



Not only  
informed.  
Confident.

Não  
apenas  
consciente,  
mas  
confiante.



ThinkPlace  
Kenya



“These girls don’t pay attention...if you repeat it many times, they’ll get it.”

PROVIDER, GAZA



“Malaria can kill you. HIV won’t.”

ADOLESCENT, GAZA

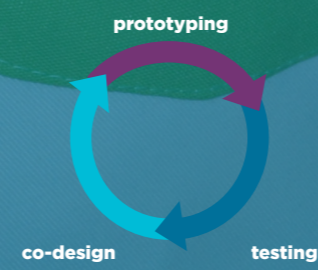
### DESIGNING WITH, NOT FOR

While large-scale surveys, phone interviews, and other more conventional research methods have efficiencies of scale and cost, but they fall short in telling us what motivates or triggers a change in individual human behaviour.

While this project focused on improving the patient experience to increase the adoption of contraceptive methods, that chain reaction starts

with a genuine behaviour change on the part of the healthcare provider.

Our rapid co-design-prototyping-testing process allowed us to quickly learn how much users’ stated behaviour aligned with their actual, observed behaviour. This led us to redesign the *Minha Escolha* (“My Choice”) booklet in such a way that it actually stimulated meaningful, lasting behaviour change.



### DEMYSTIFYING RISK

Risk - risk of contracting HIV, risk of unplanned conception - is an abstract concept that can be difficult for patients to comprehend. Risk is also subject to bias and perception, leading patients to assess their risk level subjectively rather than objectively, from a medical perspective. A misinterpretation of one’s risk can leave patients feeling uncomfortable or shameful about their lifestyle choices. To counteract this, we worked closely with the providers to design a process for helping adolescent girls and young women better understand risk during pre-counseling. If the patients understood their risk, the providers noted,

they would be in a better position to make an informed choice about their contraceptive method. During the pre-counseling sessions, they were each told to pull a colored sheet of paper out of a bag. One color signified an HIV+ status, which only 1-2 girls had, and the other color signified HIV- status. They did this exercise twice with each set of girls who were waiting at the clinic. The activity really helped patients personalise the notion of risk and situate it within one’s lifestyle and behaviours, and build rapport with the patients before the consultation.

## KEY INSIGHTS

1

### Filtering information can not only save time, but it also leads to a more fulfilling consultation for the user.

In general, users are seen as incapable to recollect information and providers prefer to use the learn by repetition technique. Although the technique might seem efficient in terms of time management of the session, it is not achieving the purpose of providing the user informed choice, since the information given is systematic and not personalized.

2

### Adolescents are very curious about their physical reaction to a method; this is a strong driver for method choice

Words such as “side effect” or “collateral effect” have very little meaning to the average Mozambican adolescent girl. Furthermore, providers tend to focus on methods’ benefits and in some cases, their own personal preferences. As a result, many adolescents go back to the health facilities to report how uncomfortable they feel about secondary effects of their method choice, e.g. fluctuations in the timing and severity of their period, leading some of them to opt-out.

However, when reformulating the question in plain terms, patients are able to articulate answers that are focused on their needs and preferences.

3

### Risk perception is poorly understood and poorly conveyed to adolescents

Risk perception around HIV is very low which makes the use of condoms barely visible. In general, adolescents understand the importance of using condoms and are able to relate it with HIV. However, HIV seems to be perceived far from their reality and they are not afraid of it. In some cases, HIV is compared with malaria in terms of treatment.

## DESIGN OPPORTUNITIES

### Managing time more efficiently, while also improving the patient experience

Motivated by high demand, providers develop an efficient, natural technique of filtering information according to a patient’s life experiences and preferences. Furthermore, the message is focused on method benefits and maintenance routine, not providing comprehensive information about all methods’ secondary effects.

#### THE CHANGE

Redesigning the “My Choice” book, posters and other materials to be more user-friendly and provider-friendly

### Managing patients’ expectations of the side effects during counseling is crucial to ensuring they become repeat users

Before and during counseling sessions, users are usually focused on understanding what is going to happen to their period and fertility return specially when it comes to new users. For revisiting users, period changes and secondary effects tend to be the main reason to chose a method.

#### THE CHANGE

Congratulating users when they’ve made a choice, and explaining the details of this method

### Risk needs to be situated within real-life examples and experiences to increase understanding

Dual protection (HIV + contraception) is a concept known by adolescents and is broadly shared by providers. However, as the risk perception around HIV is low, and the biggest motivation for contraception is pregnancy prevention, the double protection is not a priority in adolescents’ mind.

#### THE CHANGE

Repurposing the pre-counseling experience to be focused on understanding risk



“I know what I want and why I want it.”

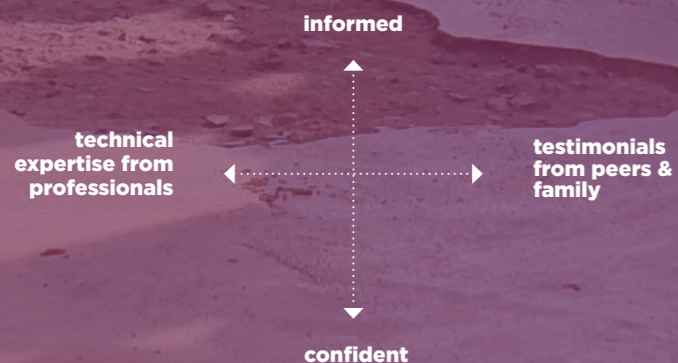
ADOLESCENT, GAZA



“I know I’ve decided, but what if it’s not right?”

ADOLESCENT, GAZA

FROM INFORMED TO CONFIDENT



Our immersion into the patient experience revealed that while consultations were *informative*, few patients left feeling *informed*. Our project redesigned both the tools that healthcare providers used during the consultations as well as the pre-counseling experience to ultimately improve the patient experience and ensure that consultations led to true value creation for both provider and patient. For patients, that value came in the form of *confidence* in their choice of method.

CELEBRATING THE CHOICE

Through our research, we realised that the relationship between provider and patient could be strengthened by helping them to build trust. The moment when a patient decides on which method to uptake was an important opportunity to do just this.

The offer of congratulations to an adolescent girl or young woman when she’s made an informed decision cannot be emphasized enough. This is often an undervalued part of the adoption process, where a person is eager to hear the confirmation that what

they’ve decided makes sense and is right, based on the information they have at-hand. Marking this moment, and making it memorable within the session, made adolescents feel comfortable and instilled confidence in the provider. Moreover, adolescents reported that this made them feel like someone was looking out for them.

# The Enfermeira NOTA 20 Book

