

ADOLESCENT TRUST AND MATERNITY CARE SEEKING IN PERI-URBAN KENYA: EMERGING ISSUES

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Adolescent maternal health

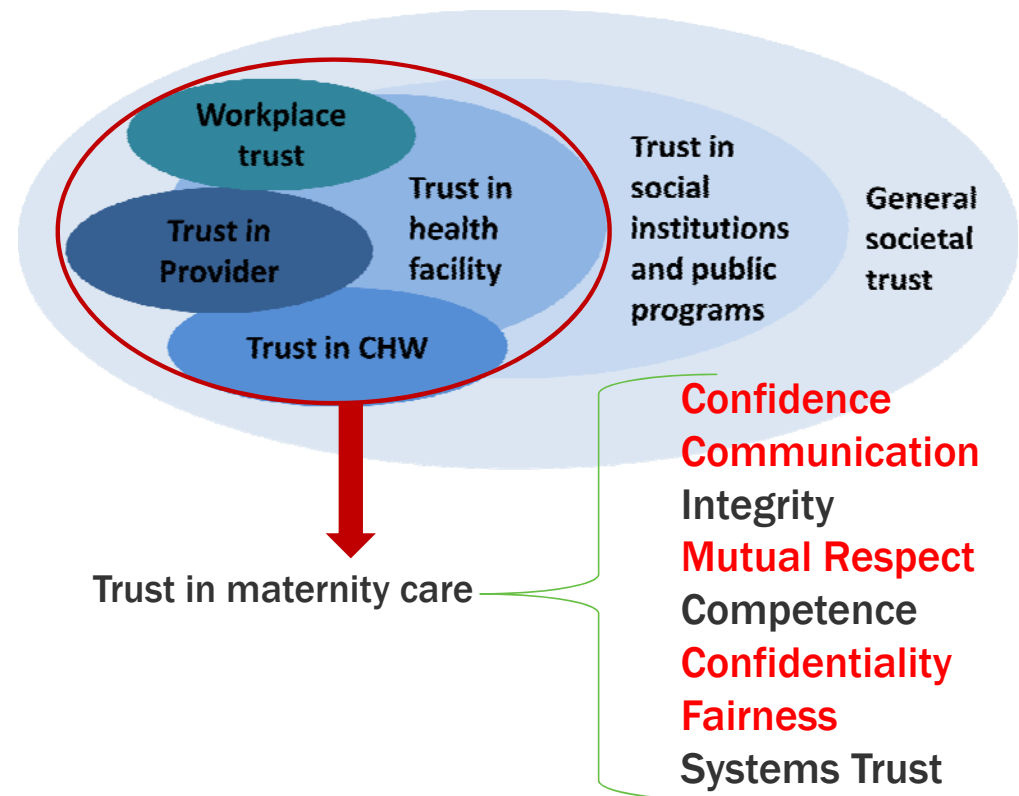
- Young people have unique experiences of pregnancy and childbirth
- Women under 20 years of age in Kenya (KDHS 2014)
 - 18.1% started childbearing
 - 94.9% at least 1 antenatal contact with skilled provider
 - 61.7% deliver in a health facility
 - 55.1% receive postnatal check-up
- 20% of women in Kenya report disrespect and abuse during childbirth in facilities (Abuya et al., 2015)

Abuya T, Warren CE, Miller N, Njuki R, Ndwiga C, Maranga A, et al. et al. (2015) Exploring the Prevalence of Disrespect and Abuse during Childbirth in Kenya. PLoS ONE10(4): e0123606. <https://doi.org/10.1371/journal.pone.0123606>

Trust in maternity care

- The belief that one's expectations will be met by an individual or system
- Offers insight into
 - perceptions of interactions
 - power differentials
 - inequities in health experience
- *Heshima* Project: promoting dignified care during childbirth

