Reducing Child, Early and Forced Marriage (CEFM):
Gender transformative change for girls' rights and empowerment

Findings from Bangladesh, Benin, Ethiopia, Honduras, Mali, and Somalia

Impact Brief

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75 YEARS

Child, early and forced marriage (CEFM) and its life-long consequences reflect and reinforce gender and age discrimination. The practice disproportionately affects women and girls globally, putting them at increased risk of sexual and gender-based violence and early pregnancy and its associated risks, and denies them access to education and other rights.

Before the COVID-19 pandemic, more than 100 million girls were expected to marry before their eighteenth birthday over the next decade—that number has now increased by 10 million. CEFM and its consequences persist due to inequitable gender and social norms that devalue girls and women and, in some cases, unjust laws and policies, limiting girls' opportunities and ability to thrive.

Child marriage imposes a significant social and economic cost including intergenerational transmission of poverty: **Mali**, where 54% of girls marry before the age of 18,[i] ranks 176th out of 187 on the UN Gender Inequality Index while **Niger**, where 76% of girls are married by age 18,[ii] comes last.[iii] Less than 11% of women in Niger hold an account at a formal financial institution or with a mobile money-service provider while Mali misses out on $174.8 million in productivity gains as a result of the continuation of child marriage.[iv]

Education & CEFM: Research shows that each year of secondary school attended by a girl reduces her likelihood of getting married before the age of 18 by five percentage points.[v] Still, reaching secondary school is still a rare feat for girls in many contexts and does not necessarily protect girls from child marriage. Inequitable gender norms, extreme poverty, and limited availability of education services contribute to high dropout rates among girls at the onset of adolescence. Once out of school, adolescent girls are disproportionately more likely to get married and/or become mothers early. In **Somalia**, the gender gap in school begins to widen at age 13 and accelerates around age 16, with fewer and fewer teenage girls enrolled in school.[vi] Even if adolescents continue to attend school after getting married, they face a higher likelihood of dropping out after getting pregnant. Poorly resourced education systems reinforcing traditional gender norms contribute to girls' dropout in early adolescence, often without having acquired basic skills for market insertion and lacking the agency and opportunities for pathways beyond early marriage.

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"Girls in my village were married off at a young age and no one ever bothered to get their consent. When we say that we too have dreams, they say what could a girl's dreams possibly be. You cannot go out and work."

- Tipping Point group member, Bangladesh

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CARE's approach to preventing CEFM

CARE views child marriage as an act of violence, and works to enable girls to assert their rights, help families and communities to support them, and influence policy to sustain change. CARE does this through community-level programing, evidence generation, and multi-level advocacy and influencing efforts at all levels.

CARE's Community Participatory Analysis found context-specific drivers of child marriage and identified the particular factors that affect decisions by the prospective bride's family and the prospective groom's family regarding the timing of marriage. Geographic, environmental, and economic conditions,

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socio-cultural and religious characteristics, concerns about the regulation of girls' sexuality, gender inequality and social norms all influence marriage decisions. Economic factors do not exist independently of these drivers. Rooted in this understanding, CARE works alongside girls, their communities, and partner organizations to support transformative change through the following approaches:

- **Addressing root causes of CEFM:** In many contexts, the perceived downsides of delaying marriage and benefits of early marriage prevail over the perceived benefits of delaying marriage. Relatedly, the control of girls' sexuality is often of central importance to any decisions concerning the timing of marriage. CARE's impactful, evidence-based Tipping Point program and other initiatives have found that *individual interventions, such as enhancing school access, are not sufficient to protect girls from marriage. Instead, interventions should facilitate shifts in negative gender and social norms underlying the decision for early marriage, and equip local champions, including girls, to do so.* Therefore, CARE's Social Norms Design Checklist promotes norms shifting strategies like girl-led activism and structured allyship, intergroup dialogues, and other community-level activities to make change visible and challenge inequitable norms.

