

The Impact of COVID-19 on Adolescent Girls and Young Women and Needed Responses



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AGAINST AIDS,
TUBERCULOSIS
AND MALARIA

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The COVID-19 pandemic and its consequences acutely harm adolescent girls and young women (AGYW), who are a vulnerable population in all health matters, and are particularly impacted by HIV/AIDS, TB and malaria. The pandemic is exacerbating existing issues that AGYW face in receiving adequate healthcare and causing them to be disadvantaged economically, socially and physically. Throughout the COVID-19 pandemic, many women and girls have remained at home, away from work and school, and without sufficient resources to lead healthy and independent lives.

Vast numbers of AGYW face an increased burden of [domestic care](#); a heightened risk of [child marriage](#) and [female genital mutilation](#); and [extensive job loss](#), particularly in the informal sector. Although these consequences are felt across the world, AGYW in low-income countries, fragile states, ethnic minority groups and environments where women have limited rights are particularly vulnerable.

The [Global Fund to Fight AIDS, Tuberculosis and Malaria](#) (Global Fund) is an international partnership working with other governments, the private sector, civil society groups and bilateral partners — such as the U.S. [President's Emergency Plan for AIDS Relief](#) (PEPFAR) — to end the world's deadliest infectious diseases. The Global Fund and PEPFAR, among other programs, have invested a total of [\\$200 million](#) for initiatives to help mitigate the impact of these epidemics on AGYW. US investments have been strategically allocated towards programs tailored to aid AGYW like the [Global Fund's HER](#)

[initiative](#), a program that offers small grants to empower AGYW while reducing HIV infection rates in sub-Saharan Africa. To mitigate the effects of COVID-19 on women, the Global Fund has adapted its response. For example, it has invested money in [Uganda](#) to strengthen health systems and change service delivery models for HIV-positive mothers and pregnant women to ensure the continuation of lifesaving programs and delivery of antiretroviral treatments during COVID-19.

These responses address how pandemics — and disease in general — continue to hinder women's (1) access to healthcare, particularly in lockdowns, (2) economic security and (3) education. Actions must be taken to ensure that AGYW do not continue to be disproportionately impacted by pandemics or other health issues,

Access to Health

Global lockdowns to mitigate the spread of COVID-19 prevent young women from accessing health services. [Research](#) from Johns Hopkins Bloomberg School of Public Health predicts that the most severe scenario will include an additional 56,700 maternal deaths in 2020 from indirect effects of the pandemic. During the Ebola outbreak there were drastic declines in facility-based birthing in parts of Africa and similar trends are now

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occurring in places such as [India](#) and [Nepal](#) due to the COVID-19 outbreak. This trend of at-home births increases both child and maternal mortality risks. Additionally, women [disproportionately](#) struggle to access healthcare. Essential medications such as [contraceptives](#) and [antiretroviral therapies](#) are harder to access when clinics are closed, supply chains are disrupted and travel is limited. [In Uganda](#), lockdowns and nationwide travel bans in response to the pandemic created food shortages and greater barriers to access health services that have made it more difficult for HIV-positive women from continuing to take their necessary medications. [Research from UNICEF](#) also points to COVID-19 creating immense risks for the 4.2 million children, adolescents and pregnant women living with HIV globally who require uninterrupted access to life-saving treatment, with 89 percent living in sub-Saharan Africa. Discrimination against vulnerable populations of women such as sex workers, LGBTQ+ women, migrants and ethnic minorities further curbs access to healthcare; during pandemics, the unique needs of vulnerable women are often neglected in response strategies.

Economic Security

Pandemics and other health issues drastically exacerbate AGYW's existing challenges in attaining economic independence and security. Worldwide, women perform [75 percent](#) of unpaid or informal sector work, are overrepresented in [low-paying jobs](#) and make [77 cents](#) for every dollar earned by men. The gap widens for women of color, immigrant women and mothers. For example, women are losing more jobs due to COVID-19 shutdowns than men (such as in [India](#)) and have also taken up more unpaid, domestic work since the lockdowns began. It is estimated that during the first month of lockdowns in Africa, [80 percent of incomes from the informal work sector were lost](#) — most

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largely impacting women employees. Women also bear most of the burden of household economic strains caused by pandemics, such as facing food insecurity.

Pandemics, like COVID-19, challenge AGYW's economic security by: (1) [reinforcing women's domestic roles](#), which depresses or prohibits their economic participation; (2) [restricting women's access to family planning](#), which is vital for women's ability to advance economically, given the overlap of reproductive and economically productive years; and (3) disrupting women's participation in the formal economic sector via lay-offs, reinforcing women's reliance on the informal sector for work. In addition to COVID-19 disruptions, women face an increased economic impact due to other diseases, including malaria. Malaria has an [enormous impact](#) on childhood mortality in many developing countries where fertility rates are high. Many women in these settings spend a lot of their economically productive years pregnant or caring for infants, which limits their capacity to work. To achieve gender parity in the labor force participation rate, women's health must be prioritized. This achievement would cause the global GDP to increase by [\\$28 trillion](#), or 26 percent, above the current level.



