

Coverage of sexual and reproductive health preventive services among adolescent girls in and out of school: are those most at risk reached?

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Background

School attendance or completion is important for the development of adolescents. Adolescents who drop out or are regularly absent from school are at higher risk of adverse sexual and reproductive health (SRH) outcomes. However, there is a dearth of evidence measuring and comparing SRH service coverage among adolescents in and out of school.

Objectives

In the context of a large-scale combination HIV and pregnancy prevention intervention funded by the Global Fund, we compared the intervention coverage (the combination prevention intervention as well as other SRH services) and SRH risk among adolescent girls who dropped out of school with those who were still in school or who completed grade 12. Among those still in school, we compared the SRH risk profiles and SRH service coverage of those with high versus low or no absenteeism.

Methods

In 2017 to 2018, a household survey was conducted among a representative sample of adolescent girls aged 15 to 19 years in six of the 10 districts in which the combination intervention was implemented. Bivariate and multivariate logistic regression models adjusted for age were used to assess the associations.

Results

Of all 2515 participants, 192 (7.6%) had dropped out of school. Ever having had sex was reported by 66.4% of dropouts compared to 43.7% of those who had not dropped out, and condomless sex by 43.0% versus 38.0%, respectively. Adolescents who reported household hunger and SRH risk had higher odds of having dropped out and being regularly absent compared with those who did not report these. Adolescents who dropped out of school were more likely to access SRH services such as condoms and contraceptives, except the services offered by the combination prevention intervention which were more likely to reach those who had not dropped out and were equally likely to reach those in school with high versus low/no absenteeism.

Conclusions

Combination prevention programmes can improve the accessibility of SRH prevention services for adolescents in school/who complete school.

Advocacy message

Despite reporting lower SRH risk, adolescents in schools and who completed school need SRH services, and combination HIV and pregnancy prevention interventions can successfully reach them.

Keywords: School dropout, school absenteeism, sexual and reproductive health risk