

PMA AGILE-YRDSS/CÔTE D'IVOIRE

Sexual/Reproductive Health Autonomy and Relationship Power Dynamics among Adolescents and Young Adults

Background

Youth are a high-risk population for relationship violence, which in turn can impart risk for early and unintended pregnancy as well as sexually transmitted infections and other aspects of poor physical and mental health. The data presented here are from the 2018 Youth Respondent-Driven Sampling Study (YRDSS), a survey of 2,068 unmarried youth aged 15 to 24 years living in Abidjan, Côte d'Ivoire. YRDSS used respondent-driven sampling (RDS) methodology and was conducted by PMA Agile and the Association Ivoirienne pour le Bien-Etre Familial (AIBEF). PMA Agile typically monitors contraception uptake via clinic-based surveys of providers and clients; however, it is expected that unmarried youth and adolescents may be procuring contraceptives via other means, making their use effectively "hidden" from clinic staff and compromising the accuracy of clinic-based survey measures. In addition to contraceptive knowledge, use, and behaviors, YRDSS also explored relationship power dynamics, including threats to sexual or reproductive autonomy.

Results

Participants were questioned about their ability to negotiate sex and contraceptives with their current partner, which found high rates of individual control. Among sexually active participants who reported that they have a partner (n=1104), 62.5% reported that they felt "capable" or "very capable" of negotiating sex with their partner; this was slightly higher among female respondents (66.7%) than male respondents (58.3%) [Fig. 1]. More respondents (83.5%) felt "confident" or "very confident" using contraception with their partner: 84.9% of males and 82.0% of females [Fig. 2].

Figure 1

"If I do not want to have sex with my partner, I am capable of avoiding it"

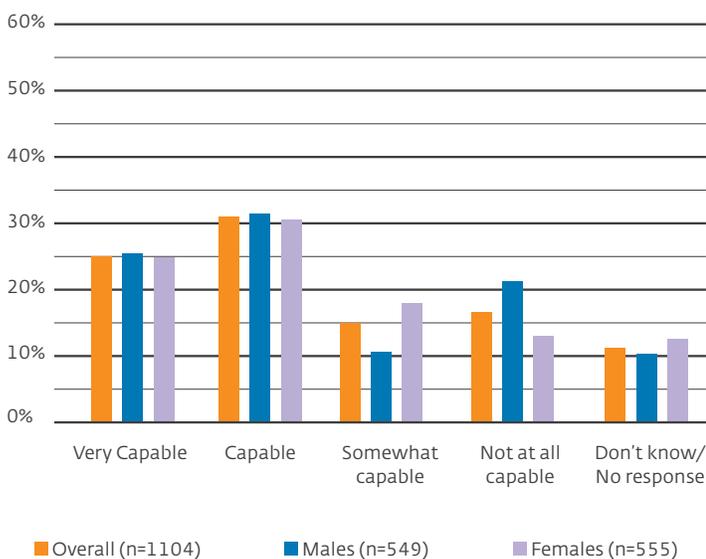
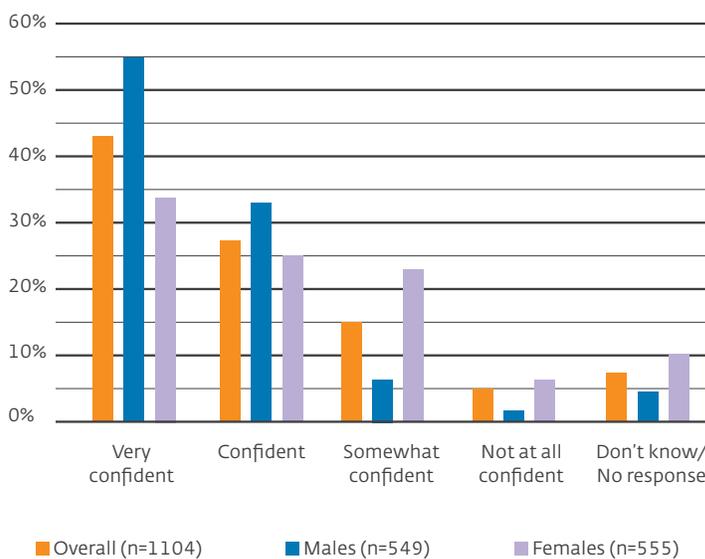


