



ABOUT

Windle International Uganda (WIU) is an International Non-Governmental Organization managing Education programs in humanitarian operations in Uganda. WIU was established in 1996 with the aim of promoting peace and development in communities. Windle empowers refugees and people affected by conflict to achieve their academic potential and contribute to sustainable development by providing education and training opportunities. Our mandate is to expand access to, and improve the quality of education for refugees and communities affected by conflict, neglect or discrimination.

In partnership with the United Nations High Commissioner for Refugees (UNHCR), the Office of the Prime Minister (OPM) and other development partners, WIU manages administration of schools including hiring and remuneration of teachers at preprimary, primary and post primary institutions in the settlements, as well as Infrastructure development, where we construct classroom blocks, latrines, teachers' accommodation, libraries and dormitories to improve the conditions of learning for both the students and the teachers in the schools.

WIU also provides scholastic materials like chalk, text books, charts, scheme books, pens as well as furniture like desk and chairs, beds for the dormitories with mattresses, toys for children in the Early Child Development (ECD) centres, school uniforms and much more for the schools we support in the settlements. We support the functionality of school structures through facilitation of regular school inspection by district officials, establishment and strengthening of school and education community structures such Parent Teachers Association as well as School Management Committees

WIU has made great strides in delivering education programmes for refugees in the following settlements; Adjumani, Palabek-Lamwo, Palorinya-Obongi, Imvepi, Rhino camp, Kiryandongo, Kyangwali, Nakivale, Oruchinga, Rwamwanja, Bidibidi-Yumbe, and Kyaka II.



Windle International Uganda (WIU) provides quality education through evidence-based programming as Research and Institutional Development is one of our key strategic areas.

ACKNOWLEDGMENTS

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EXECUTIVE SUMMARY

Introduction

Nationally, teenage pregnancies multiplied up to 30% with rural districts highlighted as the most vulnerable. There has been through proactive programming interventions addressing Education challenges including access and inclusivity across the different education levels. In a bid, to strengthen equitable access to education for both teenage mothers and pregnant girls, WIU conducted the mixed method study in Palabek and Kyangwali Refugee settlements to aid the development of the action-oriented project pathways for the young girl's learning continuity.

Methods

Quantitatively, the study carried out a survey on 108 teenage mothers in Palabek & Kyangwali while qualitatively, the study included literature reviews and primary data collection utilizing approximately 2 focus group discussions (FGDs), 24 Key informant interviews (KII) with national, district and community level actors to answer the proposed research questions.

Key findings

There are several education opportunities for the teenage mothers and unrestricted access to these opportunities which has enabled some of them return to school. However, they are finding it difficult to continue learning and studying because taking care of their children is now their primary responsibility. These young mothers do not receive any support where 42% are separated and 12% are widowed. Also, schools and the communities are still finding the rejoining processes still very alien to them so they are not aware of how to support these teenage mothers beyond catch up classes. To address this alienation, development partners like Windle International Uganda (WIU) have introduced the go back to campaigns with in communities, supported them with scholastics, and established breast feeding shelters among other things.

Recommendations

There is need for evidence based programming for teenage mothers that includes; a) mentorship for all girls (teenage mothers



or not), b) guidance to guardians and parents on how to support the teenage mothers better, c) skills development, d) teachers' capacity building, e) integration of education and health services, f) joint monitoring, learning and documentation and lastly g) concrete Social Behavior Change Campaigns (SBCC) that are inclusive of all the end users of the messaging to work towards preventing teenage pregnancies and their negative consequences.

Conclusion

Teenage mothers are children and just like any child, they have a right to education. Therefore, there is need to invest in enabling the community understand their need to acquire education and why it is necessary for them to receive support from the community.

STUDY BACKGROUND

Time immemorial teenage pregnancies remain one of the major challenges to Human Capital Development (HCD) in Sub-Saharan Africa(Elston et al. 2016; Negri et al. 2020). With the outbreak of COVID-19 in 2019, several preventive measures were put in place including intentional social distancing resulting in the closure of schools. In Uganda, schools were closed for over 24 months, an aspect that came with numerous untamed challenges including a surge in teenage pregnancies(Bukuluki et al. 2020). Nationally, teenage pregnancies multiplied up to 30% with rural districts highlighted as the most vulnerable(Okello et al. 2020). Well, refugee communities were not an exception. The table below presents the numbers of teenage mothers based on the rapid head count at the time of the schools reopening in each of the WIU-supported schools.



Table 1: Number of teenage girls and pregnant girls on school reopening.

Settlement	Br	Breastfeeding Girls			Pregnant Girls		
	Refugees	Nationals	Total	Refugees	Nationals	Total	
Nakivale	1	0	1	1	0	1	
Oruchinga	0	0	0	0	3	3	
Kyangwali	39	2	41	10	0	10	
Palabek	69	15	84	39	0	39	
Adjumani	23	4	27	5	0	5	
Paloringa	16	5	21	9	1	10	
Imvepi	32	1	33	4	2	6	
Rhino	73	33	106	14	2	16	
Kiryandongo	13	0	13	1	3	4	
TOTAL	266	60	326	83	11	94	

WIU data, March 2022

In March 2022 when schools reopened, Windle International Uganda (WIU) did a rapid count on the number of girls that had children or were pregnant at the time the schools re-opened per refugee settlement[1]. With the figures presented in the table above, it is evident that refugees are at a bigger risk compared to the nationals. Therefore it is noteworthy to conduct a qualitative study to dive into the aspects of their lived experiences economically, physically, emotionally, socially, and other crosscutting issues around early motherhood. WIU and other education stakeholders will draw lessons from the experiences to inform programming but also advocate for the Standard Operating Procedures to ensure this category rejoins school without fear. While Uganda's Ministry of Education issued a directive for these girls to rejoin school, they however did not offer procedures on what needs to be done by the different stakeholders to ensure education continuity for this group.

For several years, Windle International Uganda has been supporting refugees and asylum seekers including the host communities to access quality education through the provision of tertiary education (tailoring, hairdressing, fashion, and design, mechanics and electronic repairs, solar installation and metal fabrication), etc., for adolescents and young women in collaboration with the MoES, and different stakeholders in Uganda.

[1] WIU, rapid count, teenage mothers and pregnant girls, Kyangwali and Palabek Refugee Settlements, 2022.



This has been through proactive programming with interventions addressing Education challenges including access and inclusivity across the different education levels. In a bid, to strengthen equitable access to education for both teenage mothers and pregnant girls, WIU conducted the mixed method study in Palabek and Kyangwali Refugee settlements to ease the development of the action-oriented project pathways for the young girl's learning continuity.

