

# Multi-Country Analysis of Effects and Consequences of Child Marriage in Africa

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## Abstract

This paper is drawn from the findings and recommendations of the UN Women East and Southern Africa led Multi-Country Analytical Study of Legislation, Policies, Interventions and Cultural Practices on Child Marriage in Africa undertaken in 2018. The study focused on Africa as a continent but with a deeper lens on 10 study countries (Niger, Mali, Nigeria, Egypt, Ethiopia, Malawi, Mozambique, Tanzania, DRC and Morocco) that are among those with the highest prevalence of child marriage on the continent despite their high-level national commitments to end child marriage. This paper focuses on the findings of the study as they relate to the effects and consequences of child marriage in Africa and in the study countries in particular. Child marriage affects the involved children's (mostly girls) quality of life in diverse, severe and lasting ways. These effects range from biological (health), to social and economic, all of which impact their lives permanently, especially their reproductive health, human rights and life chances as human beings. From a human rights perspective, child marriage is a violation of the rights of an individual, rooted in gender inequality and an impediment to girls' social and economic development. In the study countries, the societies where this practice is common, exhibited a low value placed on girls and women, thereby perpetuating this as a norm and continually binding them in a vicious cycle affecting both present and subsequent generations. There is a strong correlation between child marriages, unequal opportunities for women, and low social economic development in those countries with countries that have a high prevalence of the practice. It follows therefore that developing countries have the highest levels of child marriages and that child marriages are most common among the proportion of the population living below the poverty line. The study noted that besides the inherent health risks associated with the practice, child marriages also put the girls at risks of maternal mortality, infection with venereal diseases and HIV as well as affecting their education and wellbeing. Child marriages also subject girls to rape throughout their marriage and increase other forms of gender-based violence such as domestic violence, child labour, loss of freedom isolation for the victims, school drop-out and illiteracy.

**Keywords:** Child marriage, Child bride, prevalence, survivors, hotspots, UN Women, effects and consequences, women and girls, children, culture, religion, society, families, Africa, Niger, Mali, Nigeria, Egypt, Ethiopia, Malawi, Mozambique, Tanzania, DRC and Morocco

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## 1. The Global State of Child Marriage

Among the human rights of children stipulated by the Convention on the Rights of the Child (CRC) are: the right to survive; the right to develop to their fullest; the right to protection from harmful practices, abuse and exploitation; and the right to participate fully in family, cultural and social life. By signing the Convention, governments commit to taking "all effective and appropriate measures to abolish traditional practices prejudicial to the health of the children."<sup>1</sup> Among the practices that were deemed prejudicial were child marriage and female genital mutilation. The International Conference on Population and Development (ICPD) of 1994, adopted a programme of action under which countries committed to undertake measures to eliminate child marriage" and to "strictly enforce laws to ensure that marriage is entered into only with the free and full consent of the intending spouses." The Beijing Declaration and Platform for Action<sup>2</sup>, also called on countries to eliminate child marriage and to enforce laws that ensure free and full consent. At the Continental level, the Maputo Protocol requires states to ensure that 'the minimum age of marriage for women shall be 18 years.'<sup>3</sup> Thus, child marriage refers to a legal or customary union between two people, of whom one or both spouses are below the age of 18 years. Because child marriage happens when the child/children is/are under the age of consent, the marriage is also described as an early and forced marriage, under any circumstances whether there is apparent consent or not. However, the practice predominantly impacts girls compared to boys due to deep-rooted patriarchal attitudes, biological as well as socio-cultural conceptions of maturity and gender inequalities.

Globally, approximately one-quarter of women aged 20-24 years were in a union before the age of 18 years, with about one out of thirteen married or in such unions before the age of 15 years. The United Nations Population Fund (UNFPA) estimates that between 2011 and 2020, more than 140 million girls will become children in marriage, meaning that 14.2 million girls will marry annually, or 39 000 girls will be children in marriage per day. Furthermore, of the 140 million girls who will marry before they are 18, fifty million will be under the age of 15 years.<sup>4</sup> A World Bank Group report (2017) indicates that 41,000 girls are married per day translating to 15 million girls every year confirming the position described by UNFPA.<sup>5,6</sup>

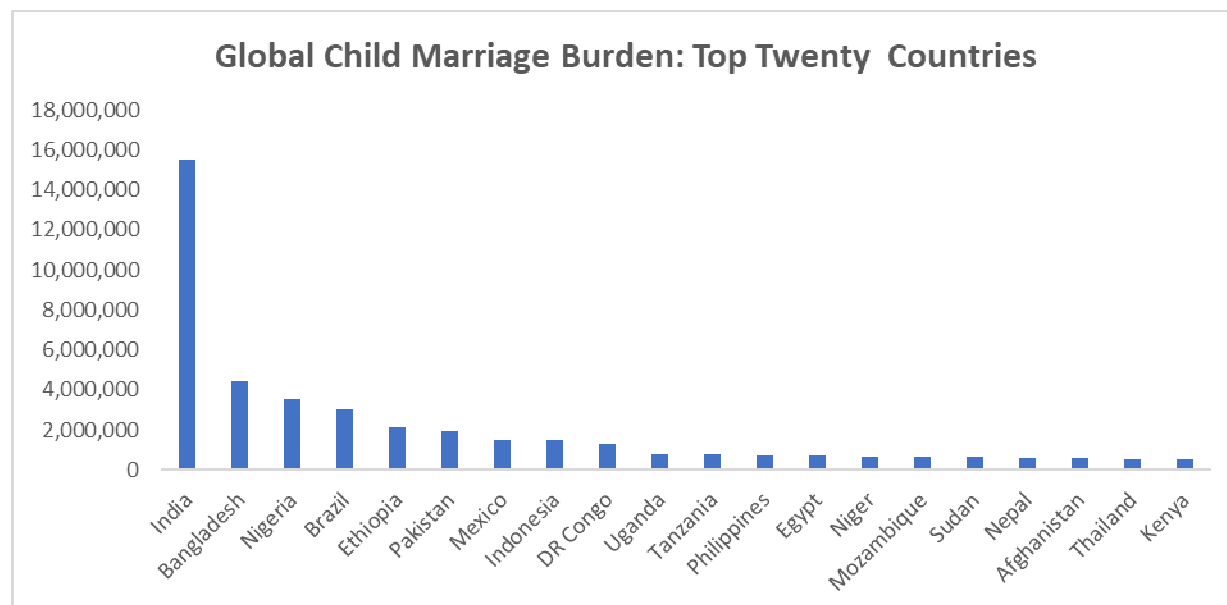


Figure 1: Global Child marriage burden; Top 20 countries

Source: United Nations Children's Fund, *The State of the World's Children*, UNICEF, New York, 2017.

