



ASSESSING THE 2020 REVISED GUIDELINES FOR PREVENTION AND MANAGEMENT OF TEENAGE PREGNANCY IN SCHOOL SETTINGS IN UGANDA

EFFECTIVENESS, DISSEMINATION, AND IMPLEMENTATION GAPS



OCTOBER 2024



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LIST OF ACRONYMS AND ABBREVIATIONS

| | |
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| ACERWC | African Committee of Experts on the Rights and Welfare of the Child |
| ASRHR | Adolescent Sexual Reproductive Health Rights |
| AU | African Union |
| DEO | District Education Officer |
| FAWE-U | Forum for African Women Educationalists Uganda |
| FY | Financial Year |
| GAC | Global Affairs Canada |
| GDP | Gross Domestic Product |
| MEO | Municipal Education Officer |
| NCD | Network for Community Development |
| SRH | Sexual Reproductive Health |
| SRHR | Sexual Reproductive Health Rights |
| UBOS | Uganda Bureau of Statistics |
| UDHS | Uganda Demographic Health Survey |
| UN | United Nations |
| UNFPA | United Nations Population Fund |
| UNICEF | United Nations Children’s Fund |
| VHT | Village Health Team |
| WHO | World Health Organization |
| WROs | Women’s Rights Organizations |
| WORUDET | Women and Rural Development Network |
| YLOs | Youth-Led Organizations |

GLOSSARY OF TERMS AND DEFINITIONS

The following terms are as applied to school settings.

| | |
|-------------------------------|--|
| Adolescent: | Any person between ages 10 and 19 |
| Discrimination: | Any form of arbitrary distinction, exclusion or restriction affecting a person usually but not only by virtue of inherent personal characteristics or perceived belonging to a particular group. |
| Dissemination: | The process of sharing research findings with stakeholders and wider audiences. |
| Expulsion: | Permanent removal of a child from school. |
| Gender-based violence: | Any act that results in physical, sexual, or psychological harm or suffering to women, men and children. |
| Management: | Controlling and directing with a view to attaining a desired result. |
| Re-entry: | Readmission of a former student/pupil back into school after dropping out due to teenage pregnancy |
| Reintegration: | Readmission of a former student/pupil back into school after dropping out due to teenage pregnancy. |
| Reproductive health: | Complete physical, mental and social well-being and not merely the absence of disease or infirmity in all matters relating to the reproductive system and to its functions and processes. |
| School setting: | An institution where formal instruction occurs in accordance with the Ministry of Education and Sports calendar and may naturally apply to communities around schools |
| Social norms: | The perceived informal, mostly unwritten, rules that define acceptable and appropriate actions within a given group or community. |
| Teenage pregnancy: | Conception that occurs to persons between the ages of thirteen to nineteen years that may be incidental. In these guidelines, teenage pregnancy is extended to refer to pregnancy in girls aged between 10 and 19 years. |

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We acknowledge the technical support provided by the Center for Reproductive Rights throughout the research process and the role of different staff in the two Uganda women's rights organizations – the Network for Community Development (NCD) and Women and Rural Development Network (WORUDET) – in leading this research.

About SHE SOARS

CARE International, in partnership with the Center and Restless Development, is implementing an evidence-based holistic and multi-sectoral seven-year program to achieve gender transformative and sustainable change. The program is called Sexual and reproductive Health and Economic empowerment (SHE) Supporting Out-of-school Adolescent girls' Rights and Skills (SOARS).

SHE SOARS puts the needs and rights of out-of-school adolescent girls at the centre of all activities. It is expected to directly support 240,288 adolescent girls between 10-19. Through a participatory, youth-led design and implementation approach, SHE SOARS implements evidence-based health system strengthening interventions, deep and transformative community engagement on harmful gender and social norms, and intentional capacity building of women's rights organizations (WROs) and youth-led organizations (YLOs) to engage in long-term and sustainable sexual and reproductive health and rights (SRHR) policy advocacy to address the unique risks and protection needs of out-of-school adolescent girls and boys aged 10-19 years in Kenya, Zambia and Uganda.

The overall objective of our advocacy work is to ensure the improved effectiveness of key stakeholders, particularly WROs and YLOs, to advocate for evidence-based, accountable, and equitable adolescent SRHR (ASRHR) policies, standards, legal frameworks, and services.

Profile of NCD

NCD was founded in 2007, as a non-governmental organization (NGO) dedicated to improving lives through providing appropriate training, management and evaluation of community-based development programmes, undertaking participatory research and networking with various partners. NCD implements projects in areas of maternal, child and adolescent health, gender-based violence (GBV), environment, water and sanitation, and livelihoods focusing on children, youth and women. NCD is committed to ensuring that community members play an active role in the decision-making processes on issues that affect them.

