

Assessing Barriers of Contraceptive Uptake Among Adolescent Girls in a Rural District in Malawi



Sitalire Kapira (1,2), Hannah Gilbert (2), Emilia Connolly (1), Joan Kaufman(2), Isaac Mphande (1), Chiyembekezo Kachimanga (1), Anatole Manzi (1,2) and Emily Wroe (2)

1-Partners in Health, 2-Harvard University



HARVARD
MEDICAL SCHOOL

BLAVATNIK INSTITUTE
GLOBAL HEALTH &
SOCIAL MEDICINE



Date: 10 March 2024

Background

The total fertility rate is **5.3 births** per woman in **Neno** and **4.4 births** per woman in **Malawi** as a country (DHS, 2016)

Malawi has among the highest rates of adolescent pregnancy worldwide with **29%** of adolescent girls having had at least one live birth before **18 years** old (Chirwa, 2019)

Malawi has the highest rate of adolescent pregnancy in Southern Africa at **29%** with Kenya at **18%** (Wado, 2019)



HARVARD
MEDICAL SCHOOL

BLAVATNIK INSTITUTE
GLOBAL HEALTH &
SOCIAL MEDICINE



Partners
In Health  **Abwenzi**
Pa Za Umoyo

Aim

Goal: To identify barriers to contraceptive uptake by adolescent girls in Neno, Malawi.

