



# Policy Brief:

## The Role & Inclusion of Youth in Efforts to End Teenage Pregnancy and Child Marriages



### Introduction

Youth are not only the inheritors of the world tomorrow but they are the shapers of the world today. With over 1.6 billion people between the ages of 15 and 24 years, world over, it is prudent and crucial that their potential is harnessed and that they are meaningfully engaged in finding solutions to the issues that affect them.

Youth in Uganda are defined as individuals between the ages of 18 to 30 years old. Young people below the age of 30 years make up 78% of Uganda's population, of these, 22.5% are between the age of 18 and 30 years. As the demographic majority, they are both at risk and are victims of various sexual reproductive health issues due to high risk taking behaviour, exploration and experimentation that expose them to alcohol and drug abuse; that may alter and affect appropriate decision-making processes, and that may lead to risky sexual behaviours resulting into unwanted pregnancy, early marriages and HIV/STIs.

Uganda's teenage pregnancy rate is one of the highest in Sub-Saharan Africa having stagnated at 25% in the last decade. Recent data review of the District Health Information Systems (DHIS II) by UNFPA revealed that the onset of the COVID-19 pandemic brought with it increased rates of teenage pregnancies with up to over 50% increase in teenage pregnancies in some districts (Namisindwa in Bugisu Region; Amudat in Karamoja Region and Kitagwenda in Tooro/Rwenzori Region). Countrywide, data revealed that there were over 31,565 teenage pregnancies being reported every month in 2021. In regard to child marriage, Uganda has one of the highest rates in East Africa standing at 34%; which puts Uganda at the 14th highest percentile rate among 25 countries surveyed

in the world. According to UNICEF, Uganda is home to over 5 million child brides. 2016 UBOS data states that over 48% of women got married before the age of 18 years. Worth noting is that the disparities between early marriage, early childbearing and timing of first contraceptive use between women in urban and rural areas is large.



Teenage pregnancy is responsible for nearly **1/5 (ONE-FIFTH)** of the annual births in Uganda.

Source: UNFPA, 2020

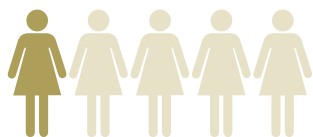
Youth in Uganda are most directly affected by increased numbers of teenage pregnancies; especially as being victims of these issues. Despite this, studies have revealed minimal meaningful participation of youth in key adolescent health processes and decision making around country strategies to address the issues that they face.

By definition, meaningful youth participation includes seeking information, expressing ideas, taking an active role in different steps of the process of creating a policy or program, being informed and consulted on decisions concerning public interest, analyzing situations and even making personal choices. For youth to have meaningful input into solutions to issues like teenage pregnancies and child marriages, it is important that they are engaged at all levels and treated as agentic decision makers and not as passive beneficiaries of these policies.

Key to note is that meaningful youth participation is not just a component that will improve the health or development indicators but rather is a human right that requires monitoring, evaluation and inclusion into district and government policy and program tracking tools to ensure that young people are intentionally included in all levels of implementation and their participation is actively tracked and reported upon.

## Government of Uganda commitments to addressing teenage pregnancies and child marriages in Uganda

Different line Ministries have come up with policies and plans that target addressing teenage pregnancies and child marriages in and out of schools. This policy brief will highlights only 3 of these plans from Ministry of Education, Ministry of health and ministry of gender, labour and social development. Key to note is that the government aims to have a multi-sectoral approach towards implementing these plans despite their being initiated by different sectoral Ministries.



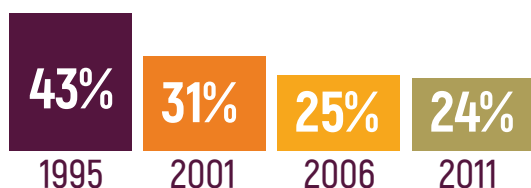
**One** out of **five**

women in Uganda engage in sexual activity before age 15

**64%** have sex before age 18

**34%** are married before the age of 18

The proportion of teenagers who have begun childbearing remains high



**TEENAGE PREGNANCY CONTRIBUTES**

**20%**

infant deaths

**28%**

maternal deaths

Figure 1: Trend of teenage pregnancies.

