

Early Marriage and Poverty

Exploring links for policy and
programme development

**A publication by the Forum on Marriage
and the Rights of Women and Girls**

This publication is dedicated to
Marlene Hinshelwood, the Co-ordinator of the Forum
who sadly died unexpectedly in November 2002.

Produced by

The Forum on Marriage and the Rights of Women and Girls in collaboration
with the International Planned Parenthood Federation

Researched and written by

Naana Otoo-Oyortey and Sonita Pobi

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Additional copies of this document are available from:
The Forum on Marriage and the Rights of Women and Girls
c/o FORWARD
Unit 4
765–767 Harrow Road
London NW10 5NY
Tel. 44 208 960 4000
Fax.44 208 960 4014
www.forwarduk.org.uk

Contents

Acknowledgements	4
Acronyms and abbreviations.....	5
Introduction.....	6
Section 1: Contextual issues around early marriage and poverty	8
1.1. Definition of early marriage	8
1.2. The magnitude of early marriage	8
1.3. The context of early marriage	9
1.4. Links between early marriage and poverty	11
Section 2: Examining the causes and consequences of early marriage and poverty	16
2.1. Early marriage and the human rights of women and girls	16
2.2. Pregnancy and safe motherhood	17
2.3. Gender-based violence and early marriage	22
2.4. Married girls and the risk of HIV/AIDS	25
Section 3: Towards transformation – promoting a gender and rights agenda	28
3.1. A rights-based agenda	28
3.2. Programme interventions	30
3.3. Framework for action and recommendations	345
Appendix 1	
Background information on the Forum on Marriage and the Rights of Women and Girls	39
<i>Mission statement</i>	39
<i>Membership of the Forum</i>	40
Appendix 2	
Marriage: Women’s rights and the laws that protect them	41
References and notes.....	43
Suggested reading.....	48

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Acronyms and abbreviations

AIDS	Acquired Immune Deficiency Syndrome
CEDAW	Convention on the Elimination of all Forms of Discrimination against Women
CCM	Convention on Consent on Marriage, Minimum Age of Marriage and Registration of Marriages
CNMW	Convention on the Nationality of Married Women
CRC	Convention on the Rights of the Child
FPAK	Family Planning Association of Kenya
HIV	Human Immuno-deficiency Virus
ICCPR	International Covenant on Civil and Political Rights
ICESCR	International Covenant on Economic, Social and Cultural Rights
IEC	Information, education and communication
IPPF	International Planned Parenthood Federation
MDG	Millennium Development Goals
NGO	Non-governmental organization
PFA	Platform for Action from the UN Fourth World Conference on Women
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
VCGEs	Volunteer Community Gender Educators
UDHR	Universal Declaration on Human Rights

Introduction

“Sitting on the floor of her dishevelled home, the size of a broom cupboard, in Old Delhi, Bano recounts her precocious achievements. She was married at the age of 10 and had her first child when she was 11. Her daughter was 12 when she married and 13 when she had her own child, making Bano a grandmother at 24. Bano’s granddaughter also married at puberty and gave birth when she was 14, thus Bano became a great grandmother at 38”.¹

Early marriage before the age of 18 years is a violation of a number of international human rights conventions. However, for many young girls in developing countries marriage is perceived as a means of securing their future and protecting them. Girls are forced into marriage by their families while they are still children in the hope that marriage will benefit them both financially and socially. On the contrary, early marriages violate the rights of children with often more negative consequences for girls. This compromises their overall development, leaving them socially isolated with little education, skills and opportunities for employment and self-realization. These conditions ultimately make married girls vulnerable to poverty.

Young married girls are indeed a unique group, coming under great pressure on a number of fronts. They are required to do a disproportionate amount of domestic chores, including new roles and responsibilities as wives and mothers. The young bride’s status in the family is frequently dependent on her demonstrating her fertility – often within the first year of her marriage – at a time when she is not yet physiologically and emotionally prepared. Additionally girls are made to be responsible for the care and welfare of future generations while still children themselves. Young mothers with no decision-making powers, restricted mobility and no economic resources are likely to transmit this vulnerability to their offspring. Therefore, early marriage directly compounds the ‘feminization of poverty’ and intergenerational poverty.

Several studies confirm wide age gaps between younger married girls and their spouses. This age gap clearly creates unequal power relations between the young bride and her older and more experienced husband, resulting in husbands having total control over sexual relations and decision-making. Since most young brides are socially conditioned not to question the authority of their husbands, they are often unable to use contraception or to plan their families. The combined effect of these factors may also make younger brides more likely to tolerate partner violence and not leave abusive husbands.