Location: Neno District, Malawi

Timespan: June 2020 to Nov 2020



HARVARD
MEDICAL SCHOOL

BLAVATNIK INSTITUTE
GLOBAL HEALTH &
SOCIAL MEDICINE



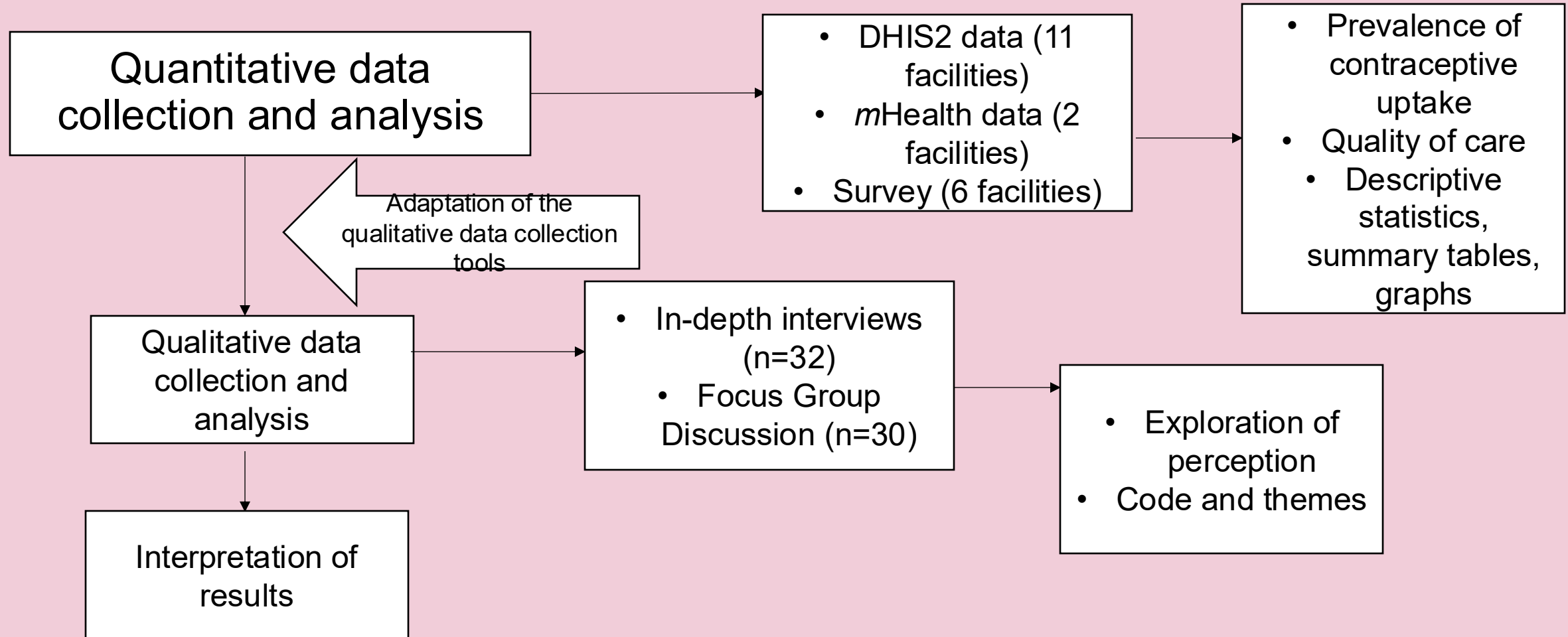
GAIN
Global Action in Nursing

Partners
In Health

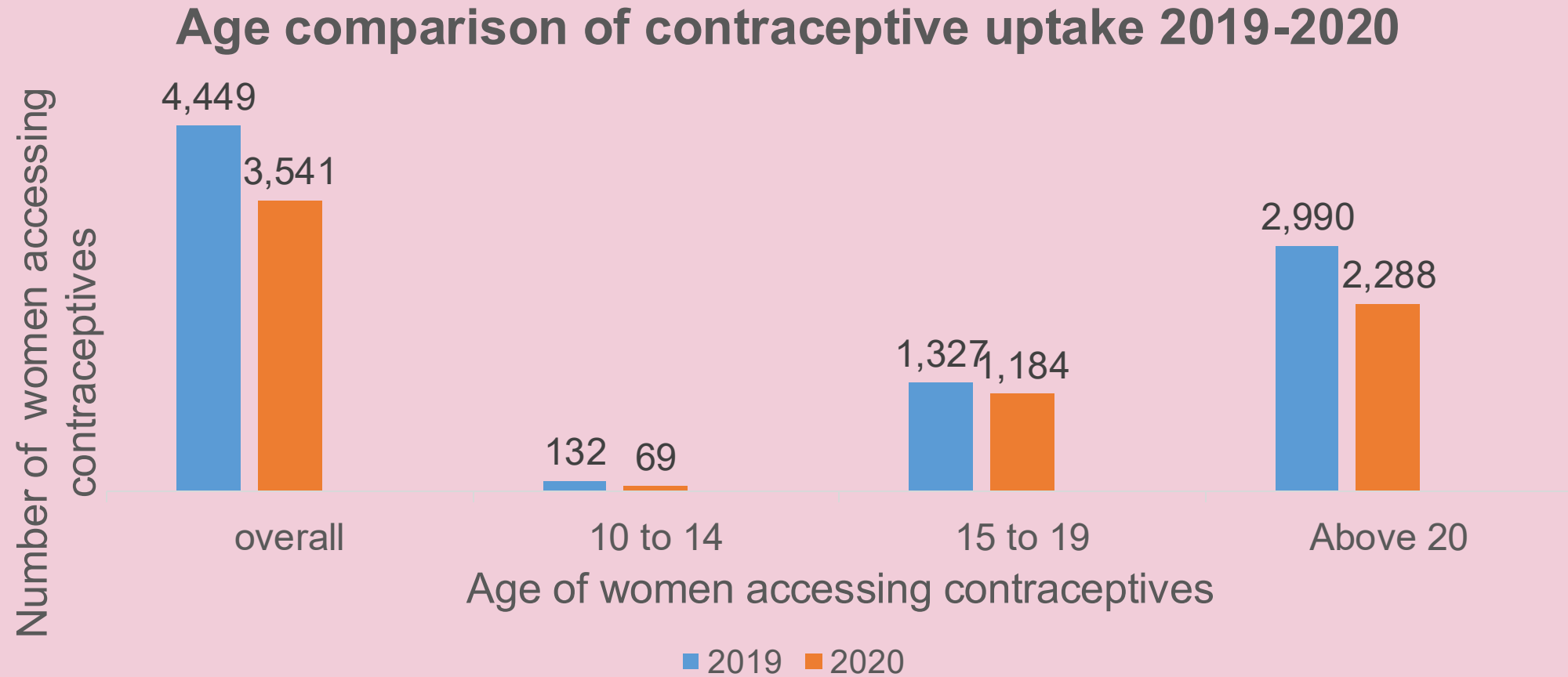


Abwenzi
Pa Za Umoyo

Explanatory sequential mixed methods study Design



Quantitative results



HARVARD
MEDICAL SCHOOL

BLAVATNIK INSTITUTE
GLOBAL HEALTH &
SOCIAL MEDICINE



GAIN
Global Action in Nursing

