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Barriers to Educational Opportunities for Pregnant Adolescents/Mothers in Two Chiefdoms in

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Received: 7 February 2021 Accepted: 5 March 2021 Published: 15 March 2021

Abstract

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Teenage Pregnancy and adolescent motherhood in Sierra Leone has been increasing and is one of the world?s highest rates leading to girls dropping out of school. Some pregnant teens were asked out of school, while others bow to societal pressure and self-isolate before they are visibly identified as pregnant. Ensuring they have access to education is vital for achieving 10 gender equality and empowering women and girls. This seems to be a priority for the 11 government by the introduction of the Free Quality Education in 2018 and the ?Radical 12 Inclusion Policy? targeting these vulnerable girls ensuring their human rights are upheld and 13 achieving inclusive development, as recognized in the international development agenda, the 14 Sustainable Development Goals (SDG) 4 and 10. (UN-SDG, 2015) This study/research looked 15 at the barriers to educational opportunities for adolescent mothers in two districts in Sierra Leone, with the case study of Lokomassama chiefdom, Port Loko district, North-west and 17 Bumpe Ngao chiefdom Bo district, and southern province. 18

 $\label{localization} \textit{Index terms} - \text{barriers, adolescent, radical inclusion, stigma, lokomassam and bumpe ngao chiefdoms, school re-entry.}$

Abstract-Teenage Pregnancy and adolescent motherhood in Sierra Leone has been increasing and is one of the world's highest rates leading to girls dropping out of school. Some pregnant teens were asked out of school, while others bow to societal pressure and self-isolate before they are visibly identified as pregnant. Ensuring they have access to education is vital for achieving gender equality and empowering women and girls. This seems to be a priority for the government by the introduction of the Free Quality Education in 2018 and the "Radical Inclusion Policy" targeting these vulnerable girls ensuring their human rights are upheld and achieving inclusive development, as recognized in the international development agenda, the Sustainable Development Goals (SDG) 4 and 10. (??N-SDG, 2015) This study/research looked at the barriers to educational opportunities for adolescent mothers in two districts in Sierra Leone, with the case study of Lokomassama chiefdom, Port Loko district, North-west and Bumpe Ngao chiefdom Bo district, and southern province. The study adopted a mixed method where both qualitative and quantitative techniques were used to survey in these two districts, a structured questioner, group discoursion and key informant interviews. The study used a target population of sixty (60) adolescent mothers, with a sample of fifteen (15) adolescent mothers attending school, fifteen (15) adolescent mothers who dropped-out of school, fifteen (15) adolescent mothers already cohabiting with a boy-friend and fifteen (15) adolescent mothers are physically challenged. Random sampling techniques were used to select those adolescent mothers at the two different chiefdoms. The result analyzed reveal that, adolescent mothers have some barriers to educational opportunities in these two chiefdoms under review: The cultural perspective is against the idea of adolescence mothers going to school during and after pregnancy, Religious norm is another barrier to the education of adolescence mothers in these districts, the non-tolerant attitudes of some teachers towards adolescent mothers in schools also serves as barriers to their education, the holding up of family values, culture and curbing public perception by parents against their adolescent mothers is another barrier. The distance from villages to the schools is also serving as a barrier to education for adolescent mothers.

Data was collected were analyzed in relation to theories of access or barriers to educational opportunities, empowerment and inclusive development. The analysis centers around challenges the pregnant/adolescent mothers encounter to return to school and make strategic life choices.

1 Introduction

ierra Leone has one of the highest rates of Teenage Pregnancy in the world. 3 in every 10 teenage Sierra Leonean girls are pregnant and nearly 40 per cent of girls are married before their 18th birthday. ??UNICEF, 2015). teenage girls face profound structural exclusion, discrimination and poverty; norms related to gender and sex are in flux, with traditional norms existing alongside newer attitudes (Bransky et al, 2017); the situation become so appalling that His Excellency President Julius Maada Bio officially declared a National Emergency on Rape and Sexual Violence, Thursday 7 February 2019 as a major step towards addressing rape and all forms of sexual violence in Sierra Leone. In his keynote address, President Bio said that each month hundreds of cases of rape and sexual assaults were being reported against women, girls and babies with some of the fatalities being as young as three months old and that 70% of survivors of the traumatic experience being under the age of 15. (State House Media and Communications Unit on February 07, 2019) and where a relatively progressive policy and legal framework has emerged, but its implementation is hampered by extreme institutional weakness and limited ownership.

The COVID-19 pandemic has caused economic growth to slow and educational opportunities to diminish, especially for girls, for whom there already existed great disparity in educational opportunity. Many girls were instead sent out to make money for the family, and in the case of teenage girls, some returned pregnant. The terrible economic situation for many families spurred a surge in teenage pregnancies. (World Bank in Sierra Leone, 2020). The 2020 Economic Update takes a specific look at girls' education and highlights that similar to the 2014 Ebola crisis, COVID-19 is likely to affect adolescent girls' education prospects and their human capital potentials.

Economic factors include the prevalence of transactional sex, girls working or living outside the family home, older girls being expected to provide for themselves, and overcrowded living conditions. Meanwhile social and normative factors include those that underlie practices of female genital mutilation (FGM) and child marriage, expectations about girls' obedience to men (de Koning et al 2013), cultural taboos against discussing sex, peer pressure, and access to pornography. High rates of sexual violence also drive teenage pregnancy and are exacerbated by a climate of impunity in which victims are blamed, families priorities compromise over prosecution of impregnators, and justice responses are weak and inaccessible. Girls also use transactional sex to buy fashionable clothes, good exam results, known locally as "sexually transmitted grades", and even staple foods.

