Challenges Faced by Adolescent Girls in Urban Areas of Uganda and the Case for Targeted Social Protection Programmes

Executive summary

Adolescent girls in urban areas of Uganda suffer unique challenges that affect their safe transition to adulthood. These challenges include; early school dropout, domestic and sexual violence, child labour and exploitation, limited access to sexual and reproductive health services, among others. These vulnerabilities increase social and economic exclusion and have been exacerbated by the COVID-19 pandemic and the subsequent measures to slow down its spread, for instance, the countrywide lockdown and the school closures. This policy brief provides a snapshot of the unique challenges faced by adolescent girls in urban areas and makes the case for transformative social protection programmes that address structural barriers to the economic and social inclusion of adolescent girls. In light of the findings, the brief recommends the need for community sensitization against sexual and physical abuse, and enforcement of laws to protect adolescent girls in urban settings.

Introduction

Urban areas are home to a growing number of adolescents in Uganda, and this demographic group faces unique challenges. In Uganda, about one out of every four people (23.6 percent) is an adolescent which translates to a population of over 10 million persons, with 50 percent of them being girls (UBOS, 2018). While most adolescents reside in rural areas (78 percent in rural areas compared 23 percent in urban areas), the share of urban adolescents is projected to steadily grow more than two-fold by 2040 with increased urbanization mainly driven by children and youth (United Nations, 2019). Adolescent girls face a series of stressful events with the onset of menstruation and puberty, which heightens their vulnerability to school dropout, teenage pregnancy, and HIV/AIDS among others. Also, adolescent girls face overlapping gender and age-sensitive challenges such as gender-based violence (GBV). These challenges have been exacerbated by the COVID-19 pandemic—which has not only forced a large population into lockdown but has also affected access to critical essential social services. Furthermore, whereas government imposed measures such as stay home restrictions and lockdown to slowdown the spread of COVID-19, these measures exposed adolescent girls to high risks of teenage pregnancies and early marriages. Notably, a household survey conducted in Kampala and the refugee settlements showed that teenage pregnancies and child marriage had grown by 21 per cent and 18 per cent, respectively, during the COVID-19 pandemic lockdown period (UNHCR et al., 2020).

In response to the challenges faced by adolescents, Kampala Capital City Authority (KCCA) in partnership with UNICEF are implementing the Girls empowering Girls Programme (GEG), which is the first urban social protection programme for adolescent girls in Uganda. The programme promotes safe transition into adulthood among adolescent girls in Kampala through three intervention components of group and individual mentorship, offering referrals to services for the enrolled girls, and a cash transfer. This four-year programme was launched in November 2019 with a target of supporting 750 in-school and 750 out of school girl beneficiaries, with plans for scale-up in other major urban centres of Uganda. Accordingly, this policy brief drew on insights and project results from the GEG programme to inform on the role social protection programmes in addressing vulnerabilities among urban adolescent girls in Uganda.

Methodology, Data Sources and Approach

This brief describes the unique challenges adolescent girls in Kampala face that are brought about by living in urban centers. We looked at adolescents that are both in-school and those out of school.
The analysis is based on both quantitative and qualitative data.

The quantitative data analysis used secondary data sources from national surveys: the 2016/17 Uganda National Household Survey, the 2016 Uganda Demographic and Health Survey and the 2020 Uganda High-Frequency Phone Survey on COVID-19 (UHFPS). The qualitative analysis is derived from in-depth key informant interviews (KIIs) with 50 in-school and out-of-school mentors for the KCCA’s GEG programme. The key informant interviews took place over two days, to capture insights from mentors working with in-school vs. out-of-school girls. The sampling process took into account the demographic, programme design and socio-economic characteristics of the enrolled girls, to include mentors for girls with disabilities, refugees, child-headed households, and factor in the school enrollment status of the GEG participants.