World Bank (2017) states that early childbearing increases fertility and population growth reduces women's earnings and reduces the health of children born by young mothers[2]. The Ministry of Education and Sports conducted a study on Linkages between Teenage Pregnancy and School Dropout in Uganda in 2015, the findings established that school dropouts due to pregnancy among girls of 14 to 18 years of age are 22.3 %. [3]A recent Violence against Children Survey by the Ministry of Gender, Labor and Social Development (2017) [4] established that sexual violence among girls is still high at 35% and nearly half of these girls experienced sexual violence before the age of 16 years. Early teenage pregnancy has far-reaching implications not only for the girl herself but also for their children, their family, and society at large. Unfortunately, only 8% of the girls that drop out of school are given a second chance to re-enrol (MoES, 2015). With the recent outbreak of the COVID-19 pandemic, this situation is likely to get worse. The Ministry of Education and Sports 2015 developed guidelines for the prevention and management of HIV/AIDs and unintended pregnancy in school settings in Uganda. The main purpose of the guidelines was to prevent and manage teenage/unintended pregnancy and HIV/ AIDs in school settings with the incorporation of re-entry for teenage and/or pregnant girls in schools.

^[4] Ministry of Gender, Labor and Social Development, violence against Children survey, 2017,

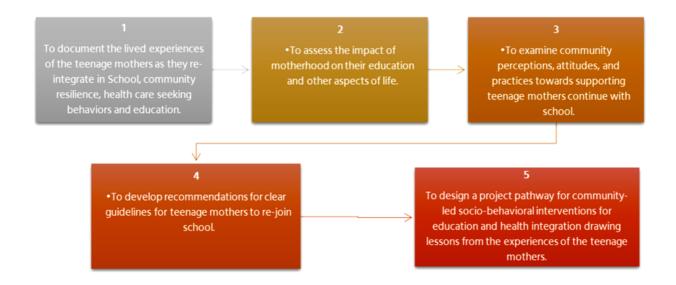


^[2] World Bank, child bearing and fertility findings, 2017.

^[3] Ministry of Education and Sports, Linkages between Teenage Pregnancy and School Dropout in Uganda, 2015

Study Objectives:

The study intended to document the lived experiences of teenage mothers and their need for learning continuity.



Specific Objectives:

METHODS

In this study, WIU adopted the Adaptive Epidemic Response (AER) framework as a lens to guide the study activities. This mixed methods study applied quantitative and qualitative research methods. Quantitatively, the study carried out a survey of 108 teenage mothers in Palabek and Kyangwali while qualitatively, the study included literature reviews and primary data collection utilizing approximately 2 focus group discussions (FGDs), 24 Key informant interviews (KII) with national, district and community level actors to answer the proposed research questions. The data collected was analysed thematically.

LITERATURE REVIEW

1. Re-integration of teenage mothers in to school

88% of the girls dropping out of school annually is a statistic accounted for African and Asia contributing to 101 million girls dropping out annually (Elston et al. 2016). Out of the 88%, 34% are likely to rejoin school after child birth (Tulibaleka 2022). However,



teenage motherhood is disruptive to entire education ecosystem with many of them leaving school and never return (Zhong et al. 2020). Those that return successfully are faced with conflicting priorities and this affects their psychological and social system (Nabugoomu 2019). The return of girls to school after child birth in Africa is still very alien and sub-Saharan Africa accounts for the highest numbers of teenage mothers dropping out of school (Nkwemu et al. 2019). These rampant dropouts affect the labour market as well as social and political environment of the countries like Uganda. Evidence shows that is greatly affecting family health and posing a threat on empowerment and development in Africa (Herlitz et al. 2020; Nkwemu et al. 2019; Tulibaleka 2022; Zhong et al. 2020).

2. Care seeking behaviours of teenage mothers

Maternal and child health is crucial in management of mortality rates in Africa (Elston et al. 2016; Nkwemu et al. 2019). However, Sub Saharan Africa is still faced with challenges like late care seeking behaviours for mothers and their babies (Anderson et al. 2020). Teenage mothers are not any different, motherhood commonly being unplanned surrounded with ignorance, they seek care late or relay on self-medication (Atuyambe et al. 2015). Therefore, there is need to invest in improving the care seeking behaviours of the teenage mothers because the infants' sickness affects the education activities of teenage mothers (ibid).

3. Community attitudes and perceptions towards teenage motherhood

Teenage pregnancy harms the social and economic prospects of teenage mothers, their families and communities, and can lead to a cycle of poor health for the teenage mothers and their infants. One out of four teenagers (15-19 years) in Uganda becomes pregnant with the rates being higher in rural (27%) than urban Uganda (19%). Communities still perceive teenage mothers are spoilt, disgrace and inability to attain the normalcy they still faced with a lot of judgement and discrimination from the community (Nabugoomu 2019; Nabugoomu et al. 2020).



KEY FINDINGS

Findings from this study project the voices of the teenage mothers, their social networks and other key stakeholders in education. We learn more of their lived experiences as they access education, their health care seeking behaviours, the impact of motherhood on their education, the opinion of the community towards the teenage mothers, key recommendations for change and the sneak peek into what an ideal project would look like to extensively support the teenage mothers regain their agency building on the community resilience.

Objective 1: To document the lived experiences of the teenage mothers as they re-integrate in School, community resilience, health care seeking behaviours and education.

General experience of teenage mothers accessing education and health services

Key Findings/Messages

- There are several education service providers including government, NGOs, private schools and community initiatives
- The education opportunities available are mainly at ECD and primary levels because of the common intervention funding and resources.
- The enrollment levels of girls drops as they join upper primary because of cultural beliefs tied around their age and education
- The facilities for health care are mainly public with free treatment but the teenage mothers go there when very ill, pregnant or while giving birth.
- The health care and education facilities operate independently even at referrals
- There are no interventions to integrate education and health even when there is a great need for the two to intersect.
- The main alternative pathways for education for the teenage mothers are formal and informal vocational skills training.
- Limited access to basic needs leads to the unplanned motherhood among this community category



Introduction

This study theme shares the state with in which teenage mothers and their peers (teenage girls and boys) acquire education and health services in Palabek and Kyangwali refugee settlements. This presents their experience in access to education highlighting; a) available education opportunities, b) key education and health service providers, c) their reasons for dropping out of school, d) health care seeking behaviours, e) needs and barriers to access education, f) current situation – reintegration into school after child birth.

