

Listening to young people's voices under covid-19

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Adolescent well-being in a time of crisis: assessing SDG progress during covid-19 and priorities for a resilient recovery for adolescents and youth

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Introduction

The covid-19 pandemic has dramatically disrupted the implementation of the 2030 Agenda, potentially undermining decades of development gains. In 2020, over 100 million people were pushed back into poverty and hunger; an equivalent of 255 million full-time jobs were lost; and an additional 101 million children and youth fell below the minimum reading proficiency level due to school closures.¹ Evidence indicates that violence against women and girls has intensified, especially within the household, and child marriage risks have been heightened in some contexts.² The impact of the pandemic has also exposed inequalities in access to healthcare and sanitation services and the inadequacy of national social protection systems in LMICs.³

Numbering an estimated 1.8 billion, adolescents and youth aged 10–24 comprise the largest group of young people the world has ever seen.⁴ How adolescents develop during the transitional decade between childhood and adulthood will impact not only their own futures but also the realisation of the central tenets of the Sustainable Development Goal (SDG) agenda.⁵ As the effects of the covid-19 pandemic continue to unfold around the globe, the multidimensional impacts



the crisis has had on adolescent and youth well-being grow steadily clearer. Though less vulnerable to the virus itself, a growing body of evidence is highlighting that young people are more susceptible to the economic and social burdens brought about by the last 18 months of restrictions on schooling, movement and access to services.⁶ Notwithstanding the challenges international agencies and national statistics offices have faced in reporting on SDG progress during the pandemic, a growing evidence base indicates that the impacts of service closures designed to curb the spread of covid-19 have impacted key SDGs that are integral to adolescent development, including health and well-being (SDG 3), education (SDG 4), access to economic empowerment and decent work (SDGs 1 and 8), and protection from violence (SDGs 5 and 16).⁷

In this brief, we use the SDG Agenda as a lens through which to view the patterning of the impacts the pandemic has had on adolescent well-being, gauging the efficacy of the SDG framework to make visible specific challenges faced by adolescents. In conjunction, we assess the extent to which SDG data highlights pre-existing vulnerabilities associated with age and sex. While the SDGs provide the framework for this discussion, we complement the discussion with data from the Gender and Adolescence: Global Evidence (GAGE) longitudinal study collected before and after the onset of the pandemic and highlight areas where sex- and age-sensitive data is crucial to understanding adolescent well-being in the covid-19 context (see also infographic on p. 3).

Adolescent health and well-being



Goal 3: Ensure healthy lives and promote well-being for all at all ages

Financial stress, service disruptions and heightened vulnerability to age- and gender-based violence due to restrictions on movement are all factors that have threatened adolescents' physical, mental, and sexual and reproductive health (SRH) during the pandemic. Adolescent mental health and psychosocial well-being have been jeopardised since the pandemic began as young people endure the stress of fear, isolation and economic insecurity. GAGE research in Jordan highlighted that girls reported feeling depressed due to social isolation, while boys in both Jordan and Ethiopia reported increased substance use (tobacco and hashish in Jordan, *khat*⁸ in Ethiopia) to cope with stress.⁹ Eighty-seven percent of adolescents surveyed by GAGE in Bangladesh reported that household stress had increased since the beginning of the covid-19 outbreak, and qualitative data indicate that financial stress is by far the most common cause of household tension, adversely impacting psychosocial well-being. According to our research, the stress associated with isolation, as a result of lockdowns and continued school closures, combined with financial pressures has taken a serious toll on young people's mental health. Mental health, however, has limited visibility in the SDGs, measured only by a single indicator that tracks deaths caused by suicide (3.4.2).

In terms of physical health, UNFPA has predicted that covid-19 mitigation measures could deny 47 million women access to modern contraceptives – leading to 7 million unintended pregnancies – and this does not acknowledge the potential needs and pregnancies of adolescent girls.¹⁰ Married girls, who already face heightened barriers to health services and mobility, are likely to confront pronounced challenges. For instance, in Jordan only 44% of married girls surveyed could identify a form of contraception and 21% of married girls noted that access to SRH services had become more difficult in the post-covid-19 context.¹¹ While the SDG Agenda provides an indicator to track adolescent birth rates, usefully measuring access to SRH services is much more difficult. Indicator 3.7.1 reports on the 'proportion of women of reproductive age who have their need for family planning satisfied with modern methods', but the age bracket of 15–49 years of age fails to provide any insight into which groups of women and girls have more limited access. Such information is vital as, according to the 2020 SDG Report, the covid-19 pandemic risks reversing progress in family planning services and school closures will have left many young people without access to curriculum-based comprehensive sexuality education.¹² In terms of mental health, girls have faced a significantly higher risk than boys of poor psychosocial well-being outcomes due to more pronounced social isolation and increased exposure to sexual and gender-based violence (SGBV).¹³