The KIIs with the mentors were guided by a semi-structured questionnaire that was designed using relevant literature and aimed to capture the different challenges faced by urban adolescent girls and critical thematic concerns, whilst also allowing respondents to freely discuss relevant issues. Specifically, the questions covered education, economic, health (domestic and sexual violence) and mental health challenges. Interviewees were divided into self-selected discussion groups focusing on specific topics, and their insights were transcribed verbatim and analysed using thematic analysis to derive meaningful findings for this brief. Key insights were shared by representatives of each group for additional feedback from other mentors not participating in that thematic KII, to ensure all insights were captured. The responses were transcribed, synthesized and analyzed, with conclusions presented in this paper.

Findings

This section presents the key findings from the secondary and primary data analysis conducted. To validate these findings from secondary data (National representative data sets) while delving deeper to establish the role of social protection programmes, primary data were collected from the GEG mentors. Furthermore, analysis was informed by the global literature on the challenges of adolescent girls in urban settings.

(i) High levels of school dropout of adolescent girls in urban areas: Whereas school attendance is higher in urban areas compared to rural areas, findings from 2016/17 Uganda National Household Survey reveal a higher decline in school attendance in urban areas than in rural areas. More specifically, school attendance between age categories (6-12) years and (17-18) years declined by 41.3 percent among urban adolescents compared to 39.3 percent in the rural areas (Figure 1). The decline in school attendance could be primarily explained by higher school dropout attributed to factors highlighted in Figure 2. According to informant interviews with the GEG mentors, school dropout is influenced by several factors such as high costs of education, loss of interest in further study, demand for domestic chores, and pregnancy among girls. For instance, the adolescent girls indicated that they come from extended families with many children with unmet basic needs, which are greater priorities compared to payment of school fees and educational materials. Furthermore, it was reported that numerous caregivers consider educating girls a waste of resources and highlighted the risk of pregnancy as a key concern. Notably, those caregivers who were supportive of girls’ education were also concerned that the prolonged absence from school due to COVID-19 would not only disrupt the girls’ education outcomes, but also increase their vulnerability to early pregnancy, which they underscored as an additional benefit of schooling for girls.

Furthermore, the mentors indicated that while the majority of the GEG enrolled girls attend schools located within their Local Council areas, some girls face the challenge of walking long distances to government schools in the mornings and late in the evenings. It was reported that the majority (90 per cent) of the GEG girls walk approximately 6 kms to and from school on a typical schooling day, while the other 10 percent use public transport (boda boda (motorcycles), taxis (matatus / public buses), etc.). The KIIs further revealed that many adolescent girls walk through unsafe places on their way to school, which exposes them to vulnerabilities of theft, rape and kidnap. For fear of safeguarding the girls’ lives, girls may end up dropping out of school.

The interviews further revealed that some caregivers send girls to faraway schools due to religious affiliations as well as financial inability to take their children to the nearby schools. In addition, frequent shifts/ migration due to lack of permanent residence which is characteristic of most poor urban households in urban slums, such as Bwaise, Kisenyi, Kamwokya, Katwe affects school attendance of the girls in school.

Figure 1 School attendance for girls by age

Source: Authors’ computation based on the Uganda National Household Survey 2016/17

<table>
<thead>
<tr>
<th>Age</th>
<th>Urban</th>
<th>Rural</th>
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<tbody>
<tr>
<td>6-12 years</td>
<td>94.2</td>
<td>88.8</td>
</tr>
<tr>
<td>13-16 years</td>
<td>87.4</td>
<td>85.9</td>
</tr>
<tr>
<td>17-18 years</td>
<td>55.3</td>
<td>53.9</td>
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</table>
A case in point is a 12 year old girl enrolled in the GEG programme who walks with her twin sister daily from Masajja (after Namasuba) Wakiso to attend school at Nakivubo Blue Primary School in Central Division of KCCA. These two girls maneuver the long distance of about 15 kms daily (close to two hours) as their guardians cannot afford the public transport charges every day. In order to reach school or home in time, the girls at times resort to taking shorter routes which are unsafe while on a rainy day, the two mostly miss school for fear of being penalized by their teachers for coming late - Peer Mentor, Central Division Oct, 2020

