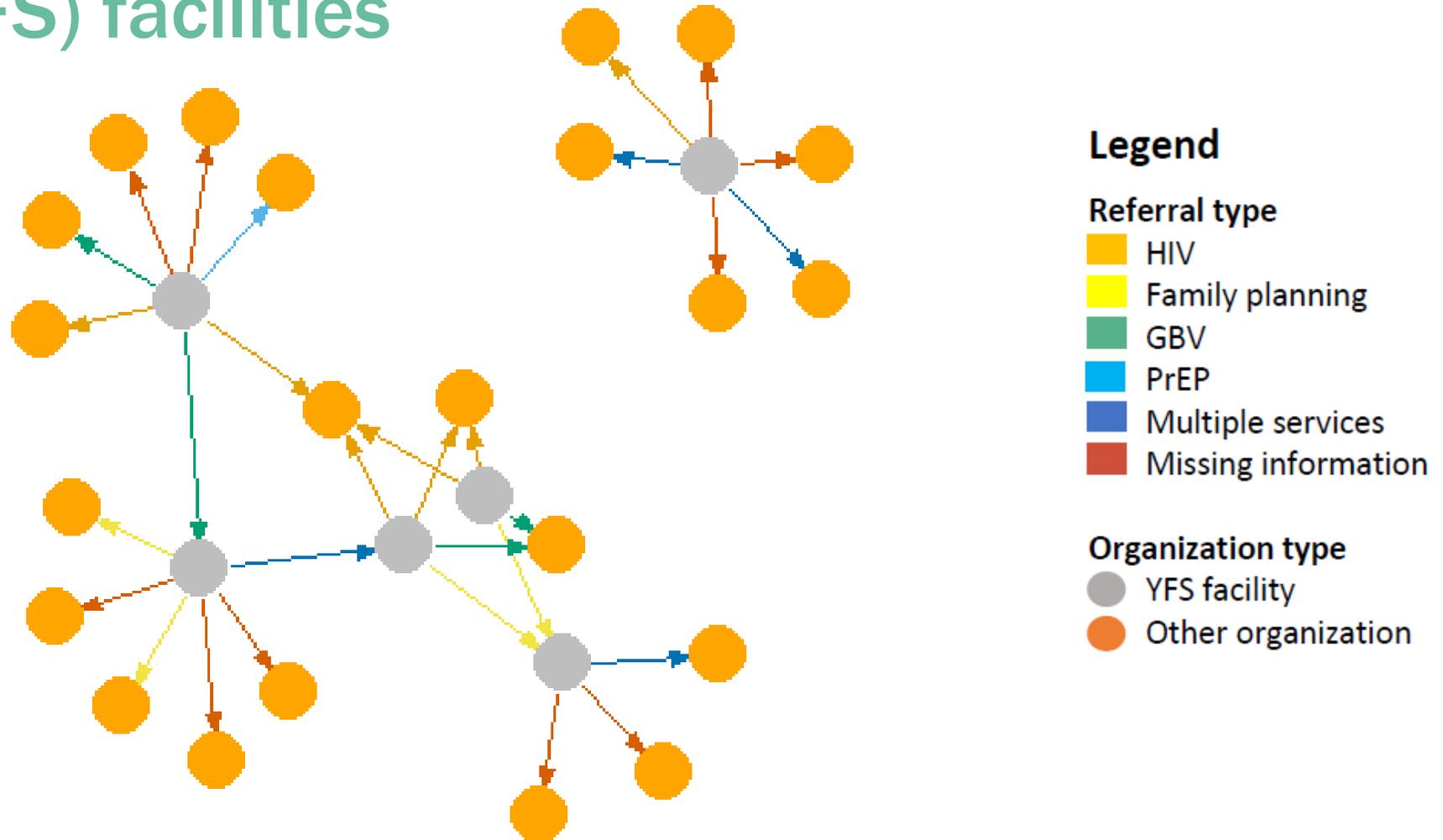


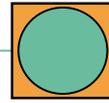
Sociogram of referral connections from safe spaces, May 2019



