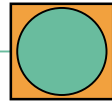




# Understanding Referral Networks for Adolescent Girls and Young Women

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

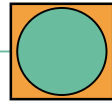




Data for Impact (D4I) is a United States Agency for International Development-funded associate award under MEASURE Evaluation.

### **D4I works to:**

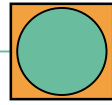
- Generate strong evidence for program and policy decision making
- Strengthen institutional and technical capacity of local organizations
- Facilitate and enhance the use of data for decision making through visualization and communication of data in ways that are compelling, user-friendly, and actionable



# 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

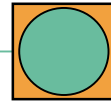
## Clinical services

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

## Nonclinical services

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

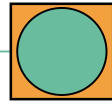




# Addressing complexity in the evaluation

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

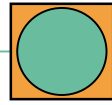




## Purpose of this study

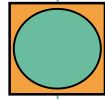
- To understand current referral networks for at-risk AGYW in the Determined, Resilient, Empowered, AIDS-free, Mentored and Safe (DREAMS) program
  - Through mapping existing referral networks
  - Through learning about AGYW preferences





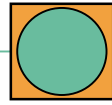
## Method selection

- 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)

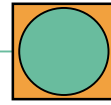
## Methods

- 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

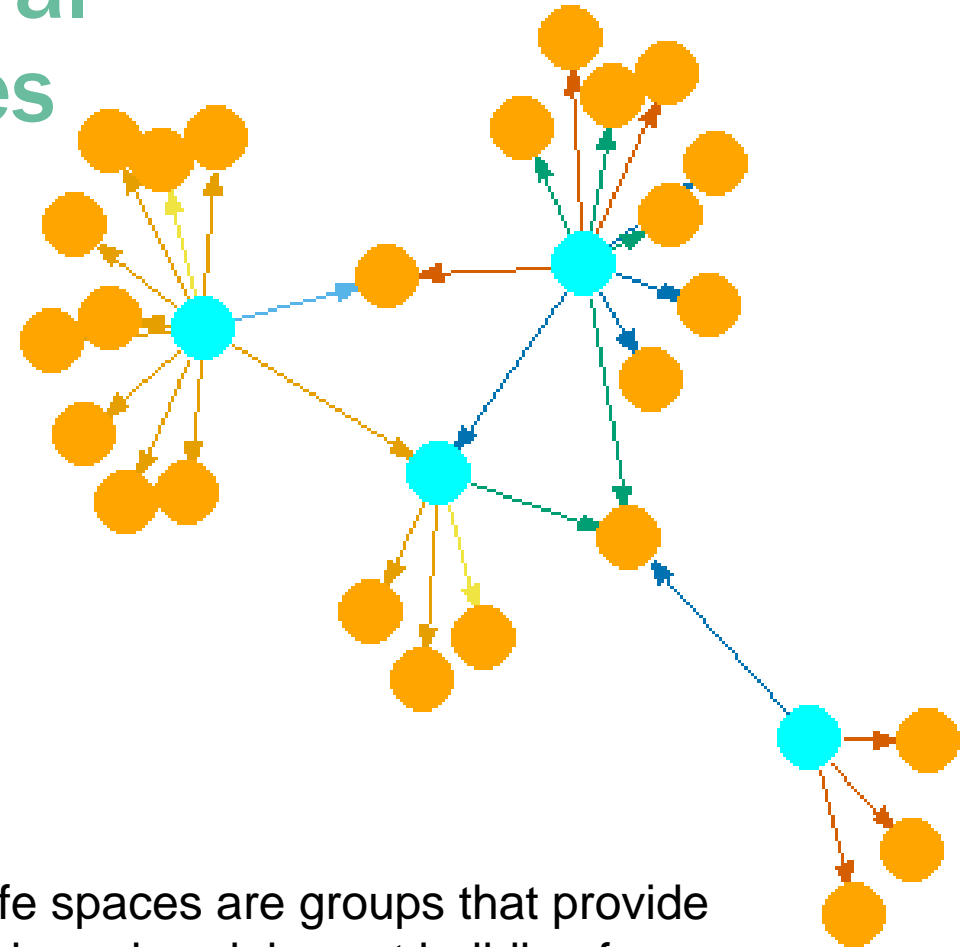
## Legend

### Referral type

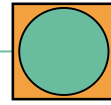
-  HIV
-  Family planning
-  GBV
-  PrEP
-  Multiple services
-  Missing information

