Meeting the Family Planning Needs of Married Urban Adolescents in Bangladesh

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Background

• Globally, about 4 in 10 pregnancies are unintended and roughly half of these result in induced abortion;

• In Bangladesh, 1 in 5 births to girls aged 15-19 years were unintended, with majority of these being mistimed rather than being unwanted (BDHS* 2014);

• Adolescent pregnancy is correlated with pregnancy-related complications, preterm delivery, delivery of low birth weight babies, and spousal violence;

• Married Adolescent Girls (MAGs) aged 15-19 from slum areas are almost twice as likely to be mothers as girls from non-slum areas (UHS** 2006).

*BDHS: Bangladesh Demographic Health Survey
**UHS: Urban Health Survey
Baseline Survey on Prevalence of Unintended Pregnancy (UP)

- Cross sectional study

- Study area: 5 slums of Dhaka (Kamrangirchar, Rayerbazar, Shyampur, Shekhertek, Mirpur)

- Mixed method approach
  - Quantitative survey with married adolescent girls (n=1008)
  - In-depth Interviews (IDI) with women who had at least one unintended pregnancy (n=15)
  - IDIs with husband of those women who had at least one unintended pregnancy (n=14)

- Data collection period: From 01 May to 30 September 2013
Study Objectives

- The quantitative survey helped to determine the prevalence of UP and the proportion of married adolescent girls in urban slums with unmet need for FP.

- The in-depth interviews were especially helpful in identifying the associated factors related to UP and the barriers to access and effective use of FP and MR services.

- Overall, the results of this study provided evidence for the design of an intervention to address UP and unmet need for FP and MR services among married urban adolescent.

- The research was part of STEP UP (Strengthening Evidence to Prevent Unintended Pregnancy) RPC, a DFID-funded Research Program Consortium, for which Population Council is the lead and icddr,b is a partner.
Key Findings

• There was high levels of UP among MAGs in urban slums (53%);

• The reasons of UP was largely due to non-use/improper use of family planning arising from user-related factors;

• Unintended pregnancies were more likely to result in spontaneous or induced abortions (12%);

• There was also high levels of unmet need for family planning among MAGs in the urban slums (15%);

• Misconception and incorrect knowledge about proper use of FP methods and MR services was observed among MAGs and their husbands.
New Intervention Designed:

Expanding Access to Integrated Family Planning Intervention Packages for Married Adolescent Girls in Urban Slums of Dhaka, Bangladesh
Methodology of Current Study

Study design: Experimental design with pre- and post-test measurements in intervention and control slums

Study Sites: Four urban slums of Dhaka (from the baseline survey)
- 2 intervention sites: Kamrangirchar & Mirpur
- 2 control sites: Rayerbazar & Shekhertek

Study Period: From July 2014 to August 2016

Overall Goal: To reduce the prevalence of unintended pregnancy and unmet need for family planning among married adolescent girls living in urban slums
Intervention 1: married adolescent girls’ clubs (MAGs’ clubs)

- In collaboration with ‘brac’, experienced in running adolescent clubs in urban slums, we have formed 10 MAG clubs in 10 separate venues, each club comprises of 4 batches, on an average 20 MAGs are enrolled per batch (10x4x20=800 MAGs);

- Experiences of UPs and its socio-economic and health consequences, knowledge on FP and its proper use, available FP methods, sources of methods and barriers to method use are being discussed in the club sessions;

- Clubs are creating an opportunity for MAGs to build relationships with peers who can provide information on FP in particular and RH in general as MAGs’ have lack of access to appropriate RH information;

- Pocket book key rings with BCC messages have also been distributed among the MAGs attending the club sessions;
Intervention 2: working with Marriage Registrars

- Marriage Registrars have been included in our intervention to work as an advocate for positive reform on linking between reproductive health (RH) and well-being of families;

- They have been trained on: UP and its socioeconomic and health consequences; relevant FP information and its sources, male involvement in FP; early marriage and its impact etc;

- They are now delivering FP information to the newly wed couples after marriage registration and giving them a pocket book (more like a key ring) containing FP information as behaviour changed communication (BCC) materials;

- They maintain a register book to keep MAGs’ contact information for further follow-up by icddr,b;

- They are also visiting MAGs’ clubs to provide them information regarding UP and FP.
Intervention 3: working with female health workers (FHWs) called as *Shasthya Shebika*

- We involved brac FHWs, are selected from their community and trained in health education, nutrition and FP, and further involved in early identification of pregnancy and provision of care to new born.

- Visit 200 households within their catchment areas and earn by selling health commodities (pill, condom, ORS, safe delivery kit, sanitary napkins etc.) to their community members;

- Strengthening their capacity by providing inclusive training through the project and they now do:
  - provide comprehensive information on proper use of FP methods and clarify any misconceptions on FP method use and fear of side effects;
  - identify and accompany MAGs who want long acting FP methods (IUD and implants) to the nearest health facility.
Process Documentation and End line Survey

• **Process documentation** to supervise and monitoring of the intervention:
  - interviewed MAGs, Marriage Registrars, FWAs, MAG club leaders/facilitators, field research team members.

• **Quantitative evaluation:** survey with MAGs using a structured questionnaire in both intervention and control sites.

• **Qualitative evaluation:** Key informant interviews (KII) with Marriage Registrars, focused group discussions (FGDs) with MAGs participated in club sessions, FGDs with brac FWAs, In-depth interviews (IDIs) with MAGs and their husbands in the two intervention slums.
Expected outcomes during evaluation

• Significant reduction between baseline and end line in the proportions of MAGs reporting experiencing UP (53% to 43%) and unmet need for FP (15% to 10%) in intervention than in control slums;

• Significant proportions of newly married adolescent girls will report receiving information on FP from Marriage Registrars in the intervention than in control slums

• Significant proportions of MAGs will report receiving information on FP from the MAGs clubs and from their peers in the intervention than in control areas

• Significant proportions of MAGs report receiving information on FP from FHWs, consistently using short acting methods, and taking comparatively more long acting methods in the intervention than in control areas.
Study update

• 16 Marriage registrars are actively involved in this intervention; since initiation, 3 more workshops have been arranged periodically with them to improve intervention quality.

• 94 brac – FHWs are working actively in intervention area and our research team members attend their monthly refresher training on a regular basis to maintain a close alliance.

• Total 8 club sessions (6 MAG club sessions and 2 assessment exams) have been conducted so far with an average of 20.1 MAGs/batch.

• To encourage them, MAGs are being rewarded based on their assessment exam. performance.

• As part of process documentation, 24 case studies of MAGs have been completed till date.
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