The links between girls’ life skills intervention in emergencies and their return to education post-crisis and prevention of unwanted pregnancies and early marriage

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Question

What is the strength of evidence and lessons learned on the links between girls’ life skills interventions delivered during emergencies and girls’ ability to prevent unwanted pregnancy, avoid early marriage, and return to education post-crisis?

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1. Overview

This rapid review focuses on identifying evidence and lessons learned on the links between life skills interventions in emergency settings and the prevention of unwanted pregnancies and early marriage and return to education post crisis amongst adolescent girls. It seeks to enable learning from past emergencies to inform the design of effective support to adolescent girls throughout the COVID-19 crisis.

Due to the focus on adolescent girls and emergency settings, an area with limited rigorous evaluations (Nobel et al., 2019), this report is based on a rapid literature review of academic studies, grey literature and emerging evidence, to enable the capturing of any significant learnings from relevant programmes.

Despite the wide criteria, the review found limited evidence on the nexus between life skills interventions, adolescent girls, emergency contexts, reduced early marriage and pregnancies and return to education post crisis. Although evidence exists on each of these areas separately, there is limited evidence and lessons learned that fully aligned with the review’s research question.

The partial evidence can be attributed to several factors. Some of which include, the limited systematic focus of humanitarian response programmes on adolescent girls, and the lack of gender disaggregated data and recording of girl specific outcomes in the evaluations of interventions in emergency settings (Women’s Refugee Commission, 2014). This evidence gap poses a significant barrier to identifying and developing best practice to support adolescent girls during emergencies (Noble et al., 2019).

Despite this gap, lessons can be learned from previous programmes and literature about the link between life skills interventions during emergencies and the return to education of adolescent girls post crisis, and the prevention of unwanted pregnancies and early marriage.

Evidence and lessons learned from specific programmes identified in the review suggest that life skills interventions for adolescent girls in emergencies impact on areas that have the potential to lead to reduction in unwanted pregnancies and early marriage and support return to education, and limited evidence that they can have direct impact on these outcomes. Ten relevant interventions with impact or lessons learned where identified. Most of these interventions were implemented with adolescent girls from displaced communities and in refugee camps in Sub Saharan Africa.

Though most interventions were not rigorously evaluated, all programmes reported positive impact on the mindset and knowledge of participating girls in areas such as self-esteem; progressive gender norms; social, emotional, and psychological wellbeing; and knowledge of sexual and reproductive health (Inter-Agency Standing Committee, 2017; Nobel et al., 2019; Paik and Quick, 2014; Siddiqi, 2012). While this does not demonstrate direct correlation between these interventions and reduced early marriage, unwanted pregnancies and return to education, the successful shift in mindset, knowledge and skills might hold the potential to contribute to achieving these desired outcomes. In some cases the lack of evidence on direct impact is a result of these outcomes not being evaluated.

A small number of programmes reported a direct link between the interventions and the outcomes in the research question. Three mentioned impact on girls continuing and returning to education (Plan International, 2019; UNDF, 2016), three mention impact on reducing early marriage (IRC,
2018b; UNDF, 2016), and one mentions direct impact on reducing unwanted pregnancy (Bandiera et al., 2019).

It is important to caveat that the majority of the programmes’ evidence is based on self-reporting and observations and therefore can be subject to various biases and skewed by a potentially self-selected group of those participating in the evaluation activities.

There is evidence that girls in emergencies identify life skills support as a priority need. Several situation analyses highlight that amongst their described needs, consulted girls expressed interest in developing their life skills. Their motivations relate to various issues such as the desire to strengthen their ability to continue their education, obtain a livelihood and negotiate safe sex (Lowicki and Paik, 2013; Plan International, 2018; UNFPA, 2017).

A number of ‘lessons learned’ documents, tool-kits and guidance for supporting adolescent girls during emergencies, highlight life skills as an integral element of effective interventions (IRC, 2018a; Plan International, 2018; Plan International, 2019; Robinson, 2008; Tanabe et al., 2011).