a) Available education opportunities

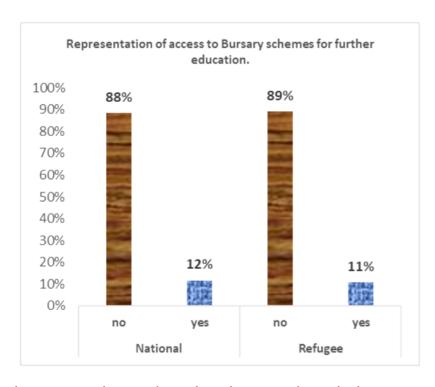
This study found that, the districts of Lamwo and Kikuube that host refugees in Palabek and Kyangwali refugee settlements have education institutions ranging from ECD to tertiary level. These institutions are accessible to both refugee and host community learners. The government was highlighted as the key education service provider, where government aided/owned schools are further supported by partners to provide quality education for free or at a subsidized price. These are supplemented by community owned schools (private) that provide education at a fee especially at the ECD level. The community members including the teenage mothers expressed knowledge of the availability of these institutions and the services they offer.

"...We have government of Uganda as a key provider. We have private for-profit institutions like in lamwo we have for example of don bosco. You could have heard about it, it's a faith-based organization providing both the traditional academic education and also the skill-based training. We have private for-profit providers who provide services to those who can afford so they're many yes. Those are some of the example's government not for profit and private for profit those are the three different categories and where under private not for profit we also include partners so to say we have NGOs..."_KII District official Lamwo.

Other opportunities highlighted for education included competitive scholarships at secondary and tertiary levels, institutional vocational skills training, and work-based learning. The



hands-on skills training was reported to be the most convenient option for the teenage mothers since re-integration in school is still an alien experience as explained further in this report. The graph below presents the level of access to learning opportunities as reported by the teenage mothers in Kyangwali and Palabek.



Quantitative evidence of the study shows that 88% of the respondents did attend or participate in any bursary and/or skills training including vocational training. With 97% of the respondents from District. Lamwo Palabek Refugee Settlement noting to

have not been involved as nationals in opportunities that could help harness their potential. Conversely, 89% of the refugees as respondents with 81% from Kikuube, Kyangwali Refugee Settlement asserting to have not been engaged and their needs assessed to determine their interest including access to the vocational training. For this, it is important to do a rapid labour market assessment to determine the needs and interest of each of the teenage and pregnant both at school and in the community.

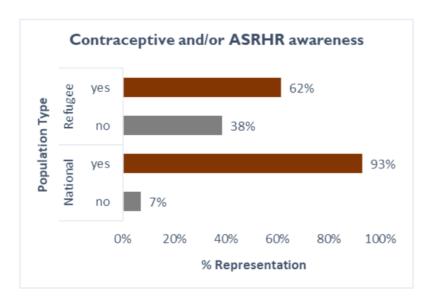
For health services, teenage mothers and other community members seek care from the government health centers, however, their care seeking behaviours are still wanting. The study respondents shared that they mainly self-medicate, and only go to the free government health care facilities when they are terminally ill, pregnant for ANC visits or when delivering the baby. This is not any different for the teenage mothers and they are faced with ignorance about the services offered at the facilities especially the contraceptives which have very limited access. For example,



condoms are only given at the health facilities which are far away from their villages. Also, for a teenager to go to the facility to pick condoms or any other contraceptives it is alarming and culturally unacceptable.

".... now as health worker, I know I need to support the adolescents or teenage mothers... but they do not know the support they need... but even when they are aware, the community looks at contraceptive use differently which stops them from coming here to use them." _KII Government Health Worker, Palabek, Lamwo District.

From the graph below we learn about the teenage mothers awareness on the SRH services at the health facilities in Palabek and Kyangwali refugee settlements.



Access to information regarding Adolescent Sexual and Reproductive Health Services remains a challenge among girls and boys (Females and Males) especially on modern contraception, Menstruation, HIV, STI testing and treatment,

pregnancy testing services, gynaecology, Counselling, GBV, and harmful practices. The study denotes there is a big shift among the refugees (teenage mothers) with 38% representation on limitation to awareness regarding access to health information. 81% of the refugees in Kyangwali stated to have not received sufficient information and/or aware of contraceptive use. This calls for the need to expand Social Change measurements across the different refugee hosting districts to help reduce the rates of teenage pregnancies.

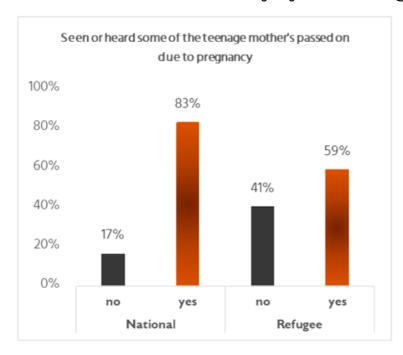
Additionally, from the quantitative presentation above, we learn that teenage girls are still at a high risk of unsafe abortions, still births and maternal deaths. There was awareness on the services



offered at the facilities, however there was underutilization. Reports from the study participants highlighted that there were girls that died while aborting, delivering or due to late arrivals at the health centre. Also, none of the schools had a sick bay or professional health care worker to support in case there are referrals from schools to the health facilities. The disconnect between the schools and health care facilities is still very big and calls for an action of integration of services for better, resilient and sustained refugee and host communities.

"... yes, during our maternal death reviews we learn a lot about girls dying due to unsafe abortions... and their peers know the cause of death but they go ahead and become pregnant anyway... so we still need to do a lot when it comes to awareness creation." _KII_Humanitarian worker, Kyangwali, Kikuube district.

The quantitative results below represent the level of awareness on deaths related to maternity by the teenage mothers.



nationals are represented with 83% to have seen or even heard the young and potential teenage mothers passed on due to pregnancy. And, the refugees are holding to 59% which are huge gaps in the safety of the girls with the highest experience from the Kyangwali (82%) and

Palabek Refugee settlement (18%). For this, it is important to expand access to the health information including the Antenatal Care services Education and Social Behavioural change communication materials to strengthen the integration of health services across the continuum of care. Support integrated health interventions easing women to deliver in health facilities e.g., Strengthening ANC visits attendance, birth preparedness and improving care for the children as well as provision of MHPSS.



