MEETING THE SEXUAL AND REPRODUCTIVE HEALTH NEEDS OF ADOLESCENTS AND YOUTH











Integrated Family Health Program

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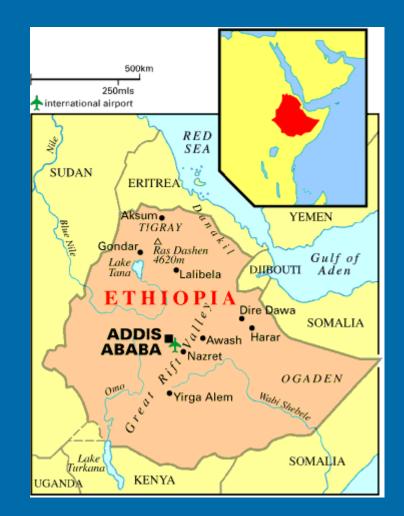
Dr. Mengistu Asnake, Pathfinder International

WHY ADOLESCENTS AND YOUTH?

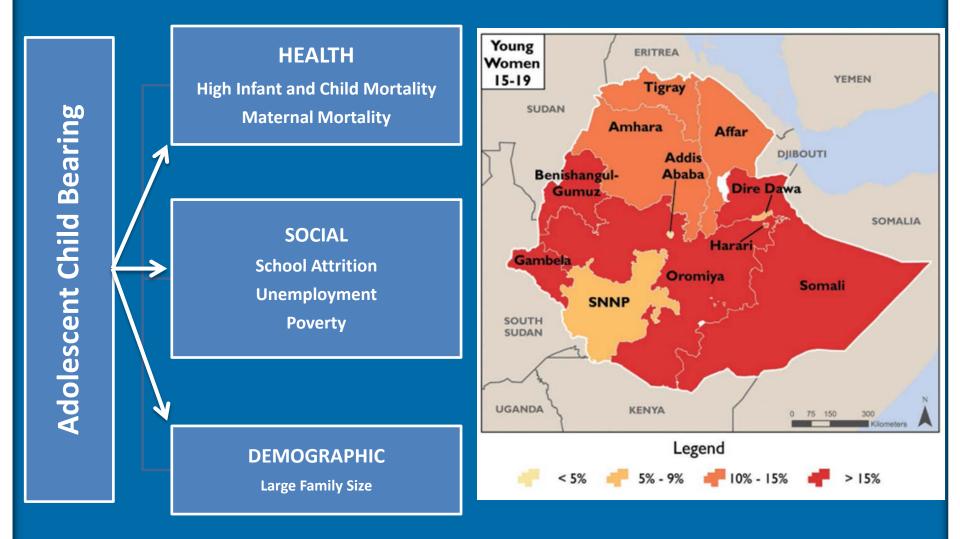
- Context—Ethiopia
- Why adolescents and youth?
- Program approaches
- Program achievements
- Challenges
- Lessons learned
- The way forward

BACKGROUND: ETHIOPIA

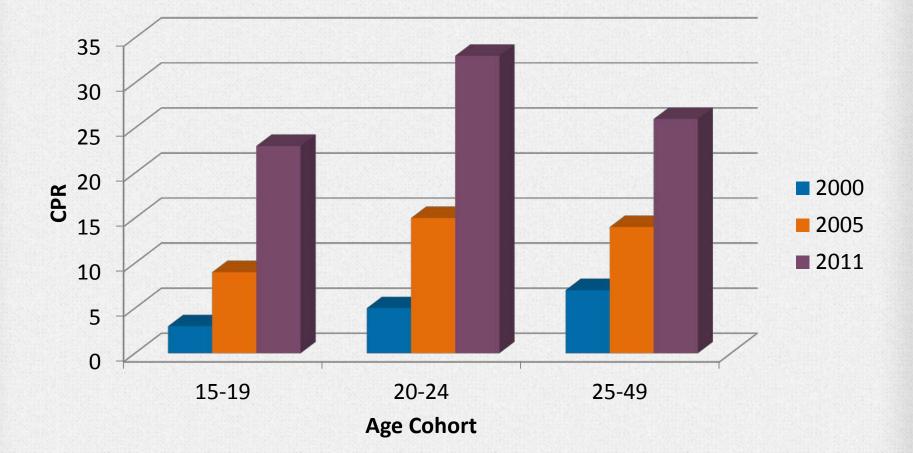
- Total population: 85 million
- Rural population: 83%
- Population under 15: 44%
- Population 10-24: 33%
- Unmet need: 25% (34% in 2005)
- Contraceptive Prevalence Rate: 28.7% (27.3% modern methods)