In most cases life skills are not mentioned in direct reference to achieving the outcomes outlined in the review research questions, but rather in relation to providing general relevant support to adolescent girls in times of crisis. They are also rarely based on evidence of impact of particular interventions.

2. Background – The Risk of COVID-19 to Adolescent Girls

Adolescent girls are amongst the most at-risk populations at times of disease outbreaks and emergencies. In times of crisis, due to school closures, significant stress on families and lack of access to safe spaces and services, girls’ vulnerability is significantly increased. This frequently leads to a significant growth in gender based violence, a rise in cases of early marriage and unwanted pregnancies and higher dropout rates from school (Plan International, 2019).

Early indicators already suggest that COVID-19 could have a severe negative impact on adolescent girls around the world, especially those most marginalised (Albrectsen and Giannini, 2020). There is evidence that COVID-19 has led to a sharp rise in gender based violence due to the imposed quarantine and increased stress put on households (Care and IRC, 2020). Furthermore, COVID-19 has led to school closures in 185 countries, with an estimated 89% of enrolled students globally currently out of school. This poses a unique challenge for girls, as evidence from similar crises show that wide spread school closure is associated with their increased vulnerability (Albrectsen and Giannini, 2020). There is also a lack of gender based analysis and planning in many countries’ response to COVID-19, which increases the risks that the unique and acute needs of adolescent girls will not be properly addressed (Care and IRC, 2020).

In similar emergencies there has been a rise in gender based violence and unwanted pregnancies of adolescent girls. For example, in Sierra Leone during the Ebola crisis it was estimated that 18,000 additional pregnancies of adolescent girls occurred during the first cycle of the epidemic. The rise in teenage pregnancy is attributed to several causes, including: increased sexual exploitation, sexual violence and transactional sex, as well as a rise in consensual sexual activity and enhanced barriers to accessing sexual and reproductive health services (Bruce, 2016). These effects of the crisis were not unique to Sierra Leone, there is evidence that across West
Africa school closures during the Ebola crisis led to increase exposure of girls to sexual exploitation and violence (Christian Aid et al., 2015).

Girls during emergencies and in crisis affected countries have reduced access to education and increased dropout rates post crisis. Compared to the global average, girls in crisis affected countries are half as likely to progress to secondary school and on average receive 8.5 years of education (Plan International, 2019). These numbers could be explained by several factors. When families are affected by disease or other disasters they often force girls to stop their education in order to care for family members or go out to earn money to support the household (CARE, 2020). Another significant factor is early marriage and pregnancies which lead girls to leave school due to social norms, stigma or government and school policy. For example, post the Ebola crisis the Sierra Leone government excluded visibly pregnant girls from school (Bruce, 2016), a ban that has only recently been revoked (BBC, 2020).

3. The Evidence Gap

The literature reviewed revealed a critical evidence gap regarding the effectiveness of girl-focused interventions in emergencies, which poses a barrier to providing girls with effective support in current and future emergencies such as COVID-19. Though there is increased attention on the needs of girls in humanitarian and health crises there is still lack of evidence in this area (Nobel et al., 2019). The review found a small number of literature reviews on effective approaches to support adolescent girls during emergencies. All the reviews pointed to a substantial gap in rigorous research on the impact of relevant intervention (Nobel et al., 2019; Tanabe et al., 2011; Women’s Refugee Commission, 2014). Beyond the general evidence gap there are specific gaps which are highlighted in the literature reviewed.

The literature discusses a lack of well-tailored, sex and age specific programmes that systematically target adolescent girls and their unique needs during emergencies and health crises (Women’s Refugee Commission, 2014). Although there is promising practice for girls in non-emergency settings, many such interventions have not been taken to scale or applied during emergencies (Nobel et al., 2019; Stark et al., 2018). There is also a shortage of knowledge about the needs of adolescent girls in emergencies and disease outbreaks and a lack of systematic consultations with girls themselves to identify which support they require most (Plan International, 2018; Women’s Refugee Commission, 2014).