Recent trends in the HIV/AIDS epidemic indicate a high prevalence of HIV infection in young women. This is due to a combination of biological, socio-economic, cultural and political factors that put young women at greater risk of HIV infection. In reality adolescent girls are not necessarily protected from sexually transmitted infections even in marriage, because of entrenched gender-based inequalities, double standards and cultural values which restrain girls’ and women’s decision-making powers and their access to information and resources. Additionally younger women’s immature cervixes

may compound their limited sexual autonomy and increase their vulnerability by making them more likely to be infected by HIV.

While there is widespread agreement that early marriage, early pregnancy and motherhood adversely affects general development and education, the links with poverty and the wider consequences on families and the community have not been adequately explored. This is partly due to the “invisibility” of married girls in most communities, and the fact that marriage confers adult status to girls and boys. More importantly, the limited focus on consumption and income in poverty reduction policies and programmes may make it impossible to identify married girls as a vulnerable group within households.

International consensus on the need to protect the rights of young people, particularly young girls, is now growing. The Millennium Development Goals adopted by governments in 2000² and recent international agreements, national laws and policies on young people and gender-equity issues present an opportunity to rectify the situation of young married girls. There is also new information on successful intervention initiatives with young married girls, which provide examples of effective strategies for delaying early marriages and meeting the needs of young married girls. These interventions all highlight the need to create an enabling environment, where young married girls and girls at risk of early marriage can be empowered. Access to a range of social, economic and political resources, as well as access to information and livelihood skills, is necessary to reduce the gender-based inequalities that exist between married girls and their spouses.

This joint publication by the Forum on Marriage and the Rights of Women and Girls and the International Planned Parenthood Federation (IPPF) adds a new dimension to the ongoing work on married girls. This will provide guidance and ideas to development practitioners, policy makers and non-governmental organizations in this neglected area. It also provides new areas for further research and additional insights into understanding some of the key concerns around early marriage and poverty.

The challenges brought about by the cycle of poverty and early marriage can only be effectively addressed where there is joint action by all stakeholders: governments, civil society, community gatekeepers and young women themselves. The findings from recent successful initiatives offer several policy and programme strategies which are proposed as essential for social transformation. The publication also provides examples of programme strategies and policies that have helped to improve the situation of those affected by, or at risk of, early and forced marriages.

Section 1 is an analysis of the contextual issues and defines the key issues around early marriage and poverty, while section 2 addresses the causes and consequences of early marriage and poverty. It also highlights specific sexual and reproductive health and rights concerns. The final section includes some examples of recent interventions and provides ideas for programme and policy development which will help promote change and alleviate the situation of those affected by early child marriages.

Section 1: Contextual issues around early marriage and poverty

1.1. Definition of early marriage

Early marriage refers to any form of marriage that takes place before a child has reached 18 years. The Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), the most comprehensive international bill of rights for women, states that any betrothal or marriage of a child should not have any legal status. The Committee that monitors this convention states further in General Recommendation 21 (Article 16(2)) that the minimum age for marriage for both male and female should be 18 years, the age when “they have attained full maturity and capacity to act”.³ Most early marriages are arranged and based on the consent of parents and often fail to ensure the best interests of the girl child.

Early marriages often include some element of force. A forced marriage is defined as any “marriage conducted without the full consent of both parties and where duress is a factor”.⁴ Although children below 18 years sometimes choose to marry freely with or without the consent of their parents, these cases will not be explored in this review however, this is an area that requires further research. Marriage of adolescent girls is often a traditional practice, dictated by customary and religious laws and exists alongside national laws on minimum age of marriage.

1.2. The magnitude of early marriage

Current estimates show that approximately 82 million girls between 10–17 years will be married before they reach 18 years. Of the 331 million girls aged 10–19 in developing countries (excluding China), 163 million will be married before they are 20.⁵ Although early marriage is predominantly a female problem, a minority of boys may also be forced to marry early. There has hardly been any research done on young boys who marry early. In sub-Saharan Africa and South Asia, on average only five per cent of men marry before they are 19-years-old, in Europe this figure is only 1 per cent (see *Table 1*).

Early marriage is more prevalent in developing countries, particularly in the poorer rural sections of the community. A study by Singh and Samara (1996)⁶ demonstrates that the higher the level of urbanization, the less likely it is that women marry before they reach 20 years. A close review of the evidence on the links between poverty and the pressure to marry early reveals that in wealthier countries, where girls have equitable access to education, further training and other employment opportunities, early marriages are rare. For example, in the USA only 4 per cent of girls marry before they are 19-years-old, in Canada this is about 1 per cent, while in the UK only 2 per cent of girls make the choice to marry early (see *Table 1*).

This pattern indicates that wealthy nations benefit more from later marriages than poorer countries, and girls thus are also more likely to have better human assets such as skills and employment opportunities before they marry.

