



What is the challenge?

In Francophone West and Central Africa, obtaining **reliable information** on Sexual and Reproductive Health (SRH) issues is a significant challenge. **Many women, particularly young girls, are turning to the internet to find answers.** An online search is driven by several advantages that distinguish it from going to a clinic: ease of access, affordability, and the anonymity that online provides. The number of women using online is already a significant proportion (as of 2024, nearly half of Senegalese women had access to the internet) and will only grow in the coming years.

However, when seeking information online, West and Central African women and men are faced with two major barriers: **trustworthiness** and the **need for more comprehensive answers.** Information online can be contradictory, making it difficult to discern what is accurate. Studies show that this perceived lack of reliability is the biggest challenge to accepting online information¹. The second barrier is, despite a widespread availability of websites and chatbots, these platforms may not be equipped to address the specific, personal questions that users have. Having generic information is good, but sometimes we need to go a bit deeper.



What does Lydia do?

DKT's LydiaConseil call center offers a solution to these two challenges. The LydiaConseil model is designed to **bridge the trust gap** by employing midwives—respected health professionals in the region—thereby reassuring clients of the reliability of the information provided. The service also maintains a **human touch**, with telecounselors available to address complex or personal questions that static websites or chatbots might not be able to fully answer. LydiaConseil provides online chat and call support from 8 AM to 10 PM, seven days a week, across Francophone West and Central Africa.

LydiaConseil **meets people where they are** by existing within major online platforms like Facebook, WhatsApp, and TikTok, rather than using standalone apps or websites that might be less familiar, require downloads or be harder to navigate. The service is provided **free of charge, without judgement** and **without an agenda**: we do not push clients toward a particular decision or service. This lack of bias is essential to our reputation as a reliable source of information, as even though DKT sells a range of contraceptives and safe abortion products, the LydiaConseil call center does not have targets linked to sales or referrals, ensuring that clients receive the best information for them. Nevertheless, if a client does want a particular service, we are ready to get them support. We use our database of over 10,000 public and private health facilities to **refer clients** across the region **to a nearby provider.**

(1) Girl Effect and Women Deliver. "Going online for sexual and reproductive health: meaningfully engaging adolescent girls and young women for smarter digital interventions" <https://womendeliver.org/publications/going-online-for-sexual-and-reproductive-health-meaningfully-engaging-adolescent-girls-and-young-women-for-smarter-digital-interventions/>



How does LydiaConseil support DKT?

DKT sells high-quality, low-cost contraceptive and safe abortion products via the private sector. We do this because the private sector is better at serving vulnerable groups like adolescents or non-married women², it has fewer stockouts than the public sector, and it is the primary provider of abortion products and services. By increasing awareness and interest in contraceptive and safe abortion products, LydiaConseil supports DKT’s behaviour change efforts. Moreover, maintaining good product quality is essential for the continued uptake of SRH services, as poor quality can quickly create myths and reduce the use of contraceptives. LydiaConseil contributes to DKT’s pharmacovigilance strategy by being the first responder to any unexpected side effects, thereby ensuring that product quality concerns are promptly addressed.



What are the results?

Since 2019, we have averaged about **40 thousand calls per year**. This was higher in 2020, a COVID year. Our callers come from all across the West and Central Africa francophone region. As proof that our online strategy does indeed reach younger people, **the majority of our clients are young**: 10% are under 20 years old and 56% under 25 years old.

