

**WOMEN'S CENTRE OF JAMAICA FOUNDATION**  
**IMPACT OF COVID-19 PANDEMIC ON ADOLESCENT MOTHERS**  
**Article for Publication**

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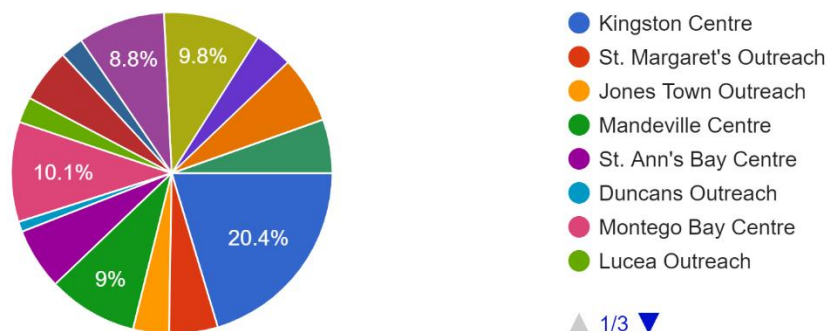
In response to the COVID-19 pandemic, the Women's Centre of Jamaica Foundation (WCJF) trained its counselling staff to administer Psychological First Aid (PFA) to the adolescent mothers enrolled at 15 of the 18 sites across the island as three (3) sites had no enrollees at the time. The training facilitated by the international organisation, Fight for Peace, with funding provided by UNICEF, empowered the staff to examine the impact of the pandemic on the adolescent mothers and provide them with psycho-social support as needed.

With the centres closed on account of the pandemic, staff were enabled to maintain communication with the girls while administering PFA through telephone contact. In a bid to identify the impact of the pandemic on adolescent mothers, a comprehensive survey instrument was designed using Google Forms. The survey was conducted by twenty (20) counsellors who interviewed three hundred and eighty-eight (388) adolescent mothers during the period May 15, 2020, to June 17, 2020.

The survey was particularly interested in ascertaining the emotional health of the adolescent mothers, exploring COVID-19 related concerns, the prevalence of gender-based violence among this population, the extent of family support, their sexual and reproductive health needs, the access to smart devices, and academic continuity.

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Assigned WCJF Site  
388 responses



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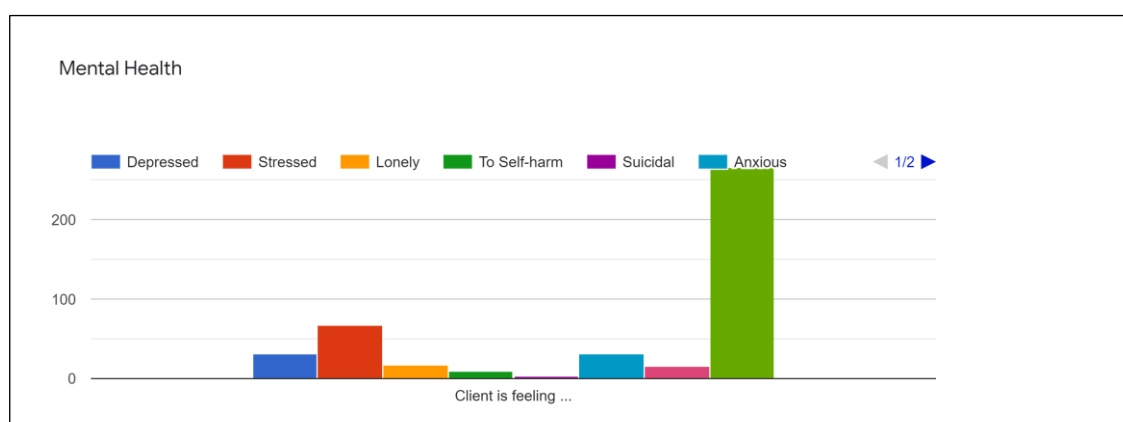
## Survey Findings

### Emotional Health

The emotional state of each client was assessed at the beginning of the call. It was found that 70.9% of the clients expressed happiness or were perceived as being happy when contacted. 11.6% were uncertain of their emotional state; 6.4% were sad; 6.2% were confused; 3% were fearful; 1% was angry.