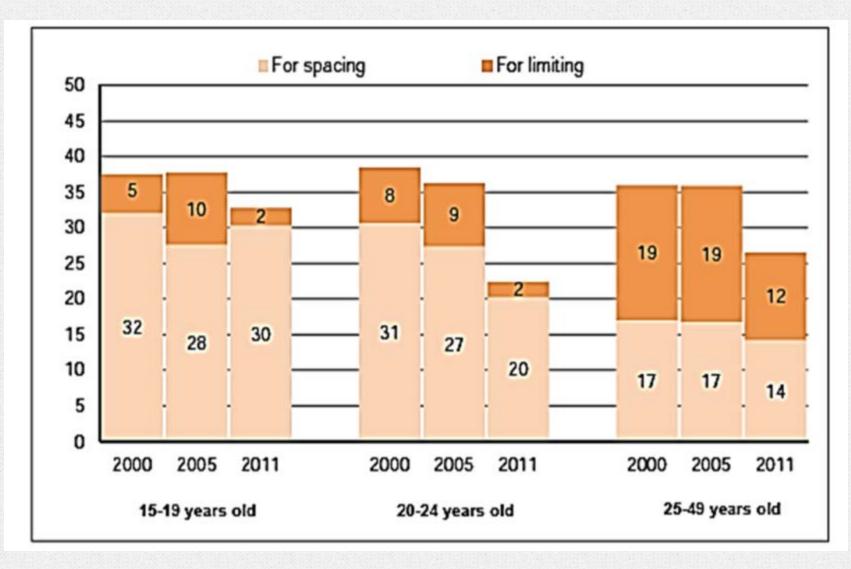
TEENAGE PREGNANCY AND MOTHERHOOD (DHS 2011)



MODERN CONTRACEPTIVE USE IN ETHIOPIA (DHS 2011)



UNMET NEED FOR FAMILY PLANNING IN ETHIOPIA (DHS 2000-2011)



The story of Almaz

A 44-101-01

PROGRAM APPROACH

- Integrated Family Health Program (IFHP): July 2008 December 2013
- **Goal**: To reduce maternal, neonatal, and child mortality through reduction in fertility and improvement in MNCH outcomes

• Key Support Areas

- HH and Community
- Health Facility Services Provision
- System Strengthening
- Program Learning

Geographic Coverage

- 6 regions
- 301 woredas/districts (35 million people)

IFHP AYSRH APPROACH

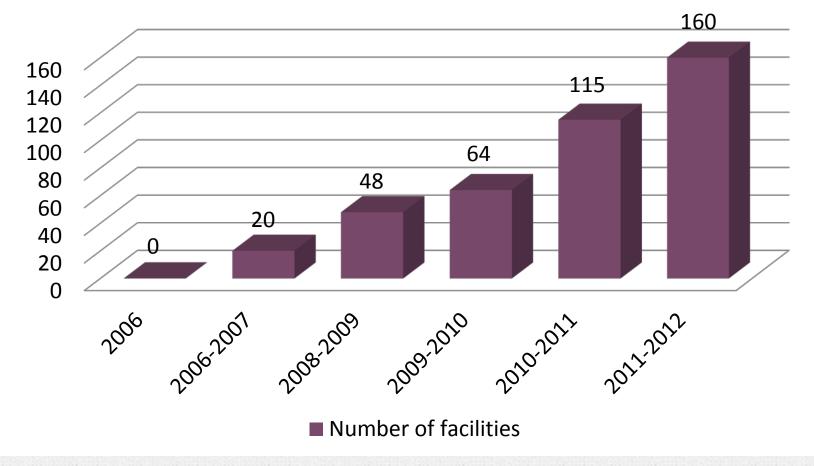
- Peer education
- Support to in- and out-of-school youth clubs
- Youth-friendly services at public sector facilities
- Working with higher learning institutions
- Support to the Health Extension Program