b) Major causes of school drop outs among teenage girls

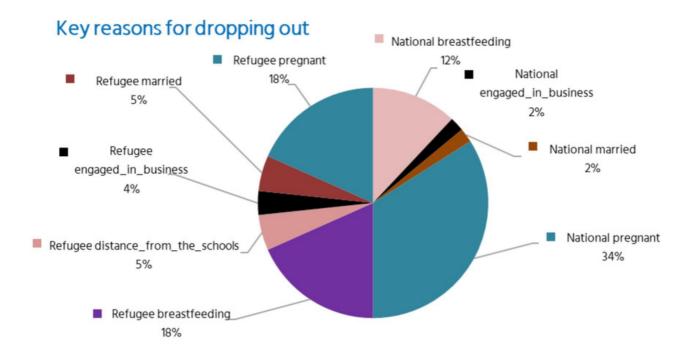
Even with the awareness and availability of opportunities to education, the rates of dropping out are high in both Palabek and Kyangwali refugee settlements. Some of the major causes of dropping out for the teenage girls include pregnancy, inadequate access to menstrual health hygiene materials, lack of basic needs to support their education, cultural constraints, the living arrangements where girls are introduced to sex at an early age, family poverty that leads to the commercialization of girls as soon as they turn 12, peer pressure, distance from school, conflicting priorities, among other factors which were all exacerbated by COVID 19 as quoted and quantitatively presented below.

National	45%
Breastfeeding	24%
Engaged in business	4%
Married	4%
Pregnant	68%
Refugee	55%
Breastfeeding	37%
Distance from school	10%
Engaged in business	7%
Married	10%
Pregnant	37%

The highest percentage of the respondents dropped out of school due to pregnancy with nationals representing 68%. Notably, breastfeeding and pregnancy attributed absenteeism in schools up to completion with refugees holding at 37% - this is noted to be high in Kyangwali (64%), and Palabek (36%). lt is also imperative to note that, there

were girls who were pregnant during the school calendar and 82% reported from Kyangwali to be pregnant during that period while Palabek refugee settlement had a drop with 18%. There stemmed a shift in young women who were married by then, and Palabek (67%) noted to have been married limiting attending to school sessions because of the duties and responsibilities aligned to being a wife in their husband's homes, and Kyangwali (Married) represents 33%. The need to Institute and expand back to school campaigns for re-entry to school for pregnant, and teenage mothers should take centre stage by all stakeholders.





"...There are number of factors that contribute to school dropout among girls and one of the major factors is that the parenting style has greatly changed for worse not for better...a number of parents have demonstrated in my opinion from my observation very weak parenting ability or capability to the extent that you even find children heading families when their real parents are there and this is very unfortunate so that is a contributing factor to school dropout because now if a young girl who should be at school is the one running the family going to the garden, preparing food and taking care of the siblings which time does she have for herself to study? That is how they end up pregnant." _ KII District Official Palabek, Lamwo District.

c) School re-integration

The study respondents shared that COVID 19 increased the number of teenage mothers in their communities. They were also aware of the government's directive to allow all learners with children to rejoin school. There was a general acknowledgement that this was a new experience for them and they had to adjust. Some the community members met agreed that these girls should be given the opportunity to return to school while others thought they should stay at home or switch to vocational skills training. The ones opposing the school re-integration believed that when the teenage mothers are re-integrated into school, it increases the numbers of teenage mothers since the rest will view this as a privilege.



"... This system is still very alien for sure... for example when we were in school pregnancy led to instant expulsion... right now girls are sent back to school without preparing the community and schools... this will take time." _ KII Humanitarian, Kyangwali, Kikuube district.

"For me I think these girls that have children should be given hands on skills and not sent back to school... because this will increase after the other girls seeing that there is a second chance... they should not be given any privileges... we advise them and they never listen."_FGD_ Palabek, Lamwo district.

The rejection and perception of privilege arise from the current initiatives that were designed for a positive change and the results are otherwise. For example, there was an initiative that was meant to prevent school dropouts but rather increased them. This is so because those that are out of school after a given period of time were supported with cash handouts. This drove other learners to drop out so that they can also receive this cash hand out given their living arrangements and access to income. The community member recommended that if it is a must these teenage mothers will rejoin school, the project should ensure that the rest of the girls do not look at them as privileged. They shared that the project should not make the group seem special or even any better than those without children. Instead those without children should be rewarded while communicating the dangers of unsafe abortions.

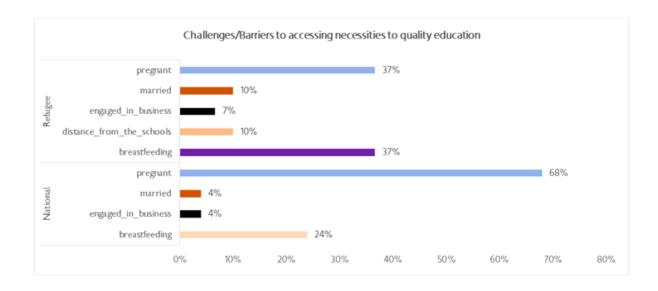
"... I know some projects are meant to do good but they end up increasing the problem... also I believe a project that allows teenage mothers in school... will only increase on the numbers because they have the liberty to return to school after child birth... I sense some problem." _KII_ Community leader, Kyangwali, Kikuube district.

For successful school re-integration the teenage mothers had a variety of needs ranging from physical to emotional needs. Some of the key physical needs included scholastic materials, Menstrual Hygiene Management (MHM) materials, baby care necessities, breast feeding shelter, sick bays for first aid, among other basic needs. In addition, these teenage mothers need emotional support; the respondents shared that most of them are depressed due to the stigmatization from the community and their peers. Currently, they lack a sense of belonging, have low self-esteem, battling with



guilt, being mistreated by their partners families, they have been chased away from their homes and labelled as spoilt by the communities. Here they need counselling, emotional intelligence training and support from girls that were once teenage mothers and have overcome the challenges that come with it.

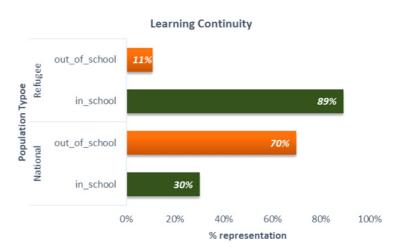
There is a great support system within Palabek and Kyangwali refugee settlements for the teenage mothers. However, they are faced with several barriers to access some of the necessities for quality education and leading a normal life like other teenage girls in community. Some of the key barriers include the community viewing or perceiving them as adults and should not rejoin school, inadequate support for child care while they are at school, ignorance on the support available for emotional intelligence growth, school alienation from teachers and fellow pupils, discouragement and no support from the teenage mothers' parents as presented in the chart below.



Currently, the number of teenage mothers that have rejoined school is way less than the ones in school – this is very common among the nationals compared to the refugees. Due to the factors shared above yet there is a lot of support readily available to ensure the teenage mothers comfortably rejoin the mainstream education. The graph below shows that the reality of the situation on school re-integration.