Source: NSTCMTP 2022-27 1

## **Ministry of Health:**

The Ministry of Health made commitments to accelerate its annual efforts to achieve a reduction of the teenage pregnancy rate to 14% by 2020. These commitments were highlighted in the Investment Case for Reproductive Maternal Newborn and Child Health – Sharpened Plan for Uganda (2016/17 – 2019/2020). While these efforts were reversed by the onset of COVID-19 and its resultant effects of increasing the rates of teenage pregnancies in Uganda, the Investment case provides scalable strategic solutions to addressing adolescent health needs through a multi-sectoral approach and using the three-point access model of school, health facility and community in order to focus on delaying sex debut and increasing contraceptive use among sexually active adolescents.

## **Ministry of Education and Sports:**

To address the rising rates of teenage pregnancies as a result of COVID-19, the Ministry of Education and Sports developed **the revised guidelines on prevention and management of teenage pregnancies in schools**. These guidelines promote the continuation of education for girls, including adolescent mothers, as a protection against further risk of unplanned pregnancies and in the process also protect girls from child marriages which result from school drop-outs and teenage pregnancies.

## **The Ministry of Gender, Labour and Social Development (MOGLSD):**

One of the efforts that have been made by the MOGLSD has been through the development and roll out of **the National Strategy to end teenage pregnancies and child marriages in Uganda (NSTCMTP) (2014/2015 to 2019/2020)**. This strategy forms the basis for national coordination and efforts to end teenage pregnancies and child marriages and bolsters efforts of involving key stakeholders in these processes. This strategy was renewed in 2022 and the MOGLSD launched the National Strategy to end teenage pregnancies and child marriages in Uganda (2021/22 to 2025/26). The renewed strategy aims to strengthen efforts to address teenage pregnancies and child marriages with special focus on multi-sectoral programming to address these issues.

As the key policy document that focusses on addressing both teenage pregnancies and child marriages in Uganda, this policy brief hinges upon opportunities for youth to meaningfully influence decisions around this strategy.

# The NSTCMTP 2021/22 TO 2025/26 Strategic areas of focus.

-  **Focus Area 1** Improve legal and policy environment (with focus on child rights) to protect children from child marriage and teenage pregnancy.
-  **Focus Area 2** Strengthen family and community capacity to support children and end child marriages and teenage pregnancy.
-  **Focus Area 3** Change negative and harmful social, cultural and religious norms and practices, patriarchal mindsets and societal beliefs that drive child marriage and teenage pregnancy.
-  **Focus Area 4** Increase access, uptake and/or utilization of quality social services (education, health, child protection, justice, social protection) at national, district and community levels.
-  **Focus Area 5** Strengthen birth registration and certification.
-  **Focus Area 6** Build avenues for economic empowerment, resilience building and improvements of livelihoods.
-  **Focus Area 7** Strengthen nationwide capacity for research, data management systems, knowledge sharing to improve programming and advocacy for ending CM&TP.
-  **Focus Area 8** Strengthen multi-sectoral coordination and collaboration (planning, budgeting, implementation), monitoring and Evaluation Mechanism for effective management of the NSCM&TP Strategy.
-  **Focus Area 9** Finance (domestic & foreign), engagement, and partnership for effective implementation of the NSCM&TP Strategy.

Notably, the midline review of the first NSCM&TP Strategy highlighted some gaps that made implementation a challenge. One of the challenges highlighted was the lack of involvement of all necessary key stakeholders in addressing teenage pregnancies in the country. While young people are not explicitly mentioned, the fact that a crucial and majority sector of the population not being actively engaged in these policies can viably account for its inability to meet its goals. In fact, studies have shown that recognizing and integrating young people in all stages of SRH policymaking is critical to catalyzing the social and political changes necessary to ensure their reproductive health and well-being.

# Challenges hindering youth participation in key government strategies to address teenage pregnancies and child marriages in Uganda.