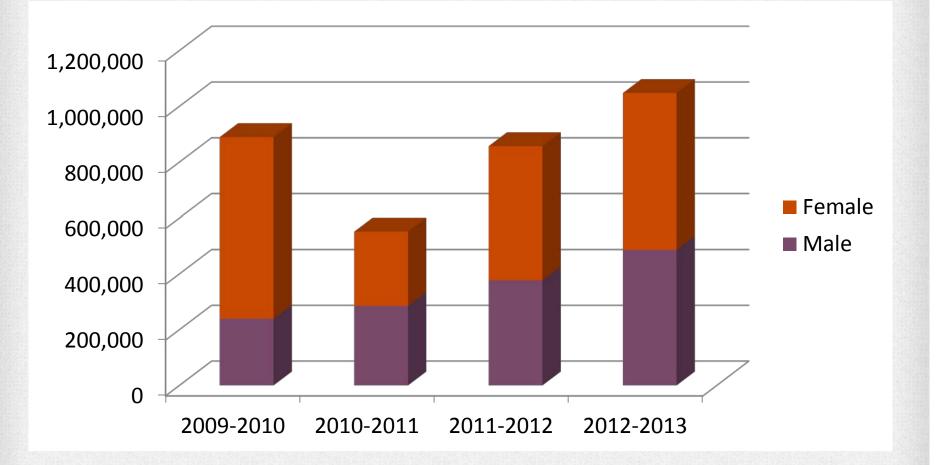
Scale up of youth-friendly services

SCALING-UP YOUTH-FRIENDLY SERVICES

Number of facilities

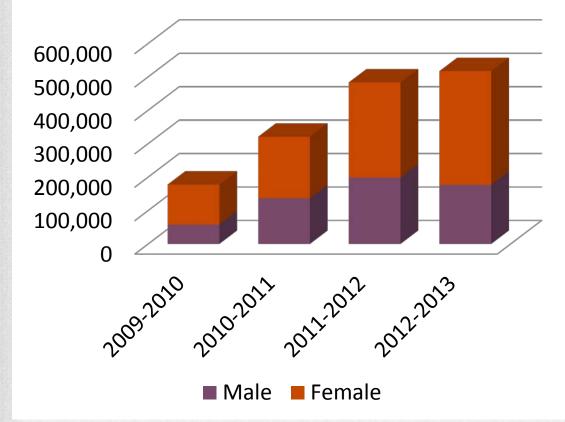


NUMBER OF ADOLESCENTS AND YOUTH WHO RECEIVED SRH INFORMATION AT YFS SITES



SRH SERVICES AT YFS SITES

VISITS BY ADOLESCENTS AND YOUTH FOR SRH SERVICES AT YFS SITES



SRH Services offered at YFS: Puberty and nutrition counseling •Contraceptive counseling and method provision Pregnancy testing •ANC, referral for delivery and PMTCT, PNC •HIV counseling and testing • Provision or referral for ARV •SGBV counseling, treatment, and referral •Syndromic management of STIs Postabortion care

Demographic characteristics of Implanon acceptors from Pathfinder study and acceptors of other methods compared to rural implant users (EDHS 2011)

Age in Years	Implanon Acceptors Pathfinder Study (%) (n=5.777)	Other Method Acceptors (%) (n=225)	Implant users DHS 2011 – rural only (%) (n=186)
15-19	4.9	10.2	5.4
20-24	20.1	29.3	7.5
25-29	31.7	28.0	25.8
30-34	23.7	13.3	18.3
35-39	14.3	13.3	20.4
40-44	4.2	5.3	16.7
45-49	1.1	0.4	5.9
Mean Age (SD)	28.3 (6.0)	26.8 (6.6)	32.7 (7.8)

Mengistu et. al. Addressing Unmet Need for Long Acting Family Planning in Ethiopia: Uptake of Implanon and Characteristics of Users. International Journal of Gynecology and Obstetrics – September 2013

Age distribution of clients who selected LAFP methods during a three-month period in 48 health centers (2013)

Age Category	IUCD (%) (n=424)	Implanon (%) (n=1003)	Jadelle (%) (n=188)	LAFP Total (%) (n=1613)
15-24	18.2	46.4	47.3	39.2
25-34	50.5	40.4	34.6	42.4
35-44	30.2	12.3	14.9	17.3
45+	1.1	0.8	2.1	1.1
Total	100	100	100	100

CHALLENGES

- Limited YFS service outlets at public facilities (scale up)
- Provider's attitudes
- Program ownership by the public sector/budget allocation
- The need for pre-service training
- Age and sex disaggregated HMIS



LESSONS LEARNED

- Huge demand for LAFP methods
- Involvement of decision-makers paves the way for sustainability
- Expansion of YFS through public sector resources
- Use of peer-peer education to reach the most vulnerable adolescent and youth groups





THE WAY FORWARD

- Strengthen and consolidate existing AYSRH services in 160 facilities
- Scale-up YFS at least in each woreda/district
- Document lessons learned and promising practices





A GLOBAL LEADER IN SEXUAL AND REPRODUCTIVE HEALTH

Thank You!

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