



First Lady of Ghana speaks on protecting adolescent girls from malaria

## International Day of the Girl Child: protect adolescent girls from malaria

### International Day of the Girl Child: Get up, speak out and save adolescent girls from malaria

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It is long before the break of dawn, and the sound of young girls fetching water and getting the home ready for the day's activities is not unusual in many African households. However, it comes at a life-threatening cost: exposure to malaria.<sup>1</sup>

11th October is the International Day of the Girl Child. Launched in 2012 by the United Nations General Assembly, this day has been set aside to highlight the challenges girls face and empower them to fulfill their dreams and enjoy their human rights.

As the Chairperson of the Infanta Malaria Foundation, I have been championing malaria elimination for over a decade and in particular, since taking on the role of the First Lady of Ghana in 2016. I have also been working together with national and international stakeholders to empower our girls. As a country, we are focusing on the health of our adolescent girls because they make up 20 percent of Ghana's female population (and 10 percent of the total population) and are a critical foundation for our country's development.<sup>2</sup>

Globally, malaria is among the top killers of adolescent girls and contributed to 7.4% of deaths among this population.<sup>3, 4, 5</sup> Malaria is a serious health risk during pregnancy, especially during the first pregnancy, which for many in malaria-endemic countries occurs during adolescence.<sup>6</sup> This is because during pregnancy the body undergoes physiological changes, which increases susceptibility to malaria. Coupled with other challenges young girls face such as malnutrition<sup>7</sup>, malaria causes anaemia, a life-threatening condition for both the mother and newborn, in which the body is depleted of healthy red blood cells.<sup>8</sup> Surviving newborns may be severely underweight, and this could delay physical and mental development.<sup>8</sup>

To ensure that millions of pregnant girls and women, and their newborns, are protected from the devastating consequences of malaria in pregnancy, the RBM Partnership to End Malaria renewed its 'Speed Up Scale-Up of IPTp' Call to Action on October 6, 2020. This advocacy campaign urges all

stakeholders, including leaders and health policymakers across Africa, to prioritize that every pregnant woman and girl receives at least three doses of quality-assured antimalarial (sulfadoxine-pyrimethamine, or SP), used as the intermittent preventive treatment of malaria in pregnancy (IPTp).

This Call to Action is very timely for my country because in 2014, one in every three pregnant females was an adolescent.<sup>9</sup> A study conducted in the Western Region of Ghana also indicates that pregnant adolescents are more likely to have malaria and anaemia than their older counterparts.<sup>10</sup> A second study in our capital city, Accra, revealed that as many as three out of every four pregnant girls were anaemic prior to their first antenatal care visit.<sup>11</sup>

This evidence highlights the life-saving importance of ensuring that young girls delay pregnancy until they reach a more mature age; and if they do become pregnant, they must receive early and regular antenatal care, which includes quality-assured IPTp as well as iron and folate supplements.

As a country, our recommended strategies to prevent malaria among pregnant women include the distribution of insecticide treated nets and the administration of at least three or more doses of sulfadoxine–pyrimethamine, delivered to pregnant women at monthly intervals under direct observation, starting as early as possible in their second trimester of pregnancy.<sup>12</sup>

Yet, these preventive strategies cannot be accessed by expectant women and girls until they begin their antenatal visits. For pregnant girls, the situation is more challenging as they may delay antenatal care until the pregnancy is well advanced or altogether abandon antenatal care visits for fear of social stigma, the need for parental consent or lack of financial resources.<sup>13</sup> This leaves them, and their unborn child, exposed to malaria and its deleterious effects.<sup>13</sup>

I have been working together the National Malaria Control Programme and other relevant units through various campaigns to protect adolescent girls from malaria and its adverse impacts on pregnancy and contribution to anaemia. To reduce the alarming rate of anaemia among young girls, I launched the Girls' Iron and Folic Acid supplementation (GIFTS) programme in several regions of the country together with the Ghana Health Service, the Ghana Education Service, KOICA, UNICEF, USAID, United States Centers for Disease Control and the World Health Organization and other development partners.<sup>14; 15, 16, 17</sup>

Ghana's Adolescent Health Service Policy and Strategy (2016-2020) also highlights the importance of delayed pregnancy as one of its cardinal outcomes so that adolescents are free from unwanted or unplanned sex, pregnancy and childbearing.<sup>10</sup> Additionally, young people must be able to obtain health information and services, including adapted counselling, relevant to their needs, circumstances and stage of development when seeking care at various levels of health service delivery.<sup>10</sup>

To ensure that my passion to empower girls has a ripple effect in Africa, I, together with other African first ladies reaffirmed our commitment to empower women and girls at the 24th Ordinary General Assembly of Organization of African First Ladies for Development (OAFLAD) held in February 2020 in Ethiopia.<sup>18</sup>

Yet beyond national leadership commitment in Africa, I firmly believe that it is critical that adolescent girls are personally empowered and educated on the life-threatening risks associated with malaria, particularly during early pregnancy. Malaria prevention and treatment programmes can be combined

with reproductive and sexual health education as well as school-feeding programmes to achieve effective sensitization and optimal coverage.

Our local communities and health workers must equally be actively engaged; It is urgent that they create a safe and trusted haven to encourage girls to seek malaria treatment, when needed, and access preventative care if they are pregnant so that no additional young life is lost to malaria.

Evidence is the backbone of effective policymaking. Therefore, our national health data must be strengthened to identify the full extent of the burden of malaria among adolescents, especially pregnant adolescents. While we have identified pregnant women as a priority group for malaria policies and campaigns, we need to develop targeted interventions that encourage pregnant girls to access malaria prevention and treatment services, so as to achieve equity in access to services, in light of the societal stigma young pregnant girls face.

At the international level, the supply chain for malaria medicines for pregnant women and girls must be strengthened and access to life-saving medicines must be enhanced. Our partner, Medicines for Malaria Venture, is working together with its extensive network to ensure that quality assured SP is made available to all pregnant women by diversifying and promoting local manufacturing in malaria-endemic countries.

Especially now that the COVID-19 pandemic is creating even greater barriers for adolescent girls to access health services, I entreat all African leaders to fully commit to protecting young girls, so they do not die from malaria. On this International Day of the Girl Child, it is time to GET UP and SPEAK OUT to save the lives of our future leaders from malaria.

## References

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- <sup>4</sup> [https://www.who.int/maternal\\_child\\_adolescent/data/causes-death-adolescents/en/](https://www.who.int/maternal_child_adolescent/data/causes-death-adolescents/en/)
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<sup>13</sup> Malaria and Gender in Kenya: <https://www.measureevaluation.org/pima/malaria/gender-and-malaria-in-kenya>

<sup>14</sup> <https://www.cdc.gov/nutrition/micronutrient-malnutrition/projects/ghana.html>

<sup>15</sup> <https://www.unicef.org/ghana/reports/iron-and-folic-acid-supplementation-adolescent-girls-and-women>

<sup>16</sup> <https://www.ghanaweb.com/GhanaHomePage/NewsArchive/First-Lady-launches-supplement-programme-to-improve-girls-nutrition-590273>

<sup>17</sup> Adolescent Health Service Policy and Strategy (2016-2020), Ghana Health Service

<sup>18</sup> <https://www.myjoyonline.com/news/national/rebecca-foundation-will-embrace-more-girls-first-lady/>