

# APHIA II Operations Research Project in Kenya



| NEWSLETTER |

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## USAID-funded project helps married adolescent girls in Nyanza to access critical reproductive health and HIV services

*“...Atieno’s had a baby, so we know that she is bad. Fifty-fifty it may live, And repeat the life she had. Ending in post-partum bleeding, Atieno yo. Atieno’s soon replaced; Meat and sugar more than all she ate in such a narrow life, Were lavished at her funeral, Atieno’s gone to glory, Atieno yo...”*

(From Marjorie Oludhe-MacGoye’s poem, “A Freedom Song” in David Cook’s ‘Poems from East Africa’, 1996, East African Ed Pubs)

In the southern region of Kenya’s Nyanza Province, Atieno’s tragic story is not uncommon. Estimates from the 2008-2009 Kenya Demographic and Health Survey (KDHS) show that Nyanza has one of the highest neonatal mortality rates (39 neonatal deaths per 1,000 live births compared to the national average of 31 deaths per 1,000 live births). It also had the highest infant (95 deaths per 1,000 live births) and under-five (149 deaths per 1,000 live births) mortality rates.

Several factors are associated with the poor pregnancy outcomes, including low levels of education, early marriage, poor maternal health care, as well as inadequate ante-natal and post-natal care. Other factors include low use of contraceptives, high levels of HIV infection, and poor or non-existent birth planning. As the following data illustrate, utilization of reproductive health services among adolescent mothers in Nyanza is generally poor:

Distribution of currently married women by utilization of RH/FP services			
Married women...	Nyanza (15-19)	National (15-19)	National (15-49)
Currently using a modern method of contraception	3%	12%	31%
Who approve family planning	73%	68%	79%
Whose husbands approve family planning	45%	44%	59%
Who received 4+ antenatal care visits	40%	43%	53%
Who delivered at a health facility	31%	40%	40%
Who received post-natal care	14%	12%	17%

Source: KDHS 2003

Since 2009, APHIA II OR has been conducting a project in Rachuonyo and Homa Bay districts of Nyanza to expand access to comprehensive reproductive health and family planning and HIV prevention services for married adolescent girls in order to improve their health outcomes. The project activities include promotion of RH/FP information and services for married adolescent girls and their partners through a radio and community-based information campaign (entitled *Chakruok*), and empowering the girls through home visits by Community Health Workers (CHWs), who provide RH/FP and HIV information, and refer them for health services as needed.



**Chakruok listeners participate in a group discussion**

Rose\*<sup>1</sup>, an 18-year old married girl from Rachuonyo South District, had never attended an ante-natal care clinic in her life until she met one of the project's CHWs. She recently shared her story with Ben Ochieng of the APHIA II OR Project:

*"I was married at 14 years and when I got pregnant and gave birth, the child died. I got pregnant again and when I gave birth again the child died after two months. I was very worried because of this and my marriage was not a happy one. My mother-in-law complained bitterly saying I was a witch. I also thought I had been bewitched. I was very worried because I was carrying my third pregnancy and I did not know whether my third child would live.*

*"When Priscah (a Community Health Worker) talked to me and enrolled me into the program, I had not attended the clinic even once ... because I did not know it was important as nobody had told me. Priscah took me to the clinic at Oyugis District Hospital where several tests were done and I was weighed, they took my blood pressure, gave me some medicine for malaria and an injection that I was told was for tetanus. I was counseled and tested for HIV and was given some medicine [ARVs] that I continued to get until I gave birth two months ago. I thank Priscah and the health people because they saved my life and my daughter's life".*

Nearly 200 community health workers were recruited and trained on counseling the girls and providing referrals to health services. They use local meetings including Chiefs' *barazas*, funerals, and churches, to sensitize their communities about the needs of married adolescent girls and create awareness of their plight.

**From a CHW's field files in Homa Bay:**

*"Judy, (not real name) a 19-year old girl, has been married to James (not real name), a primary school teacher, for the past four months but has not been pregnant. Another wife has recently been married and is pregnant. Judy is now threatened with divorce; she is barred from eating together with the pregnant co-wife. Judy is isolated and ridiculed. The mother-in-law says if she herself got pregnant within one and a half months of marriage, why not Judy?"*

\* Names changed to protect identity



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The APHIA II Operations Research Project in Kenya is now in its third and final year. The project was awarded to the Population Council in October 2008, to test innovative public health interventions to ensure high-quality reproductive health, family planning, and HIV/AIDS and related services.

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In the OR study, each CHW recruited a cohort of at least 20 girls, whom he/she visits at home to provide counseling, referrals and other support. However, CHWs have experienced challenges in their work, including uncooperative in-laws to the married adolescent girls, who are major barriers to the girls seeking health care services. In some cases, in-laws are suspicious of the CHWs, fearing that the husbands concerned may be arrested because their wives are under-age.

Long distances from health facilities are also a challenge in general to the communities' ability to seek services from facilities; people get discouraged and prefer to take herbal medication instead and to seek other local treatment – hence the importance of the role of CHWs in reaching their community members. In Luanda, the CHW reported that the area she serves is more than 5km away from the nearest health facility. As a result, all the 23 girls that she made contact with are attended to by a notorious local TBA. The CHW liaised with the local hospital and the MOH office, and subsequently, an integrated outreach program was launched for the area, which will continue on a monthly basis. It is hoped that with more initiatives such as this, a lot more married adolescent girls will be spared the fate of Atieno-yo. Through this initiative, married girls have been reached effectively, CHWs have been empowered, and valuable lessons have been learned which can be applied as the government's Community Health Strategy is rolled out in the region.

## Recent APHIA II OR publications

### Research reports:

- Ndwigwa, Charity et al. 2011. *Integrating tuberculosis case finding and treatment into postnatal care*. APHIA II OR Project in Kenya/Population Council: Nairobi, Kenya.
- Obare, Francis et al. 2011. *Levels, trends and determinants of contraceptive use among adolescent girls in Kenya*. APHIA II OR Project in Kenya/Population Council: Nairobi, Kenya.
- Liambila, Wilson et al. 2011. *Linking HIV-positive family planning clients to treatment and care services in Kenya*. APHIA II OR Project in Kenya/Population Council: Nairobi, Kenya.
- Birungi, Harriet, et al. 2011. *Sexual and reproductive health needs of adolescents living with HIV in Kenya*. APHIA II OR Project in Kenya/Population Council: Nairobi, Kenya.
- Evelia, Humphres, et al. 2011. *Ten years of the Kenya Adolescent Reproductive Health Project: What has happened?* APHIA II OR Project in Kenya/Population Council: Nairobi, Kenya.

### OR Summaries:

- Training service providers increases TB screening in postnatal care. *APHIA II OR Summary No. 1*
- Referral mechanism improves uptake of ART services for HIV+ FP clients. *APHIA II OR Summary No. 2*
- Life-skills education leads to improved effect on adolescent's sexual behavior. *APHIA II OR Summary No. 3*
- Integrating alcohol risk reduction into HTC services. *APHIA II OR Summary No. 4*
- Using community health workers can lead to positive sexual behavior outcomes among people living with HIV. *APHIA II OR Summary No. 5*