COVID 19 affected the school progress of urban adolescent girls; Findings from the Uganda High-Frequency Phone Survey on COVID-19 (UHFPS) revealed that the COVID 19 pandemic and its containment measures, including the closure of schools, have greatly affected school progress of the urban adolescent girls. Notably, most adolescent girls have lost touch with their teachers, while the majority did not engage in any learning activities during the COVID 19 lockdown. Figure 3 shows that fewer adolescent girls (10 percent) interacted with their teachers during the COVID 19 pandemic compared to their rural counterparts (12 percent). Relatedly, a substantial share (33 percent) of the school-going children could not engage in any learning activities during the lockdown largely due to limited access to reading materials and television and radio sets to attend the online classes provided by the government. This was further confirmed in key informant interviews with mentors who revealed that most enrolled girls come from poor households whose caregivers could not afford to buy learning materials in newspapers or had no television/radio sets to follow the online lessons. It was also reported during the interviews that of the few girls that had access to radio or television, they did not fully utilize them for online classes but instead they were used for other non-academic programmes like music and entertainment. Another challenge that was raised during the interviews was the issue of exposure to inappropriate content. Namely, mentors reported that some girls started watching indecent material on televisions and mobile phones offered by the guardians which increases their risk of early sexual debut, with its associated challenges of early pregnancies and HIV/AIDS. In response, the mentors were so instrumental to these GEG girls through their sensitization about the risk of HIV/AIDS and hence were by far better off compared to girls who were not in the programme. This was later confirmed by one of the mentors from the Central division.

Unlike the other girls who are not enrolled in the programme, I was able to call my girls (mentees) weekly during the lockdown to ensure their safety in the lockdown. In addition, I met my mentees monthly and discussed with them the different issues ranging from their education, sexuality and relationship with their parents. As such, these girls got inspired and put in more effort to read their books during the lockdown whereas most of the non-beneficiary girls relaxed on reading their books while others engaged in risky sexual behavior. For instance, one of my mentees told me that her friend (not enrolled in GEG programme) aborted two times after sleeping with her new boyfriend during the lockdown. She aborted for fear of persecution after the lockdown but also to remain in school when school re-opens-Peer Mentor, Central Division, Oct 2020

Figure 3 Access to learning materials during the COVID 19 pandemic

Source: The Uganda High-Frequency Phone Survey on COVID-19 (2020)

Figure 2 Reasons why adolescent girls drop out of school in urban areas, (%)

Source: Authors’ computation based on the Uganda National Household Survey 2016/17
Majority of the adolescent girls in urban areas live in dilapidated rented houses: Most girls and their families stay in run-down temporary houses which at the same time are mainly rented. Specifically, Figure 4 shows that nearly one half (48.8 percent) of the households with adolescent girls stay in tenement houses (Mizigo) compared to their rural counterparts (11.4 percent). These houses are built in mud and wattle, wood or metallic walls, hence are vulnerable to leakage during the rainy season and also whirl-away during strong winds. Besides, these houses are not portioned in rooms, thus requiring children to share rooms with their guardians/adults, which exposes them to dangers like sexual abuse, early sexual activity and drug abuse. Worse still, their guardians are often evicted due to failure to meet rent charges of a monthly average UGX 30,000/= (8 USD). This challenge not only affects the school attendance of these girls but also exposes them to domestic and sexual violence. Notably, the KIIs revealed that this risk of violence was more prominently reported among the out-of-school girls, compared with their in-school counterparts.

The situation of poor housing is further worsened with the onset of the COVID 19 crisis, as some households faced eviction during the lockdown due to failure by caregivers to pay rent. Findings from the Key Informant Interviews with the mentors revealed that the loss of income-generating activities during the lockdown affected caregivers’ capacity to pay rent, forcing some families to shift frequently from one location to another, while others relocated to rural areas.

