



TRANSCRIPT: *MOMENTUM PRESENTS* EPISODE TWO

Presenter: *MOMENTUM Presents*, bringing in-depth experience in improving maternal, newborn and child health services, family planning and reproductive healthcare in countries around the world. Providing technical and capacity development assistance to country leaders and governments and ensuring that mothers and babies have access to essential care in order to reach their full potential. We are MOMENTUM Country and Global Leadership, funded by the US Agency for International Development and we welcome you to MOMENTUM Presents. This is the exclusive podcast series highlighting strategies for maintaining essential maternal, newborn and child health services, family planning, and reproductive healthcare in the face of the COVID-19 pandemic. We are discussing challenges and sharing solutions with country leaders around the world and keeping the momentum going in responding to the global pandemic. Welcome to MOMENTUM Presents. Episode two: Gender youth equity in the midst of COVID-19.

Callie Simon: Good afternoon and welcome to MOMENTUM Presents. My name is Callie Simon and I'm the Adolescent and Youth Health Advisor for MOMENTUM Country and Global Leadership. In this episode, we will be joined by Mrs. Patricia Bah, National Coordinator of Sierra Leone's National Secretariat for the Reduction of Teenage Pregnancy and Child Marriage within the Ministry of Health and Sanitation. And Miss Marian Pleasant Kargbo, who is the Family Planning 2030 Youth Focal Person in Sierra Leone. Today we will discuss how the country of Sierra Leone is addressing and mitigating the effect of COVID-19 on adolescent pregnancy and gender-based violence. Good afternoon Pleasant and Patricia. Thank you for joining us today on *MOMENTUM Presents*.

Patricia Bah: Good afternoon.

Callie Simon: Hi Patricia and hello Pleasant.

Marian Pleasant Kargbo: Good afternoon and thanks for having me.

Callie Simon: So excited that you could both be here today. This is a really important conversation and I'm looking forward to learning from you. Let's jump in. We know that COVID-19 has already disproportionately affected women, adolescents and particularly adolescent girls. There are reports of increased household violence and unpaid care and reduced access to sexual and reproductive health services. Can you tell us how COVID-19 in Sierra Leone has impacted women and girls specifically? Patricia, let's start with you.

Patricia Bah: Thank you very much. Like any other outbreak, COVID-19 has a greater impact on women and girls, especially girls. Reason being that most of the girls, because of the outbreak, there was a closure of school and lack of protection mechanisms. So as a result, these girls stay at home and the chances for them to be mistreated is greater because they don't go to school. Another key factor that contributes to gender-based violence during the outbreak is low jobs and family incurring more economic challenges. In the past they have other things to do that brings income into the home to take care of their families but with the COVID-19 restrictions and some people were laid out of job, they don't have the means to sort of take care of their family. And in the society where we find ourselves, most times girls have to seek economic benefits for their parents through transactional sex. So as a result, they are prone to sexual gender-based violence at tender age. The last but very important is the few social resources available as women and girls cannot see friends or providers during the pandemic restriction and during the outbreak like what happened in the Ebola. So these are some of the factors that I would safely say contributed to the high rise of gender-based violence in Sierra Leone that leads to increased teenage pregnancy among...

Callie Simon: Thank you so much Patricia for your response and for sharing your experience and what you've seen. Pleasant, I'd love to hear from you. What have you seen in respect to how COVID-19 has impacted women and adolescent girls in Sierra Leone?

Marian Pleasant Kargbo: So for me, working with girls, especially teenage girls, it has been alarming because just like what madam Patricia said, you see for a fact that these girls have all the time to stay at home, they are being abused because most times when they go to school they spend some hours in school, they have the leverage to do what they want to do. But for the fact that they are home and when you look at the places where some of these women and girls are staying especially for the girls, you see that they are very much deprived and these are poor communities. So for some of them, if even we should not go to the aspect of the opposite sex abusing them even in their homes. So because the parents

are so poor that they cannot be able to take care of them, you notice that most of the times even their parents do abuse them especially when they request for things to eat.

Callie Simon: Thank you Pleasant. It sounds like you've both seen increases in violence in the home and transactional sex, unintended pregnancy and other impacts on adolescent girls and women. And I know that the Ministry of Health and Sanitation has taken some proactive steps. So Patricia, how has Sierra Leone's Ministry of Health and Sanitation worked to address this rise of gender-based violence in the face of COVID-19?

