

Pregnancy, HIV prevalence & risky sexual behaviours among adolescent girls & young women in South Africa, a focus on KwaZulu-Natal

Seminar – SRHR/SRJ Service Delivery Issues

4th November 2022

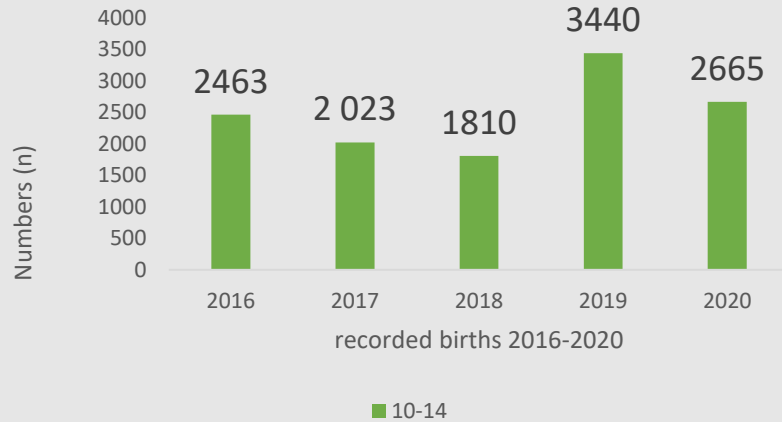
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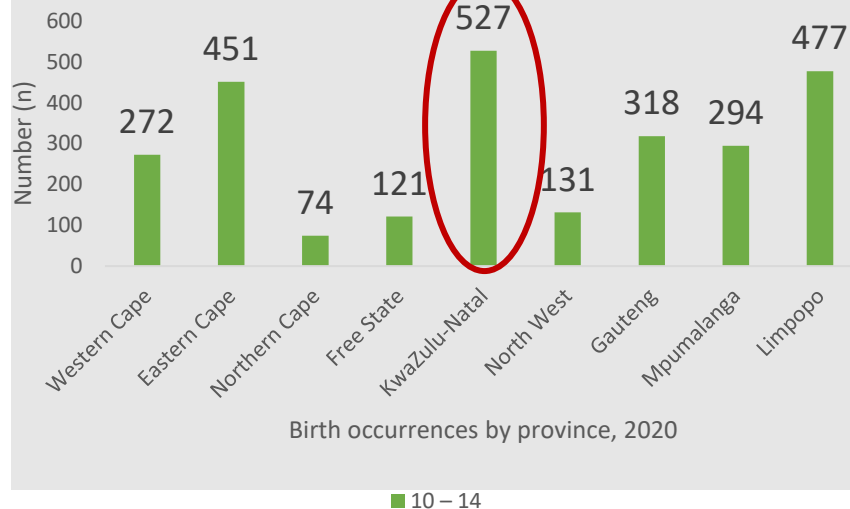
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Background

recorded births for mothers aged 10-14 years (Stats SA, 2020)**



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- Evidence shows an increase in teenage pregnancies (aged 10-19 years) over the period 2017-2021 in South Africa*
- For example, there were over 3400 births in 2019 and over 2600 births in 2020 among adolescents aged 10-14 years in South Africa**
- In 2019 KZN recorded n=26 296 registered live births among adolescent girls and young women (AGYW) age 10-19 years***
- COVID-19 related impacts on health have manifested as constrained access to contraceptives, a crisis of teenage pregnancies & increased risk for HIV acquisition
- There remains a need to understand convergent drivers for teenage pregnancy, and design highly targeted and tailored interventions

*Barron et al., 2022. Teenage births and pregnancies in South Africa, 2017 - 2021 - a reflection of a troubled country: Analysis of public sector data. S Afr Med J. 2022 Apr 1;112(4):252-258.

** Recorded live birth. 2020. Statistics South Africa. PO305

*** Profiling health challenges faced by adolescents (10–19 years) in South Africa. Statistics South Africa. Published by Statistics South Africa, 2022. Report no. 03-09-15.

Aim

To estimate pregnancy, HIV prevalence and related risk behaviours among adolescent girls and young women (AGYW) aged 15-24 years in KwaZulu-Natal using the 2017 South African national HIV prevalence survey*

- *known as SABSSM; Simbayi, et al., 2019. *South African National HIV Prevalence, Incidence, Behaviour and Communication Survey, 2017*. Cape Town: HSRC Press.

