

Assessment of Youth Friendly Services Utilization And Associated Factors Among Young People in Albuko Woreda, South Wollo Zone, Amhara Region, Ethiopia - 2014.

| KEYWORDS | Youth friendly services, Unprotected sexual activities | | | | | | |
|---|--|--|---|--|--|--|--|
| Wubetu G/hiwot | F | Prof (Dr).P.Surender Reddy | Tesfamicheal Awoke | | | | |
| MPH, Dept.of Public Hea College of Medicine & He Sciences, Wollo University, Et | alth | hD, Dept.of Public Health, College of Medicine & Health Sciences, Wollo University, Ethiopia | MPH, Lecture, Dept.of Public Health, College of Medicine & Health Sciences, Wollo University, Ethiopia | | | | |

ABSTRACT Background: Improving young people RH is generally recognized as a key development priority. Thus, YFS have been recognized one of the strategy to address the reproductive health need of young people.

Objectives: The objective of this study was to assess youth friendly services utilization and associated factors among young people in Albuko district.

Methods: Community-based study with 572 study subjects by systematic random sampling.

This study is supported by qualitative methods.

Results: The percentage of young people used YFS was found to be 34.31% of youth used YFS services. Lack of information, distance and inconvenient of the health centers were the main reasons that deter young people to use the services.

Conclusion and Recommendation: While most young people not using the YFS services, there is a need to promote YFS, ensure convenience and address the barriers that inhibit YFS services.

Itroduction

Globally, young people aged 10 -24 years represent 1/4th of the world population. From this, over 85% live in developing countries, and they constitute around 1.8 billion in number. Similarly, the group embodies 27 percent of the world population [1]. More than 63% of the total population of Ethiopia is below the age of 25. A case in point, young people having the age of 10-24 make 35% of the total population [2]. Early and unprotected sexual activities and misconceptions about HIV/AIDS are prevalent in young population [3].Thus, acquiring beneficial knowledge, developing positive attitudes, and establishing healthy practices and behaviors at an early age sets the stage for longer-term health [34].

Youth throughout the world are exposed to health risks because they often do not have adequate knowledge and guidance about sexual and reproductive health (SRH) and related concerns. Therefore, they are exposed to unwanted pregnancy, STI, unsafe abortion, life-long health habits and the like [6].

In Ethiopia, access to RH services is poor while early and unprotected sexual activities and misconceptions about HIV/AIDS in young people is high [3].

So, adolescent and youth reproductive health becomes a concern [4, 5]. But still it is limited particularly in rural districts like Albuko.

Youth friendly service (YFS) respects and accommodates the unique psychological, social, cultural, and economic situations comfortable with appropriate environment, ensure confidentiality and privacy as well as succeed in retaining these young clients for continuing care [7]. As a result, it has been recognized as an appropriate and effective strategy to address sexual and reproductive health (SRH) needs of young people since the 1994 International Conference on Population & Development (ICPD) in Cairo, Egypt [8].

Young people Adolescent Reproductive Health and Development Plan of Action 2005-2015 was developed to facilitate the implementation of the developed policy. Funds have also been provided accordingly[3].Consequently, a document on "Standards on Youth Friendly Reproductive Health Services, Service delivery Guideline and Minimum Service Delivery Package" (Ministry of Health 2008) was produced [9].

Ethiopian young people encounter snags such as lack of education, unemployment, and extreme poverty, and the reproductive health complications [10]. In the presence of many SRH problems, young people YFS utilization is low especially in rural districts [3].

Among few studies in Ethiopia on YFS utilization and related factors, majority are in major towns of the country like Gonder, Hareer , Bahirdar , Jimma.... which are by far have different settings than Albuko rural Woredas. To find out the existing reality, conducting a study is vital especially for decision makers and service providers to take actions based on the findings.

General objective

 To assess youth friendly services utilization and associated factors among young people in Albuko district, South Wolo zone of Amhara region.

Specific objectives

- To find out the prevalence youth friendly services utilization among young people in Albuko Woreda.
- To identify associated factors that deters youth friend-

ly services utilization among young people in, Albuko Woreda.

Methods:

Community-based study with 572 study subjects by systematic random sampling.

This study is supported by qualitative methods with 8 indepth interviews and 4 Focus Group Discussions. Ethical clearance was obtained from the concerned authorities. EPI-info and SPSS Version 20.0 was used to edit and analyze the data.

