EXECUTIVE SUMMARY

INTRODUCTION
Ensuring health and well-being for young mothers and their children

Children everywhere deserve an opportunity to lead fulfilling lives – to survive, develop and thrive throughout childhood and adolescence and to reach their full potential. Adolescent girls are worthy of opportunity and agency to lead their lives in the way they choose. This should remain true for those who become mothers. And yet, adolescent mothers and their young children (ages 0–3) are uniquely vulnerable, often invisible to funders, policymakers and NGOs and shunned by their families and communities.

By listening to and amplifying young mothers’ voices in Kenya, Mozambique and Tanzania, In Her Words takes a first step towards ensuring opportunity for young mothers and nurturing care for their children. Grounded in the perspectives of nearly 200 young mothers in Kenya, Mozambique and Tanzania, In Her Words offers a framework for funders, policy makers, program designers and other power holders to take a two-generation approach to promoting nurturing care for children aged 0–3 and expanding opportunities and the realization of human rights for young mothers.

For further reading, please see the report upon which this executive summary is based, and country briefs for Kenya, Mozambique and Tanzania.

CONTEXT
Early childbearing, early marriage, poor health and violence are common

In Kenya, Mozambique and Tanzania, a large share of very young children are being raised by adolescent parents. Adolescent mothers are parenting in an extremely difficult context for sexual and reproductive health and rights (Table 1). Although data on adolescent fertility are focused on births between age 15 and 18, girls younger than 15 are also parenting and face specific challenges. As many as 14% of girls in Mozambique had a child before age 15, and there is a well-documented trend of Tanzanian girls facing expulsion from primary school (up to age 14) for pregnancy (Jaén-Sánchez, 2020 and Center for Reproductive Rights, 2013). Girls who participated in this research also commented on their experiences of pregnancy and parenting before age 15.

Table 1: Childbearing, marriage and health indicators for girls and young women in Kenya, Mozambique and Tanzania

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Kenya</th>
<th>Mozambique</th>
<th>Tanzania</th>
<th>World</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adolescent fertility rate (births per 1000 women aged 15–19)</td>
<td>73</td>
<td>144</td>
<td>115</td>
<td>41</td>
</tr>
<tr>
<td>Married by age 18 (among women aged 20–24)</td>
<td>23%</td>
<td>53%</td>
<td>31%</td>
<td>n/a</td>
</tr>
<tr>
<td>Maternal mortality ratio (maternal deaths per 100,000 live births)</td>
<td>342</td>
<td>289</td>
<td>524</td>
<td>211</td>
</tr>
<tr>
<td>% of women who experienced physical or sexual violence in last year (age 15–49)</td>
<td>26%</td>
<td>16%</td>
<td>30%</td>
<td>13%</td>
</tr>
</tbody>
</table>


For further reading, please see the report upon which this executive summary is based, and country briefs for Kenya, Mozambique and Tanzania.
EXECUTIVE SUMMARY: IN HER WORDS

KEY INSIGHTS
What young mothers say about pregnancy and parenting in Kenya, Mozambique, and Tanzania

Young mothers are clear about the challenges they face, articulating inequities at the interpersonal, community and systemic levels. They are determined to give their children the best, but isolation, discrimination, violence and a loss of opportunity are major barriers. Four key insights were shared across the three countries, and at the center of them all, young mothers were grappling with shame. Shame damages young mothers’ social and emotional wellbeing, curtails their education, harms their health and constrains their future. It limits young mothers’ wellbeing and their ability to provide nurturing care for their children.

Motherhood has changed her identity; she has lost her childhood and become an adult overnight. In a short time, young mothers go from being children themselves to bearing sole financial, emotional and caretaking responsibilities for another person. This experience is a significant source of trauma for girls and young women. Young motherhood is often an isolating experience, as many young mothers lose the companionship of friends and schoolmates and face abandonment from partners and family. Further, despite being highly motivated to provide for their children, young mothers face barriers due to the lack of knowledge and preparation to be parents and the stigma they and their children face in the community and from service providers.

“As what is challenging about becoming a mother is feeling guilty about not having a future. Being anxious about my future and the future of my child.”

—ADOLESCENT MOTHER, KISUMU, KENYA

Young mothers experience violence and abandonment from their partners and families. Economic, emotional, and sexual violence are pervasive problems affecting young mothers in Kenya, Mozambique, and Tanzania. They are often shunned by their families, some are rejected by their partners, and many experience domestic violence. The experience of violence fundamentally violates young mothers’ rights. It puts their children in ongoing danger of experiencing violence themselves and witnessing violence against their mothers and threatens their early childhood development.

“First, he forbid me to leave the house, then he beat me a lot. I heard from the older women that this is just the way it is. My husband sometimes gave me money so that helped me. When I got pregnant and told him, he denied it, said that it was from other men.”

