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Community health workers and the media can be effective in providing health information to married adolescent girls in the community

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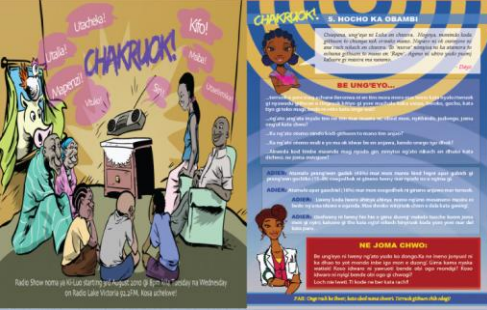
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OR Summary

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Community health workers and the media can be effective in providing health information to married adolescent girls in the community

Using interactive communication campaigns and community health workers led to significant increases in the proportion of married adolescent girls taking up maternal health services and family planning in Nyanza

Background

Past research has found that married adolescent girls in Nyanza Province, Kenya, face higher risks of HIV infection than unmarried but sexually active girls their age in the province and other parts of the country. One study indicated that 32% of married adolescent girls in Nyanza were HIV-positive, compared to 22% of their unmarried peers. In addition, it has been established that married adolescent girls' use of reproductive health services, including family planning, is poor. To address this challenge, APHIA II OR Project, in collaboration with Well Told Story and the Ministry of Public Health and Sanitation, developed a study to assess the effectiveness of an intervention designed to increase married adolescent girls' access to comprehensive reproductive health and HIV information and services in Homa Bay and Rachuonyo districts.

The intervention: The 10-month intervention comprised the following activities:

- i) A communication campaign: This consisted of a radio drama and distribution of information materials in the community. The radio drama, *Chakruok*, centred on the life of a married adolescent girl, and was aired over eight months on three radio stations in Nyanza. The program included an interactive component, where listeners could contribute their thoughts through phone calls and text messages. Listeners could also hold further discussions on the drama through a Facebook page. Leaflets and posters, which had information on specific topics that had been raised in the radio drama, were also produced and distributed in the community and directly to married adolescent girls.
- ii) Using community health workers (CHWs) to reach married adolescent girls and provide information on reproductive health and HIV, as well as make referrals for services: Two hundred CHWs were trained on the reproductive health and HIV information and service needs of married adolescent girls and given tools and incentives to enable them to follow up the girls in the community and provide information and support, as well as referrals for health services as necessary.

Key findings of the evaluation:

- *Increased use of family planning:* the proportion of married adolescent girls using a family planning method rose from 38% before the intervention, to 45% in the endline survey. There was a highly significant increase in the use of male condoms (from 13% to 25%) among partners. Those girls exposed to the intervention were more likely to be using a family planning method than those not exposed.
- *Increased use of long-term family planning methods:* Although most married girls at baseline wanted to delay their next birth by 3 or 5 years, majority of those using a family planning method were

using short-term methods. However, there was a highly significant increase in the use of implants at endline, from 2% to 9%.

- *Increased support for FP and RH services use by partners:* At endline, partners of married adolescent girls were much more likely to support them in accessing reproductive health services, compared to baseline - partners were more likely to give permission, provide transport or fare and money to pay for services. Sixty-five percent of partners provided transport or transportation fare for their wives to attend antenatal care at endline, compared to 53% at baseline, while the proportion of partners who provided money to plan for a delivery rose significantly from 69% to 79%.
- *More pregnant married adolescents made at least four ANC visits:* There was a decrease in the proportion of married adolescent girls making the first antenatal care visit after seven months, from 13% at baseline to 8% at endline. There was a significant increase (from 22% to 30%) in those making at least four ANC visits. Married adolescent girls exposed to the intervention were more likely to have attended ANC four times during their last pregnancy than those not exposed.
- *More deliveries under skilled care:* Over half of the married adolescent girls (55%) in the endline survey had delivered their last child at a government health facility, an increase from 48% at baseline. There was a significant reduction in the proportion of girls who had delivered at home without skilled care, from 44% at baseline to 36% at endline.
- *Use of post-partum family planning high:* The proportion of those who had accepted a family planning method immediately after their last delivery increased from 61% at baseline to 67% at endline. The injectable was the most popular choice, favoured by over 60% of the girls in both surveys.
- *Increased uptake of HIV counselling and testing:* The proportion of married adolescent girls that had ever been tested for HIV was high in both baseline and endline surveys. An increase was found in the proportion of married adolescent girls that had never been pregnant who had been tested for HIV, from 72% to 82% at endline.
- *Improved utilization of PMTCT:* Nearly all the married adolescent girls living with HIV who were pregnant in the endline survey were on ARVs for prevention of mother to child transmission (PMTCT) of HIV, compared to baseline where only half were on PMTCT. However, there was a decline in the proportion of those that sought post-partum care services within 48 hours after delivery.

Recommendations:

- Using interactive communication campaigns and community health workers is an effective way of increasing married adolescent girls' access to reproductive health and HIV information and services in rural settings. This model should be scaled up to other areas with significant numbers of married adolescent girls.
- Special efforts should be made to introduce married adolescent girls and their partners (many of whom have either reached their desired family size, or want to delay their next birth for a considerable period of time) to long-acting or permanent methods of family planning.

Source: Undie, C et al. 2012. *Expanding access to comprehensive RH/FP and HIV information and services for married adolescent girls in Nyanza Province*. APHIA II OR Project Final Report. Population Council, Kenya