  Enhancing school access is not sufficient to protect girls from marriage. Interventions should also facilitate shifts in negative gender and social norms.

- **Girls' leadership, activism, and advocacy:** CARE's programs seek to develop girls' leadership competencies, linking them with support networks and fostering an enabling environment in the community for girls to claim and exercise rights. Schools are a natural environment for leadership skills development programs, which enhance marginalized girls' participation in class, learning outcomes, and retention rates. CARE's Learning Communities on the Move model is a girl-led programming approach that ensures girls' expertise and dynamic contributions are respected and included in decision-making spaces that affect their lives and rights. Girls decide what they wish to address and together, use the toolkit to implement actions and monitor and evaluate progress. This supports girl activists to voice their choices and opinions and come together as a movement advocating their rights.

- **Integrated approach to girls' wellbeing and empowerment:** CARE helps married and unmarried girls broaden their life opportunities not just through access to formal and informal or accelerated education but also by opening economic opportunities for girls through Youth Savings & Loan Associations (YSLAs), financial literacy, skills training, and market linkages. Having an income, or helping with family businesses, contributes to reduce economic pressures for early marriage and shifts perceptions about girls' roles.

- **Increasing access to quality education relevant to girls' needs:** CARE ensures quality schooling for children, particularly girls. Our programs strengthen the capacity and resiliency of education systems and offer out-of-school children a second chance to access education. Through relevant formal and accelerated education, girls develop skills to earn an income through wage or self-employment.

- **Evidence generation:** CARE's CEFM prevention programming is driven by both large-scale longitudinal research and girl-led research. The evidence is shared with community activists and government partners and disseminated in country and globally, supporting national policy development, the design of new interventions, and local and global advocacy to end CEFM. It has also informed Education Sector Analyses in Somalia and policy development on CEFM in Bangladesh.

CARE's Impact on Child Marriage

CARE's interventions are designed to challenge social and gender norms that act as barriers to girls achieving their full potential and having a say in their marriage or childbearing decisions. Alongside these strategies, CARE works to build girls' agency and assets and create supportive relationships and networks while transforming formal and informal structures, including systems and laws. These three actions contribute to greater equality and dignity for marginalized and excluded children, youth and adolescents of all genders.

In Bangladesh, Tipping Point fosters parental champions for girls, promotes equitable division of household labor, and improves intergenerational and sibling relationships and reduced girls' risk of child marriage by 63%.

In **Bangladesh** and **Nepal**, CARE's Tipping Point Initiative identified the root causes of CEFM and facilitated alternative paths for adolescent girls by highlighting their capabilities and voices, fostering parental champions for girls, promoting the equitable division of household labor, and improving intergenerational and sibling relationships. It also influenced the way policymakers, donors, researchers, and civil society approach CEFM and steered global discourse beyond short-term fixes. In both countries, the project was effective in reducing CEFM and/or enhancing protective factors against the practice. Most notably in **Bangladesh**, **Tipping Point reduced girls' risk of child marriage by 63%** among those who attended 36-40 sessions.[vii] Even in the midst of COVID-19 lockdowns, participating girls' **mobility increased** significantly, alongside protective factors, like expanding knowledge of sexual and reproductive health, improving girls' attitudes about gender roles, and increasing girls' participation in decisions about marriage.

In **Ethiopia**, Abdiboru worked to empower girls through shifting gender norms and improved reproductive health, nutrition, and education in rural West Hararghe. This combination of strategies **reduced early marriage by 44%** compared to 36% in the control group.[viii]

In **Benin**, the PROJEUNES project promoted sexual and reproductive health (SRH) and the rights of adolescents and young girls and boys. The project reduced the proportion of girls married by age 18 **by 34 percentage points**[ix] and the birth rate among adolescent girls (15- 19 years) from 16% to 8%.[x]

In Benin, PROJEUNES halved the birth rate among adolescent girls.

