Afya Pwani’s Technical Approach to Adolescent And Youth Sexual And Reproductive Health in Kilifi County
BACKGROUND

Young people under 25 years of age constitute about 66% of the total population in Kenya. Adolescents and young people in Kilifi county constitute 65% of the total population but experience some of the poorest sexual and reproductive health (SRH) and HIV outcomes. These include unsafe abortion; early pregnancy; substance abuse; gender-based violence (GBV); poor school enrollment, transition, and completion rates, especially among adolescent girls and young women; lack of comprehensive sexuality education; influence of digital technology and new media; new HIV infections; exposure to burial ceremonies (disco matangas) exposing young girls to increased vulnerability; AIDS-related death; poverty; sexual coercion; and child marriage.

As of 2014, Kilifi county was one of the counties with the highest adolescent pregnancy rates in Kenya at 22%. Moreover, 18% of young women ages 15 to 49 had begun childbearing, 15% had already had a live birth, and 3% were pregnant with their first child. The age of sexual debut was 14 years, with a low modern contraceptive prevalence rate (m-CPR) of 20% among adolescent girls and young women ages 15 to 24. Unmet need for contraception was high at 21% among currently married adolescents.

Young people have the right to a healthy sexual and reproductive life; however, they face challenges accessing SRH services due to physical and structural barriers, including lack of education, poverty, early sexual initiation, restrictive interpretation of adolescent and youth sexual and reproductive health and rights (AYSRHR) laws and policies, provider bias, distance to facilities, misinformation, lack of contraceptive information, lack of youth-friendly facilities, prohibitive cost of services and transportation, weak parenting, inconvenient health facility hours, lack of privacy and confidentiality, and retrogressive practices that include early marriage and GBV.

THE AFYA PWANI APPROACH AND IMPACT

The USAID Afya Pwani project (2016-2021), led by Pathfinder International, Palladium, and Plan International, was implemented to improve access to and use of quality health services in Kenya through strengthened service delivery and institutional capacity of county health systems. The project implemented an adapted, country-led, systems approach to increase demand and strengthen the delivery of quality AYSRH services in Kilifi County.

Increase demand for SRHR information and services

The project employed a multi-pronged approach to increase demand for SRHR information and services among young people. It conducted advocacy with political and administrative leadership to support initiatives to decrease teen pregnancy by facilitating community dialogues, engaging existing youth groups and youth networks, conducting health drives, and leveraging sports to reach young people with information and services. The project strengthened the youth networks as avenues for social mobilization and cascading of age specific SRHR information. The networks now have more than 3,600 members in Rabai, Kilifi North, and Magarini subcounties, and more than 10,000 young people have received SRH information and services through them.

The project supported the county health management team (CHMT) and youth peer educators to conduct focus group discussions and dialogues with young people in Kilifi county to assess young people's perceptions of contraceptives, teen pregnancies, and barriers to using reproductive health services. The sessions sensitized the youth and community on HIV; maternal, newborn, and child health (MNCH); and contraception, thus creating awareness and demand for available services. The project also facilitated caregivers' and parents'

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forums to determine parenting role and facilitate a positive parent-child relationship to enhance communication and encourage dialogue between young people and their parents about SRHR issues.

In total, the project trained 688 young people as peer educators, *Amina Ali* champions, and youthful CBDs who reached more than 16,000 young people with SRHR information and services, GBV prevention and response, and HIV information and testing. Afya Pwani also leveraged football, netball, tug of war, and skating to reach young people with SRHR information, services, and referrals to health facilities. The project engaged the Kilifi county Youth Advisory Council, strengthening the capacity of its members to coordinate RH information and service provision to young people; the project was the first organization in Kilifi County to adopt a Youth Advisory Council (YAC) in its implementation. The YAC is a functional structure established by the Kilifi department of health to facilitate meaningful engagement of Adolescent and Young People (AYP) and to coordinate and conduct demand driven empowerment activities. Afya Pwani also engaged youth champions to provide age-appropriate information and services to cohorts of young people to ensure effective delivery. For 10- to 14-year-olds, the information emphasized abstinence and encouraged delay of sexual debut to mitigate the adverse reproductive health outcomes that come with early and unwanted pregnancies. Adolescents ages 15 to 19 were also encouraged to delay their sexual debut through life skills education but were educated on contraceptive methods as well. Youth ages 20 to 24 were educated about and provided with contraceptives if they wanted them.

**Increase access and use of quality AYSRHR**

The project supported the CHMT to increase access to and use of SRH services among young people through youth open days, peer educators, youthful community-based distributors (CBDs) of contraception, and digital platforms. Afya Pwani also supported the county in implementing the high-impact approach of a group antenatal and postnatal (ANC /PNC) intervention dubbed ‘*Binti Kwa Binti*’ in 124 facilities, reaching 11,160 young women ages 10 to 24, including pregnant adolescents, with life skills, MNCH, and contraceptive information and services targeting pregnant adolescent and young girls with information, life skills, and health services. Afya Pwani supported Binti Kwa Binti groups to register with social services as self-help groups. Two registered as community-based organizations to access government and private economic opportunities. Further, the project supported handiwork skill training within Binti Kwa Binti groups, where more than 200 young women have been equipped with skills in *uteo* and broom making, mask making, beadwork, and baby garments. In addition, the project facilitated the reintegration of 96 girls into school.