The lives of the teenage mothers are becoming hard when their husband's left, feeling uncomfortable in class, attempting learning with fear, limited access to financial support and diseases. Refugees hold



to the highest in attendance and being back to school regardless of being mothers at a teenage age bracket represented by 89%. Kyangwali refugee settlement holds 91% in the learning continuity. However, Nationals across the different locations assessed are within 70% being in school. The 30% difference is high which requires strengthening and expanding social norms change approaches. Like; Intergenerational dialogues, women and girls engagement, male involvement, mental wellness support, youth and use of community gatekeepers for community policing.

Conclusion

The teenage mothers are largely interested in rejoining school and acquiring skills. There is a great need to prepare the necessary stakeholders for their re-integration into school. There is no need of writing off this category but once they are supported accordingly their agency is greatly rebuilt.

Recommendations

- There is need to prepare the school administration and other pupils for the teenage mothers' re-integration into school.
- Community sensitization is very key to ensure the teenage mothers are in a safe space.
- Support to their social networks is ideal to ensure the teenage mothers comfortably re-integrate into school.
- Health structures should be introduced into schools for health awareness and prevention of teenage motherhood.
- There is a great need to leverage on the available community structures to ensure the girls' educations is rendered important with in the communities of interest.



 There is need to create awareness on the projects' rationale to avoid intensifying challenges through misinterpretation of the project's goal.



The image above shows pregnant teenagers receiving bicycles as a way of encouraging them to remain in school. This is an initiative by UNHCR and WIU.

Objective 2: To assess the impact of motherhood on their education and other aspects of life.

IMPACT OF MOTHERHOOD ON EDUCATION

Key Findings/Messages

- Motherhood improved the teenage girls' sense of responsibility and created awareness of their rights especially the right to education.
- Motherhood made them appreciate education more.
- Teenage motherhood has increased the rate of drop outs in refugee and host communities.
- Many girls wish to return to school but have been blocked by several factors.
- Parents of the teenage mothers would like their daughters to return to school while those mothers whose children are not teenage mothers request that they do not return to school.



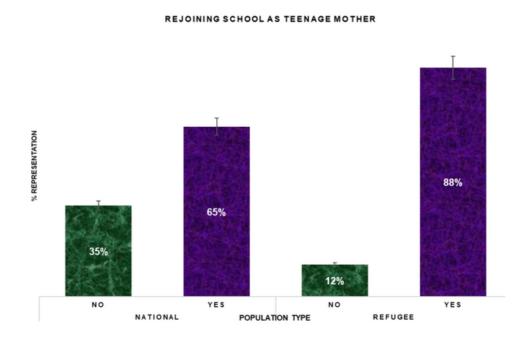
- Communication campaigns on teenage motherhood are good but have not communicated the impact of teenage motherhood on education.
- According to some community leaders and education stakeholder, there is a growing pattern that children born to teenage mothers are most likely to become teenage parents themselves.

Introduction

This study theme mainly shares the positives and negatives of teenage motherhood from the teenage mothers' perspective and those of their social networks. Further, the theme explains the spill over effect in other aspects of life of the teenage mothers and their peers. Delving into what is likely to happen to the teenage mothers, the lives of their babies if not adequately supported and life of other teenage girls. All spillover effects derived from the perceptions of the study participants as;

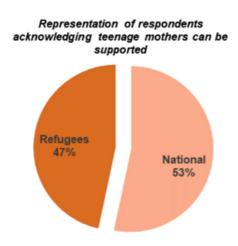
a) Positive impact

Being a teenage mother was not all negative, the study respondents shared that by becoming mothers, the teenage girls became more responsible. For instance, they improved their ways of living by trying to access opportunities to fend for themselves and their children. Taking full responsibility of their children also enabled them to appreciate the value of education more than ever as demonstrated in the graph below;





Quantitatively, refugees have high interest in rejoining schools as mother and/or pregnant within the school calendar. There is a high interest among the Nationals within Palabek Refugee settlement (96%) showing a significant interest in rejoining school as teenage mothers, and the refugees in Kyangwali refugee settlement shows the zeal to rejoin schools (89%) contrary the refugees in Lamwo Refugee Settlement with only 11%. For this, the need to strengthen community structures to address social-cultural issues like triggers of teenage pregnancies and poverty to learning continuity.



Also, some school head teachers that they reported saw an improved performance of teenage mothers. This was common among those that have received from support their members taking care of the baby while the mother is in school. They said, these mothers have shown

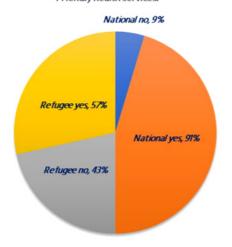
interest in class activities and also more concentrated in class since they look at this as a second chance. Further, development partners reported that most of their vocational skills training success stories are from teenage mothers compared to the girls that dropped out and have no children. The partners equate this success to the responsibility that comes with being a parent.

"Overtime we have seen girls that return from giving birth, working harder and having their grades improving... I think this is informed by their experiences while away from school so they treasure it." _KII_ Head teacher Palabek, Lamwo District.

Health care awareness has improved as a result of the teenage mothers visiting the health centers during antenatal visits. The participants recommended that health facilities should create plans together with schools to promote health awareness and prevent teenage motherhood which comes with a lot of challenges too. Many girls shared that they were aware of the dangers of teenage pregnancies but they went ahead and fell pregnant. The graph below shares the percentages regarding awareness.



 $\label{thm:continuous} He ard or read \, messages \, about \, the Teenage \, Pregnancy \, and/or \, Adolescent- \\ Friendly \, health \, services.$



97% of the respondents in Palabek Refugee Settlement noted to have heard and/or received messages pregnancies teenage as nationals, contrary to the Kyangwali refugee settlement represented by only 3% noting to have heard or received messages and/or aware on the dangers of teenage pregnancy as well as

the adolescent-friendly health services. The biggest shifts fall in the double-shifts for the adaptation to the shocks and stressors as a resilience approach. The key stakeholders should have a shift in programming to accommodate resilience through module training, formation and operationalization of the teenage mother's groups, increase provision of social protection scheme to the teenage mothers including social assistance and labour market policies and interventions.

The success stories of the teenage mothers that succeeded at completion of education are serving as an encouragement for the new teenage mothers. Currently, development partners providing psychosocial support in the communities are using these stories to encourage the teenage mothers and also show them that there is a life beyond bearing a child at an early age. In addition, some parents shared that they use the teenage mothers as an example to talk to their daughters not to fall prey.