In **Nepal**, the Hausala project provided accelerated education programs for adolescent girls who had either dropped out or never been to school in Western Nepal. The project worked with girls' collectives, parents' groups, and community leaders to encourage delayed marriage by disseminating knowledge on the dangers of child marriage and early pregnancies. *Among Hausala participating girls, only 1% got married[xi] and 69% transitioned into formal school,[xii] compared to an average of 17% in Kapilvastu district.[xiii]*

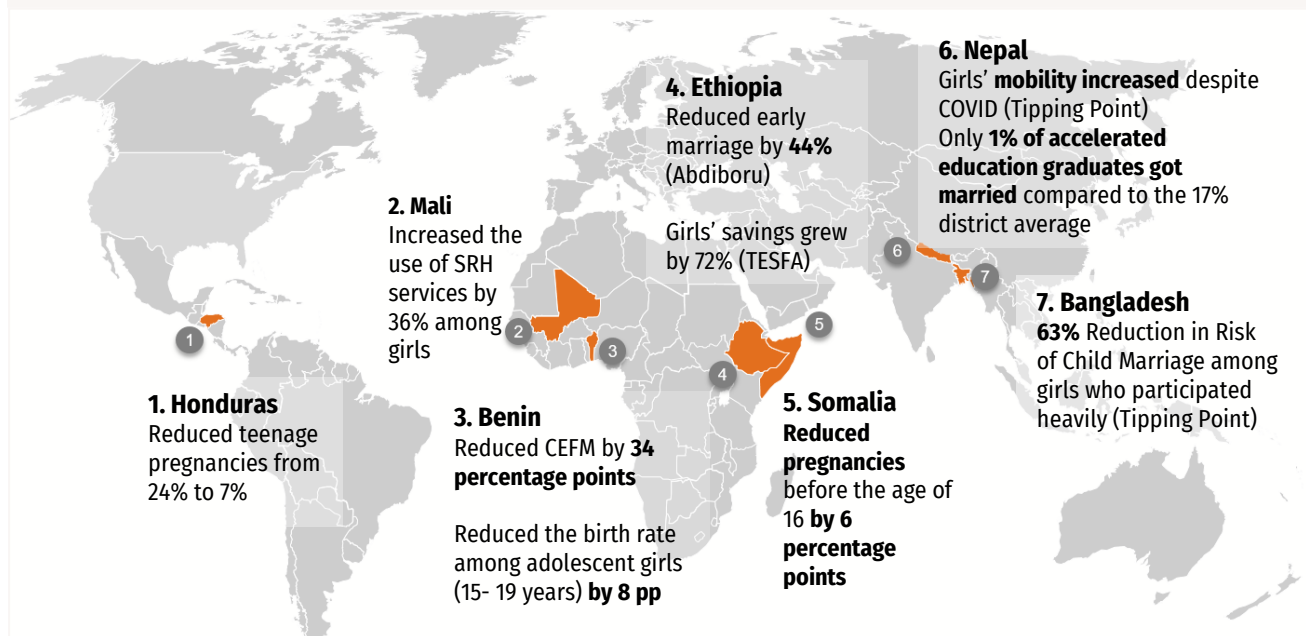**In Nepal, Hausala program helped 69% of girls transition to formal school and only 1% got married.**

In **Somalia**, the SOMGEP-T project worked with schools, religious leaders, and community members to facilitate shifts in traditional gender norms about girls' education and acceptable roles in society. The project supported Ministries of Education to create girls' leadership clubs in schools. Club participants had significantly higher gains in learning outcomes – 16 percent over and above the comparison group.[xiv] **The project had a major impact in reducing teenage pregnancies:** Only 0.1% of the participating girls became mothers before the age of 16, compared to 6.3% in the comparison group.[xv]

"One of the girls who is a friend of mine is studying in the school and now she is in class five. Her parents wanted her to get married to an old man... We talked to her parents about the importance of empowering girls in the society and also educating them, so we advised the parents not to take out of school because of marriage. They cancelled the marriage, now the girl is studying at the school."