Profile of WORUDET

WORUDET is a women's rights NGO founded in 2003 to respond to the developmental needs of women and girls in the post-conflict Northern Uganda. WORUDET implements projects in areas of SRHR including ASRHR, women and youth economic empowerment, climate smart agriculture and adaptation, land administration and governance, GBV, peacebuilding, and conflict resolution. WORUDET is committed to impact cross-sectional diverse groups through meaningful engagement and advocacy. Currently WORUDET predominantly operates in Northern Uganda and West Nile region.



1.0 EXECUTIVE SUMMARY

As a move to establish a supportive environment that enables teenage mothers to return and remain in school, the Ministry of Education and Sports revised the Guidelines for Prevention and Management of Teenage Pregnancy in School Setting in Uganda - 2020. Although this intervention by the Ministry is in place, only a small percentage of teenage mothers return to school. The research sought to answer why, despite the guidelines, there is still a small percentage of teenage mothers returning to school.

The research focused on reviewing secondary data from different sources, such as Google Scholar, as well as on studies conducted by different national and international agencies, for instance, the Ministry of Education and Sports, the United Nations Population Fund (UNFPA) and the United Nations Children's Fund (UNICEF), among others.

The data collected was categorized and analyzed into three themes: gaps in the guidelines, gaps in implementation, and gaps in dissemination.

1.1 Key Findings

1. The guidelines formalize at the national level the expulsion of pregnant learners through the mandatory 'maternity leave' when the learner is at least three months pregnant and 6 months after giving birth leading to a period of 1 year being out of school as highlighted on page 18 of the revised guidelines.
2. The guidelines provide for sensitization of the public and especially foundation bodies on the guidelines. The 2022 Teenage Mothers' Survey reported that some respondents opposed school reintegration for teenage mothers, with a perception that it would increase the number of teenage mothers since the rest of the learners view this as a privilege.
3. Pages 20 and 21 of the guidelines stipulate procedures that support the re-admission of teenage mothers into school. This has been openly violated by some institutions, religious-founded institutions, which openly declare their unwillingness to allow teenage mothers to return to school.
4. The Ministry of Education and Sports, through the Education Planning and Policy Analysis Department, puts in place the necessary measures, including administrative and budgetary, to review and amend the revised Guidelines for the Prevention and Management of Teenage Pregnancies in School Setting in Uganda - 2020 to:
 - Remove all provisions that allow forced pregnancy testing, mandatory leave for pregnant girls and a boy if he is father to the child.
 - Include provisions for access to appropriate and comprehensive SRH information to adolescents especially on contraception and non-teaching staff catered for under section 3.3 of the guidelines.



2.0 BACKGROUND

Education empowers boys and girls to participate in decision-making to build a better future for themselves and their communities. The 1992 White Paper on Education was a platform for reform in Uganda's education policy that led to the provision of education for all as a human right that called for free universal education. Uganda is committed to several global, regional and sub-regional frameworks like the Universal Declaration of Human Rights and the UN Convention on the Rights of the Child that respect the right to education. The 1995 Constitution for the Republic of Uganda, under Articles 21 and 33, 30 and 34, promotes gender equality and the right to education respectively. In addition, Uganda has established a policy and legal framework to ensure that the right to education is upheld. For instance, the Education Act 13, 2008, the National Sexuality Education Framework - 2018, the National Strategy to End Child Marriage and Teenage Pregnancy - 2022/2023-2026/2027, the 2015 Guidelines for the Prevention and Management of HIV/AIDs and unintended pregnancy in school settings in Uganda revised in 2020, all ensure the right to education.

The right to education has been recognized as a human right in several international conventions to which Uganda is a signatory. These include the International Covenant on Economic, Social and Cultural Rights which recognizes a right to free, primary education for all, an obligation to develop secondary education accessible to all with the progressive introduction of free secondary education, as well as an obligation to develop equitable access to higher education, ideally by the progressive introduction of free higher education.

A key restrictive factor to achieving universal access to education in Uganda is the expulsion of learners due to pregnancy, usually by conducting compulsory and impromptu tests (Maly et al., 2017). Pregnancy accounts for at least 22.8% of school dropouts among girls aged 14-18 years (Ministry of Education and Sports, 2020; UBOS, 2018). Pregnant learner expulsions are not more rampant only in pre-tertiary schools, but some tertiary institutions, especially those under religious foundations, also expel pregnant learners¹. Attempts to prevent the prevalence of pregnancy through the implementation of a school comprehensive sexuality education framework are being held back by a lot of dismissive resistance and attitudes of doubt². Despite the existing legal and policy framework in Uganda, it has not effectively supported the re-enrolment and re-integration of girls in school after pregnancy.

According to the National Strategy to End Child Marriage and Teenage Pregnancy 2022/2023-2026/2027, the current teenage pregnancy rate in Uganda is at 25% which is the highest in East Africa. Each year, more than UGX 645 billion (USD 182 million) is spent by the government on health care for teenage mothers and the education of their children (UNFPA, UNICEF 2022). An average of 1,000 teenage pregnancies are reported per day in Uganda, according to UNFPA data. These pregnancies can have serious health impacts. For example, complications during pregnancy and childbirth are the leading cause of death for 15-19-year-old girls globally, according to the World Health Organization (WHO).