"...I volunteer with different mental wellness agencies like strong minds... I was a teenage mother myself but I was given a second chance and I took it... now I try and inspire these girls and we have seen a lot of change... so I think using our success stories will help encourage girls." _FGD parents, Palabek, Lamwo district.



b) Negative impact

Many school dropouts were blamed on pregnancy and motherhood among the teenage girls in Palabek and Kyangwali refugee settlements. Their image in community completely changes starting from themselves and the community at large as further explained in this report. According to the study respondents, it is a traditional norm in Uganda that once a girl becomes pregnant or gives birth, they are automatically discontinued from school. They can either join at a later date or never go back to school at all. Moreover, there was awareness that dropping out of school is likely to negatively affect the teenage girl's future but the community believed that it was their choice and they have to live by it.

"... I still think returning girls to school after delivery of babies is very new for us as Ugandans... so we need a lot of planning, preparation of the communities for it to be very successful... otherwise those girls should be supported in vocational skill if the communities are not fully sensitized or prepared." _KII Humanitarian worker, Kyangwali, Kikuube District.

c) Spill over effects

There was a general perception that if one is a teenage mother, there is likelihood that their children will become teenage parents. This came out profoundly in Kyangwali where culturally teenage motherhood or parenthood is part of the normalcy.

The participants reported that there is no way a parent can guide their daughter not to become a teenage mother if they were a teenage mother too. Also, there was a projection that this will increase the illiteracy levels among the communities since the girls drop out of school.

"... what I know, if the mother was a teenage mother, their daughter will most likely be a teenage mother...so whatever we are doing is more complex than we think... they have a right to education yes, but the underlying factors are many... it starts with their histories... besides these girls do not have proper mentorship." _KII Humanitarian worker, Palabek, Lamwo district.



In addition, the challenges that come with teenage motherhood affecting the performance of the mothers in class. There was a perception that once the children come in to the picture, the girl's priorities change and school becomes less of a priority creating a decline in their class performance. This increases the discouragement which is escalated by the discrimination from the communities, low self-esteem, harmful cultural practices e.g. supporting boys compared to girls because they get married in future and all these affect their education and health.

"...Most people in my community think it is okay for the girl not to return to school if they give birth... for them it is something they anticipated ... girls get married and leave but boys stay in the family... this mind-set should change because they do not support these girls rejoin school." KII_religious leader, Palabek, Lamwo District.



The intention to rejoin is diverse with the respondents asserting to no access to the skills training initiatives within their means, for instance, 97% of Nationals in Palabek mentioned to have not acquired any skills training and yet it is within their best as



adolescent and young women. Conversely, the Refugees (80%) from Kyangwali noted to have not attained and/or acquired the skills and knowledge to help push the dynamic of rejoining schools to attain the required skills as the best fit to the society they live in. For this, it is important to expand access to the vocational skills training and community access training centre for both refugees and host communities while exploring modules that holds the interest of the teenage mothers and pregnant girls. For instance, expanding the capacity building for the young people including skilling programmes and linked to the government programmes E.g., UWEP, EMYOOGA, PDM and linkages with the MoES to integrate friendly technical education through the Science, Technology, Engineering and Mathematics for the girls from the fluid areas involving both the refugees and the host communities.

Vocational skills training was the next best alternative for empowering the teenage mothers. However, this has created a negative perception around vocational skills development. The community had started viewing it as an option for failure within the community. This creates a discouragement for other young people to join the skills development opportunities. Therefore, there is need to work towards encouraging the teenage mothers to join skills development initiatives and need to rebrand them beyond the community view of an "option for failure" since it is an alternative for the teenage mothers.

Conclusion

The education of these teenage mothers is jeopardized with this experience, therefore, there is need to concentrate on the positives that come with it. The positivity that come with motherhood should be nurtured and bred to grow further to ensure they are empowered. We learn that when supporting them to become better creates an opportunity to prevent teenage motherhood and the challenges that come with it.



Recommendations

- There are so many success stories with in the community that can be leveraged to create hope.
- There is need to design prevention messages with the teenage mothers and other recipients for effectiveness.
- There is need to involve the community in the school reintegration processes for the teenage mothers because they are very influential.

Objective 3: To examine community perceptions, attitudes, and practices towards supporting teenage mothers continue with school.

ROLE OF THE COMMUNITY IN SCHOOL RE-INTEGRATION FOR TEENAGE MOTHERS

Key Findings/Messages

- The local community leaders support the idea of taking the teenage mothers back to school.
- The teenage mothers that came from literate families received support compared to those with illiterate relatives.
- Involving community members in the go back to school campaign has informed the members on the importance of the teenage mothers need to rejoin school.
- There was willingness to support for the teenage mothers to rejoin school but there were no clear guidelines on how this should be done especially in school.
- The community are still not aware of how to support the teenage mothers continue with their education apart from parents taking care of the children while they are at school.
- There was willingness of the parents to take care of the infants but had inadequate resources to do so.
- The communities in the rural parts of the settlements were more supportive of the teenage mothers rejoining school compared to those in the urban settings.



- Some community members especially parents to girls without babies were against the teenage mothers rejoining school because they believed they will be spoiling their children.
- Community health workers reported abandonment of teenage mothers in hospitals during child birth.

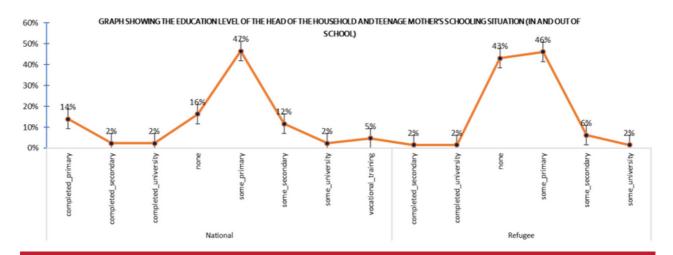
Introduction

This study found that the support and influence of the community is very vital in the decisions of the teenage mothers. This part of the findings shows the community contribution to the lives and education of the teenage mothers. The theme shares the community perceptions towards the teenage mothers rejoining school – their opinion on how it can be done and what they have observed for the teenage mothers that have rejoined school. This further presents the attitudes and practice towards the teenage mothers rejoining school – focusing on the role of community initiatives available to support the teenage mothers continue with school. In addition, the realities of the teenage mothers currently within the communities and at school.

a) Community perceptions towards rejoining school

Generally, the families that had a literate household head were more open to supporting the teenage mothers continue with school compared to those that had an illiterate head. These were reported to be more aware of the importance of girls' education, they were able to read and interpret the communication materials, they were key participants in campaigns of keeping girls in school. The development partners and district officials reported that they were working with category more because they understood the importance and they were used to enable the illiterates understand the importance of allowing their daughters rejoin school after child birth. Therefore, the level of education of the household heads matters in determining whether the girls continue with school or not as presented in the graph below;





Quantitatively, there is a significant need for Functional Adult Literacy (training) exploring andragogy[5] to strengthen households on actions against teenage pregnancies including community policing, setting community guidelines, emphasizing back to school for their children, expanding social-norms changes as parents against all the acts of early pregnancy and teenage motherhood, all these to take effect, if the parents are trained to read and interpret some of the community as the community change agents with andragogy the priority.