<table>
<thead>
<tr>
<th>Figure 4</th>
<th>Housing status of households with adolescent girls aged (10-19) in Uganda</th>
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<tbody>
<tr>
<td></td>
<td>Rural</td>
</tr>
<tr>
<td>Huf</td>
<td>4.5</td>
</tr>
<tr>
<td>Tenement (Mizigo)</td>
<td>11.4</td>
</tr>
<tr>
<td>Semi-Detached House</td>
<td>6.0</td>
</tr>
<tr>
<td>Detached house</td>
<td>34.8</td>
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</tbody>
</table>

Source: Authors’ computation based on the Uganda National Household Survey 2016/17

Majority of the urban adolescent girls use shared toilet facilities: The lack of clean and safe toilets is a big concern for adolescent girls, who are expected to manage their menstruation period in the context of deep stigma about their bodies. Findings from the 2016/17 UNHS show that most households in poor urban settings don’t own their toilets and as a result they either share toilet facilities in their neighborhoods or use “community and public toilets”. Specifically, close to half of the households (46 percent) in urban areas use shared toilet facilities, compared to 11 percent in rural areas (Figure 5). Relatedly, a substantial (25 percent) of urban households use unimproved toilet facilities, which don’t ensure the separation of human excreta from human contact. The usage of inadequate and shared toilet facilities not only affects menstrual hygiene of adolescent girls, but also exposes girls to sexual violence, rape and gynecological infections, which affect their health and progress in school. Our discussion with key informants revealed that girls had suffered several infections as a result of using shared public toilets especially those living in slums such as Kisenyi, Kalerwe, Bwaise among others.

A number of mentees reported to have suffered from Urinary Tract infections as a result of sharing public toilets in their locality. These toilet facilities have no doors and they are so dirty and expose the girls to rape and diseases. -

A Lead Mentor from Kawempe Division. Oct, 2020

<table>
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<tr>
<th>Figure 5</th>
<th>Percentage distribution of households by type of toilet facility</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>Improved facility</td>
</tr>
<tr>
<td>Rural</td>
<td>16</td>
</tr>
<tr>
<td>Urban</td>
<td>27</td>
</tr>
<tr>
<td>Total</td>
<td>19</td>
</tr>
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</table>

Source: Authors’ computation based on the Uganda National Household Survey 2016/17
Most urban adolescent girls lack the right knowledge about sexual and reproductive health: Although findings from the 2016 UDHS show a larger share of urban girl adolescents aged (15-19) years with requisite knowledge on sexual and reproductive health compared to their male counterparts, substantial gaps in access to the right information still exist among adolescent girls. On average, less than half (46 percent) of urban adolescent girls were found knowledgeable about sexual and reproductive health, compared to 26 percent among their male counterparts. This was later confirmed during the key informant interviews with GEG mentors, which revealed that most adolescent girls have no access to this information since their parents/ caregivers shy away from freely sharing with them. The mentors also indicated that of the few girls who access information on sexual and reproductive health, they get it from their peers in the slum neighbourhoods, television and newspapers; however, this information is mostly incorrect and/or misleading.

On a positive note, a few adolescents reported receiving information from women leaders at the local council level, for instance, the Nabakyala (Secretary for Women on the LC1 committee). In addition, some adolescents reported getting this information from Village Health Teams (VHTs) and NGOs operating in the urban areas, for instance, UYDEL and Retrace, as well as churches and mosques.

