Applying Innovation in FP Counselling: Results from A360 Amplify Matasan Matan Arewa Implementation of Counseling for Choice to Improve Contraceptive Adoption and Continuation among Married Adolescent Girls (15-19 years) in Northern Nigeria

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Abstract: Introduction: Contraceptive use has numerous health benefits such as preventing unplanned pregnancies thereby supporting women to achieve their life goals, maintaining the ideal amount of time between pregnancies, lowering the death rate for both mothers and children and generally enhancing the lives of women and children. Despite the numerous advantages of modern contraception and numerous initiatives by the government and development partners to promote its adoption, Nigeria's use of these methods has remained persistently low. Counseling about contraception is essential to providing highquality treatment ensuring informed choice, and voluntarism for family planning is the key. The goal of the contraceptive counseling approach known as Counseling for Choice (C4C) is to ensure that people have the agency and voice to choose the contraceptive methods that best suit their requirements by altering the way both clients and providers engage in family planning counseling sessions. Aim: To evaluate the effect of counseling for choice on Modern Contraceptive adoption and continuation among married adolescent girls aged 15-19 years in 61 health facilities, within a 6-month period in Northern Nigeria. Methodology: Data from the NDHIS was obtained from selected facilities Pre & Post commencement of C4C intervention from 36 facilities Kaduna and 25 Nasarawa Matasan Matan Arewa (MMA) core implementation states putting into consideration the specific period of initiation of intervention, six months after deployment of the C4C, data was obtained from these facilities for post analysis. Data was analyzed on SPSS using paired sample t-test. Result: C4C resulted to improved access to FP services via increasing contraceptive adoption and continued used by 15% and 27% respectively (p<0.05) in Nasarawa state. While in Kaduna state we observed 11% and 28% improvement in adoption and continued use respectively as well with statistical significance (p<0.05) depicting that the increase is highly correlated (0.99 Nasarawa and 0.75 Kaduna) with the C4C intervention where the provider uses the NORMAL AND 3Ws Rubric to explain to the client in a simplified manner what to do with chosen method, what to expect with her method of adoption and when to return for a refill. Conclusion: In Northern Nigeria, it was observed that most clients discontinue their methods due to bleeding side effect and that was related to lack of appropriate and comprehensive information during counselling about what to expect with the clients method of adoption but with the intervention of the program, through capacity strengthening of PHC providers on counselling skills using the Counselling for Choice, it has helped to improve modern contraceptive uptake among young married women in northern Nigeria.

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