



# SEXUAL AND REPRODUCTIVE HEALTH (SRH) NEEDS ASSESSMENT OF ADOLESCENTS AND YOUNG PEOPLE LIVING WITH HIV (AYPLHIV) IN LAGOS STATE

Presenter

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# BACKGROUND

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Access to integrated SRH services is pivotal for ensuring whole person care among Adolescents and Young People Living with HIV (AYPLHIV).

However, utilization of SRH services among AYPLHIV remains sub-optimal. Given the over 240,000 AYPLHIV in Nigeria, many of whom reside in Lagos, there is a need to further understand barriers and facilitators to ensuring AYPLHIV have access to the SRH services they need.

The aim of this study was to assess the access to, and utilization of Sexual Reproductive Health among adolescents and young people living with HIV (APYLHIV) in Lagos State.

# SPECIFIC OBJECTIVES

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To assess the  
AYPLHIV's  
awareness  
about SRH in  
Lagos State.

To identify  
the perceived  
SRH needs  
among  
AYPLHIV in  
Lagos State

To determine  
the access to  
SRH services  
among  
AYPLHIV

To identify  
barriers to  
accessing  
SRH services  
among  
AYPLHIV in  
Lagos State

# STUDY POPULATION

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## **Inclusion criteria**

AYPLHIV who are members of a registered support group

Participants between the ages of 16 and 24 years

## **Exclusion criteria**

Persons who do not consent to participate in the survey

Persons below 16 years of age or above 24 years of age

Presence of cognitive disabilities, which would preclude them from consenting or participating in the survey

# METHODOLOGY

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A cross-sectional mixed methods study with

- Survey among 117 AYPLHIV from 2 secondary facilities and 3 tertiary facilities
- 5 Focus group discussions with 8-10 participants per group recruited through support-groups.
- 17 Key Informant Interviews (KIIs) with Support Group Coordinators and ART Facility Coordinators across Lagos State

# METHODOLOGY (Data Analysis)

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## Quantitative Data analysis

- Quantitative data was entered and analyzed on IBM SPSS Statistics version 25.
- Categorical variables are presented as proportions.
- For continuous variables, means, medians, ranges, and standard deviations were calculated.

## Qualitative Data analysis

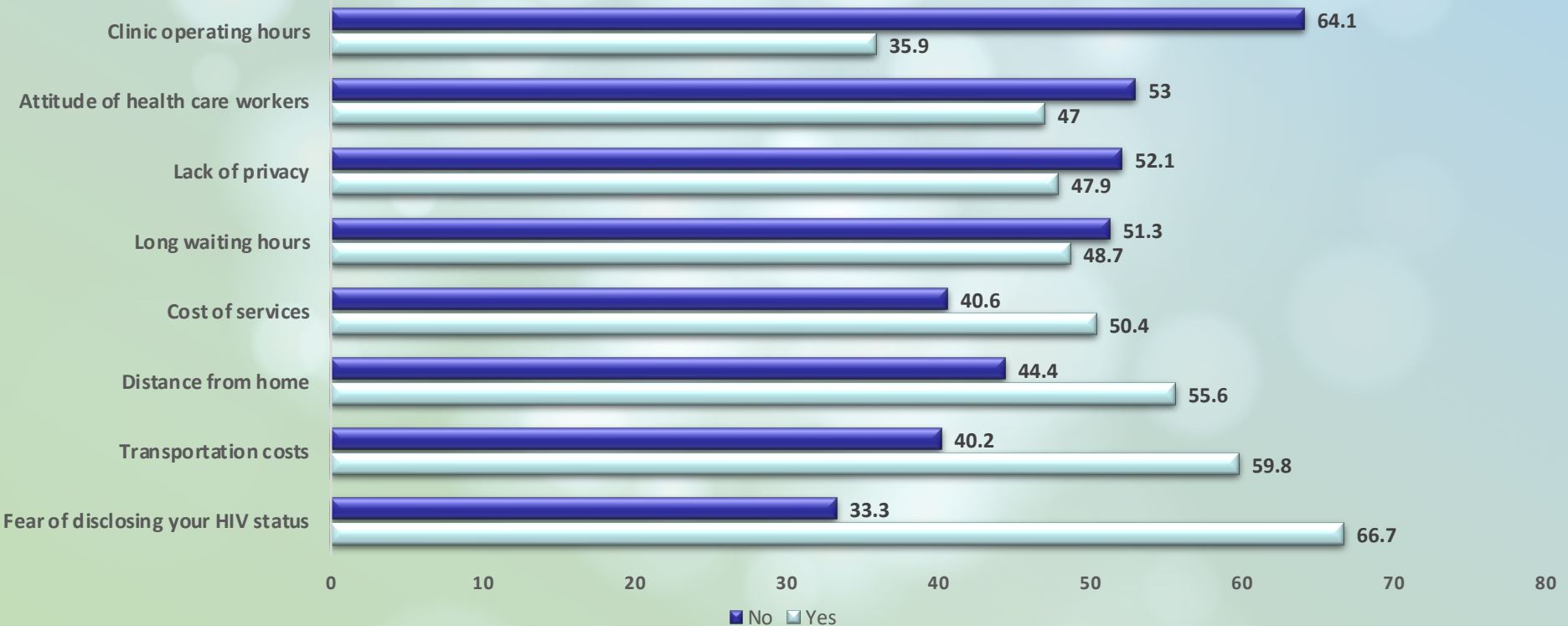
- All the recordings and the inserted notes of the discussions were transcribed verbatim within 48 hours by two trained research assistants.
- The transcripts were read several times by the principal investigator to identify emerging themes.
- A structured code book was developed, and thematic analysis conducted