Patricia Bah: Thank you very much. Like I mentioned earlier, the Ministry of Health and Sanitation together with other partners, especially MOMENTUM Country and Global Leadership, supported case management for GBV healthcare workers through trainings, through radio discussion programs, through community engagement. To make sure that they are well informed especially regards on the referral pathway, when if they're prone to a GBV during the COVID-19 outbreak. Another thing that we're able to do with support from MOMENTUM Country and Global Leadership is data collection because you need data to inform any decision that we want to make and to improve on the services that we want to provide for the children, especially adolescent girls. The other main thing that we are able to do with partners is how we can adapt the perpetual guidelines for case management and establishing actual clinical sites like one-stop centers for gender-based violence in six parallel districts.

This is the first time we have developed the training curriculum protocols for healthcare workers and social workers who address gender-based violence during this COVID-19 outbreak and also to adapt the guidelines that WHO is using in addressing GBV. And last but very important is the collaboration between the ministries, the line ministries that are directly addressing women and girls issues of which the Ministry of Social Welfare and Gender and Children's Affairs, the Ministry of Education, the Ministry of Communication and the Ministry of Health in trying to mitigate community risk factors that leads to gender-based violence. By making sure that the communities are fully engaged in trying to address gender-based violence and also the importance of the referral pathway and the provision of services that this adolescent girls and women may need. So in a nutshell, that's what we have been doing with support from MOMENTUM of Country and Global Leadership in making sure that health care providers are trained on the case management for GBV and the area of data collection around GBV and the data that we get is integrated into the child protection mechanism.

Callie Simon: Thank you so much Patricia for highlighting those incredibly important steps that you all have taken to mitigate the impacts of COVID-19 on gender-based violence and the impacts of gender-based violence on women and adolescent girls. In particular, the importance of data collection because we can't address a problem if we can't see it and if it's not visible in the data. Pleasant, I'd like to hear from you about the work that you and your fellow youth advocates are doing to address the rise of gender-based violence among young people during the pandemic in Sierra Leone.

Marian Pleasant Kargbo: So what we've been doing, we're involving social media advocacy because we had series of lockdowns which stopped most of our outreach programs. But for some communities, we go with megaphones and talk to them about the impact of gender-based violence and why it is important to report such. Because most of this young people, it is an intimate partner violence. Most of them they have this abuse from their parents and for the older adolescents, let's say from 16 to 20, most of them the violence comes from their partners those that have boyfriends. So what we've been doing over the years is to make them understand first the various types of violence. Because the truth is most young adolescent cannot even tell what is gender-based violence, most of them just see it as a norm. So what we've been trying to do in that case is to let them understand that when they've been abused they need to report it.

When you go to the Ministry of Social Welfare for the teenage pregnancy secretariat you have the counseling centers there. And also you have a lot of organization that have toll-free lines in order to combat gender-based violence. But because it's a norm, most of them just see it as something that is normal. So what we've been trying to do is to raise awareness for them to know that when they're being abused, they need to report it. And that has been working to some extent because you now have young adolescents that are bold enough to go to social media to talk about some of the abuse that they've been facing.

Callie Simon: Thanks Pleasant. That's so important and it's so important to have youth leaders like you working with other young people to shift those norms around violence and understand how they can respond if they are experiencing violence. Pleasant, I'd like to follow up with you about the point you mentioned earlier related to a rise in adolescent pregnancy during COVID-19.

Marian Pleasant Kargbo: Yes.

Callie Simon: And talk a bit more about that now. I know Sierra Leone has historically had very high adolescent fertility rates. And in 2012 the President of Sierra Leone

made teenage pregnancy reduction a national priority. And the country continues to advance this work through the National Secretariat which Patricia leads. Pleasant, I'd love to hear from you about some of the things you see as major contributing factors to adolescent pregnancy in Sierra Leone, particularly now in the time of COVID-19.