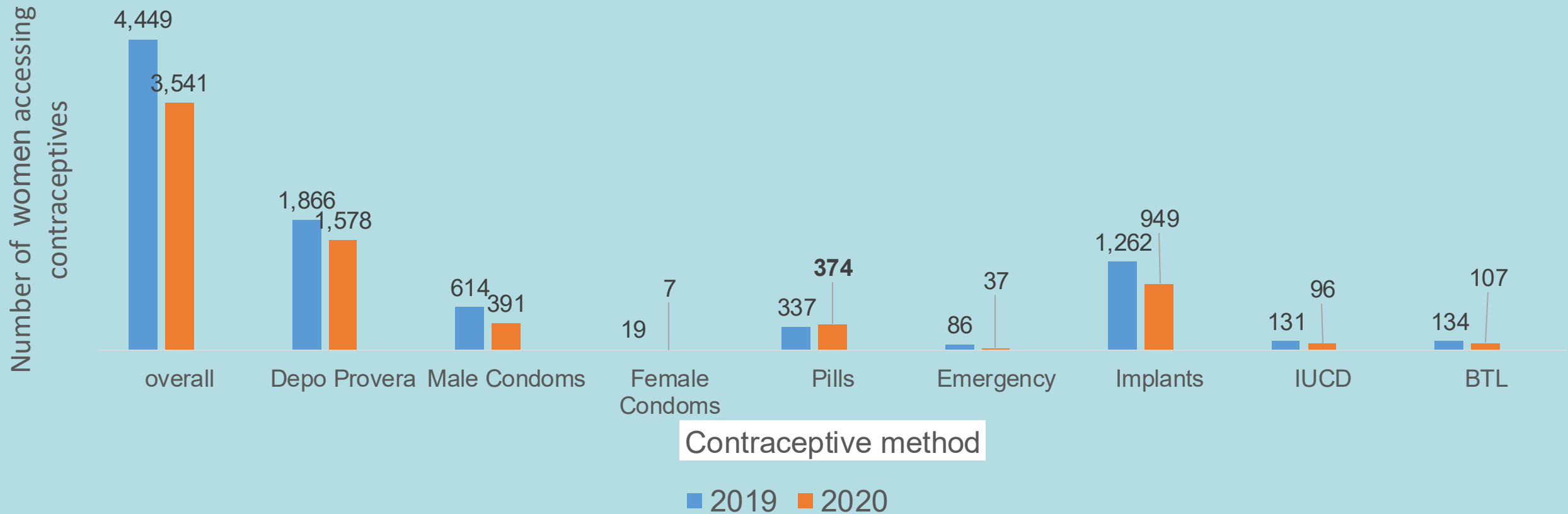
Partners
In Health



Abwenzi
Pa Za Umoyo

Quantitative results

Contraceptive methods accessed in 2019 & 2020



HARVARD
MEDICAL SCHOOL

BLAVATNIK INSTITUTE
GLOBAL HEALTH &
SOCIAL MEDICINE



GAIN
Global Action in Nursing

Partners
In Health



Abwenzi
Pa Za Umoyo

Qualitative results

Four thematic categories

1. Sources of information and support for adolescent sexual health:

- Traditional forms of community-based teachings have dissolved.
- Media Consumption