### Organization type

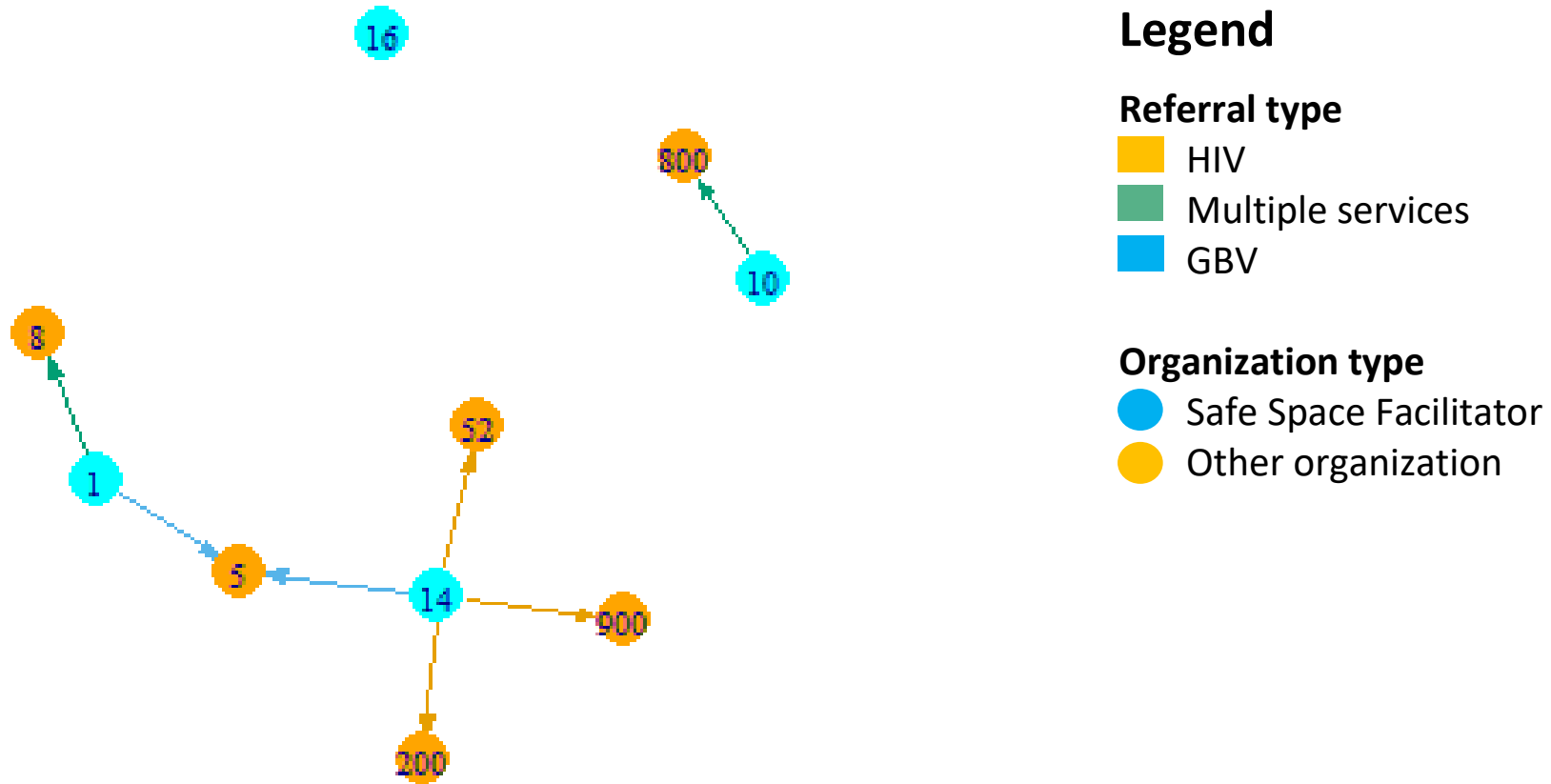
-  Safe Space Facilitator
-  Other organization