Concerning the girls' overall wellbeing, the survey found that two hundred and sixty-six (266), 68.6% were not experiencing any negative emotions. The remaining one hundred and twenty-two (122), 31.4%, however, reported experiencing one or more negative emotions. The three negative emotions experienced were feeling stressed, feeling anxious, and feeling depressed. It was found that three clients expressed suicidal thoughts, and nine desired to or tried to, inflict self-harm. Additionally, clients described being lonely and experiencing grief not related to the pandemic.

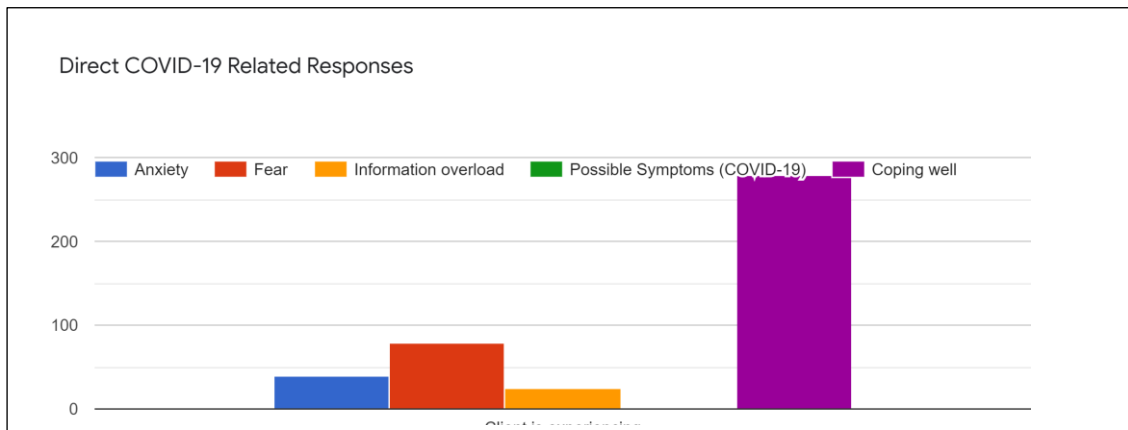
However, in direct relation to the COVID-19 pandemic, two hundred and seventy-nine (279), 72% of the girls were reportedly coping well. The remaining girls expressed feeling fearful, anxious, and overwhelmed by the amount of COVID-19 information. The most significant anxiety-related reaction was worry about the interruption of their education, followed by being worried that the baby might contract the virus. The girls fear and anxiety about what the future holds and concerns about the possibility of a food shortage. Some adolescent mothers expressed being worried about being pregnant during the pandemic, the health and safety of their family and relatives, lock-down and finances.



## Direct COVID-19 Related Issues

**Safety:** The adolescent mothers expressed that they contributed to their safety by observing the COVID-19 protocols instituted by the Ministry of Health. It was observed from data that there was a combination of the safety practices; 85.8% wore masks; 82.2% adhered to curfew; 81.7% practised social distancing, and 80.9% stayed home. Others expressed that they understood the importance of staying home, so they only ran the occasional errands as requested by their parents/guardians for groceries and to access healthcare services. Of the clients surveyed, 9.5% expressed concern about their safety being compromised because of the movements of family members, and 3.4% thought they were at risk because of their living conditions. Just over 2% admitted that their lifestyle might place them at risk for contracting the COVID-19.

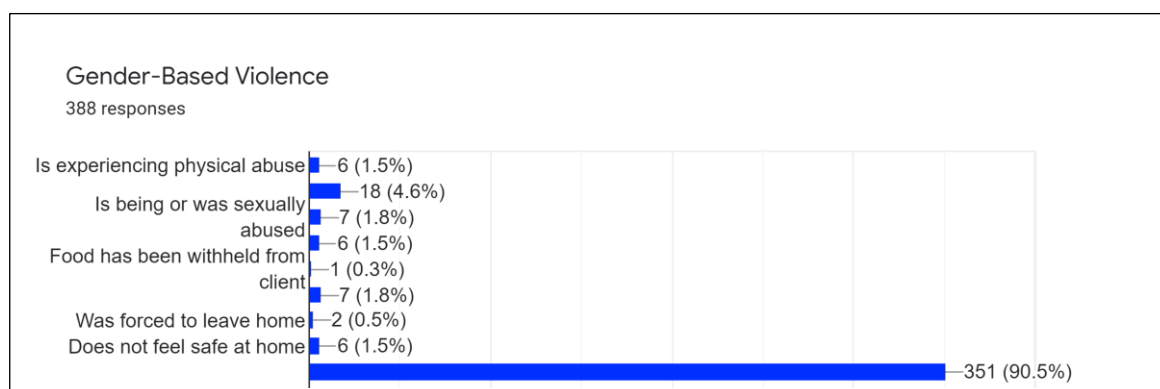
**Health:** Eleven (11), 2.8% of the client population had family members who were directly affected by COVID-19. Ten (10) clients reported that relatives living outside of their home tested positive for the virus. One (1) client received a report of a death in her family as a result of COVID-19. The remaining 97.2% of clients reported no direct COVID-19 impact.