Results

Socio-Demographic characteristics of the study subjects Out of 572 respondents aged from 10-24 years, 304 (53.1%) and 268 (46.9%) were males and females respectively and the mean age was 17.07 with a standard deviation of +4.25. 494(86.4%) were single, 53(9.3%) were married and 25(4.4%) divorced. 473(82.7%) were Muslims and 99(17.3%) Christian. 405(70.8%) students & unemployed, 128(22.4%) farmers, 15 (2.6%) house wives, 11(1.9%) merchants and 13(2.3%) were government employed. 572, 46 (8%) without any formal education, 283 (49.5%) primary, and 243 (42.5%) were secondary & above.

Accessibility of information and other related factors for the utilization of YFS

253 (44.2%) of the respondents had heard about Youth friendly services (YFS) and 319 (55.8%) never heard. 149 (26.0%) accessed YFS information form peers and 132 (23.1%) from school teachers & 179 (91.3%) used YFS.

Out of the total 572 respondents' 60 (10.5%) responded as it needs 5-10 minutes, 152 (26.6%) 11-30 minutes, 276 (48.3%) 31- 60 minutes and 84 (14.7%) more than an hour for a single journey to reach the health centers to utilize YFS services by walk from residence or work place.

Out of the total respondents 69 (12.1%) had faced reproductive illness whereas the remaining 503 (87.9%) never had been faced. Thus, out of 69 RH illness exposure respondents, only 47 (24%) used the services.

From the total of 572, 249 (43.5%) and 323 (56.5%) participants responded that the health centers are convenient and in convenient to use the services respectively. Out of the respondents responded the health centers convenient, only 97 (49.5%) used the services.

Barriers to use YFS

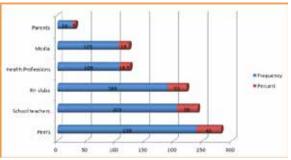
To determine the reasons that hinder respondents to use the YFS were done on different variables. Therefore, from the total of non users majority of them 343 (91%) not used the servicers due to lack of information, 256 (68%) distance, 195 (52%) inconvenient , 104(28%) un able to pay, 97 (26 %) closing , 131(35%) fear of others, 100 (27%) appointment , 96(26 %), providers refuse and 174 (42.4%) absence of services.

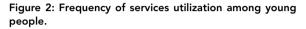
Youth Friendly Service Utilization

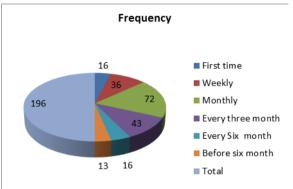
196 (34.3%) respondents used youth friendly services at the time of interview while the remaining 376 (65.7%) did not. The respondents had visited health institutions to receive RH and recreational services for the last one year.

Hence, the main reproductive health services utilized by the young people have heard information on sexual issues 147 (75.8 %) followed by family planning counseling 144 (73 %) and 133 (68 %). Also, 134 (68 %) were used recreation services like indoor and outdoor games.

Figure 1: source of comfortable YFS Information to young people.







| Table 1: Factors | associated | with | youth | friendly | Service |
|------------------|------------|------|-------|----------|---------|
| Utilization. | | | | | |

| Factors | YFS Utiliza- tion | | COR(95% | | P- |
|------------------------|----------------------|-----|-----------------------|----------------------|-------|
| | Yes | No | C.I) | AOR [95%CI] | Value |
| Sex | | | | | 0.046 |
| Male | 128 | 176 | 1 | 1 | |
| Female | 68 | 200 | 0.46 [0.32, 0.66] | 0.55(0.31,0.99) | |
| Age in (Years) | | | | | 0.012 |
| 10 -14 | 41 | 133 | 1 | 1 | |
| 15 -19 | 65 | 127 | 1.78 (1.10, 2.88) | 3.34(1.47 , 7.60) | |
| 20 -24 | 90 | 116 | 3.12 (1.98, 4.92) | 3.44(1.22,9.67) | |
| Marital Status | | | | | 0.353 |
| Single | 162 | 332 | 1 | 1 | |
| Married | 26 | 27 | 1.97 (1.11, 3.49) | 0.95(0.34,2.69) | |
| Divorced | 8 | 17 | 0.96 (0.40, 2.28) | 0.38(0.10,1.41) | |
| Level of Education | | | | | 0.24 |
| No formal Education | 6 | 38 | 1 | 1 | |
| Primary education | 84 | 207 | 2.40 (0.98, 5.89) | 2.34(0.70,7.77) | |
| Secondary & above | 106 | 131 | 5.99 (2.44, 14.64) | 2.98(0.83,10.71) | |

