



Encouraging Child Mothers to Return to School: Rapid Review of the Literature

Informing specific decisions with rigorous evidence— Designing and analyzing decision focused evaluations

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Table of Contents

Executive summary	4
Introduction	5
School Re-entry Policy for Girls (1994)	5
National School Re-Entry Guidelines 2020	6
Literature Review	6
Implementation of the School Re-entry Policy of 1994 in Kenya	7
National School Re-Entry Guidelines (2020)	9
Outcomes for Interventions for Return to School outside Kenya	10
Recommendations	11
References	14

Executive summary

Each year 13,000 girls drop out of schools in Kenya due to pregnancy (APHRC, 2020). To address this problem, the Kenyan government created the School Re-entry Policy for Girls in 1994, and followed up with the National Guidelines for School Re-Entry in Early Learning and Basic Education in 2020. This review aims to 1) identify the challenges faced in implementing the School Re-entry Policy in Kenya, 2) examine evidence-based interventions that have supported girls in returning to school, and 3) provide recommendations to address these implementational challenges.

In this rapid review of the existing literature we cover seven research studies that discuss challenges with the implementation of the School Re-entry Policy in Kenya. In summary, they highlight the following barriers to re-entry for girls: a lack of awareness of the policy, stigmatisation by girls' colleagues and teachers (Omwancha 2012, Mwenje 2015, and Undie et al 2015); no resource allocation to schools to implement the program (Mwenje 2015); low parental involvement in the readmission process (Wekesa 2014); and lack of clear guidelines from the government on how to implement the policy (Mutua et al, 2019, Mwenje 2015, Omwancha 2012); unavailability of child care facilities, and families' financial constraints to send their children back to school (Mwenje 2015, Undie et al, 2015). In addition, we discuss some interventions that have been carried out to help girls return to school outside of Kenya. Due to a lack of rigorous literature in a similar context, the reviewed literature is based on studies located in the US, may be outdated, and does not always meet rigorous methodological standards. Nevertheless, we view this evidence as suggestive.

Based on the evidence covered in the literature, the review provides the following recommendations to The Ministry of Education to address the difficulties it has faced in implementing the School Re-entry Policy: i) Make additional resources available to schools for the provision of free childcare, and guidance and counselling services in order to support child parents; ii) Develop and apply standards and systems of monitoring and evaluation to ensure the proper implementation of the School Re-entry Policy and protect teen mothers' right to education; iii) Create awareness of the policy in the community and run a sensitisation drive for parents, students and teachers alike; iv) Provide cash transfers to teen mothers to keep them in school.

1. Introduction

Childbearing during adolescence negatively affects educational outcomes for girls as they are more likely to stop going to school (KDHS, 2014). Globally, an estimated 15% of girls give birth before their 18th birthday (UNICEF, 2021). Every day, 20,000 girls below age 18 give birth in developing countries, and about 19 per cent of young women in developing countries become pregnant before age 18. Girls under 15 account for 2 million of the 7.3 million births that occur to adolescent girls under 18 every year in developing countries (Williamson, 2013). In Kenya, nearly one in five girls between the ages of 15 and 19 are pregnant or have already had a baby (KDHS, 2014), and each year 13,000 girls drop out of schools in Kenya due to pregnancy (APHRC, 2020).

Children born to teenage mothers often have poor outcomes—poorer health, less schooling, and lower earnings in adulthood. According to Lenhardt, et al., 2016 “the children of uneducated mothers are more than twice as likely to die or be malnourished than the children of mothers who have secondary or higher education”. Being pregnant as a teen is also correlated with poor social and economic prospects for women, potentially negatively affecting their educational and economic opportunities. Odimegwu & Mkwanaenzi 2016, found that teenage pregnancy was associated with family disruption, community-levels of female unemployment and community poverty in Southern and East Africa.

