

Title: Community Engagement for Adolescent Health: Preventing Teenage Pregnancy and Promoting Disease Prevention in Gulu and Omoro Districts, Uganda.

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Background:

Teenage pregnancy is a major public health challenge in Uganda, leading to early childbearing, unsafe abortions, interrupted education, and higher risk of preventable diseases including STI and HIV. Understanding adolescent health outcomes is vital for responsive interventions integrating disease prevention. The baseline study *Breaking the Cycle*, implemented by PACE with European Union funding, was conducted in Gulu and Omoro to generate benchmark data on SRHR access, education reintegration, and community support.

Methods:

A total of 468 adolescents were randomly sampled using Lot Quality Assurance Sampling (LQAS)—235 from Omoro (Bobi, Akidi, Labora, Palenga) and 233 from Gulu (Bungatira, Patiko, Uyama, Omel). The qualitative component included 22 KIs with officials and community leaders. Objectives: (1) assess SRHR service access/utilization, (2) examine education reintegration, (3) identify influencers shaping SRHR outcomes, and (4) explore barriers to wellbeing and educational continuation.

Findings:

Overall, 52% of adolescents reported pregnancy. Among in-school girls, 3.8% in Gulu and 25.8% in Omoro reported pregnancy, versus 76–100% among dropouts. Most first pregnancies occurred at 16–18 years (68%), with 29% at 17. Comprehensive sexuality education was 55.9%. Paternal support was weak (19%), counselling access 22%, and legal aid 3.5%. KIs revealed fragmented, underfunded programming, inconsistent school-based education, and minimal boys' engagement.

Conclusion:

Community-driven, multi-sectoral interventions are urgently needed. Priorities include expanding CSE for 13–15-year-olds, promoting retention/re-entry, scaling youth-friendly SRHR services, and building integrated support systems. Engaging boys, parents, leaders, peers, and institutions is essential for stronger adolescent health outcomes.