**Financial Concerns:** The survey brought into focus, the day-to-day realities of how each client and her family were managing financially. 39.2% reported that they were managing reasonably well. However, 39.2% disclosed that there was little or no food at home. This situation may be related to the fact that 25% of parents/breadwinners lost their jobs because of COVID-19; 24.7% of parents/breadwinners were unemployed before the onset of the virus. Consequently, the clients expressed the need for food for the family, food for the baby, and baby supplies and assistance with medical expenses. Additional financial concerns included: the slowing down of the family business due to COVID-19; relocation of adolescent mothers to access resources; disconnection of electricity due to non-payment of bills.

### Incidence of Gender-Based Violence

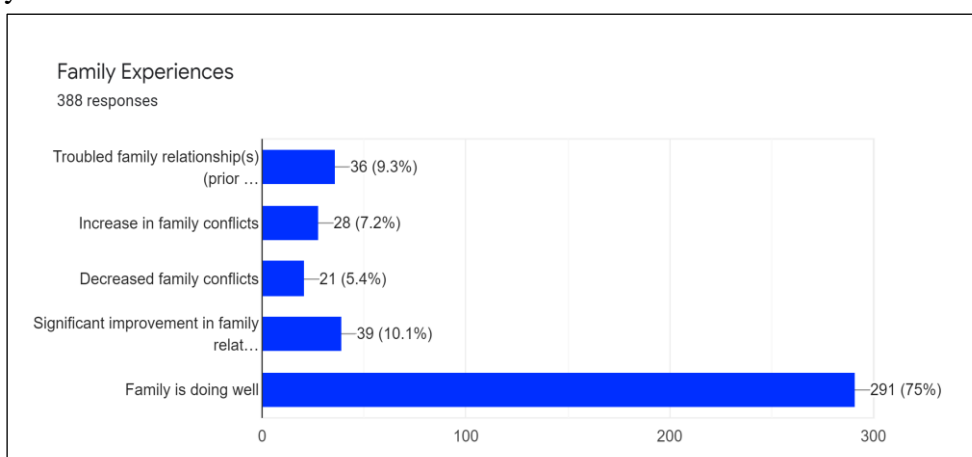
The survey indicated that some amount of GBV was present before enrollment at the WCJF and before the COVID-19 pandemic. Three hundred and fifty-one (351), 90.5% reported that they were not experiencing gender-based violence. However, the remaining 9.5% (37) who reported GBV as represented in the survey, experienced physical, sexual, and psychological abuse; was forced to leave home, experienced neglect, and the withholding of food. The most prominent GBV noticed among the surveyed population was psychological abuse accounting for 4.6%. Sexual Abuse accounted for 1.8%, followed by threats of violence and feeling unsafe at home, which accounted for 1.5% of the responses, respectively. For some clients who indicated GBV, there were extreme cases which showed individual clients experiencing multiple forms. There was a report of a client being attacked and suffered injuries which required hospitalisation.



