



Straight- talking Big Sisters

Expanding access to
adolescent sexual and
reproductive health in the
DRC



THE CHALLENGE

90% of adolescent girls in the DRC do not have their contraceptive needs met.

(DHS 2023)

The DRC has a young and rapidly growing population. In 2030, the population aged 10–19 will have increased by 64% to 28.6 million. Although the numbers are increasing, the proportion of adolescent girls using contraception in the DRC remains low compared to the African average: an estimated 10% of adolescent girls in the DRC have their contraceptive needs met (DHS 2023).

With an estimated population of 17 million, Kinshasa, the capital of DRC, is the second most populous and densest city in sub-Saharan Africa. A 2020 study found that just 10% of girls aged 15–19 y/o in the city were using a modern contraceptive method, with another 13% using a traditional method instead. This situation leads to many unplanned pregnancies: an estimated 80% of pregnancies among adolescents in Kinshasa were unintended compared with 53–67% for older age-groups. The proportion ending in abortion was higher among this age-group than any other (Fatusi A et al, 2021).

The MSI DRC Straight Talk initiative aims to improve this situation. Human Centred Design (HCD) research identified 5 key challenges adolescent girls in Kinshasa face when considering accessing sexual and reproductive health (SRH) services:

Stigma and social norms: common view that modern contraceptive methods are meant for married women, and that they are only used by promiscuous adolescents.

Lack of information: young people lack access to trustworthy information about contraception, having to rely on unreliable word-of-mouth from their peers.

Lack of access: adolescents are unsure where to go for youth-friendly SRH services.

Proliferation of myths and misconceptions around contraception: in peer networks, misinformation about contraception can go unchallenged

Not currently reached with MSI mobilisation activities: MSI teams have trouble reaching young people during their general mobilisation activities, as their messages are not tailored to them. This means adolescents feel the topics covered are not relevant to them.

Ba message ya loki
pina santé pe sex

WHAT WE DID

How the intervention was developed

MSI DRC and MSI worked with the design agency ThinkPlace, under the FCDO-funded WISH project, to use Human-Centred Design (HCD) to develop the Straight Talk intervention. HCD allows teams to come up with practical solutions that fit in with the context, considering the needs of different stakeholders. The HCD process involved initial insight gathering to identify opportunity areas, prototyping a range of potential solutions and then a needs assessment prior to inform the pilot of the three key components of Straight Talk:

1) "Straight Talk" youth-targeted communications and branding: "nothing but the truth". The Straight Talk (Bosolo Nde/ Parlons Franc) communications materials and events leverage a frank and open tone to engage adolescents and youth.

2) MSI 'Big Sisters' peer mobilisers. Only slightly older than the adolescents they are targeting, and hailing from the same communities, they are best placed to support young girls struggling with questions and fears about sex. The MSI Big Sisters are very visible in the community, speaking to adolescents wherever they can find them: in schools, at water points, bars, hairdresser salons.

3) Youth responsive service delivery. Big Sister activities are co-ordinated with those of a team of service providers, the MSI Ladies. The MSI Ladies provide a full range of contraceptive methods and youth-friendly and client-centred counselling.

Target audience: Sexually active young girls 15-19y/o

"Nothing but the truth": activities speaking directly and honestly to girls by talking frankly about sexuality, encouraging them to use modern contraceptives for their own well-being – emphasising that contraception is also for young people.

Messaging style: direct, frank, daring; conversation between equals; informal, simple language without jargon.



Bo
SOLO
Nde

Ba message yalokuta te
pona santé pe sexualité

The MS Big Sisters bring the “Straight Talk” brand to life through 3 main activities:

1 Role Modelling

The MS Big Sisters act as role models, who help normalise talking about sex among young people. Leveraging the colourful campaign branding, they help amplify young people’s voices, ultimately changing norms around adolescent sexuality. This can take lots of forms: simple T-shirt branding, posters, satisfied client conversations,...

“The Big Sisters become like friends... we have their contact details and can call them if we have any concerns”

Adolescent, Kinshasa

2 Interpersonal communication tools

The MS Big Sisters are equipped with Truth Cards and referral cards, which they use during one-on-one conversations with adolescents. The cards have statements that are shown to adolescents who can choose which one they want to hear more about or identify with. If, after the conversation, a girl is interested in contraception, the Big Sister provides her with a personalised referral card to go see a provider.



3 Youth Events

The MS Big Sisters also organise events specifically aimed at young people, going beyond the often stale and non-targeted demand generation events they might have seen before. These events can take all kinds of forms, and the Big Sisters are encouraged to be creative! They are supported in this with a detailed how-to guide, including tips to monitor their progress and improve future events.

After the initial pilot in Kinshasa, the Straight Talk model has now been scaled up across 3 provinces and continues to empower girls to take control of their futures.

WHAT WE LEARNED

Methodology: The initial pilot in Kinshasa and scale-up in Tshopo province were evaluated using a mixed-methods approach, based on a review of monitoring data (supervision forms, routine service data); operational review sessions with stakeholders; and a rapid qualitative evaluation with users and support office staff. For the Tshopo reflective assessment, this included 7 qualitative interviews with 3 MSI Grandes Sœurs, 3 MSI Ladies, and 1 supervisor/former Big Sister alongside routine datasets.