Marian Pleasant Kargbo: We have a lot of factors and this is something that we've been challenged with for the past years both the government, its partners, and also the Teenage Pregnancy Secretariat. We see during Ebola there was an upsurge in teenage pregnancy. And according to a Save The Children report which they did and about 23,000 children in Sierra Leone who will get pregnant during this COVID. Because the truth is we have most of these adolescents not going to school now and most of them struggle to even have things to eat. And when you look at our economy presently, things are not going on well and a lot of young people are trying to survive. You see one of the contributing factors to teenage pregnancy in Sierra Leone, I can say is poverty. So because the parents are poor and they cannot take care of their kids so most times you see parents seeing their kids involving in sexual activities, going with men. They're not even bothered to stop them.

So no matter what the Teenage Pregnancy Secretariat is doing, if the parents are not well informed and know how to take care of their kids, there is no way we'll be able to combat some of those things and also the issue of early marriage. We are making progress but I will tell you when you go to some communities... For me, I work in rural communities. It'll amaze you to know that we still have an increase in early marriage. Because even when you look at our laws, they'll tell you the parents has to give consent. And most times if you want to challenge some of those things because of our laws when you look at the Child Rights Act, you look at the Custom and Marriage Act and you see our laws are not consistent. So you have a lot of challenge with this early forced marriage which is still happening. So for me, poverty, early forced marriage and also the mindset of the adolescents themselves. So you have a lot of mindset issues that are affecting our young adolescent and these are some of the reasons that have led to an increase in teenage pregnancy in Sierra Leone.

Patricia Bah: Can I just add on to what Pleasant has said concerning the teenage pregnancy.

Callie Simon: Sure.

Patricia Bah: I think another important thing is access to services especially contraceptive services among the adolescents. We still have a society wherein adolescents

are finding it very difficult to access family planning commodities which are readily available in some of the facilities. And for those who can access, there is some areas also we have limited supply of family planning commodities and as a result, some of them have to pay for family planning commodities in certain areas that they find themselves. Very important also is the myth around family planning used by our adolescent and youths. They still believe that there is some negative effect of family planning if taken at an early age, it will affect them at the later age that they will not have a child. And key among also is the provision of an adolescent friendly health centers. We have very few adolescent friendly health centers, where an adolescent will just walk into the facility and they will have all the services that they need in terms of proper counseling, in terms of STI treatment or Sexually Transmitted Infection.

Because most of our facilities are not adolescent friendly. When they walk in there they will see their relatives or relative friends or adults and they feel shy to express themselves to say that, yes, I want to have family planning or I want guidance on how I should carry out about my sexuality. And also it's only now that we are working very hard with the Ministry of Education to ensure there's comprehensive sexuality education in schools. And as a result, access to information is still challenging in the rural setting. So for me, I think I just want to add onto the poverty and all the factors that Pleasant has presented. And also let's look at the service provision aspect that's also a factor that will contribute to high rates of teenage pregnancy.

Callie Simon:

Absolutely. Thank you both. I think together you've painted a comprehensive picture of the different drivers of adolescent pregnancy in Sierra Leone. Whether that be underlying factors like poverty or some of the more acute factors such as access to health services and contraceptive services which are... Of course, those barriers are exacerbated in the context of COVID-19. And I'd love to hear actually from both of you now, how we address those barriers, how we address those factors that drive adolescent pregnancy. I'd like to start by asking Pleasant, what actions you recommend to ensure adolescents and youth have access to quality, reproductive and maternal and newborn health services. And then I'll turn it over to you Patricia to ask what actions you and the Ministry of Health and Sanitation are taking. So first over to you Pleasant and then we'll hear from Patricia.

Marian Pleasant Kargbo:

So for me, I want to start with mindset because we need to do a lot when it comes to mindset and also access. Just like what Patricia said, access is very, very much challenging especially in rural communities. When you go to pharmacies or you go to health services for contraceptives, they'll tell you it's

free but then you'll have those caregivers asking you to pay for them. And imagine if you have to pay \$1 for those injectables. Most of these young girls cannot afford it and that's the truth. I remember paying some amount of money for some young adolescent to have injectables. So the moments the three months injectable is done and they unable to get that money, you see they will get pregnant. So that's why in our outreach programs we try to go to these hard to reach communities in order to give them contraceptives.

