

CHILD, EARLY AND FORCED MARRIAGE AND UNIONS POLICY BRIEF

OCTOBER 2020

CHILD, EARLY AND FORCED MARRIAGE AND UNIONS PLAN INTERNATIONAL'S POSITION STATEMENT

OVERARCHING POLICY POSITIONS

- Plan International condemns the practice of child, early and forced marriage and unions which is a violation of human rights, a harmful practice and, in some cases, a form of gender-based violence.
- In line with the Joint General Recommendation No.31 of the Committee on the Elimination of Discrimination Against Women/ General Comment No.18 of the Committee on the Rights of the Child (2019) on harmful practices, Plan International believes that all countries should set a minimum age of marriage of 18 and require the free, full and informed consent of both parties. This should apply to both girls and boys, and there should be no exceptions, including any requiring parental, spousal or judicial consent. Countries should also ensure that national laws to this effect take precedence over any conflicting provisions under customary, religious and traditional law.
- Plan International believes that universal birth and marriage registration, including through the use of civil registration and vital statistics systems, is vital in protecting girls against CEFMU by providing a means of verifying the age of parties to a marriage.
- Plan International believes that, given its multiple causes and consequences, ending CEFMU requires a multi-sectoral and coordinated approach to prevention and response. Action to eliminate CEFMU must involve strong commitment, funding and concerted action by stakeholders at multiple levels, including individual, family, community, national, regional, and international, including strategies to address harmful gender norms which continue to drive the practice of CEFMU

Young people should be recognised as partners and agents of change in the eradication of CEFMU and youth engagement should be supported and facilitated in policy-making and accountability mechanisms at all levels, including international human rights treaty monitoring mechanisms, as well as in the design of CEFMU-focused interventions. Specific efforts should be made to promote the inclusion and involvement of young people from marginalised groups. Adequate support, training and flexible funding must be provided to young people engaging in advocacy and activism and strong safeguarding measures must be put in place.

CEFMU AS A WAY TO CONTROL FEMALE SEXUALITY

- Plan International believes that the practice of CEFMU is grounded in harmful gender norms, including the control of female sexuality. For CEFMU to be eliminated, it is crucial to challenge these harmful social and gender norms to ensure that girls and young women have autonomy over their bodies and their sexual and reproductive health and rights.
- Plan International believes that in order to eliminate CEFMU, tackle harmful practices and transform gender norms, key actors within communities must be meaningfully engaged and supported to lead efforts to tackle the practice, including girls themselves, parents, traditional and religious and community leaders, teachers, media outlets, boys and men, and young women role models and activists. We believe intergenerational dialogue which engages communities can

be transformative in addressing patriarchal and social norms which lead to CEFMU.

Plan International believes that comprehensive sexuality education (CSE) is an essential component of eradicating the practice of CEFMU. All children, adolescents and young people – without discrimination – should receive CSE to ensure they gain knowledge, explore values and attitudes, and develop the skills they need to make conscious, healthy and respectful choices about relationships and sexuality.¹ CSE should aim to provide accurate knowledge about sexuality in order to support the eradication of harmful practices

THE LINK BETWEEN ADOLESCENT PREGNANCY AND CEFMU

- Plan International is committed to upholding the rights of all girls and young women to safe and healthy relationships and ensuring they can make informed decisions about their SRHR. This includes decreasing unintended and unwanted adolescent pregnancy, particularly in younger adolescents (10-14-year olds), and to supporting adolescent mothers. We recognise that adolescent pregnancy is a major contributor to maternal mortality and morbidity, and we also recognise that adolescent pregnancy can be both a driver and a consequence of CEFMU.
- We believe that unintended and unwanted adolescent pregnancy can and should be prevented. This requires challenging gender discriminatory norms and ending sexual violence against girls; strengthening girls' agency and ability to make autonomous and informed decisions about their sexual and reproductive health; ensuring the provision of CSE and ensuring that health systems and services meet the specific needs of adolescents (in line with the Committee on the Rights of the Child General Comment No. 15, paragraph 56).
- Plan International believes that education is a human right and can be transformative in promoting gender

equality. It can be a powerful tool for delaying unintended adolescent pregnancy and early childbirth. Ensuring girls' access to quality education and removing discriminatory barriers that prevent pregnant girls and young mothers from completing their education is essential in eliminating the practice of CEFMU.

Plan International believes that girls and young women affected by crises are at particular risk of unintended and unwanted pregnancy owing to a range of factors. These include lack of access to SRHR services, disruption to education and CSE, economic stress resulting in increased sexual exploitation in exchange for food or money, and an increase in CEFMU.

AGE OF CONSENT FOR SEXUAL RELATIONS

- Plan International supports laws that recognise children, adolescents and young people as rights holders with evolving capacities and maturity to make decisions about their own health, including their sexual and reproductive health and rights.
- Plan International believes that laws governing the age of sexual consent should be determined separately to that of the minimum age of marriage or the age to access sexual and reproductive health services, to ensure adolescents who are engaging in healthy consensual sex with those of a similar age are not stigmatised and criminalised. The age of consent should also be the same for all adolescents regardless of gender or sexuality.
- Plan International believes that all nonconsensual sexual activity must be criminalised, within and outside of formal and informal marriages and unions, in order to protect all children and young people from abuse and exploitation.

Child, Early and Forced Marriage and Unions Policy Brief

SITUATION OF MARRIED GIRLS

- Plan International recognises that many girls and young women who are married experience high levels of physical, psychological, and sexual violence at the hands of their partners, as well as the denial of economic resources and restricted mobility. The root causes of this are discriminatory gender norms and unequal power dynamics that are exacerbated by CEFMU. Changing deeprooted norms and attitudes that normalise and justify violence against girls and women is critical to ending gender-based violence against girls and young women, including CEFMU.
- We believe the provision of care and support to survivors of violence is essential to protect and fulfil the rights of married girls. This should include the provision of healthcare and protection services, including case management and psychosocial support (with referral to more specialised mental health services as needed) and access to quality, gender and age responsive SRHR services.
- Plan International believes that married girls must be better considered in programming and efforts must be made to shift the social norms which drive their exclusion from programme development. They must be supported to ensure that they are able to access SRHR services, continue and complete their education, have access to economic opportunities and access to justice.
- Plan International believes that married girls have the right to seek divorce or annulment of marriage and that access to a justice system should not be prohibited by unnecessary costs or discriminatory processes.

CRIMINALISATION OF CEFMU

Plan International believes that criminalisation of CEFMU is not the most effective legal approach in the majority of cases as it is resource heavy and risks driving the practice underground and can force families apart during times of crisis.

Instead, we support the implementation of a strong legislative framework which sets a minimum age of marriage as 18 with free and informed consent regardless of gender and ensures that national law takes precedence over customary or religious law. This should be accompanied by policies and programmes which address the root causes of CEFMU and which tackle gender inequalities and harmful gender norms, through engagement with families, communities, traditional, religious and cultural leaders.

CEFMU IN HUMANITARIAN SETTINGS, INCLUDING COVID-19

- Plan international recognises that mitigating the risks of CEFMU and other forms of gender-based violence are a shared responsibility of all humanitarian actors. Human rights should be upheld in times of crises and all actors hold the responsibility to ensure activities do not lead to or perpetuate further discrimination, abuse, violence, neglect or exploitation – including the practice of CEFMU.
- Plan International believes that it is essential to prioritise and fully fund efforts to tackle CEFMU during humanitarian crises and during the COVID-19 response and recovery in order to ensure girls do not bear the brunt of the impact.
- Plan International recognises that the heightened vulnerabilities of girls to CEFMU during and after humanitarian crises are due to the breakdown of social institutions and structures and exacerbation of gender inequalities. In order to address these vulnerabilities, Plan International supports the delivery of comprehensive case management services that link multisectoral approaches coordinated across sectors, working across the individual, family, community and societal levels, in order to prevent and respond to CEFMU, including the

involvement of men and boys and community leaders.

- Plan International believes that humanitarian actors should ensure that a gender, age, disability and inclusion lens is applied to all aspects of humanitarian response, and that all possible measures are taken to prevent and respond to child, early and forced marriage, including support to girls who are already married or in a union.
- Plan International supports the full and comprehensive implementation of the Minimum Initial Service Package (MISP) in all humanitarian settings to fullest extent of the national law. Strong coordination among SRHR and protection actors is essential in reducing gaps and duplication.

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INTRODUCTION

Child, early and forced marriage and unions (CEFMU) is a harmful practice and a violation of children's rights and the rights of girls and women, as well as a fundamental impediment to human development. In some circumstances, it can also amount to a form of gender-based violence. There is also a close link between CEFMU and early pregnancy. While boys can also be affected by child marriage, CEFMU has particularly adverse effects on girls and young women, curtailing their education, social engagement and economic empowerment, violating their sexual and reproductive health and rights (SRHR), limiting their autonomy and placing them at increased risk of violence. CEFMU has serious life-threatening and long-term consequences for girls and women, and also negatively impacts their broader families, communities and societies.

The purpose of this policy brief is to bring together and supplement Plan International's position on CEFMU as outlined in our position papers, such as the papers on <u>SRHR</u> and the <u>Rights of Children and Young</u> <u>People to Live Free from Violence</u>. Further, it draws on research conducted by Plan International and others and programmatic practice, and includes case studies from our work globally to:

- Provide positions and recommendations to guide our programme and influencing work on CEFMU, including our global advocacy priorities, and;
- Focus on key topical issues, including CEFMU in the context of the COVID-19 pandemic.

CEFMU has been an area of focus for Plan International for more than a decade at local, regional and global levels. We are renowned for our work in this area and have had notable achievements in tackling this issue via our programme and influencing work. We are also undertaking new research to inform how we should prevent and respond to CEFMU in humanitarian settings.²

Plan International's Global Strategy for 2017-2022, '100 Million Reasons', positions CEFMU under the Decide Area of Global Distinctiveness (AoGD) which aims for girls to have 'control over their lives and bodies, and make informed choices about identity, relationships, and if and when to have children.'³ However, it is recognised that CEFMU is a complex and multifaceted issue, with links across thematic areas such as protection from violence, SRHR, education, economic empowerment, early childhood development, and the rights of girls to be involved in decisions about their lives. Plan International's Global Advocacy Strategy also highlights CEFMU as a special area of focus for the organisation. As such, it requires a multi-sectoral and comprehensive response. In addition, drivers of CEFMU are greatly exacerbated by acute and protracted crises as well as seasonal or *ad hoc* weather-related disasters, which are being worsened by climate change. In light of this, CEFM is a growing priority for Plan International's humanitarian work.

In 2018, a Global Review of Plan International's programming and influencing work on CEFMU looked at the organisation's overall frameworks, strategic approaches and key interventions related to CEFMU.⁴ This policy brief has been developed in response to a recommendation to clearly articulate Plan International's position on CEFMU across development and humanitarian settings, with the aim of ensuring a harmonised approach and understanding across the organisation.

TERMINOLOGY

Whilst it is recognised that there is continued debate around terminology,⁵ Plan International uses the term CEFMU to reflect current UN terminology but also to encapsulate informal unions, which are also widely recognised as being akin to child, early and forced marriage, though without the legal status of a marriage. Informal unions are particularly widespread in Latin America but also increasingly prevalent in other regions.⁶

Plan International defines CEFMU as any marriage or informal union, whether under civil, religious or customary law, with or without formal registration, where either one or both spouses are under the age of 18 and/or where the full and free informed consent of one or both of the parties has not been obtained.

