

PURPOSE

This tool is designed to help VMMC implementers understand how current interventions align with the full landscape of barriers to VMMC uptake identified across the journey of a man, and where new opportunities may exist to create new interventions. Additionally, once you complete the persona tool, your team can return to the portfolio mapping tool to reveal specific areas of opportunity that align with the personas you have created. Ultimately, this tool helps implementers identify the specific barriers that should be focused on with the Intervention Design Tool.

HOW TO USE

This tool leverages a visual poster to build an overall map of VMMC demand interventions being used, including aspects of service design intended to increase uptake. This exercise can be done individually or as a group but the basic steps are the same:

- 1. Describe current interventions and map them to the barriers they address along a man's journey to seeking VMMC.
- 2. Judge the relative strength or weakness of the intervention
- 3. Identify areas of the map where no or weak interventions exist
- 4. Repeat and update
- 5. Optional Step: If you have completed the persona tool, you can return to this tool to mark the specific barriers relevant to your prioritized persona.

This visual map can serve as a useful resource for planning and prioritizing efforts. As such, it's encouraged to use the map as something that remains visible in an office and is updated as new efforts are started or others are discontinued.

1 DESCRIBE AND MAP CURRENT INTERVENTIONS

This tool requires that implementers view their interventions through the eyes of the man. Thus, the process of filling out the map is prioritized by the specific barriers listed on the poster.

The process in this step will simply be a repetition of the following actions:

1. Read through the barrier themes and specific barriers

- a. Begin in the upper left corner of the poster and work through the specific barriers stage by stage. Assess all the specific barriers listed in Stage 1 before moving on to the same process in Stage 2, and finally Stage 3.
- b. Review the definition of the stage before moving to the specific barriers. It's important that the team considers current interventions in regards to the goal of each stage. A team discussion on this topic may be helpful at the start of each stage column.



- c. Read the specific barrier and the barrier theme that it belongs in, which is color coded and labeled on the left side of the poster.
- d. Remember to consider this specific barrier in regards to the stage it's in. There are interim milestones in Stage 1 and Stage 2. For instance, the goal of overcoming specific barriers in Stage 1 is to get a man to understand the benefits of VMMC and then ultimately commit to the procedure. While the specific barriers in Stage 2 have the goal of getting a man to schedule and then ultimately get the procedure.

2. Assess current interventions

- a. Based only on the specific barrier that's just been read, discuss what interventions the organization is currently deploying that directly addresses it.
- b. This judgement can be made by thinking about the original design of interventions. For instance, was an intervention designed to address this barrier theme and specific barrier?
- c. IMPORTANT: It's critical that teams judge current efforts honestly. The goal
 of this tool is not to demonstrate how everything is being done perfectly.
 More importantly, its value is to reveal areas where there are new
 opportunities to make impact with new interventions.
- d. For the reason above, it's totally acceptable for the team to decide that there are no interventions currently focused on this specific barrier. If so, it can be left blank and teams can move on to the next specific barrier.

3. Document and place on the map

- a. If the team believes there is a current intervention from the organization that is specifically addressing this barrier, then the next step is to document it.
- b. This tool uses common Post-It notes as a simple means to fill out the map. This format is also helpful as in encourages teams to describe only the essence of the intervention.
- c. To describe a current intervention fill out only 4 things on a Post-It Note in this order from top to bottom:
 - Name of the intervention this can be a short version. As long as other team members would understand, then the name is good enough.
 - ii. Channel that the intervention uses this can just list how the intervention is being delivered. For instance, IPC, mass media campaign, etc.
 - iii. **Influencer the intervention uses** this line just lists any key influencer that the intervention may use. For instance, circumcised friends, healthcare workers, etc.
 - iv. **Key message of the intervention** here teams just want to write a simple phrase of the key message that the intervention is based on. For instance, "better sex", etc.

Teams should repeat this step until they've read each specific barrier and mapped all of their current interventions accordingly.



- ** One anticipated outcome of this exercise is that teams may identify interventions that are currently being deployed that DON'T FIT on the Portfolio Map. In these instances, the team can still create a Post-It Note and place it in the large box on the left side of the poster. Since these don't align with the structure of the poster grid, they can be placed anywhere within that box.
- *** This tool allows for flexibility of applications to difference cultures or populations. If a team can accurately describe a new specific barrier for their population within one of the barrier themes (colors), there are blank boxes where a team can add specific barriers. However, it's crucial that teams clearly define such barriers through the perspective of the barrier theme. For instance, a population that has culture concerns about what happens to the foreskin after the procedure may choose to articulate this as a new specific barrier. This example may reside within the UNCERTAINTY barrier theme, and should be placed in the correct stage. However, if this situation is more about men not believing the answer they're currently told, a team may choose to place this as a new specific barrier in the DISTRUST barrier theme.

2 JUDGE THE STRENGTH/WEAKNESS OF INTERVENTIONS

By this point, teams should already have some observations about where their current interventions are clustered or where there may be none. This step helps provide another view of the current interventions that can also guide decisions on where to focus next. This step is particularly helpful in situations where teams have the majority of the map covered in Post-It notes (if there are big gaps in Post-It note coverage, it shows that stages or specific barriers aren't being addressed and teams may want to consider interventions in these areas).