The government of Sierra Leone in August 2018 launched the Free Quality Education for the pre-primary school, Junior and Senior for Government and Government assisted school in Sierra Leone. The initiative provided free admission and tuition to all children in Government approved schools. While the initiative is timely and well received, many teenage girls are still out of school, at risk of dropping out or not benefiting from this initiative, because they are pregnant or teen mothers under the grip of societal norms that education is not for pregnant girls and teenage mothers. In March 2020, the Government overturned the policy with immediate effect. This decision provided the basis for a policy on radical inclusion and comprehensive safety of all children in the education system. Since the overturn of the policy, there has been a significant increase in the number of pregnant girls as candidates for both the Basic Education Certificate Examination (BECE) and the West African Senior School Certificate Examination (WASSCE). Out of 71,657 females who sat the 2020 WASSCE; 2,064 (2.9%) of these students were pregnant. 1.4% of the total number (151,625) of WASSCE candidates were pregnant. ??MBSSE 2020) Notwithstanding the increase in school attendance and retention among pregnant girls and teenage mothers, the stigma, discrimination and a lack of integration mechanisms for pregnant and parent learners still remain as a barrier to their full participation in schools.

The future for pregnant and teenage mothers now looks certain and full of hope for a better lifestyle on paper, a picture depicting, teen pregnancy or lactating teens will no longer be a red tape for inclusion in the mainstream education system. It is absurd to reprimand pregnant school girls and use their fate as an excuse to deter them from continuing schooling. Sending them away from school at a tender age is the worst and injustice act. However, the policy has a number of loopholes, chief among them being its implementation, the effectiveness of the Radical Inclusion policy is shouldered with uncertainties in terms of the role the community and school stakeholders need to play in the implementation of the Policy. Pregnant and teenage mothers are still largely invisible in schools, a stigma which prevents girls from returning to school once they have had children. Teachers and classmates often have a negative perception towards teenage mothers and those who courageously consider going back to school are often faced with institutional rejection quietly encouraging them to leave school. Therefore, it is worthy to research and proffer recommendations that will suggest how this policy is cascaded to the rural communities.

- 2 II.
- ¹⁰² 3 Aims and Objectives of the Study
 - 4 Methodology/Research Design

The research design adopted was a descriptive survey involving a mixed method where both qualitative and quantitative techniques were used. This seeks to gain an in-depth complex understanding of the meanings derived from the lived experiences of pregnant and adolescent mothers who are in or out of school. Based on the

belief that personal interview would best capture how participants interpreted their experiences, the factors that they viewed as challenges, and the factors to which they attributed their success.

Quantitative research techniques were utilized to examine the subject matter through numerical representation and the use of a structured questionnaire. Qualitative research tools were extremely useful for obtaining insights into regular or problematic experiences and the meaning attached to those experiences of selected individuals. It also allows the researchers to focus on critical and contextual factors that enhance or impede the educational attainment of pregnant/ adolescent mothers in the two districts sample population are drawn from Bumpe Ngao Chiefdom of Bo district and Lokomassama Chiefdom of Port Loko district. The quantitative method was most helpful in answering questions of who, where, how many, how much and what is the relationships between the variables.

5 a) Study Area

This was conducted in two provincial locations in two districts of Sierra Leone, Lokomassama, one of the thirteen (13) chiefdoms of Port Loko district, North-West of Sierra Leone and Bumpe Ngao, one of the sixteen (16) Chiefdom of Bo district Southern Province Sierra Leone. Bo district occupies a total area of 5,219 kilometers square miles with a population of 575,478 and Portkoko with a total area of 5,719 kilometers and a population of 615,376 According to the population statistics (2015 population census), the population is predominantly Muslims (80%) and the largest ethnic group is Themne in Porl Loko. While in Bo district, population is ethnically and culturally diverse, particularly in the city of Bo; however, over 60% of the population belongs to the Mende ethnic group.

6 b) Data Collection Method and Tools

A structured and open ended questionnaire was used to collect data in the study areas. Group discursions and key informant interviews were conducted and recorded. It was designed purposely to address the objectives of the study.

7 c) Sampling Technique

60 respondent for the questioner were selected, 30 from each chiefdom, pregnant/adolescent mothers in or out of school were identified by my co researchers and asked to volunteer for the study. The District Education Officers of MBSSE where reached who gave governments position on the researched topic. Community Chives, heads of the pilot schools and selected parents of volunteered adolescent mothers where interviewed.

8 d) Quality Control

The following steps were used to guarantee quality in the course of the study. The interview schedules were conducted in local languages (Krio, Mende and Themne) and back to English to confirm the meaning. This was to safeguard mutual understanding and meaning to avoid misunderstanding during the data collection. The questionnaire was pre tested with girls of similar age in areas similar to the study area and mistakes were rectified. All completed questionnaires were check at the end of each interview for their completeness and consistency. The assistant researchers was responsible for the distribution and collection of the questionnaires to ensure quality of data.