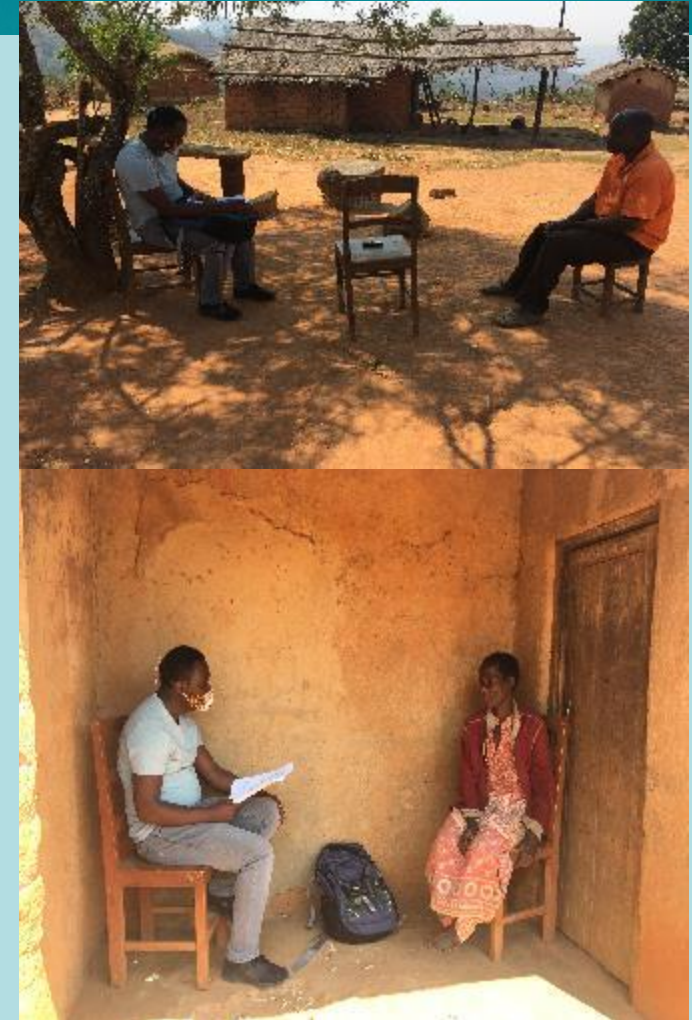
2. Paths of possibilities available to girls in the community

- Need for professional (real) role models
- Poverty as a driver for early marriage
- The perceived link between early contraceptive use and barrenness

3. Provision of services that meet adolescent needs

- Lack of private space
- Attitude of healthcare workers toward adolescents
- Lack of adolescent-friendly services

4. Impact of COVID-19



HARVARD
MEDICAL SCHOOL

BLAVATNIK INSTITUTE
GLOBAL HEALTH &
SOCIAL MEDICINE



Partners
In Health  **Abwenzi**
Pa Za Umoyo

Quotes

- *“They watch everything concerning pornography which has made their minds corrupt.....with time, due to exposure to these things, boys will take advantage of a girl child by watching these things to develop feelings which in the end make them experiment on sex.”* -Female parent, Neno
- *“Grown-up men have the lifestyle of having sex with teenage girls, and they take advantage of them because of poverty and in the end being used by such men.”*- Local leader, Neno