RESEARCH PAPER

| Occupa- tion | | | | | 0.023 |
|------------------------------|-----|-----|----------------------|------------------|-------|
| Farmer | 34 | 94 | 1 | 1 | |
| Students/ unem- ployed | 147 | 258 | | 2.84(1.46,5.51) | |
| House wife | 3 | 12 | | 1.36(0.20,8.98) | |
| Merchant | 6 | 5 | | 5.44(0.85,51.53) | |
| Employed | 6 | 7 | 2.37 (0.74, 7.55) | 4.71(0.10,26.06) | |
| Religion | | | | | |
| Muslim | 159 | 314 | 1 | | |
| Christian | 37 | 62 | 1.04 (0.63, 1.58) | | |

Table 2: Factors associated with youth friendly service utilization.

| Factors | YFS Utili- zation | | COR(95% C.I) | AOR [95%CI] | P- Value |
|-------------------------------|----------------------|-----|----------------------|------------------|-------------|
| | Yes | No | | | |
| Sexual Partner | | | | | 0.251 |
| Yes | 87 | 128 | 1 | 1 | |
| No | 98 | 237 | 0.60 (0.42, 0.87) | 1.72(0.74,4.00) | |
| l don't to respond | 11 | 11 | 1.47 (0.61, 3.54) | 2.90(0.64,13.19) | |
| RH - Illness | | | | | 0.099 |
| Yes | 25 | 11 | 1 | 1 | |
| No | 171 | 365 | 0.19 (0.11, 0.33) | 0.48(0.20,1.14) | |
| Information on YFS | | | | | 0.00 |
| Yes | 25 | 11 | 1 | 1 | |
| No | 171 | 365 | 0.02 (0.01, 0.04) | 0.19(0.10,0.37) | |
| Distance from the HC | | | | | 0.000 |
| < 30 min- utes | 36 | 24 | 1 | 1 | |
| >30 min- utes | 87 | 189 | 0.36 (0.25, 0.52) | 0.37(0.21,0.64) | |
| Conveni- ence | | | | | .010 |
| Yes | 71 | 181 | 1 | 1 | |
| No | 125 | 195 | 0.69 (0.48, 0.98) | 0.47(0.27,0.83) | |
| Dialogues on SRH issues | | | | | 0.028 |
| Yes | 131 | 170 | 1 | 1 | |
| No | 65 | 206 | 0.40 (0.28, 0.58) | 0.54(0.31`,0.93) | |

Qualitative study Results

Findings of the FGD

Barriers for their not seeking or using RH services by youth:

- Lack of awareness on youth friendly reproductive health services
- Concern over the lack of privacy , confidentiality due

Volume : 6 | Issue : 4 | April 2016 | ISSN - 2249-555X | IF : 3.919 | IC Value : 74.50

to inconvenient location of YCs

- Embarrassment at needing or wanting RH services
- Un attractive facility

Findings of Key Informants Interview

The barriers for seeking and using RH services that were outlined by Heads and service providers:

- Reluctance of young people in seeking RH services,
- Fear of others and inconvenient location of the youth centers
- Shortage of recreational materials (unattractive youth centers).

Discussion

This study has focused on youth friendly reproductive health services utilization and to identify the barriers for the utilization of YFS among young people aged 10-24 years in selected Kebeles found in Albuko district.

Youth friendly services utilization found to be 34.3%. It is similar with the study conducted at Bahirdar and Jimma (32.2%) and 34.7% respectively. But it is more YFS utilization compared with the study conducted at Mechakel (21.5%). On the contrary, this study YFS utilization reported less than the study carried out at Harar (63.8 %). The difference might be due to the socio cultural factors, openness of the young people.

The main sources of information to young people were school teachers, peers and RH clubs. It is consistent with many studies Harara (6) and Bahirdar (11).

Among youth friendly service utilizes (n=196), the study revealed that main services utilized by young people were sexual information 147 (75%), family planning counseling 144 (73%), and condom utilization133 (68%). Out of those 376 respondents, the main reasons for non youth friendly service utilization were lack of information 343 (91%), distance 256 (68%) and inconvenient 195 (52%). This finding is consistent with other study findings that young people protective factors against youth friendly service utilization (6) and Gondar (12).

Female respondents reported less youth friendly services utilization than males and the older young people, 20-24 years have utilized the YFS more than those who were in the age group of 10-19 years. This finding is in agreement with a study conducted in India where low proportion of clients in the age group of 15-19 accessed the YFS (14).

Although adolescents between the ages of 10-14 tend to be healthy, a different pattern of health concern emerges during the teenage years following new forms of behavior that relates to risk taking, experimentation and a move toward independence which requires specialized SRH services because of specific biological and psychological needs of adolescence, high risk of STIs, HIV, and pregnancy (31).