Global data indicates that child marriage is most common in South Asia and sub-Saharan Africa and the highest global prevalence rates have been documented in 10<sup>7</sup> countries found in these two regions of which Ethiopia, Mali and Niger fall among the study countries.<sup>8</sup>

## 2. The State of Child Marriage in Africa

Africa, especially sub-Saharan Africa, is one of the highest child marriage prevalence regions in the world. It is estimated that 125 million (17%) of the more than 700 million women alive today who married as children live in Africa. Evidence on child marriage prevalence indicates an average of 11.6 per cent and 42.8 per cent girls married by the age of 15 and 18 years respectively.<sup>9</sup> This translates to approximately 4 in 10 girls married or in a union before the age of 18 years and 1 in 6 girls before the age of 15. All African countries are faced with the challenge of child marriage. Prevalence of child marriage in African countries ranges from high child marriage prevalence countries such as Niger at (76%), Chad at (72%), Central African Republic (68%), Mali at (55%), Mozambique at (52%) and Malawi at (50%);<sup>10</sup> to low prevalence countries like Algeria (3%). The literature further reveals that more than half of adolescent girls aged 15 to 19 years in Mauritania and Nigeria (one of the countries of study) are currently married and have husbands who are 10 or more years older than they are. Overall, child marriage is more widespread in West and Central Africa (42%) and Eastern and Southern Africa (36%).<sup>11</sup> Figure 4 below shows the 10 highest child marriage prevalence countries in the continent as at 2015.<sup>12</sup>

Africa has strong policy and legal frameworks in advancing the Rights of the Child and gender equality. For instance, the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo Protocol) and African Charter on the Rights and Welfare of the Child contain provisions specifically aimed at ending harmful practices including child marriage and these combined with interventional initiatives, such as the African Common Position and the African Campaign on Ending Child Marriage, which are concretely expressed in Goal 18 of the continent's Agenda 2063. However, child marriage remains a persistent problem across the continent of Africa. It is projected that by 2050, the number of children that are married before the age of 18 years will double if nothing is done to eradicate child marriage.<sup>13</sup> From the study, Niger, Mali, and Mozambique have the highest percentages (48%, 46%, and 40% respectively) of girls having their first children by 18 years. However, Mali tops all the countries of study in the number of girls who give birth to their first child by the age of 15 years.

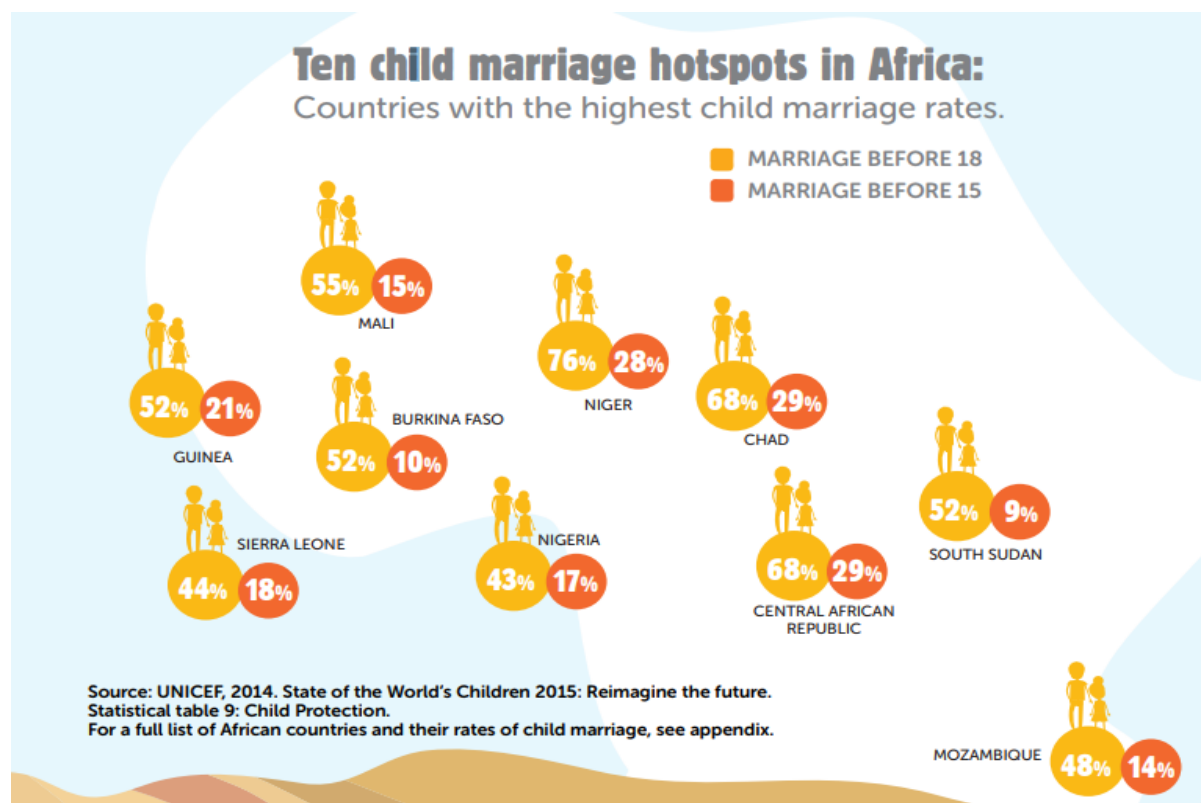


Figure 2: The ten highest child marriage prevalence countries in Africa  
 Source: State of the World's Children 2015: Reimagine the future<sup>1.3</sup> Effects and Consequences of Child Marriage in Africa

### 3. Analysis and Findings

Child marriage affects the involved children's (mostly girls) quality of life in diverse, severe and lasting ways. These effects range from biological (health), to social and economic, all of which impact their lives permanently, especially their reproductive health, human rights and life chances as human beings. According to the UNFPA, any form of child marriage is a violation of a child's rights as provided within the Convention on the Elimination of All Forms of Discrimination against Women and the Convention on the Rights of the Child.<sup>14</sup> This is because it endangers the lives of young girls through increased risk of early pregnancies and birth-related complications often resulting in a high prevalence of maternal and neonatal mortality. They face the risk of experiencing dangerous conditions such as uterine infections, Obstetric fistula, high blood pressure, unsafe abortion, and miscarriages.<sup>15</sup> Worse still, they have little information regarding their sexual and reproductive health and hardly use any contraceptives for family planning.