When girls and women are educated, their children are more likely to survive and to be healthier because these mothers become aware of the importance of better nutrition, immunisation and health care and the importance of an education (UNICEF, 2018). The Kenyan government has signed international and regional declarations guaranteeing the right of all children to attend school. The Kenyan constitution emphasises that each child has a right to free and compulsory basic education. To this end, it states that the Government shall take measures to ensure that the youth can access relevant education and training. In addition, minorities and marginalised groups (which includes teen mothers) have a right of access to special opportunities in education (Government of Kenya, 2010). In 1994, the School Re-entry Policy for Girls (hereafter School Re-entry Policy) was introduced, and its aim is to ensure a pathway back into education for girls who become pregnant while at school.

1.1. School Re-entry Policy for Girls (1994)

The Constitution of Kenya (2010) provides that every child has a right to free and compulsory basic education, and that the state shall take measures, including affirmative action programmes, to ensure that children access relevant education and training. In 1994, the Kenyan Ministry of Education created the School Re-entry Policy for Girls, to address educational challenges that pregnant teens and adolescent mothers face. This policy document has not been widely disseminated, and as a result all information on its contents is from secondary sources.

The policy states that:

- Pregnant teen girls should be “admitted to school unconditionally or be admitted to a different school if there are issues of stigma in their former schools”. (Mutua et al., 2019).
- Head teachers and other teachers need to be understanding when handling cases of teenage mothers,
- Legal action be taken against adults who impregnate teens while teen fathers receive counselling.
- Teen mothers and other girls in the school receive counselling on risky sexual behaviour, negative peer influences and building self-confidence and self-esteem.

Despite the mandate, the literature review shows that implementation of this policy was largely at the discretion of head teachers as there was no sufficiently detailed policy implementation guideline to guide the process (Birungi et al., 2015). They did not provide guidelines, for example, on the steps that should be taken when it is discovered a girl is pregnant, how long she should be able to stay in school while pregnant, how long after birth she should be able to return to school or how to re-integrate teen mothers into school (Omwancha, 2012).

1.2. National School Re-Entry Guidelines 2020

The National School Re-Entry Guidelines were released by the Ministry of Education in 2020, and were designed to facilitate and formalise re-entry into learning institutions for learners who dropped out of school for various reasons, including learners with special needs and disabilities. While it focuses on a wide range of causes of dropouts, it restates the provisions in the Re-entry Policy for girls and plugs some loopholes in the policy by including specific recommended activities such as sensitisation of learners, parents/guardians, and the school community. In addition, it advises that teen mothers be readmitted to the same class they were enrolled in before they left school to reinforce the material they learned while pregnant and avoid them falling behind (Ministry of Education, 2020).

2. Literature Review

In this rapid review of the literature, we scrutinise the School Re-entry Policy for Girls (known as the “Return to School Policy” of 1994) and the National Guidelines for School Re-Entry in Early Learning and Basic Education from 2020 (hereafter National School Re-Entry Guidelines). We assess evidence from both published and grey literature in order to identify the implementation challenges associated with Kenya’s School Re-entry Policy, best practises, and propose data that could be collected to facilitate monitoring and measurement of the policy’s effectiveness. Finally, due to a scarcity of rigorous evidence on the topic, we cover the results of one RCT, a pre-post study, a systematic review and a cross-sectional study to understand the effectiveness of encouraging teen parents to return to school. We did not attempt to undertake a systematic review of the literature, but rather present the available literature identified along with recommendations.

2.1. Implementation of the School Re-entry Policy of 1994 in Kenya

Studies covered in this section identify key implementational gaps in the School Re-entry Policy amongst various communities in Kenya.