- A key determinant of effective and meaningful participation in policy processes is the knowledge and awareness of key government strategies that are addressing SRHR issues and how best to influence them, utilize them and or improve on them. However, youth are unaware of these policies due to various factors including but not limited to lack of access to these policies, lack of information on the availability of these policies which also leads to lack information on their roles in influencing the different processes for the success of their implementation.
- Policies and plans are often too technical and are not simplified or translated to be understood by youth. This often leaves out youth who may be able to participate but are illiterate. Additionally, even youth who may be able to read find it boring or hard to understand some policies or processes due to the `technically difficult` language used within.
- The district structures that are tasked with supporting youth participation are sometimes not porous for youth. Youth still struggle to fully interact with and engage their district leaders on key issues of interest, including teenage pregnancies and child marriages, due to the fact that their participation is not prioritized by the districts. One issue that makes these offices hard to permeate is the lengthy bureaucratic processes that are needed to report or follow up on issues at the district offices. Additionally, some youth at the grassroots feel that they are unable to access the district offices because they are too far and the district programs do not reach the youth at the grassroots level.
- Infantilization of youth with the assumption that they are not competent enough to make the right decisions about their lives. This is usually expressed through leaders only engaging young people as beneficiaries of the policies even when the policies are about issues that affect them. In consultative meetings held with young people in Isingiro district, young people shared with UYAHF that their leaders engage them in tokenistic ways; which includes involving them only when they need to check boxes for participation but without utilizing or implementing any of the recommendations presented by the young people. Additionally, young people reported that it is hard for them to have objective dialogue with their district leaders because they are viewed as combatant and rowdy. This is often a misconception that hinders young people from having meaningful interactions with their leaders. Additionally, some leaders view young people simply as beneficiaries and not as agents of their own change.
- Decisions made for young people without them are often not inclusive. This is usually under the assumption that youth are a homogenous group and therefore most solutions adopt a one size fits all approach. This often leads to the needs of different cohorts of young people, especially those from marginalized groups, like refugees and youth from far reaching areas being left out.
- Key information on policy development and the processes are often left at national or district level and rarely ever reach out to youth at the grassroots level. In addition, the information that may reach young people is often not consumable by them because of the use of very technical language which alienates youth who may be illiterate or may not be competent enough to understand the technical terms; even if they have a lot to contribute to the processes.
- One of the most effective ways for youth to use as an entry point to providing support to the prevention of teenage pregnancies is the health facility. This can be through accessing correct information on SRHR which can be shared with their peers. However, some health centres lack the structures or facilities to provide youth friendly services and make the health centre a conducive place for youth. Youth find it challenging to freely access health facilities due to the poor attitudes of health workers and the lack of youth friendly service provision.

- Young people reported that one of the challenges that they face is that some of the leaders they voted to represent them are only there for decorative purposes and rarely make time to meet and interact with their constituents. Some youth reported that they are not even aware of their youth leaders; especially those from marginalized groups for example refugee youth and youth with disabilities. Additionally, youth council leaders reported that the reason that they find it hard to interact with other youth at the grassroots is due to a lack of financial support from the leadership to be able to meet the youth.
- **Performative solutions offered for youth participation.** Young people shared that while their leaders give them an idea that they want their voices to be heard, it is only decorative and for performative purposes because their ideas are not listened to. Additionally, structures are established but they are not supported to engage youth from sub-county to village level. Only district youth councils are active. Young people lose hope in following up issues when they report because their decisions or input is often not respected.
- **Lack of empowerment of young people to take up key spaces of influence.** Some young people shy away from actively participating because of a lack of confidence they may have to fit in; since they lack information on processes and policies. Additionally, some young people reported that they are not as educated enough to understand some of these processes for example when told that they needed to write professional letters to the speaker's office to get their views added to the meeting agendas, they shared apprehension being that they were unskilled on how such formal documents should be structures. Additionally, most laws, policies and guidelines are not simplified for their consumption and this ends up barring their meaningful participation
- **Lack of adequate funding dedicated to young people.** While young people come up with innovative programs to develop their communities, very little of the district budgets are dedicated to them. One example is in Masinya subcounty in Busia district, the youth leaders shared that their budgets offer only 100,000 a year to cover all youth issues in 3 parishes. The same is depicted in Kawempe division in Kampala where youth are given only 2 million to cover all youth issues. It becomes difficult to determine which activities to prioritize since that money can only do so much in improving youth participation in a year. Furthermore, there is a lot of corruption within the district offices in that some of the leaders choose to 'pocket' the money instead of utilizing it to solve the different youth issues.