There is limited recording of girl related outcomes and a scarcity of rigorous evaluations of girl-focused interventions during emergencies. In a review of literature from 17 countries which experienced a humanitarian emergency, there were no rigorously evaluated interventions that recorded outcomes relating to adolescent girls during the critical phase of the crisis (Women’s Refugee Commission, 2014). Beyond the lack of general impact data, a number of literature reviews pointed to a shortage of evidence on specific outcomes, such as prevention of violence against adolescent girls during emergencies (IRC, 2018b; Stark et al., 2018).

The evidence gap also relates to the evaluations of life skills programmes. Though there is positive evidence regarding girl-focused life skills interventions in non-emergency settings, there is still a shortage in systematic tracking of the kind of life skills programmes implemented – what skills they focus on, the mode of delivery they use and the specific groups they target (Dupuy et al., 2018). The gap also relates to the complexity of tracing the specific impact of life skills
interventions. Life skills are often implemented as part of a wider programmes which commonly include elements such as community outreach and peer networks. Such interventions are also delivered in many forms, some of which include - mentors, safe spaces and school curricula (Dupuy et al., 2018; Noble et al., 2019; Plan international 2016; Paik and Quick, 2014). There is lack of evidence, both in emergency and non-emergency settings, to help establish the specific impact of the life skills element of a programme and its most effective mode of delivery.

4. Impact of Life Skills Programmes and Review of Relevant Interventions

There is strong evidence to suggest that girl-focused life-skills interventions in Low and Middle Income Countries (LMIC) in non-emergency settings have numerous positive outcomes relating to the outcomes outlined in the review question (Dupuy et al., 2018; Marcus et al., 2017; Women’s Refugee Commission, 2014). Evidence suggests that life skills interventions positively contribute towards girls’:

- Psychosocial, health, economic and learning outcomes (Dupuy et al., 2018)
- Reduced exposure to gender based violence (Women’s Refugee Commission, 2014)
- Personal well-being and achieving greater social, political, and economic inclusion (Dupuy et al., 2018)
- Postponed marriage and greater agency in family planning (Women’s Refugee Commission, 2014)

Evidence about girl-focused life skills interventions in emergencies is lacking, however it is still regarded as best practice and is associated with positive outcomes. One report emphasises that life skills development for adolescent girls during emergencies is imperative due to the disruption in social networks and family life. This disruption further exposes girls to violence, exploitation and abuse. Strengthening of their skills to negotiate with their surroundings, exercise their sexual and reproductive rights and improve their participation in education is therefore increasingly important (INEE, 2019). Another report, though not in reference to a specific programme, states that life skills, alongside other interventions that support social networks and relationship building, successfully protect girls from physical violence and early marriage throughout all phases of emergencies (UNFPA, 2017).

The review identified several girl-focused life skills interventions in emergencies (full list in Annex I) with varying levels of evaluation evidence, that demonstrate direct and indirect impact on return to education and reduction of early marriage and unwanted pregnancies. Below is a short description of the most relevant ones.

Direct Impact

**Girl Empower, Liberia**

***Programme description***
The programme was implemented by the International Rescue Committee (IRC) in post conflict Liberia and Ethiopia in 2015-2018 (IRC, 2018b). The aim of the programme is to equip girls with the skills and experiences they require to make healthy, strategic life choices and avoid sexual exploitation and abuse. The Girl Empower programme include several element (IRC, 2018b):

- life skills curriculum delivered in safe spaces by young female mentors from the community,
• caregiver discussion groups,
• individual savings start-up for the girls,
• capacity building for local health and psychosocial service providers, and
• some participants (those assigned to a specific treatment group in the programme evaluation) also received a conditional cash transfer to parents of participating girls.

**Key outcomes**
The Liberia programme was evaluated using a Randomised Control Trial (RCT) design. The evaluation found the following impact (IRC, 2018b).