9 e) Ethical Considerations

Before the conduction of interviews, the research protocol, including study design, questionnaire, informed consent procedure and the method of protecting of the individual and research criterion was approved by the Head of Department, Institute of Research, Gender and Development studies, Fourah Bay College, University of Sierra Leone. Dr. Alphous Koroma. I also sought permission from District Education Officers of MBSSE in BO and Portloko respectively. Interviews for all respondents where done in Krio and translated to English. Due to this, ethical considerations, it have been a crucial part of the research process, and each step of the study was guided by the criterion of protection of the individual and the research criterion. That is, the risk of harming participants was weighed against the potential benefit that the study can contribute for them.

IV.

10 Results (Quantitative Data and

Qualitative Data from the Questionnaire)

The findings combine information/data generated from both primary and secondary sources, results obtained from structured questionnaires administered and interviews conducted, an analysis of this investigation from sixty (60) pregnant/teenage mothers who have either dropped out of school or have re-admitted back to school. ??0 For me to understand Respondent's social and demographic background, the questioner captured address, gender, marital status (all my questionnaire respondents are adolescent girls who are also singles) but the analysis in table 1.1 below focuses on three important variables: age bracket, educational level when they got pregnant and the percentage of teenage mothers that have re-entered school. 2. An analysis of girls that got sent out of

school, self-isolated or never stopped schooling and the percentage of those granted permission to take exams while identified as visible pregnant. Bottom is the need on a scale of preference to re-enter or stay in school. b)
Analysis of qualitative data from in-depth interviews, group discursions and current literature on the researched topic. 20 pregnant/adolescent mothers were engaged in a focus group discussions first in a batch of 10 from each district and 12 were engaged further in a one on one in-depth interview with those who opted to talk further. Education stakeholders (school heads, teachers, town chives parents/guardians and the district education officers of both districts. The major teams discussed are as follows;

11 i. Stigma

From the analysis of the interviews conducted, historically, pregnant girls were not allowed to attend school or sit for examinations while visibly pregnant. This was formalized by the Government of Sierra Leone through a Cabinet Conclusion in 2010 which was enforced in 2015. This amplified the stigma associated with teenage pregnancy identified as the major factor that deters pregnant teenagers and teenage mothers from continuing school. They feel marginalized or excluded from school, especially children from lowincome families; children in rural and underserved areas; especially girls who are currently pregnant and in school or are parent learners.

Pregnancy and child bearing are momentous life changing proceedings, more so for young girls. Going through these experiences while still at schooloften stigmatized or rejected, with little to no support from the family or school, condemned by government officials, facing economic hardship and occasionally abuse and violence -can present serious challenges for pregnant girls and adolescent mothers to continue with their education.

12 ii. Poverty

The Free Quality School Education (FQSE) policy of the Sierra Leone Government aims to achieve greater access to education by reducing financial barriers to school enrollment and improving teaching and learning outcomes for all students. Poverty affects girls in gender specific ways, involving issues such as transactional sex, early marriage, and the burden of having to perform a disproportionate share of household chores. As a result, girls from low-income families are less likely to stay in school while pregnant or re-enter school when parenting.

13 iii. Distance to School

Rural areas have greater concentrations of poverty than towns and cities, and practical problems such as access to schools, transportation to school, hunger, and the lack of trained and qualified teachers are prominent. A 2013 study by UNESCO found that one in 10 children in rural areas have to spend more than 45 minutes getting to school compared to just three percent in urban areas.(UNESCO 2013) Pregnant girls will find it intimidating to cover long distances to access school.

iv. Pressure at School and Home Numerous overlapping social and economic pressures face girls, these include expectations that adolescent girls engage in caring for, and economically supporting their families, and threats to their safety and bodily integrity. Systemic influences unreasonably affect the protection, attendance and performance of girls in school as they reach adolescence and adulthood, such as sexual exploitation by teachers and the low number of female teachers and other role models. (UNICEF, 2011)

Unintended pregnancy amongst school-age girls is not new to the education system, but its wideranging impact in the post Ebola and on-going Covid-19 should be a concern for educational stakeholders, the lockdowns are flash points for teenage pregnancy that was once the norm across the social spectrum.

14 . Lack of Awareness of the Radical Inclusion Policy

High among barriers to school re-entry of adolescent mothers is the lack of awareness about reentry policies (Radical Inclusion) among rural communities, girls, teachers, and school officials that girls can and should go back to school. Girls are most often deeply affected by financial barriers, the lack of support, and high stigma in communities and schools alike. In numerous cases, poor dissemination at the school level and lack of awareness of these policies by teachers, communities, and girls themselves limit their re-entry and effectiveness. For example, education officials do not proactively follow-up on girls who left school due to pregnancy to initiate re-entry. Data is mostly absent on the number of girls who drop out due to pregnancy; teenage mothers that have been readmitted to school under the "Radical inclusion" and "Free and Quality Education" policies; the challenges they face after readmission; and, the performance of adolescent mothers once they are back at school vi. Non Tolerance and Inventiveness of Some Education Stakeholders Non tolerance and insensitiveness of some school authorities towards teenage mothers was highlighted by the parents of one of my respondent. Respondent 04-Jeneba (pseudonym), a teenage mother in Bumpe Chiefdom dropped out from school when she felt she had been publicly humiliated by the principal for coming to school late, the formal Principal told her at the assembly that his school is not for "mothers" but children who are not parenting and has very little to do in the morning. The teenage mother had to breastfeed her baby well and other house duties before going to school, that was her reason for going late. She felt so ashamed that a request was made to her parents that she must be relocated to the city where she can go to school without the population knowing that she is a lactating teenager. In her case, the parents could not afford the cost of relocation, upkeep and someone to care for the baby while in school.

