INTRODUCTION

Twenty-five years ago, 179 governments came together at the International Conference on Population and Development (ICPD) in Cairo to develop a Programme of Action to empower women and girls by achieving four main goals: universal education; reductions in infant and child mortality; reductions in maternal mortality; and improved access to reproductive and sexual health services. This year, from 12–14 November, the forthcoming Nairobi Summit will mark the 25th anniversary of that commitment. It will aim to re-energise the ICPD agenda, ‘accelerating the promise’ to reach universal coverage of sexual and reproductive health by 2030, with a strong focus on adolescents in line with the new global strategy of the United Nations Population Fund (UNFPA) to help young people develop agency over their lives and bodies.

Ensuring that adolescent girls have equitable access to sexual and reproductive health (SRH) services and rights is a crucial component in achieving gender equality. Although much progress has been made, there is still a long way to go before we have reached universal SRH coverage – not least because of recent political backlash. This quarter, the GAGE Research Panorama highlights a number of very recent publications that provide evidence on the gaps in SRH coverage and suggests strategies to enable adolescents to access their reproductive rights.

We are delighted to share a series of GAGE policy briefs that summarise our baseline findings from Jordan and Dhaka, Bangladesh. We have also contributed a chapter on GAGE findings on age and gender-based violence in Ethiopia and Rwanda in the edited volume Putting children first: new frontiers in the fight against child poverty in Africa. Finally, in association with the International Center for Research on Women (ICRW), GAGE produced a research and programmatic brief entitled Child marriage, intimate partner violence and mental health among young Ethiopian women.

Here, we summarise key findings in relation to GAGE’s six adolescent capabilities and then the full abstracts for the relevant reports can be found below.

The GAGE Research Panorama provides an overview of current research on adolescents over the most recent GAGE quarter, as well as external grey and published literature, specifically looking at articles that relate, from a gender perspective, to GAGE’s key capability domains: education and learning; bodily integrity and freedom from violence; health, nutrition and sexual and reproductive health; psychosocial well-being; voice and agency; and economic empowerment. It also aims to look at the ways specific vulnerabilities such as age, disability and refugee status further disadvantage adolescents in achieving these capabilities.
Education and learning

Access to education remains poor for many refugee adolescents. In Bangladesh, for example, there is a significant lack of access to schooling for Rohingya refugees—97% of Rohingya adolescents (aged 15–18 years) are not getting any kind of education (UNICEF, 2019). In Jordan, although refugee enrolment is higher than in Bangladesh, Syrian refugees have the lowest attendance (71%) compared to Palestinian refugees (86%) and Jordanian nationals (89%) (Presler-Marshall et al., 2019). In terms of learning outcomes, boys are behind girls: in Jordan, only 39% of boys were able to read a simple story, compared to 52% of girls. Palestinian boys’ learning outcomes are particularly low (23%)—most likely due to high rates of school violence and overcrowding (Presler-Marshall et al., 2019).

A recent report (UNICEF and Internal Displacement Monitoring Centre (IDMC), 2019) emphasises that providing comprehensive access to quality education for internally displaced persons (IDPs) brings positive health, economic and social impacts and helps build social cohesion between host and displaced communities.

Policy and practice implications

» Expand social protection schemes (such as labelled cash transfers for education) to refugee populations, to encourage families to keep their children in school.

» Train teachers on positive classroom management techniques and non-violent discipline methods to foster more conducive learning environments.

» Create learning centres for out-of-school refugees and IDPs, focusing on literacy, numeracy and vocational skills, and broadening pathways back to formal education.

Bodily integrity and freedom from violence

Across low- and middle-income countries (LMICs), rates of peer bullying are extremely high—34% of adolescents reported experiencing bullying once in the past 30 days. Furthermore, adolescent boys face a high likelihood of physical attack (35.6% experienced this in the past 12 months), fighting (36.4%) and serious injuries (42.9%) (Han et al., 2019). Globally, migrant and refugee children are particularly vulnerable to violence, and many experience violence when leaving their homes, throughout their journey, and once they are settled in their new country (UN SRSG on Violence against Children, 2019). In Jordan, age-based violence at home, at school and in the community is extremely common—42% of adolescents reported experiencing peer violence in the past year (Presler-Marshall et al., 2019).

A new GAGE/ICRW policy brief found that early marriage in Ethiopia is linked to both a decrease in psychosocial well-being and an increase in the likelihood of experiencing intimate partner violence, suggesting that this violence could partly account for the negative psychosocial impacts observed among girls who married early (Sebany et al., 2019). In addition to child marriage prevention efforts, also invest in tailored programming for ever married girls with a focus on safe spaces, psychosocial support and gender-based violence awareness and reporting mechanisms.
Health, nutrition, and sexual and reproductive health

Around the world, **adolescent motherhood is linked to low birthweight children** (FAO et al., 2019) and in India, it is linked to poorer academic performance and shorter stature, with greater effects on girls (Perez-Alvarez and Favara, 2019). However, access to contraceptives among adolescents is still uneven. In Jordan, **contraceptive use is extremely low, particularly among married girls** – with only 44% reporting using any form of contraception; adolescent pregnancy rates are also high, particularly among Syrian girls (Presler-Marshall et al., 2019).