Away from the level of education, the parent's past experiences also determined whether they encouraged the teenage mother to remain in school or not. Families that had a history of teenage motherhood were less encouraging compared to those that were experiencing it for the first time. Also, families that had never experienced the ordeal of teenage motherhood were against them rejoining school because they believed they would be a bad influence to those that are still in school. These families were very quick to suggest that they either get married or join vocational skills training.

"... Our daughters cannot go back to school.... we cannot take care of them and their babies... so they should be given skills training to start over their lives." _ FGD Parents, Kyangwali, Kikuube District.

[5] the method and practice of teaching adult learners; adult education.



The table below shows parents willingness to support teenage mothers rejoin schools informed by community practices and attitudes.

Population Type	Parents committed to TMs re-entering school as adolescent/teenage mother
National	36%
Yes	
Kyangwali Refugee Settlement	3%
Palabek Refugee Settlement	97%
Refugee	64%
Yes	
Kyangwali Refugee Settlement	90%
Palabek Refugee Settlement	10%

b) Attitudes and practices towards teenage mothers

As shared earlier in this report, majority of the community members believe the teenage mothers are adults and not children. They are expected to behave a certain way because they are parents now and this is coupled with discrimination and labelling them as spoilt. There were reports that these teenage girls are usually isolated from their peers and the parents are using them as bad examples for their daughters to behave well. Moreover, some girls have been chased away from their parents' home and others have been forcefully married off. Majority of whom have suffered mistreatment and child abuse while staying with the partner's family.

"... I went away for work and my daughter was raped... she became pregnant but we cannot report the person because the community is against reporting their sons... and right now she is suffering... we have no help and I cannot send her to the man's family." _FGD Kyangwali, Kikuube District.

The health workers reported a burden of having teenage mothers coming to deliver from the facilities. They described it as burden because they come with none of the requirements for safe delivery. They are commonly abandoned by their partners and family members. This puts the lives of the teenage mothers and their infants at risk because they show up and are at the mercy of the health workers who are usually overwhelmed by the number of patients at the facilities. They proposed that to prevent the



numbers from increasing, there is need to have the girls that are still in school visit facilities to see how these other teenage mothers are suffering and they avoid engaging in intimate relationships before time. The attitude of most health care providers is negative compared to those that work with development partners.

"... we normally receive girls here with no body and nothing for delivery... and yet you have several other mothers to deliver.... It becomes very challenging for us, even if it is you, the attitude can change... there is need to sensitize these people because the numbers of teenagers delivering keeps increasing." _ KII_Health worker government, Palabek.

The peers to these teenage mothers are avoiding them as it is a requirement from the parents and elders. Many of these girls are always alone and have lost friends because of parenthood. They are reported to be very distractive in class especially those that move with their children to school. They always interrupt the lessons because they have to tend to their children which is distorting to the rest of the class.

In some cases, parents to the teenage mothers had willingness to support their children take care of the infants while they are at school. However, they are constrained economically and end up stopping them from going to school. Also, they acknowledge the love they have for their daughters but they end up being bitter to them because of the shaming and judgement they receive from the community. The parents especially in the Palabek host communities shared that they live in shame because of these girls and they feel bad because their parenting is questioned by the community because of the teenage mothers. Here, they end up being discouraged to support them because of the negativity surrounding the whole supporting process.

"... One thing we have observed is, parents would like to support their daughters, but often times they are looked at as bad parents... here they end up abandoning them... the communities we serve look at pregnancy as crime and this should be changed... we need approaches that stop others from becoming pregnant but ensure acceptance of the teenage mothers." _KII_OPM official Palabek, Lamwo District.



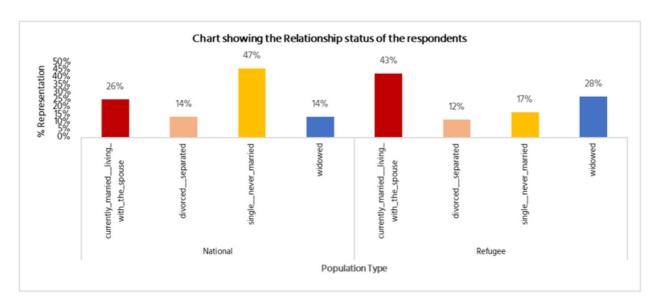
Parents were also aware that they need to support their daughters but did not know how else beyond taking care of the babies as they returned to school. Many of them shared that they would take care of the baby but paying school fees would be hard since this person now has a partner who culturally should be taking care of their needs both monetary and in-kind. They perceive them as a burden and the community leaders recommended that these parents should be sensitized that it is still okay to take care of their daughters even when they have children now.

"...parents should support these girls first before anyone else... it is their responsibility, but you find some of them are sending them away and also look at them as a burden... therefore, there is a great need to have parents to be more supportive of their daughter and sensitization will help." _KII Community leader, Palabek Lamwo District.

"...Personally, my daughter got pregnant while in school... after she delivered, I took her back... people kept asking me to stop... but for me she is still my daughter before she is a mother... so I never looked at her as a burden as most people... I supported her and now she has better future... therefore, parents should be encouraged to be more supportive." _ KII District Official, Kikuube district.

Support for girls rejoining school was common among rural communities compared to those that live within the trading centers. This was tied to several income generating options that the teenage mothers can engage in the trading centers. Some of the common income generating activities included serving in small eateries, cleaning offices, supporting saloons, and working in markets. With these activities available, there was no need for them to rejoin school since they now had dependents. And the majority of them were abandoned by their spouses as shown in the graph below.