Socio-cultural practices such as Female Genital Mutilation (FGM) and religious believes such as a child born out of wedlock is on-Godly and a disgrace to their family, leading to forced child marriages that promotes adolescent mothers to drop out of school prematurely.

The lack of mentoring of teenage mothers experienced and role models in communities is also a barrier as our inaction is the same as those discouraging teenage mothers from taking the advantage of the provisions made available by government.

Stakeholders of education not strengthening linkages between schools and homes to support re-entry and ensure follow up on pregnancy dropout cases in order to overcome socio-cultural challenges to re-entry is barrier.

15 vii. Teenage Pregnancy and School Attendance

In an in-depth interview, data were collected in an open-response question and I was able to explore educational stakeholder's perspectives about the barriers and facilitators to education for pregnant/ adolescent mothers. The data were analyzed thematically by carefully identifying and expanding significant themes that emerged from the informants' perceptions on the topic discoursed. The study discovered that teenage pregnancy has a negative or detrimental effect on the school attendance, academic performance, emotional behavior and relationships between pregnant teenagers, their peers and educators. Attendance in school is greatly affected by teenage pregnancy and adolescent motherhood. Educational stallholders indicated that school attendance is seriously a major barrier as adolescent mothers are faced with domestic chores, health conditions, negative public perceptions, unfit uniforms, or rejection by parents, teachers or friends contributes to poor attendance.

Child Care/Breastfeeding's Support Problem.

Most adolescent mothers interviewed said they have babysitting arrangement problems, which need their attention especially if their baby's health is not stable. Majority of the teenage mothers intervened and said, there is elderly relative or person to look after their babies' when/if in school so they have to choose between getting education and caring for their babies and often the latter is their choice. Schools do not have safe provisions/spaces for breastfeeding and the time at school is too long to level babies unfed.

Child care is an overwhelming duty that demands one's total attention, said a senior female teacher in Lokomassama. "Adolescent mothers are inconsistent in school mainly because they usually have to breastfeed their babies for which our school does not have provision for schooling mothers to do so in school.

Attending health clinics with their babies is often the major excuse given for being absent in school"

According to the pregnant/adolescent mothers, the discovery of their pregnancy by parents also resulted in fury and shame among family members. Some adolescent mothers were rejected by their family members. The home environment had become unhomely and volatile for these adolescents.

(Respondent 05) Massah (pseudonym) in Bumpe told me "family members are very angry and ashamed of me. They refused to accept my pregnancy because the father of my child (a bike taxi rider) ran away from our community in fear of police arrest or going to prison for our action below 18 years and against the national laws. I continued to live in the house but they refused to take care of me and the baby." How will I tell them that I want to return to school and who will look after my baby? Was her closing question I'm still pondering over.

At Lokomassama. Amina, who lived with her step mother and father, narrated her plight. My father chased me away when his wife who disliked me told him that I was pregnant by a fisherman. I moved in with my boyfriend at the wharf. I can't go to my previous school because of the distance and we are struggling to feed ourselves, I go about selling fish cake to support running the home,"

16 viii. Teenage Pregnancy on School Performance

Educators also identified the following influences during the study as a barrier to education access by pregnant/adolescent mothers.

Teenage pregnancy seems to result in teenage mothers ending their schooling. In Bumpe Chiefdom a significant number, unlike in Lokomassama, girls usually continue their education after giving birth. For those who re-enter school fail to cover the gap as our school system, stages are not by age but stages are attained by academic performance. Staying out of school during pregnancy leaves them behind while their age mates progress, this course delays in completing their schooling rather than dropping out. Unfortunately, only approximately one third of teenage mothers return to school in Lokomassama. A principal at lokomassama noted that a delay in returning to school could reduce the likelihood of girls ever pursuing further education and it also reduce their level of school performance. Equally the likelihood of failing a grade increases with pregnancy. Educators from both Chiefdoms were of the opinion that pregnancy and adolescent motherhood do not necessarily end a teenager's schooling; nonetheless for those who remain in school or return following childbirth, it does impact on their grades and at times their progress in school.

The Head of the mathematics department in my pilot school in Bumpe told me "I notice pregnant girls by their sleeping habits in class after lunch, they miss out on schoolwork, and missing out on schoolwork makes them not to perform well. They struggle with the school syllabus, they do not finish their school work, homework and assignments; they hardly concentrate in class."

A JSS 2 class master in Lokomassama asserted that "Teenage pregnancy unfavorably affects school performance. After a pupil falls pregnant, the academic performance will drop, definitely it will drop because the

learner will spend time at home, in hospital or battling the social problems associated with child pregnancy which is in direct conflict with the law for impregnator and the family members trying to settle such matters out of court as a family. They miss school, in that way they usually underperform."

17 ix. Emotional Experience and Mental Health's Effect on Access to Education for Pregnant/Adolescent Mothers

During my in-depth interview, it was revealed that pregnant/adolescent mothers emotional experiences are often affected by the guidance and support they get from educators, family or mentors in the community.

Teachers and community mentors were of the opinion that the pregnant /adolescent mothers, usually they finds it difficult to reveal their pregnancy to parents and they sometimes resort to friends and mentors to talk to the parents on their behalf. As a consequence they experience psychological stress from dialogues with parents, disclosure to the unborn child's biological father, peer rejection and isolation, having to leave school, fear and stigmatization. The expected perceptions and the experiences of inconsiderateness of nurses towards teenage pregnancy also contribute to the stress experienced by learners. Statement from nurses like "pikin born pikin" a child births a child. Unserious/wayward girls. A mentor for the project "2 Young Lives" in Bumpe told me "we often accompany our mentees to the clinic to protect them from uncalled for statements that prevent pregnant teens going to access medical attention". Negative comments from care givers instill psychological torture leading to selfisolation including avoiding school.