YFS Services Information

In this study young people mentioned their source of information for knowing the availability of SRH services are their peers, school teachers and RH clubs. This finding is in agreement with a study done by Obonyo Perez Akinyi, where majority of the youth sought information regarding RH from their friend (32) and results from the SNNPR FGAE youth center study showed that the source of information on the available services were greatly peer to peer educators (19). A study in Kenya showed that the reason

RESEARCH PAPER

for not using RH services was the lack of awareness about the available services (21).

The finding of this study is indicative of the lesser effort in the youth centers to inform adolescents and youth on SRH matters and the available services. As it was seen in the qualitative findings, most of the participants reported that their knowledge regarding the service and where it is provided were limited. This implies the great need for more widespread provision of information on the available services and promoting the services using the media and sign posts since young people will not seek services if they do not understand the importance of sexual health care or know where to go for care (21). Pacific regional guideline manual on standards for the youth friendly services clearly stated that there must be enough publicity on the details of the service, the locations and promotion activities, and services at the facility should be widely promoted through mass media (22).

Gaps for the utilization of youth friendly reproductive health services

Adolescents and youth described a lack of awareness about SRH services as a reason why they didn't access services. Most young people had generally low knowledge on youth friendly reproductive health service; what the services composes of, where the services is provided, and how it is specifically designed for them. The key informants made similar observations. This finding corresponds with the finding that showed most adolescents felt they receive inadequate information regarding the available reproductive health services (25).Having low knowledge regarding the YFS led to the low utilization of these services. This finding agrees with a study by Amanuel and Assefa which reported that lack of knowledge by the youth was a major factor that causes underutilization of the YFRHS (26).

This is in contrary to one of the goals set out in the National Youth policy 2004 which intended to create favorable conditions for the youth to have proper RH information and education and benefit them from it (27). The finding of this study shows that young people are not capacitated about the YFRHS in addition to limited being available in all the youth centers. The services are not comprehensive and friendly manner and it is also indicative of the lesser effort in the youth centers to inform young people on SRH matters and the available services

Among the reasons of young people avoidance of services were the fear of others, lack of privacy and confidentiality. Moreover the location of the youth centers that inhibits the privacy and confidentiality of the service. The location where the youth centers found was a concern for the young people. This finding goes in line with a study in Vanuatu where adolescents described fear of others finding out they had attended SRH services, in particular their parents and their fear of being a victim of community 'gossip (30). Research findings shows that young people do not want to run into family members and neighbors when entering, utilizing, or leaving sexual health facilities (21).

This study is in agreement with other studies that showed the reason why young people chose not to access SRH services as being too shy or scared to get the services, perception of service providers to be judgmental and encountering provider of opposite sex (28,29,30).

Although the youth centers offer some sort of recreational activities for adolescents and young people, many of them

have a small space appointed for recreational and reading services.

Conclusion

This study aims to examine the utilization young people to YFS and to explore the barriers to utilize reproductive health services by young people. Distance and inconvenience of the healthy centers, Information on YFS, participation on community dialogues was found to be predictors of utilization of YFS.

The key barriers to the use of youth friendly reproductive health services found in this study is not vary greatly from other countries as revealed in similar studies. Lack of information, privacy and confidentiality, embarrassment at needing and unattractiveness of the youth centers were the major themes that attributed to the low utilization of YFS by young people.

Consequently, it is envisaged that the findings from this study enriched the existing promising services, positively inform the responsible bodies to scale up YFS as per the standard to address more young people.

Recommendation

- Youth centers should promote YFS in different mechanisms to overcome young people SRH and related problems.
- Woreda health and concerned NGOs should provide YFSs as per the guidelines in consistency manner.
- There is a need for strengthening the existing 'packages' and scale up to remote health centers.
- Woman affair and youth associations should work in collaborating with health sectors to make youth centers more attractive to reinforcing young people to the services.

References:

