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The Impact of the Ebola Epidemic on Teenage Births in Guinea

In this paper, I explore the research question: what was the impact of the Ebola Virus Disease (EVD) outbreak on the incidence of teenage births in Guinea? Previous literature on Ebola-related teenage births only focused on Sierra Leone and Liberia. While the limited amount of literature covering the impact of the EVD outbreak on adolescents in Guinea discussed educational outcomes. Hence, the main contribution of this paper to the literature is in examining Ebola-related teenage birth outcomes in Guinea. Like those Guinea-focused papers, I also used the Demographic Health Survey (DHS) datasets for 2012 and 2018. However, I created an additional variable using the World Health Organization (WHO) data. The additional variable captured the intensity of the Ebola outbreak in each prefecture in Guinea, allowing me to identify the causal impact of Ebola on teenage birth using a pooled OLS technique. (continued on next page)
The result from this approach shows that prefectures with a higher incidence of Ebola cases experienced a lower probability of adolescent births. The results differ from Sierra Leone and Liberia's outcomes, where teenage pregnancies increased during and after Ebola. The main reason mentioned in the literature is that because the government shut down schools, and girls had more free time, their interactions with men increased. This increased interaction with men resulted in higher cases of teenage pregnancies, preventing them from returning to school post-Ebola. However, this was not the case in Guinea, as Smith (2021) found that school dropout rates for girls of secondary school age dropped in Guinea post-Ebola. Therefore, the result from my analysis is consistent with Smith (2021). Girls did not have the burden of being teenage mothers because teenage births reduced post-Ebola. Thus, they could return to school, and their educational outcomes did not worsen.

Although examining the factors that influenced these results was beyond the scope of my analysis, I suggest some reasons in Section 3 of the paper, including a strong stigma attached to EVD in Guinea, which the literature documents. Because of the fear of contracting EVD, it is possible that interactions between teenage girls and men decreased during Ebola lockdowns.