Coordinator for "2 Young Lives" mentoring scheme for pregnant girls in Port Loko. Isatu Koroma said; ?.."Pregnant/adolescent mothers are vulnerable to poor mental health outcomes for the following reasons. Adolescence is a transitional stage characterized by psychological, biological, and social changes. Pregnancy and parenting during at such critical period interferes with normative developmental processes, and the challenges of the biological changes of adolescence and pregnancy may increase a girls' poor psychological and physical vulnerability. The possible effect of these neurobiological changes can be observed in pregnant/adolescent mothers experiencing higher rates of depression, anxiety, and stress than over 18 and mature women. Pregnant adolescents and adolescent mothers also experience social changes that may have connection to poor mental health consequences."

However, mentors and educators do attempt to provide support and are often important motivators and enablers for pregnant/adolescent mothers to stay at school during pregnancy and return to school following the childbirth. It is critical for girls to return to school as soon as possible following childbirth, because even short interruptions in education do impact on the girls' futures.

(Respondent 13) "My boyfriend was very angry and aggressive with me. He refused to talk to me. He said he was not ready for the pregnancy. He accepted the child only after he was born. He didn't accept responsibility for the pregnancy. He said that anyone could have impregnated me. It was a random sexual encounter and we were not in a relationship. I found it extremely difficult to return to school. I didn't have a nanny and I did not have the family support to return to school and look after my child."

Many adolescent mothers expressed that motherhood is accompanied by anxiety and stress. The additional responsibilities of motherhood contributed to the stress and anxiety among adolescent mothers. The participants expressed various concerns regarding the raising of their children. They perceived the following as their parenting concerns: the health and well-being of their child, procuring baby consumables, and securing a future for their child. They were always concerned about not having enough food, nappies and clothes for their children. The financial hardships contributes to their concerns regarding baby consumables.

Finally, adolescent pregnancy often occurs within environments of risk, which expose young women to multiple drivers of psychosocial distress and barriers to accessing care and support. As many as two-thirds of adolescent pregnancies may be unintended, introducing new responsibilities and demands for adolescents who may not be ready to become parents, or may undergo additional stressors when experiencing an unintended pregnancy

18 c) Discussion of Findings

This study shows that all the participants were willing to take part in the study and majority was between the ages 14 to 19 years. It also revealed that majority of them were single and only quite few of them were non-school going girls.

Government Educational policies do have limitations and an important limitation is on inclusion. While it attempts to, it does not cater for all and every child experiencing exclusion and marginalization in Sierra Leone. Resources and other constraints simply exceed the capacity of the Ministry of Basic and Senior Secondary (MBSSE) to address the learning needs of all marginalized children through policies that lack effective implementation and monitoring. Nevertheless, effective resourcing and implementation of this policy will secure equitable access, retention and inclusion in basic and senior secondary education for the children targeted by the policy even as they strive to reach the ideal of inclusion for all.

Adolescent pregnancy and child marriage in Sierra Leone are among the highest globally, resulting in an estimated 20% of girls dropping out of the classroom. Also there is significantly less engagements with adults in activities that promote learning and school readiness in the rural poor communities selected for this research.

On the responsibilities of Government, there is lack of collaboration between directorates within the MBSSE, other ministries, stakeholder, partners and communities to develop guidelines and Standard of Operations (SOP) to ensure effective implementation and monitoring of all policies.

19 Summary of Research Findings, Conclusions and Recommendations

This research is the culmination of a modest undertaking to better understand the barriers to educational opportunities for pregnant/teenage mothers in the Bumbe Ngao Chiefdom of Bo District and Lokomassama Chiefdom of Port Loko District, Sierra Leone. Although the scope of this research is limited and data collection was not exhaustive, considering 2 out of 16 districts including Western Urban and Western Rural districts, nevertheless, the perceptions and opinions gathered from structured questionnaires, engaged interviews with key educational stakeholders and review of available literature on the subject matter, provide valuable insights into the extent of barriers pregnant and teenage mothers face in accessing education and training opportunities in Sierra Leone. It has revealed both the positive progress that has been made by the government through policies "Radical Inclusion", as well as the significant room for improvement that persists in implementation and monitoring of the fine education policies, especially the Free and Quality Education introduced in 2019 and the Radical Inclusion announced in 2020.

In 2013, all the countries that make up the African Union (AU) adopted Agenda 2063, a continentwide economic and social development strategy. Under this strategy, African governments committed to build Africa's "human capital," which it terms "its most precious resource," through sustained investments in education, including "elimination of gender disparities at all levels of education." Two years after the adoption of Agenda 2063, African governments joined other countries in adopting the United Nations Sustainable Development Goals (SDGs), a development agenda whose focus is to ensure that "no one is left behind," including a promise to ensure inclusive and quality education for all.