Education

Disruption of education around the world due to COVID-19 lockdowns disproportionately harms female students, who already struggle to receive uninterrupted and complete education. In fact, only [66 percent](#) of countries have achieved gender parity in primary education. COVID-19 has worsened this gap by causing many girls to halt education or fully drop out of school. In some cases, this discontinuation will be permanent. It is estimated that shutdowns have caused [111 million girls](#) in the world's least developed countries to be forced out of school since March. And, disparities are even larger in sub-Saharan Africa. This region includes 13 out of the 15 countries in the world where [more than 30 percent of primary school age girls are out of school](#).

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When girls drop out from school permanently, their risk for domestic violence and childhood marriage increase, while their chances at achieving economic independence and having control over family planning fall. Education is a major protective factor in women's health. In addition, once a girl is married, she is unlikely to continue her education. A mother's level of education is highly correlated with both [her own health and the health of her children](#). If AGYW are able to remain in school during a pandemic, they tend to experience greater challenges to learning at home than their male counterparts, due to lack of necessary resources and [technology](#) and increased [domestic responsibilities](#), such as cooking and cleaning. [Educational subsidies](#) provided through the [PEPFAR DREAMS](#) program as well as over [\\$35 million](#) in investments for girls' sexual health education from the Global Fund demonstrate the effective use of U.S. funds to protect the health of AGYW through education. This educational focus is one of the reasons that, despite girls still being disproportionately affected by HIV compared to their male peers, infection rates among adolescent girls and young women [dropped by 51 percent between 2010 and 2019](#) in 13 priority countries in sub-Saharan Africa where the Global Fund invests along with PEPFAR and other partners. A [recent study](#) showed how school closures caused by COVID-19 in Kenya, Ghana, Malawi and Zambia propelled teenage pregnancies and counteracted successful Global Fund interventions to reduce HIV incidence through girls being in school. Governments must preserve funding for girls' education throughout health crises in order to mitigate the long-term health and economic consequences of disrupting and diminishing the quality of girls' education.

Policy Recommendations

Address inequalities by changing gender norms.

Stigma, discrimination and gender norms create challenges for AGYW's empowerment and access to health care. The ways in which societies view and value females so differently from male counterparts must be addressed. Men and young boys play a large role in cultural treatment of AGYW and must become targets for education and attitudinal change. [PEPFAR](#), [USAID](#) and [UNICEF](#) should expand their proven, effective programs with men and boys to address gender norms and inequalities.

Expand programs supporting AGYW's health and economic empowerment as mutually reinforcing.

A woman's health is positively associated with the well-being of her family, her own economic independence and the [economic growth](#) of her community. [PEPFAR's DREAMS](#) program, which includes [a focus on education and economic skills strengthening programs](#), must receive greater investment from the U.S. Congress and be used as a model for new programs aimed at improving women's health and economic outcomes.

Scale programs to support women's voice and participation in decision-making roles.

[Women constitute 70 percent of the world's health workforce](#), yet are not nearly represented to the same degree in health leadership and governance. This situation must be changed because women's participation in decision-making better ensures that the needs of AGYW are accounted for and prioritized. [During pandemics](#) and [post-conflict times](#), women leaders have been integral to building and re-building stability. All international, national and local levels of governance and organizations must recognize the unique attributes women bring to the table as leaders and equally [include women in decision-making roles](#). The Global Fund and U.S. bilateral health programs

should accelerate their work to ensure equitable representation of women in decision making roles, country coordinating mechanisms and other programs addressing health. For the United States to more strategically leverage programs on (1) women's political and civic participation and (2) AGYW's health as reinforcing priorities, Congress should mandate, and the National Security Council implement, integrated planning on U.S. bilateral and multilateral aid.

Address AGYW's needs in an integrated approach.

Addressing economic security and decision-making voice are examples of a holistic approach to AGYW's needs. Increased investment for the Global Fund, which [actively prioritizes AGYW](#) in all of its planning and implementation, is needed. The Global Fund exemplifies a holistic approach to replicate. Moreover, among health interventions, public-private efforts to create cross-screening for different conditions (e.g., [HIV with cervical cancer](#)), or with noncommunicable diseases) need to be dramatically scaled up.

Prevent dilution of impact.

COVID-19 threatens important gains made to protect women's health due to pandemic responses taking funding, supplies, resources and workers away from existing health programs. PEPFAR, PMI and the Global Fund directly focus on achieving epidemic control of diseases—AIDS, TB and malaria—which disproportionately impact AGYW, and COVID-19 impacts the immense progress of these programs. For instance, the Global Fund reported that in 2019, working with all of its partners, [718,000 HIV-positive mothers](#) received medicine to keep them alive and prevent transmitting HIV to their babies. It is crucial to preserve the distinctive results-oriented work of PEPFAR, PMI and the Global Fund, while further increasing their coordination with other bilateral and multilateral programs to ensure better service integration.