The comprehensive term 'Child, early and forced marriage and unions' is used to encompass a number of different scenarios:

- "Child marriage" which is a formal marriage or informal union in which at least one of the parties is a child (i.e. under 18 years of age) and where full consent is therefore lacking.
- "Early marriage" which is often used \geq interchangeably with 'child marriage' and refers to marriages/unions involving a person under 18 in countries where the age of majority, (meaning the age at which someone is considered an adult), is attained earlier than 18 or upon marriage. Early marriage can also refer to marriages where both spouses are 18 or older but other factors make them unready or unable to consent to marriage, such as their level of physical, emotional, sexual and psychosocial development, or a lack of information regarding the person's life options.7
- A "forced marriage" which is where one or both partners, regardless of age, has not given, or been able to give, their full and free consent to the marriage/union and is unable to leave the marriage, including as a result of duress or intense social or family pressure. Forced

marriage can involve physical, psychological, or financial coercion and can occur in a variety of circumstances such as human trafficking, or arranged and customary marriages. Adults also experience forced marriage and therefore not all forced marriages are child marriages.

Unions refers to informal marriages or free unions that are particularly common in Latin America and the Caribbean (but also increasingly happening in other parts of the world) and which are to all intents and purposes equivalent to formal marriage, though without the legal status of a marriage. These unions are often not formalised by the state or religious authorities, making it difficult to account for them and collect sufficient data on the issue. Several different terms are used to name and describe these unions, including consensual or self-initiated union, early union, and cohabitation.⁸

GLOBAL STANDARDS ON CEFMU

Both the Universal Declaration of Human Rights and the Convention on the Elimination of Discrimination Against Women (CEDAW) state that marriage must be entered into only with the 'free and full' consent of both parties.

CEDAW (Article 16) states:

"16. States Parties shall take all appropriate measures to eliminate discrimination against women in all matters relating to marriage and family relations and in particular shall ensure, on a basis of equality of men and women: (a) The same right to enter into marriage; (b) The same right freely to choose a spouse and to enter into marriage only with their free and full consent"

CEDAW also goes on to state that any child marriage should have no legal effect.⁹ In addition, the CEDAW and the CRC Committees have expressed that the minimum age of marriage should be 18 years for girls and boys, with or without parental consent, and that child marriage should be considered a form of forced marriage, given that at least one party is not able to express their full and free consent.¹⁰

Both of these documents have been widely ratified by Member States, illustrating the

international commitment to tackle child, early and forced marriages. In addition, Target 5.3 of Sustainable Development Goal 5 also commits all UN member states to eliminate child, early and forced marriage by 2030.

CEFMU features as a frequent theme within UN mechanisms, with both the UN Human Rights Council and UN General Assembly having a biannual thematic resolution on the issue. The resolutions recognise child marriage as a harmful practice that violates the human rights of women and girls and set out the roles and responsibilities of UN member states and other relevant actors in ending it. Each resolution focuses on a different theme, with the 2018 General Assembly resolution and the 2019 Human Rights Council resolution both focusing on protecting, promoting, and fulfilling the rights of girls who are married or in a union.

In humanitarian settings, both the Inter-agency Minimum Standards for Gender-based Violence in Emergencies Programming and the Minimum Standards for Child Protection in Humanitarian Action¹¹ reference CEFM and emphasise the need to ensure interventions address the specific needs of adolescent girls and married girls.

REGIONAL AND CONTINENTAL Standards on Cefmu

At the continental and regional levels, key frameworks which address CEFMU include the African Charter on the Rights and Welfare of the Child,¹² the Maputo Protocol, the ASEAN Commission on Promoting and Protecting the Rights of Women and Children (ACWC) Workplan, and the Montevideo Consensus on Population and Development.¹³

The Joint General Comment of the African Commission on Human and People's Rights (ACHPR) and the African Committee of Experts on the Rights and Welfare of the Child (ACERWC) on Ending Child Marriage is an important legal document that elaborates on the nature of the State Party obligation that arises in the Maputo Protocol and African Children's Charter.¹⁴ In addition, the SADC Model Law on Eradicating Child Marriage and Protecting Children Already in Marriage also provides guidance to countries in Southern Africa as they develop national laws which work to tackle the practice.¹⁵ To speed up change across the African continent, the AU launched a Campaign to End Child Marriage in 2014 which promotes the implementation of AU legal and policy instruments to end the practice.¹⁶

In South Asia, there is the SAARC Regional Action Plan (RAP) to End Child Marriage in South Asia with its seven outcome areas. This was recently reviewed and extended (2018-2023), building on the initial three-year commitment (2015-2018) and the Kathmandu Call to Action.

OVERVIEW OF CEFMU

CEFMU is a global problem. Around the world, 650 million women and girls alive today were married before their 18th birthday.¹⁷ Rates of child marriage are highest in West and Central Africa, where 13% of girls are married by 15 and 39% are married by 18.¹⁸ Countries with the highest rates of child marriage include Niger (76%), Central African Republic (68%) and Bangladesh (59%), yet India remains the country with the highest number of cases, being home to over 26 million child brides.¹⁹ Despite the global burden of CEFMU being seen to lie in South Asia and sub-Saharan Africa, rates of CEFMU in Latin America and the Caribbean remain high in many countries and it is the only region in the world where overall prevalence has not changed significantly in the last ten years.²⁰

Globally, 1 in 5 girls around the world are married before the age of 18 and, in order to achieve the ambitions set out in the SDGs, progress must be 17 times faster than the progress of the last decade.²¹ CEFMU is predicted to increase as a result of the COVID-19 pandemic, with 13 million additional child marriages estimated to take place between 2020 and 2030.22 Understanding the prevalence of CEFMU during the COVID-19 pandemic is further challenged by the potential impact of physical distancing measures on civil registration systems, such as marriage and birth registration This in turn could lead to more cases of CEFMU happening under the radar owing to the disruption of data collection on incidence of child marriage.23

CEFMU is a critical issue in stable contexts, but in times of crisis, the risks are magnified.²⁴ Twelve out of the twenty countries with the highest CEFMU rates face some of the most severe humanitarian crises²⁵, and many countries are

experiencing a reversal of the progress they have made towards eliminating CEFMU due to humanitarian crises and economic recessions. For example, in the MENA region, while rates of CEFMU had been slowly reducing, the rate of decline has begun to decrease in recent years and some evidence suggests this is linked to humanitarian crisis and/or prolonged conflict and forced displacement in countries across the region.²⁶ Plan International research undertaken in various humanitarian and refugee settings also found a correlation between crises and CEFMU. For example, in Lebanon, adolescent girls from Syrian refugee communities were more likely to be married than those from Lebanon.²⁷ Similarly, research with refugee communities in Jordan shows that patterns of CEFMU were influenced by the Syrian crisis, with girls from refugee communities more likely to be married to older men and their families more focused on meeting immediate financial needs when considering marriage for their daughters.²⁸

ROOT CAUSES AND DRIVERS OF CEFMU

Research carried out by Plan International and other actors globally has shown that the underlying factors that contribute to CEFMU are complex and interrelated.²⁹ They vary within and between countries and depend on individual circumstances and social contexts. However, underpinning these factors, across all contexts, are deeply embedded gender inequalities and harmful social norms that devalue and restrict women and girls' decision making. These inequalities also normalise and provide impunity for gender-based violence (GBV) and harmful practices such as CEFMU.³⁰ Many of these norms are rooted in patriarchal ideas which centre around control of girls' sexuality and they often dictate if, when and to whom a girl should marry. For example, when girls begin to go through puberty, it is often believed that this signifies that they are ready to, and should, be married in an effort to curtail any expression of sexuality outside of marriage and to 'protect the honour' of the girl and her family. Other norms which work to preserve patriarchal power structures and condone CEFMU include those surrounding the centrality of marriage in a girls' life, the perceived higher economic value of men versus women,

and the social construction of sexuality.³¹ These norms also significantly impact the rights and freedoms of LGBTIQ+³² young people, who may be forced or feel pressure to get married owing to the stigma and discrimination they face within their families and communities as a result of their sexual orientation or gender identity. They may also marry to avoid the risk of violence or exclusion if they form relationships based on their LGBTIQ+ identity.³³

In order to tackle the root causes of CEFMU and create sustainable change, it is essential that a gender-transformative approach is taken which understands children, adolescent and young people in all their diversity. This type of approach aims to address the root causes of gender inequality and exclusion and reshape unequal gender and power relations between all children and young people.³⁴ It works to understand how children are influenced by gender norms throughout their life-course and aims to strengthen the agency of girls and young women, as well as working with boys and young men, to remove the barriers caused by these inequalities so that they can exercise their rights. It also means working to create an enabling environment, including by engaging traditional and religious leaders to change attitudes and norms around the practice of CEFMU and ensure it is no longer tolerated in the community.

One of the most significant drivers of CEFMU in all settings is poverty. Socio-economic conditions often drive families to marry off their daughters in order to obtain a dowry or to reduce the number of dependents within the household. The practice is both driven by and perpetuated by cycles of poverty, with 54% of girls from the poorest families getting married before they are 18, compared to 16% from the richest.³⁵ Girls living in poorer, rural areas are more likely to be married when they are young than their peers from wealthier, urban backgrounds.³⁶ Other drivers of CEFMU include lack of access to education for girls, adolescent pregnancy, lack of alternatives for girls outside of marriage, and humanitarian crises that break down societal protection mechanisms.

As evidenced above, girls experiencing multiple and intersecting forms of discrimination are at further risk of CEFMU. Research undertaken by Plan International Nepal shows that disability further enhances a girl's likelihood of being forced into marriage, as well as the severity of the impact that marriage has on her life, and this is driven by structural factors that further exacerbate discrimination and exclusion for those with disabilities, such as lack of access to social protection systems.³⁷

Weak legislative frameworks, poor implementation of formal laws and inconsistencies in legal frameworks perpetuate the practice of child marriage.³⁸ Although the number of countries which have set a minimum age of child marriage as 18 or above has risen in recent years, many exceptions to these laws exist. For example, out of 55 African Union Member States, 43 states have legal frameworks that put the minimum age of marriage at 18 years old or above for both girls and boys. However, 27 of these states have exceptions legalising marriage under 18 - either with parental/guardian consent, judge's approval, court/State's approval and other exemptions. Taking this into consideration, the total number of States where child marriage is legalized is 39.39

Disasters and humanitarian crises are known to exacerbate, cause new drivers of CEFMU and also resurrect old practices less common before the crisis.⁴⁰ Crises disrupt social and institutional structures that protect children and adolescents such as schools, health facilities, infrastructure, homes, families and communities. Gains previously made during times of relative stability regress as families see CEFMU as a way to cope with greater economic hardship, and as a means to protect girls from increasing instability, uncertainty and violence through a husband's guardianship. This can occur due to a variety of reasons including a scarcity of resources, barriers to accessing education and livelihood opportunities; conflict and insecurity; breakdown of social structures; and because families perceive that CEFMU will protect their daughters from increased risk of physical and sexual violence and reduce the economic burden on the family. Families may marry their daughters in an attempt to better allocate their own limited resources by having one less mouth to feed, particularly in contexts of food insecurity.