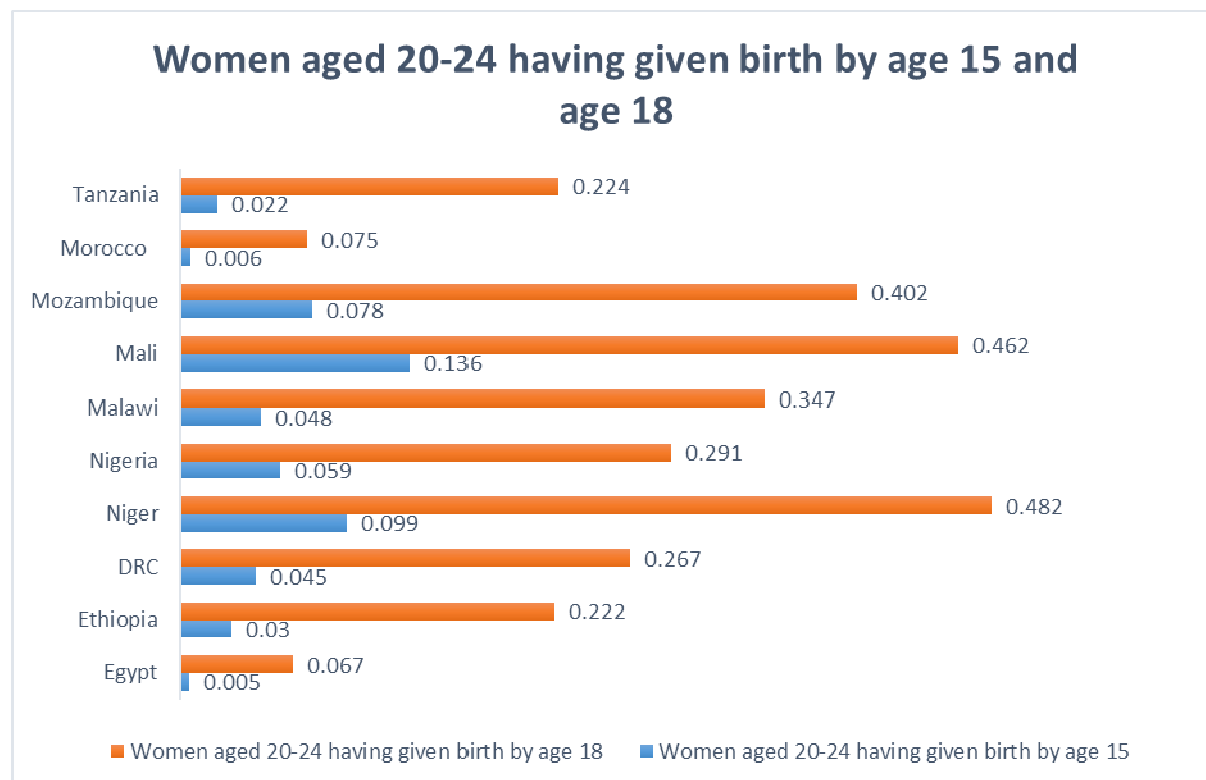


Figure 3: Women aged 20-24 having given birth by age 15 and age 18

Source: UN Women Literature Review (2018)

From a human rights perspective, child marriage is a violation of the rights of an individual, rooted in gender inequality and an impediment to girls' social and economic development.<sup>16</sup> In the study countries, the societies where this practice is common, exhibited a low value placed on girls and women, thereby perpetuating this as a norm and continually binding them in a vicious cycle affecting both present and subsequent generations. There is a strong correlation between child marriages, unequal opportunities for women, and low socio-economic development in those countries with countries that have a high prevalence of the practice. It follows therefore that developing countries have the highest levels of child marriages and that child marriage is most common among the proportion of the population living below the poverty line.<sup>17</sup> The study noted that besides the inherent health risks associated with the practice, child marriages also put the girls at risks of maternal mortality, infection with venereal diseases and HIV as well as affecting their education and wellbeing. Child marriages also subject girls to rape throughout their marriage and increase other forms of gender-based violence such as domestic violence, child labour, loss of freedom isolation for the victims, school drop-out and illiteracy.

More specifically, the following are the main effects and consequences associated with child marriages for girls in the countries of study as well as in Africa in general;

### 3.1 Child marriage and maternal, new born and child health

The study confirms that child marriage and reproductive health are closely interrelated with various studies reviewed showing that most children married before the age of 18 years have a high probability of going through unwanted pregnancies, contracting a sexually transmitted disease including HIV/AIDS and having obstetric fistulas and related complications predisposing them to maternal mortality. For example, married girls in Tanzania aged between 15 and 24 years are at highest risk of being HIV positive compared to their unmarried counterparts (2.5% /2.0%). In addition, girls in the 15-24 age brackets who are divorced, separated or widowed in the country registered an HIV positive rate of 11.3% (THMIS 2011- 2112).<sup>18</sup> This is attributed to the fact that many children in marriage cannot negotiate safe sex, due to gender power imbalances, even when they know how to protect themselves. They are also under pressure to demonstrate their fertility. Child marriage promotes sexual activity at a very young age when bodies of girls in marriage are still developing and when they have little information on sexual and reproductive health including their rights to access and use contraception. Therefore, the study finds that there is a strong nexus between maternal/new-born mortality rates and the prevalence of child marriage in the study countries. It is further estimated that girls in marriage who become pregnant at age 15 years are five times more likely to die during delivery than their counterparts aged 20 years.<sup>19</sup> Should they survive childbirth; pregnancy related complications may scar them throughout their lives. For instance, obstetric

fistula is most prevalent among girls below 18 years of age at 65%.<sup>20</sup>

Case Study 1: Girls in marriage experience complications during and after delivering their first children

An interview with a child in marriage in Malawi revealed that during her first birth, she had complications during delivery. She was unable to push as she felt weak with no energy when the time for delivery arrived. When she asked after her delivery why she experienced this, the doctor told her that her body was not fully developed. In order to help her deliver, the nurses had to pull the baby out from her. This is regardless of all the pain and agony she underwent during and after delivery.

Source: UN Women field data (2018).

The study shows that upon getting married, the girl is usually under pressure from her husband and in-laws to become pregnant. This translates to early/teenage pregnancies, increased childbearing over time and quite often poor birth spacing. In all the ten countries of study, it was reported by key informants and community consultations that children in marriage were less likely to receive proper medical care during pregnancy and delivery than women who give birth much later. Not only were children in marriages physically immature during their pregnancy and childbirth but their lack of access and utilization of maternal and neonatal health services put the teenage mothers at greater risk of complications during pregnancy and delivery such as prolonged or obstructed labour, obstetric fistula and maternal deaths. This is affirmed by a study which concluded that complications of pregnancy and childbirth are the second leading causes of death among adolescent girls aged 15–19 years globally, with nearly 70,000 dying each year.<sup>21</sup>

Table 1: Maternal mortality ratio<sup>22</sup>

Name of country	Nigeria	Malawi	Nigeria	Morocco	Egypt	Ethiopia	D.R.C	Tanzania	Malawi	Mozambique
Maternal mortality rate	553	587	814	121	33	353	693	398	634	489