Methods

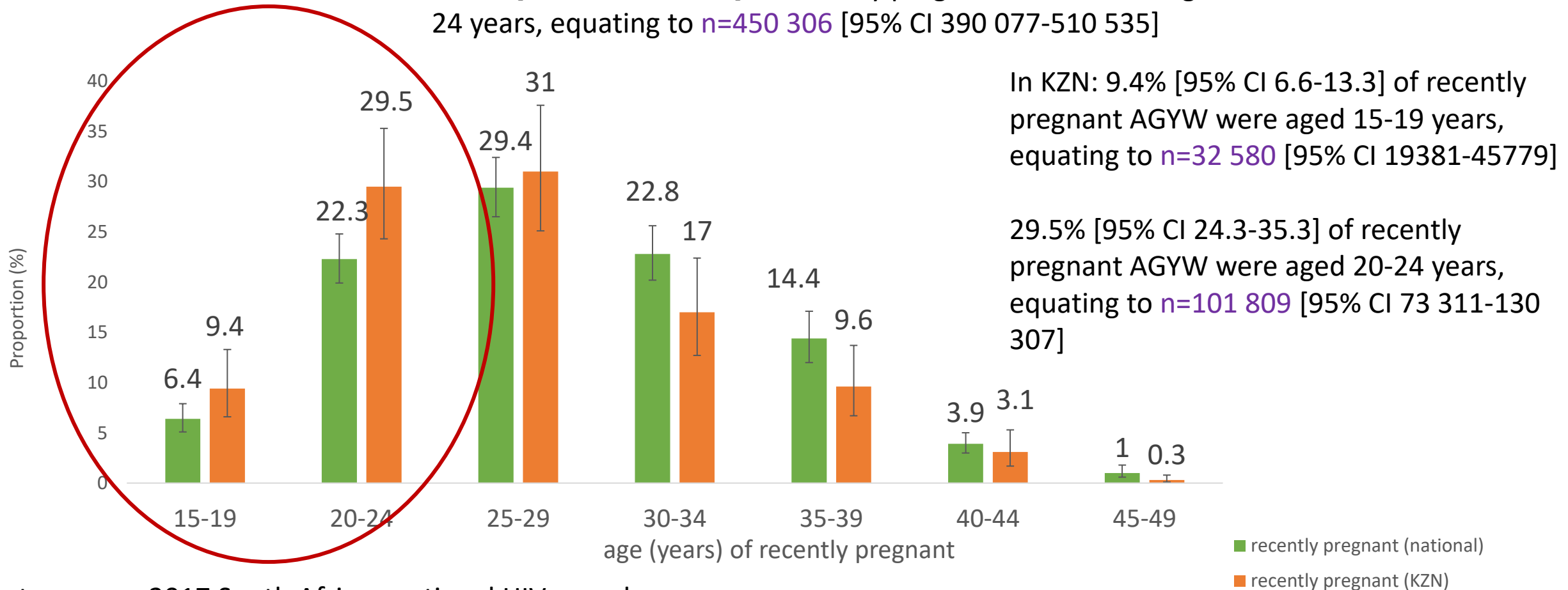
- Data were collected between December 2016 to February 2018 in all nine provinces, using a cross-sectional multi-stage stratified cluster design.
- The target sample for the analyses presented here consisted of AGYW aged 15-19- and 20–24-years who reported being sexually active during the 12 months preceding the survey. We also included the older age groups for comparison purposes.
- Data for the sample were extracted for KZN.
- Analyses were conducted for two subsamples: 1) those who reported a pregnancy during the preceding 24 months or current pregnancy during the survey (referred to as *recently pregnant* AGYW) and those who did not report a recent pregnancy (referred to non-pregnant AGYW).
- All analyses were conducted using Stata version 15.0.
- Column proportions were reported for recently pregnant AGYW (yes/no).
- Weighted descriptive statistics (Chi2) were generated for HIV prevalence & self-reported sexual risk behaviours including condom use, age mixing (age disparate sex), age at sexual debut and multiple sexual partners among the two AGYW groups (i.e., recently pregnant AGYW (yes/no).
- Logistic regression models were constructed and significant covariates are reported.

