



**mCENAS!**

## Addressing barriers to sexual and reproductive health services for youth in Mozambique

### BEHAVIOR CHANGE COMMUNICATION

**Implementation date: September 2013 to June 2014**

*In Mozambique, youth under 15 years of age comprise over 45 percent of the population. Additionally, of married or in-union women above the age of 15, only 11 percent use a method of contraception. Through the USAID-funded Extending Service Delivery Family Planning Initiative (ESD/FPI) project, Pathfinder aims to increase access to and use of contraceptives and high-quality sexual and reproductive health (SRH) services by women and youth in four provinces of Mozambique. The youth strategy of the ESD/FPI projects includes supporting the government to increase young people's access to youth-friendly SRH services and working with community-based organizations and youth peer educators to increase young people's awareness of and demand for services. During the initial two years of project implementation, it became increasingly clear that young people needed access to more information and support to overcome the many barriers they face in accessing and using contraceptive and other SRH services.*

*Leveraging the growing use of mobile phones in urban and peri-urban areas of Mozambique, Pathfinder developed a comprehensive SMS-based program specifically tailored for youth aged 15 to 24 with different content for those with and without children. The initiative, called mCenas! (English translation: mobile scenes), aims to motivate youth to start or continue using a contraceptive method by increasing knowledge about and dispel common myths around contraception, and address common barriers youth face surrounding the use of contraception.*

### About mCenas!

mCenas! is an interactive two-way SMS system that is free for clients. Developed through a participatory process informed by formative research, mCenas! has three main components: 1) a behavior change theory-based story delivered through SMS messages that youth can relate to and draw on for further dialogue and reflection with peers (two months of messaging); 2) informational messages about each contraceptive method adapted from FHI360's Mobile 4 Reproductive Health (m4RH) project (one month of messaging); and 3) an interactive "Frequently Asked Questions" (FAQs) function where youth could ask about a range of SRH topics, including more information on contraception. Clients had access to the interactive menus

for the entire duration of the project.

Twenty activists enrolled clients through community events, schools and door to door recruitment strategies. As part of the ESD/FPI project, mCenas! complemented and reinforced ongoing interpersonal behavior change activities and improved service delivery for young people. Peer educators were oriented on how to use the SMS stories to generate reflection and dialogue among youth on the barriers and facilitators to use of contraception. In addition, youth were also linked to a youth-friendly hotline called Alo Vida, run by the Ministry of Health, where a live representative could answer questions about contraception and SRH.

## Evaluation and Results

A total of 2,005 young people were enrolled in mCenas; 54 percent were 15 to 17 years old, 46 percent were 18 to 24, 57 percent were women, and 33 percent had a child. The system received 10,451 requests for information about sexuality. The most common requests were “Am I ready for sex?” (14 percent), “Masturbation” (9 percent), and “Sexual Pleasure” (9 percent). The most common inquiries about contraceptive methods were on injectables (19 percent), IUDs (13 percent), and implants (12 percent). Despite instructions on how to use the menu-driven system (key words triggered the SMS back to the client), over 8,000 non-conforming, free form texts were received. Approximately half were failed attempts to get information from the menu system while the other half were messages expressing opinions about the story or soliciting more personal advice. Results from a closer analysis will be available in November 2014.

USAID’s centrally-funded cooperative agreement, Evidence to Action (E2A), conducted a research study based on the mCenas! project in order to generate evidence of whether a SMS contraception information initiative is socially acceptable and has an impact on the knowledge, attitudes, and self-efficacy of male and female youth aged 18 to 24 in Mozambique. E2A conducted a baseline (December 2013) and endline (June 2014) survey using both SMS and in-person interviews with a sample of young people enrolled in the program. Study results are expected in November 2014.

## Lessons Learned

- Utilizing a participatory development process rooted in behavior change theory allowed for the development of a story and a set of FAQs that are responsive to the realities of young people in Mozambique
- Undergoing formative research allowed for the realization of important differences in the barriers to contraceptive use between youth with children and those without children, thereby creating two, more tailored stories
- Pre-tests with young people confirmed the importance of using youth vernacular in the text messages
- There is a need to carefully pretest menu key word systems with SMS projects
- Young people expect high degree of interactivity with a SMS system and therefore it is recommended to create programs that allow for this

## Conclusion

mCenas!, the first mHealth program to focus on youth and contraception in Mozambique, provides an important learning opportunity. It is uniquely designed to incorporate narratives – known to be an effective behavior change strategy – with standard informational messages and an interactive menu of FAQs. It will be critical to integrate the content and themes from the stories and messages into the regular activities of the ESD/FPI project, including community mobilization and peer education. This will provide opportunity for reflection and dialogue to reinforce the content of mCenas!, drive changes in behavior, and create a real impact on a young person’s choice of whether or not to begin or continue using contraception.

**Geographic Coverage:** Maputo and Inhambane Provinces, Mozambique

**Implementation Partners:** Pathfinder International, Dimagi

**Funder:** USAID through the Extending Service Delivery Family Planning Initiative

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