



**Society for Family Health, Nigeria
...Creating Change, Enhancing Lives**

Overview of AYP Action Research

February 19 , 2018



PRESENTATION OUTLINE

Introduction of the AYP action research



Aim and Objectives.



Vulnerability Factors



Step by Step Implementation approach



Conclusion

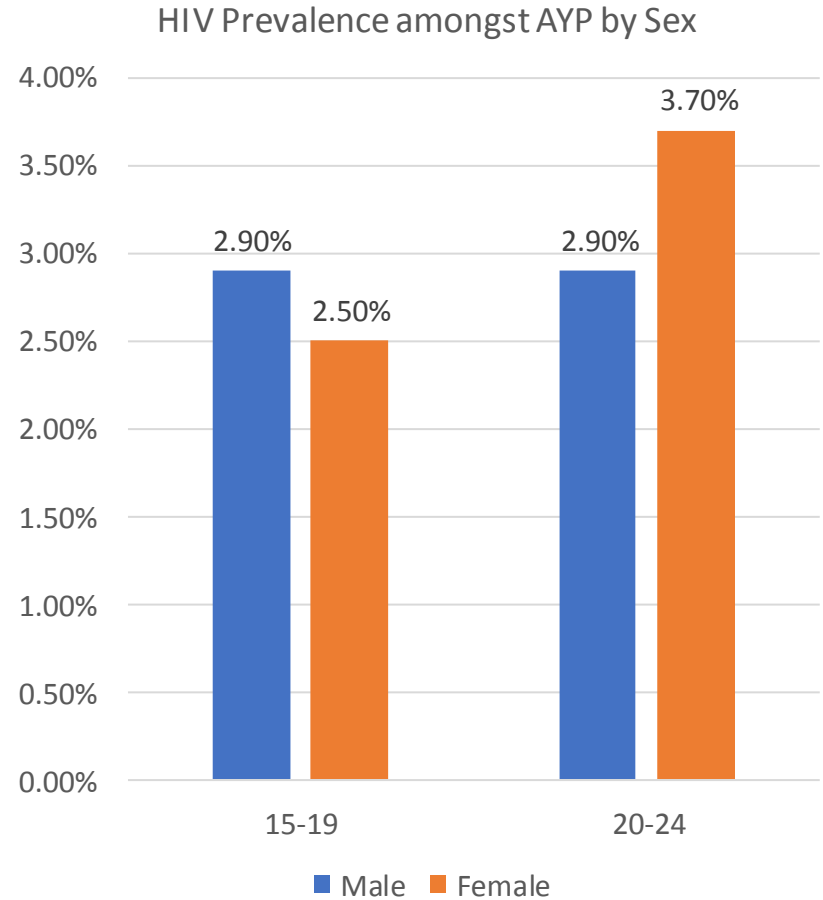


Introduction

- The HIV burden is still higher for females than males even amongst youth
- Existent data shows poor indices amongst youth
 - the level of knowledge of HIV
 - uptake of HTS
 - Access to prevention and care services (condoms, STI, HIV care)

Questions that need to be answered

- how best to identify the adolescents living with HIV and put them in care?
- Improve access and use of preventive services
- how to reach AYP- especially, vulnerable girls with SBCC messages in the form acceptable to them



Aims and Objectives

Aim

- To reduce the vulnerability of adolescent girls and young women to HIV & AIDS infection through action research.

Specific Objectives

- Identify factors (individual, social, environmental and systemic) that increase adolescent girls and young women's vulnerability to HIV & AIDS.
- Develop and implement actionable HIV-related intervention models to address the vulnerabilities of adolescent girls and young women to HIV & AIDS infection.
- Assess the effectiveness of the HIV & AIDS intervention models in the target population



Three Phases

- Baseline
- Intervention
- End-line



Baseline

- Used quantitative survey and qualitative methods (PLAs, FGDs, KIIs and IDIs) to gather data on situational analysis of female AYP vulnerabilities to HIV infection at the study and control sites.
- Research conducted in October 2016 revealed knowledge to determine vulnerabilities and profile higher-risk adolescents girls
 - Baseline reports developed by State
 - Knowledge used to inform programming



End-line

- The end-line phase employed the use of similar instruments used at baseline to collect data at end-line, from same locations, based on same sample size, but not the same individuals
- However, an additional section was added to the household questionnaire that assessed exposure of respondents in communities to intervention in order to examine the reach of the interventions
- Qualitative methods were devoid of PLAs because all learning sections had been concluded; only FGDs, KIIs and IDIs.