—YOUNG MOTHER, MOZAMBIQUE

Young mothers, and their children, experience discrimination and violence by the systems meant to protect and support them, especially the health and education systems. Young mothers make it painfully clear that school no longer feels like a
EXECUTIVE SUMMARY:

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Young mothers have few opportunities to earn money; they most often engage in irregular and inconsistent work such as cleaning clothes or houses, fish mongering, or selling food or porridge. For some, the only option is sexual exploitation. These are all forms of labor that put them at risk of violence. Without access to reliable childcare, livelihood opportunities, and capital, young mothers struggle to find sustainable ways to support themselves and their children. In some contexts, this is compounded by early marriage, which can be a driver or a result of pregnancy.

“I had to stop going to school because of my belly, it wasn’t exactly because they expelled me but because I felt ashamed to be there, to hear the teachers point to me as an example of a person who chose a bad path. I became a little more homely with the arrival of the baby.”

YOUNG MOTHER, MOZAMBIQUE

Excluded from the informal and formal labor force, young mothers have limited opportunity to become financially self-sufficient and provide for their children.

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“I feel like I started a new page to fight for a new life, I have to work hard so I can help my child and I don’t have time to go back to school. I want to become a businesswoman selling clothes.”

YOUNG MOTHER, MWANZA, TANZANIA

RECOMMENDATIONS

Listen to young mothers for solutions to the challenges they are facing

Young mothers shared what would have helped during pregnancy and birth and what support they need now from families, communities and governments. Young mothers called for safe spaces to be girls, opportunities to be in community with other mothers; respectful health services for themselves and their children and youth-friendly, comprehensive sexual and reproductive health and rights information; educational opportunities for themselves and their children; and opportunities to become financially self-sufficient.

“I feel good to be able to share my issues and challenges and be able to find community in young mothers going through the same issues as me.”

YOUNG MOTHER, MATHARE, KENYA

Figure 2: Holistic Solutions for Young Mothers and their Children

<table>
<thead>
<tr>
<th>Informal</th>
<th>Formal</th>
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<tbody>
<tr>
<td><strong>Individual</strong></td>
<td><strong>Support safe spaces to build community with other young mothers and disrupt internalized shame.</strong></td>
</tr>
<tr>
<td><strong>Systemic</strong></td>
<td><strong>Champion young mothers’ efforts to build social capital and leadership and shift culture and social norms around gender-based violence, including early marriage, single motherhood, and young motherhood.</strong></td>
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<tr>
<td><strong>Resource young mothers to access health care, education, childcare and livelihoods opportunities.</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Support advocacy efforts to ensure an enabling policy environment for pregnant and parenting girls to access health care, education, childcare and livelihoods opportunities.</strong></td>
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Note. This analytical framework was adapted from Gender at Work.
IN HER WORDS
to go back to school; develop programs explicitly focused on pregnant and parenting girls.

HOW: Support direct service, systems change, and social norm-shifting efforts so young mothers have access to critical services like health, education, and childcare for their children.

E.g., Contribute to advocacy efforts to ensure pregnant and parenting girls have access to quality and stigma-free education and healthcare, including access to childcare while learning.

E.g., Campaigns targeting patriarchal norms around marriage, pregnancy and men’s and boys’ responsibility as parents.

Gender inequality limits young mothers’ options at every turn. It reduces their access to resources and even shapes how they are taught to think about themselves. As presented in Figure 2, the solutions that young mothers identified would build their social capital, increase access to resources and reduce gender inequality.

CONCLUSION
A better future for all

As a starting framework, funders, policy makers, program designers and other power holders might consider:

• WHO: Do not overlook younger mothers. They face the most risk, as do their children.

  E.g., Prioritize work that specifically serves adolescent (<18) mothers’ needs for social support, education, livelihood opportunities and health; support work that specifically serves very young adolescents (<15) to help prevent pregnancy and/or support

• WHAT: Champion efforts to build young mothers’ power and social capital.

  E.g., Support girls and young mothers’ groups, NGOs, projects that integrate empowerment with livelihoods, childcare and SRHR training.

  E.g., Resource work led by young mothers that provides opportunities to challenge the systemic harms they face, build their social networks of support and to work collectively to meet their needs.

• WHEN: Prioritize efforts to meet young mothers’ needs during and after pregnancy.

  E.g., Increase access to affordable high-quality childcare to allow young mothers to go back to school; develop programs explicitly focused on pregnant and parenting girls.

• HOW: Support direct service, systems change, and social norm-shifting efforts so young mothers have access to critical services like health, education, and childcare for their children.

  E.g., Contribute to advocacy efforts to ensure pregnant and parenting girls have access to quality and stigma-free education and healthcare, including access to childcare while learning.

  E.g., Campaigns targeting patriarchal norms around marriage, pregnancy and men’s and boys’ responsibility as parents.

When young mothers and their young children are safe, healthy, connected to their communities and cared for, they are linchpins of families and communities. They are the best chance for their young children to survive, develop and thrive. They are deserving human beings, worthy of respect and rights. Supporting a young mother is making an investment in her future, that of her children, and the future of her community. It is an investment we can’t afford not to make.
REFERENCES