## Family and Support System

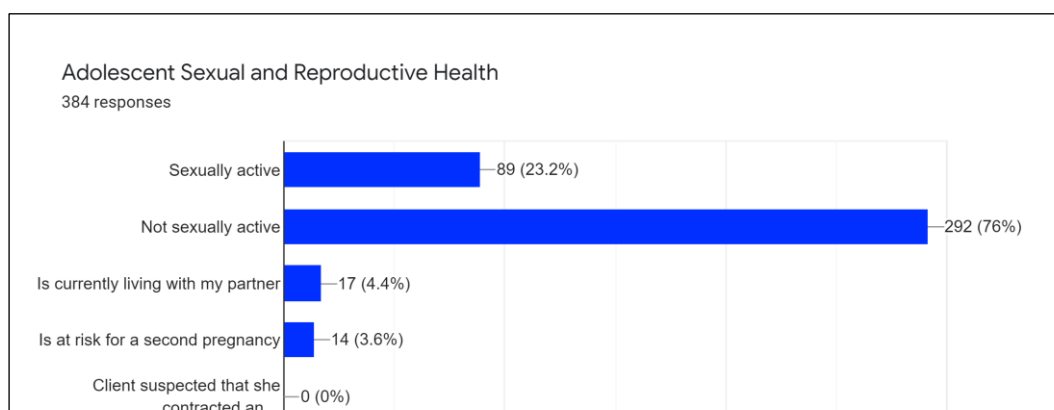
Two hundred and ninety-one (291), 75% of the clients said they were experiencing positive family relationships during this period. Also indicated, is a 10.1 % significant improvement in family relationships. Although there had also been a 7.2% increase in family conflict for the period, 5.4% saw a decrease in family conflicts. This finding is promising as 9.3% of the clients surveyed had troubled family relationships before COVID-19.

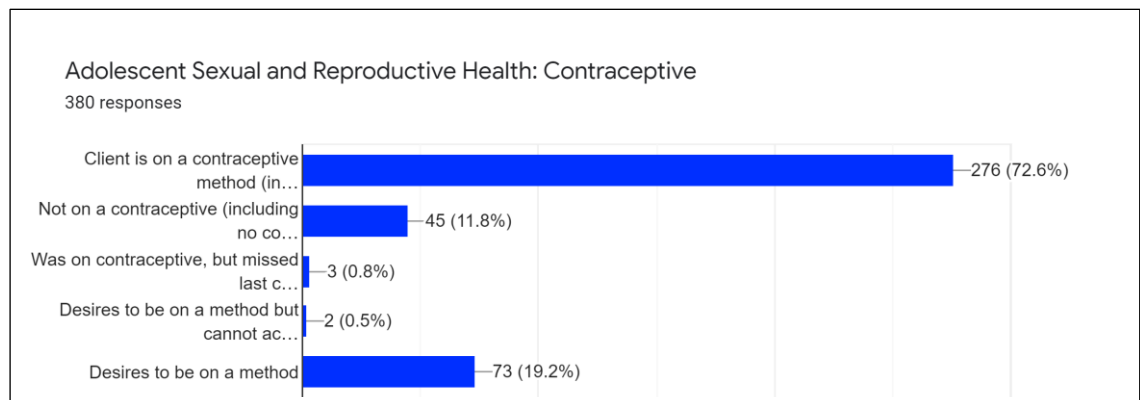
Regarding the maintenance of social support, two hundred and eighty-three (283), 72.9% of the girls reported that they have a healthy support system; while 7% said that they did not have a support system outside of the WCJF. The survey found that 57.2% of clients are in WCJF WhatsApp groups. An overall 80.7% of the clients have reported continued connections with family and friends; while 10.6% said they are not in touch with their friends.



## Adolescent Sexual and Reproductive Health

One of the significant sexual and reproductive health concerns for the WCJF was that adolescent mothers continued to have access to sexual and reproductive health services during this pandemic. Majority of the students surveyed, (70.1%) gave birth more than two months before the implementation of the PFA. Those clients who had babies within the last two months comprised 14.4 %; while 11.3% of the adolescent mothers surveyed who were pregnant at the time of the survey. About 20% of students expressed fear about going out, and another 38.4% were concerned about their baby contracting COVID-19; therefore, counsellors helped them through their fears and encouraged them to keep their maternal appointments. One of the positive outcomes identified in the survey is that 72.6% of those surveyed had a contraceptive method during the pandemic, hence the risk of a second pregnancy when the students are less engaged academically, would have been alleviated. Additionally, for those on contraceptives, less than 1% would have missed a family planning appointment or could not access the needed service.