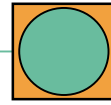


Note: Safe spaces are groups that provide mentorship and social asset building for AGYW in the DREAMS program

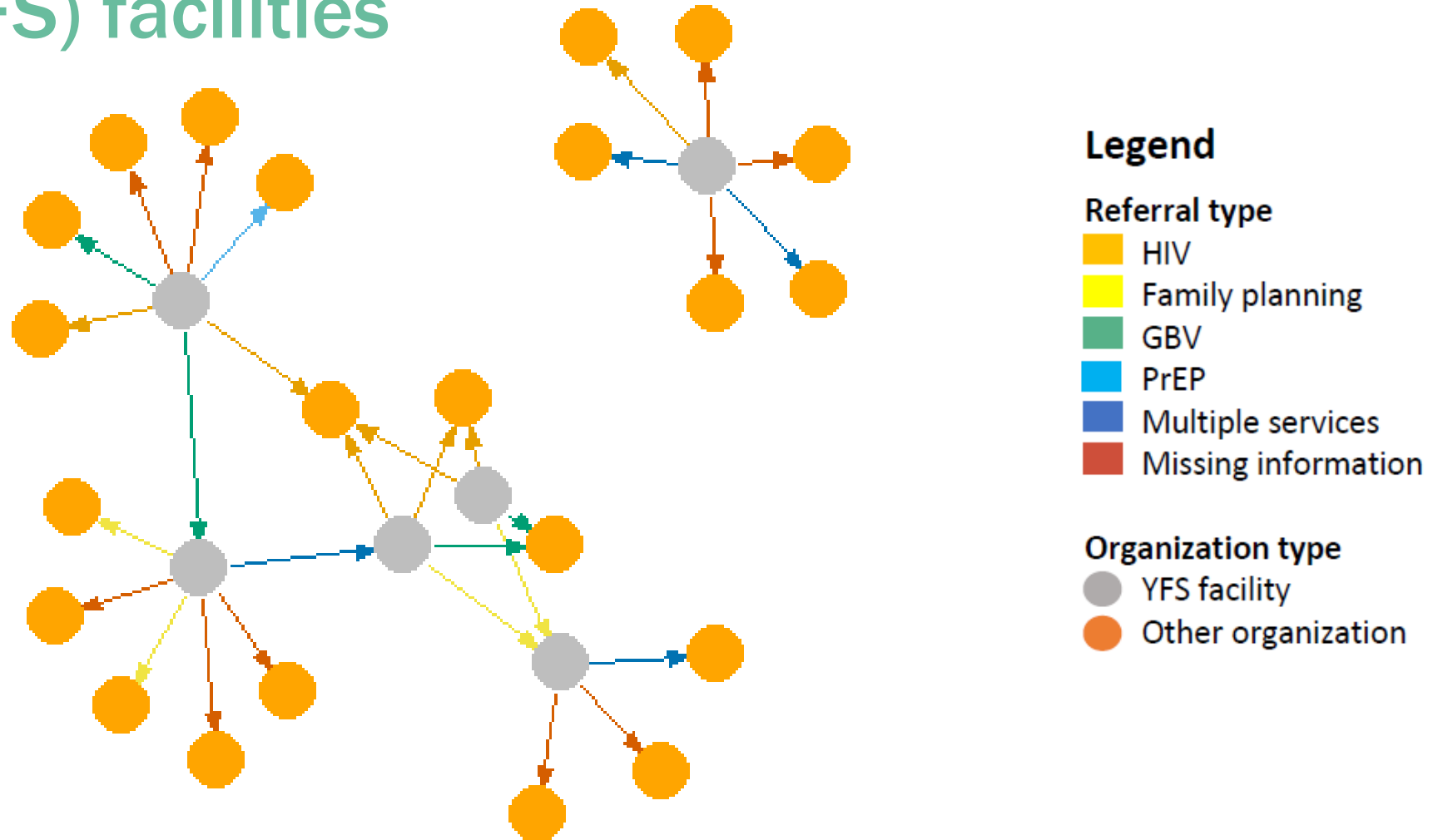


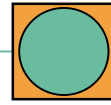
# Sociogram of referral connections from safe spaces, May 2019



