

Training course in adolescent sexual and reproductive
health 2020

The effects of COVID-19 on the lives of adolescents,
and specifically on their SRH

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Question 1.1

What were the three research methods used by GAGE to study adolescent experiences of COVID-19?

Using longitudinal research, GAGE applied three virtual research methods to study the impact of Covid-19 in adolescent's life in four low and middle-income countries (Bangladesh, Ethiopia, Gaza and Jordan). They are in-depth interviews done by telephone, small focus group discussion and phone/web-based participatory research through photography, digital and audio diaries, blogs authored by adolescents [1].

Question 1.2

Why did Population Council decide to conduct multiple rounds of data collection in each country?

As the COVID-19 pandemic has evolved to affect all aspect of human being, including adolescents, the Population Council carried out sequences survey in each country to find out better understanding how impact of COVID-19 have changed

Question 1.3

Name one advantage and one disadvantage of conducting telephone surveys.

Based on my experience doing online survey through google form during pandemic of COVID-19, the advantage using phone survey, is avoiding the spread of COVID-19 because there is no contact physically between surveyor and respondents. By phone, researcher still can collect data and information cross-area/country even when the researchers/surveyors and respondents living in areas under the order to stay-at-home or lockdown.

The disadvantage of phone survey is need more efforts to get representative sample, because sometimes people reluctant to participate in online survey. Respondents have autonomy whether they participate or not in that survey. Thus, like Maredia stated that this type of survey is not suitable for large comprehensive household survey [2]

Question 2.1

Give two reasons why learning has been disrupted due to the COVID-19 pandemic.

During the pandemic, learning process is facing problems due to prolonged school closure. The problems are almost the same in some countries. Students, especially living in rural area, do not have access to education because of limited tools/devices (TV, telephone, computers) to learn outside school. Beside limitation of hardware, they are also facing problems of connectivity. Lack connection to electricity, Wi-Fi and mobile data as well as supporting others make the learning process has been miserable [3].

Question 2.2

List two reasons why girls' education has been especially affected in many places.

N. Jones et al (2020) found that compared to boys, girls are suffered more. Firstly, they do not able to learn at home, as parents ask them to do domestic works. Secondly, even girls in better community, they still have less access to the technology in order to participate in learning process compared to the boys as gender matter.

Question 2.3

Girls' learning has been more adversely affected than boys' learning in Mexico – true or false.

It is false that girl's learning has been more adversely affected than boys' learning in Mexico. Evidence showed that more girls continuing study at home, than boys are and receiving more support to do their school's tasks. Girls are also learning more, had more positive experiences and shared feelings more frequently than adolescents boys [5].

Question 3

Name one finding on the impact of COVID-19 on food insecurity; name one group which has been particularly affected; and name one reason for this.

Covid-19 has increased food insecurity in many countries. Study in Bangladesh found that one out of five adolescents suffering from starvation. Meanwhile in Kenya and Mexico, most people reported to reduce the frequency of meals and quantity food consumption.

The group that have been affected more of COVID-19, particularly in food consumption is adolescent's girls. Girls are more likely stay at home, so that they are unable to afford the adequate calories from outside of household. Moreover, in some cases, managing food distribution in household not put girls in priority [3] [4].

Question 4

Name one finding on the impact of COVID-19 on mental health; name one group which has been particularly affected; and name one reason for this.

COVID-19 also has an impact on psychological aspect of adolescents. As the pandemic continue to exist, lockdown being extended as well as closing school for longer period, adolescents experienced anxiety and depression. They worried about anything, such as worried about COVID-19 its self, about poverty and food insecurity as well as worried about the future learning opportunities.

Again, adolescent girls are reported at high risk. In India, study found more girls stated that they are feeling lonely, increased depression or irritable over time. Two factors cause this poor mental health condition, which are biological and social factors. Biological factor related to estrogen that linkage with depression and limitation of mobility as well as being isolated as social factors that contribute to the unstable girl's mental health.

Question 5.1

The Guttmacher Institute estimates that 43% of adolescents aged 15-19 years in low- and middle-income countries who want to avoid a pregnancy are unable to obtain

contraceptives (in slide 2 of the [Guttmacher Institute Presentation](#)). Name one reason for this.

The adolescent's girls with unmet need for family planning occurred, part because of fearing of judgmental attitude that they are sexually active even they are single and social pressure having a child if they married is also hinder them to access contraceptive care [6].

Question 5.2

What is the estimated level of unmet need for contraception for adolescents aged 15-19 years in your country?

Based on 2017 IDHS, the level of unmet need for contraception among adolescents aged 15-19 years old was 9 percent [7].

Question 6

What does the Guttmacher Institute project will happen if COVID-19 causes disruptions in contraception access? In your opinion, is this pertinent to your country?

The Guttmacher Institute project will continue to work in order to cope the worsen impact of COVID-19 on contraceptive use among young women. It will develop more collaboration with policymakers to ensure the stronger health system for the comprehensive ASRHR. As it is assumed that there will be about 2 million additional unmet need among adolescents and 734,000 unintended pregnancies, The Guttmacher Institute recommended some policy actions, such as promoting sexual and reproductive health that accessible for adolescents, ensuring modern contraceptive commodities and supply that are available without prescription and promoting telehealth platforms for more accessible health services.

During the pandemic, family planning program in Indonesia facing problems, particularly in demand creation of contraceptive, and lack access to the contraceptive services as well as sexual reproductive health information. Prior to the COVID-19 pandemic, National Population and Family Planning Board (BKKBN) create demand for family planning through the information, education and communication (IEC) conducted by family planning field workers (PLKB). This activity automatically decreased since the pandemic force people to implement psychological distancing. On the other hand, limitation access to providers as women fearing to go to the health facilities may affect unwanted pregnancies. As Hasto (chairperson of BKKBN) explained that the Covid-19 pandemic has risen up to 17.5% of unintended pregnancy [8]. However, the figure of that case is not available among adolescents. In order to guarantee the access and availability of contraception, BKKBN running strategic actions, as follow;

'providing contraception service for one million acceptors from home to home across all Indonesia; creating a massive information system by using multi-level networking that covers 34 provinces, 514 districts, 23,400 field facilitators and 1.2 million cadres, as well as using a digital technology such as KlikKB to render contraception counselling' [9]

Question 7

WHO conducted an assessment of the impact of COVID-19 on 25 essential services. Name one health service that what was found to be severely disrupted, and one that was found to be partially disrupted due to the COVID-19 pandemic. Name one consequence of the disruption of these services.

Eighteen percent of 91 countries stated that COVID-19 has affected more on their program of outreach routine immunization. Health workers found difficulties to deliver mobile immunization services as some areas experienced lockdown. On the other hand, even more than half countries (69%) reported diagnosis and treatment of noncommunicable diseases was affected due to COVID-19 pandemic, in general, it found to be partially disrupted [10].

The immediate consequence of the absence or skipping of routine immunization will affect to the child survival and development. They will likely more fragile from certain diseases as not getting immunization at the time they need it.

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