

### ADOLESCENT SEXUAL HEALTH IN KISII COUNTY: KNOWLEDGE, ATTITUDES AND PRACTICES

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#### **BACKGROUND AND RATIONALE**

- Adolescent health remains underserved in many areas of the world. Approximately 198 million young adults aged 15-24 years live in Sub-Saharan Africa and adolescents (10-19 years) comprise of 24% of the Kenyan population.
- They are particularly vulnerable to sexual health issues including early and unintended pregnancy, unsafe abortion, female genital mutilation, child marriages, sexual violence, and sexual transmitted infections including HIV (9%).
- Given the significant impact that sexual health plays in health, we sought to understand adolescent sexual health and behaviors in Kisii.

# **METHODOLOGY**

**Study design**: Community based mixed methods research.

**Study population** Primary and secondary school students, teachers, community health volunteers and caregivers in the community.

*Study location*: Nduru sub county in Kisii county.

Study period: May 2016 to July 2016.

**Methodology**: We collected data using hospital registers at Kisii Teaching and Referral hospital, Interviewed 20 households, conducted questionnaires and focus groups with 218 and 210 primary (class 7 and 8) and secondary (form 1 to 4) students respectively. We conducted key informant interviews with 11 school administrators and focus groups with 47 teachers and 21 community health volunteers.

**Data analysis**: Major themes identified from qualitative and quantitative data analysed using Microsoft excel.

### RESULTS

- In 2014-2015, adolescent mothers at Kisii Referral Hospital accounted for 12% of deliveries, 4% of antenatal clinic and 3% of family planning clinic patients.
- Caregivers felt schools (65%) and church (60%) are best places for children to be taught about reproductive health.
- Sexual debut was reported by 36% of girls and 23% of boys in a rural primary school and in 49% of girls and 67% of boys in a mixed secondary school.

Fig 1: Best sources of sexual health education as reported by caregivers

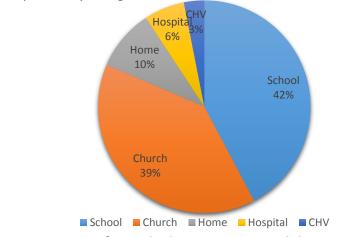


Fig 2: Sources of sexual education among adolescent mothers (n=8)

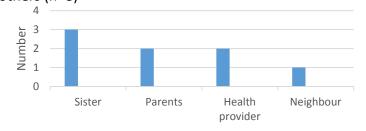


Table 1: Reported challenges and solutions for adolescent sexual education interventions.

| Group                       | Challenges                                    | Solution   |
|-----------------------------|---|--|
| Community health volunteers | Difficulty in communicating with adolescents. | Involve the parents in addressing SRH topics   |
| Parents                     | Discussing sex is a taboo.                    | Respected community<br>leaders should educate<br>community about<br>rationale of education |
| Teachers                    | Minimal time allocated to life skills         | Increase time devoted to life skills training  |

#### **RECOMMENDATIONS**

- 1. Improve access to youth friendly services
- 2. Start a school-based outreach counseling program to remove barriers to accessing sexual education.

#### **CONCLUSIONS**

Adolescents are underutilizing preventative reproductive health services relative to their burden of pregnancy and delivery. A concerted effort to improve life skills and reproductive health education at all levels of the community may provide greater impact on the lives of adolescents.

### **REFERENCES**

- 1.Murray CJL. Shifting to sustainable development goals- implications for global health. *New England Journal of Medicine*. 2015;373:1390-1393.
- 2. Kirby DB et al. Sex and HIV education programs: their impact on sexual behavior of young people throughout the world. *Journal of Adolescent Health*. 2007;40:206-207

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