Despite the enabling legal and policy framework on gender equality in education in Uganda, existing data indicates increasing cases of teenage pregnancy among adolescent girls aged 10-19 years in education institutions in Uganda. Several factors are responsible for this worrying situation. Key among them are the increase in sexual abuse of children, poor parenting styles, lack of life skills, and negative social and cultural norms, among others.

¹ (All East Africa, 2018; Etengu, 2006, as in the case of Maureen, explained in Kukunda-2017).

² (Babimpa & Bishop, 2018; Iyer & Aggleton, 2013; Kemigisha, Bruce, et al., 2019; Kemigisha, Ivanova, et al., 2019; Ninsiima et al., 2017).



Young people (10-24 years) in Uganda face many SRHR challenges stemming from early, unprotected and forced sexual activity. An underlying factor for this is limited access to youth-friendly SRHR information and services, which impacts young people's ability to make informed and healthy life choices. The provision and uptake of quality adolescent SRHR services remains low, especially in many rural areas of Uganda (UNFPA, 2021).

In 2015, the Ministry of Education and Sports 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. The guidelines for the prevention of teenage pregnancy were subsequently revised to incorporate the re-entry aspect. Although schools have been registering cases of teenage pregnancy, there has not been a systematic way of handling these cases to a conclusion. The revised guidelines, therefore, stipulate the measures and steps that should be taken in the school setting to prevent and manage pregnancy and re-entry of teenage mothers.



School based advocacy engagement on prevention of stigma and discrimination of pregnant girls and adolescent mothers - Mayangayanga Primary School, Mukono district. Photo credit: NCD

3.0 PROBLEM STATEMENT

The right to education is a fundamental human right. Every individual irrespective of race, gender, nationality, ethnic or social origin, religion or political preference, age and disability, is entitled to equitable and successful completion of education. In other words, girls have a right to access quality education regardless of whether they are pregnant or not (Forum for African Women Educationists (FAWE) Uganda 2011). Articles 30 and 34(2) of the Constitution of Uganda guarantee the right to education and promote the state's responsibility for children to receive basic education³.

In respect to this and as a move to establish a supportive environment that enables teenage mothers to return and remain in school, the Ministry of Education and Sports revised the Guidelines for Prevention and Management of Teenage Pregnancies in School Settings in Uganda - 2020. Although this intervention by the Ministry of Education and Sports is in place, a small percentage of teenage mothers return to school.

According to findings from the 2022 Uganda Demographic Health Survey, 21% and 25% of the girls between 15-19 years in urban and rural areas respectively are mothers or pregnant with their first child⁴. A study conducted by the Ministry of Education and Sports on Linkages between Teenage Pregnancy and School Dropout in Uganda in 2015, established that school dropouts due to pregnancy among girls of 14 to 18 years of age stood at 22.3 %⁵. Unfortunately, only 8% of the girls who drop out of school are given a second chance to re-enroll in school⁶.

The research sought to answer why despite the guidelines, there is still a small percentage of teenage mothers returning to school.

3.1 Research questions

1. To what extent have the gaps in the Revised Guidelines on the Management and Prevention of Teenage Pregnancies in School Settings in Uganda - 2020 affected the reintegration of teenage mothers in schools?
2. To what extent have the gaps in the dissemination of the revised guidelines affected the reintegration of teen mothers in schools in Uganda?
3. To what extent have the gaps in the implementation of the revised guidelines affected the reintegration of teenage mothers in schools in Uganda?

³ *Constitution of the Republic of Uganda, 1995.*

⁴ *Uganda Demographic Health Survey - 2022*

⁵ *Ministry of Education and Sports, Linkages between Teenage Pregnancy and School Dropout in Uganda, 2015.*

⁶ *Ministry of Education and Sports, Linkages between Teenage Pregnancy and School Dropout in Uganda, 2015. <https://urc.exposure.co/choosing-my-future?source=urc-news>*



4.0 METHODOLOGY

Data Collection

The research involved an extensive review of secondary data from a variety of reputable sources to provide a comprehensive understanding of the issues under study. Academic databases, particularly Google Scholar, were utilized to gather peer-reviewed articles and academic publications relevant to the research focus. Additionally, documented media reports such as newspaper stories and articles were reviewed to understand the documented cases, trends, and issues related to the research themes.

Data from national agencies played a crucial role in this research. The Uganda Bureau of Statistics (UBOS) provided valuable insights through the 2022 Uganda Demographic and Health Survey (UDHS). Reports from the Uganda Ministry of Education and Sports, such as the *Linkages between Teenage Pregnancies and School Dropout in Uganda (2015)* and the *National Strategy to End Child Marriage and Teenage Pregnancy 2022/2023-2026/2027*, were also reviewed. The Uganda Ministry of Health's documents, including the "Adolescent Health Policy Guidelines and Service Standards" (2012) and the "National Adolescent Health Policy", were essential for understanding health policy guidelines. Furthermore, studies commissioned by the Forum for African Women Educationalists Uganda (FAWE-U) in 2021 and the Windle International Uganda "Teenage Mothers' Survey" (2022) provided additional context and data.