Figure 1
LydiaConseil total contacts 2019 - 2023, by age group

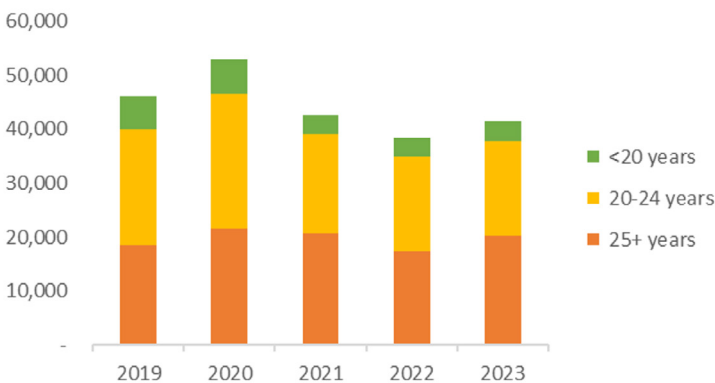
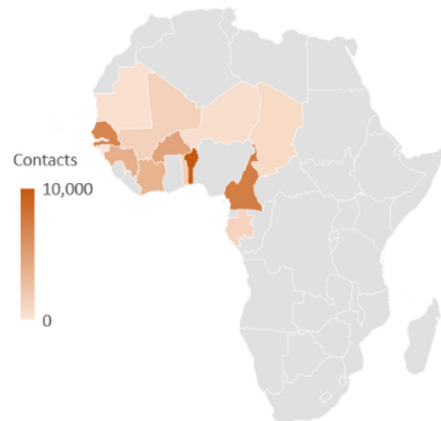


Figure 2
LydiaConseil total contacts 2023



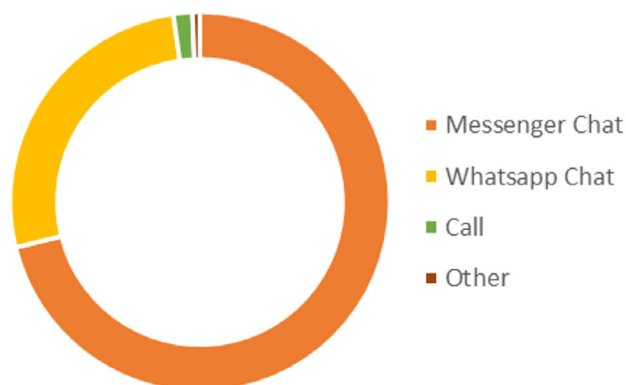
Most of our calls are about contraception or sexual and reproductive health issues and we refer 6% of our clients to take up a service or purchase a product at a nearby clinic or pharmacy. Most of our traffic comes through the channels that clients already use, via Messenger or Whatsapp.

(2) Bradley SEK, Shiras T. Where women access contraception in 36 low- and middle-income countries and why it matters. *Glob Health Sci Pract.* 2022;10(3): e2100525. <https://doi.org/10.9745/GHSP-D-21-00525>

Figure 3
LydiaConseil primary reason for call, 2023

Reason to call	%
Contraceptive methods	67%
Pregnancy	16%
Gynecological questions	5%
HIV / AIDS /or STIs	5%
Abortion	3%
Sexuality	2%
Menstruation	2%
Gender based-violence	0%

Figure 4
LydiaConseil total contacts 2023, by channel



We prioritise the quality of our discussions over the quantity, and this is reflected in feedback from our callers. Since 2019 **over % 90 of our callers** who respond to our feedback surveys (n=4,185) **report being “satisfied” or “very satisfied”** with our service and 96% (n=2,092) state that the call was able to resolve their question.



Where do we want to go:

- > We are proud of the role LydiaConseil plays today in providing free, high-quality information on sexual and reproductive health to West and Central Africans. Our work boosts knowledge and changes behaviour across the region. Nevertheless, we are always looking to innovate and evolve.
- > Our telecounselling services receive calls from across Francophone West and Central Africa, yet our telecounselors are currently based only in Senegal and Benin. As the region becomes more connected, we see an opportunity to expand our team with remote staff who have **greater local knowledge** and fluency in local languages, which will allow us to better serve the diverse needs of the communities we support.
- > **Building partnerships** is another key focus for us. We don't work in isolation; we collaborate with other organizations in the SRH space to backstop their websites or apps and to refer clients to their services. These partnerships allow us to link clients to a wider range of services across more countries, making our combined efforts more efficient and effective.
- > We believe in the potential of **telemedicine** as a way to bridge the gap between health professionals and clients in a region where distances can be vast and security challenges can make travel difficult. Telemedicine offers the possibility of providing initial consultations to women and men remotely, leading to prescriptions they can fill at a pharmacy. While we are still in the early stages of testing telemedicine, we see it as a long-term area of growth.