- The programme reduced the rate of child marriage and risky sexual behaviour, an impact that was sustained a year after the conclusion of the programme.
- The treatment groups, which received the conditional cash transfers, had a stronger effect on reducing child marriage, use of condoms and sexual abstinence by more than 50 percent compared to those who did not receive cash transfers.
- The programme was successful in equipping adolescent girls with life skills and positively influenced girls’ gender attitudes.

**Empowerment and Livelihoods for Adolescents (ELA), Sierra Leone**

**Programme description**
The ELA program in Sierra Leone was run by BRAC and its implementation quickly coincided with the Ebola virus outbreak. During the outbreak the ELA programme operated out of school clubs within the community. In the clubs the programme provided life skills training, livelihood training, and credit support to start income-generating activities. The life skills training included topics, such as sexual and reproductive health, family planning, rape and gender-based violence, negotiation skills, rights and legal knowledge. During the outbreak school closures, the clubs also served as a partial substitute for formal schooling (Bandiera et al., 2018).

**Key outcomes**
The programme was evaluated using an RCT design. The study found the following impact (Bandiera et al., 2018).

- Girls in non-intervention communities that were strongly affected by the Ebola virus were more likely to become pregnant and were less likely to continue their education post crisis then those that were in communities that participated in the ELA programme.
- Girls from communities which were part of the ELA intervention, regardless of the impact of the Ebola virus on their community, were less likely to get pregnant out of marriage and less likely to drop out of school.
- Girls who were part of communities that were highly disrupted by the virus but were exposed to ELA clubs were half as likely to leave school and there was an improvement in their numeracy and literacy learning outcomes.

**Indirect Impact**

**The COMPASS program (Creating Opportunities through Mentorship, Parental involvement, and Safe Spaces)**

**Programme description**
The programme was implemented by IRC. Using safe spaces, the programme provided life skills training and helped girls’ to build assets to protect themselves against and respond to Gender Based Violence (GBV) through mentorship, learning, and peer interaction. The programme also included capacity-building activities of service providers and caregivers to address the specific needs of young girls.
Key outcomes
The programme was evaluated throughout 2014-2017. Evaluation included two cluster randomised controlled trials in refugee camps in Ethiopia and in conflict-affected communities in eastern Democratic Republic of Congo, and a mixed-methods study in Pakistan (IRC, 2017; IRC, 2018b).

The evaluation found the following (IRC, 2017; IRC, 2018b):
- COMPASS successfully improved girls’ social, emotional, and psychological wellbeing and positively affected gender attitudes.
- Participating girls were twice as likely to report trusting an adult outside the family compared to those who did not participate.
- The programme significantly strengthened girls’ knowledge of GBV services.
- No significant impact was found on reducing exposure to GBV or other forms of violence, transactional sex or feelings of safety.
- Anecdotal evidence from IRC staff suggests that participating girls who lived with partners, but were not married, left these relationships over the course of the intervention period.

Protecting and Empowering Displaced Adolescent Girls Initiative
Programme description
This programme was a pilot done as part of the Protecting and Empowering Displaced Adolescent Girls Initiative of the Women’s Refugee Commission. The aim of the pilot, which started in 2012, was to empower displaced adolescent girls to protect themselves from sexual violence and build a better future for themselves. The pilot was implemented with refugee girls in Ethiopia, Tanzania, and Uganda. Though differing from one location to another, the key approach of the programme included (Women’s Refugee Commission, 2014):
- safe spaces for girls,
- access to mentors and role models,
- health and life skills combined with livelihoods training, and
- community engagement and buy-in, including parents and guardians and critical males in the girls’ lives.

Key outcomes
The programmes was evaluated in all three locations and used a qualitative approach, conducting interviews and focus group discussion with a wide group of stakeholders. The evaluation identified the following Impact in the midline review (Women’s Refugee Commission, 2014).
- The programme helped girls develop safety plans. For example, in Tanzania 78 percent of girls in said they now have safety plans, compared to 23 percent at baseline.
- There was an increase in the number of girls who reported having someone to turn to for support. To illustrate, in Uganda there was an increase from 52 percent at baseline to 88 percent at midline.
- The programme led to improvement in girls’ self confidence levels. In Tanzania over 80 percent of girls reported in the midline evaluation that they felt they could make a positive impact on their community compared to only 24 percent at baseline.
- The midline review found little impact on girls’ social network and on their financial and economic assets.