Adolescents in urban areas suffer a high prevalence of physical and sexual violence: Data shows that about half (48.3 percent) of urban adolescent girls report experiencing incidents of sexual and physical violence (Figure 7). It is important to note that, while physical violence was reported prevalent among older girl adolescents aged (18-19) years, sexual violence is more common among younger girls (15-17) years. Just as is the case for the broader category of women, sexual and physical violence against adolescent girls is mostly perpetuated by caregivers and intimate partners at home. According to the key informant interviews with the GEG mentors, sexual violence against urban adolescents ranges from direct physical contact to unwanted exposure to sexual language and images on television, newspaper and other media, whereas physical violence mostly occurs in the context of discipline, as caregivers are reportedly trying to instil morals in adolescent girls.

There is a case where a mother was harassing her daughter, falsely accusing her of engaging in early sexual activity with old men. As a result, the girl was being compelled to engage sexually to show her mum that she was old enough. Relatedly, there was also another case where a girl was chased away from her home by the mother after accusing her of having a boyfriend. Fortunately, I intervened and resolved the conflict and the two are now friends— Peer mentor, Central division, Oct 2020.

Some adolescent girls are using body enhancement medicines to increase their body size figure, breasts and hips after seeing television adverts. In addition, these adverts were reportedly luring adolescent girls to engage in early sexual activity— Lead Mentor, Central Division, Oct 2020.

Figure 6 Knowledge and source of information on sexual and reproductive health for girls aged 15-19 (%)

<table>
<thead>
<tr>
<th></th>
<th>Boys</th>
<th>Girls</th>
</tr>
</thead>
<tbody>
<tr>
<td>Can male circumcision help prevent HIV infection?</td>
<td>28</td>
<td>46</td>
</tr>
<tr>
<td>Are there medicines that people with HIV or AIDS can take to help them live longer?</td>
<td>56</td>
<td>66</td>
</tr>
<tr>
<td>Can a mother with HIV or AIDS pass HIV to her unborn baby?</td>
<td>65</td>
<td>79</td>
</tr>
<tr>
<td>Can a healthy-looking person have HIV</td>
<td>61</td>
<td>79</td>
</tr>
<tr>
<td>Can a person reduce their chance of getting HIV by using condoms when having sex?</td>
<td>68</td>
<td>75</td>
</tr>
<tr>
<td>Can a person reduce their chance of getting HIV by not having sex?</td>
<td>68</td>
<td>75</td>
</tr>
</tbody>
</table>

Source: Authors’ computation based on Uganda Demographic and Health Survey (2016)
The poor and insufficient housing characterised by overcrowding common in urban areas heightens the risk of sexual violence among adolescent girls. For instance, key informant interviews revealed that in many households, children and adults are forced to live in close quarters. Sharing rooms or beds heightens risks of rape and defilements and sexual debut by their caregivers, relatives and strangers in their neighbourhood. In addition, poverty and economic deprivation in households force adolescent girls to engage in transactional and cross-generation sex. For instance, it was reported through the KIIs that adolescent girls in Kisenyi and Katwe slums were being lured into sex by married men to meet basic needs like buying sanitary pads. The situation of domestic and sexual violence was exacerbated by the COVID 19 crisis. The closure of schools meant the closure of virtual shelters/protection for adolescent girls that protect urban girls from sexual violence and other forms of domestic violence. Unfortunately, it was reported through the KIIs that local leaders have failed to address cases of sexual violence given that some are involved in promoting commercial sex trade of adolescent girls.

A girl (not enrolled in GEG programme) aged 16 years from Makindye was impregnated by a man from the community and consequently dropped out of school. The girl has now lost self-esteem and is ashamed of moving around the community and remains indoors – A lead mentor from Makindye division. Oct, 2020

During the lockdown, a 12 year old girl enrolled in the GEG programme reported being lured by a man in the community who kept seducing her into sex. He kept telling her that she had now grown to engage in sex and that her breasts had grown for sucking. Fortunately, the girl reported to the Local area chairperson who confronted the man - Peer mentor from Kawempe Division. Oct, 2020

There was a case of sexual violence in Kisenyi, where a rich man was reportedly hiring young adolescent girls to have sex with his dogs – a lead mentor Makindye division, Oct, 2020

