Across Africa, adolescent parents face a unique set of challenges: stigma, interrupted education, and a heightened risk of depression and anxiety. Yet, despite these vulnerabilities, support systems for young mothers and fathers remain fragmented and inadequate.

These concerns took center stage during a recent virtual panel hosted by the African Population and Health Research Center (APHRC), bringing together researchers, practitioners, and youth advocates from across the continent. The discussion highlighted the urgent need to embed mental health services within sexual and reproductive health programs for pregnant and parenting adolescents.

Sibusisiwe Marunda, Country Director for REPSSI Zimbabwe, painted a stark picture of the social realities young mothers face. “When a girl falls pregnant, the burden often falls on her alone,” she said. Families, schools, and churches, she added, must move from condemnation to care. Marunda also emphasized the role of fathers, calling for men’s active involvement in parenting as a critical step toward reducing stigma and improving mental health outcomes.

Professor Govender, a behavioural scientist and Director of the Health Economics and HIV/AIDS Research Division (HEARD) at the University of KwaZulu-Natal, connected persistent stigma to policy failures. “If discriminatory norms persist, policies will not translate into effective support for adolescent parents,” he warned. Govender advocated for holistic policies that treat the mother, father, and child as one unit, with psychosocial screening integrated into antenatal and postnatal care. He also highlighted promising country initiatives, though weak coordination and challenges in scaling up remain obstacles.

Digital innovation emerged as another key solution. Mercy Nzuki, founder of the Divine Initiative Psychology and Counselling Organisation (DIPCO), noted that technology can bridge critical gaps in support. “There is no health without mental health,” she said. Nzuki highlighted mental health apps and helplines, such as Apollo and the Kenya Red Cross toll-free line, which offer free, multilingual counselling. She called for a connected digital ecosystem linking online resources to professional care and clinical referrals. For adolescents with limited internet access, low-tech solutions like SMS or USSD codes can make a meaningful difference.

Dr. Anthony Ajayi, Senior Research Scientist at APHRC, emphasized the importance of evidence-based programming. “Research must identify which interventions actually improve mental health, education, and livelihoods among adolescent

parents,” he said. Ajayi urged donors to fund comprehensive programs combining counselling, family involvement, schooling, and income support, rather than fragmented, stand-alone initiatives.

Panelists agreed that underfunding remains a major barrier. They called for increased budget allocation, stronger inter-sectoral coordination, and meaningful youth participation in designing solutions. As Govender reminded the audience, “Young people must be at the table when policies that affect them are written.”

The discussion concluded with a clear message: technology alone cannot erase stigma, but it can serve as a vital connector, linking adolescents to care, information, and community support. Experts called on policymakers to integrate mental health screening into maternal and adolescent health services, train more community-based counsellors, and invest in credible digital platforms linked to referral systems.

Addressing the mental health of adolescent parents, the panel agreed, requires more than services, it demands a shift in societal norms, better funding, and practical, tech-enabled solutions. Without coordinated action, millions of young parents risk being left invisible to the very systems designed to protect them.