Prevalence of mental health and social well-being issues among pregnant adolescent girls and young women in western Kenya

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Background: Pregnant adolescents and young women (AGYW) in regions of high HIV prevalence are at risk of acquiring HIV. These women experience complex challenges in their lives including depression, partner violence and alcohol use. Despite this, research done to address mental health issues of this vulnerable group remains minimal. We determined prevalence of depression, intimate partner violence (IPV) and availability of social support among pregnant AGYW participating in a Pre-exposure prophylaxis (PrEP) implementation study in Western Kenya.

Materials & Methods: The PrEP Implementation for Mothers in ANC (PrIMA) study is an ongoing cluster-RCT (NCT03070600) which tests models for PrEP delivery among pregnant women in 20 clinics. At enrollment, depression was assessed using the Center for Epidemiologic Studies of Depression-10 scale (moderate to major depression symptoms, score ≥10), individual’s HIV risk perception using the Perceived Risk of HIV Scale (dichotomized at mean), experience of IPV using Hurt, Insult, Threaten, Scream (HITS) scale (IPV defined as HITS score ≥6), alcohol use (≥2 drinks at one time in last month) and availability of social support using Medical Outcome Social Support survey (dichotomized at the mean). Data included in this analysis was collected between January 2018 and May 2019. We evaluated HIV risk perception, depressive symptoms, IPV, alcohol use and social support among pregnant HIV-negative AGYW age 15-24 years.

Results: Overall, 2041 AGYW were enrolled with median age of 21 (IQR: 19, 22) years and gestational age 24 (IQR: 20, 30) weeks, number of complete years in school was 10 (IQR: 8, 12) and 164 (8%) of them reported to having regular employment. Most were married 1501 (74%); 129 (9%) were in polygamous marriages. Moderate to major depressive symptoms were reported among 783 (44%). Participants with depression symptoms were more likely to report higher perceived HIV risk (49% vs 32%, p<0.001). Frequency of IPV (10% vs 3%, p<0.001) was also higher among participants with depression symptoms than among those without. Social support availability was lower among those with depression symptoms (41% vs 57%, p<0.001).

Conclusions: Depression symptoms were common among pregnant AGYW in Western Kenya and were associated with higher HIV risk perception and IPV, and lower availability of social support. Integrating social and mental health care within existing health systems frequently used by AGYW will be key in addressing the burden of depression.