A mixed-methods comparison of contraceptive desires and use between pregnant and non-pregnant young women living with HIV in Moshi, Tanzania



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BACKGROUND

- Adolescent pregnancy rates are relatively high in sub-Saharan Africa, where about 20% of female adolescents became pregnant in 2020¹
- Adolescent girls engage less with PMTCT guidelines (regimen/protocols) than older women²
- About 40% of AGYW (adolescent girls and young women, aged 15-24) in Tanzania experience an unmet family planning need³⁻⁶
- From Sauti ya Vijana (SYV) pilot data collected 2016 to 2020, 8 of 51 (16%) AGYWLWH who participated became pregnant during the study intervention, and 4 of those who became pregnant (50%) were lost to follow up after pregnancy⁷

OBJECTIVES

SYV Intervention Logo

To support AGYWLWH in achieving their desired health and life outcomes and to reduce HIV transmission associated with adolescent pregnancy, the objectives are:

- 1. To understand contraceptive desires of YWLWH and barriers and facilitators to desired family planning experiences
- 2. To identify potential support or changes desired by YWLWH to foster healthy family planning experiences

METHODOLOGY

Recruitment

Those who experienced pregnancy and those who have not from and received HIV care from Kilimanjaro Christian Medical Centre (KCMC) or Mawenzi Regional Hospital

Data collection

- 20 in-depth interviews: 13 pregnant/with children, 7 non-pregnant
- 3 focus group discussions with list ranking activity: 2 pregnant/with children groups, 1 non-pregnant group
- 3 arts-based discussions: same groups
- Participant medical records: determine viral load at delivery

PRELIMINARY RESULTS

- Average age participants: 23 years (19-25 years, n = 17)
- Average age of first pregnancy: 21 years (18-25, n = 5)
- Family planning is often defined or conceptualized as services to pursue after the first childbirth

Table 1. Method use of participants who have had pregnancies or children (n = 5)

| | Yes (n = 5) |
|--------------------------|-------------|
| Method Use Ever | 4 (80%) |
| Use Before First Birth | 1 (20%) |
| Use After First Birth (n | 2 (40%) |
| Non-Hormonal Method | 3 (60%) |
| Hormonal Method | 1 (20%) |
| Planned Pregnancy | 2 (40%) |

NEXT STEPS

- Complete data collection and analysis
- Receive participant feedback on initial analysis of qualitative transcripts
- Share results with youth community advisory board (CAB) and adult CAB in Moshi
- Funding dependent: support an outreach activity to share study information



Youth CAB logo, designed and drawn by KCMC's youth CAB members in Moshi
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