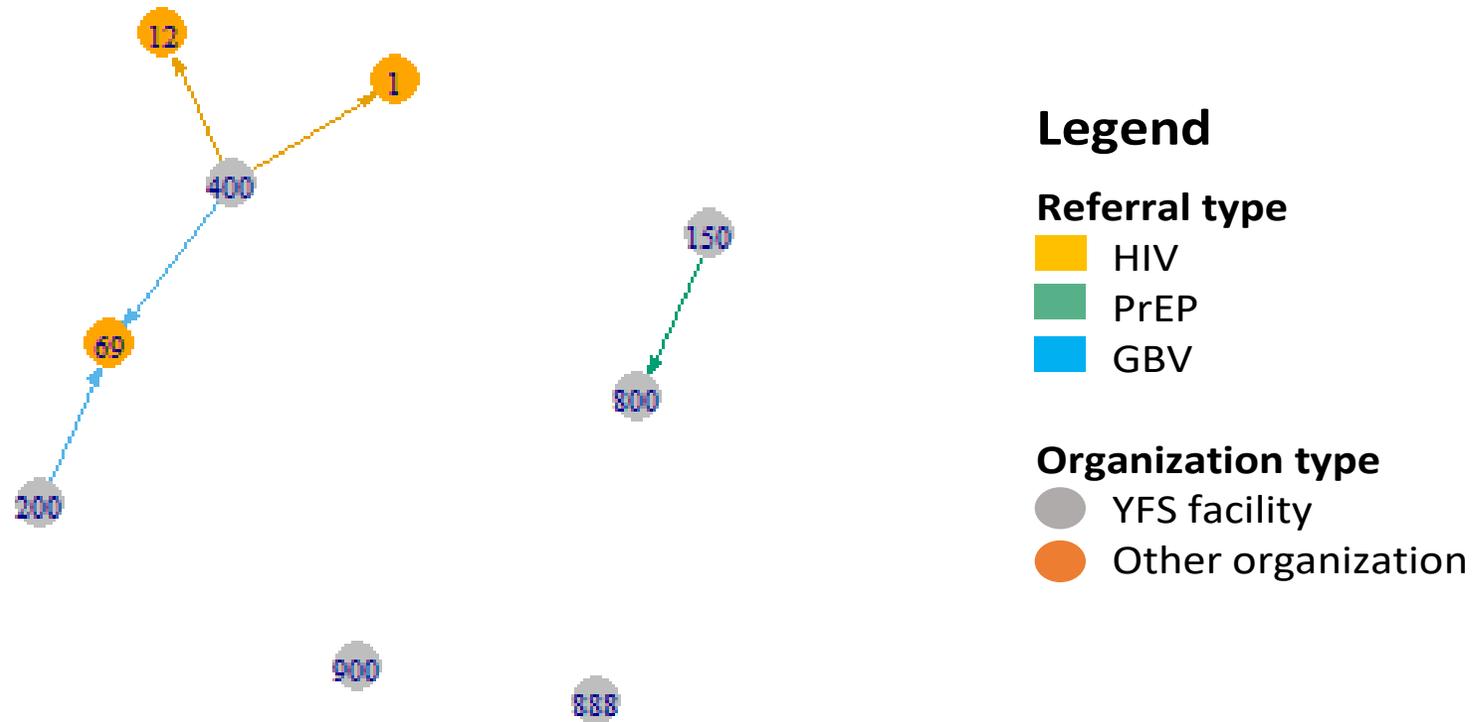


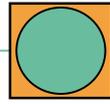
Sociogram of potential referral ties from youth-friendly service (YFS) facilities





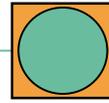
Sociogram of actual referral ties from YFS facilities, May 2019