Table 1: Married adolescents – percentage of 15–19-year-olds ever married

Country/region	Boys	Girls	Country/region	Boys	Girls
Africa			Europe		
Egypt	2.8	15.9	United Kingdom	0.5	1.7
Ethiopia	6.2	30.9	France	2.9	0.8
Malawi	5.7	43.6	Bulgaria	3.1	16.5
Gabon	2.3	15.9	Spain	0.7	2.3
Niger	4.2	61.9			
Botswana	3.2	5.8			
Asia			North America/ Latin America		
Japan	0.3	0.7	USA	1.3	3.9
Bangladesh	5.0	51.3	Canada	0.3	1.3
India	9.5	35.7	Colombia	7.7	20.0
Malaysia	1.4	7.6			

Source: UN Population Division, 2000⁷

1.3. The context of early marriage

Poverty is recognized as a major deciding factor for early marriage of girls especially in poorer households. Where girls are viewed as additional burden on family resources, they tend to be married off earlier as a family survival strategy.⁸ With the onset of the AIDS pandemic, poorer households are known to marry off their younger daughters at an earlier age to secure their future. In a vast majority of early marriages a girl's young age is perceived to be a desirable attribute for marriage, therefore the older the girl the less likely her chances for marriage.⁹ Increasingly in some parts of the world early marriage is seen as a religious requirement to protect the sexuality of girls.

Although there is limited research on the determinants of early marriage, some notably elements are that early marriages are often initiated and arranged by the family and includes an exchange of bride price or wealth. The specific value of the bride payment varied between societies. In agricultural or pastoral communities this often consists of goods, money or livestock. These gifts are a central part of marriage transaction. However, they also reinforce the inequality of women and strengthen the notion that females can be exchanged or sold for the value that they bring into the receiving families. When a girl is married early, this reduces the economic burden on the family in caring for the girl, and also increases family assets. The payment of bride price can also enslave a girl in marriage in cases where families cannot afford to return the bride price if the girl chooses to leave an abusive marriage.

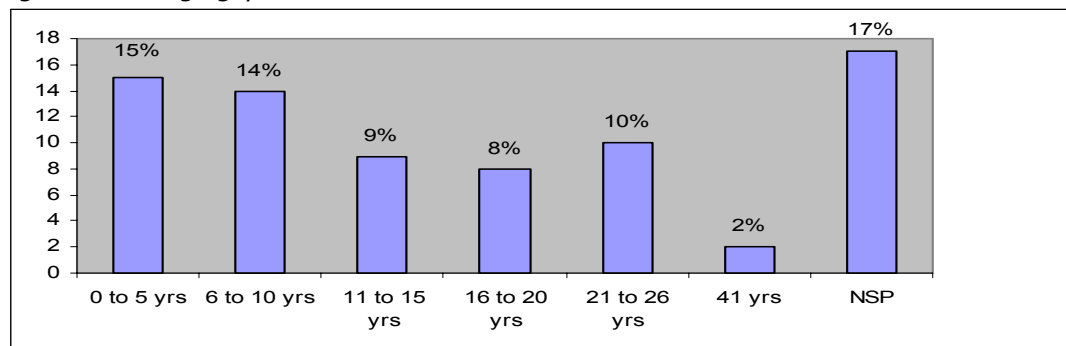
In parts of Asia a dowry is paid by the parents of the bride, here the financial consequences of dowry payments will be often greater for poorer and more vulnerable families. The general demand for younger brides will also force poorer families to want to marry their daughters early so as to avoid having to pay higher dowries for older girls. Since the size and quality of a dowry is

linked to a woman's status in her marriage, younger girls from poorer families will invariably be more at risk if in-laws are dissatisfied with their dowries. Greed has also become a major part of arranging early marriages,¹⁰ as parents and guardians are more motivated by financial benefits than by the well-being of their daughters. The inability to pay dowries can also put young girls at risk of early marriage or worse. In Bangladesh, poverty has often led to parents 'marrying off' their daughters, when in reality they were being trafficked into prostitution.¹¹

Early marriage is often perceived as the only alternative for girls, particularly in situations of high insecurity and conflict – such as in crowded refugee camps or where people are under the control of rebels in war situations – marriage of a girl may be seen as a protective action, reducing her vulnerability to rape or kidnap. However, while recognizing that such reasons may derive from the need to protect girls, such marriages are still early and represent a grave denial of girls' sexual and reproductive rights.

In general, men tend to marry at a much older age than women or girls, and this is even reflected in some national laws where the legal minimum age for boys may be two or three years more than that for girls. For example in Ethiopia, Gabon and Burkina Faso, the legal minimum age at which a girl can marry is 15, whereas for boys it is 18. Again the national minimum age of marriage is often only applicable in statutory marriages and is hardly ever enforced in religious or customary marriages.