Results

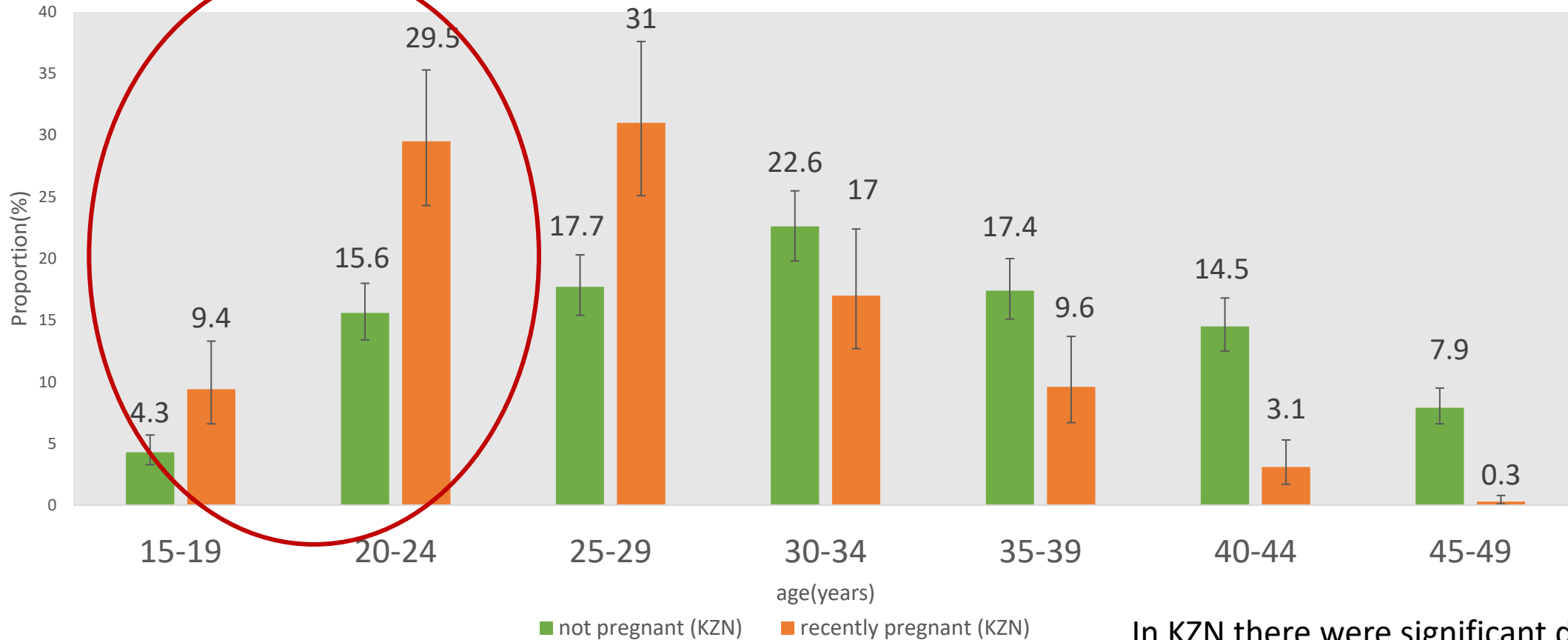
Comparison of reported recent pregnancy in KZN versus national estimates:

Nationally, there were significant differences by age ($p < 0.001$) among females aged 15 to 49 years ($N = 2125$) who reported a recent pregnancy.

- 6.4% [95% CI 5.1-7.9] of recently pregnant AGYW were aged 15-19 years, equating to $n = 128\ 468$ (95% CI 98 054-158 883)
- 22.2% [95% CI 19.9-24.8] of recently pregnant AGYW were aged 20-24 years, equating to $n = 450\ 306$ [95% CI 390 077-510 535]



Sample of reproductive age females 15-49 years, KwaZulu-Natal



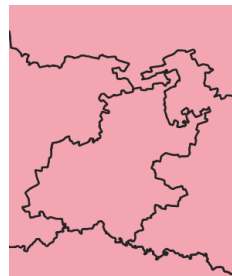
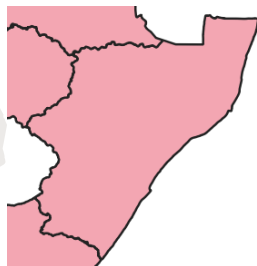
Total sample in KZN for females aged 15-49 years n=3047

Data source: 2017 South African national HIV prevalence survey

In KZN there were significant differences by age ($p < 0.001$) among females aged 15 to 49 years ($n = 693$) who reported a recent pregnancy.

Demographics

AGYW aged 15-24 years in KZN



Provinces with the highest proportion of recently pregnant AGYW:
KwaZulu-Natal at 23.2% (95% CI 18.4-28.9)
Gauteng at 20.1% (95% CI 14.4-27.3)

Nationally: significantly better school attainment among non pregnant AGYW than pregnant AGYW