Economic strain, deterioration of livelihoods and food insecurity increases the risks of girls being sexually exploited and engaging in risky behaviour to put food on the table and drives negative coping mechanism such as CEFMU. Child, Early and Forced Marriage and Unions Policy Brief

The phenomenon of "famine brides" was seen during droughts in Kenya in 2010. In that same year, in Pakistan, there was an increase in child marriage during the aftermath of a large flood.⁴¹ In some conflicts, armed groups have been responsible for the targeted abduction of girls for the purposes of forcing them into sexual slavery or marriage.⁴² Similarly, women and girls also experience forced marriage as a result of trafficking, sometimes sold or forced by family heads or decision makers or at the hands of armed groups.⁴³

The impacts of the COVID-19 pandemic are likely to put millions more girls at risk of being married off by their families as a strategy to cope with the social and economic impacts of the outbreak.44 The impacts of COVID-19 restrictions have caused disruptions to child marriage programming and economic crises, which will further weaken planned efforts to end CEFMU. Research shows that, following the Ebola crisis in West Africa, economic impacts and school closures contributed to a rise in cases of CEFMU (as well as increased rates of exploitation of girls and young women in exchange for money, food or other necessities), sexual violence and adolescent pregnancy.45 According to UNESCO, by the end of March 2020, 180 countries had implemented nationwide school and university closures, affecting over 87% of the world's student population.⁴⁶ Disruption to education caused by crisis increases vulnerability to CEFMU, as some families may see girls' future opportunities limited without continued access to safe, quality education and learning opportunities.⁴⁷ During the Ebola outbreak, girls in Sierra Leone experienced a 65% increase in adolescent pregnancy rates and pregnant girls and girls who were mothers were also not allowed to go back to school, which left them more vulnerable to child marriage.48

As the climate crisis continues to worsen and increases the number of people affected by crises globally, girls, particularly those from the most vulnerable communities, will be among those most impacted. Anecdotal evidence shows that climate change is a driver of CEFMU due to deteriorating, unsustainable livelihoods putting pressure on family income as well as crises resulting in increased exposure to gender-based violence.⁴⁹ Several countries with high

vulnerability to climate change also have high rates of CEFMU, increasing the risk to girls.⁵⁰

CONSEQUENCES OF CEFMU

The impacts of CEFMU are wide-ranging and affect every area of the lives of girls and young women. Adolescent girls who marry are more likely to begin childbearing earlier than their unmarried peers and to have less time between their pregnancies, increasing their risk of complications relating to pregnancy and childbirth, such as obstetric fistula and even maternal mortality.⁵¹ This not only has an effect on their own health and wellbeing, but perpetuates intergenerational cycles of poverty thereby creating negative cross-generational consequences for their children, who are more likely to suffer from low birthweight and have a 50% higher risk of dying in the first few weeks of life than children born to older women.⁵² Girls and women living in humanitarian crises and fragile settings are particularly affected, as over 60% of maternal deaths occur in countries experiencing crisis.53 Limited access to services and information, increased potential exposure to sexually transmitted infection, unintended pregnancy and unsafe abortion and the risk of GBV contribute to girls and women in humanitarian contexts being at increased risk.54

CEFMU can often mean the end of a girl's education, whether by choice, due to school policy or because of an expectation to focus instead on domestic responsibilities, and this has a lasting effect on her life chances. A lack of education combined with social and cultural norms which dictate that girls should be wives and mothers, focusing on domestic and unpaid care work as opposed to economically productive roles and becoming leaders within their community, means that child marriage has a substantial impact on women's potential earnings and productivity later in life.⁵⁵ In crisis settings, CEFMU increases the likelihood of dropping out of school and girls are often pulled out of school in response to growing insecurity or lack of economic opportunities.⁵⁶

CEFMU can itself be an **act of violence** - it is also a harmful practice that constitutes a life-changing decision that is out of the hands of the girl concerned, triggering a negative spiral of harmful consequences.⁵⁷ In addition, in almost all cases, CEFMU leads to a greater risk of sexual, physical and emotional violence by partners, the premature onset of sexual activity and coerced sexual intercourse or rape.⁵⁸ Power imbalances that manifest in marriages and unions, and which are worsened by larger age gaps between spouses, mean that young girls are less able to make decisions, negotiate within their relationship, or have control within the home.59 Data shows that since the outbreak of COVID-19, violence against women and girls has intensified, and the restrictions on movement may reduce access of those experiencing violence in the home to essential protection and SRHR services. ⁶⁰ The increased rates of violence that many married girls experience also have devastating effects on their physical and mental health.⁶¹

CEFMU is interrelated to and perpetuates other harmful practices and human rights violations⁶² that have lasting impacts throughout the lives of adolescent girls. For example, it impedes the enjoyment of the right to be free from violence, the right to education, and sexual and reproductive health and rights.⁶³ Many married girls face barriers to accessing health care, including sexual health services, and may require spousal consent to access these services, robbing them of the agency to make decisions about their sexual and reproductive health.⁶⁴ The consequences of CEFMU for girls living in humanitarian settings are further exacerbated owing to the breakdown of formal structures, services and institutions.

CEFMU can also be an act of violence that can itself lead to further violence inflicted by partners, family members and communities. In the worst cases, It can be viewed as a form of slavery, particularly when a child is unable to exercise their right to full, free and informed consent to enter the marriage or union, suffers controlling, exploitative and abusive treatment, and is prevented from leaving their partner.⁶⁵ This treatment might involve sexual, physical, or psychological violence as well as controlling behaviour which dictates whether a girl can work, go to school or leave the house. In this case, the level of coercion and suffering that girls experience is such that it meets the international legal definitions of slavery and slavery-like practices.66

CEFMU not only has negative consequences at the individual level, it can also impact

development at a community and national level.

Niger, for example, has both the highest rate of CEFMU and the highest fertility rate in the world.⁶⁷ It is estimated that, by 2030, \$566 billion could be saved globally from ending CEFMU, based only on savings associated with the reduction in population growth.⁶⁸ The direct and indirect impacts of CEFMU, such as lower educational attainment, higher fertility, and women having less agency in decision making, can also affect the participation of women in the labour force, thus having further impacts on the economy.⁶⁹

PLAN INTERNATIONAL'S APPROACH: 18+ GLOBAL FRAMEWORK FOR TACKLING CEFMU

Plan International believes that interventions against CEFMU must be gender-transformative and therefore holistic, multi-sectoral and reflective and addressing action at the individual, family, community and societal levels. 18+ Ending Child, Early, and Forced Marriage has been designed by Plan International as a comprehensive global framework for tackling the issue of CEFMU with a long-term and sustainable vision that is well coordinated. It is a flexible framework to accommodate different regional and country level specifics and realities, being translated into diverse platforms.

18+ takes a multi-level, holistic and gendertransformative approach to identify and address the root causes or 'drivers' of CEFMU as well as relevant agents of change at all levels. Moreover, 18+ puts forward intervention strategies consistent with current good practice in the field and recognises contextualisation as key for effective CEFMU programming. 18+ works with entire communities, including men and boys, to model positive gender norms. It supports children and young people, as well as parents, community leaders and governments, to identify, understand and collectively work to end CEFMU. Crucially, it ensures that children - particularly girls - are involved in the process and feel empowered to claim their rights.

CENTRE OF EXCELLENCE ON ENDING CHILD MARRIAGE IN MIDDLE EAST, EASTERN AND SOUTHERN AFRICA

The 18+ Centre of Excellence (CoE) on Ending Child Marriage and Teenage Pregnancy is Plan International's regional hub for shared services providing expertise for programming and evidence-based influencing to end CEFMU and teenage pregnancy in Eastern and Southern Africa. The CoE aims to build capacities and support Country Offices in the design, implementation, monitoring and evaluation of innovative programmes and influencing strategies, as well as facilitating social movement building at all levels to drive change towards ending CEFMU.

CENTRE OF EXCELLENCE ON ENDING CHILD MARRIAGE AND FGM IN WEST AND CENTRAL AFRICA

The WACA 18+ Centre of Excellence is designed to foster technical expertise and resource mobilisation in 14 Plan International Country Offices and partner organisations in the delivery of CEFM and FGM programmes through more effective SRHR and social norms programming, influencing and monitoring and evaluation approaches. It's aim is to strategically connect COs with wider programming, partnership, influencing and youth leadership opportunities on CEFM and FGM. The WACA CoE aims to support the quality, credibility and scale of Plan International programmes and influencing on CEFM and FGM, leveraging external expertise and regional, pan-African and global opportunities.

CEFMU IN HUMANITARIAN SETTINGS

CEFMU has become a Key Investment Area for Plan International's Child Protection in Emergencies team, as well as a priority area for the SRHR in Emergencies Working Group. As Plan International's work in both programming and influencing continues to grow in this area, a CEFMU in Humanitarian Settings Working Group has been established to promote linkages and share best practices across Technical Networks and other Plan International initiatives. Girl-led community-driven research started in 2020 and is investigating drivers of CEFM in humanitarian settings. A specialised Program Model for prevention and response to CEFM in Humanitarian Settings is also planned.

"TIME TO ACT!": PLATFORM OF Brilliance to accelerate efforts In Eliminating Cefmu in Asia

Building on the achievements of Asia Child Marriage Initiative (ACMI, started 2008), Plan International Asia and Pacific Regional Hub is facilitating a networked platform of brilliance bringing together ten country CEFMU response programmes, focusing on generating and sustaining best practice and boosting accelerated efforts to eliminate CEFMU across Asia. This inclusive platform is combining diversified approaches and strategies including research and analysis, capacity advancing, peer-support and learning, campaigning and digital solutions to shape innovative and effective CEFMU focused interventions to be brought to scale.

In 2018, Plan Asia and Pacific Regional Hub conducted and launched a two-phase research on CEFMU, which looked into the scope of the issue in the region⁷⁰ and the most effective emerging interventions to prevent and reduce CEFMU⁷¹, while building on a rich body of research over more than a decade. Some of the recommendations arising from the reports include the importance of grounding programmes in the local context, promoting a gender-transformative approach, addressing adolescent sexuality and unintended pregnancy and empowering girls through collectives. In addition, a regional comparative analysis of approaches to youth activism and engagement to eliminate CEFMU was conducted, resulting in a report "Their Time is Now – Time to Act!" 2019 and a Thematic Brief for decision-makers.

YOUTH AS AGENTS OF CHANGE IN TACKLING CEFMU

Youth⁷² are powerful agents of change and must be supported to exercise their agency and have their voices heard and considered in all decisions that affect them. Supporting meaningful and safe youth engagement in the development of policies and programmes geared towards eliminating CEFMU, including being part of the decisionmaking process, ensures the fulfilment of their right to have their views heard and leads to more relevant and effective decisions and outcomes.

In addition, Plan International recognises that change is best served when it comes from within communities and is led by local leaders, such as girls and young people.⁷³ Supporting collective action and movement building amongst youth activists in a way which is gender-transformative, strategic, inclusive and meaningful is vital in shifting the underpinning social norms and gender inequalities which cause CEFMU.

Engaging and supporting children and young people in advocacy and activism must be undertaken in a way which prioritises the safeguarding of their dignity, rights and privacy and protects them from risks of further distress and push back from their family or communities. Given the sensitive subject matter, strong safeguarding procedures should be put in place, adequate risk mapping must be undertaken, and activists must be fully supported in their role.⁷⁴

GIRLS GET EQUAL

Plan International's global campaign, Girls Get Equal, is a youth-led campaign which supports girls and young women to speak up and advocate on issues that affect their lives, impacts their human rights, and which they are passionate about. It focuses on the power, voice and leadership of girls and young women and emphasises the importance of taking a partnership approach when working with young people in order to amplify their voices and open up greater pathways for their success and impact.⁷⁵

A GIRL'S PLATFORM FOR ACTION

Plan International undertook consultations with adolescent girls across 12 countries to better understand their views on the Beijing Platform for Action (BPfA). The BPfA was adopted in 1995 by 189 governments. It remains the most progressive blueprint on women and girls' rights at global level and outlines 12 critical areas of concern for achieving gender equality Adolescent girls involved in the consultations described how CEFMU was an accepted practice in the majority of countries they lived in, and how they experience disadvantage as a result of CEFMU, early pregnancy and gender-based violence. They also noted how the practice had increased across several settings as a result of the economic pressures of the COVID-19 pandemic and demanded that governments ensure access to justice, invest in comprehensive sexuality education (CSE), work with partners to abandon harmful practices, and work with boys and their families to challenge attitudes and behaviours on issues of masculinities and to promote positive gender norms. Those consulted also emphasised the need for girls to be given space to lead and access to platforms in formal processes at the national and sub-national levels which would allow them to highlight and prioritise issues such as CEFMU.⁷⁶

CASE STUDIES

DIGITAL CAMPAIGN IN BANGLADESH

To raise awareness of the increased risk of CEFMU during COVID-19 and other crises, Plan Bangladesh partnered with Girls Not Brides to widely disseminate awareness messaging on child marriage and GBV, as well as maintaining healthy relationships within families and sharing the household work amongst family members. Plan and GNB worked with the leading national digital media company to disseminate messages through news adverts and banners online. The campaign had an online reach of almost 4 million.