Sierra Leone emerged from a troubled recent past that saw the country experience a ten-year civil war (1991-2001), followed by a devastating Ebola outbreak in 2014-2015 which killed thousands and harshly interrupted public service delivery. Both of these events led to significant teenage pregnancy and loss of learning time as schools were forced to close for significant periods of time. I could say, as we recover from this tragedy for girls. COVID 19 has engulfed the world compounding the already precarious conditions for girls in Sierra Leone that is receiving a fair share of the epidemic. Teenage pregnancy and child marriage in Sierra Leone are among the highest globally, resulting in an estimated 20% of girls dropping out of the classroom. (Statistics Sierra Leone and ICF, 2019)

Government in fulfilment of its commitment and responsibility, that requires an inclusive education system one that is accessible to all children and acknowledges, addresses and responds to the diverse realities and needs of all learners. The national policy on radical inclusion in Schools seeks to ensure that schools throughout Sierra Leone are accessible to, and inclusive of, all children -especially those that are typically marginalized or excluded. In particular, the policy focuses on pregnant teens. This policy is an incremental one. Building on the Free Quality School Education (FQSE) program of the Sierra Leone Government that aims to achieve greater access to education by reducing financial barriers to school enrollment and improving teaching and learning outcomes for all students. Poverty affects girls in gender specific ways, involving issues such as transactional sex, early marriage, and the burden of having to perform a disproportionate share of household chores. As a result, girls from low-income families are less likely to receive an education than their male counterparts. (Statistics Sierra Leone and ICF, 2019) To compensate for the chronic neglect of female education, the "Radical Inclusion) policy is intended to encourage positive discrimination in favour of girls in basic education and provide measures that aim to foster greater equality by supporting them so they also can have access to opportunities as others in the community.

In my opinion, these policies are yet an ideal/concept yet to be achieved, it needs to be cascaded in real terms to rural communities like Lokomasama Chiefdom and Bumpe Ngao Chiefdom in real terms to get its intended impact.

20 a) Summary of Research Findings

In discoursing the barriers to educational by pregnant/teenage mothers in Lokomasam Chiefdom of Port Loko and Bumpe Ngao Chiefdom of Bo districts, research finding reveals that prominent among the barriers to education for pregnant/adolescent mothers is stigma, degrading treatments; labeling pregnant girls and adolescent mothers as "moral" failures, punishing them by excluding them from school is a total violation of their fundamental human rights. From the questionnaire administered 37.6 % of respondents in Bumpe Ngao Chiefdom and 30% or respondents in Lokomassama out of 7 variables forming the highest reason for school drop out by pregnant teens. They decided to quit school in fear of the stigma associated with teenage pregnancy.

Cultural and religious norms contribute to barriers to education for pregnant/adolescent mothers. School authorities, parents, community stakeholders refuse to unlearn some cultural traditions and values that prefer child marriages to single motherhood for adolescent girls. Both chiefdoms are Muslim dominated, they believe

single motherhood is a disgrace to the family. Culturally, it is viewed as unethical for a pregnant girl to put on a regular uniform and mingle with normal students, they see them as a bad influence on "innocent" girls, and therefore they prohibit them from attending the regular schools. traditional practices such as female circumcision practiced in both chiefdoms is a passage from childhood to adults culturally, once girls complete the ceremony , the see themselves as adults and act as such indulging in sexual exploits that results in unplanned pregnancy that eventually course them to drop out of school.

Rural areas have greater concentrations of poverty than towns and cities, and practical problems such as access to schools, transportation to school, hunger, and unavailability of learning materials have transformed decent girls to prostitutes accept sex for grades, domestic slaves and petty traders. Poverty has been one of the greatest barriers to education in Sierra Leone. Analysis of the Out-of-School Census (OOSC) survey data with respect to wealth status of households reveal that 79% -81% of households in the poorest wealth quintile have out-of-school children, as opposed to 19% -21% of affluent households with out-of-school children.

Lack of effective government policy implementation and monitoring in remote rural communities is a barrier to education for teenage/ adolescent mothers who faces embarrassment in the hands of school authorities because Government resources and other constraints faced by staff of MBSSE simply exceed the capacity of the Ministry to address the learning needs of all marginalized children through policies .

My research also revealed that the lack of trained and qualified teachers plus the small number of female teachers poses a threat to girls in schools, teachers that can provide school-based counselling services for students who are pregnant, married or mothers. Provide long-term psychosocial support to adolescent survivors of sexual abuse and harassment. But on the contrary, some teachers in the area of study were involved in "name calling" of pregnant/adolescent mothers. Names in creole like "pikin born pikin" a child given birth to a child, "skul pikin Konbra" pupil parent and "skul pikin bele woman" a pregnant pupil. Such unprofessionalism is a barrier to education for pregnant/adolescent mothers.

The lack of sensitization and popularization of the policy "Radical Inclusion" leaves pregnant girls at the mercy of school authorities, the majority of pregnant girls, parents, community stallholders and school authorities seem not knowledgeable of the "Radical inclusion" policy. Information is power, if they don't know, they won't implement it, thereby serving as a barrier to the education of pregnant/adolescent mothers.

Distance to school facility, majority of the girls uses motor bike taxies (locally called OKADA) as transport means, those whose parents can't afford fall pray of these riders who will asked for sex in return of the favor to transport them to school and back. Mostly they vanish into thin air when the realize that the girl in pregnant, this has also been a barrier to education for girls. Plenty girls could be seen selling wears on various streets, Motor parks and along the wharf populated with roving fisher men who after selling their catch are armed with cash to pay for sex. Often petty trading girls are their targets, poverty opens the door to prostitution leading the teenage pregnancy. Financial support to girls for up keep, no matter how small, will help prevent girls trading sex.