A 14 year old girl is a bread winner in a household of three members in a family with her other two siblings (aged 9 and 7). The girl works for a neighbour who gives her a basket of sweet bananas to sell every day in exchange for food for her and the siblings. These three go hungry the entire day in case their neighbour does not give her bananas to sell in town - Lead Mentor Kawempe Division. Oct, 2020

A case study of a 10 year old adolescent girl from Banda, Nakawa Division who sells roasted maize in Banda suburbs the whole day, but she is not paid by her Auntie. There is another case of an adolescent girl who sells sweet bananas and is not allowed to eat some for her lunch. She stays on an empty stomach the whole day. The guardians/employers take stock of the total numbers sold and compare with inventory in the evening – A Peer Mentor Nakawa Division Oct, 2020

Majority of the adolescent girls in poor urban households face child labour challenges: According to the findings from the key informant interview, most urban adolescent girls in households plagued by abject poverty and deprivation are compelled to engage in income-generating activities by their caregivers to supplement the household income. Besides, there are cases of child-headed families where adolescent girls are the breadwinners and have to work hard to provide for the rest of the children due to death or critical illness of their caregivers. This situation of child labour even increased in the midst of closure of schools, where most adolescent girls were required to work in commercial activities to cope up with the economic hardships of the lockdown. The interviewed mentors estimate that about 70 percent of enrolled school-girls are involved in some form of paid work. These activities include; selling COVID-19 masks, sweet bananas, sweets and fish. Some work as housemaids, while others are hired daily to wash clothes. Unfortunately, most of them work under poor conditions and hardly get food during their work. Others are denied their pay after working, especially those that wash clothes in better-off households.

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The dreams and inspirations of urban adolescents are shaped by their family backgrounds and neighbourhoods. According to the KIIs with mentors, the future aspirations of the girls enrolled in programme are impacted by their immediate environment (the people and peers they live with, and the places where they reside). Notably, mentors stressed that while some in-school girls that interact with successful people have big dreams of growing up to become doctors, teachers, nurses, pilots and others, the majority of those that live in slum areas aspire for odd jobs such as artists, cleaners, bouncers and DJs in night clubs (unfortunately these jobs in the slums are associated with high dependency on drugs, theft, sexual abuse and poverty and deprivation) because that’s what their
caregivers in those places do. It is important to note that the key informants signaled that most out-of-school girls in the programme are highly interested in going back to school, however, it was unearthed that these girls lack role models or people to look up to in their communities.

Furthermore, many of the girls in the GEG programme are exposed to drug addicts and prostitutes in their neighborhood, who make money through commercial sex trade, robbery and other acts of mischief, and their limited exposure to positive role models can have a negative effect on their future outlook on life. Children’s dreams and aspirations are also affected by their primary caregivers, and if the adults in the household attended little or no school, it is likely that they will discourage the girls from continuing with their education, and instead encourage them to start working at an early age.

**Social protection interventions, such as the GEG programme, are key to mitigate risks faced by urban adolescent girls:** In view of the above challenges faced by urban adolescent girls, social protection programmes, such as GEG, are indispensable to building individual and household resilience to shocks through improved household income and access to basic and social services. Specifically, KIIs revealed that the GEG programme had uniquely helped beneficiaries in the following ways:

- **Mentors provide referral to health and relief services to project beneficiaries:** The key informant interviews further revealed that mentor referrals helped GEG girls to identify relevant services to address their needs, which included the government’s food distribution during the pandemic. Relatedly, mentors kept in touch with the girls even during the lockdown and thus provided emotional and social support to the families.

- **Mentors act as role models and advocates for the enrolled girls:** During the interviews, it was noted that most girls had a close relationship with their peer mentors as these are a source for inspiration to live better and dignified lives in future. Since peer mentors are educated (graduates), these adolescent girls believe that it is possible for them to emulate their mentors and be successful in life, an opportunity that non-beneficiaries do not possess. It was also reported that some mentors were mediators between the girls and their parents in times of conflict. This helps the girls to relate with their parents/guardians instead of running away from home.