IMPROVING ACCESS TO INFORMATION IN MALAWI

Plan International Malawi, with support from the 18+ Centre of Excellence, procured and distributed 10 radios to youth clubs in Kasungu to improve access to information on preventing child early and forced marriages as well as information on SRH and gender based violence amidst the COVID-19 pandemic.

YOUTH ACTIVISM IN WACA

The Young Leaders against Child Marriage project promotes the role of youth activists from Mali, Senegal and Guinea as leaders in challenging child marriage. The project works with a group of youth activists to develop their advocacy skills and strengthen peer networks to conduct targeted advocacy. These young activists have engaged decision-makers at multiple levels – including community and religious leaders, school authorities and regional decisionmakers – to end child marriage.

RAISING AWARENESS OF CEFMU IN MOZAMBIQUE

Plan International Mozambique developed a documentary which raises awareness on the dangers of child early and forced marriages in the Jangamo district. This documentary contains interviews with twelve community members including survivors of marriage and educates the community on the risks of CEFMU and teenage pregnancy and provides guidance on preventing child marriages in the communities.

OVERARCHING POLICY POSITIONS ON CEFMU

- Plan International condemns the practice of child, early and forced marriage and unions which is a violation of human rights, a harmful practice and in some cases a form of gender-based violence.
- In line with the Joint General Recommendation No.31 of the Committee on the Elimination of Discrimination Against Women/ General Comment No.18 of the Committee on the Rights of the Child (2019) on harmful practices, Plan International believes that all countries should set a minimum age of marriage of 18 and require the free, full and informed consent of both parties. This should apply to both girls and boys, and there should be no exceptions, including any requiring parental, spousal or judicial consent. Countries should also ensure that national laws to this effect take precedence over any conflicting provisions under customary, religious and traditional law.
- Plan International believes that universal birth and marriage registration, including through the use of civil registration and vital statistics systems, is vital in protecting girls against CEFMU by providing a means of verifying the age of parties to a marriage.
- Plan International believes that, given its multiple causes and consequences, ending CEFMU requires a multi-sectoral and coordinated approach to prevention and response. Action to eliminate CEFMU must involve strong commitment, funding and concerted action by stakeholders at multiple levels, including individual, family, community, national, regional, and international, including strategies to address harmful gender norms which continue to drive the practice of CEFMU
- Young people should be recognised as partners and agents of change in the eradication of CEFMU and youth engagement should be supported and

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facilitated in policy-making and accountability mechanisms at all levels, including international human rights treaty monitoring mechanisms, as well as in the design of CEFMU-focused interventions. Specific efforts should be made to promote the inclusion and involvement of young people from marginalised groups. Adequate support, training and flexible funding must be provided to young people engaging in advocacy and activism and strong safeguarding measures must be put in place.

OVERARCHING RECOMMENDATIONS

- Governments should ensure that they adopt national legislation which is in conformity with international human rights standards and sets the minimum age of marriage at 18 for any party to a marriage without exception and regardless of parental, judicial or religious consent. National legislation should also override any conflicting customary, traditional or religious provisions regarding the age of marriage.
- Governments should ensure the effective implementation of national legislation, including through adopting, resourcing and implementing and monitoring progress against national action plans to prevent and respond to CEFMU. Efforts must also include strengthening of civil registration and vital statistics systems in order to achieve universal, compulsory, accessible and free birth and marriage registration.
- Governments should also withdraw any reservations made to international and regional human rights instruments that are relevant to CEFMU.
- Civil society should actively use regional and international human rights mechanisms, as well as mechanisms and coordination platforms which advocate for attention to CEFM, to hold States to account based on the commitments they have entered into and encourage States to implement all recommendations made (for

example UPR, CRC, CEDAW, ACERWC, ACHPR⁷⁷ and through the SDG monitoring process), particularly those which promote girls' rights and the elimination of CEFMU.

- Donors, including UN agencies, should offer technical and financial support to countries to address CEFMU, as well as supporting research and programming which aims to expand and strengthen the evidence-base on effective interventions, prevalence, and good practice.
- Governments, together with development and humanitarian actors, including donors and actors within civil society and the private sector must ensure a multi-sectoral and coordinated approach is taken to prevention and response of CEFMU. This must include ensuring efficient and effective linkages with and coordination between relevant sectors such as protection (including GBV, child protection and wider protection), health, education, social protection, mental health and psychosocial support (MHPSS), and justice sectors.
- All actors involved in the development and implementation of CEFMU programming should undertake strong assessments, using a gender and child rights analysis, to inform CEFMU programming in order to address specific contextual drivers and consequences for children, adolescents and young people in all their diversity. Assessments should also aim to identify potential risks and barriers to CEFMU programming and aim to work with the community and other stakeholders to prevent backlash and further harm.
- Governments must ensure that efforts to end CEFMU are adequately resourced, including through budget allocation across government departments, including health, nutrition, protection, finance, education and other relevant sectors.
- Governments, donors, development and humanitarian agencies, as well as community elders and traditional and religious leaders should meaningfully involve and partner with young people, particularly girls and young women, in the design, implementation, monitoring, and

evaluation of policies, programmes and interventions focused on tackling CEFMU

- Regional bodies should further strengthen national level actions and provide oversight mechanisms to monitor progress achieved and call for increased investments to eliminate CEFMU.
- Humanitarian actors should plan to address CEFMU in Humanitarian Needs Overviews and Humanitarian Response Plans
- Systematic efforts should also be made to create opportunities for and increase investment in young people. Governments should reform, enact, enforce and uphold national and local laws and policies towards guaranteeing the economic choices and social empowerment of young people, particularly girls and young women. This should include the use of age-responsive employment and education opportunities to both delay marriage and support married girls, such as ensuring access to informal education, vocational and livelihoods training, and access to credit and savings mechanisms.

TOPICAL ISSUES

Having given an overview of CEFMU, this section will now delve deeper into some key topical issues which are the subject of current debate. These issues have been highlighted through the internal Global Review of Plan International's programming and influencing work on CEFMU⁷⁸ as well as by external partners within the sector as meriting further attention, with a view to defining an organisational position.⁷⁹

CEFMU AS A WAY TO CONTROL Female Sexuality

Controlling and regulating expressions of sexuality is common in communities which strictly enforce traditional gender norms.⁸⁰ Patriarchal structures and ideals uphold the notion that protection of female sexual purity is of vital importance in order to protect the family honour. Adolescent girls face particular scrutiny of their behaviours because of their unique stage in life – where they have reached puberty but have not yet entered into marriage, with marriage often imposed upon them as an expectation rather than a choice. Puberty and adolescence in general are seen as a risky stage, when girls are moving into adulthood but are not yet 'safely' married and where their behaviours and actions can be perceived to bring dishonour and shame on their families. This leads to the age of girls being of little importance in many cases of marriage. Instead, physical changes, such as beginning menstruation or developing breasts, are what define a girl's perceived readiness for marriage.⁸¹

Adolescent girls' sexuality during this time is closely tied to the concept of 'honour' - of the girls themselves, but also of their families and communities. Preserving girls' physical integrity and virginity is seen as vital in ensuring shame is not brought on her and her family,⁸² and families feel the need to prevent their daughters from engaging in perceived inappropriate behaviour outside of marriage. This behaviour might include premarital sex and pregnancy before marriage but can also include expressions of sexual autonomy, dating and premarital relationships, and even actions that are not within the girl's control, such as experiencing sexual violence and harassment.⁸³

The types of action or behaviour which is perceived to bring dishonour varies in different contexts. For example, Plan International research undertaken in a small number of communities in Guinea-Bissau found that the perception of dishonour in some communities is closely tied to pregnancy outside of marriage as opposed to pre-marital sex. As a result, mothers will support and encourage their daughters to use contraception as a way to prevent pregnancy, instead of forcing her to marry or forbidding her to go out.⁸⁴ In other contexts, once a girl enters puberty, a girl's family may take steps to control and regulate her behaviours, including dictating what she wears, where she goes, and who she goes out with.

Other harmful practices, such as virginity testing, are also rooted in the patriarchal norms and ideals which drive these perceptions of honour among families and communities. Virginity testing is performed on women and girls, often under force, threat, or coercion, and is used to assess their perceived virtue, honour or social value.⁸⁵ Child, Early and Forced Marriage and Unions Policy Brief

Despite being unscientific and medically unreliable, the practice is used to control female sexual behaviour and perpetuate inequality. In some extreme cases, harmful norms are so deeply embedded that methods of controlling behaviour of girls and women can result in socalled honour killings. These occur when family or community members consider that behaviour of female family members has brought shame on the family and needs to be sanctioned. Evidence on numbers of honour killings is scarce owing to underreporting, but they are particularly common in parts of Asia.⁸⁶

CEFMU is another form of this type of control. For many families, it is a way to mitigate the dishonour ensuing from socially perceived inappropriate behaviours or actions, even in cases where girls have no control. Marriage is seen as a normal and expected social practice and it is often the only socially acceptable space where girls can engage in sexual activity and begin childbearing without fear of losing their honour and bringing shame on their family. Plan International research in Niger, Mali and Senegal found that, in some communities, family honour and the risk of shame can be more important factors than money when considering whether and when to marry their daughters in some communities.⁸⁷ This perceived need to protect girls' honour is further heightened in humanitarian crises where displaced populations are more vulnerable and fears or risks of sexual violence greatly increase.

Similarly, LGBTIQ+ young people may also be forced to marry in order to avoid discrimination, social stigma, shame and even violence that results from their sexual orientation or gender identity.⁸⁸

Yet although marriage might be seen as protecting the concept of a girl's honour, in reality it simply involves the transfer of control of her sexuality from her family to her husband.⁸⁹ CEFMU is viewed as a way to protect girls, but in reality, results in girls continuing to be denied agency in making their own decisions about their sexual and reproductive health and rights with this continuing into adulthood, and thus being exposed to violence by others exercising their agency over her without informed consent.

The perceived need to control female sexuality is a root cause of CEFMU across many

communities where CEFMU is prevalent, yet many development and humanitarian interventions fail to adequately address the role of sexuality in eradicating CEFMU. To combat the root causes of CEFMU, such as gender inequality and harmful gender norms, it is essential to address the connections between notions of sexuality and CEFMU in interventions which work to end the practice. Interventions should engage the whole community including men and boys, older generations, and traditional and religious leaders and it's important that these conversations are handled with sensitivity.

TACKLING THE TABOO

A report published by Plan International and partners, 'Tackling the Taboo', 90 addresses the lack of evidence on the links between CEFMU and the control of female sexuality and highlights why further research on this is needed. It also identifies gender-transformative approaches that can be used to address control of sexuality as a root cause of CEFMU and outlines the importance of ensuring these two issues are linked when developing responses to CEFMU and supporting youth advocacy on child marriage. Key elements of a gender-transformative approach for CEFMU include comprehensive sexuality education, working with boys and men, addressing intersectionality and grounding programmes in local contexts.

The promotion of sexual and reproductive rights through CSE which equips adolescents with knowledge and empowers them to make decisions about SRHR is also essential. A package should also be delivered in parallel with parents and communities to broaden community understanding and support, and to prevent risks of harm and backlash. In addition, gender and age responsive SRHR services and social and gender norms interventions, particularly for girls, must be accessible. In humanitarian settings where services may be disrupted, ensuring access to safe spaces where adolescents can learn, discuss and explore values related to sexuality is essential. Most importantly, the voices of girls must be promoted, and they must be allowed to exercise agency when making decisions about their lives, especially those related to their sexual and reproductive health and rights.