Figure 1: The age gap between adolescent wives and their husbands in Burkina Faso



Source: Saloucou et al, 2002¹²

The notion of men as household heads means that most husbands are often more financially better off and older than their brides. Studies on 15–19-year-old girls in Burkina Faso show that 35 per cent of their spouses were about ten years older than them (see Figure 1). In other parts of West Africa this figure is 54 per cent. A further 25 per cent of male spouses were found to be over fifteen years older than their wives.¹³ The age difference between spouses has serious consequences on the power dynamics between them, resulting in unequal partnerships in the marriage, social isolation, low decision-making powers and coercion. It is common to find girl brides becoming widows at a very early age because of this age gap. In many communities a young wife cannot inherit her husband's property when he dies, because of discriminatory customs, gender biases and her low social status within the family. She may even be blamed for his death.

1.4. Links between early marriage and poverty

The links between early marriage and poverty are clearly more complicated and cannot be addressed at length in this exploratory review. Such a focus requires more expertise and resources. However, there are a number of socio-cultural issues around early marriage, particularly those related to gender discrimination and human rights violations which make married girls vulnerable to social and economic poverty. This is more evident in the area of sexual relations and sexual and reproductive health and rights.

The definition of poverty used in this study, focuses more on vulnerability and the social aspects of poverty and less on the economic dimension of poverty. The Platform for Action and the Beijing Declaration definition of poverty will inform the dimension of poverty being used here.

“Poverty has various manifestations, including lack of income and productive resources sufficient to ensure a sustainable livelihood; hunger and malnutrition, ill health; limited or lack of access to education and other basic services; increasing morbidity and mortality from illness; and social discrimination and exclusion.”¹⁴

Globally, poverty is a major cause, as well as a consequence, of early marriage for many young girls under the age of 18. In many traditional settings, poor families use the early marriage of daughters as a strategy for reducing their own economic vulnerability, shifting the economic burden related to a daughter’s care to the husband’s family. Unfortunately, while this strategy may in some instances place the girl in a better-off family environment, in many cases the negative effects reinforce her vulnerability, and that of her children, to poverty in her marital home. The younger the age at the time of marriage, the lower the probability that girls will have acquired critical skills and developed their personal capacity to manage adverse situations that may affect their overall welfare and economic well-being.

Women represent two-thirds of those living below the poverty line (on less than a dollar a day). While no one denies that poverty is gendered and affects men and women differently, strategies that target poverty do not address the multi-dimensional nature of poverty and fail to focus on the most vulnerable. Existing gender discrimination and socially prescribed roles for wives put undue pressure on young wives to meet these demanding responsibilities. There is however a minority of cases, where young girls are married to wealthy men, and therefore not exposed to the poverty related conditions that are discussed in this review. However, they may also face restrictions in their physical mobility and be unable to fully exercise their rights within marriage.

At the beginning of this millennium, heads of governments committed themselves to a new strategy to reduce global poverty and ensure that the right to development becomes a “reality for everyone”.¹⁵ The Millennium Development Goals (MDGs) focus on poverty eradication, universal education, gender equality and empowerment, reduction of child and maternal mortality and combating HIV/AIDS. The attainment of this agenda can only be possible if all “men and women have the right to live their lives and raise their

children in dignity, free from hunger and from the fear of violence, oppression or injustice".¹⁶ Such poverty alleviation programmes will need to recognize the critical role of women in child development and nation building. When children continue to bear and nurture other children, development will only be a reality for the minority of women who are able to raise their children in dignity.

Apart from the cultural norms and beliefs that constrain the capabilities of women and girls in most societies, there are also norms around women's sexuality and rights within the family and marriage which may make married adolescent girls vulnerable to poverty. Some of the links relating to personal development, capabilities, opportunities, decision-making powers, and sexual and reproductive rights violations will be explored in more detail below.

1.4.1. Early marriage hinders overall development

Exploring how poor health status, including sexual and reproductive health, illiteracy, social exclusion and powerlessness affects married girls provides a better understanding of their vulnerability to poverty. Where these elements are linked with gender inequities and biases for the majority of young girls in rural communities, their socialization which grooms them to be mothers and submissive wives, limits their development to only reproductive roles.

Girls who are married early are often denied access to education or pulled out of school, diminishing the opportunity to acquire critical life skills which will enable them to escape poverty related conditions. Some parents even fear that formal education of girls will increase their bride price¹⁷ and so be a deterrent to prospective husbands. For a number of poorer families, the potential rewards of educating daughters are too far off and therefore their education is not recognized as an investment. Families perceive that a girl's education will only benefit her husband's household, and not her parents'. Prevailing gender norms on the roles of girls focus mainly on marriage, and as such it becomes acceptable to remove girls from school for marriage. In some cases girls are not even allowed to go to school at all, because an education is perceived as unnecessary for becoming wives or mothers.