5. Lessons Learned
The review identified a number of lessons learned and best practice from girl-focused interventions in emergency settings and specifically from life skills interventions. Though they are not mentioned
in direct relation to the outcomes outlined in the review question, they can still be used to amplify the impact of similar programmes.

A key recommendation mentioned in the literature is the importance of designing interventions in consultation with girls. In times of emergency there is significant value in designing programme with a diverse groups of girls, especially those that are most marginalized, to enable the intervention to help girls overcome the unique constraints to their participation and best respond to their changing needs (Lowicki et al., 2013; Paik and Quick., 2014).

Due to the confining and continuously changing reality in emergencies, lesson learned and best practice literature highlight the importance of taking an adaptive approach. There is specific emphasis on the importance of strong and flexible outreach services, while offering flexible access to training and support in order to achieve successful engagement and support those that are hard to reach (Lowicki et al., 2013; Plan International, 2018; Tanabe et al, 2011).

Lessons learned literature emphasise the need to tailor interventions to the specific age, context and subgroup of the adolescent girls benefiting from the programme (INEE, 2019; Paik and Quick, 2014). A number of papers discuss the significance of programmes providing differentiated and responsive life skills support based on the subcategories of girls. Subcategories mentioned include: age, marital status, in or out of school, disabilities, pregnancy, and parenting (Tanabe et al., 2011; Women’s Refugee Commission, 2014). There is also a recommendation to focus financial literacy development of younger girls on saving skills and of older girls on loan access and other skills that can help them overcome their financial insecurity (Plan International, 2018; Women’s Refugee Commission, 2014). Additionally, in reference to financial and livelihood skills, the literature points to the importance of focusing the skills programmes’ on skills that align with to the local market demand (Robinson, 2008).

A number of lessons learned documents highlight the positive impact of taking a holistic, multisectoral approach, especially in regards to improving adolescent girls’ sexual and reproductive health behaviour. It is mentioned in multiple sources that interventions that address various elements across multiple sectors to build sexual and reproductive health skills (sexual and reproductive health knowledge, easy access to qualified health care professionals, mental health, family planning, gender based violence, etc.) achieve stronger outcomes that single sector interventions (Tanabe et al., 2011; United Nations Population Fund, 2016). Such approaches more effectively address the multiple vulnerabilities of girls (Paik and Quick, 2014).

In reference to the mode of delivery of life skills interventions during emergencies, safe spaces are referred to as a promising method in multiple sources. In the literature on girls in emergencies, safe spaces is presented as an extremely common approach in supporting girls in emergencies (Women’s Refugee Commission, 2014). The protective environments that they provide, their enabling of a girls’ only space, the development of peer networks and essential life skills are all described as helpful factors in reducing the vulnerability and exposure to violence of adolescent girls in emergencies (INEE, 2019). Beyond the support provided during an emergency, safe spaces are also referred to as a mode that can help prepare girls for recovery and rehabilitation post-crisis (United Nations Population Fund, 2016).

Community support and trust is mentioned as a success factor across the lessons learned and best practice literature (Tanabe et al., 2011). Reviewed documents mention various community stakeholders that are considered important to engage, some of which include,
community women and youth groups, community authorities and faith leader. These stakeholders are viewed as helpful in getting buy-in from care givers and adolescent girls, as well as establishing shared responsibility for the girls and the intervention (INEE, 2019; Paik and Quick, 2014). Engagement of parents or care-givers is highlighted as essential to increase the probability of girls continued engagement in the programme (Paik and Quick, 2014). There is also specific mention of involving men and boys in order to strengthen them as allies and reduce the exposure of girls to gender based violence (Paik and Quick, 2014). To increase the impact of interventions, some of the literature suggests to go beyond community engagement and to incorporate elements of community-level advocacy and social norms programmes, as such approaches have shown promising impact and may help strengthen the effect of the life skills interventions (Stark et al., 2018).