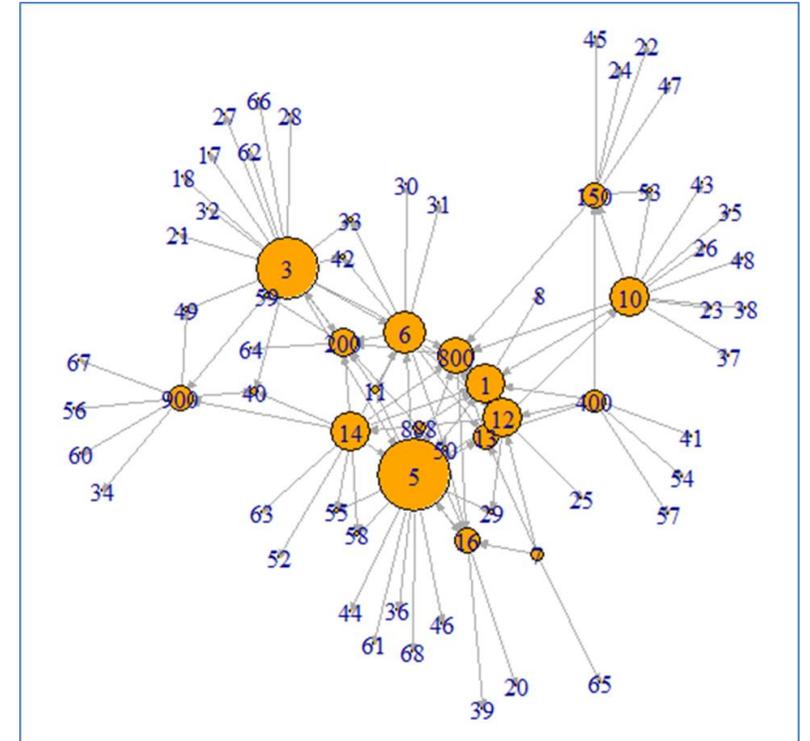
Gaps in YFS facilities

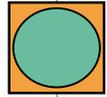
- Only 1/3 of facilities prescribe and dispense or refer for PrEP
- Only 1/3 offer or refer for oral contraceptives; 2/3 provide or refer for injectable contraceptives
- 2/3 of facilities offer or refer for nonclinical GBV services



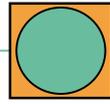
Summary

- The potential network for DREAMS services in the two districts is fairly large (69 identified service sites)
- Safe spaces and YFS facilities are not using the full range of known referral sites
- For YFS facilities, gaps exist for certain types of contraceptive methods and post-GBV services





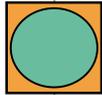
Focus group discussions



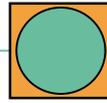
Participatory mapping exercise

- Qualitative method used to create site maps
 - Generate a visual representation of service sites based on AGYW perceptions
 - Incorporate local perspectives and opinions
 - Represent socially and culturally distinct understanding of the “landscape”
- Visual representation is then used to guide discussion