The above percentages hold to the levels of togetherness and the ability to adapt to the stress and shocks of teenage mothers. For instance, 17% of the refugees engaged during the assessment noted being single and never married and this calls for actions to support the children they are taking of through the provision of basic economic support, expanding the breastfeeding corners in schools, and intensifying policy dissemination with inclusiveness using effective and efficient modalities e.g., radio talk shows, production of referral pathways posters, and community leaders engagement like LCs, cultural, religious, and community development office and scaling up the uptake of reintegration services including provision of MHPSS to the existing school structures and expanding linkages with other structures in the communities, especially for the widows and single mothers.

Qualitatively, the study found that teenagers in rural areas lived with their husbands and if allowed they were likely to rejoin school. This is because they do not have so many options other than staying at home or going to school. Some of them have rejoined school and the school administrations are supporting them catch up with learning. Guidance and counselling are happening in the schools through senior women and men teachers, this was evidenced by the schedules and minutes found in some schools. However, their attendance is not consistent due to the conflicting priorities. Some of the key reasons for their chronic absenteeism



included care seeking for their infants especially on immunization days, the infants care takers getting busy, among other factors. There were cases where these girls got discouraged and they completely dropped out of school.

"... overtime, we have seen the girls in the villages go back to school... those in the small towns will engage in income generating activities like working in small restaurants... you find they choose work instead of schooling because they need to take care of their children." _ KII District Official Palabek, Lamwo District.

Conclusion

Teenage mothers are children too and just like any child have a right to education. Therefore, there is need to invest in enabling the community understand their need to acquire education and why it is necessary for them to receive support from the community. Consequently, investing in holistic Social Behavioural Change Communication (SBCC) is requirement for projects supporting the teenage mothers. Also, for prevention there is great need to invest in the school initiative and activities of the senior women and men teachers' activities.

Recommendations

- Go back to school campaigns should be designed for and with the communities through community leaders and school administration.
- There is need for skills development for the parents to the teenage mothers for them to attain economic resilience to take care of the mothers and infants.
- There is need to have education and health integrated activities.
- Communities should be reminded that the teenage mothers are still children despite them being parents.
- Girls and boys should be given an equity chance at education for resilient and sustained communities.



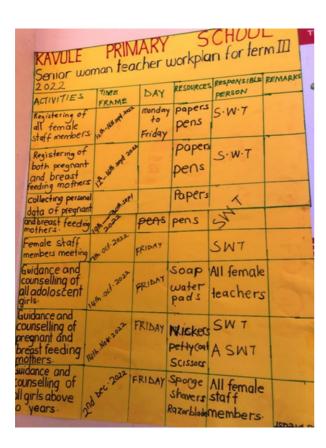


Figure 1: SWT Work plan for Term III, 2022 in support of the pregnant and lactating mothers.

Objective 4: To develop recommendations for clear guidelines for teenage mothers to rejoin school

GENERAL RECOMMENDATION

Objective	Recommendation	Relevance	Key stakeholders responsi- ble
Objective 1: To document the lived experiences of the teenage mothers as they re-integrate in School, community resilience, health care seeking behaviours and education.	Teenage mothers' reintegration into school is still very new. This process requires the preparation of the teenage mothers, their social networks, the schools and other stakeholders. This can successfully be done through developing of guidelines that fit within the context of all the parties involved.	Developing and popularizing guidelines is helpful because people are provided with guidance on the way forward and how to handle challenges at hand. Also, this being new the guidelines give an insight into its normalcy.	Government through Ministry of Education and Sports (MoES) Development partners. Community leaders School administration
	The community resilience to support the teenage mothers can be improved through sensitization of the community. Where awareness is created through platforms that are within reach of all groups.	The experiences of teenage mothers will be improved when awareness is created. This will enable people be more accommodative and ensure these teenage mothers get their childhood back	Government Media Development partners The general community



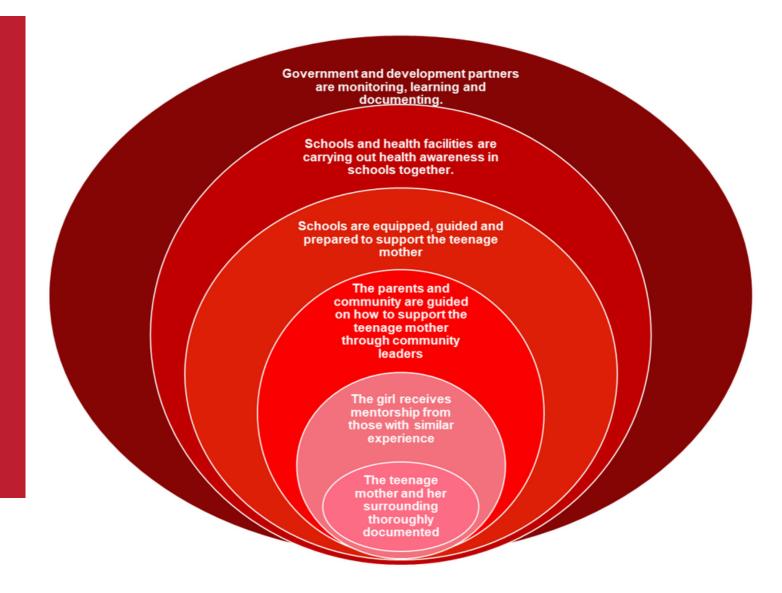
		A section in the first term in the first of the contract of th	
Objective 2: To	Teenage mothers	Once there are ave-	Parents
assess the impact	should be encouraged	nues encouraging	Teenage mothers
of motherhood on	to rejoin school. This	the teenage mothers	Teachers and school ad-
their education	can be improved	go back to school,	ministration
and other aspects	through creation of go	then the rates of	Government
of life.	back to school cam-	dropout will reduce	Development partners
	paigns targeting teen-	considerably among	
	age mothers.	refugee and host	
	· ·	communities.	
Objective 3: To	Negative community	Community atti-	The government through
examine commu-	perceptions can be	tudes, practices and	MoES.
nity perceptions,	changed through ad-	support are very in-	Media
attitudes, and	vocacy and informing	fluential and an ig-	Village Education Commit-
practices towards	community of their	norant community	tees.
supporting teen-	roles in the education	can be very costly.	Development partners.
age mothers con-	of the teenage moth-	Therefore, inform-	
tinue with school.	ers.	ing them of their im-	
		portance in girls' ed-	
		ucation can help	
		keep girls in school	
		but also enable	
		teenage mothers re-	
		join school.	

Objective 5: To design a project pathway for community-led socio-behavioural interventions for education and health integration drawing lessons from the experiences of the teenage mothers.

PROPOSED ACTIONABLE PROJECT

According to the community, there are five building blocks for an effective community led socio-behavioural intervention integrating education and health. Presented in the figure below;





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