Highest education level (N=768)	AGYW Pregnant currently or in past 24 months in KZN	
	Not pregnant	Yes pregnant
completed secondary school	53.9% [95% CI 47.2-60.4]	40.3% [95% CI 29.7-51.8]
no formal schooling	4.2% [95% CI 2.3-7.8]	7% [95% CI 2.9-15.8]

non-significant p=0.245

Demographics employment

AGYW 15-24 years in KwaZulu-Natal

Most of the sample of AGYW in KZN
were unemployed and had no income

15% of recently pregnant AGYW in KZN
were students/learners

	Pregnant currently or in past 24 months in KZN	
Employment status (N=760)	Not pregnant	Yes pregnant
unemployed	58.6 [50.4-66.4]	79.2 [72.3-84.8]
employed	13.5 [8.3-21.2]	5.6 [3.0-10.5]
student/learner	27.9 [20.5-36.7]	15.1 [9.9-22.3]

p<0.001

Data source: 2017 South African national HIV prevalence survey

Demographics

AGYW 15-24 years in KwaZulu-Natal

Main income source in past month (N=770)	Pregnant currently or in past 24 months	
	No	Yes
No income	71.3[63.1-78.3]	61.5[51.8-70.4]
Salary/earnings	12.4[7.6-19.7]	5.6[2.9-10.4]
Contributions by family members/relatives	5.9[2.9-11.6]	3.7[1.5-9.1]
Government pensions/grants	3.2[1.7-5.9]	14.4[8.4-23.3]
Grants/donations by private welfare organizations	6.8[4.1-11.0]	14.4[8.2-24.1]
Other sources	0.5[0.2-1.2]	0.5[0.2-1.3]

AGYW in KZN who had salary/earnings

Significantly fewer pregnant AGYW received support in the form of salaries & earnings than AGYW who did not have a recent pregnancy

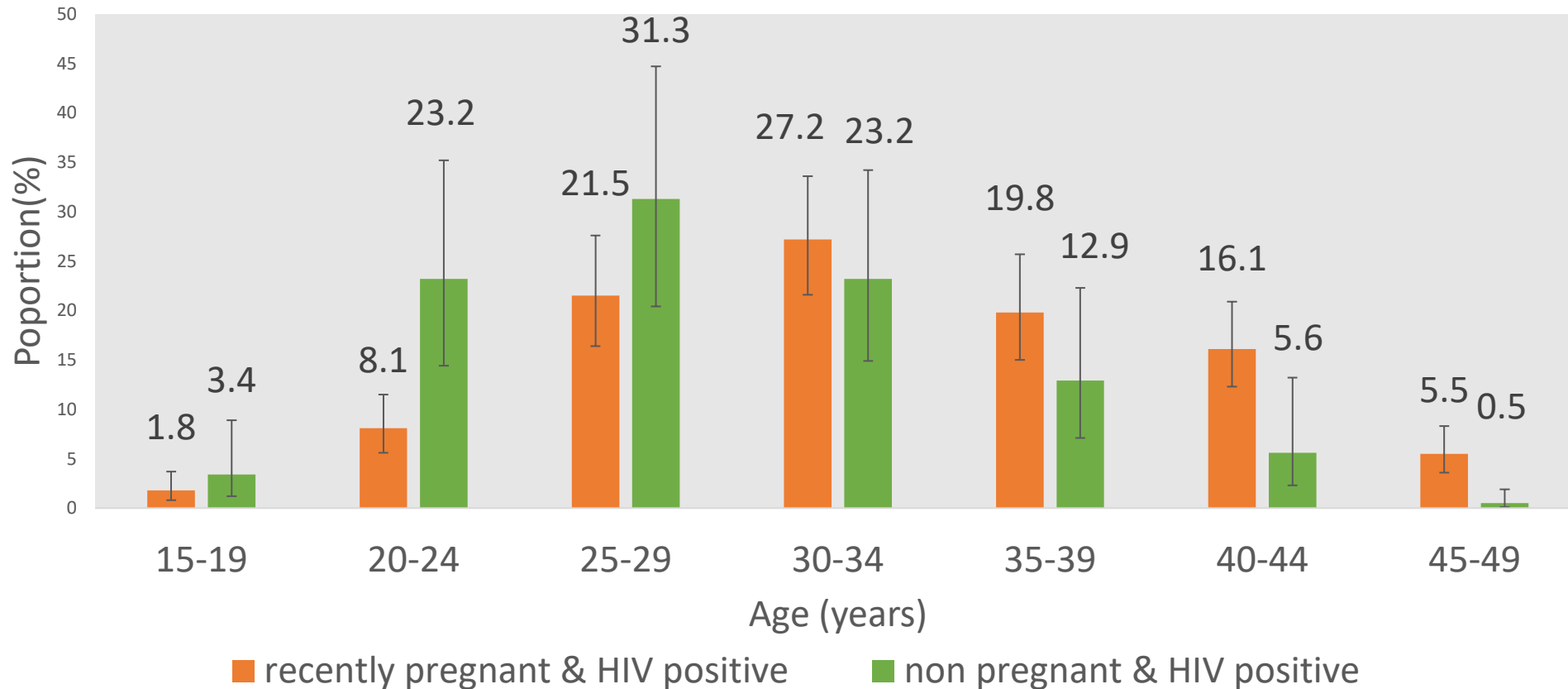
AGYW in KZN who relied on government pensions/grants or grants/donations from welfare organisations