CHAMPIONS OF CHANGE PROGRAMME INITIATIVE

Plan International's Champions of Change programme, first piloted in 2012, is a communitywide curriculum for promoting gender equality and social norm change through youth engagement and peer-to-peer mobilisation. The programme works to engage boys and empower girls to challenge harmful social norms and promote gender equality and it does this by supporting children and young people to actively examine and reflect how rigid gender norms and power imbalances are present in their own lives. Champions of Change fosters inter-generational dialogue to ensure boys, girls and youth's commitment to gender equality is supported by their families and communities.⁹¹

PLAN INTERNATIONAL'S POSITION

- Plan International believes that the practice of CEFMU is grounded in harmful gender norms, including the control of female sexuality. For CEFMU to be eliminated, it is crucial to challenge these harmful social and gender norms to ensure that girls and young women have autonomy over their bodies and their sexual and reproductive health and rights.
- Plan International believes that in order to eliminate CEFMU, tackle harmful practices and transform gender norms, key actors within communities must be meaningfully engaged and supported to lead efforts to tackle the practice, including girls themselves, parents, traditional and religious and community leaders, teachers, media outlets, boys and men, and young women role models and activists. We believe intergenerational dialogue which engages communities can be transformative in addressing patriarchal and social norms which lead to CEFMU.
 - Plan International believes that comprehensive sexuality education (CSE) is an essential component of eradicating the practice of CEFMU. All children, adolescents and young people – without discrimination – should receive CSE to ensure they gain knowledge, explore

values and attitudes, and develop the skills they need to make conscious, healthy and respectful choices about relationships and sexuality.⁹² CSE should aim to provide accurate knowledge about sexuality in order to support the eradication of harmful practices.

RECOMMENDATIONS

- Governments, donors and development actors should design, implement, monitor and evaluate gender-transformative programming that addresses the root causes of CEFMU, including patriarchal control of adolescent girls' sexuality. Programmes should address sexuality from a rights-based, gendertransformative approach and place girls at the centre in an effort to open up alternative life options beyond CEFMU. These programmes should also be grounded in evidence and the local context, work to meaningfully engage parents, men and boys and community leaders, and build strong relationships to address norm change at all levels.
 - Governments, civil society, teachers and community leaders should engage in awareness-raising activities to promote education and dialogue to change harmful gender norms and attitudes that perpetuate CEFMU.
- Governments should recognise CSE as an essential component of eradicating CEFMU and should ensure universal access to CSE for all children, adolescents and young people in both formal and non-formal educational settings. CSE should be provided in a way that is non-judgemental, nondiscriminatory, scientifically accurate, accessible, inclusive, rights-based, gender-transformative and adapted to the evolving capacity of the child, adolescent or young person. Parental and community involvement, as well as links to genderresponsive, gender and age-responsive health services is also essential. In humanitarian settings, particular emphasis should be placed on a phased approach and making use of child-friendly spaces

and youth centres, in addition to schools and health facilities to deliver CSE. During the COVID-19 response and recovery, CSE should be included in online and distance learning packages during school closures.

THE LINK BETWEEN ADOLESCENT PREGNANCY AND CEFMU⁹³

There is a strong correlation between rates of CEFMU and rates of adolescent pregnancy, with regions with the highest level of CEFMU also having the highest rates of births to adolescent mothers.⁹⁴ This can lead to dire consequences. Complications from pregnancy and childbirth is the leading cause of death for adolescent girls aged 15-19⁹⁵ and adolescent mothers are at higher risk of life-threatening complications during pregnancy such as eclampsia, systemic infections and preterm delivery. Infants born to adolescent mothers are also more likely to have low birthweight and severe neonatal conditions.96 Girls aged 10-14 years face increased risks during pregnancy and childbirth, yet there is currently no comprehensive data collected on pregnancy amongst this age group owing to the reproductive age being defined by the WHO as 15-49. This has an impact on policy and programmatic responses for this age group, as a lack of knowledge on the scope of the issue has resulted in a dearth of policies and interventions aimed at their specific needs.

Adolescent pregnancy acts as both a cause and consequence of CEFMU. For girls and young women that are married, they may feel social pressure from their husbands, families and communities, or may be forced, to begin childbearing soon after marriage to prove their fertility. The age at which a girl begins childbearing is strongly influenced by social norms and expectations of gender roles, primarily that a girl's main value and role in society is that of a wife and mother, and CEFMU can exacerbate these pressures.⁹⁷ CEFMU is strongly associated with lower use of modern contraception and higher fertility rates.

Compared to other age groups, adolescents who are married or in a union have both the lowest

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use of contraception and the highest levels of unmet need.⁹⁸ This is a result of unequal power relations that mean married girls have little or no ability to negotiate contraceptive use, especially where there is a large age difference between a girl and her husband. They may also experience discrimination when trying to access SRH services, including access to safe abortion, which can impact on their ability to control the timing and spacing of pregnancies and their health outcomes, with unsafe abortion being a significant driver of maternal mortality in girls and young women.⁹⁹

Conversely, pregnancy can also be a driver of CEFMU where there is a social stigma associated with being pregnant or a young mother and unmarried. Plan International's research in Indonesia found that 7 out of 10 child marriages were as a result of a girl becoming pregnant.¹⁰⁰ Similarly, in Kenya, 75% of people interviewed agreed that CEFMU occurs after teenage pregnancy.¹⁰¹ In this situation, CEFMU is often perceived to be the solution to the risk of stigma associated with pregnancy out of wedlock and a means of helping to protect the honour of the girl who was having pre-marital sex or who is a survivor of rape. The stigmatization and sanctions for breaking social norms that are experienced by pregnant girls and young mothers continue long after giving birth, so marriage is often seen as a short- and long-term form of protection.

During consultations undertaken by Plan International, young people in Guatemala identified pregnancy as a key driver of CEFMU in their communities and particularly associated this with the concept of honour. They said that an unintended pregnancy would result in a negative impact on a girl's 'honour', as well as a risk of violence and the loss of freedom. Yet they also highlighted challenges young people, particularly girls, face in accessing sexual and reproductive health services. This included health personnel not being adequately trained, lack of friendly spaces, language barriers for ethnic communities, and shame associated with using contraceptives, particularly among girls and young women.¹⁰²

While marriage will signal the beginning of sexual activity of many adolescent girls, in every developing country with available data, some adolescent girls are sexually active before marriage.¹⁰³ However, unmarried girls can face

many barriers to obtaining sexual and reproductive health services which put them at risk of pregnancy and these barriers are exacerbated for those experiencing intersecting forms of discrimination, such as girls in rural areas, those living in humanitarian settings, or girls with disabilities.¹⁰⁴ These barriers include social stigma as well as laws and policies that prevent unmarried girls accessing services or which require adolescent girls to be accompanied by an adult. In many communities, when an adolescent girl becomes pregnant, she is expected to marry the father of the child. There also remain countries where girls who become pregnant lack legal protection and/or where it is possible for a perpetrator of rape or sexual assault to escape punishment if he marries the victim, even if she is under the minimum age to consent to marriage.¹⁰⁵

It is also important to note that some adolescent girls may choose to become pregnant and it is essential that their agency is respected, in line with their evolving capacities, and that they also have access to sexual and reproductive health services, as well as other means of support.

As adolescent pregnancy is often directly linked to CEFMU, a multi-sectoral approach is required to support girls to realise their sexual and reproductive health and rights. CSE and access to age and gender responsive SRH services including modern contraceptives and safe abortion are essential in enabling young people to make informed decisions about their sexual and reproductive health. Parenting and community programmes should reinforce CSE, supporting the breakdown of intergenerational barriers that may otherwise undermine and conflict the messages young people receive through different channels. CSE is vital to combat harmful gender norms which require girls to conform to limiting, traditional gender roles and perpetuate toxic masculinities.

Wider socio-economic factors, such as ensuring that girls are able to complete their education, not only ensures their access to economic opportunities later in life but are also critical in reducing the risk of both CEFMU and adolescent pregnancy. Education not only delays marriage and pregnancy but is a fundamental human right which improves sexual and reproductive health outcomes not only for the girl herself but also for any future children. It also equips girls with the skills they need to develop and maintain healthy relationships. Similarly, efforts to prevent CEFMU and unintended pregnancy reduces the risk of girls dropping out of school and ensures their right to education is protected.

The COVID-19 outbreak has presented new barriers and exacerbated existing challenges for adolescent girls, including increased risk of unplanned or unintended pregnancy. Evidence from the 2014-16 Ebola outbreak in West Africa shows that there was a sharp increase in teenage pregnancies and early marriages in some affected areas, due to girls' increased school dropout rates and lack of access to essential SRH services.¹⁰⁶ In Sierra Leone, for example, reduction of access to SRHR services led to an increase in teenage pregnancy by up to 65% in some communities.¹⁰⁷ There has since been a lower level of school enrolment of girls than there was prior to Ebola, save where girls have access to interventions which support their education.¹⁰⁸

UNFPA predictions show that a 6-month COVID-19 lockdown could deny 47 million women access to modern contraceptives – leading to 7 million unintended pregnancies.¹⁰⁹ In addition, Save the Children have predicted over a million additional adolescent girls are at risk of adolescent pregnancy over the next year owing to the social and economic impacts of COVID-19.¹¹⁰

Increased adolescent pregnancy rates during COVID-19 is being driven by a number of factors. Schools around the world have been closed due to lockdown measures. However, CSE is often not included in distance or online learning packages. This is leaving many children and adolescents without access to vital health information, particularly girls and young women from marginalized, poorer households where internet access is limited. The pandemic has also caused a significant strain on healthcare systems, resulting in access to critical SRH services being severely restricted owing to reallocation of funding and resources, shortages of medical supplies, closures of health clinics, restrictions on movement and disruptions to supply chains.¹¹¹ This is likely to be further compounded when impoverished families make critical decisions about who receives healthcare, influenced by gender norms which convey male preference. The increase in the number of unwanted and unintended pregnancies for married and

unmarried girls will in turn increase rates of CEFMU.

PLAN INTERNATIONAL'S POSITION

- Plan International is committed to upholding the rights of all girls and young women to safe and healthy relationships and ensuring they can make informed decisions about their SRHR. This includes decreasing unintended and unwanted adolescent pregnancy, particularly in younger adolescents (10-14-year olds), and to supporting adolescent mothers. We recognise that adolescent pregnancy is a major contributor to maternal mortality and morbidity, and we also recognise that adolescent pregnancy can be both a driver and a consequence of CEFMU.
 - We believe that unintended and unwanted adolescent pregnancy can and should be prevented. This requires challenging gender discriminatory norms and ending sexual violence against girls; strengthening girls' agency and ability to make autonomous and informed decisions about their sexual and reproductive health; ensuring the provision of CSE and ensuring that health systems and services meet the specific needs of adolescents (in line with the Committee on the Rights of the Child General Comment No. 15, paragraph 56).
- Plan International believes that education is a human right and can be transformative in promoting gender equality. It can be a powerful tool for delaying unintended adolescent pregnancy and early childbirth. Ensuring girls' access to quality education and removing discriminatory barriers that prevent pregnant girls and young mothers from completing their education is essential in eliminating the practice of CEFMU.
- Plan International believes that girls and young women affected by crises are at particular risk of unintended and unwanted pregnancy owing to a range of factors. These include lack of access to SRHR services, disruption to education and CSE,

economic stress resulting in increased sexual exploitation in exchange for food or money, and an increase in CEFMU.