- Kasiye S.FrehiwotG. Getahun.A, Assessment of adolescents' communication on sexual and reproductive health matters with parents and associated factors among secondary and preparatory schools' students in Debremarkos town, North West Ethiopia;http://www.reproductive health journal.com; 2014.
- Central Statistical Authority. Report of the Census of Ethiopia. Addis Ababa, Ethiopia. 2007).
- Amanuel A. Assefa S. Reproductive Health Knowledge and Services Utilization among Rural Adolescents in Machakal district, Northwest Ethiopia Asian Journal of Pharmacy, Nursing and Medical Sciences (ISSN: 2321 – 3639) Volume 01– Issue 01, June 2013.
- Malleshappa1, K., Shivaram, K. and Nandini, C. (2011) Knowledge and Attitude about Reproductive Health among Rural Adolescent Girls in Kuppam Mandal: An Intervention Study. *Biomedical Research*, 22, 305-310.
- Hughes, J. and McCauley, A.P. (1998) Improving the Fit: Adolescents' Needs and Future Programs for Sexual and Reproductive Health in Developing Countries. *Studies in Family Planning*, 29, 233-245.
- Aboma Motuma .Youth-friendly Health Services Utilization and Factors in Harar, Ethiopia, Bulletin of Health Sciences Extracts Number 4, January 2012.
- 7. UNFPA and Family Health International Egypt; 2008 (21).
- International Conference on Population Development (ICPD) in Cairo, Egypt, adolescent-friendly reproductive health services (AFRHS); 1994.
- Standards on Youth Friendly Reproductive Health Services, Service delivery Guideline and Minimum Service Delivery Package" Ministry of Health 2008.
- Adolescent and Youth Friendly Reproductive Health (AYFRH) Service Standards in ETHIOPIA; August 2010.
- Jimmy-Gama, An assessment of the capacity of facility based youth friendly reproductive health services, evidence from rural Malawi, 2009.

RESEARCH PAPER

- 12. Helpdesk Report: Adolescent Reproductive Health in Ethiopia; August 2011.
- The Ministry of Health launched the National Reproductive Health Strategy in 2006, Ethiopia, 2006 b.
- 14. Adolescent and youth sexual and reproductive Health evidence based intervention in Kenya, April 2013)
- Meskerem A.Worku A.Utilization of Youth Reproductive Health Services and Associated Factors (2014) among High School Students in Bahir Dar, Amhara Regional State, Ethiopia; 2014.
- Senafikish A. Feleke, D. Negese K. Amsalu F.Zelalem B. Reproductive health service utilization and associated factors among adolescents in Gondar town, Northwest Ethiopia; 2013.
- Senderowitz, J., Hainsworth, G. and Solter: A Rapid Assessment of Youth Friendly Reproductive Health Service, 2003
- Obonyo Perez Akinyi, Determinants of Utilization of Youth Friendly Reproductive Health Services Among School and College Youth in Thika West District, Kiambu County, KENYA, 2009
- Biniam Getachew, level of satisfaction and associated factors in Family Guidance Association of Ethiopia Youth Friendly Services in SNNPR: June 2012
- Anne Wairimu Kamau, Factors Influencing Access And Utilization Of Preventive Reproductive Health Services By Adolescents in Kenya. A Case Study of Murang'a District, 2006
- 21. Moya, C: Creating youth friendly sexual health services in sub Saharan Africa, 2002
- 22. UNFPA.UNICEF, IPPF: Pacific Regional Guideline Manual on Standards for the Youth Friendly Services
- Doortje Braeken, Ilka Rondinelli, Sexual and reproductive health needs of young people: Matching needs with systems, journal homepage: www.elsevier.com/locate/ijgo
- FMOH; Standards on Youth Friendly Reproductive health Services, service delivery guideline & Minimum service delivery package on YFRH services
- Anne Wairimu Kamau, Factors Influencing Access And Utilization Of Preventive Reproductive Health Services By Adolescents in Kenya. A Case Study of Murang'a District, 2006
- 26. Amanuel Alemu Abajobir and Assefa Seme, Reproductive health knowledge and services utilization among rural adolescents in east Gojjam zone, Ethiopia: a community-based cross-sectional study, 2013
- 27. Ethiopian national youth Policy, 2004
- 28. Elissa C Kennedy, Siula Bulu, Jennifer Harris, David Humphreys1, Jayline Malverus and Natalie J Gray, Be kind to young people so they feel at home": a qualitative study of adolescents' and service providers' perceptions of youth-friendly sexual and reproductive health services in Vanuatu,2013 (http://www.biomedcentral.com/1472-6963/13/455)
- Annabel S Erulkar, Charles J Onoka and Alford Phiri; what is Youth-Friendly? Adolescents' Preferences for Reproductive Health Services in Kenya and Zimbabwe; 2005
- Linnéa Warenius, Sexual and Reproductive Health Services for Young People in Kenya and Zambia; Providers' attitude and young people's needs and experiences, 2008.
- E.Z. Gutierrez, R.Magnani and V.Lipovsek: Barriers to Adolescents' use of Reproductive Health Services in the Bolivian Cities; January 2000
- Elisabeth Tshabangu Mushinda: Utilization of Youth Friendly Services by the Youth in Lusaka, December 2004
- Joe Kalo, Utilization of Adolescent Reproductive Health Services by Young People in Vanuatu, October 2006