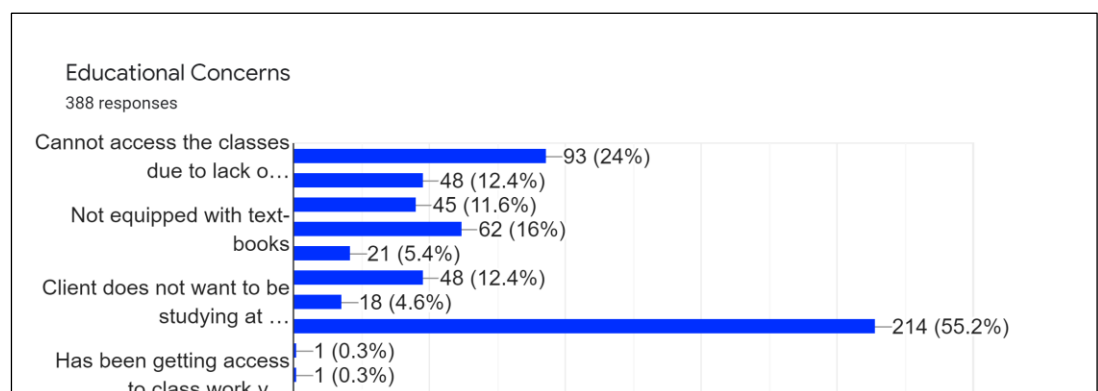
### Access to Smart device and Internet Services

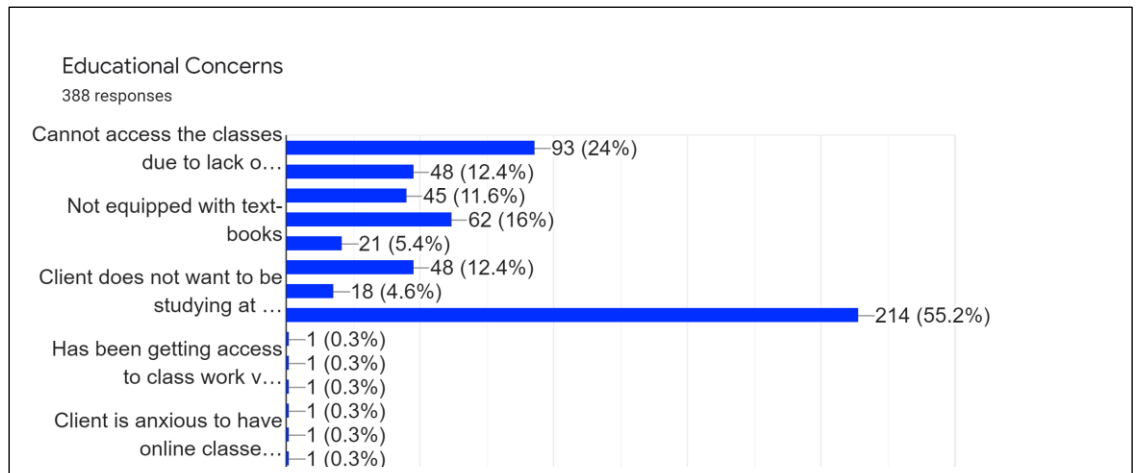
Of the three hundred and eighty-eight (388) clients surveyed, three hundred and twenty-nine (329), 84.8% had access to a smart device, but only three hundred and three (303), 78.1% had access to the internet. Of those who had access to the internet, 58.8% used a data plan. Although these clients had access to smart devices, they were not always the owners.

### Academic Continuity

During the period of school closure, **55.2%** of the girls surveyed were able to continue their education with the use of online platforms such as the WCJF Virtual Device Interface (VDI) for the CSEC students. Virtual platforms outside of the WCJF VDI used by the students included EduFocal, One on One Classroom, and other platforms used by the students' former schools. Among the various methods of continuing education were the lessons offered by the local media houses and through YouTube. In some cases, counsellors and teachers used the Zoom platform and sent worksheets through WhatsApp and text messages. A few students indicated that family members offered lessons at home. Some students worked from their textbooks, workbooks and notebooks on their own. However, some did not have textbooks that would allow them to study other topics that would not have yet been covered in previous classes.

In contrast, 36.4% of the clients were unable to continue their classes irrespective of the platforms or media due to the lack of access to smart devices or lack of access to data or Wi-Fi. The survey also showed that 4.6% of clients had no interest in continuing to study during this time. The findings are also inclusive of the clients who did not have the time to focus on education while at home, were too distracted based on their home environment, and those who are not able to learn through online delivery.