So access is something that we need to work on. Friendly centers. They are not friendly most times you walk into those centers there are nothing there. So you see young people are not even accessing those centers. Even with the community health facilities, the moments you go to those facilities especially those in these communities, it's obvious that your parents will eventually know that you've started having sex. So for most of these girls, they'll avoid those facilities completely and also the counseling. Counseling is very much key because there is a lot of myth especially with the use of contraceptive.

I've spoken with both older and younger adolescents and they keep telling you there's so many disadvantage of using contraceptives. And the moment you tell them, is it out of experience or what? They'll say not actually out of experience, it's just that a friend of mine used it and this is what she told me so I don't think I'll want to use it. So you see because of that we keep having an increase in teenage pregnancy. So, if we are able to change the mindset of those young adolescent and then we create access to the services. Because it's not just about stocking up the services but access to those services is very much key and also counseling the adolescents we will be able to combat teenage pregnancy.

Callie Simon: Thank you Pleasant. Well said and I can see while you're such an amazing youth advocate with your passion for these issues. Patricia, I'd love to hear from you about how the Ministry of Health and Sanitation is in fact responding to adolescent pregnancy in the context of COVID-19 and what actions you've taken.

Patricia Bah: Thank you very much. Thank you again, Pleasant for that brilliant presentation on how to address teenage pregnancy. Teenage pregnancy is a concern and that's why we have a secretariat that's coordinates implementation of factors and line ministry in addressing teenage pregnancy and child marriages. So what we did and we are trying to continue to implement, is the development of the national strategy for the reduction of teenage pregnancy and child marriage, which have key activities by all line ministries and partners that

have interest in addressing teenage pregnancy and child marriage. As the Ministry of Health and other line ministry, we've been asked also to make sure that we factor in activities in our budgets so that governments can provide some amounts of resources. Because addressing teenage pregnancy is not a one man business, we need partners, we also need government input to make sure that teenage pregnancy is being addressed to bring it down to minimal.

The other thing that we have done especially during the outbreak of this Corona like what we did during the Ebola, is to increase on community engagement, community ownership in implementing certain activities in addressing teenage pregnancy and gender-based violence. We make sure that communities own certain activities that will bring...like radio discussion programs we bring them on board, outreach into the communities it's always the [inaudible 00:20:31]. Traditional leaders they're aware, we've trained them, we've given them the pros and the cons of teenage pregnancy. And we are also trying to encourage them to make sure that when they're having their own by meetings, people there'll be in the position to discuss about the harm of teenage pregnancy. As I've mentioned earlier, a comprehensive sexuality education in school. The Ministry of Basic and Senior Secondary School together with its partners at the Ministry of Health, are working seriously to make sure that the comprehensive sexuality education is back into the school curriculum, which I believe hopefully this academic year will start to implement the curriculum. Among some of the key things that we've done as the ministry is the coordination with other line ministries.

We are also training teachers, we are training health workers, we are training in social workers in addressing teenage pregnancy, child marriage, referral pathway with gender-based violence. And we develop a lot of policy documents. We develop a lot of training curriculum, books can be used for in-and out-of-school youth. So by the end of the day, we are not only addressing teenage pregnancy among school going girls but also we are addressing teenage pregnancy among girls that are in the communities who are not going to school by implementing what we call like life skills.

We have the life skills manual for example, that we use to train both in and out of school on how they can prevent teenage pregnancies, sexual gender-based violence. And finally, we have what we call the multi-sectoral coordinating committee that is made up of key line ministers of key ministries: The Ministry of Health, the Ministry of Gender, the Ministry of Social Welfare, the Ministry of Gender and Children's Affairs and the Ministry of Local Government. Reason being, in that particular committee we have key partners like [inaudible

00:22:22] agencies, country directors of key organizations that are directly addressing teenage pregnancy.

They meet and discuss which is a meeting that's supposed to hold once every six months, twice a year to discuss about the implementation of the national strategy. Are we able to address some of the gaps? Are there issues that they need to upscale so that partners can see the need to come in and address?