Figure 2

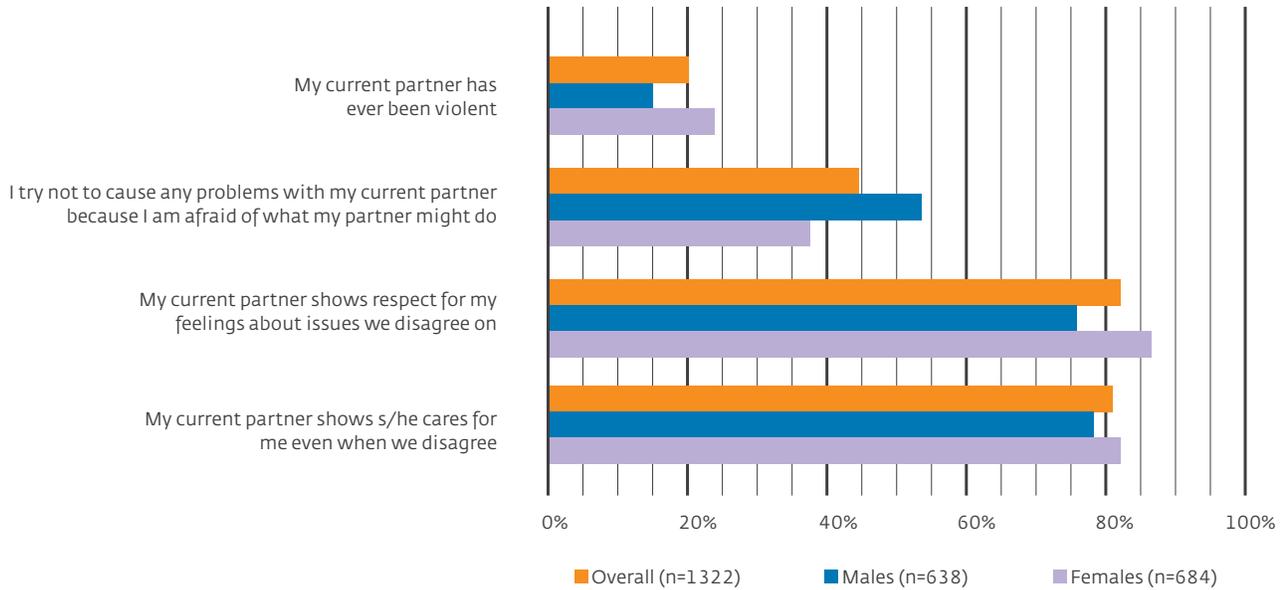
"If I want to use contraception with my partner, I can."



Beyond the person's capacity to negotiate sex or contraceptive use in their relationship, all participants who reported having a current partner were asked about different emotions and scenarios they may feel towards and face with their partner. *Figure 3* shows participant responses for different indicators of relationship health, including experience of partner violence and expressions of care and respect in times of disagreement.

Figure 3

Relationship Health Indicators



Among all respondents who reported having a current partner, 80.9% felt that their current partner shows that they care even when they disagree, 82.1% felt that their partner shows respect for their feelings about issues they disagree on, while 44.7% reported that they try not to cause problems because they are afraid of what their partner might do [Fig. 3]. Among females, 24% reported violence from their current partner.