More recently pregnant AGYW received government pensions and grants or grants/donations from welfare organisations than AGYW who did not have a recent pregnancy

p=0.001

Data source: 2017 South African national HIV prevalence survey

HIV status by age among AGYW in KZN



p<0.001

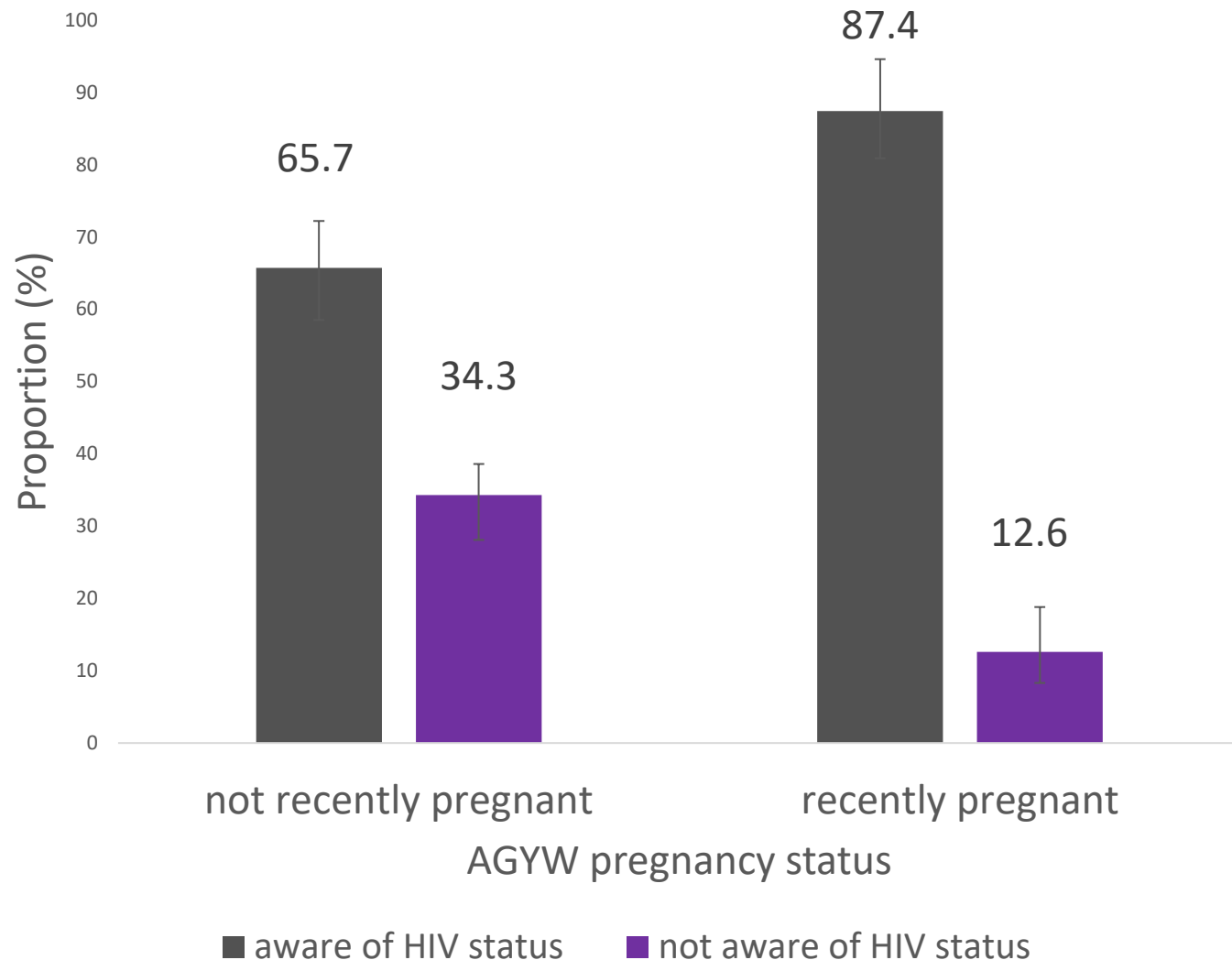
About 10% of recently pregnant AGYW aged 15-24 years in KZN were HIV positive

Awareness of HIV status

✓ Most [87.4%, 95% CI 81.2-91.7] recently pregnant AGYW in KZN were aware of their HIV status.