The Straight Talk intervention is effective at connecting adolescents with SRH services and information tailored to them, building their confidence in taking up an FP method. The intervention is associated with increased adolescent reach. During the pilot, providers supported by the MSI Big Sisters saw a 53% uplift in the number of adolescent clients and a 25% uplift in overall client numbers. In Tshopo province as well, adolescent client visits increased among all three providers (41%–184% March–Nov 2025 – diversity of baseline levels reflected in this wide range).

“I used to have a contraceptive method, but it gave me lots of side-effects and I had no one to ask if it was normal – so I stopped using it. But now, the MSI Big Sister provides that support, and I feel safe to try a different method.” (Adolescent, Kinshasa)

The MSI Big Sister peer mobiliser model is an excellent way to reach adolescents, representing good value for money at about £7 per adolescent reached. The Sisters’ particular profile makes them trusted and relatable sources of information for young people. They each speak to over 100 people per month, of which at least 60 are adolescents. The MSI Big Sisters’ profile, being only slightly older (20–25y/o) than the target group and hailing from the same community, is a big part of their strength and appeal. This allows them to truly become Big Sisters to the adolescents in their community.

“When you see the [MSI Big Sisters] talking and engaging with adolescents, it brings tears to your eyes.” (MSI DRC country office team member)

The tone of the brand, materials and activities resonates well with adolescents, drawing young people in. Our data showed that when they used the Straight Talk approach, the MSI Big Sisters made more referrals for services compared to engagements not using the tools. The Big Sister said they found the “truth cards” very helpful in starting conversations with adolescents on sensitive topics.

“I’ve learned from the MSI Big Sister that contraception is like personal protection. You can choose when to have a child or not.” (Adolescent, Kinshasa)

Straight Talk contributes to strengthened adolescent girls’ confidence and self-efficacy, enabling them to seek contraception even in the presence of persistent stigma and social sanctions. The high visibility of the Big Sisters means they have contributed to broader shifts by building trust with parents and communities, creating supportive “micro-environments” where behaviour change becomes more socially acceptable.

“In the past, girls were afraid to use contraception, but now they have changed their outlook and can go and [take up a] contraceptive method” (MSI Lady)

WHAT WE LEARNED

Straight Talk is making a meaningful contribution to shifting social norms affecting adolescent SRH access, while also presenting a clear opportunity to build on this foundation to address broader, more deeply entrenched barriers. There is an opportunity to further enhance impact by complementing existing efforts with approaches that engage influential gatekeepers, such as men, religious leaders, and male partners, who continue to shape the broader normative environment. Expanding in this direction could help reinforce and sustain behaviour change over time.

"We should also engage with men who are [the] decision-makers, religious and community leaders, and partners." (MSI Big Sister)

Menstrual health has organically emerged as an additional entry point in more conservative settings since the scale-up after Kinshasa. As the intervention expanded to more conservative regions, the Big Sisters had to pivot their approach. In Tshopo, menstrual health has become a major focus of Straight Talk activities, including explanations of how to track cycles and fertile periods, as well as using menstrual health to better explain contraceptive method side effects. The Big Sisters report that equipping girls with accurate information about their menstrual health is not only empowering in itself, but also opens the door, even for shy or hesitant adolescents, to discussions about contraception. This adaptation both improved girls' knowledge and confidence around their bodies and contributed to broader destigmatisation of SRHR topics, including menstrual practices themselves.

"Thanks to the [activities], there are no longer any taboos about hiding periods, even when it comes to certain intimate matters like drying underwear in the sun" (MSI Big Sister)

The Straight Talk activities illustrate meaningful adolescent- and youth engagement not only through the Big Sisters' positive impact on adolescents directly, but also through the profound personal transformation experienced by the Big Sisters themselves. Many described how becoming a Big Sister reshaped the way they live and behave within their communities, from "raising awareness within their own family" to becoming more conscious role models for other girls and more personal awareness of the importance of SRHR. At least two former Big Sisters so far have even gone to take up a formal SBC coordination role at MSI DRC. The Big Sisters repeatedly emphasised the confidence building effect of their involvement.

"I was one of those girls who couldn't talk about periods or sexuality in front of people or boys. But through this work, the shift in attitudes towards sexuality and menstrual hygiene has helped me a great deal. The taboo has been broken in both for how I see things and how young girls see them." (MSI Big Sister)

Insight 8: Increased government ownership and collaboration has demonstrated the model's strong potential for sustainability, with initial donor investment catalysing a self-sustaining, government-led approach. The Straight Talk model has been successfully institutionalised within government systems in Kinshasa, where trained public-sector peer educators have taken over implementation.

WHAT THIS MEANS

The Straight Talk experience highlights the importance of not making assumptions about young people's needs without asking them directly.

The Human-Centred design approach found that young people want to be spoken to directly and to receive honest information that is tailored to their realities. All too often, existing content is watered down or not particularly relevant to their circumstances. It is precisely this directness that has made the Straight Talk tools so effective, as they are designed in the tone and language that young people themselves have said they want.

Recruiting the right profile of peer mobiliser is worthwhile but takes time and effort.

The MSI DRC team recommend allowing for plenty of time to do so, and to use different channels: social media; asking for recommendations from existing community mobilisers; and to connect with existing youth organisations as much as possible to find good candidates.

Even direct-to-adolescent interventions can contribute to broader norm change, but need deliberate adaptation.

Our latest evaluation in Tshopo province identified opportunities to take norm change further by expanding audience engagement, eg deliberately including men, boys, and religious/community leaders to address key normative barriers and gendered power dynamics beyond the individual level.





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