Source: WHO, UNICEF, UNFPA, World Bank Group and UNPD (MMEIG) - November 2015

The study also confirms that maternal and neonatal health consequences of child marriage go beyond the child bride to post-birth complications that also affect the new-born baby. New-borns of children in marriages are at substantially greater risk of perinatal infant mortality and morbidity, and stillbirths and new-born deaths are 50% higher in mothers younger than 20 years than in women who give birth later. According to the study respondents, children in marriages were also more likely to have babies with low birth weight and to encounter of nutrition challenges. Low birth weight among infants translates to a poor nutritional status which if not addressed early enough during childhood, further worsens leading to low cognitive skills and affecting levels of educational attainment. In Ethiopia for example, according to the Demographic Health Survey of 2011, neonatal mortality rates for children born to mothers below 20 years of age was approximately 50% higher than that of infants born to mothers in their 20s.<sup>23</sup>

The study reports that in all the ten countries of study, children in marriage are likely to become pregnant early and more likely to be poor than their peers, with more deficient nutrition and general health. This increases the likelihood of fetal, perinatal and maternal death and disability by as much as 50%.<sup>24</sup> Child marriage is closely linked to early childbearing with consequences that can be fatal. Complications resulting from pregnancy and childbirth are the second leading cause of death among adolescent girls aged 15-19 years old globally.<sup>16</sup> Research shows that girls aged 10-14 years are five times more likely to die during delivery than mothers aged 20-24 years; girls aged 15-19 years are still twice as likely to die during child delivery as women aged 20-24 years.<sup>25</sup> Women with formal education are much more likely to use reliable family planning methods, delay marriage and childbearing, and have fewer and healthier babies than women with no formal education. In all the ten countries, there was recorded high incidence of maternal and child mortality, especially in the hotspot regions.

Table 2: Infant mortality rates<sup>26</sup> across the countries under study

Name of country	Nigeria	Malawi	Nigeria	Morocco	Egypt	Ethiopia	D.R.C	Tanzania	Malawi	Mozambique
Infant mortality rate	61	56	69	25	16	48	69	43	42	65

Source: UN Women field data (2018)

In the study countries, the lack of agency among many children in marriage makes it more complicated for them to make healthy decisions regarding their maternal health. They cannot freely decide when, where and how they can take control of issues on their health without fear of intimidation or violence. Within the marital household, the child in marriage has very low bargaining power due to gender power imbalances. Her husband

and in-laws are the ones that usually determine her position and role in the immediate and extended family. Her access to and control of the family's resources is determined for her. This often becomes the pattern of the rest of her life in the marriage. This has a negative implication on her maternal health and translates to putting her life and that of her unborn or new-born baby at risk.

Children in marriages are faced with multiple vulnerabilities: they are young, mostly poor and with low levels of education since they have either dropped out of school or they never got to enrol in school in favour of their male siblings. Coupled with control by their male spouses and often in-laws, their ability to engage in gainful employment, where they can control resource, is limited. They have to ask for almost all the support they need in order to access maternal health services. At the household level, they have limited ability to negotiate with their spouses for sex, let alone safe sex, contraceptive use, child spacing, or the number of children. Their health and that of their children both unborn and born, are put at greater risk when they cannot have a say on when next to get pregnant, thus they end up with high birth rate levels. The study agrees with the position of UNICEF (2015) that countries with a high prevalence of child marriages also have high birth rate levels; for instance, West and Central African countries have the highest adolescent birth rates in the world, at close to 200 births per 1,000 girls.<sup>27</sup>

Table 3: Comparison between adolescent fertility rate<sup>28</sup> and birth rate<sup>29</sup> and total fertility rate<sup>30</sup> across the countries under study.<sup>31</sup>

Name of country	Niger	Mali	Nigeria	Morocco	Egypt	Ethiopia	D.R.C	Tanzania	Malawi	Mozambique
Adolescent fertility rate (15-19 years)	206	174	122	32	56	80	138	132	136	194
Birth rate	48	43	39	19	30	33	44	40	35	39
Total fertility rate	7.3	6.0	5.5	2.4	3.3	4.6	6.3	5.2	4.4	5.3

Source: UN Women field data (2018)

With limited access to and inability to control resources, children in marriage are often not able to access health insurance and are therefore left with only the option of spending out of pocket (OOP) whenever they access health care services. As a result of the obstetric complications they go through during pregnancy and child birth, the chances are that they will have high levels of OOP expenditures. OOP expenditure for health services at household level contributes greatly to perpetuating poverty for the huge majority of populations with low income levels and locks them out from accessing healthcare.

Case Study 2: Survivor's story-pregnancy as a matrimonial life ticket in Tanzania

Mwasite, a 17-year-old girl of Kitangiri Street in Shinyanga urban said that she dropped out from Busulwa Secondary school in 2016 after being made pregnant by a boda man (man who drives a motorcycle taxi) who used to give her money to buy her personal girl things like body lotion and pads. Her father chased her away from home and told her to go and get married to her "husband" (the putative father). She had nowhere else to go, hence she went to live with the grandmother of her "husband" for several months. Fortunately for her, the grandmother accepted her as an in-law grandchild. She, however, says that, the money that her husband used to give her, so often before she got pregnant, has since reduced and he is not so happy when she asks for money from him.

Source: UN Women field data (2018)

In Egypt for example, in the child marriage dominant governorates of Assiut and Souhag, 41% and 34% of Cesarean sections were conducted on married adolescents. And unfortunately, 26% of the girls in Assiut and a further 16% in Souhag of the girls operated on developed severe complications such as prolonged labour or bleeding, in their last child delivery. And worse still, only 27% of the child mothers accessed and received postnatal care in the two regions, services only minimally provided by the government but largely by the private sector. Child marriage diminishes their prospects of leading quality married lives by ushering them into a state of perpetual dependency and exposure to social and economic vulnerability.

Additional effects of child marriage identified across the ten countries include: lost educational opportunities; economic insecurity and continued poverty; contracting HIV/AIDS or STIs; inability to have a career; teen pregnancy, miscarriages maternal and infant mortality; verbal, physical, emotional and sexual abuse; lack of autonomy and psychological distress.<sup>32</sup>



### 3.2 Child marriage and contraceptive use

The use of modern contraceptive methods is low globally among children in marriage. For instance, in developing countries, 22% of adolescent girls (15-19 years) who are married or in a union use contraceptive as opposed to 61% of married girls of reproductive age 15-49 years. There is a high proportion of children in marriages (24%) who wish to use contraception but cannot access it; this forms the unmet need for contraceptive use, as compared to 11% of unmet contraceptive use among married women of reproductive age 15-49 years. As a result, low levels of total demand for contraceptives are satisfied among children in marriage aged 15-19 years, 43% versus 85% for married women 15-49 years.<sup>33</sup>

Table 4: Contraceptive use<sup>34</sup> across the countries under study<sup>35</sup>

Name of country	Niger	Malawi	Nigeria	Morocco	Egypt	Ethiopia	D.R.C	Tanzania	Malawi	Mozambique
Contraceptive use (%)	14	15	10	59	57	35	8	32	58	25

Source: UN Women field data (2018)

The study reports that low contraceptive use and high levels of unmet demand for contraceptive among married children in marriages perpetuates a vicious cycle of putting girls at risk of maternal mortality given the many obstetric challenges that teenage girls go through during pregnancy and childbirth. With their low agency in making health decisions, they have to depend on the will of their husbands or that of their in-laws, limiting their sexual reproductive health rights. Thus, interventions that address child marriages need to integrate with both sexual reproductive and maternal and neonatal health interventions. In addition, there is great importance attached to intervening against the deep-rooted norms that are adversely affecting sexual reproductive maternal and neonatal health. Unless this is done, it is unlikely that issues affecting women's health adversely will be eliminated.