- **The cash transfers provided reduce poverty and economic vulnerability:** Mentors reported that GEG participants fared better than their peers at the onset of the COVID-19 pandemic. Notably, the majority of GEG households’ income came from the informal sector, which was immensely affected by the pandemic, and the non-contributory direct income support provided a cushion to weather the shock.

- **The GEG programme is promoting systems strengthening of government existent structures:** The programme interventions such as the service referrals provided by mentors to the adolescent girls help them access services provided by the Government (KCCA) through the already existing structures. This helps in enhancing the effectiveness of these systems to deliver services not only to the project beneficiaries but also the entire population.

A caregiver was quoted as saying “We felt so much valued and loved during the lockdown that someone out there was caring, that we were struggling during the lockdown. We are so grateful to the GEG programme” - A Peer Mentor, Makindye Division. Oct, 2020

We used to hold virtual sensitization sessions with the enrolled girls on how to keep them and their household members safe amidst the COVID 19 pandemic through weekly or bi-weekly calls although there were few cases of referrals due to face to face restrictions presented by the COVID 19 pandemic- A peer mentor, Kawempe division, Oct 2020

**Conclusion**

Urban adolescent girls disproportionately shoulder the burden of poverty and have limited access to social services, which affects their safe transition to adulthood. Specifically, these girls face multifaceted challenges that range from early school dropout, to domestic and sexual violence, poor sanitation, limited knowledge of reproductive and sexual health, and poor housing conditions, which exposes them to risks of rape and early sexual activity. Moreover, these challenges were exacerbated since the onset of the COVID-19 pandemic and its subsequent disruptions, such as the school closure and a two-month lockdown. For instance, school closure grossly heightened the risks of long-term school dropouts, while the lockdown saw many caregivers losing jobs and slipping deeper into poverty. On a positive note, the GEG programme helped to mitigate adverse impact of the COVID-19 pandemic on the programme beneficiaries. The provision of cash transfers helped girls’ households access basic needs such as food and rent during the pandemic, while mentors provided referrals and support through phone-based mentoring throughout the pandemic.

**Policy Recommendations**

- Prioritize gender-responsive and age-sensitive social protection programmes: There is a need to design and implement transformative social protection programmes that explicitly respond to adolescent- and gender-specific vulnerabilities, as well as the unique challenges of adolescents living in urban areas. To capitalize on existing social services such as education, health services and livelihood programmes,
for instance, social protection programmes adopting a “cash plus” modality could go a long way in addressing social and economic exclusion more comprehensively.

- **Engage parents and community leaders to tackle age-and gender-based violence:** There is a need to sensitize community leaders and community members through dialogues on the prevention of sexual and physical violence against women and children. Community leaders and parents can act as champions of change, to advocate against domestic violence, and to advocate for gender equality, particularly through access to education and health services.

- **Provide vocational and economic programmes designed for school dropouts:** Vocational training centres established for early school drop-outs can provide courses like tailoring, hairdressing, Information Technology (IT) training, stove making, weaving, and arts and crafts, to support young people with income-generating skills and opportunities. Those should be tailored to employment and/or entrepreneurial opportunities in urban environments, which would provide safer sources of income when compared to urban activities, such as hawking food late at night or commercial sexual activity.

- **Strengthen enforcement of prohibitive laws against domestic and sexual violence:** There is a need to strengthen public and private institutions and stakeholders to be responsive to acts of physical and sexual harassment of urban adolescent girls. This can include local councils, police, the Judiciary, and NGOs fighting violence against girls and women. Furthermore, there is a need to ensure comprehensive coverage of social care and support services, which is a key pillar of social protection, and was noted in the 2019 Social Protection Sub-Sector Review as having significant challenges in investment and coordination.

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