A qualitative study by Mutua et al. 2019, assessed the extent to which the School Re-entry Policy has been implemented in Narok County, Kenya. Individual interviews and focus groups were conducted in two schools where the School Re-entry Policy has had differing impacts. They sampled 24 students from each school (ages 13-19), and the focus groups consisted of boys; non-pregnant girls; and pregnant and mothering girls. The policy provides for unconditional readmission, i.e. that all teen mothers of school age should be allowed to return to school. However, the study found that whether it is implemented at all, and how it is implemented depends on head teachers. The authors also found that the policy does not take into consideration the amount of time lost while out of school, making it difficult for teen mothers to catch up upon their return to school. Amongst schools that choose to readmit girls, the authors find that counselling was only provided to females (teen mothers and others), and was about sexual and reproductive health which further increases the burden placed on young women in terms of safe sexual practices. In addition, it found that while some schools were open to admitting teen mothers de jure, in actuality, they discriminated based on their apparent academic and sporting abilities. The authors also noted that the policy has some vague provisions which are subject to disparate interpretation and implementation. For example, the policy states that head teachers and other teachers should be 'understanding' when handling cases of teen pregnancy and motherhood. However, 'understanding' can be interpreted in different ways, thus making it difficult to keep head teachers accountable for how they implement the policy.

Mwenje 2015 investigated factors that influence the implementation of the Re-entry Policy in Nakuru County, Kenya. Interviews were conducted in 8 schools with 225 respondents which included the County Director of Education, Assistant Education Officers, headteachers, teachers, parents, and male and female students (including teen mothers). Mwenje found that there was a non-universal level of awareness of the policy amongst students, with only half of the students aware of the policy. Respondents felt that girls also failed to return to school because of the stigma attached to being a teen mother, and their apparent lack of chastity. In addition, key stakeholders in the implementation of the policy claimed that the policy did not make provisions for financial and human resources to help in readmission of teen mothers. For example, one teacher remarked that *"the counsellors are few because the Teachers Service Commission (TSC) does not employ guidance and counselling teachers. They employ teachers and give them a full teaching load which leaves little time for counselling"*.

Omwancha 2012, carried out interviews amongst Ministry of Education (MOE) officials, headteachers, current students, teenage mothers, and parents. The study revealed that teachers and head teachers had conflicting views on the policy, and noted a lack of awareness of the policy. For example, one head teacher warned against a wide dissemination of the policy because “...if you go ahead and tell that now is official you can become pregnant and stay in school we will have so many cases [of pregnancy]...” Another head teacher lamented that “...It’s a policy on paper and nothing else... how to pass the information is important we should be taught. All the stakeholders in fact including these students [should be taught]...” Apart from this lack of awareness and understanding, Omwancha also found that cultural factors often prevented girls from returning to school. Teen mothers were stigmatised as immoral and a disgrace to their community, and their colleagues and teachers were less willing to help them catch up in school. The evidence of lack of community support can be seen when in an interview one parent said “*The policy should be in such a way such that it instils fear among girls not to be pregnant so that they know if they get pregnant there is a punishment waiting for them. There should be a sentence for those girls who get pregnant*”.

Onyango et al. 2015 conducted a survey in Kisumu County, Kenya which targeted 15 primary schools and comprised class seven and eight pupils, teachers, parents and education officers. The study found that certain socio-cultural factors influenced the ability of teen mothers to return to school. These include, gendered customary practises and widespread poverty in the area. Fearing that young mothers were more likely to get pregnant again, parents married teen mothers off to prevent further shame. They also found that teen mothers from poorer households were less likely to return to school. Like Omwancha 2012, and Mwenje 2015, the study concluded that the stigmatisation of teen girls by teachers, pupils and other parents demotivated girls and undermined their re-entry into school.

Undie et al. 2015, conducted a study which aimed to 1) document dropout rates and reasons for dropouts among teenagers and 2) conduct a pre-post evaluation of an interactive radio campaign to raise awareness about the School Re-Entry Policy in two constituencies in Homa Bay County, Kenya. In the baseline survey, they provide context for the dropout rate of teen mothers, and to understand teachers’ and head teachers’ attitudes and intentions around school re-entry, as well as their awareness of policies to promote re-entry. They surveyed out-of-school teenage girls (regardless of whether they had ever been pregnant or not), teenage mothers and their household heads; as well as teachers and students in school. In a survey of 728 girls out of school, they found that 66% dropped out due to pregnancy. A third of girls who dropped out reported that they were married as a result of their pregnancy, and marriage further reduces the likelihood of returning to school. 74% of girls who dropped out due to pregnancy claimed they did so because they felt that school was an unwelcoming environment for them. In addition, poverty and a lack of adequate child care services were impediments to girls returning to school. In the

endline survey, Undie et al. 2020, found an increase in awareness of the School Re-entry Policy amongst students. At endline, 72% of teenage girls were aware that pregnant girls can remain in school, compared 64% at baseline ($p < 0.05$). Likewise, 81% of household heads were aware that pregnant girls can remain in school, compared 65% at baseline ($p < 0.001$). However, financial constraints and lack of child care provisions remained barriers to girls re-entering school.