## Discussion and Analysis of the Findings

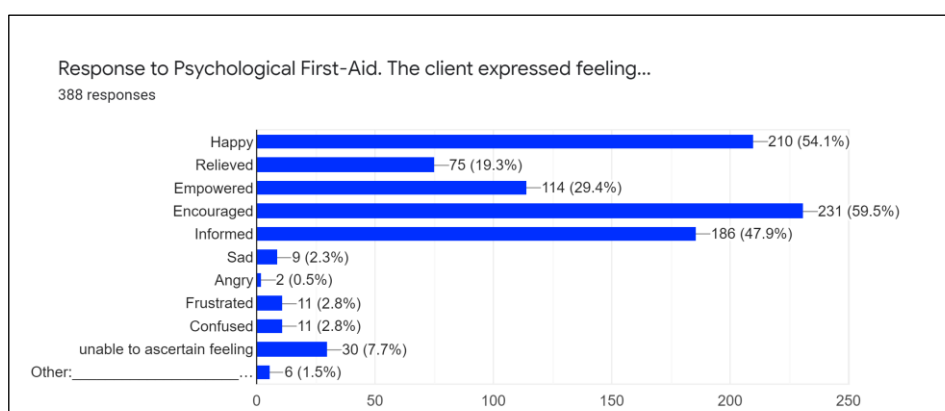
“Crisis Breeds Innovation.”<sup>1</sup> At the onset of the COVID-19 pandemic, WCJF applied crisis management in responding to the needs of adolescent mothers. Prompted by the expectation that the pandemic would have had psychosocial, educational, and financial repercussions, counsellors administered Psychological First Aid (PFA) through telephone contact. This pragmatic intervention intended to minimise the negative impact that the disruption in service delivery would have caused on our vulnerable clients. At the same time, the Foundation utilized the intervention to conduct a survey of the impact of the pandemic on the adolescent mothers. The intention of the survey was to gain insights into the impact of the pandemic on the adolescent mothers with respect to: their emotional health; their experience with gender-based violence; the extent of family support, their sexual and reproductive health (SRH) needs, their access to smart devices, and the extent of academic continuity during the COVID-19 pandemic.

It was perceived that the pandemic would have affected the emotional health of adolescent mothers by either offsetting new emotional challenges or intensifying existing ones from previous traumas. The survey revealed that one hundred and nine (109) adolescent mothers experienced extreme emotions such as feeling stressed, depressed, or having self-harming thoughts. The imposed social and physical restrictions exacerbated dispiritedness in clients who desire practical and compassionate care.

<sup>1</sup> Goldsmith, Stephen. "Crisis Breeds Innovation." *Governing.com (Governing Magazine)* (October 11, 2006).

Undoubtedly, the pandemic inspired creativity and innovation in the therapeutic approaches employed to address the complexities of the adolescent parents. Despite the interruption in the delivery of the established counselling services, the WCJF continued to provide a sanctuary, even remotely, for adolescent mothers to experience healing, strengthen their resilience, and reclaim hope. There was an overwhelming sense of gratitude for the telephone call from the counsellors at the realisation that someone cared about them. WCJF is mindful that contact is what will save lives; keep hope alive; help them navigate not just the pandemic, but the general issues of life.

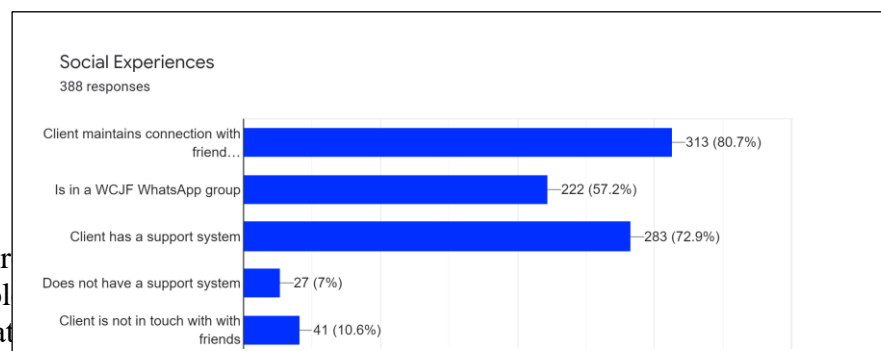
As seen in the survey, the purposeful interventions of the counselling staff transformed the emotional state of the clients. In response to the care, therapeutic empathy, compassion, and positive regard, some clients who were sad, fearful, confused or angry transitioned into feeling happy, relieved, informed, encouraged and empowered. It was also imperative that the WCJF implemented measures to capture any changes in the emotional health of the girls who were reportedly coping amidst the expected negative emotions and monitor the progress of those who were more adversely affected. The WCJF is resolute in continuing the psychosocial support needed to survive in a changing world.