In general all children from poorer households are less likely to go to school; however, this is more so for girls than boys. This gender gap in educational enrolment is also more pronounced in rural communities. Early marriage is often linked to low levels of schooling for girls.¹⁸ Studies confirm that school attendance is lowest for married girls aged 15–19 (see *Table 2*), whether they have children or not. Research in South Africa indicates that 45 per cent of unmarried mothers between the ages of 15 and 19 years attend school compared to 27 per cent of married girls of the same age.¹⁹ Erulkar's research conducted in 2002²⁰ indicates that early marriage is a cause of high drop-out rates for girls, and other studies show a sudden drop in the proportion of girls in school between the ages of 13 and 14 years. It is unclear whether girls are removed from school to be married or girls are withdrawn from schools because of other reasons, be it the quality of the education, girls low educational attainments or parents' fears of the safety of adolescent girls.

Table 2: Schooling and work status of 15–19-year-old girls, by marital and childbearing status (% distribution)

Marital and childbearing status (date of survey)	Not in school, not working	In school only	Working only	In school and working
Unmarried without children				
Benin (1996)	19	17	59	5
Brazil (1996)	12	53	12	23
Malawi (1992)	36	45	11	8
Uganda (1995)	25	32	31	12
Unmarried with children				
Benin (1996)	32	0	62	6
Brazil (1996)	44	17	26	13
Malawi (1992)	68	9	18	5
Uganda (1995)	41	1	58	0
Married without children				
Benin (1996)	27	0	73	0
Brazil (1996)	60	10	27	3
Malawi (1992)	80	2	17	1
Uganda (1995-1)	50	2	48	0
Married with children				
Benin (1996)	13	0	87	0
Brazil (1996)	74	8	16	2
Malawi (1992)	80	1	19	0
Uganda (1995-6)	46	0	54	0

Source: Meyers, 2002²¹

There is a saying that when you educate a woman you educate a nation. Education, even at a basic level, is not only about livelihood and technical skills but more importantly provides social ‘connectedness’ or aptitude which enables one to access key resources to alleviate poverty.²² By interacting with others, individuals acquire the social skills and personal capacities needed to access resources and opportunities, and to form social networks for support and assistance when required in the future. Individuals can also develop their self-esteem and confidence to voice their opinions and to take control over their own actions, lives and bodies. Other positive benefits of education are linked to improved reproductive health and child survival and welfare. Educated women are more likely to have a say in decision-making regarding the size of their families and the spacing of their children. They are also likely to be more informed and knowledgeable about contraception and the health care needs of their children.²³

Adolescent girls who marry outside their communities tend to lose the close friendships they had formed in their parental homes, and often become quiet and subdued.²⁴ This means that even where girls have developed social networks they are unable to access them from their marital community. Additionally, most young girls bring into their marriage very few assets that they control. Even where dowries are brought into a marriage they are not controlled by the wives. Household surveys indicate that assets brought into marriage tend to increase the bargaining power of women. Also women’s

assets can often give them considerable decision-making powers regarding expenditure on children's clothing and education.²⁵ However girls married into polygamous homes often come in as the youngest in the household and face tremendous pressures. Younger girls may not be adequately prepared to take on their new roles and responsibilities, as co-wives, in-laws, tackle household chores as well as meet the sexual demands spouse. The situation of such girls has been under researched and requires urgent attention.

In general discussions on sexuality are considered taboo in a number of communities and girl brides often lack knowledge about their bodies, sex education and information on sexual relations and reproduction. Married adolescents often rely on their peers for information on sexual matters and the accuracy of such information may be doubtful. Many societies in which early marriages take place believe that giving information to girls on contraception encourages promiscuity, which can lead to unwanted pregnancy and family shame. This denial of girls' rights to make informed decisions about their sex lives and to plan their families persists into their marriages, resulting in decision-making on reproductive matters becoming the domain of husbands.

1.4.2. The vicious cycle of poverty and early marriage

Social norms and gender-related inequalities often reinforce poverty in girls who marry early. There are over 1 billion people living below the poverty line, the majority of whom are females and mainly live in rural areas of developing countries. This form of poverty is characterized by a lack of human social capital such as livelihood skills, education, interpersonal skills, good health (including sexual and reproductive health) and well-being. Additionally the majority of poor people lack social assets and social networks.²⁶ Married adolescent girls, especially those from rural settings, are at most risk of being poor and will therefore manifest most of these characteristics of poverty.

