

MIDWIVES PRACTICE IN ADOLESCENT GIRLS' SEXUAL AND REPRODUCTIVE HEALTH SERVICES IN ETHIOPIA

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ABSTRACT

BACKGROUND: Comprehensive sexual reproductive health care services deliveries for adolescent girls' were alarmingly below standard, need providers' competency. The standard approves midwives' practices on sexual reproductive health care services for women and adolescent girls. Assign competent midwives at all levels of care 24 hour /7 days provide high impact and low-cost interventions. Despite that midwives potential contribution in adolescent girls' sexual reproductive health care services is not realized.

PURPOSE: The aim of the study was to assess the midwives' practices in adolescent girls' sexual reproductive health care services in public health facilities of Addis Ababa, Ethiopia.

METHODS: A cross-sectional quantitative study design with random sampling technique was used. Data were collected from a total of 533 midwives using structured self-administered questionnaires, Data was captured and entered into EPI INFO version 7 and analyzed with STATA version 14. Both descriptive and inferential statistics were done. Bivariate and multivariate logistic regressions were done to identify factors associated with midwives practices on ASRH services. Ethical clearance was obtained from the University of South Africa and Addis Ababa Regional Health Bureau.

RESULTS: Of midwives, 396 (74.3%) were females, 376(71.0%) were highest attained diploma level of education and 473(89.1%) were currently working in health centre. About 82(15.4%) midwives provided information and counselling care for adolescent girls, 214(40.2%) provided contraceptive services, 121(22.7%) provided comprehensive abortion care and 194(36.4%) provided prevention and treatment for STI and HIV. Working in health centre ($P= 0.001$), available contraceptive ($P =0.001$), received in-service training ($P=0.001$), had guideline ($P=0.001$) and confident on competency ($P= 0.03$) have significant association.

CONCLUSIONS: Midwives practice on adolescent girls' need competency of midwives and work environment, such as working in health centre, having guideline and supply and

received in-service training are positive predictor. Midwives-lead model of care should be implemented.

KEYWORDS: Adolescent girls, continuity of care, health service, midwives' practices, midwifery-lead model, sexual reproductive health.