### 3.3 Psychological consequences

The study established that child marriage is related to mental health risks such as depression, and suicide, among others. For example, in Ethiopia, girls who were married or knew they were likely to get married were more likely to have depressive symptoms and to have considered suicide than those for whom marriage was not yet planned. These girls according to the study more were more likely to have disturbed sleep, constantly feel under pressure and have low self-esteem and have low self-confidence, than girls who were never married.

An example is that of Amina Filali from Morocco. In 2012, Amina was raped at the age of 15 years and forced into marriage after her defiler, who was then 25 years old, traded in marriage to evade legal prosecution. The case may appear outdated or over publicized but the pain and the impact that it brought to the lives of many Moroccan girls endure. Living in a nightmare, Amina was submerged in unending domestic violence and one day, she decided to end it all. She ingested rat poison and died. This is an area that needs further exploration both in terms of prevention for girls at risk and long-term impact on those who experience child marriage.

Case Study 3: Attitude change; children in marriage say NO to future child marriages in Niger

Zainab Tahiru, 25 years

A man aged 35 years once saw a beautiful girl whom he liked. So, he approached her parents and asked for her hand in marriage. Zainab was 16 when her family received a bride price of an equivalent of USD.340. It was hardly two weeks between the proposal and the wedding and Zainab had never known her husband prior to this. She had never been to school and in the nine years since she was married, she gave birth to with three children, two girls and a boy.

Zainab's experience in marriage has been a difficult one. Her husband didn't have a stable income and therefore had difficulties in meeting their day to day needs. However, she believes that getting married saved her from falling into bad behaviour such as promiscuity and pregnancy outside marriage. She knows of girls from her village who got pregnant outside marriage and it was such a big dishonour for them and their families.

Zainab believes that child marriages aren't good and that if she could reverse the nine years she's been married, she would not accept the proposal. Neither would she allow her two daughters to go through child marriages like she did. She mentioned the obstetric challenges that teenage girls went through during pregnancy and birth. She knows of some of her friends who went through complications during pregnancy and birth and some who lost their lives. She says awareness programmes against child marriages on electronic media have made her understand that child marriages are not good and that girls should be left to grow, learn and get a good job to help her family.

Source: UN Women field data (2018)

### 3.4 Low enrolment, retention, completion and transition of girls in the education system

Child marriage many times interrupts or ends education for young girls. As soon as the girls get married, they no longer become easily admissible in schools. Even if a girl was willing to continue with education, there are domestic chores and the burden of childbearing and responsibilities of child care. Studies have revealed that the longer a girl stays in school, the longer she can delay marriage and the opposite is true. Additionally, education increases a girl's literacy rates. It is also highly likely that illiterate mothers place little value on the education of their children and this results in yet another generation with high illiteracy rates.<sup>36</sup> Unfortunately, governments of the countries in which children in marriage are prevalent do not have sound policies to rescue such girls. There may be no good centres to house them and ensure that they continue their education. In the Middle East and North Africa (MENA) countries such as Egypt and Morocco, pregnancies outside marriage (which includes teenage pregnancies) are not recognized, and adolescent mothers may not go back to school after having children. Even though the Moroccan Penal Code prohibits pre/extramarital sex, the Family Code does provide an opportunity for the recognition of children born under such circumstances. This can be done through two key ways; acknowledgment of the child's paternity by the father, production of an authentic medical certificate proving the birth, and a judicial decision that sexual intercourse occurred when the couple was publicly known to be together.

The study confirmed that most children in marriages have their education truncated when they move in with their husbands thus reducing their chances of acquiring skills with which they might empower themselves in a wide variety of opportunities. The probability of children in marriages replicating their lives to their offspring is also high, thus perpetuating a vicious cycle of poverty and entrenchment of these harmful cultural practices.

Respondents from all the countries of the study confirmed that children in marriage often have to give up education as they are expected to take up household responsibilities. This denies the girls the opportunity to be independent and to empower themselves. While it is believed that educating a woman can help educate future generations, the opposite also is true. An uneducated woman will not be able to educate her own children in case of financial difficulties or other adverse conditions.

Illiteracy also results in that the child is dependent on her family for sustenance and this puts her in a powerless situation leading to easy exploitation and abuse.<sup>37</sup> Ultimately, the level of educational attainment contributes to lowering maternal mortality rates as women with formal education tend to have more knowledge about health care practices and to be able to seek prenatal - and post-natal care.<sup>38</sup>

Education opportunities for girls in marriage are limited even where there is commitment to universal education and where a re-entry policy may exist (Malawi, Mozambique and Tanzania). Nonetheless, there are still many barriers facing the girls such as lack of access, long distances to school, safety, stigma discrimination against girls, poverty (lack of school fees and supplies, livelihoods and opportunity cost), lack of child care, and other gender roles.

#### Case Study 4: Tanzania - Pulled out of a classroom to forceful marriage

In Tanzania, Justina, a child aged 15 years and whom was then supported by AGAPE, told the study team that, her father's plan to force her into child marriage happened when she was about to join Busanda Secondary School after passing the national primary school examination. She said that, she cried a lot on the wedding day, not because she did not know the husband, she was going to marry but because she wanted to study. *'Education is everything ... I was doing well in primary school! I was always within ten best students ...!'* she said. She knows clearly that underage pregnancies are risky as some of the girls she knows had serious medical complications. The police officer interviewed said that the number of reported child marriage cases have tremendously decreased in Shinyanga: fewer than two cases are received per month at the gender desk, unlike in the past where, such incidents were reported almost every week.

Source: UN Women field data (2018)

### 3.5 Socio-Economic Consequences of Child Marriage

In most cases, child marriage leads to cycles of poverty for girls and their families. Child marriage affects educational attainment and the subsequent capacity to be economically independent through the labour market. Marrying as a child leads to school dropout, low completion rates and limited attainment of qualifications. In the ten countries studied the rates of employment for women was generally low with significantly lower rates in the hotspot communities. In some countries such as DRC and Northern Nigeria, the combination of early marriage and insecurity reduces the capacity of women in labour force.