There is very little information on the determinants of early marriage. However, anecdotal evidence indicates that the majority of married girls in rural communities tend to have mothers who married early. Marriage becomes the only option available to such girls. Poorer mothers are more likely to transmit intergenerational poverty to their children. This could be financial, material or environmental, or simply about acquisition of social values, knowledge or status. Among young girls the 'inheritance' of private and public poverty is worsened by the prevailing gender inequalities. It has already been demonstrated here that women have less access to human resources such as education, health and skills. It is also more difficult for women to "transform their capabilities into income or well-being" due to entrenched gender-based divisions of labour and because girls and women seldom control decisions about the use of their productive and reproductive labour.²⁷ Young girls who are married early will therefore have fewer opportunities to acquire vital capabilities that can be used when they are in vulnerable situations.

“Intergenerational transmission of poverty can involve the ‘private’ transmission of poverty from older generations of individuals and families to younger generations (especially, but not solely, from parents to children), and the ‘public’ transfer (or lack of transfer) of resources from one generation to the next...”²⁸

Children born to young mothers will be disproportionately affected by the “intergenerational transmission of poverty via nutrition” which often begins in the womb of the malnourished mother.²⁹ Such children become stunted and underweight in early life and also experience slow cognitive development. This may lead to learning difficulties – and adversely affect their development of life skills – which will also in turn limit their productivity and earning opportunities, thus perpetuating the cycle of poverty into the next generation.

There is a direct relationship between family size, child development, educational levels and economic empowerment. This is because better educated mothers have more decision-making powers and autonomy and often more access to personal income. In particular, women’s levels of education and health-promoting behaviour increase child survival and overall child development. Studies confirm that increased income for mothers directly translates to better nutrition and physical development of children.³⁰

Social issues around the transmission of poverty and the vicious cycle of early marriage have not been adequately researched. However, available evidence indicates that social norms regarding access to and control over productive resources and assets within the household are biased against girls and can be exacerbated in situations where girls are married early and have very little decision-making power. Harsh inheritance laws which discriminate against women in favour of male family members may disproportionately affect young married girls (whose spouses are far older than them and likely to die earlier), and result in further poverty for such girls/women and their surviving children.

The younger the age at marriage the more vulnerable she will be to poverty. Further research is needed here to determine the nature of the vicious cycle of poverty and early marriage. However, the powerlessness and lack of independent income and autonomy of married girls will compound their vulnerability to poverty. They are often confined within the home, burdened with household chores, limited decision-making powers and financial dependence on their husbands. This is in addition to social pressure to bear too many children. This situation results in girls being preoccupied with child care and socially isolated, while their lack of access to opportunities and resources, compounds their ability to improve their vulnerability to social poverty. A review of time-use patterns in rural Bangladesh confirmed this situation. They noted that married “adolescent girls are not as readily available for educational, vocational or social activities as single girls because of their domestic responsibilities and the restrictions on young brides’ mobility”.³¹ It is also important here to assess how all these poverty-related conditions reinforce each other in the context of other violations of the rights of girls who are forced to marry early.

Section 2: Examining the causes and consequences of early marriage and poverty

2.1. Early marriage and the human rights of girls

It is in the area of human rights that married girls face most restrictions. Human rights are a set of common standards that every individual is entitled to enjoy by virtue of being human, because they are universal, indivisible and interdependent and enshrined in international conventions, agreements and declarations. Human rights not only give power to individuals, they are “rich, infinitely mouldable raw materials out of which individuals, communities and societies can shape their reproductive and sexual liberty”.³² Governments are obliged to respect, protect and fulfil the human rights of their citizens. However, girls and women’s human rights relating to family life, marriage and sexual and reproductive decision-making remain contentious in a number of countries because of cultural and religious reasons. The International Conference on Population and Development (ICPD) held in 1994 and the Fourth World Conference on Women in 1995 produced landmark agendas which committed governments to addressing sexual and reproductive health and rights as fundamental to human rights and social development. This agenda can only be possible if women and girls are aware of their rights and able to exercise these rights in all aspects of their lives.

The legal context of women’s marriage life often reflects a society’s attitudes towards females. For countries that have signed the CEDAW the discrepancy between the legal minimum age of marriage and the actual age of marriage is due to “official tolerance of cultural, societal and customary norms that shape and govern the institution of marriage and family life”.³³ These social norms makes the national minimum age of difficult to enforce. Additionally in a number of countries, the law recognizes three types of marriages: customary, religious and civil marriage. Often the minimum age of marriage is only applicable in civil marriages. In some countries that have a legal minimum of marriage there is inequality in the age of marriage for boys and girls. The legal minimum age of marriage for boys is often two years higher than that of girls.

