

Title: Using the Multidimensional Poverty Index (MPI) approach to target the poorest girls in FP programming: Lessons from the Tiko platform in sub-Saharan Africa

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Background: Poverty inequality limits access to sexual and reproductive health services among adolescent girls and young women (AGYW). AGYW who come from households with low socioeconomic status are exposed to unwanted/unintended pregnancies and risk of exposure to infections such as HIV and STIs. This fact is clearly illustrated in the 2022 KDHS report which revealed that adolescent girls aged 15-19 who have experienced teenage pregnancy were more likely to come from households with the lowest wealth quintiles than from the highest wealth quintiles households (71% vs 21%). Moreover, previous studies have shown that young women from economically disadvantaged households were less likely to access and use family planning services. It is thus important to understand not only how poverty impacts access to health care, but also the various angles of poverty that impact young people's health outcomes and design or adopt programmes to reach the most vulnerable.

The United Nations Development Programme (UNDP) has now adopted multidimensional poverty index (MPI) in its Human Development Report as a measure of poverty as it goes beyond the simplistic view of poverty solely based on income, but looks at various dimensions of poverty such as education, health and living standards. Tiko is now using MPI as a key metric for its programme as a measure of the wellbeing status of AYP benefiting from services provided by Tiko.

Description: Tiko targets adolescents and young people (AYP) in poor urban and peri-urban communities in Kenya, Ethiopia, Uganda, Burkina Faso, South Africa and Zambia. Tiko, being a connective tool that facilitates connections between AYP and health providers, leverages the involvement of micro-entrepreneurs and small businesses to improve the availability of health commodities in underserved markets, particularly those in lower socioeconomic strata. Tiko has been implementing a programme in 10 counties in Kenya that is funded by several donor organisations through a development impact bond. The programme aims to reduce the incidence of unintended pregnancies, new HIV infections and AIDS related deaths among Kenyan adolescent girls by increasing uptake of SRH and HIV services and commodities. The programme is targeting the most vulnerable adolescent girls aged between 15-19 years in these counties and a primary indicator for this programme is the proportion of girls being reached who hail from households living in multidimensional poverty (MPI). Through its model, which combines a digital data-driven platform, Tiko intends to engage AGYW from vulnerable backgrounds and encourage them to take up services free of charge from Tiko participating clinics across the 10 counties. Measuring the wellbeing of AYP accessing services on Tiko is done using monthly client exit interview surveys (CEIs) that have been conducted since the programme was launched in July 2023. Combining real time data from the digital platform together with CEIs data is enabling Tiko to measure the success of the programme in reaching the most vulnerable adolescent girls in accessing SRH services in Tiko-supported health facilities. Using this routine data collected using CEIs, Tiko is able to be more targeted at reaching the most vulnerable adolescents. It for instance works through its community mobilisers to enrol more vulnerable girls to the platform and engages in various aspects of demand generation to reach this group.

Lessons learned: From July 2023 since the programme started, Tiko has provided a total of 211,183 family planning services and 86,813 services across the 10 counties. By July 2024, the programme should demonstrate that 48% of the users who took a Tiko service were coming from multidimensionally poor households (MPI poor). The baseline data that was collected in November 2022, the proportion of MPI Tiko users was 45% and by December 2024, this percentage has increased to 46%.

Conclusions/next steps: Tiko's program in Kenya addresses issues of poverty inequality that limit access to sexual reproductive health services among adolescent girls aged 15-19, particularly the most vulnerable. Tiko is utilising a digital platform to enhance access to HIV and SRH services with a particular focus to those who come from vulnerable areas and households.