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Adolescent sexual and reproductive health project

Submission date	**Recruitment status**	[_] Prospectively registered
17/03/2024	No longer recruiting	[X] Protocol
Registration date	**Overall study status**	[_] Statistical analysis plan
20/03/2024	Completed	[X] Results
Last Edited	**Condition category**	[X] Individual participant data
04/06/2026	Other	

Plain English summary of protocol

Background and study aims

It is estimated that about 2 in 10 young women will become pregnant before 18 years of age worldwide. West Africa has the highest proportion of adolescent pregnancies (28%). These pregnancies are often unintended and impact negatively on the well-being of mother and child. The gap between sexual intentions and contraceptive behaviour (unmet need for contraceptives) is high among adolescents in Nigeria. There has been heightened awareness and action towards adolescent reproductive health in Nigeria. Nevertheless, the need to close the widening gap between sexual behaviour and contraceptive intentions still persist. This calls for well-designed interventions that draws from participation of all stakeholders to ensure ownership and sustainability, as well as set the pace for adolescent health action at subnational levels in Nigeria. The general aim of this study is to adapt, implement and evaluate an inclusive community-embedded intervention program to address unmet contraceptive need of adolescents in Ebonyi state.

Who can participate?

The study population are adolescents (males and females) ages 13-18 years in and out of secondary schools in rural and urban areas of Ebonyi state, Nigeria; parents and guardians of adolescents; and health professionals.

What does the study involve?

The study involved a situation analysis will be conducted to assess the SRH needs of adolescents. A comprehensive mapping of health determinants during the situation analysis and consultation with stakeholders resulted to the design and implementation of a multi-component intervention comprising, (i) Training of primary health care workers, community health workers and patent medicine providers to ensure that adolescents have access to quality SRH services; (ii) School-based interventions - peer education and school health club - to ensure that adolescents have access to and receive accurate information on SRH; and (iii) community sensitization campaigns - including media campaigns - to ensure community support for adolescent SRH, and promote parent-child communication of SRH matters.

What are the possible benefits and risks of participating?

The risk to human subjects from participating in the interviews was minimal. Participants that

were concerned about the confidentiality of the information they provide, or those who experienced discomfort when responding to sensitive questions about sexual behaviour were managed well. Interviewers reminded participants that they could skip questions that cause discomfort and terminate the interview at any stage. Participants benefitted directly or indirectly from the interventions that were designed and implemented in their communities.

Where is the study run from?
The study was run from Health Policy Research Group in Ebonyi State, Nigeria.

When is the study starting and how long is it expected to run for?
March 2018 to March 2022

Who is funding the study?
International Development Research Centre, Canada

Who is the main contact?
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Additional identifiers

Protocol serial number
108677-001

Study information

Scientific Title
Addressing unmet need for contraceptives among adolescents using a community-embedded intervention in Ebonyi state, Nigeria

Acronym
ASRH

Study objectives
Multicomponent community-embedded interventions improve access to sexual and reproductive health information and health services for adolescents.

Ethics approval required
Ethics approval required

Ethics approval(s)
Approved 13/03/2018, Health Research Ethics Committee, University of Nigeria Teaching Hospital (Enugu Port-Harcourt Expressway, Ituku-Ozalla, Enugu, 400001, Nigeria; +234 (042) 252022; cmdunth2011@yahoo.com), ref: UNTH/CSA/329/OL..5

Primary study design
Interventional

Study design
Non-randomized before and after intervention study

Study type(s)
Prevention

Health condition(s) or problem(s) studied

Sexual and Reproductive Health

Interventions
1. Community-based interventions - (i) Training of formal and informal healthcare providers on the provision of adolescent-friendly sexual and reproductive health services; (ii) Community sensitization on the SRH needs and rights of adolescents - involving community leaders, parents and caregivers of adolescents
2. School-based interventions - (i) Establishment of school health clubs in public secondary schools; (ii) Training of peer health educators and teachers on the SRH needs and rights of adolescents; (iii) Distribution of IEC materials to secondary school students through the school health clubs.

Intervention Type
Behavioural

Primary outcome(s)
Unplanned pregnancies among adolescents measured using a questionnaire at baseline and endline

Key secondary outcome(s)
1. Contraceptive prevalence rate among adolescents measured using a questionnaire at baseline and endline
2. Availability and provision of contraceptives and other SRH services for adolescents in primary health centers measured using data collected in patient notes at the end of the study
3. Availability and provision of contraceptives and other SRH services for adolescents in patent medicine stores measured using data collected in patient notes at the end of the study

Completion date
31/03/2022

Eligibility

Key inclusion criteria
1. Health professional - primary care providers of SRH services including frontline providers in primary health centers (formal providers), community health workers and patent medicine vendors (informal providers)
2. Learner/students - secondary school students in public/government-owned secondary schools
3. Population - community leaders and representatives, parents and guardian of adolescents aged 10-18, adolescents in communities
4. Service user - adolescents aged 13-18 years accessing SRH services from primary health centers, community health workers, and patent medicine vendors

Participant type(s)
Health professional, Learner/student, Population, Service user

Healthy volunteers allowed
No

Age group
Mixed

Lower age limit
13 Years

Upper age limit
65 Years

Sex
All

Total final enrolment
1763

Key exclusion criteria
1. Adults and adolescents who had cognitive disabilities that preclude them from consenting or giving assent. Cognitive and other disabilities were assessed on a case-by-case basis.
2. Adolescents aged 13-14 years who were no longer under the care of a parent/guardian

Date of first enrolment
01/08/2018

Date of final enrolment
14/06/2021

Locations

Countries of recruitment
Nigeria

Study participating centre
Health Policy Research Group
13/15 Leach Road
Abakaliki
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Sponsor information

Organisation
University of Nigeria

ROR
https://ror.org/01sn1yx84

Funder(s)

Funder type
Government

Funder Name
International Development Research Centre

Alternative Name(s)
Centre de recherches pour le développement international, IDRC.CRDI, le Centre de recherches pour le développement international (CRDI), el Centro Internacional de Investigaciones para el Desarrollo (IDRC), International Development Research Centre: IDRC, El Centro Internacional de Investigaciones para el Desarrollo, IDRC, CRDI

Funding Body Type
Government organisation

Funding Body Subtype
National government

Location
Canada

Results and Publications

Individual participant data (IPD) sharing plan
The datasets generated and/or analyzed during the current study have been stored in a publicly available repository (UK Data Service https://doi.org/10.5255/UKDA-SN-854374)

IPD sharing plan summary
Published as a supplement to the results publication

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article		22/04/2024	04/06/2026	Yes	No
Dataset			18/03/2024	No	No
Participant information sheet			20/03/2024	No	Yes
Protocol file			20/03/2024	No	No