The vulnerabilities of the adolescent mothers signalled that they might have been predisposed to gender-based violence during the pandemic. The three cases that were identified signalled ‘red alert’, that GBV was a likely occurrence in the context of the pandemic, and emphasis needed to have been placed on the prevention of GBV against adolescent mothers. However, the survey revealed that the cases were not occasioned by the pandemic.

The non-existence of pandemic-induced GBV could therefore be as a result of a combination of factors. As revealed by the data, 75% adolescent mothers experienced positive family relationships; 9.3% of the clients surveyed had troubled family relationships before the pandemic; there was a 10% significant improvement in family relationships. The indication is that the pandemic knitted the family closer. The challenges associated with the pandemic might have removed attention from issues that would typically have generated conflict and placed focus on survival needs. This redirection is not an uncommon reality in times of crises as the data showed improvement in family relationships.

The suggestion, therefore, is that the strengthening of family bonds during the pandemic solidified the idea that family support is a strategy to prevent the incidence of GBV among vulnerable groups. This solidifies the notion that safety is heightened where families huddle together and form a protective nest for vulnerable family members. Family structures might have played a role in ensuring the protection of the girls. Of course, this is not the only component of a healthy support system. Friends, community, or an organisation such as the WCJF can also form a reliable support system.



The unsafe environment and the unwillingness of some adolescent mothers surveyed is that they would have recently given birth, and others would be pregnant. Therefore, the clients would need to access family planning services, postnatal care and maternal care through the public health facilities. However, seeing that the pandemic was a new phenomenon for our clients, fear of contracting the virus was a common factor in the hesitation to seek healthcare. Besides fear, clients were unable to keep their family planning appointments at the facility in their community due to revised service delivery and reduced operational hours.

The survey also showed that some girls were still sexually active. While a large percentage of adolescent mothers were on a contraceptive method, some were not and might be at risk of a second pregnancy and sexually transmitted infections. Although the vulnerability of specific subgroups was not explicitly indicated, among the group at risk for a second pregnancy were those who would have suffered the loss of their babies. Based on observed patterns over the years, the understanding is that some clients with such experience desire another baby to fill the sense of emptiness. These girls are at risk of a second pregnancy.

Promoting the use of contraceptives has been a proven strategy for the WCJF to discourage second pregnancies until the completion of at least secondary education. Provisions for adolescent mothers to access SRH services and commodities without compromising their safety therefore becomes a matter of importance in the pandemic. Creative, and collaborative efforts will prove most useful in this case and context. In the meantime, WCJF advances the efforts for increased onsite delivery of SRH commodities and services, and the notion that, in the context of the pandemic, abstinence certainly makes sense!

The loss of jobs and the diminished means of sustenance experienced by some of the breadwinners of the adolescent mothers' families had a distressing impact. The survey revealed that 25% of parents/breadwinners lost their jobs because of COVID-19 and 24.7% of parents/breadwinners were unemployed before the onset of the virus. Additionally, 39.2% disclosed that there was little or no food at home. At the time of the survey, the care packages of personal items, hygiene kits, food and baby supplies the girls had received, had been exhausted and the need for additional supplies was expressed. This reality signalled the dilemma between fostering a culture of dependence and meeting the survival needs. In dissuading a culture of dependency, the scenario presented the opportunity to teach young mothers how to be frugal with limited resources, and to creatively apply survival measures. Despite this dilemma, the needs are real; thus, the compassion and generosity of present and future sponsors are highly appreciated and graciously accepted.

The pandemic significantly impaired academic continuity for the adolescent mothers. Despite the availability of several online learning resources, 36.4% of the clients were unable to continue their classes due to the lack of access to smart devices or lack of access to the internet. For those who had access to smart devices, they were not available to be consistently used for studies. The survey also exposed the disparity with access to reliable and affordable internet service.

