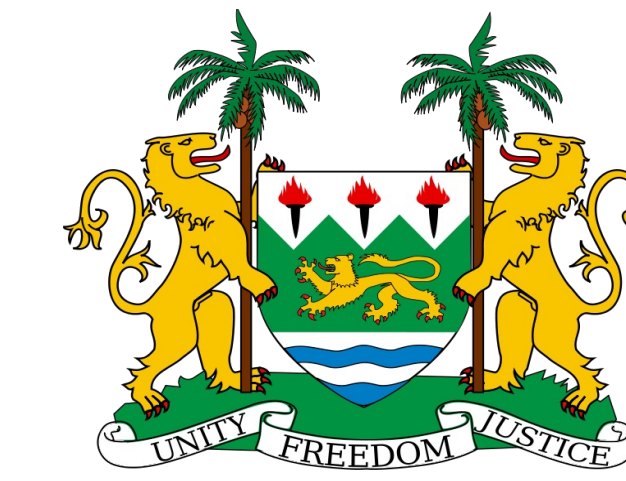




2YoungLives: A mentoring scheme to save lives of adolescent girls and their babies in Sierra Leone.



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Introduction

Sierra Leone (SL) has one of the highest maternal mortality in the world. Adolescent girls are particularly **vulnerable**, many times belong to disadvantaged communities usually driven by poverty, lack of education & employment opportunities.¹

In 2015, a household survey conducted in Easter Freetown showed an adolescent maternal mortality of **1 in 10**², and a following qualitative study found important contributing factors such a²:

- **vulnerability to adolescent pre.gnancy**: not living with birth family, sex for water/grades/school fees, criminal justice system, availability & accessibility of contraception and abortion
- **vulnerability to death when pregnant**: neglect, abandonment; being cared for by a non-parental adult, delayed care seeking, obstetric risks (i.e. bleeding, eclampsia, infections), socio-economic factors. *Cross-cutting :Gendered social norms for sexual behaviour*



Many girls, particularly those not living with their birth family, are forced by poverty into transactional sex i.e. sex for grades, sex for school fees, and even sex for water (particularly during the dry season when they have to wait for long hours to collect water)

In 2017, **2YoungLives (2YLS)** was developed as an upstream solution to maternal/perinatal mortality for adolescent girls and their babies. Pregnant girls are supported by mentors to: attend antenatal care and deliver at facilities; re-establish family connections' have practical advice about childbirth, parenting, health-seeking behaviour, contraception; run small business; and re-engage with school or start vocational learning.

After a small-scale pilot across 4 districts over 4 years, 2YLS has mentored over 200 girls with no maternal deaths and 8% perinatal loss. Girls report close loving relationships with their mentors, and a sense of agency and wellbeing from the educational and socio-economic elements of the mentoring scheme..



Memunatu (right in the photo) became a qualified plumber; she reconciled with her mother; and now she advocates her peers to use contraception

Methods

As part of the NIHR CRIBS group that started in 2021, we are carrying out a hybrid type 2, pilot cluster RCT in 12 facilities covering both rural + urban areas (6 intervention; 6 control) to assess the feasibility of 2YLS in new communities and inform procedures for a larger scale up programme. A mixed methods process evaluation will explore implementation, mechanisms, and experiences of care, health and wellbeing.

Discussion

We believe 2YLS directly addresses some key government priorities (e.g., Radical Inclusion policy, National Strategy for the reduction of adolescent pregnancy and child marriage) with a community-run, sustainable intervention which complements statutory services such as free maternity care and free secondary education. Pilot data confirms it has potential to save lives and promote wellbeing of adolescent girls and babies in Sierra Leone.



A group 2YoungLives girls, babies and toddlers in Eastern Freetown

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¹ UNICEF. <https://www.unicef.org/sierraleone/maternal-neonatal-and-child-health>

² November L, Sandall J. 'Just because she's young, it doesn't mean she has to die': exploring the contributing factors to high maternal mortality in adolescents in Eastern Freetown; a qualitative study. Reproductive Health. 2018 Dec;15(1):1-8.

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