✗ Among AGYW in KZN who did not report a recent pregnancy, 34.3% [95% CI 27.8-41.5] did not know their HIV status.

AGYW in KZN 15-24 years



Data source: 2017 South African national HIV prevalence survey

N= 763
p<0.001

Risky Sexual Behaviour: condom use with main sex partner

Question to participant:

How often do you use a condom with your partner?

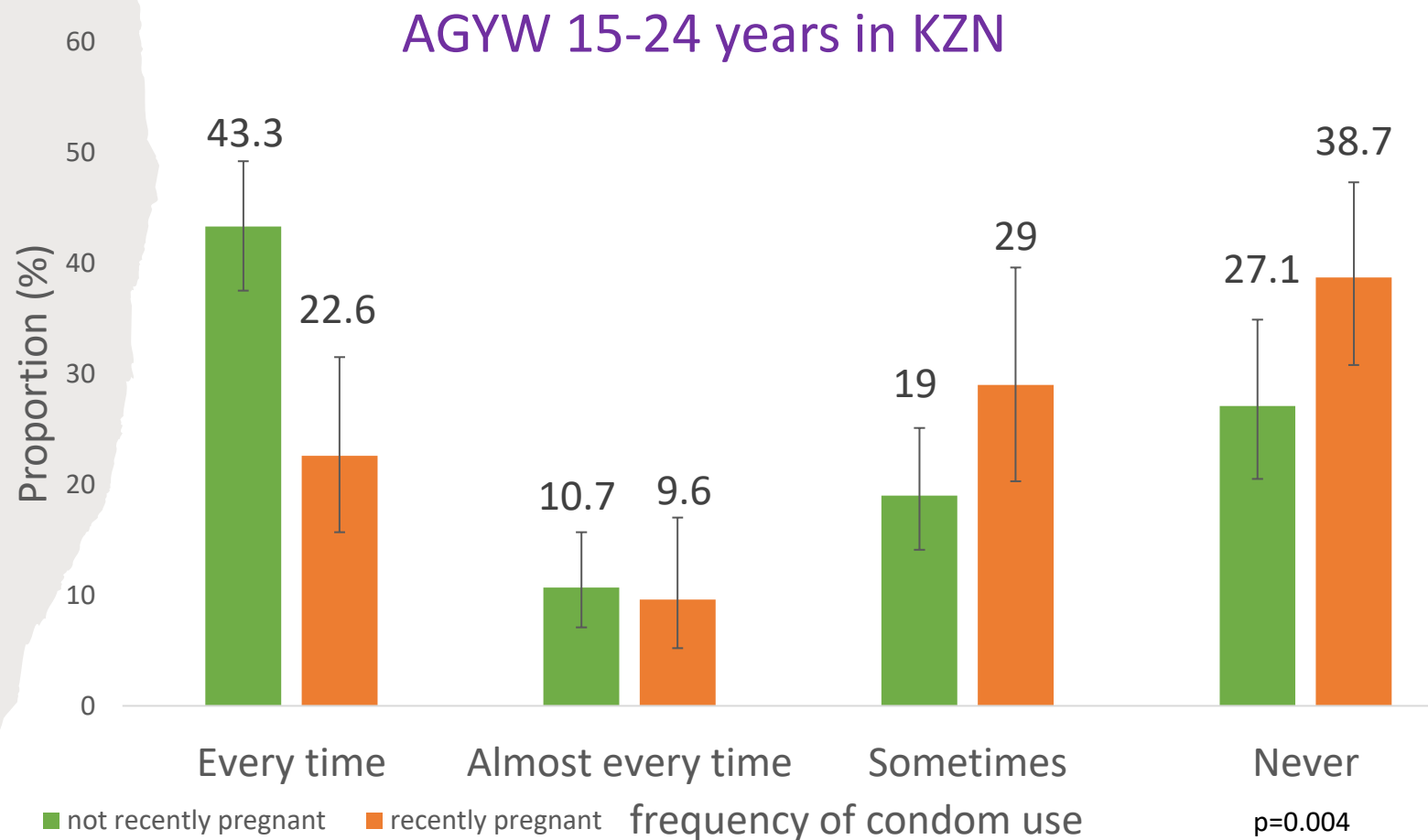
Response options:

every time/almost every time/
sometimes/never

Inconsistent condom use was reported as follows:

29.0% [95% CI 20.3-39.6] of recently pregnant AGYW in KZN reported they **used a condom sometimes** with their partner compared to 19.0% [95% CI 14.1-25.1] among AGYW who did not report a recent pregnancy.