Global agencies such as UNFPA and UNICEF offered international perspectives and data on related issues. The research also reviewed international and regional human rights treaties, including the Universal Declaration of Human Rights, the UN Convention on the Rights of the Child, the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), the African Charter on the Rights and Welfare of the Child, and the Maputo Protocol. These treaties provided a framework for assessing the rights and protections available to adolescents.

Data Analysis

The collected data were systematically categorized and analyzed according to three primary themes derived from the research questions: gaps in the guidelines, gaps in implementation, and gaps in dissemination.

1. **Gaps in the Guidelines:** This theme involved identifying deficiencies and inconsistencies within existing policy documents and guidelines related to adolescent health, education, and rights. The analysis focused on how these documents address the needs and challenges faced by adolescents, particularly in the context of teenage pregnancies and school dropouts.
2. **Gaps in Implementation:** The second theme examined the practical challenges and obstacles encountered in applying and enforcing these policies and guidelines. This analysis aimed to uncover the reasons behind the discrepancies between policy intentions and real-world outcomes, highlighting issues such as resource limitations, administrative inefficiencies, and socio-cultural barriers.
3. **Gaps in Dissemination:** The final theme evaluated the effectiveness of strategies used to communicate and disseminate information about these policies and guidelines to relevant stakeholders. This included assessing the reach and impact of these communication efforts among adolescents, educators, health professionals, and policymakers. The analysis sought to identify gaps in awareness and understanding that could hinder the successful implementation of these policies.



Data Presentation

The findings of the research were organized and presented according to the three identified themes: gaps in the guidelines, gaps in implementation, and gaps in dissemination. This thematic approach facilitated a clear and structured analysis, allowing for a comprehensive understanding of the identified gaps. Each theme was addressed in detail, providing insights and recommendations based on the reviewed data. The results highlighted specific areas needing attention and improvement in the context of adolescent health, education, and rights in Uganda.

Limitations

The research was limited to secondary data sources, focusing solely on the legal and policy analysis of the Ministry of Education and Sports' 2020 revised Guidelines for Prevention and Management of Teenage Pregnancies in School Settings in Uganda. It did not assess the gender sensitivity of these guidelines. To address this gap, future research could involve triangulating both primary and secondary sources using a mixed methods approach, providing a more comprehensive analysis that includes an evaluation of gender sensitivity alongside the existing legal and policy framework.



5.0 RESEARCH FINDINGS

5.1 Gaps in the revised guidelines

5.1.1 Mandatory pregnancy testing in schools

The guidelines for managing pregnancy in school settings in Uganda state that girls should be regularly checked for pregnancy, at least once per term and at specified times. However, the guidelines only mention mandatory pregnancy testing without detailing how it should be conducted in a way that will uphold the respect, dignity, and privacy of the learners. This essentially enforces pregnancy testing on all girls, even those who may not be sexually active, which is dehumanizing and violates their privacy and bodily autonomy. This practice goes against constitutional provisions in Uganda, including Article 24⁷, which mandates respect for human dignity and protection from inhuman treatment, as well as international standards such as the Universal Declaration of Human Rights (Article 12) and the African Charter on the Rights and Welfare of the Child (Article 10), which emphasize the protection of privacy.

In Legal and Human Rights Centre and Centre for Reproductive Rights (on behalf of Tanzanian girls) United Republic of Tanzania, the African Committee of Experts on the Rights and Welfare of the Child (ACERWC) held that the practices surrounding mandatory pregnancy testing and expulsion of pregnant girls in schools was in contravention of Article 11 of the Charter and directed Tanzania to reform its education policies to comply with human rights standards⁸. Uganda, having ratified the African Charter on the Rights and Welfare of the Child, is bound by this precedent and is thus mandated to replicate ACERWC's recommendations in its education system.

5.1.2 Confidentiality during pregnancy testing

The revised guidelines regarding the management of pregnancy in school settings lack provisions for maintaining the confidentiality of pregnancy test results. Instead, they mandate schools to inform the parents of any pregnant learner, regardless of potential negative consequences such as physical, verbal, or emotional abuse from parents, as evidenced by cases where pregnant girls endure mistreatment from their guardians. Despite aiming to prioritize the best interests of the child as enshrined in the Children Act 1996 and amended in 2016 and Article 15 of the UN Convention on the Rights of the Child (UNCRC), these guidelines overlook consulting the pregnant girl on how to disclose her pregnancy to her parents or guardians, even with the documented risks of backlash and mistreatment.