Vulnerabilities

- Vulnerabilities that predispose AYPs to HIV
- Vulnerabilities that limit access and uptake of HIV services
- Higher-risk AYP females varied by states
 - Profiles developed by state



Vulnerability Factors

Vulnerabilities	Akwa-Ibom	FCT	Kaduna	Oyo
Had STI symptoms	25.4	29.7	43	23.2
Unprotected sex	44.5	40.2	50.9	36.5
Transactional sex	11	3.5	1.1	1.4
Intergenerational sex	1.5	1.2	0.9	0.6
Low HIV risk perception	90.9	83.2	88.8	88.7
Multiple sex partner	11	3.4	3.3	3.9
Substance use	30.6	11.4	8	23.1
Incest	0.4	0.6	0.3	0.1
Gender based violence	57.4	37.7	33	50.6
Poverty	8.4	21.6	40	10.1
Teen pregnancy	10.7	12.6	22.5	4.7
Early sex debut	39.7	25.7	37	17.8
Early marriage	2.9	11.6	28.9	3.2
Rape	14.6	5.8	4.8	8.1



Identification of AYPs/Profiling

- By Age
- By Marital status
- BY sexual behaviour
- By HIV status
 - Prototypes developed were State, LGA and target profile specific
 - Various innovations generated by state and prioritized to reach target profiles
- Higher-risk AYP females varied by States
 - Profiles developed by State



Implementation Approach(FCT)

	Profile	Change idea	Outcomes
1	All category	GF networking	Increased use of condoms
2	High risk girls and older girls 20-24years	1 mentor 5(CU for US) Peer to Peer distribution and Use of NTO outlets for condom access	Increased knowledge of HIV Increased HTS uptake
3	High risk girls and older girls 20-24years	Peer to Peer distribution of condoms	Targeting access to HTS Targeting access to STI services





RMC MEMBER SUPPORTING ON THE TEST OF CHANGE IDEA 3 AT ISLAMIYYA IN ANGWANDODO



OLDER GIRLS WAITING FOR MHTS SERVICE IN AGORA PALACE ZUBA THROUGH CHANGE IDEA NETWORK IN GWAGWALADA. ABOUT 50 FEMALE AYPs TESTED



1 MENTOR 5 ON CONDOM USE AS STI PREVENTION IN BWARI THROUGH CHANGE IDEA 2 NETWORK



FEMALE AYPs WAITING TO BE TREATED FOR STI THROUGH CHANGE IDEA 2 NGETWORK (1 MENTOR 5 ON STI AND ITS TREATMENT SOURCE)



MSTI OUTREACH IN YIMI WITH ABOUT 117 FEMALE AYPs DIAGONSED AND TREATED



1 MENTOR 5 CHANGE IDEA BEING SCALED UP IN ANAGADA



ANOTHER SESSION HELD WITH ISLAMIYYA GIRS IN GWAGWALADA

Implementation Approach(Oyo)

	Profile	Change idea	Outcomes
1	All category	<ul style="list-style-type: none"> Use of NTOs for condom distribution: Use of Area Sisters (AS) and Peer to Peer distribution 	<p>Increased use of condoms</p> <p>Increased knowledge of HIV</p>
2	High risk girls and older girls 20-24years	<ul style="list-style-type: none"> Social to Health approach (S2H) 	<p>Increased HTS uptake</p>
3	High risk girls and older girls 20-24years	<ul style="list-style-type: none"> Online sessions via Whatsapp 	





Implementation Approach(Akwa- Ibom)

	Profile	Change idea	Outcomes
1	15-19years 20-24years	Utilise Whatsapp to reach AYPs with correct information on HIV and STI.	Increased use of condoms
2	All categories	Use mentor males . (What would Daddy Do if Your daughter is raped-WWDD)	Increased knowledge of HIV Increased HTS uptake Reduction in GBV
3	15-19years	M2D –Mother to Daughter	Delayed sexual debut and reduction in teenage pregnancy



← Enlightenment group Bisola, +234 701 360 4570, +234 ...