A World Bank study that models the relationship between child marriage and educational attainment econometrically, shows that every year that a girl marries early (i.e., before 18 years) is associated with a reduction in the likelihood of completing secondary school by typically four to 10 percentage points, depending on the country or region. This leads to lower earnings for children in marriage in adulthood since a lack of



education prevents them from getting good jobs. In addition, child marriage also reduces education prospects for the offspring of children in marriages by curtailing their mother's education.<sup>39</sup>

### *3.6 Loss of freedom and isolation*

Girls in marriage usually lose their freedom of movement and interaction or have such freedoms hugely curtailed. For example, their husbands and "in-laws" prefer the girls visited by their families to allow them to go to their paternal homes.<sup>40</sup> In many cases, the married adolescent girls are barred by their husbands from going to social places such as markets, joining community development groups, and visiting youth centers in their communities.<sup>41</sup> Instances are not lacking where girls are barred from visiting hospital unaccompanied by spouses leading to health consequences. Isolating these girls in marriage in this way can have life-long negative impacts on the girl.

In all the ten countries of study, there were cases of girls who reported that once married, they would typically stay at home because of childcare, domestic labour, restrictions by the family, discrimination from peers, societal attitudes and control by the spouse. The study finds that staying at home prevents the girls from engaging with others or in programmes that would help to overcome the challenges they faced as a result of marriage. In Malawi, Egypt, Ethiopia and Tanzania, married girls identified few opportunities to connect with peers or to access much needed livelihood or education programmes. Some of the girls confirmed that they received individual support from religious leaders or family members, but they lacked peer networks and the opportunity to gain practical skills. This speaks to the loss of freedom and autonomy of girls over their own life.

The study further established from the analysis of community, national and regional interventions on ending child marriage in the countries of study that community members, parents, and programme implementers felt that more should be done to reach this largely neglected group and ensure that their future is improved and sustained. Marriage automatically causes an infringement of their right of association in addition to its relationship with sexual and gender-based violence.

### *3.7 Effects on voice and decision-making*

Children in marriage have limited 'power' to voice their opinions and in decision making. In getting married, the girl children acquire the responsibility of carrying gender roles that are performed by adult married women in their society. However, since they are still children, whose behaviour is not expected of married women, the reaction of adults around them is to treat them as children. This contradiction manifests itself through lack of decision-making power on issues that affect their personal lives, children and marriage. On the one hand, a married woman is accorded a certain level of respect that is not enjoyed by unmarried women, including participating in family discussions. On the other hand, this respect is negated by the lack of decision-making power. The support system of parents, relatives, peers and other community members might be available but maybe hesitant or not equipped to interfere or counsel.

Case Study 5: Becoming a child bride in Egypt is a nightmare for girls

Marrying children in Egypt is always a decision taken by the girl's guardian as well as the husband-to-be. In this context, decisions are still made for such girls. When they reach their "new homes," they argue with their husbands they may sometimes end up in entrenched gender-based violence including battering. Additionally, children in marriage perform many household chores, and they seldom have self-confidence in the work they do or the people they live with. They are mostly illiterate having dropped out or been pulled out of school by their conservative parents or guardians. For many girls, it is a big hurdle to come out of this situation even after they have secured a divorce. This is how Gemeela felt until she met the Ishraq programme. Recognising the hurdles that married girls face on their path to behaviour change and enhancement, ICRW began looking for children in marriage and enrolling them in Ishraq programme. The programme ensures that the girls restore their dreams through education and income-generating activities.

Source: UN Women field data (2018)

### Case Study 6: Mozambique- Consequences of Child Marriage

Yumina Carlos is a 16-year-old girl, who is one-year shy of completing her primary education at *Escola Primaria 3 de Fevereiro*. As an orphan, she was raised by relatives and faced challenges meeting basic needs. While in 7<sup>th</sup> grade, she started experimenting with sex the result of which was that she got pregnant. Realizing her predicament, she moved in with the family of the father of her child. The family accepted her and later informed Yumina's family and the union was recognized as a marriage at a time when both were below 18 yrs. The two now have a son who is three months old. Both families have accepted the union without any objections. However, the current living arrangements allows Yumina's husband who is currently 19-year-old to continue with his education attending evening classes while Yumina attends to domestic chores. She cooks, cleans and cares for the child supporting her mother-in-law.

Familial responsibilities make it difficult for Yumina to resume her education until a later time when the child is old enough and she can pursue her career of either becoming a doctor or a teacher. Material things like new clothes are enough to satisfy Yumina who views her own marriage as 'good'. Media, specifically TV, is her source of education where she has learnt about the use of contraceptives and this informed her decision to use implants. She is also aware of the health complications including obstetric fistula, but this did not deter her from engaging in the practice.

She notes that her situation is not new as many family members have been married off out of similar experiences. She notes that even younger siblings are already married at an early age. Though her pregnancy was normal, she is aware of pregnancy complications that occur to girls who marry early mentioning that she knows friends who also had to leave school as domestic chores make it hard for them to return. She notes that she is not scared of going back as the education system provides for different learning hours where adults prefer to take evening classes to improve their education. Notably, her husband is working and attends the evening classes.

Yumina notes that community leaders, such as those in her area of Massaca, do not educate the community and especially the girls regarding child marriage. Information about the need for marriage was provided to Yumina by her grandmother. However, she would like to pursue a career as a teacher or a doctor and realizes that only by education could this be accomplished. Her wish is for the government to be more proactive in championing for girl child education.

Source: UN Women field data (2018)

### Case Study 7: Mozambique children in marriage's life turned upside down

Lucia Jose from Cabo Del Gado province was married at the age of 16. Lucia went through the rites of passage of the Makonde community where she was secluded for a month and taught the roles of being a woman and wife. After the ceremony, she was informed that she was now an adult and can make decisions regarding what is right and wrong for her life. She could go out without supervision and during community events, engaged in a sexual encounter with the man and got pregnant. The man Efelio was 18 years old at the time and is the father to her children. (She has one child and is currently 5 months pregnant).

She did not fully comprehend the roles she was taking and, after a traditional ceremony named 'Lobolo', moved in to live with her husband. She has no birth certificate to confirm her age and what makes her sure is the age of a cousin born a year after her who has a birth certificate. Fearing the challenges of raising a child on her own coming from a poor family, she opted to live with her husband after the child was born. Lucia wants to go back to school but is yet to take the bold step as she has no one to care for her child while she attends school.

No one explained fully what it means to be a wife and therefore she is learning in the marriage. She states she didn't know what to expect apart from what she was told during the traditional ceremony. She does not use contraceptives as her aunt warned her against it on religious grounds. She is currently hawking on the streets selling Okra.