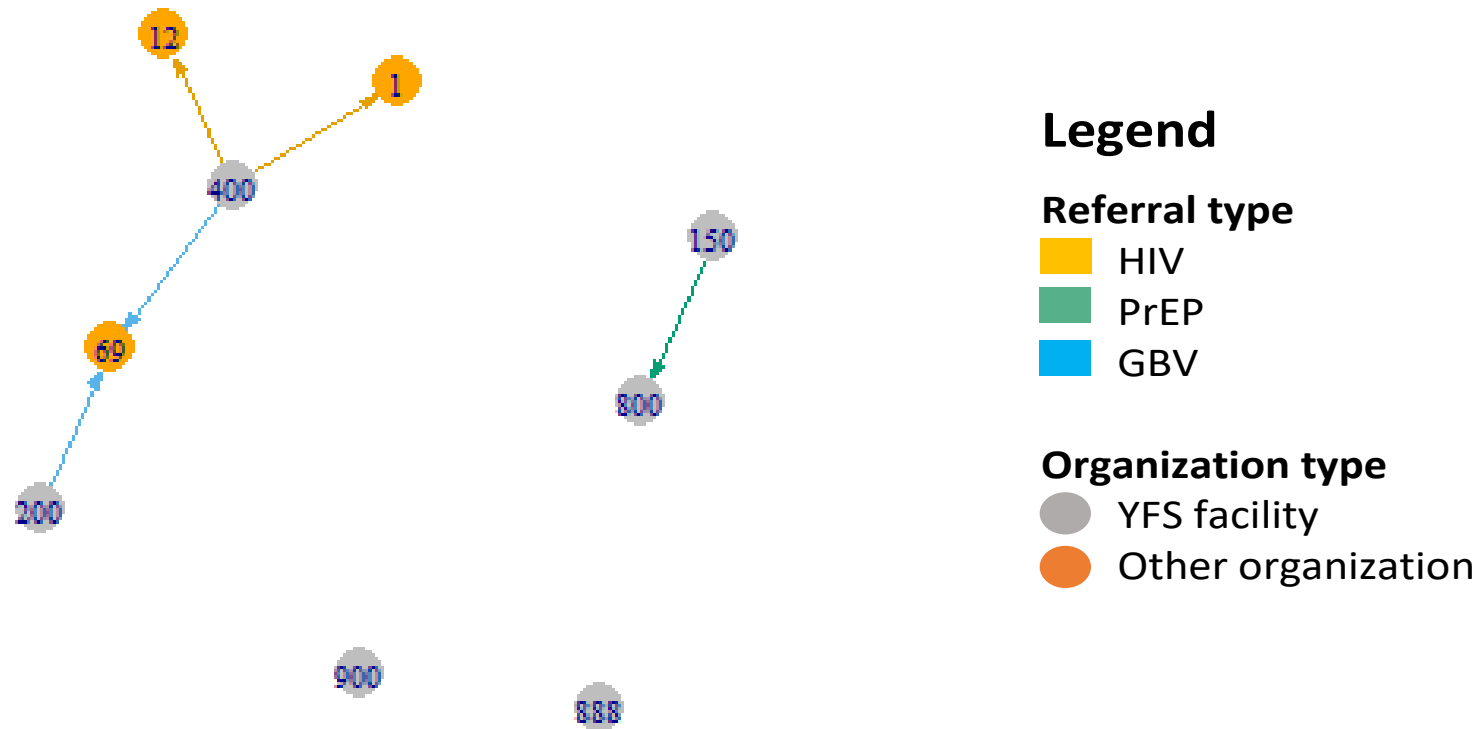


# Sociogram of potential referral ties from youth-friendly service (YFS) facilities

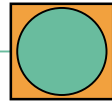




# Sociogram of actual referral ties from YFS facilities, May 2019

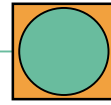






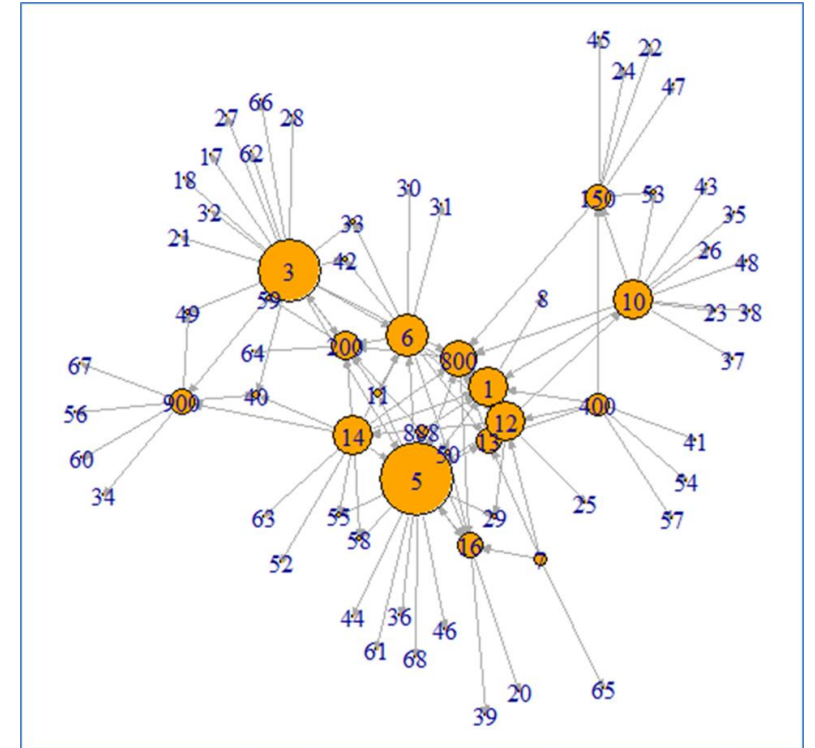
## Gaps in YFS facilities

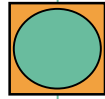
- Only 1/3 of facilities prescribe and dispense or refer for PrEP
- Only 1/3 offer or refer for oral contraceptives; 2/3 provide or refer for injectable contraceptives
- 2/3 of facilities offer or refer for nonclinical GBV services



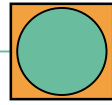
## Summary

- 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





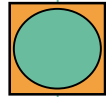
# Focus group discussions



## Participatory mapping exercise

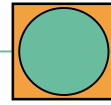
- Qualitative method used to create site maps
  - Generate a visual representation of service sites based on AGYW perceptions
  - Incorporate local perspectives and opinions
  - Represent socially and culturally distinct understanding of the “landscape”
- Visual representation is then used to guide discussion

