ACKNOWLEDGEMENT: I would like to thank Dr. Dorothy Dow, Dr. Sia Msuya, Dr. Joy Noel Baumgartner, Dr. Blandina Mmbaga, Happiness Ngowi, Emanuelli Msuya, Leonia Laurean, Pendo Shayo, Jen Headly, Kalei Hosaka, Brian Perry, and the KCMC-Duke Collaboration

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

MAEVE SALM, MSGH Candidate

BACKGROUND

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

OBJECTIVES

To support AGYW 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 YWLYH and barriers and facilitators to desired family planning experiences
2. To identify potential support or changes desired by YWLYH 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 of use of participants who have had pregnancies or children (n = 5)

<table>
<thead>
<tr>
<th>Method Use</th>
<th>Yes (n = 5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Method Use Ever</td>
<td>4 (80%)</td>
</tr>
<tr>
<td>Use Before First Birth</td>
<td>1 (20%)</td>
</tr>
<tr>
<td>Use After First Birth (n)</td>
<td>2 (40%)</td>
</tr>
<tr>
<td>Non-Hormonal Method</td>
<td>3 (60%)</td>
</tr>
<tr>
<td>Hormonal Method</td>
<td>1 (20%)</td>
</tr>
<tr>
<td>Planned Pregnancy</td>
<td>2 (40%)</td>
</tr>
</tbody>
</table>

REFERENCES