Source: UN Women field data (2018)

### 3.8 Sexual and Gender Based Violence

Child marriage is a form of gender-based violence and discussions with girls in marriage confirmed that girls across all the ten countries of study are generally more vulnerable to sexual, physical and emotional abuse than their adult counterparts when they married as children. Discussions with girls in marriage confirmed that girls across all the ten countries of study are generally more vulnerable to sexual, physical and emotional abuse than

their adult counterparts when married as children. Unfortunately, children in marriage are often not answerable only to their husbands but also to the entire extended family, which further broadens their scope of vulnerability. Even though all the countries studied ratified and committed to the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), gender-based violence among children in marriage has manifested itself through battering, marital rape, intimate partner violence (IPV) and honour killings particularly in the MENA countries (Egypt). Some married girls in such countries seemingly accept violence in their marriage, such as wife battering as part of trying to preserve the marriage at all costs and showing love to their partners; they find it shameful to report or discuss gender violence in their relationship in a society which treats such violence as a social norm. In Egypt, for instance, the study established that approximately 20% of married women in the 15-49 age bracket had experienced an incident of intimate partner violence in their marriage. The same finding was confirmed by the La Rabita Mohammedia des Oulémas' intensive campaigns in Morocco engaging religious leaders in eliminating gender-based violence through peer education. In a similar context, the Girls Not Brides Alliance in Malawi brings together 21 international and 50 local NGOs into a network to address challenges affecting girls and women with a wide variety of interventions providing support for girls in addressing sexual gender-based violence.

Girls in marriage are victims of continuous gender-based violence and are subjected to rape throughout the period they are in the marriage. Other forms of GBV they face include but are not limited to wife battering, sexual violence, child labour through performing unpaid care, domestic and farming work as well as emotional abuse from their husbands. The big gap between the age of a married girl and her husband in most cases fuels domestic violence in which the former is the victim. In Africa, many countries do not treat marital rape as a crime because it is not considered as such in their cultures and legal systems in many countries. Whenever it happens, girls in such marriages suffer in silence and rarely seek help. Because girls in marriage lack education, their risk of exposure to domestic violence is higher compared to their educated and older counterparts.<sup>42</sup>

Studies across nations have indicated that the younger the child in marriage, the higher the chances of domestic violence against her. With little information about rights within marriage, limited access to legal assistance, restricted rights to obtain a divorce, child custody laws and inheritance, such girls in marriage remain trapped in violent unions. All these factors together exacerbate abusive child marriages.<sup>43</sup> Millions of children in marriage, some only just past puberty, are denied access to health, education and economic opportunities (Parsons, et al., 2015).<sup>44</sup> For many of these girls, marriage means the end of their educational, drastic reduction of vocation or career opportunities and curtailment of their foundation life choices. This ultimately denies them the opportunity to enjoy their rights as children and their integral human development. Instead, the majority are burdened with roles and responsibilities of wives and mothers without adequate support, resources or capabilities. The international response, including the United Nations Agenda 2030 for Sustainable Development, consistently emphasizes the urgency and the importance of ending child marriage (see Sustainable Development Goal 5, target 5.3).

#### 4. Recommendations from the Study

The paper is conscious that child marriage has far-reaching health, social, economic, and political effects and consequences for the children in marriage, girls and their communities. A number of recommendations that relate to those specific issues have been discussed in separate paper series for the study which relate to causes and drivers of child marriage, mapping of interventions and policies on child marriage, analysis of challenges related to child marriage and analysis of common manifestations of child marriage have been offered in other paper series related to the same study. The following are the key recommendations of the paper which complement those covered in the other paper series from the study:

- i. **Review and standardize programme and intervention design on ending child marriage:**  
The study established a lack of clear *conceptual frameworks, theories of change or monitoring and evaluation frameworks or plans for implementation of child marriage interventions*. Due to the complexity of the issue of child marriage, the study recommends that a regional level conceptual framework, theory of change and M&E framework be developed by various stakeholders particularly the African Union under the auspices of the Campaign on Ending Child Marriage to guide intervention programming. These frameworks should incorporate the three levels of an ecological model - structural, social/community and behavioural- to design interventions appropriate for each level of targeted outcomes. Presently, there is disproportionate emphasis on structural interventions - laws and policies, religion and the political economy - at the expense of individual agency - a focus on girls' behaviours and family decision-making.
- ii. **Economic empowerment and social protection policies:** Programmes that economically empower children in marriages should be initiated or supported. These might include: income generating projects; skills training, savings clubs; business training that creates permanent livelihoods and self-sufficiency.
- iii. **Harmonization and consolidation of national interventions on child marriage:** The study established the existence of a variety of laws and policies across the ten countries. However, the challenge noted in the

countries were the existence of many laws and policies that provided loopholes and ambiguities which made it possible for some forms of child marriage to be both legal and illegal, especially when viewed from customary versus statutory lenses as in the case of Tanzania's *Law of Children Act 1971* setting age of marriage for girls at 15 years for boys at 18 years while Tanzania's Constitution which is not clear on the minimum age of marriage. Some countries like Mali and Tanzania also have exemptions from the minimum age of marriage, a situation which complicates policing, enforcement, prosecution and compliance related to country laws and policies on minimum age of marriage. The study thus recommends that countries should work to harmonize the various laws both in their content and spirit to close off any loopholes that perpetrators use to escape legal sanctions and punishment. At national level harmonization of laws and their application procedures will strengthen enforcement practices.