The reality is that smart devices and internet access are indispensable to academic continuity in the context of virtual learning. Therefore, there is the need for smart devices to be owned by the students. Of course, this will require a rethink of the educational budget, and a reordering of priorities, if human capital is of importance to national development.

In responding to the academic needs of the girls in the context of the pandemic, WCJF was supported by a donor agency to fill the gaps with respect to smart devices and internet access. In this regard, special consideration was extended to the girls who were preparing to sit the CSEC.

Represented in the data, is the small pocket of girls who did not engage in educational continuity for reasons other than the lack of resources. They included girls whose environment was not conducive to learning, those who are unable to learn through online delivery, and those who expressed disinterest in education during the pandemic. As cited in the survey, the apathy in education resulted from the lack of focus and the inability to master self-directed learning. Therefore, the allotment of uninterrupted time for learning needs to be accommodated at home. Also, responsibility and discipline are life-skills that can minimise distractions and engender motivation.

The non-engagement of some of the girls in the online academic resources pointed to the realization that online education could present as a challenging new approach for some learners. For these girls, other teaching-learning methods should be utilized while they are being helped to adapt to the “new norm”, and acquire the requisite technological skills.

Likewise, bearing in mind that the perplexities of navigating the digital landscape demand practice and patience, there should be careful consideration for remedial learners when charting the course of action for education. They should not be left behind; neither should the new learning environment be imposed upon them. Instead, the focus should be redirected to their state of mind and other presenting issues, of course, while exploring new ways of educational inclusion.

For those adolescent mothers who admitted lack of interest, their psycho-social challenges might have diminished their interest for learning. For others, their need for financial survival took precedence over academic pursuits. The outlook “*Mi can't tek di little money dat mi have, fi go buy data*” captures the view of some of these girls. Therefore, therapeutic interventions are needed to achieve wellness and rekindle the desire for learning.

The crisis brought on by COVID-19 is a challenging and life changing experience. However, the findings of the survey contributed considerably to the knowledge needed to sculpt the way forward. The Foundation is prepared to continue its effort in providing innovative interventions to cater to the emotional health of adolescent mothers, explore further partnerships to provide safe sexual and reproductive services, and encourage greater family support. Continued counseling services will seek to equip the young mothers with life skills needed to cope with the challenge that assails them. Additionally, the staff will be trained in GBV intervention and prevention. Where needed, sponsorship will be sought to provide the resources for adolescent mothers to continue their education during the pandemic. The WCJF is resolved to explore and exploit all available resources so that adolescent mothers are able to navigate this pandemic with a sense of hope and purpose.

### **Recommendations in Response to the Findings**

The PFA interventions and recommendations were essential for strategic planning as the WCJF, by extension, the world continues to respond to COVID-19, discover new operational opportunities, and prepare for any future disruptions of services. Based on the findings of the survey, WCJF is committing to the following courses of action:

1. Counsellors will continue to provide the girls with emotional support while they are away from the centres.
2. Returning and new students, as well as their parents/guardians, will be invited to an orientation session to reinforce and reiterate the COVID-19 prevention protocols.
3. Staff will be trained to identify and treat with gender-based violence intervention and prevention.
4. Increase the campaign for condom use among those who are sexually active.
5. Upon resumption, the girls will be engaged in a debriefing exercise, before the delivery of academic instructions.
6. Each student will be assisted to create an email address within the first week of registration.
7. A culture of independence and responsibility for educational outcomes will be fostered in all Centres.
8. Efforts will be made to procure and distribute tablets and smart devices to each cohort of adolescent mothers on a loan basis.
9. Assisting students with data plans will be considered where there is no access to Wifi.
10. The book rental system will be strengthened to ensure that all the girls have a copy of the requisite textbooks from which they can study while at home.
11. Revisit previously indicated plans to engage MOETI in allowing students to keep rental books until completion.
12. Virtual delivery of the classes will be extended to the entire student population, and not just to those being prepared to sit the CSEC.
13. Parents will be encouraged to ensure that students are registered with the Programme for Advancement through Health and Education (PATH).
14. New sponsors will be sought to expand the sponsorship and scholarship capacity of the A-STREAM programme.
15. Provide additional 'Dignity' packages of personal supplies, hygiene kits, food and baby supplies to the adolescent mothers.

Prepared by:

Margo O'Sullivan and Deon Brown

Specialist Counsellors

Women's Centre of Jamaica Foundation

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