Instances of emotional and physical abuse experienced by pregnant adolescents from their parents have been reported, highlighting the detrimental effects of disclosing pregnancy without considering the girl's well-being. For example, in one of the studies⁹ conducted in Eastern Uganda, one pregnant adolescent shared her experience of being verbally abused and threatened with expulsion from her home by her mother.

7 Constitution of the Republic of Uganda, 1995.

8 Gina Bekker, 'The African Committee of Experts on the Rights and Welfare of the Child' in Manisuli Ssenyonjo (ed), *The African Regional Human Rights System* (Brill | Nijhoff 2012) <<https://brill.com/view/book/edcoll/9789004218154/B9789004218154-s013.xml>> accessed 7 February 2024.].

9 Nabugoomu J., Seruwagi G et al. *Needs and Barriers of Teen Mothers in Rural Eastern Uganda: Stakeholders' Perceptions Re garding Maternal/Child Nutrition and Health. International Journal of Environmental Research and Public Health* (2018)



“Ever since my mother got to know that I am pregnant, she abuses me and wants to chase me away from home and she says that I should go to the person who made me pregnant yet he ran away. She does not show me love or care [about me] and never trusts me with anything, saying that I am useless.”

5.1.3 Forced maternity and paternity leave for learners

Moreover, the guidelines enforce harsh rules segregating pregnant learners from their peers, requiring pregnant learners to leave school at three months’ gestation, and mandating a six-month maternity leave post-delivery, effectively resulting in a year-long absence from school¹⁰. Furthermore, if a fellow learner is identified as the father, they are also compelled to take leave concurrently with the pregnant girl as a deterrent measure against similar practices by other male learners, which contradicts constitutional rights to education. In extreme instances, some of them face legal persecution and possible jail terms.

5.1.4 Lack of supportive infrastructure and amenities for teenage mothers in schools

While the guidelines mandate pregnant learners to sit for national examinations, they do not ensure the provision of adequate facilities for breastfeeding mothers, such as dedicated rooms, diaper disposal facilities, and access to clean water, which are crucial for maintaining a supportive environment conducive to academic success of the teenage mothers. These guidelines fail to provide a supportive environment for teenage mothers during examination periods, neglecting to address their need to breastfeed their infants.

Adolescent pregnancy and motherhood have detrimental socioeconomic and psychological outcomes for the young mother, her child, and her young siblings. When a girl becomes pregnant, her education may end, her job prospects diminish, and she becomes more vulnerable to poverty¹¹. This reinforces the need to create school environments that encourage them to learn, and provides them with the requisite structures to thrive and make something of themselves.

5.1.5 The guidelines limit schools to abstinence-only strategies to prevent teenage pregnancy

Page 16 of the Revised Guidelines stipulates measures for preventing adolescent pregnancy among learners guided by the National Sexuality Education Framework which aims at addressing the sexuality education needs of various age groups starting from 3-5 years old. This framework received a backlash and strong criticism from various stakeholders, especially parents and religious leaders, for allegedly exposing young children to sex and promiscuity and being against moral and religious values¹². In 2022, female legislators also called on the state to review the Framework to ensure it caters for teenage girls who have dropped out of school¹³. However, all these efforts ended in vain. This has limited the schools

10 Amoni Kitooke, ‘The Expulsion of Pregnant Learners in Uganda: Teacher Perspectives on a Contravention of ‘Education for All’ <<https://gupea.ub.gu.se/handle/2077/69369>> accessed 8 February 2024..

11 Gloria Kirungi Kasozi and others, ‘School-Based Sexual and Reproductive Health Services for Prevention of Adolescent Pregnancy in the Hoima District, Uganda: Cluster Randomized Controlled Trial’ (2019) 2 Methods and Protocols 21.

12 Nakananze S. (2020), “Delayed Sexuality Education Program Divides Parents” Global Press Journal available at <https://global.pressjournal.com/africa/uganda/ugandas-delayedsexuality-education-program-divides-parents/>.

13 Nasasira, RD. (2022), “MPs call for review of the National Sexuality Education Framework” Daily Monitor, October 4, 2022 available at <https://www.monitor.co.ug/uganda/news/national/mps-call-for-review-of-the-national-sexuality-education-framework-3973248>.

to the abstinence only strategy as highlighted in section 2.2 of the revised guidelines which has failed to provide adolescents with timely, comprehensive, and non-judgmental information that responds to their realities and their sexual and reproductive health needs leading to persistent high rates of teenage pregnancies

The abstinence-only strategy contradicts the Health Sector Development Plan 2015/2016-2019/2024¹⁴ that calls for adolescent and young people to access comprehensive sexual and reproductive health information including on adolescent sexuality, contraception, unwanted pregnancies and unsafe abortions, and the improvement of access to and utilization of SRH services among young people. In addition, CEDAW provides for the right to access health education and family planning information¹⁵.

