

# **Assessment of Adolescents' Clinic Use and Reproductive Health Needs in Abidjan, Côte d'Ivoire**

## **Background**

Despite high pregnancy rates and levels of vulnerability to sexually transmitted infections (STIs), including HIV/AIDS, contraceptive use among youth in West Africa remains low. In the most recent demographic and health surveys in Burkina Faso, Cameroon, Mali, Togo, Côte d'Ivoire, and Senegal, only 1–6 percent of sexually active women 15–24 years of age reported using a modern contraceptive method. The FOCUS on Young Adults program, in collaboration with the West and Central Africa (WCA/SFPS) Family Health Project, undertook a study to identify existing barriers limiting adolescents' use of services in Abidjan, Côte d'Ivoire, and to determine ways to improve existing services to better meet adolescent reproductive health needs.

## **Data and Methods**

Both quantitative and qualitative data were collected. The quantitative phase included collecting demographic and service-related information on clients and services at 10 family planning centers in Côte d'Ivoire. These retrospective data were obtained from 3,943 service records of clients who had visited the clinics during 1998. Prospective data also were obtained from 2070 clients using a temporary data collection system to capture information not normally recorded at the clinic over a two-week period. The qualitative phase concentrated on collecting information from adolescents and service providers on their attitudes toward health care, on quality of care, on barriers to use of services, and on their perceptions of adolescent reproductive health needs. This information was obtained through focus groups with adolescents and in-depth interviews with service providers. The qualitative research was conducted in four family planning facilities in Abidjan and surrounding neighborhoods. Eight in-depth interviews with service providers and 24 focus groups with young service “users” and “nonusers” were conducted in August 1999.

## **Findings**

- Most clients in both the retrospective and prospective surveys were adult woman (50% and 61%, respectively). Young adults (20–24 years) represented close to a third of the clients (32% and 29%, respectively), and adolescents (10–19 years) were the minority (16% and 8%, respectively). This finding is consistent with the fact that family planning centers generally are tailored to the needs of older, married women. On the other hand, the nontrivial proportion of clinic clients who were adolescents or young adults indicates that family planning among youth is no longer taboo. Unfortunately, most youth still do not go to family planning centers until they are pregnant and seeking prenatal services, or until after they have had a pregnancy and are seeking contraceptive methods.
- Nearly all clients (97%) were currently using a contraceptive, with the pill being the most widely used (75%), followed by injectables (51%). An even higher proportion of adolescent and young adult contraceptive users (88% and 81%, respectively) were pill users. The use of condoms received from the clinic (by both men and women) was very low.

- The four main reasons clients visited a family planning center included: (1) to begin a contraceptive method, (2) to renew a contraceptive method, (3) to receive family planning information and counseling, and (4) to attend educational talks.
- Two-thirds of clients (67%) visited a family planning center because it was close to their homes. More than half the clients declared that they came back to the clinic because they judged that the health center staff were friendly (51%) and that the products cost less (53%). Over one-third of clients (37%) felt that the services at frequented centers were satisfactory.
- Clients tended to use the center nearest their homes. On average, it took them 25 minutes to get there (an average distance of 7.1 kilometers). The primary means of transportation included walking (36%), taking taxicabs (27%), and taking bush taxis (26%).

### **Implications/Recommendations**

- Providers and focus group participants spoke of service delivery concerns that indicated a need for moderate changes to clinic infrastructure and reproductive health policy, for example: more facility personnel and equipment could be added to improve service delivery; extended hours of operation could be provided to meet young clients' needs, and separate waiting rooms could be established for youth. In addition, they recommended that service providers be trained to improve their interpersonal skills for working with young people in such areas as sexually transmitted diseases and contraception. In effect, they felt that making existing services more youth-friendly would probably respond to young people's sexual and reproductive health needs and encourage their use by current non-users.
- Young women (under age 20) and male nonusers of services appear to be most naive about family planning programs and would benefit most from mass media campaigns that highlight prevention messages, facility locations, and available services. In addition, parents should constitute secondary audiences for all campaigns, as their reluctance to share reproductive health information with their children was a recurring theme throughout the study. Finally, additional topics that address physical, social, and emotional development should be addressed during counseling sessions and discussion groups at facilities.
- Many providers and youth expressed a need for more family planning and reproductive health information at the grassroots level, indicating a need for more community outreach activities. Specifically, youth would benefit from home visits by providers and from reproductive health presentations in neighborhoods. In addition, more reproductive health outreach should be conducted in schools, and more teachers should be trained to respond to students' questions about contraceptive methods and available services.
- Youth should also have a stake in reproductive health programs, should be involved in decision-making processes at the clinic level, and should assist in service delivery.
- Community outreach activities could serve as an opportunity to inform local leaders and parents about the importance of family planning and the use of youth services to ensure program success and community support.

Source: Kouye, Pauline, Kim Longfield, Stephanie Mullen, Ilene Speizer, and Basile Tambashe. March 2000. *Les services de sante reproductive: une evaluation de l'utilisation clinique et des besoins parmi les jeunes en Côte d'Ivoire*. Washington, DC: FOCUS on Young Adults/Pathfinder International and Projet Sante Familiale et Prevention du SIDA (SFPS). The complete study is available only in French.

This study was supported by field support funds from the U.S. Agency for International Development (USAID)/West and Central Africa; the funds were provided to the FOCUS on Young Adults program/Pathfinder International under Cooperative Agreement No. CCP-A-00-96-90002-00.