RECOMMENDATIONS

- Governments, working with other development actors should develop, fund and implement strategies to prevent unintended adolescent pregnancy. This should include access to quality, gender and age-responsive SRHR services that are available and accessible to everyone, regardless of age or marital status.
- Governments must also ensure that there is necessary support in place for girls who become pregnant to ensure they receive health and counselling support and can make an informed choice about their pregnancy.
- During the COVID-19 response and recovery, governments must continue to prioritise and fund age-responsive SRHR services and recognise them as lifesaving, including ensuring restrictions on movement do not impact the ability of girls and women to access services.
- Governments should ensure comprehensive sexuality education (CSE) is available and accessible for all children, adolescents and young people, in both formal and non-formal educational settings both in development settings and in times of crisis. Gender-responsive, youthfriendly information and services must be available and accessible to all young people so that they are able to make informed decisions about their sexual and reproductive health.
- Governments, the private sector and statistical bodies should also increase efforts to collect disaggregated data to inform the design, delivery and implementation of initiatives to prevent and respond to adolescent pregnancy and this should include data on younger adolescent girls aged 10-14 years..
- Governments should take all necessary measures to support pregnant girls and young mothers of all ages to continue and

complete their education. Governments should develop retention strategies and life skills programmes for pregnant girls and young mothers, including married girls, through targeted outreach and support programmes, initiating evening or part-time formal schooling and vocational training.

Governments should prohibit discriminatory practices which prevent pregnant girls and young mothers from accessing education, such as mandatory pregnancy testing of girls and expulsion of pregnant girls from school. This is particularly vital following school reopenings during the COVID-19 response, and pregnant girls and young mothers must be provided with support through flexible and accelerated learning opportunities, as well as catch up courses, once they return to education.

AGE OF CONSENT FOR SEXUAL RELATIONS

As CEFMU has been increasingly prioritised on the international agenda and governments have acted to raise the legal age of marriage to 18, some countries have also moved to raise the age of sexual consent in line with this. This has prompted discussion around at what age young people are able to make an informed choice about engaging in sexual relationships.¹¹²

While international human rights standards set out a minimum age of 18 for marriage¹¹³, there are no recommended age limits for sexual consent under international law. Rather, governments are urged to recognise young people as rights holders (including in relation to their sexuality) and to respect their evolving capacities when it comes to realising their rights.¹¹⁴ In particular, the CRC specifically calls on states to ensure that 'girls can make autonomous and informed decisions on their reproductive health^{'115}, including making sure that legislation guarantees 'the best interests of pregnant adolescents and that their views are always heard and respected in abortion-related decisions.'¹¹⁶ They recommend that states take steps such as introducing a legal presumption that 'adolescents are competent to seek and have access to preventive or time-sensitive sexual and reproductive health commodities and services.'¹¹⁷ Although not directly addressing the sexual rights of adolescents, the CRC's recommendations on adolescent health services implies that young people have the requisite capacity to make decisions about and use such services, and that this right should be respected and fulfilled by states.¹¹⁸

Above all, it is essential that when considering the age of consent, governments prioritise the protection of children from non-consensual sex, including abuse, coercion and exploitation and the need to understand sexual consent. This must include the criminalisation of nonconsensual sex at any age, including amongst adolescents.¹¹⁹ Statutory rape provisions should also be in place to protect all adolescents from predatory adults. This is a legal provision which criminalises sexual activity between an adult and a minor under a specified age, even if the minor has given consent. They are based on the premise that children and adolescents under a certain age are legally incapable of consenting to sexual activity.120

Moves to increase the age of consent can be driven by the desire to protect adolescents from the consequences of early sexual activity, such as pregnancy or sexually transmitted diseases, and can also be rooted in the perceived need to uphold sexual and gender norms around sexuality and marriage.¹²¹ However, laws that increase the age of sexual consent can be used to deny adolescents' agency and sexual and reproductive rights. They can result in the stigmatisation of adolescents who engage in sexual activity before marriage, which in itself can become a driver of CEFMU, and increase barriers to accessing sexual and reproductive health services.¹²² For example, in countries where the age of consent is 18 years, adolescents younger than 18 can be prevented from accessing sexual and reproductive health services they need by healthcare practitioners because of their age.¹²³ Adolescents themselves may also be discouraged from accessing services for fear of being reported to the criminal justice system.¹²⁴ This has a significant impact on health outcomes for adolescents, as one half of pregnancies in this age group are unintended and 55% of pregnancies end in abortion, which are often unsafe.125

Efforts to prevent young people engaging in sexual intercourse by raising the age of consent have not been proven to be effective.¹²⁶ Instead, they stigmatise or criminalise sexual activity prior to marriage, deny adolescents' agency, give contradictory messaging about sexual consent and uphold the idea of the need to promote sexual purity, particularly of girls, until they are married. This in itself can be a driver of CEFMU as well as a barrier to accessing sexual and reproductive health services.

Governments need to ensure that laws on sexual consent do not limit the autonomy and evolving capacities of adolescents in making decisions about their sexual rights, including the right to have consensual sex, whilst also ensuring all adolescents are protected from violence and abuse and have sufficient understanding about sexual consent. Evidence shows that in every country with available data, a proportion of adolescents are sexually active before marriage.¹²⁷ Acknowledging that young people have sex is critical to ensuring that they are equipped with the tools, knowledge and information to understand their rights and protect themselves and is essential in upholding their rights and building understanding on what sexual consent means. Age of consent laws must therefore be accompanied by policies which aim to ensure children and young people have the information they need to make decisions over whether, when and with whom they have sex. This not only recognises their right to engage in healthy, consensual sexual activity but will also ensure they are protected from abuse.

Further, given that children may have the need to access sexual and reproductive health services from a young age (e.g. in order to access HIV treatment), there should be no minimum age set when it comes to accessing sexual and reproductive health services.

As the impact of the decision to marry and the decision to have sex are very different, with marriage potentially being a life-long legal contract, these require different policy responses. As such, the age of consent to sexual relations should not be increased to be aligned with the age of marriage. The age of consent should be the same for all young people regardless of gender or sexuality, and close-in age exemptions should be put in place so that young people engaging in consensual sex with a partner of a similar age are not criminalised.¹²⁸ A close-in age exemption (sometimes called a Romeo and Juliet provision) refers to a law allowing young people to have consensual sex where one of the parties is under the age of consent, provided that they they are close in age – usually no more than a 2 or 3 year age gap. By way of illustration, if the law puts the age of consent at 16 but includes a close-in age exemption of 2 years, this would mean that a 14 year old who has consensual sex with a 16 year old would be regarded as having given valid consent and the 16 year old would not have breached the law.

PLAN INTERNATIONAL'S POSITION

- Plan International supports laws that recognise children, adolescents and young people as rights holders with evolving capacities and maturity to make decisions about their own health, including their sexual and reproductive health and rights.
- Plan International believes that laws governing the age of sexual consent should be determined separately to that of the minimum age of marriage or the age to access sexual and reproductive health services, to ensure adolescents who are engaging in healthy consensual sex with those of a similar age are not stigmatised and criminalised. The age of consent should also be the same for all adolescents regardless of gender or sexuality.
- Plan International believes that all nonconsensual sexual activity must be criminalised, within and outside of formal and informal marriages and unions, in order to protect all children and young people from abuse and exploitation.

RECOMMENDATIONS

Governments should ensure that age of consent laws are in conformity with international recommendations, including the Committee on the Rights of the Child General Comment 4 which recommends the need for minimum ages of sexual consent, marriage and medical consent that "closely reflect recognition of the status of human beings under the age of 18 as rights holders in accordance with their evolving capacity age and maturity." These include rights in relation to sexual activity and the right to be informed about sexual and reproductive health.

- Governments must ensure that age of consent laws that are in place are uniform for all adolescents, regardless of gender or sexuality. Close in age exemptions to the age of sexual consent should be put in place so that adolescents who are in consensual sexual relationships are not committing a crime.
- Governments should criminalise nonconsensual sex within and outside of formal and informal marriages and unions at all ages in order to protect children and young people from abuse and exploitation. Statutory rape provisions should also be in place to protect adolescents from predatory adults.
- Governments should make efforts to increase the understanding of sexual consent by all stakeholders. This must include ensuring that all adolescents have access to age-responsive, developmentally appropriate, scientifically accurate, good quality and non-judgmental sexual and reproductive health information and services, including rights-based CSE, regardless of the age of consent to sex. Access to SRHR services should be determined according to the development, competence and maturity of children and adolescents to make decisions about their own health and ensure that those at risk of or living with HIV are able to access services at any age. Services should be available and accessible for all regardless of age, marital status, or socioeconomic status.

SITUATION OF MARRIED GIRLS

Adolescent girls who marry before the age of 18 face a number of negative outcomes that their peers who marry later do not. For example, married girls are likely to have fewer years of education than their non-married peers as early marriage is a key cause and effect of girls' dropping out of school.¹²⁹ This has a significant

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effect on a girl's power to make decisions over her life and severely limits her opportunities. Girls who receive less education earn less later in life, are less likely to find decent work, have higher birth rates, and are more likely to die in childbirth than their peers who have more years of education.¹³⁰ Further, of girls interviewed by Plan International across 11 countries, 39% claimed that they 'never' or 'seldom' were allowed to make decisions about their own marriage.¹³¹ This can often include decisions related to their sexual and reproductive health and rights, and leads to married girls having higher unmet need for contraception, having less power over the timing and spacing of their pregnancies, and being more vulnerable to sexual violence as well as sexually transmitted infections.

Women who are forced to marry or experience early marriage are also more likely to report physical or sexual intimate partner violence compared with those who married as adults.¹³² More than one in three ever-married adolescent girls have experienced physical, sexual or emotional violence from their partners.¹³³ CEFMU often results in forced sexual initiation and forced sex within marriage,¹³⁴ which in many countries is not considered to be rape¹³⁵, leaving girls at considerable risk and without any legal recourse.

These high levels of violence are caused by power imbalances within relationships which are exacerbated by large age gaps, social isolation, and lack of female education and autonomy.¹³⁶ For example, there is a correlation between the age at which an adolescent girl marries and how likely she feels she is able to refuse sex.¹³⁷ The way in which these power dynamics are widely internalised by both men and women can be exemplified through data which shows that, in societies where harmful gender norms are deeply embedded, women and girls may be socialised into thinking that certain forms of violence against them are justifiable.¹³⁸ In fact, data shows that, across all regions, girls and women are more likely to justify wife-beating than men and boys.139 Disempowerment of married girls reinforces patterns of violence and drives the normalisation of gender-based violence at the individual, family and community level.

The legal and social norms outlined above result in perceptions of sexual activity within marriage being seen as a right of the man and a duty of the Child, Early and Forced Marriage and Unions Policy Brief

wife, and do not recognise situations in which it can be a crime such as marital rape. Although sexual violence and abuse of children is widely condemned, the same protection is often not afforded to girls who are experiencing the same abuses within the context of marriage.¹⁴⁰ It's essential that non-consensual sex is criminalised both within and outside of marriage in order to protect girls and young women from this abuse.

Girls who marry as children often drop out of school owing to the expectation that they must now fulfil traditional gender roles and devote their time to taking care of the home, the children and the family.¹⁴¹ This also subsequently restricts the economic empowerment of married girls and their chances of building economic assets, as well as their participation in community decision making. The imbalance of power experienced in CEFMU prevents girls from accessing their economic rights which extend not only to their right to take part in the world of work, but also to their right to social security, their right to own property and their right to an adequate standard of living.¹⁴²

When considering the situation of married girls and boys, it is important to note that in many parts of the world, consensual marriages or unions where one or both partners are minors is not uncommon.¹⁴³ These child-initiated marriages, or 'love marriages', are becoming more prevalent amongst younger generations and are often viewed as a way to overcome social barriers raised by cultural and religious conventions.¹⁴⁴ However, many external factors continue to heavily influence the practice, such as adolescent pregnancy, the need to seek protection from violence in the parental home, poverty, and the stigma associated with dating and sexual activity outside of marriage.¹⁴⁵ There remain significant gaps in evidence around the drivers and effects of these marriages, which will be essential in ensuring appropriate interventions are available for the young people involved.