6. Annex – Intervention List

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<tr>
<th>Resource</th>
<th>Programme</th>
<th>Main elements of intervention</th>
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<tbody>
<tr>
<td>Noble et al., 2019</td>
<td>working with adolescent Somali refugees in a refugee camp in Kenya implemented by IRC</td>
<td>Using safe space, the programme held weekly girl groups, mentor meetings, parent/guardian meetings, and training sessions on topics including GBV prevention, reproductive health, and financial literacy.</td>
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<tr>
<td>Siddiqqi, 2012</td>
<td>“Espas Pa Mwen”—“My Space” launched in 2010 to support adolescent girls post the Haiti earthquake</td>
<td>The programme provided a safe girls-only space for girls aged 10-19. The safe space included a social platform to connect girls with appropriate skills training, psycho-social support, financial literacy and reproductive health care.</td>
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</tbody>
</table>
| Paik and Quick, 2014 | Protecting and Empowering Displaced Adolescent Girls | While activities varied across locations, they mainly included:  
  - Safe spaces for girls  
  - Access to mentors and role models  
  - Health and life skills combined with financial education/livelihoods training  
  - Community engagement and buy-in, including parents/guardians and critical males in the girls’ lives. |
| IRC 2017, IRC 2018 | The COMPASS program (Creating Opportunities through Mentorship, Parental involvement, and Safe Spaces) | Using safe spaces the programme provided life skills training and helped girls’ build assets to protect themselves against and respond to GBV through mentorship, learning, and peer interaction. The programme also included capacity-building activities of service providers and caregivers to address the specific needs of young girls. |
| IRC, 2018b | Girl Empower | The Girl Empower program includes mentoring, care givers’ engagement and building of girls’ life skills, financial literacy, and savings skills. |
| Plan International, 2019 | **Girls’ Education Movement (GEM) clubs**  
GEM is part of a wider programme providing emergency education to adolescents from refugee and host community in Uganda  
Implemented by Plan International Canada and Plan International Uganda | As part of a wider programme which provided interventions in formal education GEM clubs were established. Through club activities girls were empowered to articulate issues that affect them in education and to remove barriers within the school and in the wider community. Due to interest, boys later also joined the club. |
| United Nations Population Fund, 2016 | **Safe spaces in Nigeria for girls displaced by Boko Haram** | The programme included nine safe spaces for women and girls in camps in north-eastern Nigeria. In the safe spaces gatherings were held to address reproductive health needs and build resilience by protecting dignity and well-being and empowering participants with life skills and livelihood skills. |
| UNFPA and UNICEF, 2016 | **Illimin – Knowledge for Dignity**  
A programme was implemented nationally in Niger, some of which refugee camps | Using safe spaces the programme worked to delay early marriage and pregnancy among adolescent girls and offers lessons on life skills and reproductive health. |
| Bandiera *et al.*, 2018 | **Empowerment and Livelihoods for Adolescents (ELA), Sierra Leone**  
Implemented by BRAC during the Ebola virus epidemic | Operation outside of schools through development clubs within communities on a voluntary basis. ELA provided life skills training, livelihood training, and credit support to adolescent girls. Life skills training included sexual and reproductive health, family planning, rape and gender-based violence, management and negotiation skills, rights and legal knowledge. |
| Inter-Agency Standing Committee, 2017 | **Adaptation of ‘it’s all one’ curriculum**  
IRC and population council implemented a programme in a refugee camp in Kenya for 10-14 years old adolescent girls | Using safe spaces, mentors delivered a life-skills curriculum, which included a focus on self-esteem, GBV, adolescence and puberty, savings and goalsetting, etc. |
7. References


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Suggested citation


About this report

This report is based on six days of desk-based research. The K4D research helpdesk provides rapid syntheses of a selection of recent relevant literature and international expert thinking in response to specific questions relating to international development. For any enquiries, contact helpdesk@k4d.info.

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