5.1.6 Employing a whole-school approach to prevention of sexual abuse among learners in schools

Section 3.3 of the revised guidelines outline the measures that should be taken in the event that the learner is impregnated by different categories of people and these include, fellow learners, teachers, and ‘outsiders’. However, the guidelines do not mention a key category, that is, when the non-teaching staff of the school are responsible for the pregnancies. It should be noted that these non-teaching staff do interact with the learners on a regular basis and any interventions to safeguard the learners from sexual abuse must include this category as well.

5.2 Gaps in Dissemination

5.2.1 Sensitization and popularization of the guidelines

Page 24 of the guidelines provides for sensitization of the public and especially foundation bodies on the guidelines. Studies conducted show that there are still existing gaps in the dissemination and popularization of the guidelines which has created a fertile ground for propagation of negative social norms and beliefs against the return of teenage mothers to schools. A Conference on Gender and Women’s Studies - 2022 reported a growing perception that the boy child who impregnates a girl should be arrested and imprisoned. This perception rose from 6% in 2017 to 11% in 2022¹⁶. The 2022 Teenage Mothers’ Survey reported that some respondents opposed school re-integration for teenage mothers, with a perception that it increases the numbers of teenage mothers since the rest of learners view this as a privilege¹⁷

Lydia Nakaweesi, an education consultant with the East African Partnership for Education submitted that the Ministry of Education and Sports has not done enough to disseminate the guidelines to all schools especially those in the rural areas. The acting gender advisory at the Ministry of Education and Sports in 2021 emphasized that the ministry had earnestly engaged over 277 district education officials, district community-based service officials, district health officers, senior women and men teachers, sub-county chiefs, headteachers and learners from the districts of Kassanda, Mubende, Mayuge, Namutumba, Namayingo and Mukono. However, this coverage is not sufficient in the dissemination (New Vision, February 2022)

¹⁴ Ministry of Health, Uganda - Health Sector Development Plan 2015/2016-2019/2024

¹⁵ Article 10 of the Convention on the Elimination of all forms of Discrimination against Women (CEDAW) for Youth

¹⁶ The Asian Journal-Papers Of 9th International Conference on Gender and Women’s Studies 2022.

¹⁷ Windle International Uganda Teenage Mothers’ Survey -2022.

5.3 Gaps in Implementation

5.3.1 Violation of readmission procedures

Pages 20 and 21 of the guidelines stipulate procedures that support the readmission of teenage mothers into school. For instance, they state that once the teenage mother's baby is at least six months old, she shall be allowed to be admitted back to school unconditionally. However, this has been openly violated by some institutions, especially faith-based educational institutions which openly declare their unwillingness to allow teenage mothers to return to school. A retired Bishop of Mukono Diocese, in January 2022 issued a directive which stated thus: "All headteachers, I want to tell you that we shall not allow pregnant or breastfeeding girls in class. When all girls turn up, carry out the usual medical examination so that those found pregnant can go back and give birth; they will come back after giving birth."¹⁸ On 18 January 2022, the Bishop of Rwenzori Diocese advised the government and other education stakeholders to stop allowing pregnant and breastfeeding girls to return to school. "We advise that let them first give birth, breastfeed and later they can come back to school. They set a bad example to the rest of the girls in school," the Bishop said.¹⁹

In addition, Page 21 of the guidelines necessitates the headteachers and District and Municipal Educations Officers to assist teenage mothers to be readmitted to other schools to avoid stigma. This goes against the principle of the best interests of the child as outlined in the guidelines, especially in situations when the teenage mother may wish to go back to the same school she was in before she got pregnant. In their current state, the guidelines provide that the learner shall be assisted to be readmitted to other schools to avoid stigma instead of focusing on addressing stigma in the schools. Addressing the root causes of stigma in schools allows teenage mothers to return to the same school or any school of their choice.

5.3.2 Discrimination and Stigmatization

Despite the guidelines assigning school administrators and teachers the task of protecting teenage mothers from discrimination and stigmatization and reassuring of their safety at school, negative attitudes from teachers, peers, parents and communities continue to be a stumbling block for teenage mothers and pregnant girls to realize their right to education.

Such acts of discrimination have been documented in several stories. For instance, during a study by the Initiative for Social and Economic Rights (ISER)²⁰ a pregnant teenager aged 15 reported; "I was not able to go to school any more. Even though I wanted to stay in school, the administration decided to stop my

studies after the other learners' parents learned about it and protested against my continued presence in school."

This situation is compounded by limited follow-up on the effective implementation of the guidelines by the district stakeholders.

¹⁸ Daily Monitor Newspaper Story – Block Pregnant girls from attending school, bishop tells teachers – Monday, January 10, 2022.

