EQUALITY FOR GIRLS IN CRISIS

ADAPTING CHILD MARRIAGE AND ADOLESCENT GIRLS’ PROGRAMMING DURING COVID-19 PANDEMIC

TECHNICAL BRIEF
INTRODUCTION

COVID-19 is likely to have a significant impact on the implementation of interventions to reduce child marriage, particularly because of containment policies, including social distancing requirements, implemented in many countries. Researchers had previously projected that a well-defined package of interventions to reduce child marriage – by empowering girls, keeping them in school, and addressing social and cultural norms around early marriage – would reduce the number of child marriages by almost 60 million between 2020 and 2030. Deferring the implementation of this package by just one year, on average, will reduce the number of child marriages averted by an estimated 7.4 million.

In addition to reducing the efficacy and reach of such planned interventions, the pandemic is expected to cause a severe worldwide economic recession. This economic downturn will probably have a large impact on poverty levels in low-income countries, where child marriage is most prevalent. Because poverty is a key driver of child marriage, these economic impacts are expected to increase rates of child marriage in vulnerable communities. Although the ultimate size of the economic impact is still impossible to predict, one estimate has placed the reduction in gross domestic product (GDP) per capita in the range of 5 to 20 per cent.

Should the reduction in GDP per capita be 10 per cent, then an estimated 5.6 million additional child marriages are likely to take place between 2020 and 2030.

The total effect of the COVID-19 pandemic is therefore projected to result in 13 million additional child marriages.¹

This guide was developed to help United Nations Population Fund (UNFPA) country offices and partners working on child marriage and adolescent girls programming to adapt their interventions in light of the COVID-19 pandemic. Recommendations focus on (a) marginalized girls, (b) the family and community environment, (c) strengthening systems, (d) addressing drivers of poverty, (e) laws and policies, and (f) data and evidence. Although the note is structured around the programmatic framework of the UNFPA–UNICEF Global Programme to End Child Marriage, it is relevant to anyone working on child marriage or adolescent girls’ issues more broadly.

1  Explore modalities for the remote delivery of asset-building, comprehensive sexuality education (CSE), and social and behaviour change communication (SBCC) interventions, including COVID-19 messaging, as appropriate.

2  Consider programme timelines that are more compressed (such as fewer sessions later in the year, and smaller groups and outdoor areas to avoid large gatherings).

3  Ensure continuity of essential services supported before the COVID outbreak, particularly for adolescent sexual and reproductive health and rights.

4  For programme countries, procurement of equipment to support programme modifications is permitted – for example, radios for communities, and mobile phones for female mentors, to help them stay in touch with adolescent girls.

5  Programme countries should plan to scale back interventions and targets when implementation is no longer feasible because of containment policies – this will not jeopardize future funding allocations. Work plans and budgets should be updated accordingly.
INTENSIVE SUPPORT TO THE MOST MARGINALIZED GIRLS

Underserved/marginalized adolescent girls (aged 10–19 years) who are at risk of child marriage, married, divorced or widowed, and adolescent girls who are pregnant or already have children, are engaged in gender-transformative life skills and CSE programmes that build their knowledge, skills and awareness of their rights and connect them to services.

Adolescent girls are supported in enrolling and remaining in formal and non-formal education, including during the transition from primary school to secondary school.

SUGGESTED ADAPTIVE STRATEGIES

→ Enable mentors to check in with girls by phone on their well-being and their needs

→ Equip mentors with information on what services are available and where (gender-based violence (GBV) and other basic needs) so that they can serve as a network of support and referrals for girls and their families

→ Use digital and broadcast media outlets to disseminate CSE and life skills content with information on protecting oneself and families against COVID-19 (see repository of UNFPA-supported mHealth solutions)

→ Support entertainment education featuring stories about child marriage, adolescent pregnancy, GBV and girls’ education during emergencies (see the programme currently supported by UNFPA and a partner organization for SBCC)

→ Promote the inclusion of CSE and life skills curricula in distance learning and self-study approaches through the formal education system, as well as non-formal alternatives

→ Reinforce messaging about the importance of continuing education and school completion when communicating with girls and families

→ Ensure that adolescent girls, particularly those who are married or pregnant, have the appropriate support to return to school when containment measures have been lifted
Family and Community Environment

Boys and men are engaged in gender-transformative programmes (including CSE for boys) that promote healthy relationships, positive masculinities and gender equality.

**Suggested Adaptive Strategies**

→ Use local radio, short message service (SMS) and social media to disseminate messages about positive masculinities, engage men and boys (particularly in GBV prevention), and urge them to take equal responsibility for domestic chores and care work

→ Emphasize the role of male figures in preventing child marriage and its consequences for adolescent girls

Families, communities, traditional and religious leaders, and other influencers are engaged in dialogue and consensus-building on alternatives to child marriage (including education), the rights of adolescent girls and gender equality.