In some countries such as Kenya, Egypt and Pakistan, the national minimum age of marriage is 16 years.³⁴ This lower age of marriage often signifies an influence of tradition and religion. Most early marriages in developing countries result from parental choice, and often do not require the consent of the girl. In countries where the legal age of marriage is below 18 years, marriage with parental consent does not negate the fact that such marriages are ‘early marriages’. Any individual under 18 who is willing to enter marriage is considered to lack the full understanding required to make an informed decision about marriage, which has life-long implications.³⁵ Unfortunately for many girls under 18 in developing countries, they are married early because they are no longer culturally categorized as children.

2.2. Pregnancy and safe motherhood

Women's ability to control their sexuality and fertility puts them in a better position to use their skills and take advantage of opportunities that could mitigate gendered barriers that make them vulnerable to poverty. Health, including sexual and reproductive health, ensures "the capacity for personal development and economic security in the future. Health is the basis for productivity, the capacity to learn in school, and the capability to grow intellectually, physically and emotionally".³⁶ However, statistics show that the burden of sexual and reproductive ill health – in particular those emanating from pregnancy, maternal mortality and morbidity, and gender-based violence – disproportionately affects poorer women and vulnerable women, including those who marry at a very early age.

"Around 15 million young women aged 15–19 give birth each year, accounting for more than 10 per cent of all babies born worldwide. Girls aged 10–14 are five times more likely to die in pregnancy or childbirth than women aged 20–24, while girls aged 15–19 are twice as likely to die. Many, if not all, of these deaths take place within marriage."³⁷

In spite of the numerous international commitments on the need to protect the health of mothers and to recognize reproductive health as a right to be enjoyed by all women, pregnancy and safe motherhood continue to pose risks for many women especially in developing countries. Additionally, although most societies continue to value pregnancy and motherhood, this is not evident in the commitments of national governments to eliminate underlying discrimination, gender inequities and risk factors which make women vulnerable to unsafe motherhood, and even death.

Pregnancy and childbirth present one of the strongest causalities between early marriage and poverty. The combination of gender discrimination, lack of decision-making skills and earning power, coupled with the absence of healthcare facilities and lack of respect for women's rights, compounds further the vulnerability of the majority of pregnant married girls. Poor and marginalized women are often at greater risk. Apart from the social norms that limit women's power and decision-making, prevailing laws and policies further limit poor women's access to basic, emergency and obstetric care.

While childbearing is perceived to improve the social status of married women in most communities, young married girls end up in "the vicious cycle of too early, too frequent, and too many high-risk pregnancies, resulting in morbidity, childbirth complications and mortality".³⁸ There is a strong correlation between early marriage and early childbearing. Brides in developing countries are often under extreme pressure from the extended family to start having children, and as a result, 90 per cent of first births occur within the first year of marriage.³⁹ Young brides are expected to bear many children, especially sons, as motherhood affirms a girl's value and identity. Studies show that the majority of births in developing countries occur within marriage, with between 15 per cent and 99 per cent of adolescent girls who give birth at age 17 or younger

(depending on the country) were found to be married at the time their babies were born. For example in Sudan this figure was about 99 per cent, and in Mali about 91 per cent of married girls gave birth before 18 years.⁴⁰

2.2.1. Social and physiological vulnerability of married girls

Married girls in general are invisible and voiceless and therefore their vulnerability is often not recognized and hardly addressed. The failure of community leaders and governments to protect the rights of married girls is often exacerbated by macroeconomic and globalization policies which force governments to reduce social and health services. The effects of economic structural adjustment policies (SAPs) imposed by the International Monetary Fund are often most damaging to the poor and vulnerable in society. SAPs which remove government subsidies and introduce charges for basic services disproportionately affect the poorest in society. In particular women and girls of reproductive age living in rural communities, who require health-related services because they often have more children, will be most at risk. Younger married girls without independent incomes are least likely to afford to pay health service charges. The denial of such basic services can also contribute to the difficulties they face in pregnancy and childbirth.

In a number of communities cultural expectations regarding sexuality are very restrictive for young girls. Once a girl reaches puberty, it is perceived that she is ready to engage in sexual relations and her sexuality should be curbed or controlled. Parents will often see this as a cue to arrange her marriage. The sense of isolation and vulnerability experienced by young wives is illustrated in a study of Nepalese women which showed that they felt betrayed by their natal parents when they were married off to strangers, and were practically insecure until they fulfilled their feminine roles of bearing one or two children.⁴¹ Motherhood is encouraged very early in the marriage as children confer status to the young bride.