¹⁹ Daily Monitor Newspaper story – Don't allow pregnant girls in schools, said Ruwenzori Bishop-Tuesday, January 18, 2022(by Alex Ashaba)]

²⁰ An Applied Political Economic Analysis (APEA) on girl's access to education in Uganda: A case study of Ngogwe and Najja Sub-counties in Buikwe District, Uganda, February 2023 -<https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=&cad=rja&uact=8&ved=2ahUKEwjPmYegtp6EAxUYXUEAHZXD0M4FBAWegQIBhAB&url=https%3A%2F%2Fiser-uganda.org%2Fwp-content%2Fuploads%2F2023%2F10%2FAPEA-on-girls-access-to-education-in-Uganda.pdf&usq=AOvVaw2SasYu6kldMxWZ4OLBEjlq&opi=89978449>,

5.3.3 Lack of clarity on skills set (package of training) required for teachers

The guidelines assign teachers, especially the senior male and woman teachers, roles and responsibilities as regards implementing interventions for creating a supportive environment for teenage mothers and pregnant adolescents to re-enrol and stay in school. These include equipping learners with life skills to prevent teenage pregnancies, and providing psycho-social support and counselling to teenage mothers and pregnant adolescents. However, the guidelines do not prescribe/clarify the package of training the responsible teachers should receive and at what point technical support will be sought from qualified health workers. A study conducted in Buikwe District by ISER²¹ reported that these teachers are not trained and lack the required materials to impart such knowledge and information to learners.

5.3.4 No specified penalties for violation of the guidelines

Page 14 of the Revised Guidelines says that the Minister shall, by statutory instrument, specify penalties for default under each guideline after the approval of the guidelines. However, the penalties have not been put in place and specified. This has created a loophole for schools to openly violate the guidelines, especially on readmissions.

²¹ *An Applied Political Economic Analysis (APEA) on girl's access to education in Uganda: A case study of Ngogwe and Najja Sub-counties in Buikwe District, Uganda, February 2023* -<https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=&cad=rja&uact=8&ved=2ahUKEwjPmYegtp6EAxUYXUEAHZXD0M4FBAWegQIBhAB&url=https%3A%2F%2Fiser-uganda.org%2Fwp-content%2Fuploads%2F2023%2F10%2FAPEA-on-girls-access-to-education-in-Uganda.pdf&usg=AOvVaw2SasYu6kldMxWZ4OLBEJlq&opi=89978449>

6.0 RECOMMENDATIONS

Below are the recommendations to the different stakeholders:

6.1 Gaps in the Revised Guidelines

6.1.1 Minister of Education and Sports

Specify all penalties for default of provisions of the guidelines to hold institutions of learnings accountable for violation of readmission procedures of pregnant girls/teenage mothers.

6.1.2 Ministry of Education and Sports under the Education Planning and Policy Analysis Department.

Put in place the necessary measures, including administrative and budgetary measures, to review and amend the revised Guidelines for the Prevention and Management of Teenage Pregnancy in School Settings in Uganda - 2020 to:

- a. Remove all provisions that allow forced pregnancy testing and, mandatory leave for a pregnant girls and a boy if he is the father to the child as this is against Articles 11 and 10 of the African Charter on the Rights and Welfare of the Child respectively. The ACERWC held that the practices surrounding mandatory pregnancy testing and expulsion of pregnant girls in schools were in contravention of the Charter's Article and directed Tanzania to reform its education policies to comply with human rights standards. Uganda, having ratified the African Charter on the Rights and Welfare of the Child, is bound by this precedent and is thus mandated to replicate its rec- ommendations in the education system. Aligning this with national laws and international hu- man rights standards allows for protection of learners' autonomy, privacy, and dignity, while ensuring compliance with legal and ethical principles.
- b. Include provisions for informed consent. This is highly important in pregnancy testing procedures. Learners and their parents/guardians should be fully informed about the purpose, implications, and alternatives to pregnancy testing. Consent should be obtained freely and without coercion, respecting the rights and autonomy of the learners.
- c. Create a provision for a whole-school approach that involves and facilitates active engagement of non-teaching staff in the activities related to the prevention and management of teenage pregnancies, for instance holding periodic health talks. This should be initiated by the head- teacher with the support of a health worker/Village Health Teams (VHTs) from nearby health facilities.

6.2 Gaps in Dissemination

6.2.1 The Head of the Education Planning Department The Head of the Education Planning Department should:

- a. Establish clear communication channels for disseminating information, such as websites, newsletters, social media platforms, and mobile applications. This would ensure that the information is easily accessible, user-friendly, and available in multiple languages to accommodate diverse audiences with a stake in the education sector.
- b. Provide for training and capacity building opportunities for key stakeholders at national, district, and local levels. For instance, officials in the community, education and health departments, community leaders, and other government officials

could be equipped with the knowledge and skills on how to lay effective modes of disseminating information on the guidelines, and to allocate the resources needed to effectively communicate key messages and engage with diverse audiences.