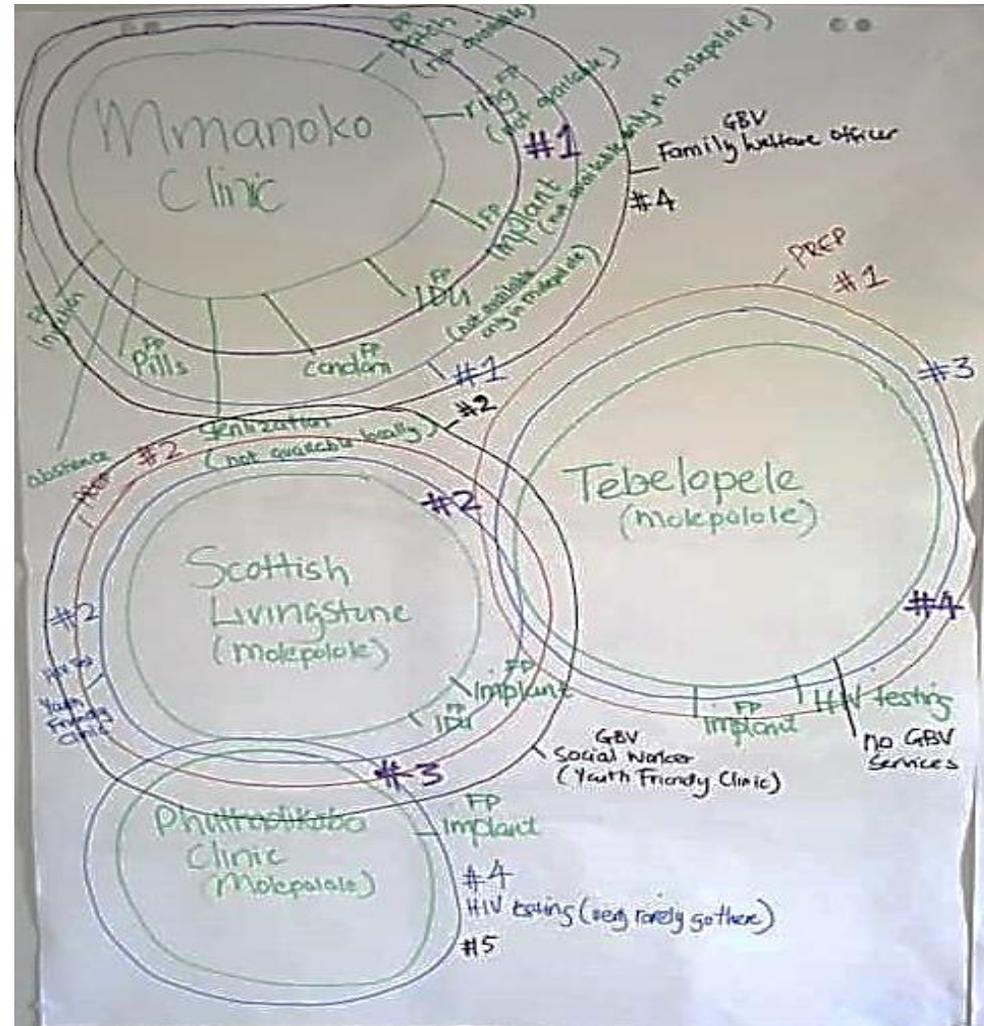
Focus group themes

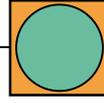


- Where would AGYW go for services?
- What are likes/dislikes for various service sites?
- What facility characteristics are most important to AGYW?
- What facility characteristics are least desirable for AGYW?



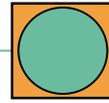
Example of a drawing created by participants





Locations where **AGYW** access services

Service	Preference				
	1	2	3	4	5
Condoms	Youth Group	Family Welfare Association	Clinic #1	Clinic #3	Clinic #2
Family planning	Youth Group	Clinic #1	Family Welfare Association	Clinic #3	
HIV testing	Youth Group	Clinic #1	Clinic #2	Clinic #3	
PrEP*	Youth Group	Clinic #1	Family Welfare Association	Private clinic	
Post-GBV care	Police	Social Worker at Community Hall	Youth Group	Guidance & Counseling Teachers	



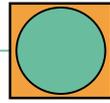
Like and dislikes

Likes

- Staff are patient, friendly, caring
- Wide range of services offered
- Extended hours
- Fast service, no queues
- Nearby location or on taxi route
- Free transport or funds for transport provided
- Medicine always in stock
- Have a maternity ward
- Have antenatal classes
- Have food rations for babies
- Youth-focused
- Faith-based
- Staff maintain confidentiality
- Staff remind of follow-up visits or days a doctor will be present
- Health talks are provided
- Morning singing and prayer

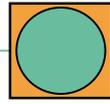
Dislikes

- Slow service or long queues
- Staff unavailable at the location (e.g., shortage of nurses or doctors)
- Limited hours of operation
- Staff being abusive and insulting during labor
- Shortages or stock-outs of medicines and food rations for babies
- Located far away
- Not feeling free discussing issues with staff because they know them too well (from same community)



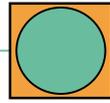
Conclusions

- AGYW prefer organizations with a convenient location, wide range of services, flexible hours, and youth-friendly staff
- AGYW ages 18–24 also prefer organizations that offer fast service and have medicines and babies' food rations in stock, a maternity ward, and antenatal classes
- Dislikes include slow service, shortage of staff, and providers that are abusive, insulting, or judgmental
- Results were mixed about services provided for post-GBV
- AGYW were not well-informed about where to obtain PrEP



Key lessons

- Networks for service sites linked to the DREAMS program are fairly inactive.
- Safe spaces refer clients to several of the YFS facilities, but the reverse is not true.
- AGYW expressed preference for service sites not a central part of the DREAMS strategy
- The strongest service gaps are in GBV services for AGYW, and AGYW expressed concerns about services for GBV in terms of responsiveness and attitude about reported incidents.
- Some service gaps exist for PrEP services; AGYW also exhibit a lack of knowledge about where to obtain PrEP.



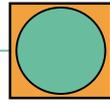
Lessons learned from the field

Organizational Network Analysis

- Need to identify a well-defined network for the ONA
- Importance of considering context for ONA results
- Referral documentation was limited

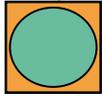
Participatory mapping

- Participatory mapping was a good method for eliciting information
- Ability to interview AGYW in schools was limited



Reference

Eisenberg, M. & Swanson, N. (1996). Organizational network analysis as a tool for program evaluation. *Evaluation & Health Professions*, 19(4). 488–507. Retrieved from <https://www.ncbi.nlm.nih.gov/pubmed/10186928>



This presentation was produced with the support of the United States Agency for International Development (USAID) under the terms of the Data for Impact (D4I) associate award 7200AA18LA00008, which is implemented by the Carolina Population Center at the University of North Carolina at Chapel Hill, in partnership with Palladium International, LLC; ICF Macro, Inc.; John Snow, Inc.; and Tulane University. The views expressed in this publication do not necessarily reflect the views of USAID or the United States government.

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