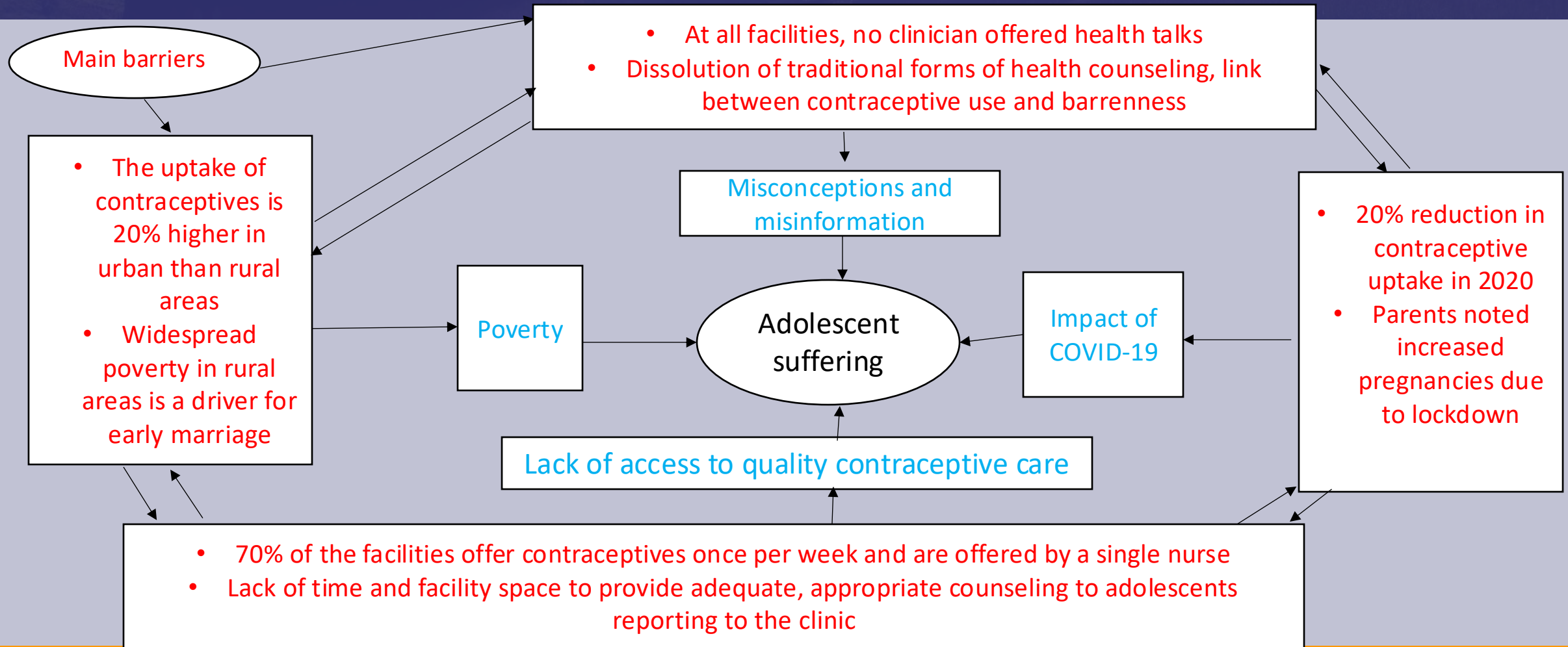
HARVARD
MEDICAL SCHOOL

BLAVATNIK INSTITUTE
GLOBAL HEALTH &
SOCIAL MEDICINE



Partners
In Health  **Abwenzi**
Pa Za Umoyo

Mixed methods results



Discussion

1. Need for health systems strengthening to offer acceptable FP screening, counseling, and methods to youth

- Incorporation of long-term methods had a high acceptance rate of contraceptives among adolescents in the US (Kavanaugh, 2013)

2. Poverty

- Poverty is a pervasive driver that underpins many of these factors and directly results in short-lived, early marriages between young girls and older men
- ✓ In Bangladesh, even married adolescent girls could not make their own decisions regarding contraceptive services, these could include father-in-laws who were supporting them financially (Shahabuddin, 2016)



HARVARD
MEDICAL SCHOOL

BLAVATNIK INSTITUTE
GLOBAL HEALTH &
SOCIAL MEDICINE



GAIN
Global Access to Improved Nutrition

Partners
In Health  **Abwenzi**
Pa Za Umoyo

Conclusions and Recommendations

- Barriers to adolescent contraceptive uptake are multi-sectoral and inadequately addressed by existing programs in Malawi.
- Increase efforts to provide effective and culturally acceptable interventions to increase adolescent contraceptive uptake.
- Malawi's government needs to put much effort into moving from having an excellent policy on youth-friendly health services theoretically to having it in actual practice.



HARVARD
MEDICAL SCHOOL

BLAVATNIK INSTITUTE
GLOBAL HEALTH &
SOCIAL MEDICINE



Acknowledgements

This work was conducted with support from the Master of Medical Sciences in Global Health Delivery program of Harvard Medical School Department of Global Health and Social Medicine and financial contributions from Harvard University and the Ronda Stryker and William Johnston MMSc Fellowship in Global Health Delivery. The content is solely the responsibility of the authors and does not necessarily represent the official views of Harvard University and its affiliated academic health care centers.

Special thank you to the former Departmental Chair, the late Dr. Paul Farmer, Program Director Dr. Joia Mukherjee, my primary mentor Dr. Emily Wroe and the research committee: Dr. Anatole Manzi, Dr. Emilia Connolly, Dr. Hannah Gilbert, Dr. Joan Kaufman and all faculty members at Department of Global Health and Social Medicine.

My gratitude goes to Basimenye Nhlema and the entire leadership (both past and present) of Abwenzi Pa Za Umoyo/Partners in Health (APZU/PIH), Kim and Global Action in Nursing (GAIN), and the Malawi Ministry of Health, particularly for allowing the research to take place and supporting the field implementation.



HARVARD
MEDICAL SCHOOL

BLAVATNIK INSTITUTE
GLOBAL HEALTH &
SOCIAL MEDICINE



GAIN
Global Action in Nursing

Partners
In Health  **Abwenzi**
Pa Za Umoyo



The End!



HARVARD
MEDICAL SCHOOL

BLAVATNIK INSTITUTE
GLOBAL HEALTH &
SOCIAL MEDICINE



GAIN
Global Action in Nursing

Partners
In Health



Abwenzi
Pa Za Umoyo