

POLICY BRIEF

ADOLESCENT HEALTH MATTERS: ARE ABUJA'S PRIMARY HEALTHCARE CENTERS DELIVERING?

KEY MESSAGES

- Many facilities did not have structures dedicated to ASRH.
- ASRH services were available in many facilities.
- Many adolescents did not experience any outreach exercises or posters on ASRH services.
- Many facilities do not offer ASRH services without parental consent.

RECOMMENDATIONS

1. The Federal Ministry of Health (FMoH) should implement existing policy provisions to address specific problems of training staff and providing basic ASRH equipment in PHC facilities.
2. The FMoH should make guidelines for adolescent-friendly health services available to all PHC staff in the FCT and the country at large to aid the proper and timely delivery of the correct ASRH services
3. Detailed manuals and curricula designed to strengthen the skills and capacity of PHC staff should be made available and accessible to all staff by the NPHCDA.

Executive Summary

The WHO prioritizes Sexual and Reproductive Health of Adolescents and young people as a worthy investment each country must consider. Over 20% of Nigeria's population is made up of adolescents. A policy implementation assessment of ASRH services in PHCs revealed that the FCT did not meet the minimum national policy requirement.

Introduction

Adolescent sexual and reproductive health (ASRH) services include gynecologic services; contraceptive services; and sexually transmitted diseases (STDs) counselling, screening, and HIV infection and their related consequences. A policy document on Adolescents and Young People's Health in Nigeria, 2011 and reviewed 2021 has targeted the inclusion of Adolescent SRH into PHC facilities. Provisions of this policy have not been implemented in many states including the FCT. About 22.3% of Nigeria's population is made up of adolescents, and the median age in Nigeria is 18.1 years. One in 20 of these adolescents contracts a sexually transmitted infection each year, and half of all HIV cases occur in people under the age of 25 years.

OBJECTIVES

1. To assess the availability and accessibility of ASRH services



2. To determine the appropriateness and friendliness of ASRH services in PHCs in Abuja



3. To determine the relationship between availability and friendliness of ASRH services in PHCs in Abuja

Our Approach

We conducted a mixed-methods, descriptive cross-sectional study, with a total of 117 PHC facilities sampled across the six area councils and 6 FGDs with adolescents residing near PHC facilities. A multistage sampling technique was used to select the PHC facilities that were enrolled in this study.

Findings

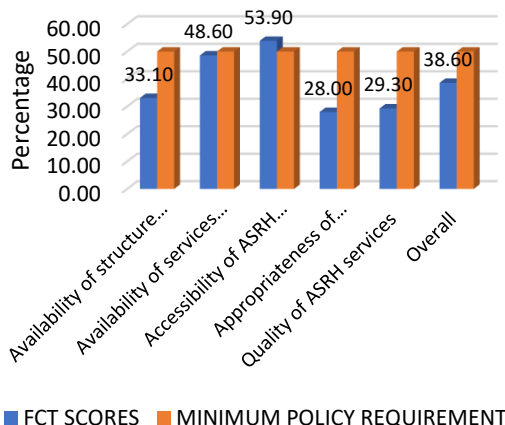


Figure 1: Bar chart showing the proportion of facilities with ASRH services in the FCT compared to the minimum of 50% according to the National Policy

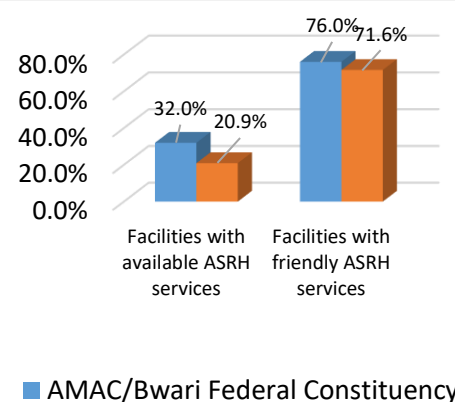


Figure 2: Bar chart showing the proportion of facilities with available and friendly ASRH services in the FCT.

Among the five domains of availability assessed, the FCT did not meet the minimum requirement of 50% except for accessibility of the ASRH services having 53.6% as shown in figure 1. Where the ASRH services are available they are said to be friendly as in figure 2. Adolescents did not experience outreach services; and many PHC facilities did not offer ASRH services without parental consent.

Conclusion

The FCT did not meet the minimum national policy requirement for the availability of ASRH services, although where the services are available, they are reported to be friendly.

References

1. Odo AN, Samuel ES, Nwagu EN, Nnamani PO, Atama CS. Sexual and reproductive health services (SRHS) for adolescents in Enugu state, Nigeria: a mixed methods approach. BMC health services research. 2018;18(1):92.
2. Federal Ministry of Health. National Strategic Framework on the Health & Development of Adolescents & Young People in Nigeria. Abuja2007-2011. p. 1-128.
3. Worldometer. Nigeria Population according United Nations data: Worldometer; 2021 [updated 9 November 2021]. Available from: <https://www.worldometers.info/world-population/nigeria-population/>.

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Figure 3: A cross-section of focus group discussion with male adolescents from Gwagwalada Area Council

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