Table 1 displays indicators of reproductive coercion and transactional sex as contexts that can compromise autonomy. About one-fifth of female respondents reported that any partner, past or current, had ever pressured them not to use birth control and 32.1% reported that a partner had agreed to use a condom and then removed it during sex. A higher percentage of male respondents (46.9%) reported that they had agreed to use a condom and then removed it during sex. Both male and female respondents reported ever receiving something in exchange for sex (22.1% and 9.4%, respectively). More males reported ever giving something in exchange for sex (37.9%) than females (4.6%). Responses for what was exchanged for sex included money, food, gifts, safety, and shelter.

TABLE 1. REPRODUCTIVE AND SEXUAL COERCION, AND TRANSACTIONAL SEX AMONG ALL SEXUALLY ACTIVE RESPONDENTS

	Males (N=741)		Females (N=636)	
	N	% [^]	N	% [^]
Has a partner ever pressured you not to use birth control, taken your birth control (like pills) away from you, or kept you from going to the clinic to get birth control?	NA	NA	96	17.6%
Has a partner ever agreed to use a condom and then removed it during sex?	NA	NA	237	32.1%
Have you ever agreed to use a condom then removed it during sex?	300	46.9%	NA	NA
Ever received something in exchange for sex	122	22.1%	102	9.4%
Ever provided something in exchange for sex	190	37.9%	43	4.6%

[^]All percentages shown are weighted for RDS design in addition to a post-estimation weight

Implications

Healthy relationship dynamics can create enabling environments for overall sexual and reproductive health, including contraceptive use. By contrast, power imbalances and coercive practices can sabotage health and wellness. While it is encouraging that 82% and 81% of young people feel respected and cared for in their relationships, respectively, and over 70% feel confident in avoiding unwanted sex and using family planning, the 54% of men and 38% of women who expressed fears of their partner are cause for concern. Moreover, a quarter of women and 15% of men reported that their partner had ever been physically violent with them. Family planning providers and other professionals working with youth should be aware of the risk of relationship violence and reproductive coercion which can stymie effective, consistent family planning use. Condom removal undermines contraceptive delivery and STI/HIV prevention efforts, particularly among youth who

rely heavily on condoms as a method of dual protection. Providers whose patients report condoms as the primary method of contraception should probe for coercive condom practices including removal. Patients may wish to consider more efficacious methods, including woman-controlled contraception.

Providers can learn more about identifying and responding to harmful relationships via the WHO clinical and policy guidelines, “Responding to intimate partner violence and sexual violence against women” (WHO, 2013).ⁱ



About PMA Agile YRDSS/Côte d’Ivoire

PMA Agile is a project within Performance Monitoring and Accountability 2020 (PMA2020) suite implemented by the Gates Institute at Johns Hopkins University’s Bloomberg School of Public Health, in collaboration with local research institutes and universities in PMA Agile geographies. PMA Agile seeks to establish an adaptable, replicable M&E platform for application at critical levels of program implementation, including the collection and use of routine and survey data sources that can provide rapid feedback and is cost-effective. The Youth Respondent-Driven Sampling Survey (YRDSS) was implemented in collaboration with the Association Ivoirienne pour le Bien-Etre Familial (AIBEF) in Abidjan with unmarried youth aged 15-24 years. YRDSS used respondent-driven sampling (RDS) methodology, a chain-based recruitment method in which study participants recruit their peers through numbered coupon distribution. Overall direction and support were provided by the Bill & Melinda Gates Institute for Population and Reproductive Health at the Johns Hopkins Bloomberg School of Public Health. YRDSS was supported through funds provided by the Bill & Melinda Gates Foundation. The final sample included 2068 youth. Data collection was conducted between August and November 2018. All results are weighted for RDS design, with a post-estimation weight for comparability with the underlying population of youth ages 15-24 in the study area.

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JOHNS HOPKINS
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ⁱWorld Health Organization. (2013). Responding to intimate partner violence and sexual violence against women: WHO clinical and policy guidelines. Geneva: World Health Organization. Retrieved from https://apps.who.int/iris/bitstream/handle/10665/85240/9789241548595_eng.pdf;jsessionid=FB75E45F96D5FDA8308A6D94EA6D2F35?sequence=1.