**Suggested Adaptive Strategies**

→ Use local radio and fixed-site public address systems to emphasize the importance of community support for children and adolescents, particularly girls who may be carrying caregiving burdens, living in unsafe environments, and at risk of child marriage and other violations of rights

→ Share messages on the importance of protecting adolescent girls from child marriage and promoting their rights to education and equal opportunities during this pandemic with traditional, community and religious leaders, and other influencers

→ Strategically place the programme's messages in supermarkets, pharmacies and other essential businesses and institutions that remain open. Where present, consider working with mosques to disseminate information through their loudspeaker systems
Women’s organizations and youth-led organizations are included and supported in mobilizing the voices of the marginalized (particularly girls), challenging harmful social norms and promoting gender equality.

**SUGGESTED ADAPTIVE STRATEGIES**

→ Continue to support organizations working on the frontlines of the pandemic

→ Support youth activism and programming (see scripts and other assets from UNFPA’s Youth Against COVID-19 campaign in partnership with Prezi; also available on Trello)

→ Support the visibility of women’s organizations and youth-led organizations in local media and social media, to raise awareness of child marriage, GBV and other vulnerabilities that adolescent girls, women and young people may face because of COVID-19
SYSTEM STRENGTHENING

Formal (primary and secondary) and non-formal schools are supported in providing quality, gender-responsive education for adolescent girls, including CSE.

SUGGESTED ADAPTIVE STRATEGIES

→ Support the inclusion of digital CSE programming in online education systems

→ Advocate the inclusion of CSE in alternative national education programmes that are being rolled out because of COVID-19 containment policies

→ Advocate policies that can ensure married and pregnant girls can return to school after containment measures have been lifted (see human rights analysis of discrimination against pregnant girls and adolescent mothers in education)

Health (including sexual and reproductive health), GBV and child protection systems are supported in implementing guidelines, protocols and standards for adolescent-friendly and gender-responsive coordinated, high-quality services for unmarried, married, divorced and widowed adolescent girls, and adolescent girls who are pregnant or already have children.

SUGGESTED ADAPTIVE STRATEGIES

→ Support the continuation of comprehensive ASRH services (e.g. contraceptive, maternity), including through phone, SMS, and chat-based helplines and consultations (see repository of UNFPA-supported mHealth solutions)

→ Support age-responsive actions to address the specific needs of adolescent girls in GBV prevention and response, including providing messages on age-specific elevated risks, such as dating violence, and ensuring the safety of girls in shelters or other institutions

→ Advocate the removal of restrictive consent requirements, waiting periods and other onerous policies for adolescents accessing sexual and reproductive health services

→ Support the continued capacity-building of health-care and social workers, through virtual training sessions if possible. Ensure that they not only have access to accurate, up-to-date information that they can pass on to communities but also know how they should record and deal with any feedback, concerns or complaints that they receive from service users or community members
POVERTY DRIVERS

Partnerships with governments, civil society organizations and other implementers are supported to ensure that social protection, poverty reduction, and economic empowerment programmes and services are adolescent-friendly and gender-responsive and reach the poorest adolescent girls and their families.

DATA AND EVIDENCE

Capacity-building and technical support are provided to governments and civil society organizations so that they can generate and use quality data and evidence on what works to end child marriage and support married girls.

SUGGESTED ADAPTIVE STRATEGIES

- Partner with social protection initiatives and institutions to ensure support for those adolescent girls and families who are at risk of engaging in child marriage (see evidence that, in every region of the world, the poor are most at risk of child marriage).
- Highlight the conditions of girls in informal work who face a loss of livelihoods and/or more dangerous work conditions.
- Advocate ensuring that poverty alleviation programmes, including cash transfers, are accessible to girls at risk of child marriage and their families during the COVID-19 outbreak.

- Continue to support previously planned research design and analysis stages during confinement (see UNFPA resource on adapting evaluations).
- Compile reports, if possible, on the short-, medium- and long-term effects of COVID-19 on girls and their families, particularly in terms of child marriage, and SRHR more broadly (see internal knowledge management templates and a highly cited study from Sierra Leone as an example).
**LAWS AND POLICIES**

Capacity-building and technical support are provided to governments to enact, enforce and uphold laws and policies, in line with international human rights standards aimed at preventing child marriage, protecting those at risk and addressing the needs of those affected.

→ Support policy dialogue to ensure that COVID policies and programmes at the national and subnational levels are respectful of human rights standards for adolescent girls (such as upholding the right of girls at risk of marriage or married girls to still seek asylum, and their right to express what is going on with them and their communities)

→ Support policy dialogue to direct multisectoral investments during and after the pandemic towards populations that are most exposed to, most susceptible to and most impacted by COVID-19 (and thus most at risk of engaging in child marriage as a coping mechanism) (see useful framework for risk factors that can be adapted to this context)

→ Advocate continued investments in health, education and protection policies and programmes aimed at longer term gender transformation and socioeconomic well-being

→ Support civil society and other voices to ensure state and government accountability, particularly to marginalized girls and their families
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