In efforts to tackle CEFMU, there has been an emphasis on prevention which has led to limited availability of programmes and support targeted at already married girls.¹⁴⁶ Programming is often not adapted for their needs and does not address the specific barriers they face, for example restrictions on their mobility and child care needs. Married girls are also often seen as too difficult to engage, and case managers may not feel equipped with the necessary competencies and strategies on what to do. In order to tackle the multiple negative outcomes that married girls face, they must be included in interventions and programmes which work to support them and promote their active participation in decision-making processes and as agents of change in their own lives and communities.¹⁴⁷ Special considerations must also be made for girls and young women who have been supported to flee a child, early or forced marriage to ensure that they are able to integrate back into their communities, access formal or informal education if they have stopped attending school, access the justice system as well as relevant health services, including mental health and psychosocial support.

Recent evidence shows that, across a number of countries where CEFMU is common, divorce or separation amongst young people occurs for many reasons.¹⁴⁸ This can be due to the inability of the husband to fulfil the gender norms of meeting the economic needs of the household, the need to escape violence, or abandonment by husband or wife.¹⁴⁹ In these situations, girls and young women must be supported to access justice and legal systems so that they can seek a divorce or annulment if they wish, and to re-enter education or access skills training.

Globally, there are insufficient programme resources, materials and curricula which targets girls who are already married. To support married girls, a comprehensive and multi-sectoral support system should be put in place that includes: access to health services and information, including sexual and reproductive healthcare services and information; access to education opportunities, including both formal and informal education and training; access to employment/livelihood opportunities; psychosocial support; adequate childcare (where necessary); access to information on rights in marriage and at its dissolution; strengthened child protection systems; protection mechanisms responsive to survivors of CEFMU and GBV (such as safe shelters) and access to justice and legal remedies.

PLAN INTERNATIONAL'S POSITION

Plan International recognises that many girls and young women who are married experience high levels of physical, psychological, and sexual violence at the hands of their partners, as well as the denial of economic resources and restricted mobility. The root causes of this are discriminatory gender norms and unequal power dynamics that are exacerbated by CEFMU. Changing deeprooted norms and attitudes that normalise and justify violence against girls and women is critical to ending gender-based violence against girls and young women, including CEFMU.

- We believe the provision of care and support to survivors of violence is essential to protect and fulfil the rights of married girls. This should include the provision of healthcare and protection services, including case management and psychosocial support (with referral to more specialised mental health services as needed) and access to quality, gender and age responsive SRHR services.
- Plan International believes that married girls must be better considered in programming and efforts must be made to shift the social norms which drive their exclusion from programme development. They must be supported to ensure that they are able to access SRHR services, continue and complete their education, have access to economic opportunities and access to justice.
- Plan International believes that married girls have the right to seek divorce or annulment of marriage and that access to a justice system should not be prohibited by unnecessary costs or discriminatory processes.

RECOMMENDATIONS

Governments should criminalise marital rape and remove legal exceptions that prohibit husbands from being charged with sexual violence against their wives. Laws which allow rapists to escape prosecution if they marry the survivor must also be revoked.

- Governments should ensure that support systems and mechanisms are adequately funded and accessible for girls and women who have been married as children or against their will. This requires a multi-systemic response from the local level to the national level, including legal assistance, protection services and welfare, healthcare and information on SRHR, psychosocial support and educational services.
- Governments must ensure that all girls, including married girls, can access and complete primary and secondary education in line with their commitments to the 2030 Agenda. Governments should develop retention strategies, catch-up and literacy education, and life skills programmes for married girls as well as adequate childcare for young mothers.
- Governments should remove restrictions that prevent married girls and young mothers from completing their education and invest in opportunities for married girls such as access to education, including both formal and informal education and training, and access to employment and livelihood opportunities.
- Governments should have regulations in place to protect married girls during times of displacement, when hosting refugees, and in fragile and conflict-affected settings.
- Governments and the judiciary should ensure married girls have access to the legal mechanisms and support that are required to be granted a divorce or annulment of their marriage.

CRIMINALISATION OF CEFMU

As the issue of CEFMU has become an increased priority for the international community, there is widespread agreement that legislating for a minimum age of marriage is one of the initial steps and an essential aspect of a multi-sectoral approach, with a general push for specifying a minimum legal age of marriage at 18 and ensuring the minimum age for both parties is aligned. However, the manner in which countries Child, Early and Forced Marriage and Unions Policy Brief

seek to ensure that the minimum age of marriage, and other legislation relating to forced marriages, is enforced varies greatly.

Some countries who have taken a firm stance against child marriage have enacted laws that criminalise marriage under the age of 18. This means that it is classed as a crime with the risk of imprisonment for those who are found to have been responsible for the marriage (which, in many cases, means the parents or caregivers). In other countries, CEFMU is against the law, but not a crime. As such, the penalty would be a civil one, such as invalidating the marriage or imposing a fine. There are also some countries who prescribe a minimum age of marriage but do not impose sanctions for failing to observe this.

Legal approaches to tackling CEFMU vary greatly between countries. Some countries, such as Ethiopia, Cameroon and the United Kingdom, criminalise CEFMU, yet there are debates as to how effective this approach is.¹⁵⁰. In Australia, forced marriage is framed as a form of slavery and also criminalised as such.¹⁵¹

In contrast, in Mozambique, the approach is to ban or invalidate marriages that involve individuals below the legal age of marriage (rather than criminalise them), whereas in Guinea Bissau, there is a minimum age for marriage but no sanction for failing to observe this.¹⁵²

Criminalisation can be viewed by decision makers as a way to set a strong legal framework for protecting girls from CEFMU and to provide a deterrent for would-be perpetrators of the practice.¹⁵³

Yet there can be many challenges to using criminalisation to combat CEFMU. Findings from Plan International research undertaken in West Africa suggest that criminalisation is resourceheavy, difficult to implement, and can alienate communities.¹⁵⁴ When marrying their daughters, parents are participating in a cultural practice which they often believe will ultimately benefit their daughter. Criminalising these parents can be counter-productive and may result in girls being deprived of the strong family and community network that they need to tackle the root causes of CEFMU. When it is families that are forcing their daughters to enter into marriage, it also becomes unlikely that these girls will report this as a crime at all because of societal and economic pressures, as well as family loyalty.155

Further, if a country chooses to criminalise child marriage but has weak judicial systems and lack of access to justice for women and children, this can present significant issues for those seeking justice and even potentially put them at risk of retaliation and further harm.¹⁵⁶ This can be particularly common for women and children from poorer or more marginalised families or those living in countries which are experiencing conflict, disaster, or civil unrest. In these settings, criminalisation may result in families not disclosing marriage because it can lead to family separation. Criminalising child marriage may also result in victims being cross-examined and this, coupled with the risk of failed prosecutions, may prevent vulnerable girls and women from coming forward.¹⁵⁷ When a criminalisation or strong judicial approach is taken, as opposed to a protection approach, survivors often must go through police, prosecutors, or government agencies to report abuse such as gender-based violence in order to receive services. In humanitarian contexts in particular, this can put girls and women at even greater risk as they can potentially be tried for other crimes, are put at risk of being deported if they are refugees or migrants, and can present further barriers to accessing public services.

Finally, in countries which operate under both state and customary or religious law within plural legal systems, the criminal code may not apply to marriages or unions which have taken place under customary law, which can render criminalisation of the practice ineffective. In these cases, engaging traditional and religious leaders is essential in advocating for the alignment of the age of marriage under plural legal systems. Mechanisms which provide extensive, ageresponsive support to survivors can also be more effective in reducing rates of CEFMU in these circumstances, and this should include referrals to legal protection actors and judicial processes based on the best interests of the child and a survivor-centred approach.

Approaches to criminalisation by decision makers often vary according to the cultural implications of the practice within countries. For example, some countries define the practice as slavery and criminalise it as such. However, CEFMU does not always create conditions that are slavery like and framing it like this can create barriers in engaging communities in pro-active discussions aimed at prevention and support of married girls. Some NGOs and practitioners therefore state that it's more useful to link the term of slavery to the impacts and experiences of women who have been in a marriage and have experienced exploitation, rather than the practice itself.¹⁵⁸

It is clear from the evidence that criminalising CEFMU might not always be the most effective way of protecting girls and young women. However, a strong legal framework on CEFMU is essential if the practice is to be eradicated. In particular, in instances where girls and women are trafficked for sexual exploitation through the practices of early or forced marriage, criminalisation may be an appropriate sanction.

Having a clear law, specifying a minimum age of marriage of 18 for both parties, can give legitimacy to those campaigning and advocating on the issue and trying to bring about change. Enacting a law also allows a government to clarify its position, which gives it a mandate to refuse marriages or intervene when necessary. For this to be effective, it's important that laws on CEFMU are implemented alongside policies which provide training for the judiciary in CEFMU and gender equality and ensure access to legal systems for all citizens. In humanitarian settings, where national governance structures may have broken down, policy change on this level may not be possible or effective. It is therefore crucial that humanitarian coordination includes guidance, advocacy and program priorities on CEFMU in humanitarian plans.

Efforts to end CEFMU should involve both a strong legal framework and policies and programmes that address the root causes of CEFMU, and protect and support survivors of CEFMU, such as those which work with and for girls and involve their families and communities. National frameworks and action plans should also ensure coordination between ministries and other actors, including around policies on education, social protection, SRHR, and combatting harmful gender norms, to ensure that combatting CEFMU is seen as a priority and a shared responsibility across sectors.

PLAN INTERNATIONAL POSITION

- Plan International believes that criminalisation of CEFMU is not the most effective legal approach in the majority of cases as it is resource heavy and risks driving the practice underground and can force families apart during times of crisis.
- Instead, we support the implementation of a strong legislative framework which sets a minimum age of marriage as 18 with free and informed consent regardless of gender and ensures that national law takes precedence over customary or religious law. This should be accompanied by policies and programmes which address the root causes of CEFMU and which tackle gender inequalities and harmful gender norms, through engagement with families, communities, traditional, religious and cultural leaders.

RECOMMENDATIONS

- Governments should enact a strong legal framework to eliminate CEFMU including requiring the free, full and informed consent of both parties to the marriage and setting the minimum age of marriage at 18 with no exception. Governments should also ensure that national law takes precedence over any conflicting customary or religious law and ensure that legislative frameworks and policies are consistent with international human rights law.
- National legal frameworks must ensure the protection of survivors of CEFMU and coordinate support between ministries and other actors. The implementation of legislation and policy on CEFMU must be fully funded, with clear budget lines and monitoring of spend.
- Governments and the judiciary should ensure that survivors of CEFMU are able to seek judicial redress including the annulment of any CEFMU and are able to access the services they need. All barriers to accessibility should be removed, including for refugee and

migrant populations and those who are stateless or missing documentation.

- Governments should avoid criminalising CEFMU (save in cases of commercial trafficking linked to CEFMU) and instead provide civil remedies, including the ability to invalidate any marriage or union which amounts to CEFMU.
- Governments should engage, sensitise and provide capacity-building training to law enforcement agencies, judges and prosecutors with regard to implementing legislation that seeks to eliminate CEFMU.
- Governments should establish and strengthen specialised women's and children's police units and gender sensitive and child friendly courts to promote access to justice.
- Governments should ensure appropriate regulations are in place to protect hosted refugee populations and girls and young women experiencing crises from CEFMU.