# RESULTS

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## Barriers to seeking reproductive health services



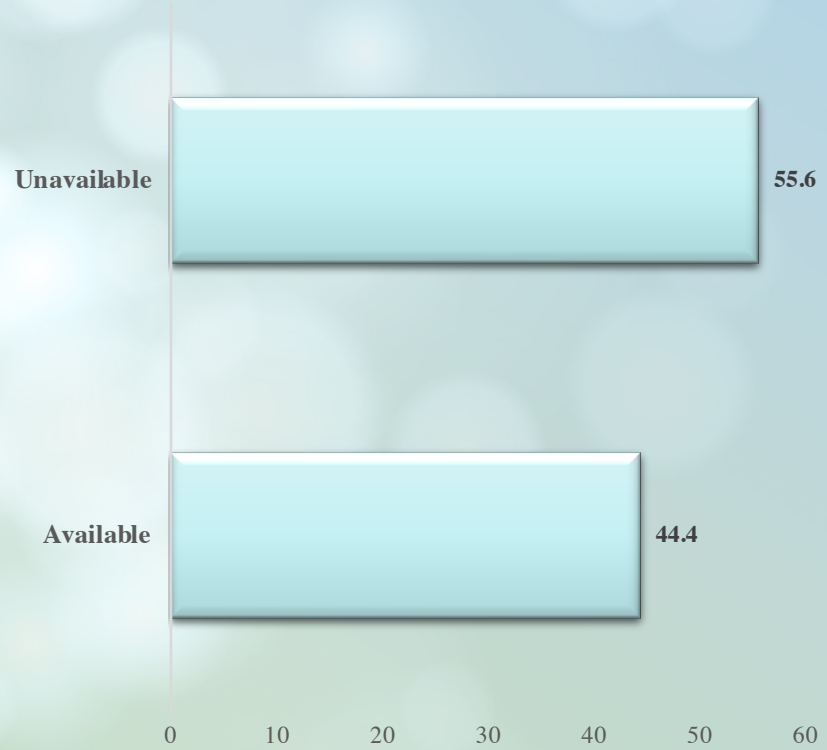
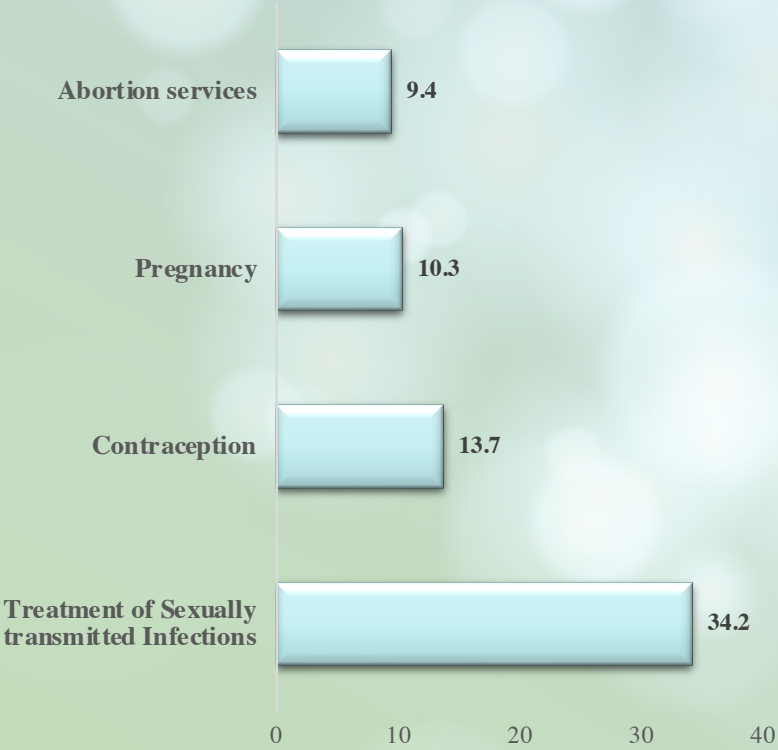
# RESULTS