The project also used digital platforms to increase access to contraceptives and link adolescents and young people to health services using structured SRH sessions on social media platforms like WhatsApp and Facebook as well as bulk short message services (SMS). The project also addressed provider bias by piloting and rolling out a toll-free call platform dubbed "Binti wa Kisasa", adopted from the Pathfinder Beyond Bias project. The interactive voice response (IVR) platform primes young people on their SRHR and equips them to overcome provider bias. It also provides them with information on contraceptives and connects them to a service provider for further counseling and referrals for health services. Through *Binti wa Kisasa*, 3,412 young people received age appropriate SRHR information.

**Strengthen quality of youth-friendly services in health facilities**

Afya Pwani enhanced the capacity of health facilities to provide youth-friendly services by training health providers to offer youth-responsive services and equipping them with national AYSRH guidelines and job aids developed by the Ministry of Health with technical assistance from Pathfinder. The project supported the providers to overcome provider bias through Values Clarification and Attitude Transformation (VCAT) and sensitization on segmentation tools.
Afya Pwani promoted a mainstreamed, integrated approach to AYSRH service provision in 16 facilities and supported the county in setting up youth spaces. In the absence of separate spaces, the project sensitized service providers to embrace the mainstreamed, integrated service delivery approach. Afya Pwani supported 21 facilities with youth-attracting equipment (woofers, footballs, hula hoops). In addition, the project strengthened the capacity of health care workers in 23 facilities to provide youth-appropriate services through training, continuing medical education, and mentorship, and equipped the health providers with adolescent cue cards to aid in counseling, the national ASRH policy implementation framework, and E2A's *Thinking Outside the Separate Spaces* toolkit across 58 facilities in the county.

**Strengthen county capacity to plan, coordinate and implement AYSRH activities**

The project supported the County and Subcounty health management teams (S/CHMT) to streamline youth activities in the county by supporting the development and implementation of the Kilifi county *Adolescent and Young People Sexual Reproductive Health & HIV Strategy 2019-2022*. It also contributed to the development of the Gender Policy and GBV Policy and supported the S/CHMT to conduct gender and youth planning and data review meetings to identify gaps in service provision and focus activities. The project supported the Department of Health to successfully advocate to the governor for a declaration and subsequent support of a ban of funeral-night discos "disco matanga," often associated with teen pregnancy. The ban was further reinforced by the Cabinet Secretary for Interior and Coordination of National Government.

**Enhance multisectoral collaborations and strategic partnerships to improve adolescent health**

Afya Pwani fostered strategic partnerships and collaborations to increase access and use of quality AYSRH services. The project mobilized the National Government Affirmative Fund (NGAAF) to donate sanitary towels and supported their distribution during youth open days. NGAAF also sensitized health care workers on the minimum standards for applying social services and supported their registration with social services that resulted in the registration of social services groups. The project supported the registration of 500 young women with the Kenya Youth Economic Opportunity Program (KYEOP); subsequently, 65 young women secured sponsorship to pursue technical training courses of their choice. Upon completion, some have successfully started their own businesses, including salons and dressmaking. The project also supported handiwork skills training in which 128 women were equipped to make traditional baskets, brooms, masks, beadwork, and baby garments.

Through a partnership with Mpesa Foundation, Huru International, and the Youth Advisory Council, Afya Pwani identified and registered 10,000 girls and 3,333 boys who received dignity packs containing a three-month supply of sanitary towels and panties for girls and boxers and soap for boys. In addition, the project sensitized the young boys and girls on correct SRH information.

**ADDITIONAL ACHIEVEMENTS**

Afya Pwani contributed to a reduction in teen pregnancy in Kilifi county from 22% to 14.5% by increasing access and use of voluntary contraceptive services among young people (Figures 1 and 2).
LESSONS LEARNED AND RECOMMENDATIONS

- Age cohort group ANC and PNC models with structured messaging provide a platform to create awareness and access and use of family planning among pregnant adolescents and young people. Future programming should consider expanding the model to increase SRHR services to pregnant adolescents and young people.
- Community engagement activities to reach young people yield better results than facility-based interventions hence the need to train more peer educators and youthful CBDs to aid in the identification and referral of young people for information and services.
- To fully operationalize the Kilifi county Adolescent and Young People Sexual Reproductive Health & HIV Strategy 2019-2022, future programming should advocate the county government to increase resources to address the needs of adolescents and young people and expand youth responsive services.