Economic empowerment and access to decent work



Goal 1: No poverty



Goal 8: Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all

The economic impacts of the pandemic have been seismic and virtually universal, suppressing consumer demand and constricting labour markets in regions with already struggling economies.¹⁴ While the vast majority of low- and middle-income country (LMIC) populations are impacted by the pandemic's economic fallout, the impacts are particularly severe for socially disadvantaged groups, including adolescents affected by forced displacement.¹⁵ GAGE mixed-methods research found that across contexts in Bangladesh, Ethiopia, Jordan and Palestine, households in refugee and IDP communities have felt the economic consequences of lockdowns acutely, with girls often enduring disproportionate deprivation. In Cox's Bazar, Bangladesh, for instance, girls in our sample from Rohingya displaced communities were 38% more likely to be hungry than boys before the covid-19 pandemic. Since the outbreak began, the gender discrepancy has risen to 51%, and girls in camps are 63% more likely than boys to be hungry.¹⁶

In Ethiopia, GAGE qualitative research shows that internally displaced youth, who already lack the support of their home community networks, have extremely limited access to social protection, making them exceptionally vulnerable to economic downturns and putting them at greater risk of violence.¹⁷ However, while SDG indicator 1.3.1 calls for data collection on the proportion of the population covered by social protection systems, its data series fail to disaggregate for adolescents or youth, and in turn by different socially disadvantaged groups of young people, leaving this crucial segment of the population unaccounted for in policy and programming responses.

In crises, women and adolescent girls face increased financial instability. Their overrepresentation in the informal sector¹⁸ is expected to intensify vulnerability during covid-19, as well as risking unemployment from low-skilled supply chains at risk of dismissal. GAGE research found that unpaid domestic and care work burdens have risen precipitously in the wake of the pandemic: in Dhaka, for example, 97% of older girls reported an increase in the time they spend performing care work. While SDG 8 does not include an indicator related to domestic and unpaid work, we know that girls' domestic and care burdens are a frequent impediment to charting a course toward safe and productive employment.¹⁹ Indicator 5.4.1 seeks to measure these types of gender discrepancies in domestic chores and care work carried out by young people, although the majority of countries do not report disaggregated data for 10–24 year olds, thereby rendering invisible the heightened risks that very young adolescents can face in terms of their future educational and economic empowerment.

Access to education



Goal 4: Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all

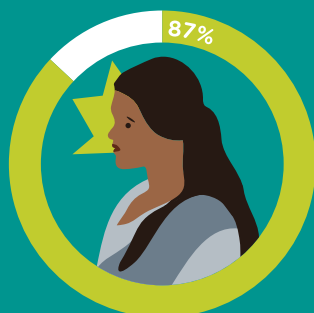
When covid-19-related restrictions began to take effect in April 2020, education systems were among the most quickly and universally impacted institutions, with 194 countries enacting country-wide school closures that affected 91% of the world's enrolled learners. A full year later, 10% of enrolled learners continue to face total school shutdowns and 83% remain impacted by partial shutdowns and/ or distance learning.²⁰ This disproportionately disrupts girls' education by increasing the risk of permanent drop-out, child marriage and adolescent pregnancy.²¹ Global projections on learning outcomes are also bleak, particularly for vulnerable groups. In 2020, educational systems in LMICs reported greater student cumulative learning loss, fewer teachers systematically monitoring learning during closures, and a more profound gender divide between girls and boys and socioeconomic groups.²² GAGE survey data reveals that even in countries

Health and well-being

3 GOOD HEALTH AND WELL-BEING



87% of adolescents surveyed by GAGE in Bangladesh reported that **household stress** had increased since the beginning of the covid-19 outbreak, which has negative effects on adolescent mental health.



In Cox's Bazar, Bangladesh, Rohingya girls in camps were 63% more likely than boys to be **hungry**.



In Jordan 31% of boys and 39% of girls in informal tent settlements (ITS) experienced **reduced dietary diversity** since the pandemic began.



Economic empowerment and access to decent work

1 NO POVERTY



8 DECENT WORK AND ECONOMIC GROWTH



In Jordan, 45% of older boys had to spend more time in **paid work** since the pandemic began, while 89% of older girls spent more time engaging in **domestic work**.

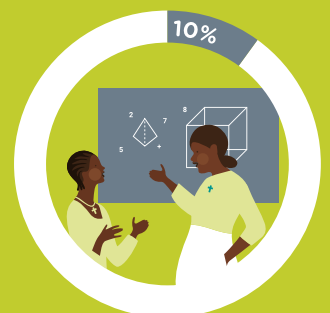
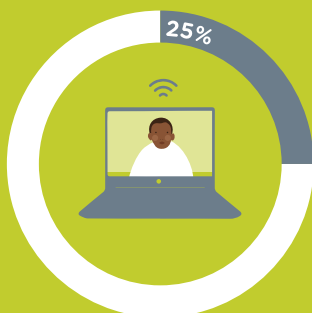


Access to education

4 QUALITY EDUCATION



In Ethiopia, only 25% of adolescents surveyed had access to **remote learning opportunities** and only 10% had had **contact with a school teacher** in the last week.

