This document is intended to capture learning derived from prototyping with married girls and their influencers in Tanzania. It reflects the voices of the people we met and complements earlier insight work focused on unmarried girls as we seek to identify overlapping and divergent design opportunities for the two groups.
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SEXUAL BEHAVIOR AND MARRIAGE
OF GIRLS AGED 15—19

52% OF GIRLS HAVE HAD SEX

APPROXIMATELY
Tanzania DHS 2015/2016

25% HAD SEX WITHIN THE PAST 4 WEEKS

APPROXIMATELY
Tanzania DHS 2015/2016

14.3% HAVE BEEN MARRIED

APPROXIMATELY
Tanzania DHS 2015/2016
38% of married adolescent girls in a union report not wanting a child in the next two years, yet only 13.3% of married adolescent girls are currently using any modern method to prevent pregnancy.

(TANZANIA DHS, 2015/2016)
UNDERSTANDING MARRIED GIRLS IN TANZANIA

SCOPE: In November/December 2016, the PSI Tanzania A360 team set out to deepen their understanding of married girls, focusing on married girls’ knowledge, attitudes and access to contraception. Over the course of two weeks the team met with married girls, husbands, parents, and parents-in-law in 2 districts of Mbeya Region (Kyela, Mbeya Urban) and 1 district of Dar es Salaam (Illala).

METHODS: The team used prototypes and other materials originally developed for unmarried girls to generate insights about married girls lives and the barriers they face to using contraception.

LIMITATIONS: Participants were limited mainly to older married girls (age 17-20) due to the challenges of finding and recruiting younger, married girls. The insights and opportunities outlined here are highlights rather than comprehensive documentation of everything the team heard and learned.
### Where we went

<table>
<thead>
<tr>
<th>Location</th>
<th>Interviews</th>
<th>Sessions</th>
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</thead>
<tbody>
<tr>
<td>Dar es Salaam</td>
<td>15</td>
<td></td>
</tr>
<tr>
<td>Mbeya Urban</td>
<td>14</td>
<td></td>
</tr>
<tr>
<td>Mbeya - Kyela (Rural)</td>
<td>13</td>
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</tbody>
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**Total interviews:** 42  
**Total sessions:** 26
<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Married adolescent girls</td>
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<td></td>
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<td>Divorced/separated adolescent girls</td>
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<td>Mothers-in-law</td>
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<tr>
<td>Unmarried adolescent boy</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Husbands of adolescent girls</td>
<td>15</td>
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</tr>
</tbody>
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Who we talked to

42 people interviewed
TRAJECTORIES
We heard that while girls in Tanzania have a number of possible trajectories before marriage, after marriage they face one clear path. Married girls are expected to raise children and manage the household, possibly supplementing the family finances with income from a small business.
Most young couples have a baby before or immediately following marriage. As they begin their life together financial insecurity becomes a palpable reality in the new household and frequently provokes relationship stress and instability. Despite couples acknowledging the financial burden of having children, contraception is not usually considered a solution.
Young couples are expected to have a child soon after marriage, if they do not have one already.
With little money, few economic opportunities and pressure to take care of extended family members, young couples face immense economic stress.
Some young couples regret having a child and getting married. Their relationships become unstable and may fall apart.
While many couples recognize that raising children is a big expense, they typically do not relate contraception to increased economic stability.
How might we help newly married couples see contraception as a way to ease pressing financial concerns and increase financial stability?
After marriage young couples find it difficult to chase after their dreams and plans for the future. Girls say their "dreams die" as more immediate needs for the family and mitigation of risks take priority over their own ambitions.
Before marriage girls often have big dreams about higher education and careers but do not actively plan how they will attain them. After marrying, they find their dreams slipping away.
After marriage, girls (and their husbands) don’t have money to invest in her further education and career development, despite recognizing its value for an imagined future.
Girls are highly motivated to earn and save money for their immediate needs and often manage to save in small amounts to mitigate risk from anticipated and unpredictable life events.
Boys start making life plans before girls but after marriage, they struggle to maintain them due to the trade-off between a better future and meeting immediately family needs.
Many girls lose hope of accomplishing their dreams once they are married and the reality of their new situation sets in.
How might we?

How might we leverage married girls’ current strategies for mitigating economic risk to include contraception?
Wives cannot control and do not trust how their husbands spend money, so they look for ways to earn their own income to meet personal needs and ensure the family’s financial security. Starting a business is the most acceptable and realistic option, but limited skills and competing household and childcare responsibilities makes this a challenging prospect.
Wives’ plans are subordinate to husbands’ plans.
Wives don’t trust the ways their husbands spend money, so they want their own so they can spend it how they want and as insurance.
In recent years, married girls have gained cultural and societal support to run small businesses as long as they can continue to shoulder all responsibilities for childcare and the household.
How might we?

HMW help couples break through the dynamic of
secrecy and mistrust through more open and
supportive communication about finances and and
family planning decisions?

HMW position contraception as an enabler for girls to
successfully establish a small business?
Some married girls want to use contraceptive methods but may feel inadequately informed and empowered to do so. Their husbands have final say and often don’t support it. However, knowing how to communicate with their spouse and having the support of trusted healthcare providers can bolster girls’ confidence in negotiating this decision with their husband.
Wives need to get their husbands’ permission to use contraception.
Husbands knowledge of contraception is limited to a vague familiarity with side effects and often view family planning as a “thing” that women use, not as an activity they participate in together with their wives.
Girls prefer to seek information about contraceptive methods from qualified and trusted health providers, and these providers can create an important entry point with husbands.
How might we?

- How might we better equip girls to talk about family planning with their husbands?
- How might we leverage support of qualified healthcare providers to motivate husband’s involvement?
- How might we help girls immediately and discretely access contraception until they can negotiate a longer-term decision with their husbands?
The milestone of marriage for an adolescent girl is often an event that destabilizes her social relationships and leads to isolation and alienation. This is particularly true when a girl leaves behind her birth family or school cohort and moves in with her husband in a new location. Despite her increased confidence in visiting health facilities due to her status as a married woman, social isolation leaves her less motivated to plan for her future and to learn about or access contraception.
Many girls experience a sense of isolation after marriage due to physical movement and social and relational changes and upheavals.
After marriage, girls continue to rely heavily on their mothers for information and support except on the topic of contraception. Girls feel strongly that they cannot discuss this topic with their mother-in-laws.
In order to even consider contraception, married girls first need economic and social support networks.
How might we help married girls build social networks that are positive sources of information on contraception?
Design Opportunities
Economic Context
Resourced or Unresourced
Community
Service Delivery Points
School & Peers
Family: Parents & Partner
Girl

**HMW Position Contraception as an Enabler for Girls to Successfully Establish a Small Business?**

**How Might We Leverage Community Acceptance of Married Women Using Contraception to Help Girls Gain More Immediate and Discrete Access?**

**How Might We Leverage Support of Qualified Healthcare Providers to Motivate Husband’s Involvement?**

**How might we help married girls build social networks that are positive sources of information on contraception?**

**HMW help newly married couples see contraception as a way to ease pressing financial concerns and increase financial stability?**

**HMW Help Couples Break Through the Dynamic of Secrecy and Mistrust Through More Open and Supportive Communication About Finances and and Family Planning Decisions?**

**How might we leverage married girls’ current strategies for mitigating economic risk to include contraception?**

**How Might We Help Girls Immediately and Discreetly Access Contraception Until They Can Negotiate a Longer-Term Decision with Their Husbands?**
Thank You