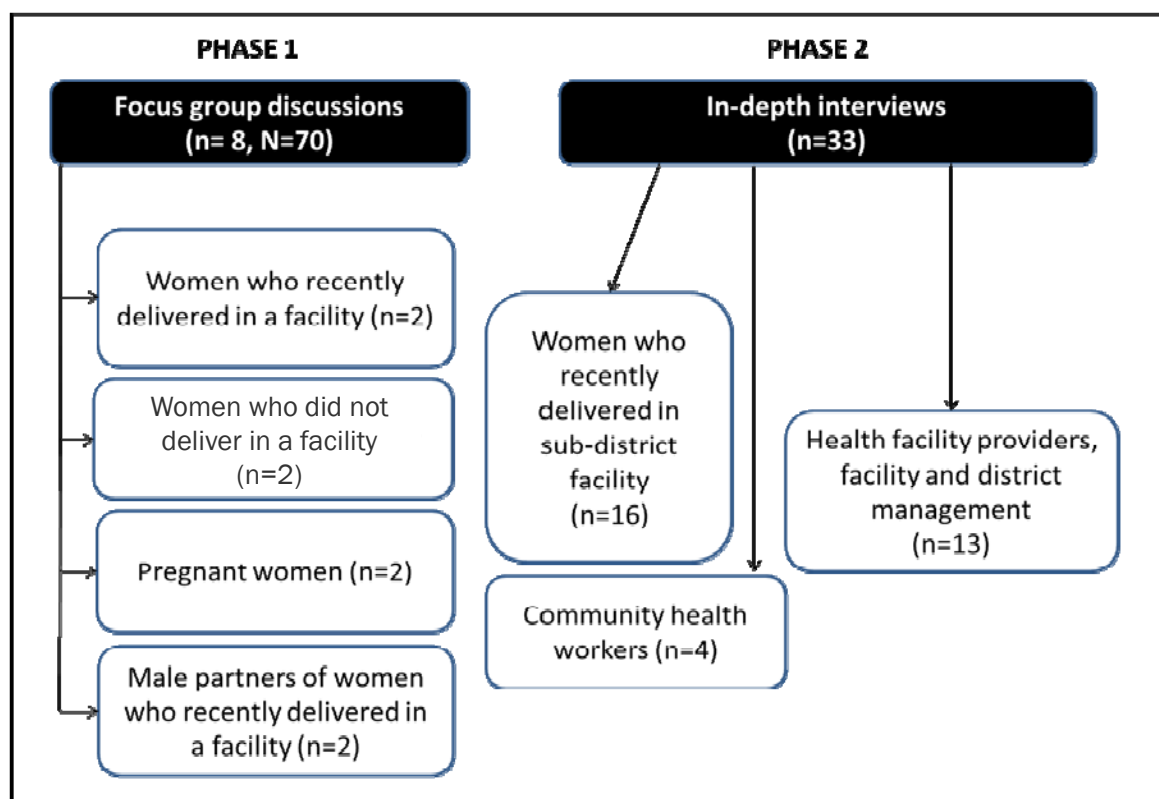
- Kenya: a “nested” understanding



Study setting: peri-urban county



Qualitative approach



- Adolescent sample
 - Women between 17-25 years (or men with wives in that age range) that had at least one child by the age of 20 years or were currently pregnant

Emerging issues around adolescent mothers

- Normalized care-seeking and trust in health providers and system
- Trusted social networks in birth preparedness
- Trust in older female or male providers
- Prefer to labor and deliver around women of similar ages
- Greater preference for birth companions
- Provider prejudice around adolescent pregnancy v. sensitivity to a young woman delivering
- Peri-urban health service delivery challenges
- Open communication integral to quality care

Normalized care-seeking and trust

- *I trust them [providers] **because of their work...** they would **do to not harm** me as a patient. They have **better service than I can even give myself.***
(IDI, woman, 18 years, 1 child)
- *I know **you will hear me out** and we will come up with an **agreement.** That means I trust you.... when there is **no faith, I will be afraid** of you.*
(FGD, women who gave birth in a facility)
- *The moment you go [to **ANC**] **they test you** for any disease so they are really helping us...you feel good as you leave. (FGD, first time pregnant women)*

Trusted networks and birth preparedness

- Parents, teachers, husband, (community) health providers.
- Group-based ANC and media

*It [ANC] has helped... if you talked to a friend, experiences may be different, but at the **hospital you are sure of what they tell you.***

(FGD, first time pregnant women)



Older providers and respectful maternity care

- ...an *aged person[45-50 years]* is caring, talks to you politely...*Male providers [also] show more mercy...* They [nice ones] advise you what to eat, how to rest. But others [younger provider] just fill in the booklet and give it back to you asking you to come back the next time. If you *ask her a question she says she's busy* as there is a long queue so you should hurry up.... she *doesn't care*. (FGD, First time pregnant women)

Birth companions

- We are asking to be *allowed into the delivery room ... [to] help her [wife]...* You may discover something to *inform your decisions another time...* Then they [*providers*] will be *afraid to slap* our wives. (FGD, young male partners)

