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**Access to contraception services among HIV- positive and HIV- negative adolescent girls and young women in South Africa**

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**Objective**

Among adolescent girls and young women (AGYW), access to contraceptive services and use of contraceptives is important to prevent unintended pregnancies. Unintended pregnancies among AGYW is one of the major contributors to maternal and child morbidity and mortality rates with psychosocial consequences such as early school dropout resulting in a cycle of poverty. Unintended pregnancy among AGYW living with HIV is associated with a high risk of mother-to-child transmission of HIV, particularly among adolescents aged 15-19 years. Between 2016-19, a combination HIV-prevention package of interventions for AGYW, funded by the Global Fund, was implemented in ten South African districts with a high burden of HIV. The HERStory Study evaluates the impact of the combination HIV-prevention package on HIV incidence and HIV risk. We investigated and compared use of contraceptives and condoms among AGYW living with and without HIV.

**Methods**

As part of the HERStory Study, we conducted a household survey among AGYW aged 15-24 years living in six of the intervention districts. HIV status was laboratory tested and use of contraceptives was based on self-report. Cross-tabulations of unweighted data were performed to compare access to contraceptive services and use of contraceptives among AGYW living with and without HIV, using Chi-square test statistics to determine statistical differences.

**Results**

The sample included 4622 AGYW, mean age 19.1 years (standard deviation, 2.8). Two thirds of the sample, 3128 (66.5%) reported that they had ever had sex, and these are the participants included in the analysis reported here. Among these AGYW, 518 (16.6%) were living with HIV. Over half of participants who had ever had sex, reported prior pregnancy 1689 (54.0%), and 72.4% of first pregnancies were unintended. Prior pregnancy was more common among AGYW living with HIV (66.0%) compared with HIV-negative AGYW (51.6%),  $p < 0.01$ . AGYW living with HIV were less likely to report not having had access to contraceptive services in the past year (37.6%), compared with HIV-negative AGYW (44.2%),  $p = 0.03$ . AGYW living with HIV were more likely to report contraceptive use at last sex (37.8%), compared with HIV-negative AGYW (29.0%),  $p = 0.01$ . Condom use at last sex was reported by 52.7% of AGYW living with HIV, compared with 53.5% of HIV-negative AGYW ( $p = 0.91$ ). AGYW living with HIV were

more likely to report dual protection at last sex (39.0%) (condom use plus another method of contraception), compared with HIV-negative AGYW (29.2%;  $p = 0.04$ ).

### **Discussion**

The findings suggest that access to contraceptive services and use of contraceptive services among AGYW is low and that there is a high unmet need for contraceptives services. The use of dual protection is sub-optimal. AGYW urgently need additional programming to support uptake and use contraception services to prevent HIV acquisition, onwards horizontal and vertical transmission of HIV, and unintended pregnancies.