- iv. **Integrating child marriage prevention and response into gender-based violence programming:** All programmes related to sexual and gender-based violence should include child marriage as a critical component. The study countries are encouraged to promote more equitable societies that are safer for women and girls through laws and policies related to inheritance, asset ownership, economic entitlement, and family law. When and where laws exist and are violated, girls need access to justice through legal -aid and paralegal professionals who are educated on the issue of child marriage and the needs of married adolescents.
- v. **The education system needs strengthening to improve access, enrolment, retention and completion of school by girls with special efforts to reduce the wide gender gaps that continuously disadvantage the girl child:** Governments and development stakeholders should commit the resources necessary to guarantee access to free, compulsory primary and secondary education for all girls and boys. In the 10 countries, education is key for economic empowerment of girls so as to improve their opportunities for better income, hence better livelihoods and in turn to address poverty as the leading driver of the practice of child marriage. The return to school policies such as those in DRC, Malawi and Mozambique need to be encouraged as they ensure more girls get opportunities to explore on their potential for better future. Education further provides girls a safe space where they can articulate their issues and concerns and also learn from others about the dangers associated with child marriage, and generally go through the natural motions of growing up without simultaneously carrying the burdens of reproductive and productive roles. Stakeholders are encouraged by the study to create non-monetary and monetary incentives, and/or to provide public social transfers for school attendance. Incentives can range from covering transportation costs, to covering school fees, to giving cash transfers for attendance, to providing hot meals.
- vi. **Actively engage girls in all decisions affecting them especially regarding investments, programming and policies on gender equality, Sexual and Reproductive Health and Rights in general and child marriage in particular:** The study has established that it is imperative to effectively engage girls and young women in major discussions and decisions that affect them directly or indirectly such as those about child, early and forced marriage and its underlying causes and consequences. This follows the fact that Africa and particularly the study countries have all ratified the CRC which they agreed to respect and promote. Accordingly, countries should create a safe, favourable and enabling environment for girls and young women's effective participation. Girls' voices have great power to break the silence about child marriage and to give real life evidence for making the case at national and international levels, engaging communities, political leaders and policy makers. Putting girls' voices at the centre of the desired social change ensures transformational change that addresses the needs of girls. It also showcases girls' own initiatives and interventions in ending child marriage as active participants.
- vii. **Integrate interventions that address child marriage with sexual reproductive, maternal and neonatal health interventions:** intervening against the deep-rooted norms adversely affecting sexual reproductive maternal and neonatal health is critical. A study by Walker summarized possible interventions that can be cascaded at country levels across the ten study countries.<sup>45</sup> Respective governments thus need to develop and/or strengthen sexual and reproductive health policies to ensure youth friendly services are provided to young girls who find themselves pregnant in order to address complications related with early pregnancy.
- viii. **Develop a coordination and peer review mechanism for all stakeholders working on child marriage at community and national levels:** The study shows that different agencies implementing community and national interventions and programmes duplicate efforts and in certain cases do not synergize with government efforts. Accordingly, agencies need to work together with government in order for the interventions to have effect whereas working in silos only negates achieved results. Besides the periodic meetings and fora organized by the African Union and other agencies which provide great learning opportunities among different countries in Africa, there is little inter-country coordination and monitoring of efforts. A common mechanism would also inform a coordinated regional research and information management agenda while also incorporating emerging lessons and innovations into child marriage interventions, policy and investment options.

- ix. **Psycho-social services and safety spaces/structures:** develop and enhance programmes to minimize and cope with psychological consequences such as mental health risks; trauma of abrupt termination of childhood; loss of freedom and isolation; loss of voice and decision making; and dealing with gender-based violence should be initiated or scaled up at local levels. The programmes could include counselling services; and group activities with peers.
- x. **Tap on media in engaging community to change harmful social norms:** Efforts aimed at changing family and community attitude towards child marriage require massive campaigns to reach as many people as possible. Communities across the continent have no choice but to engage young people to educate them about the dangers of girls marrying under the age of 18 years. According to respondents in the 10 countries, it was established that the use of extensive communication via media including social media has great impact in informing and offering real support for change designed to eradicate child marriage in Africa and beyond. The findings further indicated that use of mass media can strengthen awareness of the general laws and policies pertaining to child marriage particularly among the public which is often less informed on such issues. Additionally, respondents pointed out that mass media campaigns and strategies have been instrumental in capturing governments' and other policy making bodies' attention on issues regarding child marriage including exerting pressure for policy and legislative changes in most countries.
- xi. **Behavioural interventions, agency and male involvement on ending child marriage:** In all the countries studied, a clear gender-divide emerged: women and girls are victims while males are predominantly perpetrators and decision makers in child marriage. To lead transformation, there is an urgent need for robust sensitization and awareness creation to trigger change of behaviour in both males and females. Thus, the study recommends design and implementation of standardized, gender responsive, do no harm and context responsive evidence-driven interventions that can enhance the **agency of girls** while at the same time, educating males on the negative effects of child marriage while also building on male responsibility and accountability. There is need to scale up and reinforce traditional complementary ways of redress and justice within national law enforcement and justice systems. Through regional technical forums, a male involvement strategy should be developed and integrated with/into the behaviour change interventions.

## 5. Conclusion

The study affirms that child marriage in all the ten countries of study has far-reaching health, social, economic, and political implications for the girl and her community. It truncates a girl's childhood, creates grave physical and psychological health risks, and robs her of internationally recognized human rights.<sup>46</sup> From the countries studied, several effects were identified. The effect of this unholy alliance is felt on the health, education and social development of the children, their families, communities and even countries. In all the ten countries, there was a high incidence of poverty – at household, community and national levels. This agrees with other studies that have highlighted the fact that in communities or households where women are exploited or subjected to violence, poverty is often common and severe. Within the countries studied, child marriage hotspots tended to be among the countries' poorest areas with low literacy and poor health indicators.

The effects on the community and family follow the trends at the national level. Families that practice child marriage are often poor and lowly educated. Whereas this is the mostly the foundational condition (linked to causality rather than consequences) it generates a vicious generational cycle where those married early are in turn likely to marry their children early. At an individual level, child marriage has harmful effects on girls' health, psychological development, human rights and economic survival. Child marriage curtails the victim's education and their social growth. In most cases, it starts a lifelong dependency, especially for girls and results in becoming subject to abuse and violence.

## About UN Women

The research is funded and led by UN Women East and Southern Africa Regional Office (UN Women is the UN Agency dedicated to gender equality and the empowerment of women. As a global champion for women and girls, UN Women was established to accelerate progress on meeting their needs worldwide. With a vision of equality enshrined in the Charter of the United Nations, UN Women works for the elimination of discrimination against women and girls; the empowerment of women; and the achievement of equality between women and men as partners and beneficiaries of development, human rights, humanitarian action and peace and security. UN Women also coordinates and promotes the UN system's work in advancing gender equality, and in all deliberations and agreements linked to the 2030 Agenda. The entity works to position gender equality as fundamental to the Sustainable Development Goals, and a more inclusive world. It supports UN Member States as they set global standards for achieving gender equality and works with governments and civil society to design laws, policies, programmes and services needed to ensure that the standards are effectively implemented and truly benefit women and girls worldwide. It works globally to make the vision of the Sustainable



Development Goals a reality for women and girls and stands behind women's equal participation in all aspects of life. It is especially invested in its commitment to end all forms of violence including child marriage across the globe. UN Women envisions a world where societies are free of gender-based discrimination, where women and men have equal opportunities, where the comprehensive economic and social development of women and girls is ensured so that they can lead the change that they want to see, where gender equality and women's empowerment are achieved, and where women's rights are upheld in all efforts to further development, human rights, peace and security including ending discriminatory practices such as child marriage).

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- <sup>3</sup> Ibid.
- <sup>4</sup> UNFPA, 2013
- <sup>5</sup> The World Bank: Educating girls, ending child marriage; 2017
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- <sup>27</sup> UNICEF (2015) Child Marriage, Adolescent Pregnancy and Family Formation in West and Central Africa. Patterns, trends and drivers of change
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- <sup>29</sup> The annual number of births per 1,000 total population
- <sup>30</sup> The average number of children a woman would have assuming that current age-specific birth rates remain constant throughout her childbearing years (usually considered to be ages 15 to 49).
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