- Girls' leadership club member, Somalia

Access to education allowed adolescents to improve their knowledge of sexual and reproductive health issues, which can impact their overall wellbeing and delay pregnancies and marriage. In **Mali**, CARE's Education for Change project supported schools to provide relevant content on adolescent sexual and reproductive health (SRH) and facilitate girl-led action. Among adolescent girls, 53% affirmed that they could ask a partner to use a condom, and the **use of SRH services increased from 2% at the baseline to 31% at the endline (36% among girls)**.

CARE's impact on reducing CEFM and improving protective factors across three regions

1. Honduras
Reduced teenage pregnancies from 24% to 7%

2. Mali
Increased the use of SRH services by 36% among girls

3. Benin
Reduced CEFM by **34 percentage points**

Reduced the birth rate among adolescent girls (15- 19 years) **by 8 pp**

4. Ethiopia
Reduced early marriage by **44%** (Abdiboru)

Girls' savings grew by 72% (TESFA)

5. Somalia
Reduced pregnancies before the age of 16 **by 6 percentage points**

6. Nepal
Girls' **mobility increased** despite COVID (Tipping Point)
Only **1% of accelerated education graduates got married** compared to the 17% district average

7. Bangladesh
63% Reduction in Risk of Child Marriage among girls who participated heavily (Tipping Point)

Lessons learned & recommendations

Each of CARE's most impactful child marriage prevention and response programs have the following in common:

Gender-transformative program design invested in norms shifting strategies in addition to girls' individual skills and improving the relationships around them, particularly at a household and community level. Covering all three domains of change within CARE's Gender Equality Framework was essential for transformative change to occur. This required staff themselves to go on a journey of transformation so that CARE and partners were authentic, reliable change agents alongside participants. Engaging community leaders, parents, and siblings, **particularly men and boys**, to reflect on gender relations and expectations they themselves face [masculinities] and taking action for transforming oppressive gender norms and promoting gender equality not only mitigates backlash but makes project activities more effective.

"We work with adolescents, and it is important to make them understand that a lot of their issues and concerns about sexuality in their lives are, in fact, normal." - Anonymous Tipping Point staff, Bangladesh

Investment in girls' voice and leadership to address broader structural barriers started with individual life skills within girls' collectives before creating space and opportunity for girls' advocacy and activism alongside their allies to shift discriminatory practices, policies, and laws. Projects then pushed further by ensuring the process itself centered what girls want, identified their own priorities within issues that affect their lives, how they wish to connect with others to achieve their vision, and where they would like to take action – whether that was what the project expected or not. Individual and collective voice are a vital part of girls' protection against child marriage.

"…Yes, she (adolescent girl) will be asked before decision; and if she tells her parents 'I am not interested in him' and don't chew/receive their khat, she is not forced". – Mother of an adolescent girl, Abdiboru, Ethiopia

Building financial skills and opportunities was central to expanding pathways for girls beyond marriage. Parental participation in VSLAs contributes to increase girls' access to education and transition into upper grades, contributing to delay marriage. CARE's Youth Savings & Loan Associations (YSLAs) have been adapted to meet the needs of adolescent girls and ultimately improve their economic, health and social outcomes. In VSLAs, girls save together and take small loans to support their income generating activities or to cover their cash needs. Taking part in YSLAs has taught girls how to generate income through small business opportunities, how to budget in order to build livelihood assets and use their savings to cover their basic expenses, including for education. Most importantly, girls see a bright future for themselves, recognizing their value to their families, communities, and society overall and more girls feel empowered to reject early marriage proposals.

"The savings group has created an opportunity for me to save and take loans to start petty trading and I have used the profit to cover my school fees. I do not want to get married any time soon because if I do, I would not be able to support myself or contribute much for the community." – 13-year-old Abdiboru participant, Ethiopia

References

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[xiv] Miettunen, J., Peterson, B. & Robert, S. (2020) Somali Girls' Education Promotion Project – Transition: Midline Evaluation, Round 2, pg.123
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