# Focus group themes

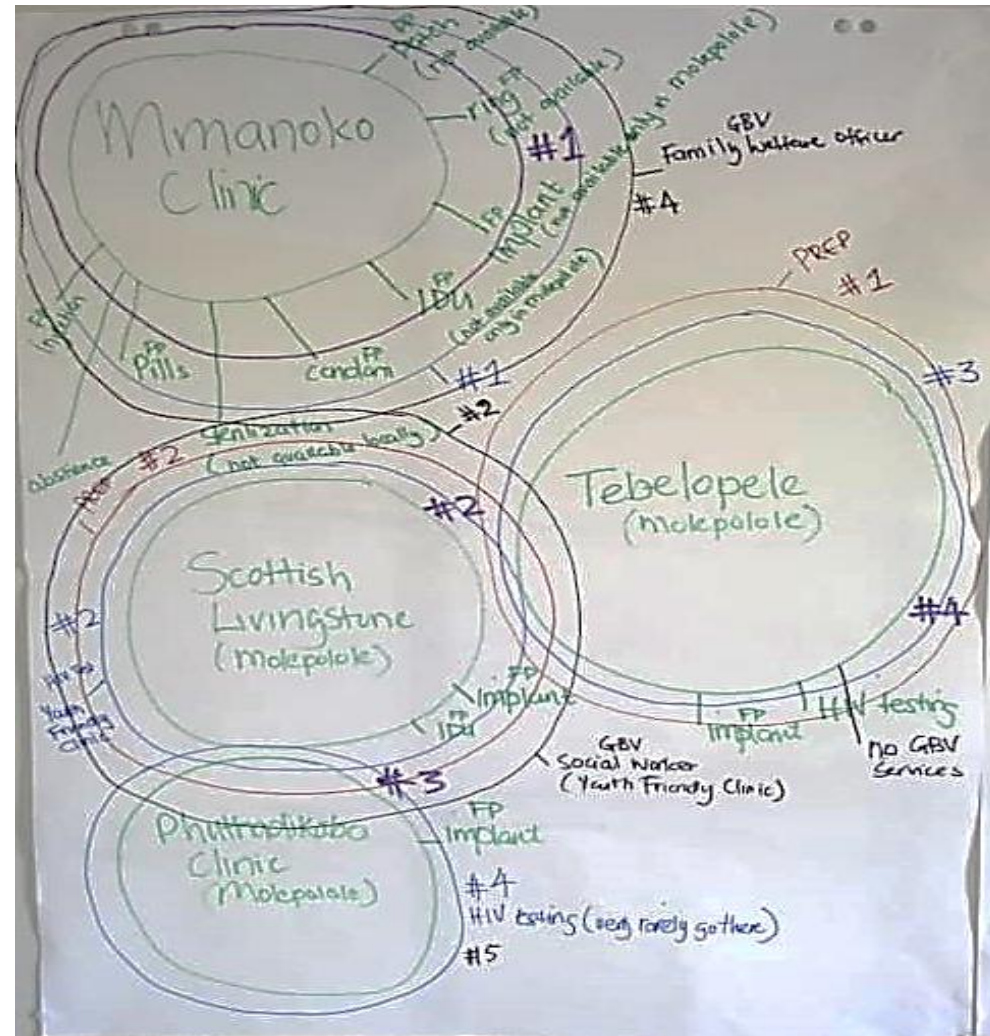


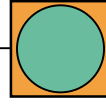
- Where would AGYW go for services?
- What are likes/dislikes for various service sites?
- What facility characteristics are most important to AGYW?
- What facility characteristics are least desirable for AGYW?





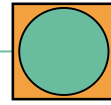
# Example of a drawing created by participants





## Locations where AGYW access services

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



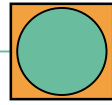
# Like and dislikes

## 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

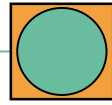
## Dislikes

- 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

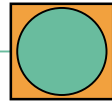
- AGYW prefer organizations with a convenient location, wide range of services, flexible hours, and youth-friendly staff
- AGYW ages 18–24 also prefer organizations that offer fast service and have medicines and babies' food rations in stock, a maternity ward, and antenatal classes
- Dislikes include 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.





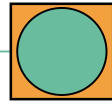
## Lessons learned from the field

### Organizational Network Analysis

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

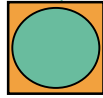
### Participatory mapping

- 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>



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