Provider prejudice and sensitivity

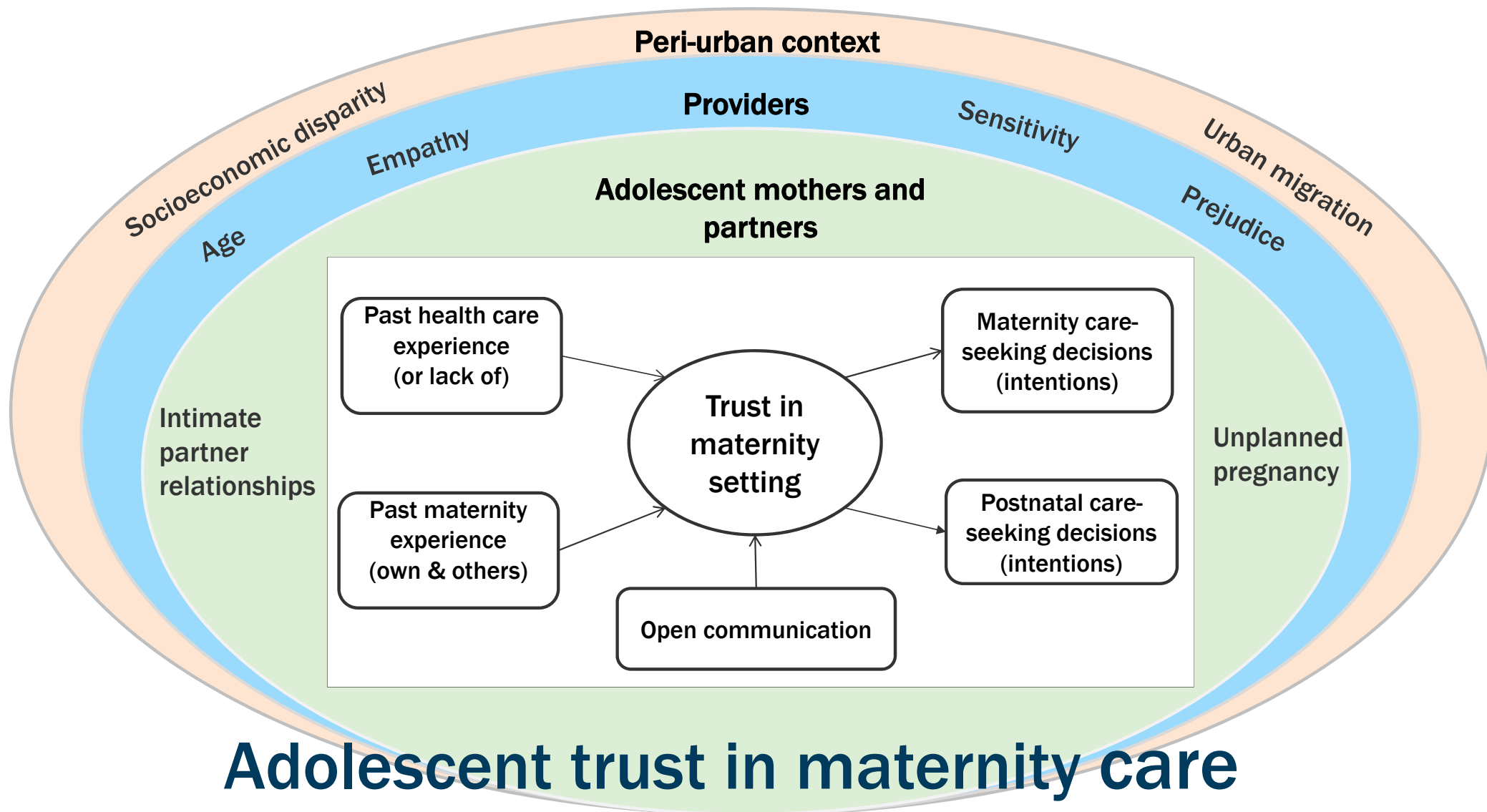
- *If it's a school girl or one who seems to be under 18, depending on the doctor... there are chances that the doctor **feels that she [girl] should not have been pregnant this young**. So even if she will serve them, she will do it as if serving someone who should not have been pregnant at this time.*
(FGD, older male partners)
- *Like for an 18 year old girl, the doctors will be **very close to her to help her** because, **she does not know how, what to do** when a baby comes.*
(IDI, woman, 22 years old, 1 child)
- *It is like they **treat** people **differently**.* (FGD, women, non-facility birth)

Peri-urban health service delivery challenges

- Most of the patients who deliver here are *young girls [17-20 years]* ... most of them are *unplanned* pregnancies. They are *not ready to disclose that they are pregnant*, so they can receive information from anybody.
(Nurse-midwife)
- Pregnancy in young girls is really common. *Especially those who live in the hostels who don't come home very frequently...*
(Medical Officer)
- They get their HIV through the men....as in it was *not their fault*. So they [adolescents] are in denial, like '*my man is not cheating on me.*' ... in this country, *HIV, TB and abortions* are the biggest things. (Medical officer)

Open communication integral to quality care

- With things like *sero-status and abortion* in young girls, they never say the truth. When they lie and we manage the other way, it goes all wrong.
(Medical officer)
- A patient visited *other different facilities with no improvement*...She me she was *not married*.... I asked about boyfriend...she told me the last time she had sex... So, [in] those other facilities ... maybe the *problem had to do with openness...to not disclose everything*.
(Clinical officer)
- ...the doctor is not talking to you nicely... Now *that will make it difficult to tell the doctor* your problem.
(IDI, woman, 2 children, 25 years)



Future research areas

- Adolescent trust and postnatal care seeking
- Respectful maternity care and urban adolescents
- Adolescent experience of complications in pregnancy
- Comparative experiences of young mothers in urban/rural settings
- Social network and health communications
- Continuum of care for adolescents
- Unmarried adolescent pregnancy and childbirth

Ideas. Evidence. Impact.



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