Wekesa 2014, undertook a study to determine the quality of the implementation of re-admission policy in secondary schools, the involvement of teachers and parents in the re-admission process, the academic performance of student mothers upon reentry, and challenges experienced by schools and student mothers who return to school. The study had a sample size of 774 respondents and included principals, teachers and students. Results showed that just under half (44.1%) of student respondents were aware of re-admission policies in their schools. It also found that implementation of the policy was uneven across schools as some principals and teachers worried that the readmission of teen mothers into their schools would negatively affect their reputations and teen mothers could set bad examples for other students. However, using DHS data from 9 African countries, Evans and Acosta 2020, found that allowing girls to have been pregnant to return to school is unlikely to increase fertility rates among school girls. This suggests that school leadership has a misconception about the effect of teen mothers on other students.

Kurgat 2016, found that the availability of a guidance and counselling department, the willingness of the head teacher to readmit teen mothers and material support (provision of free textbooks, and learning materials) determine the rate of return to school of teen mothers in Baringo County, Kenya. Head teachers, counselling teachers, and girls were interviewed. Findings from this study indicated that over 53% of students believed that counselling programs for teenage mothers provided them with psychosocial support, enhanced their wellbeing and hence was crucial in keeping them in school.

2.2. National School Re-Entry Guidelines (2020)

Though the National School Re-entry Guidelines were released in 2020 (after a majority of the studies in the preceding section) to clarify the implementational recommendations of the policy, the issues raised by the studies in this review persist. Like the School Re-entry Policy, the guidelines focus on providing access to school for teen mothers, but do not consider how conducive to learning the school environment will be for these girls. It does not include any provisions for childcare while mothers are at school, nor does it consider teen fathers who may have had to drop out of school to provide for their new families. In addition, the guidelines were created by the Ministry of Education in partnership with UNESCO, UNFPA, Population Council and Sexual Reproductive Health and Rights Alliance (SRHR) (Ministry of Education, 2020), with no mention of the stakeholders who are responsible for the implementation of these guidelines (teachers and head teachers). According to Omwanicha, 2012 these stakeholders were left out of the

initial policy making process which potentially led to reduced knowledge and support of the policy. Finally, with regards to monitoring and evaluation, while the guidelines call for collecting re-entry and drop-out data (Ministry of Education, 2020), it does not stipulate how often the data should be collected, or where the data should be submitted.

2.3. Outcomes for Interventions for Return to School outside Kenya

Effects of Interventions to Encourage Teen Mothers to Return to School on Educational Outcomes outside Kenya

There is a dearth of rigorous evidence on interventions that have worked to get teen mothers back to school in Kenya. There is some limited suggestive evidence outside of Kenya, however it is primarily from the US and is outdated. The studies in this section provide evidence for the use of holistic intervention services (an RCT by McDonnell et al., 2007), provision of childcare services to support teen mothers while they go to school (Crean et al., 2001 & Williams and Sadler 2001), and refraining from a one size fits all approach (Steinka-Fry et al., 2013).

McDonnell et al., 2007 conducted a randomised controlled trial of an intensive intervention for low income pregnant and parenting teens in rural South Carolina, USA. The study randomly assigned 107 teens to the treatment group and 90 teens to the control group. Over the course of 24 months, teens in the treatment group received services which included: case management, support groups, family group decision making, life skills education and training, and leadership development, and data were collected at baseline and 6-month intervals over the course of the intervention. They found that teens in the control group were 19% less likely to have received a diploma than those in the treatment group.