- c. Create partnerships and collaborations with relevant organizations, including educational institutions, NGOs, community-based organizations, and media outlets to leverage their networks, expertise, and resources for dissemination of the revised guidelines through their routine activities.
- d. Conduct regular evaluations of dissemination approaches and activities for the guidelines to measure their reach, relevance, and impact. The feedback and data collected should be used to refine strategies, tailor messaging, and adjust dissemination approaches as needed to ensure maximum engagement and effectiveness.
- e. Establish mechanisms for collecting feedback from stakeholders to assess the effectiveness of dissemination of the guidelines, identify areas for improvement, and encourage open dialogue, solicitation of questions, and provision of clarification to address any misconceptions or concerns.

6.2.2 District and Municipal Education Officers The DEOs/MEOs should:

- a. Reintroduce the guidelines to the headteachers highlighting their roles and responsibilities in implementing them as well as drawing work plans for implementation in schools. This can be done through Zonal Coordination meetings.
- b. Put in place mechanisms for the education authorities at district and lower levels to monitor the implementation of the guidelines by the schools.
- c. Facilitate active engagement with key stakeholders, including educators, parents, learners, and community leaders, in the dissemination process. This stakeholder engagement can be done by conducting workshops, seminars, and information sessions to ensure that all stakeholders are informed about the revised guidelines.

6.2.3 Community Development Officer/ Foundation Body/Community-Based Workers and VHTs

Through mobilizing community members and conducting community dialogues, the Community Development Officer should introduce the guidelines to the community, stipulate their roles and responsibilities in preventing and managing teenage pregnancies and creating an enabling environment for the re-entry of teenage mothers into school.

6.3 Gaps in Implementation

6.3.1 Cabinet Minister for Education and Sports

The Minister of Education and Sports should enforce the commencement of the implementation of the National Sexuality Education Framework within the learning institutions and lay strategies for monitoring its implementation. The integration of the Sexuality Education Framework into the schools' curriculum is essential in the effective implementation of the revised guidelines as they refer to this framework.

6.3.2 District Education Officer/Municipal Education Officer

Through the Inspectors of Schools, the DEOs/MEOs should monitor and follow up on the implementation of the guidelines within the learning institutions.



6.3.3 School governing body/Headteachers/School Health Sub-Committee on Pregnancy and re-entry of teenage mothers

Schools should put in place strategies to monitor the attitudes and behaviour of teachers and other learners towards pregnant girls/mothers and ensure that there is a clear structure for reporting, investigating, and resolving any case of discrimination against teenage mothers. This can be achieved through operationalizing the Reporting Tracking, Referral and Response (RTRR) mechanism and ensuring it is working within schools for effective documentation and management of cases of discrimination and stigmatization.

6.3.4 Village Health Teams (VHTs)

VHTs should be brought on board to ensure pregnant and teenage mothers can access proper prenatal and postnatal services at the health facility within the catchment areas. This support can be done through the health facility-school linkage systems.

6.3.5 Members of the community especially parents and guardians

Community members, especially parents and guardians, should be empowered to become change advocates to curb the stigmatization of adolescent pregnant/mothers by positively influencing those who are against the idea of their re-entry into schools.

Parents and guardians should continue providing adolescent mothers with appropriate SRH information to prevent recurrence of teenage pregnancies.

6.3.6 Learners

- a) Learners with support from teachers must restrain from stigmatization of teenage mothers in school settings.
- b) Learners with support from school administrators, student leaders and teachers must report cases of unethical behaviours, ridicule, discrimination and stigmatization of teenage mothers.



School children participating in an activity. Learners should be encouraged to report cases of unethical behaviours, ridicule, discrimination and stigmatization of pregnant girls/teenage mothers to school administrators. Photo credit: NCD

7.0 CONCLUSION

The Government of Uganda through the Ministry of Education and Sports took a positive step in 2020 to revise the guidelines for prevention and management of HIV/AIDs and unintended pregnancies in school settings in Uganda to incorporate the re-entry of teenage mothers. Amidst having these revised guidelines in place, little has been achieved as far as re-entry and reintegration of teenage mothers is concerned. According to the findings of this study, this has been brought about by the gaps evidenced in the revised guidelines, and their dissemination and implementation. Implementation of the guidelines has failed due to weak enforcement of the law and policies hence becoming a loophole for non-compliance by education institutions. Persistent negative attitudes and harmful social norms practised by the different actors have created a non-conducive environment that limits the re-entry of girls into school.

A clear and strong system that supports teenage mothers to return and retain in schools can be created through the alignment of the guidelines to basic human rights standards, laying effective dissemination using multimedia campaigns and community dialogues, and enforcing implementation.


Adopting and integrating comprehensive sexuality education into the school can equip adolescents with appropriate information about their sexuality, improve access to contraceptive care, provide for continuous conduct of campaigns promoting abstinence, and foster healthy communication and relations between learners, teachers, and parents. This can create a supportive environment for teenage mothers and pregnant girls to reintegrate and thrive in school.

Addressing all the gaps in the Revised Guidelines on the Management and Prevention of Teenage Pregnancy in School Settings in Uganda - 2020, including those highlighted above, will go a long way in fostering the return to school of teenage mothers and contribute to increasing Uganda's professional cadre to spur development.



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