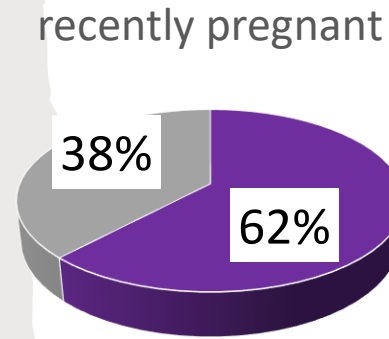
38.7% [95% CI 30.8-47.3] of recently pregnant AGYW said they **never used a condom** compared to 27.1% [95% CI 20.5-34.9] of AGYW who did not report a recent pregnancy.



Risky Sexual Behaviour: condom use at last sex

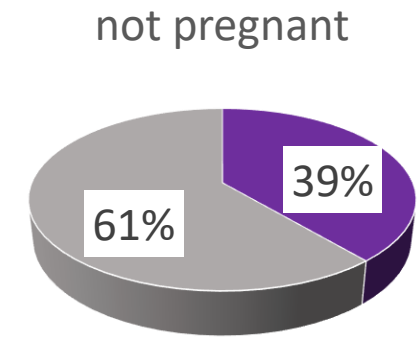
Question to participant:
Did you use a condom at last sex?

AGYW 15-24 years in KZN



■ did not use a condom at last sex
■ used a condom at last sex

p<0.001



■ did not use a condom at last sex
■ used a condom at last sex

Lack of condom use at last sex was reported as follows:

62% [95% CI 52.2-70.9] of recently pregnant AGYW in KZN reported a lack of condom use at last sex

38.8% [95% CI 32.3-45.8] of non pregnant AGYW in KZN reported a lack of condom use at last sex

Reasons for not using a condom

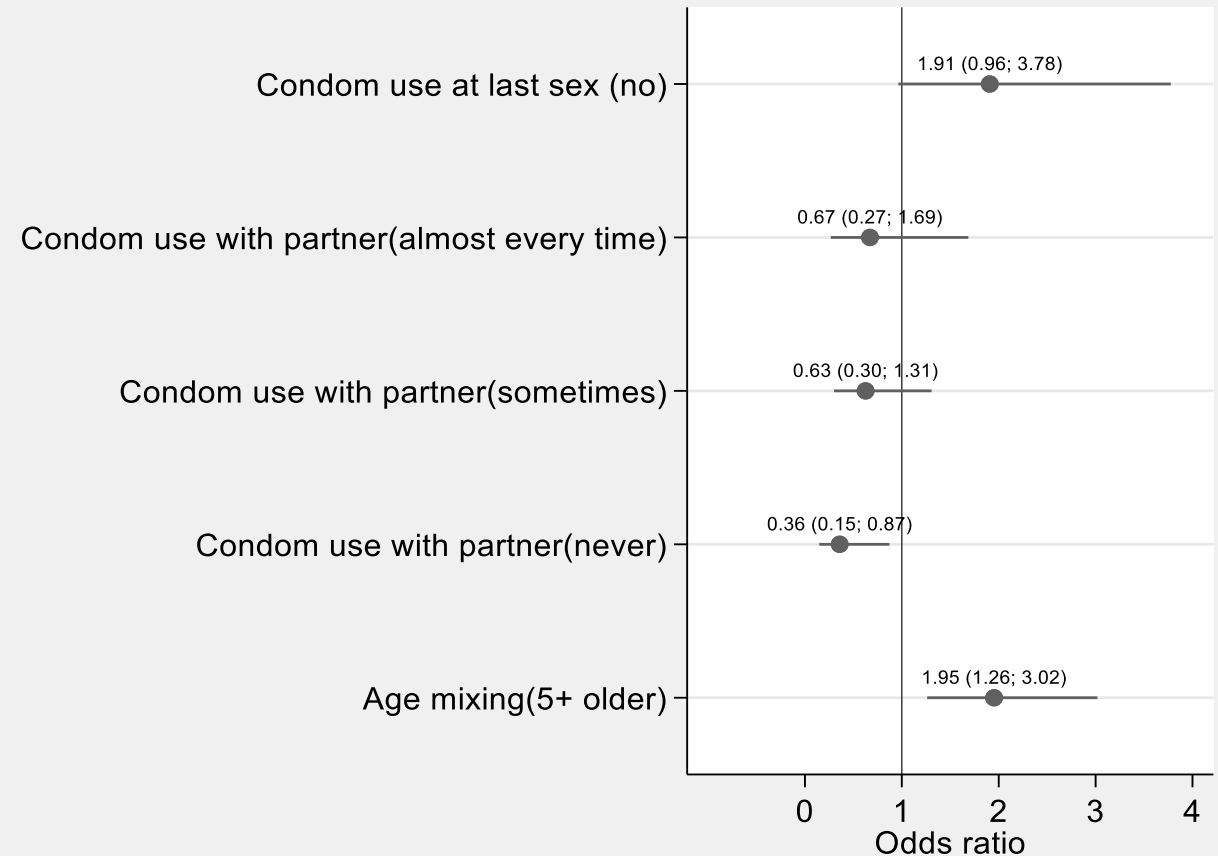
Among recently pregnant AGYW in KZN:

- about one fifth [20.6%, 95% CI 13.5-30.1] said they did not have a condom
- 27.4% [95% CI 18.8-37.9] said their partner objected to using a condom
- 29.9% [95% CI 19.9-42.3] indicated they were faithful and trusted their partners
- 13.2% [95% CI 7.2-22.8] thought condoms were not necessary

p=0.007

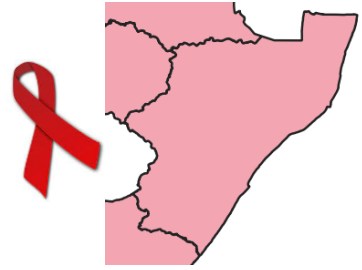
Results Multivariate: recently pregnant AGYW

Variable	Pregnant AGYW (15-24 years)		
	aOR	95 % CI	p value
Education			
tertiary education	<i>ref</i>		
no formal schooling	3.33	0.30-36.51	0.325
primary school	5.21	0.56-48.36	0.146
some secondary school	1.86	0.23-15.36	0.564
completed secondary school	2.05	0.25-17.01	0.507
Main income source in past month			
salary/earnings	<i>ref</i>		
no income	1.81	0.60-5.44	0.288
contributions by family members/relatives	2.20	0.51-9.47	0.289
government pensions/grants	1.90	0.56-6.37	0.301
grants/donations by private welfare organizations	2.53	0.69-9.30	0.163
other sources	2.93	0.62-12.89	0.175
How often do you use a condom with your partner?			
every time	<i>ref</i>		
almost every time	0.67	0.27-1.69	0.396
sometimes	0.63	0.30-1.31	0.212
never	0.36	0.15-0.87	0.024*
Condom use at last sex			
yes	<i>ref</i>		
no	1.91	0.96-3.78	0.064
Age mixing			
< 5 year age gap (five years younger or older)	<i>ref</i>		
≥ 5 year older age gap	1.95	1.26-3.02	0.003*
Multiple partners			
1 partner	<i>ref</i>		
two or more	1.23	0.50-3.08	0.637
Age at sexual debut			
≥15 years	<i>ref</i>		
<15 years	1.16	0.05-0.52	0.727



Lack of condom use with a partner and being in an age disparate relationship increased likelihood of being HIV positive among pregnant AGYW

Key findings



Risky sexual behaviours were associated with being HIV positive among recently pregnant AGYW aged 15-24 years

Lack of condom use, and having age disparate relationship (partner \geq five years older) = risky behaviours among pregnant AGYW

Recommendations

- Interventions aimed at addressing pregnancy prevention & HIV prevention strategies among AGYW should highlight the risk associated with **AGYW having age disparate relationships**
- HIV interventions for **youth should be tailored by age (10-14, 15-19, 20-24 years)** to address the differential risk behaviours associated with HIV acquisition & social environments.
- Messaging about **consistent condom use** needs to be reinforced and **supported by accessibility to condoms** and **PrEP** for AGYW.
- Messaging should include the **advantages of testing for HIV, knowing their HIV status and adding PrEP** to their personal prevention strategy, coupled **with consistent condom use**.
 - These strategies should be promoted even for AGYW in established relationships & for AGYW using other contraception methods & if currently pregnant.

#age disparate

#adolescents
#one size does not fit all

#consistent condom use

Recommendations

- Unemployment & receiving support from government grants was higher among recently pregnant AGYW compared to AGYW not pregnant; this is consistent with findings on teenage & youth pregnancies being more prevalent in low socio-economic contexts. Therefore, addressing social & structural drivers need to be prioritized.
- These results affirm the need for interventions to improve sexual education, contraception education, access & consistent use, retainment in school, & poverty alleviation, to be targeted & tailored for AGYW living in low socio-economic contexts.

Thank you



Zungu, N., Naidoo, I., Hodes, R., North, A., Mabaso, M., Skinner, D., Gittings, L., Sewpaul, R., Takatshana, S., Jooste, S., Moyo, S., Ramlagan, S., Cloete, A., Toska, E. & ALHIV, team. (2021) Adolescents living with HIV in South Africa. Pretoria: Human Sciences Research Council.

<http://hdl.handle.net/20.500.11910/16404>

https://www.researchgate.net/publication/354543506_Adolescents_living_with_HIV_in_South_Africa