Multiple overlapping social and economic pressures face girls. These include expectations that adolescent girls engage in caring for, and economically supporting their families, and threats to their safety and bodily integrity. Systemic factors disproportionately affect the protection, attendance and performance of girls in school as they reach adolescence and adulthood, such as sexual exploitation by teachers and the low number of female teachers and other role models.

21 b) Conclusion

The importance of girl child education in an emerging economy like Sierra Leone cannot be overemphasized. We have experienced the impact women can create if given equal opportunity in contributing to nation building, as partners in development, I applaud the giant steps taken by the Government in first the implementation of the Free Quality School Education (FQSE) removing tuition fees, enrolment fees and giving some teaching and learning materials that has significantly reduced the direct cost on parents. The raise of the minimum age for marriage to 18 for both boys and girls and taken all necessary measures to eliminate child marriages in law and practice, establishing the sexual offences courts, including by implementing comprehensive and wellresourced national campaign (Hands Off Our Girls) for combating child rape marriage, and sharing best practices. The removal of the ban on visible pregnant girls from taking public exams to replace it with the "Radical Inclusion Policy" The policy particularly emphasizes the inclusion of historically marginalized groups: pregnant girls and parent learners, children with disabilities, children from rural and underserved areas, and children from low-income families. It is about creating an inclusive education system that allows all children in Sierra Leone to thrive. The policy ensures compliance with existing laws and regulations surrounding inclusion and provides guidelines for decision making and streamlining internal processes, providing equitable access to education for all children in Sierra Leone.

Notwithstanding the inroads Government has made, there still remain plenty to do to ensure the barriers to educational opportunity for pregnant and adolescent mothers are removed. As evidenced in this research, the idea of pregnant teenagers attending regular school has depicted culture shock for students, parents, community stakeholders and even teachers.

Popularization of all policies by MBSSE will eliminate stigma and prevent teenage pregnancy, teachers and other education officials will support the education of pregnant girls and adolescent mothers, and to ensure they

guarantee a safe school environment. Monitor implementation of school re-entry policies by keeping data on the number of pregnant/adolescent mothers who get readmitted, their school attendance and completion rates; and use the information to improve support for pregnant/ adolescent mothers.

22 c) Recommendations

23 i. School authorities/heads, board of directors and School Management Committees

Schools should ensure the inclusion of all students and take all necessary measures to protect all children (regardless of being pregnant, lactating or parenting) from stigma, sexual abuse, exploitation, or harassment. Schools should also play a key role in providing students with the information and tools to understand changes in adolescence, sexuality, and reproduction, and provide information that enables them to make informed decisions, without the pressure, stereotypes, or myths shared by their friends or communities.

School management stakeholders should provide and ensure effective school-based mentoring/ counselling services for students who are pregnant/ adolescent mothers. Provide long-term psychosocial support to adolescent survivors of sexual abuse and harassment.

Immediately adopt the "Radical Inclusion" and re-entry policies, expedite regulations that facilitate pregnant/adolescent mothers returning to primary and secondary schools.

During parents and teachers meetings, propagate information to parents, guardians, and community leaders about the harmful physical, educational, and psychological effects of teenage pregnancy and the importance of pregnant/adolescent mothers continuing with school.

Embrace Pregnant/adolescent mothers in programs that target female students at risk of dropping out, and ensure targeted programs include measures to provide financial assistance to at-risk students, counselling, and distribution of inclusive educational materials and sanitation facilities, including menstrual hygiene management kits in schools.

Engage with teachers and other education officials to support the education of pregnant girls and adolescent mothers, and to ensure they guarantee a safe school environment.

Catering for Special school uniforms that are different in size and shape from the normal school uniforms used by the general school body should be provided for pregnant pupils to make them feel comfortable and relaxed. Or non-mandatory for them to put on uniforms.

Create options for childcare/nursery and early childhood development canters for children of adolescent mothers so that their children of schoolgoing age can attend school along with their mothers.

Create a database that will capture data and monitor the implementation of MBSSE school policies, especially the "Radical Inclusion" on issues that relate to pregnant/adolescent mothers. The information from the database will help: Initiate and implement tools to follow up on and keep trajectory of girls who drop out of school due to pregnancy or marriage, with the aim of initiating their return to school;

The supervision of the implementation of the "radical inclusion" policies by keeping record on the number of pregnant/adolescent mothers who get readmitted, their school attendance and completion rates; and use the information to motivate others out of school or seek support for pregnant/adolescent mothers.

24 ii. For the Government and the MBSSE

The initiation and formulations of policies are good but it's just a white elephant if not religiously implemented and monitored to create the impact for its initiation. Based on the research finding, I recommend government and its line ministry, MBSSE should; Engage in public information campaigns directed at families, community leaders, teachers and adolescents themselves that address the stigma around teenage pregnancy and adolescent mothers, sexuality, and deliberate the significance of sex education and promote ways for parents to talk about healthy sexual practices.

Guarantee a mandatory national curriculum on sexuality and reproductive health that complies with international standards and that it: Embraces comprehensive information on sexuality and reproductive health, including information on sexual and reproductive health and rights, responsible sexual behavior, and prevention of early pregnancy and sexually transmitted diseases. Provide teachings and skills of relevance to gender equality, bullying, and the prevention of sexual and gender-based violence, including avenues for reporting and redress by incooperating the "Hands off Our Girls" campaign messages Providing social and financial support for pregnant/ adolescent mothers in school will keep them in schools and reduce burden for those who have to fend for themselves and their babies.