CEFMU IN HUMANITARIAN SETTINGS, INCLUDING COVID-19

As an organisation preventing and responding to CEFMU in both development and humanitarian settings, we have made efforts throughout this paper to embed both perspectives. However, key issues specific to humanitarian contexts and the COVID-19 pandemic are outlined in the section below in order to support and strengthen our advocacy work in this area where it may require specific positions and recommendations.

One in every four children in the world is living in a country affected by conflict or disaster.¹⁵⁹ Many of the complex factors that drive CEFMU in stable environments are exacerbated in emergency settings, caused by the breakdown of family and community structures that accompany crisis and displacement.¹⁶⁰ Humanitarian settings present unique challenges for girls and young women which can drive CEFMU such as: separation from the primary breadwinner, loss of income for families (which may require girls to stay at home or get married for bride price), increased risk of kidnapping and trafficking, and use as wives in armed groups. Poverty is also a significant driver of CEFMU in humanitarian settings as marriage can be seen as a way to reduce the number of people in a household and the related economic burden of feeding a child when families experience loss of livelihoods and homes.¹⁶¹

Our research shows that, in crisis settings, girls live in fear of violence and are concerned not only about the constant presence of armed men, but about gender-based violence within families, including CEFMU.¹⁶²

Emergencies often give rise to the breakdown of institutions that normally work to protect girls from gender-based violence and CEFMU, including education, health and social protection, and can exacerbate pre-existing gender inequalities. The breakdown of social networks can also heighten the need within families and communities to control girls' sexuality and protect their 'honour'. Caregivers see CEFMU as a way to protect girls from rising levels of sexual assault, harassment and violence as they are believed to be safer in a married relationship.¹⁶³ Marriage is also seen to protect girls and their families from the social stigma that can result from surviving rape or sexual assault.¹⁶⁴ Research shows that, particularly for families living in camps where girls are exposed to a different environment than their previous community, parents might marry their daughters out of fear of pre-marital pregnancy or relationships that could occur before marriage, which can bring shame on the family.¹⁶⁵ This may also be a risk in out-of-camp settings and can affect host communities, due to strained resources and changing social norms.

Economic issues that refugees face have also meant that, in some circumstances, families who would not usually consider CEFMU have felt that they had no choice but to marry off their daughters as a way to reduce their household expenditure.¹⁶⁶ In addition, the age at which girls marry in this situation is often younger and the age gap between girls and their husbands is wider as economic needs become more urgent.¹⁶⁷ In research carried out in Jordan with refugee populations, UNICEF found that Syrian families were less likely to undertake thorough investigations on potential husbands than would have been customary and instead focused on more immediate needs, such as the groom's ability to provide short-term financial security.¹⁶⁸

Girls and young women who live in areas experiencing humanitarian crises and conflict are also at heightened risk of violence by armed groups, which can include abduction and forced marriage. In Somalia and Nigeria, for example, armed groups have been responsible for abducting girls from school and forcing them to marry men who are active in conflict.¹⁶⁹

Much needs to be done to address CEFMU in humanitarian settings to ensure that girls are kept safe and the dangers of early marriage are understood. CEFMU prevention and support for married girls must be embedded across sectors in humanitarian response and girls themselves must be consulted in the development of programmes. CEFMU is a critical issue in times of crisis and more work must be done with girls, families and communities to raise awareness of the negative impact on CEFMU on girls.

COVID-19

The COVID-19 pandemic is heightening the risks of CEFMU owing to increased levels of unintended pregnancy, poverty and economic hardship, and widespread school closures. UNFPA projections show that the disruption to planned efforts to end CEFMU combined with the wide-reaching economic consequences could result in an additional 13 million child marriages taking place before 2030.¹⁷⁰ Anecdotal evidence shows that the impacts of the pandemic are beginning to drive an increase in rates of CEFMU, and young people themselves are telling us that they are seeing more girls being married off owing to the economic impact of the pandemic and the closure of schools.¹⁷¹

Over 130 of the countries affected by COVID-19 have sizeable refugee populations and more than 80% of refugees are hosted in low- and middleincome countries with health systems that are illequipped to manage significant outbreaks.¹⁷² With 76.7 million people currently living as refugees,¹⁷³ refugee and IDP camps are mostly chronically overcrowded and measures to avoid community transmission of the virus are difficult to implement as refugees' entitlement to healthcare and social protection systems are restricted or non-existent. In these contexts, COVID- 19 heightens the risks of CEFMU as drivers of the practice are further compounded, such as school closures, impacted livelihoods, increases in violence, restricted social protection services and referral mechanisms.

Research undertaken by Plan International and partners in Jordan to measure the impact of COVID-19 on GBV and SRHR among adolescent girls from the refugee and Jordanian population concluded that, for girls and women who have endured displacement and other stresses in the past, the pandemic has bought with it a further loss of control.¹⁷⁴ It showed that adolescent girls in particular were bearing higher household burdens and had fewer positive outlets, and were also disproportionately impacted by increases in GBV and barriers to accessing SRHR and protection services.

The COVID-19 pandemic could potentially have a catastrophic impact on girls if urgent action is not taken. It is essential that efforts to tackle CEFMU are prioritised during the COVID-19 response and recovery, including essential SRHR services and services which prevent and respond to violence. These services must continue to be funded and efforts must be made to ensure they remain accessible and available during the response. Owing to the economic impact of the pandemic and the strong links to CEFMU, it is also necessary that financial or material support is provided for affected households and communities, including provision of gender-responsive social protection systems.

PLAN INTERNATIONAL'S POSITION

- Plan international recognises that mitigating the risks of CEFMU and other forms of gender-based violence are a shared responsibility of all humanitarian actors. Human rights should be upheld in times of crises and all actors hold the responsibility to ensure activities do not lead to or perpetuate further discrimination, abuse, violence, neglect or exploitation – including the practice of CEFMU.
- Plan International believes that it is essential to prioritise and fully fund efforts to tackle CEFMU during humanitarian crises and during the COVID-19 response and recovery in order to ensure girls do not bear the brunt of the impact.
- Plan International recognises that the heightened vulnerabilities of girls to CEFMU during and after humanitarian

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crises are due to the breakdown of social institutions and structures and exacerbation of gender inequalities. In order to address these vulnerabilities, Plan International supports the delivery of comprehensive case management services that link multisectoral approaches coordinated across sectors, working across the individual, family, community and societal levels, in order to prevent and respond to CEFMU, including the involvement of men and boys and community leaders.

Plan International believes that humanitarian actors should ensure that a gender, age, disability and inclusion lens is applied to all aspects of humanitarian response, and that all possible measures are taken to prevent and respond to child, early and forced marriage, including support to girls who are already married or in a union.

Plan International supports the full and comprehensive implementation of the Minimum Initial Service Package (MISP) in all humanitarian settings to fullest extent of the national law. Strong coordination among SRHR and protection actors is essential in reducing gaps and duplication.

RECOMMENDATIONS

- Humanitarian actors must recognise CEFMU as a critical issue in acute and protracted crises as well as in times of stability, with an understanding that rates of CEFMU will increase and the drivers of the practice will change as a result of the crises. CEFMU must be included in humanitarian plans, assessments, coordination and advocacy, and responses must be adapted for different phases and dynamics of a crisis, as well as taking into consideration the needs of different populations and settings.
 - Providers of humanitarian assistance should also ensure that GBV, health, education and child protection actors coordinate services to ensure girls at risk of CEFMU and those already married

have access to safe spaces, case management, psychosocial support, SRHR services and referral systems. They must also ensure that service providers across these sectors have the appropriate competencies and training.

- Humanitarian actors, governments and donors should meaningfully engage adolescent girls from the early stages of crises and include their views in humanitarian needs assessments and humanitarian response plans. Governments and humanitarian actors must also work to raise awareness with and support parents/caregivers and the community to understand key approaches to tackling CEFMU, such as providing alternatives through livelihood opportunities.
- Governments and humanitarian actors must respond to the needs of adolescent girls during humanitarian efforts holistically with comprehensive, cross-sectoral programming that addresses both lifesaving, immediate needs and promotes long-term resilience. Prevention and protection needs, particularly those that stem from harmful gender norms, should be prioritised in the first wave of response. Interventions must include adolescent girl programming and safe spaces, and all girls under 18 must be granted access to education, psychosocial support, and life skills training in emergencies and reproductive health services, irrespective of their marital status.
- Governments should provide financial or material support to poor, vulnerable and otherwise affected households and communities during humanitarian crises and the COVID-19 response. This should include providing and expanding genderresponsive social protection systems and provisions to increase coverage.
- Medical providers of humanitarian assistance should commit to the full and swift implementation of the Minimum Initial Service Package for reproductive health in crisis (MISP), coordinated with awareness-raising activities on sexual and reproductive health services. Transition to

nationally-led comprehensive services and supplies based on a detailed needs assessment and longer-term programme planning should be supported by humanitarian actors. The MISP should also be strengthened to incorporate specific criteria on adolescent sexual and reproductive health.

- Donors should prioritise the needs of adolescent girls in crisis and increase funding for CEFMU programming, including the provision of protection and SRHR programming (prevention, mitigation and response), positive sexuality education and gender and ageresponsive SRHR services, such as access to contraception and safe abortion. Donors should also increase funding to support efforts to pilot and evaluate programmes to understand what works to address CEFMU in these settings and support practitioners operating in very challenging crisis contexts
- Efforts must be made by all actors to link humanitarian responses which tackle CEFMU to longer term development programming which addresses harmful gender norms and gender inequalities, thus promoting long-lasting, intergenerational change and protecting the most marginalised girls and young women.

CEFMU IN COVID RECOMMENDATIONS

- Governments must continue to prioritise, fund and recognise SRHR services as lifesaving throughout the COVID-19 response and recovery, along with essential health services for young children's survival and healthy growth. This includes implementation of the Minimum Initial Service Package (MISP) for Reproductive Health in Emergencies, positive sexuality education, and adolescent-friendly and gender-responsive sexual and reproductive health services,
 - Governments must continue to fund, prioritise and recognise protection services as essential during all stages of COVID-19 response and recovery to

ensure access and availability is not disrupted. This should include GBV services which are age and gender responsive and which ensure the rights of girls and young women to choose their partner and engage in safe relationships such as safe spaces, helplines, case management, reporting mechanisms and clinical management of rape.

Governments should ensure continued investment in and prioritisation of efforts to eliminate harmful practices such as CEFMU within COVID-19 response and recovery plans, including continued support to survivors and the adaptation of interventions to minimise the impact of disruption to programmes and services.

Governments must ensure that any lockdown restrictions on movement do not prevent girls and women from accessing sexual and reproductive health services or protection services. This includes keeping clinics, health facilities, and safe spaces open and accessible, and ensuring that those who need services can leave home and obtain them. Alternative channels for the delivery of services to girls, such as through remote provision, should be considered.

Service providers must establish new ways of providing information and support to adolescents and young people for SRHR and GBV, including through the use of social media, tele-health and the pooling of multiple services. CSE should also be promoted as part of online and distance learning packages during school closures.

Governments and humanitarian actors should also ensure that mental health services and counselling are readily available as many people, including children, adolescents and young people, are facing high levels of anxiety and stress related to COVID-19. ¹ For further information and positions on comprehensive sexuality education, please see Plan International's SRHR position paper.

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About Plan International

We strive to advance children's rights and equality for girls all over the world. We recognise the power and potential of every single child. But this is often suppressed by poverty, violence, exclusion and discrimination. And it's girls who are most affected. As an independent development and humanitarian organisation, we work alongside children, young people, our supporters and partners to tackle the root causes of the challenges facing girls and all vulnerable children. We support children's rights from birth until they reach adulthood, and enable children to prepare for and respond to crises and adversity. We drive changes in practice and policy at local, national and global levels using our reach, experience and knowledge. For over 80 years we have been building powerful partnerships for children, and we are active in over 75 countries.

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