← Message info

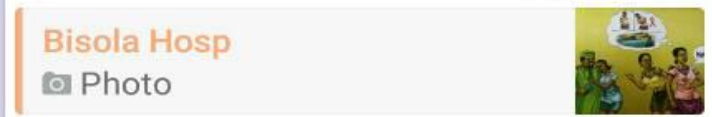


Pls comment 10:05 PM

TODAY

Bisola Hosp Good everyone 8:00 PM

+234 703 820 6485 ~Koyejo Bukola



That is showing the consequences of having a sugar daddy. 8:00 PM

+234 903 700 3419 ~Similoluwa

It's really obvious, her friend is asking her to join them, she's thinking of d consequences and saying no 8:03 PM

😊 |Type a message 📷 🎤

July 3, 8:50 PM

+234 806 969 9838 July 3, 1:04 PM

+234 810 367 6240 July 3, 2:31 PM

+234 810 622 ... ~Ruth Makinde Yesterday, 11:43 AM

+234 813 189 1418 July 3, 3:20 PM

+234 813 268 3743 July 3, 1:25 PM

+234 814 657 9744 July 3, 8:17 PM

+234 814 774 2... ~2 much juice July 3, 1:54 PM

+234 816 070 1049 July 3, 5:13 PM

+234 817 138 7754 July 3, 1:49 PM

+234 903 700 3419 ~Similoluwa
What picture? 11:25 PM



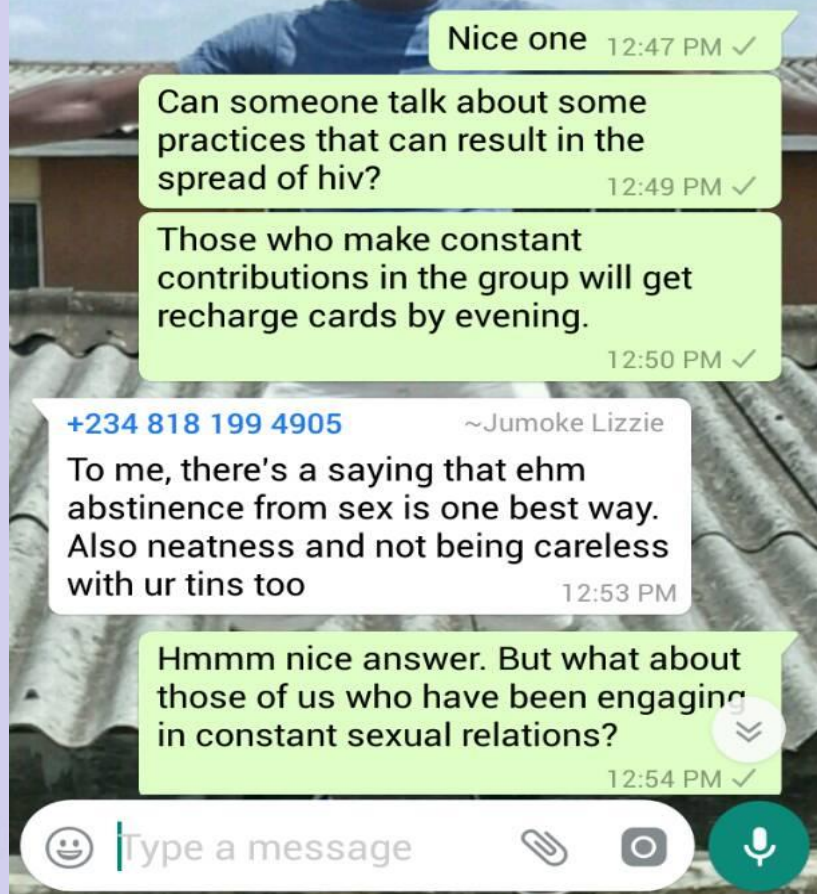
+234 903 700 3419 ~Similoluwa
It's cool 👍 11:27 PM

Bisola Hosp
What story can you coin out of the picture 11:29 PM

+234 903 700 3419 ~Similoluwa
The kid feels it's better to work than to party 11:32 PM

Bisola Hosp
Why did u say so? 11:33 PM

+234 818 199 4905 ~Jumoke Lizzie
You
Hope we all had a great weekend?
I did 12:47 PM



Nice one 12:47 PM ✓

Can someone talk about some practices that can result in the spread of hiv? 12:49 PM ✓

Those who make constant contributions in the group will get recharge cards by evening. 12:50 PM ✓

+234 818 199 4905 ~Jumoke Lizzie
To me, there's a saying that ehm abstinence from sex is one best way. Also neatness and not being careless with ur tins too 12:53 PM

Hmmm nice answer. But what about those of us who have been engaging in constant sexual relations? 12:54 PM ✓

Implementation Approach(Kaduna)

	Profile	Change idea	Outcomes
1	15-19years 20-24years	M2D (mother to daughter)	Increased use of condoms
2	All categories	Tell A Friend	Increased knowledge of HIV
3	All categories	Engaging traditional heads to introduce HTS before marriage	Increased HTS uptake



Conclusion

- Change ideas that were identified as effective will be scaled up during this implementation phase.





**THANKS
FOR
LISTENING**

