Adolescent parents affected by HIV and their children are a critical and growing population that need more support if we are to end AIDS and achieve many of the Sustainable Development Goals. Prior to the COVID-19 pandemic there were an estimated 11.4 million adolescent mothers in sub-Saharan Africa. Anecdotal evidence suggests that this figure is now far higher.

These girls and young women, and their children, are at greater risk of HIV infection as well as poverty, violence, exclusion, poor education, and early childhood developmental delays that limit generations across a lifetime. Stigma and discrimination prevents them from accessing HIV, health, education and other services, and causes them to be rejected by their own families and communities. Young fathers are also a critical population that is often left behind. They too face challenges, and play a vital role in addressing those faced by young mothers and their children.

The following recommendations set out how to address the needs of adolescent parents affected by HIV, and their children. They are based on scientific and programatic evidence. And were created with young mothers across Sub Saharan Africa as well with global thought-leaders across a range of disciplines - from HIV, sexual and reproductive health, early childhood development, poverty reduction, rights, gender, exclusion and mental health (see full list in Annex). For more information please visit: bit.ly/YoungFamiliesFirst
We can and should start now to deliver change for adolescent parents affected by HIV and their children. This is a transformative issue that cuts to the core of gender equality, human rights, and the rights of the child, while also obliging sectors to work together in new ways. Achieving change will take time and therefore requires political and donor leadership.

**Adolescent mothers and their children are a vast and growing population being left behind.**

Both mothers and children are more vulnerable to HIV, delayed early childhood development, gender inequality, poverty, violence, exclusion, and poor health and education—all of which limit generations across a lifetime. Despite this, they are underserved; with many too far away, too poor, too stigmatized and discriminated against, and too mentally or emotionally distressed to access services or remain in care.

**COVID-19 exacerbates the challenges they face.**

The economic hardship and service disruption caused by COVID have pushed many adolescent parents and their children into extreme hardship. Lockdowns are also allowing rape and abuse to occur behind closed doors with limited ability to seek help or escape unsafe situations. Anecdotal evidence suggests a sharp rise in early and unintended pregnancy, including due to rape.

**Adolescent mothers and their children face a double burden of stigma.**

Stigma associated with HIV is compounded by entrenched stigma surrounding young motherhood itself. Many adolescent mothers and their young children are rejected by their families, communities, schools, clinics, and other service providers.

**Harmful traditional practices and social norms deny them access to information and support.**

This includes practices and norms associated with contraception, female genital mutilation, child marriage, gender inequality, and toxic masculinity.

**A holistic approach that addresses the comprehensive needs of adolescent mothers and their children together is more effective, feasible, and affordable.**

The days of working in siloed sectors are over. We must use a tailored, integrated program to combine services and support for HIV, health, education, protection, poverty, gender, and other areas. Mental health, in particular, requires far greater attention. We must support all adolescent mothers in areas with a high burden of HIV infection, not just the people already living with HIV. Any service reaching an adolescent mother and child is a window to provide this holistic support.
TAKE ACTION

DONORS MUST:

- Give priority to adolescent parents and their children in donor strategies, programs, and indicators across a range of outcomes; encourage all grant applicants to consider what role this population has in its proposed program; and support further research, communication, and youth-led campaigns targeting this population.
- Make funding more accessible to small, community-based organizations by creating special funding structures for them that enable greater flexibility in allocating funding.
- Allocate a percentage of all investment towards indirect resources to enable grant recipients to build the system around multisectoral integration and to put money aside for when the intervention transitions to being locally resourced.
- Make multisectoral collaboration a donor requirement, for example, in funding applications and progress indicators.
- Support the voices of adolescent parents and their children in decision-making shaping policies and programs.

GOVERNMENT'S MUST:

- Champion an enabling environment for adolescent parents affected by HIV and their children, with strong laws and policies that promote and protect their human rights and tackle harmful norms, practices, stigma and discrimination associated with them.
- Ensure laws and policies support pregnant girls and adolescent parents to complete their education. Schools must be welcoming and safe. And the children of young parents need quality subsidized childcare.
- Support the participation of adolescent parents and their children in decision-making at all levels - from community meetings to national country coordinating mechanisms.
- Provide adolescent parents and their children a comprehensive package of integrated services and support on HIV, health, education, justice, and social protection. E.g.:
  > Financial support and economic empowerment
  > Maternal and child health services
  > HIV prevention and treatment
  > Mental health support for early childhood development and positive parenting
  > Support to prevent and respond to intimate partner violence

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Support should be delivered in various settings across sectors and go beyond the health center, including to rural areas. It should be friendly and welcoming, and carried out in partnership with adolescents and young people.

Improve the coordination of support and information on adolescent parents and their children—both across sectors and between clinics and communities. This includes sharing data more systematically between stakeholders.

Disaggregate data between 15–19 and 20–24 years old, and use this to increase visibility, improve programming, and strengthen accountability for adolescent parents. This could include a scorecard, national index, and other tools. It may require changes to ethical guidance and consent laws to enable adolescents to report on their needs more effectively.

Empower girls and young women to avoid early and unintended pregnancy. Educate children and adolescents about sexuality and gender equality. Make contraception and information readily available. Tackle harmful practices and social norms that reinforce early and unintended pregnancy, violence, and early and forced marriage.

CIVIL SOCIETY MUST:

- Support the meaningful participation of adolescents and young people at every stage. This includes:
  - Supporting them to design and deliver services, communication strategies and other activities led by adolescents and young people.
  - Helping them monitor and report on the implementation and quality of services and policies.
- Promote the design and implementation of multisectoral approaches around adolescent parents affected by HIV and their children. This includes reviewing current programs, strategies, and policies and identifying gaps and priorities for each context.
- Champion collaboration, learning, and sharing between sectors, stakeholders, and settings on adolescents parents affected by HIV and their children.
- Tackle stigma surrounding adolescent parents affected by HIV and their children at all levels and in all forms, including using the People Living with HIV Stigma Index as a tool for engaging faith-based organizations.
FAMILIES AND COMMUNITIES MUST:

- Value adolescent parents and their children as part of the family and community. Include them in all aspects of family and community life. Respect them. Show them love, and nurture them along with all children, adolescents and young people.
- Empower adolescent parents to achieve their full potential. Provide them with the financial means, childcare and encouragement to stay in school.
- Ensure that their children have a strong start in life. Educate adolescent parents on positive parenting and nurturing care. Support their children to receive vaccinations, nutrition, early learning and other supports essential in pregnancy and childhood.
- End violence against girls and young women. Champion positive gender norms that promote equality and respect amongst girls and boys, men and women. Protect them from violence and abuse. Support adolescent parents to thrive in a safe family environment, without fear of early or forced marriage.
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For more information see: https://apps.who.int/iris/handle/10665/332160

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