Callie Simon:

Thank you so much Patricia. Between you and Pleasant, I think you've covered all of the strategies that are critical for addressing unintended pregnancy and improving adolescents' knowledge and their agency through comprehensive sex ed and community outreach, fostering community support and engagement, ensuring service availability and accessibility and then that high level policy making and multisectoral coordination that is essential to ensuring that adolescents can choose when and if to have a child. Thank you. We've learned so much in this conversation about the challenges women and girls faced in light of COVID-19 and the important steps that young people like you Pleasant and the Ministry of Health and Sanitation, with your leadership Patricia are taking in response. In closing are there any key pieces of advice you would like to give to other countries that are facing the same issues with gender-based violence and adolescent pregnancy during this pandemic? Maybe I'll turn it over to Pleasant first and then we'll hear from Patricia. So Pleasant, any key piece of advice to other countries or other young people who are seeking to advocate and make a difference for their fellow adolescents and youth?

Marian Pleasant Kargbo:

Yes. So I want to start with the countries and after which I go to the youth organizations and the youth themselves. And for the countries, I think what countries need to do is to make sure they increase access for young adolescent and make the friendly centers to be friendly. I'm sure if these youth have access to these contraceptives we'll be able to combat teenage pregnancy and also we should not relent in changing their mindsets. We know this stage is a very critical stage, this adolescent stage. So we need not relent because most times especially in Sierra Leone, when you look at the work that the Teenage Pregnancy Secretariat is doing, the Ministry of Health, other organizations and then you keep seeing an increase in teenage pregnancies, the work that partners are doing you tend to get discouraged. But I think that's the more reason why we need to engage these adolescents and make sure we encourage them to take the services.

And for the youth organizations working on teenage pregnancy, this is not the time for us to relent. We need to reach out to our fellow youth especially the adolescents. We need to guide them. For us I have a lot of my girls that I do mentor, make sure I let them know the dangers of getting pregnant early. So in fact for me, changing their mindset is very much key because the truth, what we've realized is this, the moment an adolescent has started involving in sex there is nothing you can do to tell that adolescent to stop having sex. So the best you can do for that adolescent is to make sure you guide the adolescent, let him know that he can have access to contraceptive services is for her not to get pregnant. So if we are able to do that as young advocates, we'll be able to combat teenage pregnancy especially during this pandemic.

Callie Simon: I love that Pleasant. I love your quote that this is not the time to relent, it's so important. Patricia, over to you for your advice to other countries who are dealing with these same challenges.

Patricia Bah: For me one of the key advice that I will provide is coordination among different players. Be it government decision, be it implementing partners and donors to address teenage pregnancy. No one organization can do it alone, there is need for that coordinating mechanism to be established at all levels, to make sure that issue of teenage pregnancy, child marriage and sexual gender-based violence is addressed. At community level, you need the community people themselves to own the process. Because if you go into the community with your project and they're not fully engaged and they're not involved, definitely you will find it difficult to achieve your goal.

There is need for the women and they at least send themselves to be at the center in all what we are planning. If they're not part of it, of course definitely you will not succeed. But when they're part of the process in identifying the issues like what Pleasant is doing and also come up with suggestions on how they can be addressed. I believe any country that implements projects where the adolescents and the women are fully engaged, will see drastic change and reduce in teenage pregnancy, gender-based violence. And finally there's need for government ownership and support. Government should own whatever processes that partners commit so by the end of the day, we'll have that continuity in addressing the issue of teenage pregnancy, child marriage and GBV.

Callie Simon: Patricia that is so important. The placing women and girls at the center but making sure that we all work together across all relevant actors to drive change. Thank you for your leadership in that in Sierra Leone. So that brings

us to the end of our discussion today. Thank you so much to both of you, Mrs. Patricia Bah and Miss Pleasant Kargbo for joining us and sharing all of the work that you are doing and that your colleagues are doing in Sierra Leone. I've learned so much. I'm inspired by your work and your action for women and girls and it's been a real pleasure having you both on today's program.

Marian Pleasant Kargbo: Thank you.

Callie Simon: Thank you Pleasant.

Marian Pleasant Kargbo: Thank you very much for having me.

Callie Simon: And thank you Patricia. And that wraps up today's episode highlighting gender, youth and equity in the midst of COVID-19. My name is Callie Simon. Thank you for listening.

Presenter: This concludes this edition of *MOMENTUM Presents*. For more information about our work, please visit www.usaidmomentum.org and follow us on Twitter @USAID_MOMENTUM for additional resources.