While much attention has rightly been paid to the vulnerabilities and life-course consequences of child marriage for adolescent girls, a new report highlights that we should also pay more attention to the impacts of child marriage on boys. Data from 15 LMICs with the highest rates of male child marriage show that **men who married as children are more likely to have 3 or more children themselves**, are more likely to exceed their ideal family size and have less comprehensive knowledge on HIV (Misunas et al., 2019).

**Policy and practice implications**

» Ensure that schools provide comprehensive sexual health education, starting in very young adolescence.

» Invest in community SRH rights programmes – targeting out-of-school adolescents and early-married girls and boys – to increase awareness of the health risks of early pregnancy.

Psychosocial well-being

There is increasing awareness about the importance of investing in adolescent psychosocial well-being but still considerable knowledge gaps on the gendered patterning of mental distress and appropriate interventions. A new article on findings from **Niger and Ethiopia** highlights that child **marriage is associated with a number of psychosocial outcomes** such as depression and anxiety, and this was often related to the burden of marital responsibilities placed on girls at an early age (John et al., 2019). In Ethiopia, domestic violence is also seen as a key trigger of mental ill-health (Sebany et al., 2019). Furthermore, adolescents in Palestine with **greater exposure to a range of forms of violence** – at home, during conflict, and in the community – had **higher levels of mental health problems** (El-Khodary and Samara, 2019).

In terms of appropriate responses, multi-level integrated programming is gaining attention as an effective approach. A new report from Malawi and Tanzania focusing on a **programme aimed at tackling depression among adolescents**, which included an integrated approach that raises awareness of depression and improves mental health literacy among students, teachers and the community – **was found to have positive results** (Kutcher et al., 2019).

**Policy and practice implications**

» Increase awareness of the available psychosocial services, including specialised outreach to married girls to encourage uptake of psychosocial services.

» Improve mental health literacy among service providers in schools and healthcare centres to enable professionals to accurately diagnose mental health problems in adolescents and be able to refer them to appropriate services.

Voice and agency

This year’s International Day of the Girl Child is focused squarely on girls’ voice and agency under the slogan of ‘GirlForce: Unscripted and Unstoppable’. A new study (Plan International UK, 2019) of adolescent girls in nine countries has found that **as girls enter adolescence, they start to question the gendered expectations** placed upon them. Early adolescence was described as a key stage during which girls have an increased awareness of these restrictions. GAGE findings from
Jordan echo this, as adolescent girls in that country lack mobility and access to social networks. Compared to boys, girls are 44% less likely to leave their communities on a weekly basis and 43% less likely to have a mobile phone (Presler-Marshall et al., 2019). A new report by ICRW also highlights the impact that a lack of agency can have on adolescent girls’ ability to access their reproductive rights (Hinson et al., 2019).

Policy and practice implications

- Allow adolescent girls to connect with their peers digitally by providing computer literacy programmes (including components on internet safety) and increasing access to public internet spaces.
- Ensure that community programmes target the most socially isolated adolescents and provide safe spaces where adolescents can actively participate in their community.
- Provide empowerment programmes aimed at girls and their family members to tackle harmful gendered social norms, ensuring that these programmes also target pre-adolescent girls.

Economic empowerment

Child labour remains a major concern in many LMICs. In Bangladesh, a new GAGE report highlights that many adolescents – 26% of young adolescents and 50% of older adolescents – work. Labour is highly gendered, with boys tending to work in plastics or printing factories, whereas girls often work in garment factories, which tend to have fewer regulations and poorer conditions (Khondaker et al., 2019). GAGE findings in Jordan also draw attention to high rates of child labour, especially for Syrian refugees. There is also a large gender difference, as boys are much more likely to be involved in paid work (64% compared to 11% of girls). This is largely due to social norms that restrict girls’ mobility to ensure their safety (Presler-Marshall et al., 2019) and a dearth of social protection services. Indeed, shortcomings in social protection coverage are highlighted in a recent report from the Middle East and North Africa (MENA) region, which finds that social protection services do not have enough reach to cover all children in need (Bloch et al., 2019).

Policy and practice implications

- Link adolescents with vocational training courses that enable them to access safe and appropriate paid work (with particular attention to gender-differentiated needs) and ensure that working adolescents have access to skills-building and educational programmes.
- Ensure that adolescents are aware of, and have access to, child-friendly services which can help them report cases of labour exploitation and risky working conditions.
- Scale up social protection services in the MENA region, ensuring that they reach the most vulnerable adolescents (such as refugee adolescents or adolescents with disabilities) and are tailored to the specific needs of each group.

Most boys work and are poorly paid, few girls work for pay or are allowed to control money.

On average, 11% of girls age 15-17 work for pay, but in informal tented settlements, 46% have worked for pay. 67% of Syrian boys age 15-17 have worked for pay. 53% of Palestinian and Jordanian boys have worked for pay.

On average, working boys are paid:
- 1.7 JOD/hour
- 7.2 JOD/day

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