Using 15 studies based in the US, Steinka-Fry et al., 2013, conduct a systematic review and meta-analysis of the effects of school dropout programs for pregnant and parenting teens. They found that dropout programs were effective in increasing the enrolment and decreasing the dropout rates of teen mothers. In addition, they found that RCTs and matched-research designs had smaller effect sizes than non-RCTs and non-matched designs, while higher levels of implementational quality were correlated with larger effects. The authors find that implementation quality of a program makes more of a difference than the program strategy chosen. As a result, rather than focusing on which type of program or strategy is chosen as an intervention, the authors recommended considering the fit of services with local needs, program costs and the capacity of program providers when choosing programs to implement.

In a pre-post study, Williams and Sadler 2001, examined the effects of an urban high school-based child care centre on parenting teens and their children enrolled during 1995-1998 in New Haven, Connecticut.

Parents in the study were 17 years on average, female and African American. Students using the services showed an improvement in their overall grade point average, and 100% of them were either promoted to the next grade or graduated from high school. None of the students experienced repeat childbirth while they were enrolled. In addition, 90% of children were up to date with paediatric health visits and immunisations. Crean et al. 2001, also examined the effects of the school-based Early Childhood Centres for Children of Teen Parents Program in New York State¹. This program was designed to provide childcare services such as free on-site child care for infants and toddlers, parenting classes, and referral to other service agencies for urban young mothers in school. Participants were chosen via an application and interview process. Controlling for pre-program differences, the study found that mothers who participated in the program had better school attendance than non-participating mothers. In addition 70% of participants graduated as compared to 28% of non-participants. However, due to the design of the program, the study is at a risk of being biased, as the authors would not have been able to control for unobserved differences between program participants and girls in the control group.

3. Recommendations

This review aimed at identifying best practices in encouraging teen mothers to return to school, and gaps and challenges in implementing Kenya's School Re-entry Policy. The following recommendations are gleaned from the literature assessed in the review and should help to secure greater life outcomes for teenage mothers and their children.

1. Additional resources to schools for supporting child parents:

- a. **Guidance and Counselling services should be made available to teen mothers in and out of school and should involve teen fathers and parents where possible.** The National School Re-Entry Guidelines recommend counselling for teen parents however this counselling is solely with regards to their new responsibilities as parents. Teen mothers experience turmoil as a result of the physical and social changes they experience by becoming mothers. Receiving counselling support can help them to address difficult thoughts and feelings that may emerge from stigmatisation by their peers and teachers in school, and disappointment from their parents. Support from guidance counsellors in schools can help to rekindle career goals for teen parents and chart pathways for them to achieve those goals. Teen fathers and parents should also receive support to help them cope with the changes occurring in their lives and guidance on how best to support these new mothers

¹ This study compares outcomes of the treatment and control groups at the end of the program. They use archived school record information to control for observable differences between the two groups before the intervention.

awareness, there should be clear pathways for child parents and their families to seek support if individual schools do not honour the provisions laid out in the policy. This includes providing information about whom to contact in order to escalate issues to the Ministry of Education with protection to the minors involved.

- b. Storytelling through the use of edutainment should be to create awareness of the school re-entry policy and to provide life aspirations for teen mothers.** Banerjee et al. 2018 found a positive effect of an edutainment TV show on knowledge about HIV. They argued that the effects of the show were linked to how involved and engaging the narrative was. A captivating narrative should be used to show teens and members of the community that there are options for teen mothers beyond marriage once they become pregnant
 - c. Parents' school meetings can be used as forums to raise awareness** amongst parents about the School Re-entry Policy. Doing so can also help to keep schools accountable as parents can request information about implementation fidelity.
- 4. Cash transfers should be provided to teen mothers to keep them in school** (Austarian, 2020; Baird, 2010; Barham, 2019). Teen mothers face the new costs of taking care of their babies, which increases financial strain on their households. Providing them with cash transfers may prevent girls from getting married with the hope of financial stability, and can keep them looking for work instead of going to school.

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