Teen Pregnancy Intervention at Eastern Deanery AIDS Relief Program - Njiru Clinic
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Background
Teen pregnancy is shown to lead to more adverse health and socio-economic outcomes for mothers and their babies1,3. When teens in low-income communities become parents, their educational opportunities and earning capacity become more limited, contributing to the cycle of poverty. Considering this, preventing teen pregnancy is a global priority, as outlined in the UN’s Sustainable Development Goals (SDG #5.6)4.

The Eastern Deaneries AIDS Relief Program (EDARP) clinic in Njiru, Kenya, sees the impacts of teen pregnancy and secondary HIV transmission for adolescents living with HIV who receive services at EDARP.

Project Goal
The objective was to initiate an intervention at the Njiru clinic for pre-teens and teens that will address sexual risk reduction through delaying sex. Three goals were developed toward this objective:

- **Goal 1**: Organizational needs assessment with program staff and youth served by the Njiru clinic.
- **Goal 2**: Utilizing themes and information from needs assessment to develop curricula and adapting evidence-based curriculum such as the Peace Corps Life Skills Manual to meet identified needs.
- **Goal 3**: Partner with program staff to develop a proposal for intervention(s) using developed curricula.

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Action Plan
Organizational needs assessment at Njiru clinic through a focus group with clinic staff and in-depth interviews with adolescents served by the program.

- A focus group used to gain staff attitudes and perspectives of adolescent needs.
- Utilized nurses and social workers as gate-keepers to identify youth who are outgoing and at ease to share community experiences.
- Recruited 51 individuals aged 15-31. This older age range was chosen for ease of recruitment, and asking younger adolescents (9-14) about attitudes and practices of peers related to sex is less culturally inappropriate.
- The instrument included questions around when a participant was taught about puberty or sex, what peers practices and attitudes are towards sex, peer-pressure, and anything that could help delay sex of peers or other teenagers.
- With consent, in-depth interviews were recorded, but no identifiers were collected.
- Verbatim transcription of all interviews was fulfilled, and reports were completed on emerging themes and recommendations.
- Worked with key program staff to inform curricula, supplementary resources, and plan for implementation.

Time Period of Implementation
- June 17th - July 25th, 2019, 51 in-depth interviews. Early July, a focus group with clinic staff completed.
- June 17th-July 26th 2019, verbatim transcription of interviews. Completed within 2-3 days of interview.
- July 29th-August 6th, 2019, thematic analysis of data and creation of thick descriptions.
- All reports including recommendations, life skills curriculum, thick descriptions, presentation, and 51 verbatim transcripts and recommendations delivered mid-August.

Project Impact and Accomplishments
- In-depth interviews provided insight into population of interest’s attitudes around sex, what they are learning about sex, and sources of information.
- Identified specific areas for intervention and materials adapted to the context of East Africa.
- The qualitative needs assessment, reports, and resources answered the question of interest from EDARP and provided next steps.
- Using identified core issues behind youth behavior allowed for intervention to be designed with respect of EDARP core values.

Professional Skills Applied and Learned
- **Qualitative research methods**: appropriate consent, in-depth interviews, verbatim transcripts. Completed 51 interviews and transcripts.
- **Qualitative analysis**: produced thick descriptions through thematic analysis and synthesis of data.
- **Cultural humility**: found common ground for public health best practices that were respectful of cultural and religious beliefs and differences.
- **Reflexivity**: Aware as an American working in Kenya of both previous experiences working in Kenya and different values that could create bias in interactions and observations.

References