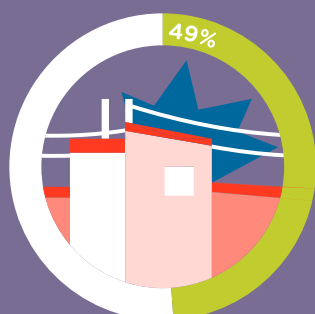


Protection from violence

5 GENDER EQUALITY



16 PEACE, JUSTICE AND STRONG INSTITUTIONS



In Jordan, 49% of adolescents surveyed described increased levels of **intra-household conflict**.



In Ethiopia, one fifth of adolescents have reported **increased violence in their communities** since the pandemic began.

such as Jordan that were quick to roll out distance learning platforms, the duration of the lockdown took a severe toll on adolescents' education as distance-learning fatigue grew and adolescents in poorer families lacked the resources to participate in online learning.²³

Protection from violence



Goal 5: Achieve gender equality and empower all women and girls



Goal 16: Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels

Recent gains made in advancing gender equality and girls' and women's right to bodily integrity could be reversed as a result of the covid-19 pandemic.²⁴ The continued outbreak and mitigation response will exacerbate existing gender inequalities and expand discriminatory gendered norms impacting women's and girls' well-being across educational, health and employment domains.²⁵ In times of crisis, evidence from other pandemics suggests that adolescent girls are more likely to face the risk of child marriage, potential teenage pregnancy and gender-based violence.²⁶

UNFPA estimates that owing to the delays in programming to tackle harmful practices, increased acts of violence against women and girls, and families' perceived need to control girls' sexuality, one-third of the anticipated progress on the SDG targets on child marriage and female genital mutilation (FGM) will be lost.²⁷ While it is too early to tell the exact extent to which covid-19 is impacting rates of child marriage, evidence from previous acute emergencies suggests that girls and women from poor and marginalised groups will be severely affected.²⁸ Some estimates predict that the pandemic will result in 2 million more cases of FGM over the next decade that could have been averted and an estimated 13 million more child marriages over the next 10 years.²⁹

GAGE data from Ethiopia show that one-fifth of adolescents have reported increased violence in their communities since the pandemic began, as violent robberies have increased alongside economic insecurity and police forces have begun cracking down. Meanwhile in Jordan, 49% of adolescents surveyed described increased levels of intra-household conflict.³⁰ While the SDG Agenda lays out indicators capable of effectively capturing girls' experience of SGBV (5.2.1 and 5.2.2), data on adolescents' experience of violence more generally is difficult to obtain. Where indicators do seek to capture this information, such as SDG indicator 16.2.1 (children aged 1–17 years who experienced violence from caregivers), data is sparse and fails to distinguish between the experiences of children and adolescents. Similarly, indicators associated with SDG target 16.1 (reduce all forms of violence and death rates everywhere) do not capture the experiences of young people in particular, whose experience of violence differs significantly from adults'.

Conclusions and priorities for adolescents and youth in the context of the post-pandemic recovery and the UN Decade of Action

A sustainable and equitable recovery from the covid-19 pandemic requires an approach that recognises the barriers created by the intersecting vulnerabilities of both age and sex, as well as other risk factors that include migrant status, disability, marital status, ethnic or religious group and many more. We know that young people, especially young women and girls, are often unaccounted for in policymaking. Insight into the challenges that young people face in the context of covid-19 is difficult to glean from available SDG data, which is often fragmented and not reported on consistently across countries and regions. The SDG data collection efforts have to date committed too little attention and resources to collecting the type of data that can help inform policies and programmes to support young people to realise their full potential. However, a renewed focus on adolescents and youth in the context of recovery from the covid-19 pandemic presents an opportunity to foreground five key priorities for the Decade of Action leading up to 2030.

- 1 **Invest in the collection of age-disaggregated data:** Strengthen data collection specific to adolescents and youth across all SDG indicators essential to their multidimensional well-being, especially the following key goals:
 - » No poverty (1)
 - » Good health and well-being (3)
 - » Quality education (4)
 - » Gender equality (5)
 - » Decent work and economic growth (8)
 - » Peace, justice and strong institutions (16)
- 2 **Pay greater attention to intersectional data:** Highlight intersecting dimensions, including sex, age and disability status, to be collected for those SDG indicators to spotlight progress (or lack thereof) in adolescent well-being outcomes.
- 3 **Ensure that data reporting is consistent over time to capture trends:** Report against a consistent set of data points over the course of multiple years in order to establish trends in how countries are performing according to SDG indicators.
- 4 **Advocate for more effective and context-tailored use of disaggregated SDG progress data** to develop clear priorities for programming and budget allocations to advance adolescent and youth well-being to be implemented during the Decade of Action leading up to 2030. Also establish and disseminate a clear narrative of how countries and regions are performing according to SDG indicators on adolescent well-being to tailor context-specific approaches to address areas where progress is stalling or reversing and to build upon areas where progress has been positive as part of efforts to promote a resilient recovery post-pandemic.

Endnotes

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- 8 Leaves which are chewed as a stimulant.
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