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## SRH services accessed at a health facility

## Availability of reproductive or youth friendly service center to you





# RESULTS

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<b>Stigma and self-esteem</b>	
<b>Variable</b>	<b>Frequency (N = 117) n (%)</b>
<b>Does your positive HIV status give you concern</b>	
Yes	54 (46.2)
No	63 (53.8)
<b>Do the following factors give concern</b>	
Peers/friends finding out that they live with HIV	44 (37.6)
Disclosure	42 (35.9)
Friends mistreating you because of status	37 (31.6)
Being abandoned by boyfriend/girlfriend	34 (29.1)
Psychological issues	12 (10.3)

# RESULTS

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KEY POINTS FROM FOCUS GROUP DISCUSSIONS (FGD) CONDUCTED AMONG AYPLHIV

## **What kind of services do you want?**

*“We want a more convenient time for adolescent clinic like Saturdays rather than Tuesdays and Fridays”*

*“Adolescent clinic should be separate from adult clinic. The young ones are not free when mixed with adults.”*

## **What recommendations do you have for the various stakeholders (including government)**

*“Stakeholders should empower adolescents and youth financially. This would improve overall access to SRH. You don’t have to keep asking someone for transport fee to attend clinic and other adolescent and youth service or events. Especially youths, if empowered, you won’t feel pressured to disclose your status to someone assisting you in paying your bills.”*

# RESULTS

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## KEY POINTS FROM KEY INFORMANT INTERVIEWS (KII) AMONG SUPPORT GROUP COORDINATORS AND ART COORDINATORS

### **SRH needs of AYPLHIV**

*“I can say most of them need awareness on sexual and reproductive health.”*

*“Provision of contraceptives for those who are already sexually active, condoms.”*

### **SRH Services available for the AYPLHIV in their centres**

*“Contraceptives, health education.”*

*“Education on HIV prevention and knowledge, contraception, sexually transmitted infections, pregnancy and childbearing.”*

### **Utilization of SRH services by AYPLHIV**

*“Condom”*

*“We also give them information on SRH issues during their support group meetings”*

# RESULTS

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## KEY POINTS FROM KEY INFORMANT INTERVIEWS (KII) AMONG SUPPORT GROUP COORDINATORS AND ART COORDINATORS

### **Barriers limiting access to SRH services**

*“Stigmatization.”*

*“Fear of stigmatization, religious barrier, cultural barrier”*

### **Recommendations to improve access to services**

*“They should talk more about it, may be jingles from radio station, letting adolescents know that ok they can access these things.”*

*“I think training for the health workers will go a long way. then more awareness through jingles, fliers will help.”*

# CONCLUSION

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The findings from the study illustrates that AYPLHIV could benefit from holistic SRH services with intersectoral and multidisciplinary collaboration to promote their overall physical, social, and mental wellbeing. Research on addressing barriers identified through this study could further inform how to best provide youth friendly SRH services.

# Acknowledgements

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THANK YOU