## Key recommendations for action

### Policy related recommendations

1. Enhance the multi-sectorial approach to implementation: One of the key gaps that was identified during the endline review of the NSCMTP I (2014/15 to 2019/20) was the lack of effective multi-sectoral action towards addressing teenage pregnancies and child marriages. It is also crucial to view youth as both a cross cutting and self-standing entity in efforts to improve multi-sectoral action. Youth should be brought on board as key decision makers in all government processes addressing teenage pregnancies and child marriages and they should be able to be supported to participate across sectors.
2. There is need to urgently finalize Adolescent Sexual and Reproductive Health related policies and strategies. These policies offer youth knowledge and legal ground to advocate for their increased participation and for the prevention of teenage pregnancies and child marriages by making access to correct information and SRHR services possible for all young people; regardless of their age or marginalization. The approval of these policies also work hand in hand with some of the recommendations made in the strategy and would make implementation of the strategy more effective. Operating in an environment without adequate policy support makes it challenging for youth to hold their leaders accountable on their commitments to addressing teenage pregnancies and child marriages.
3. Make simplified versions of the NSCMTP II to allow youth to understand what the strategy is about and how youth can utilize it to hold their leaders accountable and to support their local leaders to implement the steps and guidelines suggested in the document. This can be through animations, local dramas etc.

4. Policies and plans to address teenage pregnancies and child marriages should attach resources and budgets to support the meaningful participation of youth at subnational and grassroots level.
5. Build capacities of youth to take part in legal and policy processes right from grassroots level. Youth expressed interest and willingness to understand how bi-laws and ordinances are developed in order to support their meaningful participation in ending harmful cultural practices like child marriages. With ample support and capacity building, the youth will be charged to take up responsibility and agency and ensure they mobilize themselves and take up these spaces. However, void of support and awareness of existing structures, youth who may be willing to meaningfully participate may not be able to do so.

## Partnerships related recommendations

1. Youth should be supported to improve coordination and partnership among themselves in order to enhance the impact of their advocacy and accountability efforts and to allow for cross learning among youth in order to accelerate their capacity for strong, equity-based and meaningful engagement.
2. The MOGLSD, in line with Article 32 of the Constitution should strengthen programs that focus on youth economic empowerment as a means to address their vulnerabilities and marginalizations in key decision making processes. These programs should be implemented with youth at the lead and taking note to ensure inclusion, multi-sectoral involvement and the multi-dimensional approach to youth development that focusses on addressing youth issues using a life cycle model.
3. Development Partners and Non-Governmental Organizations should insist on the deliberate inclusion of youth in the design of the strategies that support the government to develop. Support for the government should also include capacity building on meaningful youth engagement utilizing international human rights strategies developed by partners to ensure that meaningful youth participation is institutionalized at all levels.

## Finance related recommendations

1. Create budget lines at district and national level to support youth participation in addressing teenage pregnancies and child marriages.
2. Partners should support youth to build their capacities in budget advocacy and accountability processes to allow for them to track and participate in key budget processes right from grassroots level.

## Health sector related recommendations

1. There is need to ensure that adolescents can access a full range of contraceptive information and services including post abortion and postpartum FP. Making access to correct information and services possible for young people also gives them a basis of advocacy and ability to participate in driving demand for these services in order to prevent teenage pregnancies.
2. Structures at district level should be inclusive of vulnerable populations, including refugees and poor communities to ensure that they have access to services and information to prevent teenage pregnancies.
3. Youth have the power to make informed decisions on their health and lives. It is therefore important for youth to be engaged as agents of change as well as key players in supporting evidence-based data to inform adolescent health programming.
4. Ensure adolescents have access to correct, age appropriate and non-judgmental sexuality education and services to increase their health seeking behaviors and ease their participation with health structures.
5. Train healthcare providers in technical competencies for adolescent health, and to respect, protect, and fulfil adolescent's rights to information, privacy, confidentiality, non-discrimination, respect and choice.

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