Engage with school authorities to provide special accommodations for young mothers at school, for instance time for breast-feeding or time off when babies are ill or to attend health clinics. Ensure through school inspectors that unsafe school environments including sexual abuse, harassment and exploitation by teachers, school officials and classmates; stigma linked to pregnancy and marital status; corporal punishment by teachers and school officials, which sometimes amounts to inhuman and degrading treatment are abolished.

Government should give pregnant/adolescent mothers a choice of access to morning or evening shifts especially those coming from long distances. Government should put monitoring mechanisms in place to monitor school

authorities including school leaders and teachers regarding the acceptance of pregnant/adolescent mothers in all schools regardless of grade, privately managed, government or government assisted schools. Ensure that teachers treat adolescent mothers or pregnant mothers with respect within and out of the school premises.

Government should also encourage stakeholders of education to strengthen linkages between schools and homes to support re-entry and ensure follow up on pregnancy dropout cases in order to overcome norms and socio-cultural challenges to reentry.

25 iii. To Parents

Parents should stop stereotyping the way of dealing with their children, some send away their daughters or abandon them when they become pregnant for fear of the stigma the family faces from the community. Parents should be supportive to their daughters when they become pregnant and when they give birth; adolescent mothers find it very difficult to enroll back to school because most of them squat with their friends and they have nobody else to take care of their babies if they go to school, so they prefer to stay home.

Parents should continue to provide social and financial support for pregnant/ adolescent mothers, withholding care and support will increase their risk level and demotivate them from re-entering or continuing school, endangering their future and that of their babies.

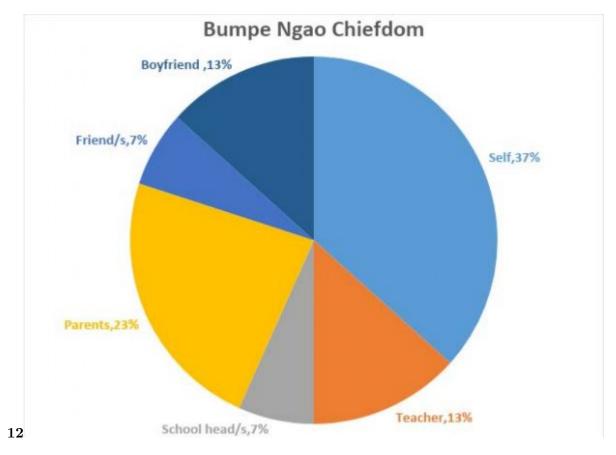


Figure 1: Figure 1: Figure 2:

Mangenda Kamara

Figure 2:

achieve inclusion." Dr. David Moinina Sengeh-Minister of MBSSE.

A recent Ministry of Finance and International Monetary Fund (

The Ministry of Basic and Senior Secondary Education (MBSSE) charged with the responsibility of rolling out the Free Quality Education program got a nudge from Non-Governmental Organizations of existing norms preventing vulnerable children (including pregnant and lactating adolescents) from benefiting from the program. This prompted the development of a new policy captioned "Radical Inclusion Policy". This national policy on Radical Inclusion in schools pursues to safeguard that schools throughout Sierra Leone are accessible to, and inclusive of all children; removing barriers especially those are typically marginalized or excluded and marginalized group: children with disabilities; children from low-income families; children in rural and underserved area; especially girls who are currently pregnant and in school or are teenage mothers.

Inclusion means "The intentional inclusion of persons directly or indirectly excluded (from education) due to actions or inactions by individuals, society or institutions. Sometimes silence and infrastructure added to other intentional actions are excluded. Radical inclusion means that these silent exclusionary policies, moral stances, formally stated actions, institutional regulations, national laws and systemic frameworks should be removed intentionally and with urgency to

Figure 3:

? Social	and	Demographic	background	of
Respondent; ? a) Social	and	Demographic	Background	of
Respondents				

Figure 4:

	NGAO CHIEFDOM			LOKOMASSAMA CHIEFDOM		
Variables	Options	Frequency ($N=30\%$		Frequency(N =	%	
				30)		
AGE	9 to 12 Years	2	6.7	3	10	
	13 to 15 years	10	33.3	5	16.7	
	16 to 18 years	14	46.7	15	50	
	19 to 22 years	4	13.3	7	23.3	
	TOTAL	30	100	30	100	
Level of						
Education						
	classes 4 to 6	4	13.3	0	0	

Figure 5: Table 1 BUMPE

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Figure 6: Table 1 .

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Options	Freque 30	nky (N=	Frequency(N= 30)	%			
Sent out from school		16 G	9	20			
	14	46.6	9	30			
Self-decision to stop schooling	16	53.3	21	70			
Never stopped attending school	0	0	0	0			
TOTAL	30	100	30	100			
Public/School Exams Acceptance rate							
I was not allowed to take exams	18	60	19	63.3			
I was granted permission for exams	2	6.6	0	0			
Nobody knew I was pregnant	10	33.3	11	36.6			
TOTAL	30	100	30	100			
What support do adolescent mothers need on a scale of preference to re-enter or stay in school?							
Counselling/mentorship	12	40	11	36.6			
Financial support	6	20	7	23.3			
Special school for pregnant girl's access	4	13.3	3	10			
Sensitization on Radical Inclusion Policy	8	26.6	9	30			
TOTAL	30	100	30	100			

Figure 7: Table 2

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