1. Discuss Strength / Weakness

- a. This step is not intended to be data driven; rather it is an opportunity for the team to have a discussion about current efforts and make a subjective judgement.
- b. Teams can do this by discussing the Post-It notes they filled out on the map and decide how effective they feel they are. This can come from programmatic data showing the intervention has led to uptake (such as client intake or exit forms) or in the absence of more concrete data, it can be based on client or field agent feedback.
 - i. Place a small GREEN Post-It note on top of the Intervention Post-It note if the team feels the intervention is STRONG
 - 1. Is the intervention well aligned with the specific barrier?
 - 2. Does it have a strong call to action or provide a solution to overcoming the barrier?
 - 3. Is there a general sense in the organization that it's working well?
 - ii. Place a small RED Post-It note on top of the Intervention Post-It note if the team feels the intervention is WEAK.



- 1. Is the intervention not well aligned with the specific barrier?
- 2. Is it missing a strong idea for overcoming that barrier?
- 3. Is there a general sense in the organization that it isn't working well?
- 4. Are there things that could be done to make it better when assessing it through this Portfolio Map?

The result of this step should be an additional visual pattern on the poster that reveals where there may be opportunities for new or improved interventions.

3 IDENTIFY AREAS OF OPPORTUNITY

The biggest value of this tool is to help implementers see new ways that they can have more impact in helping a man through is journey to the VMMC procedure. The visual nature of the Portfolio Mapping tool is built to help teams see these new opportunities visually. At this point the team should have a discussion around these observations. Here are some initial questions and ways to look use the map at this point:

1. Are the Post-It notes all clustered together in one part of the map IN ROWS?

a. For instance, the team may have many more Post-It notes on the top of the poster but none on the bottom. This could reveal that all of the current interventions are built to address the barriers of relevance that help move the man forward, but there are no interventions built to remove the barriers that are still holding men back.

2. Are the Post-It notes all clustered together in one part of the map IN COLUMNS?

a. If the Portfolio map shows Post-It notes clustered in columns, it may suggest that a majority of interventions are focused only on a single stage. While this may be intentional, it's helpful to understand the entire man's journey to VMMC. What may be his barriers before our intervention engages with him. What might be his barriers after? This may reveal expanded opportunities to explore interventions across the entire journey of a man all the way through to advocacy.

3. Where are there no Post-It notes?

a. The easiest visual pattern to see should be where there are places on the map where no Post-it notes are present within specific barriers. This may indicate where men may still be getting held back in their journey despite the interventions being deployed in other areas. It's critical to remember that a man's journey is represented by a collection of barriers. No single point is responsible entirely for his progress. Expanding new interventions in these areas may result in a more effective portfolio of interventions.

4. Where are the small RED Post-It Notes on the map?



a. Particularly in maps with many Post-It notes, it's helpful to look for patterns of RED Post-it notes. This may indicate a pattern of where current interventions could be explored or improved. This pattern may exist in ROWS or COLUMS or a combination of both. Ideally, it reveals insight like "all of our interventions around Anticipated Loss could be stronger" or "our Stage 3 advocacy interventions could be more developed."

5. How many Post-It Notes are in the gray box on the left side of the map?

a. The gray box on the left of the map is a means to capture interventions that the team feels can't be placed within the specific barrier boxes. This reveals that these interventions are not built to overcome one of the barriers identified by this framework. The team should discuss if these interventions could be improved so that they may align with a barrier. Also, consider if these interventions address a specific barrier not currently listed in the map. If so, it could be added. Alternatively, these interventions could be considered for elimination as they may also reveal that valuable resources are being deployed in a manner that may not greatly impact the progress of a man towards VMMC.

6. Are there any Post-It notes that could be combined, or better connected?

a. The tool may reveal opportunities to consolidate efforts to combine individual interventions around specific barriers into a single intervention that may address both in a new innovative way, without diluting the precision of their message(s). Additionally, there may be opportunities to connect existing interventions together so that a man would have a more seamless experience.



4 REPEAT USAGE AND UPDATE

The Portfolio Mapping Tool can be used continuously by a VMMC Implementer as new interventions are developed, improved, and executed to maintain a comprehensive understanding of how uptake barriers are being addressed. In this manner, there are 2 expanded ways this tool could be used.

- 1. After creating new interventions with the Intervention Design Tool, teams can place the selected new interventions on Post-It notes and add them back to the map.
- 2. When using the map to show the new interventions that have been designed, teams could use the tool to create a roadmap that shows which interventions are being launched, improved, or scheduled for the future. In this way, the tool could serve more as a planning tool for an implementer.

5 (optional) MARK THE SPECIFIC BARRIERS OF A TARGET PERSONA

While the previous step can provide tremendous value to an implementer, even greater focus can be achieved by adding the perspective of a target or prioritized persona chosen by the organization. The Persona Tool is designed to help teams identify the key barriers that relate specifically to a group of men. In this way, a persona helps further narrow the inventory of all the specific barriers to better focus on the ones most impactful for this group.

- 1. Identify the persona specific barriers
 - a. Refer to the Persona Tool output to identify the key specific barriers that are most relevant
 - b. Locate those barriers on the Portfolio Map and draw a box around them with a thick, visible marker. Note that each box has a blank perimeter outside of the area where a Post-It is applied. This helps ensure that the marker line won't be covered up by a Post-It.
 - c. (This step could be applied to more than one target persona. In this instance, simply use 2 different color markers to draw the boxes.)
 - d. Now repeat Step 3 to assess how these same patterns may impact the current interventions that would relate to this group of men.
 - e. The ultimate goal in this instance is to choose the specific barriers that teams will explore with the Intervention Design Tool.
 - f. Repeating the above steps with several personas that an implementer is targeting may reveal opportunities to create interventions appropriate for multiple types of men