Physiologically, young mothers are not fully mature for childbirth. Additionally the existence of cultural preference for sons in some parts of Asia, can result in nutritional taboos and male bias in food allocation, with girls often not obtaining sufficient nutrients for adequate development. In other situations this preference for sons can also lead to neglect and improper care of young girls. A number of girls may also suffer from anaemia brought about by iron deficiency. As economic deprivation increases across many countries, and food consumption and access to health services is decreased, a greater number of girls will become malnourished, anaemic and under-weight, with impaired physical growth. Early malnourishment can lead to complications in pregnancy and childbirth, especially when the first birth occurs soon after first menstruation.⁴² If a mother is malnourished, she will be weakened even further as a result of the pregnancy, as her body and that of her baby will be in direct competition for the few nutrients available.⁴³

The younger the age at marriage of a girl, the longer the fertility period and the more the number of children she will have in comparison to women who

marry at a later age. Dixon-Mueller’s study found that women who marry before 19 years are known to have at least two to four times more children than those who marry after the age of 25.⁴⁴ This high fertility stems from married girls’ lack of power to use contraception or negotiate with their partners to use contraception, and from health providers upholding the prevailing societal values by being less inclined to provide family planning services to young married girls.

2.2.2. Maternal mortality and morbidity

Box 1: Zeinab’s story

Zeinab, now 26, married at ten and gave birth to her first child at 12. As a result of giving birth, her left side is paralyzed and her husband subsequently abandoned her. She now lives with an aunt and sells potatoes. She is unable to educate her daughter because of her situation.

Source: UNICEF website⁴⁵

Stories such as Zeinab’s are not isolated cases. In spite of a decade of action on safe motherhood, the number of women who die from childbirth continues to remain at over 500,000 a year. Additionally about “7 million women who survive childbirth suffer serious health problems, and a further 50 million women suffer adverse health consequences after the childbirth”.⁴⁶ The vast majority of maternal mortality and morbidity is in developing countries. Studies confirm that maternal deaths and other health related ailments resulting from pregnancy and childbirth often affect the poor more, and as women are disproportionately found among the poor they will invariably be more affected by these conditions.⁴⁷

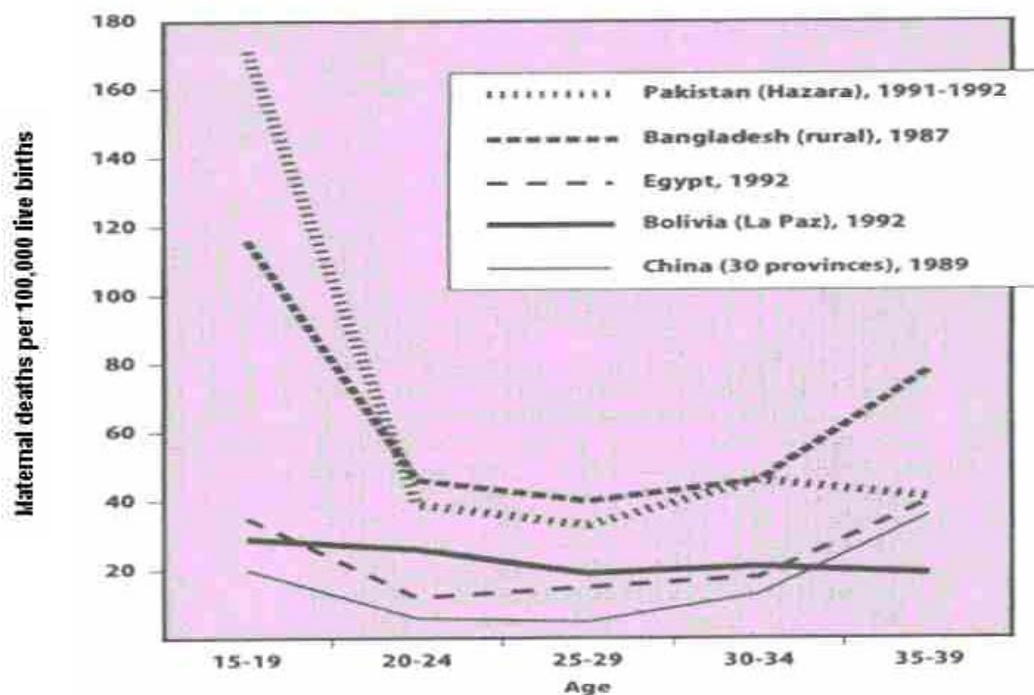
Indeed, the younger the age of the mother (whether married or unmarried) the less likely it is that she will be ready for the physical and psychological experiences of pregnancy and childbirth. Medically, young mothers are more likely to be affected by eclampsia and obstructed labour than women in their twenties. They are also less likely to seek antenatal care and advice.⁴⁸ As a result, young mothers face a higher incidence of maternal mortality and morbidity than older mothers (see *Figure 2*).

Although this review will not focus on child mortality issues, it is still worth noting that early marriages and pregnancies result in high child mortality. Babies born to mothers below the age of 18 are more likely to die before they reach their fifth birthday, and are more likely to be premature and underweight.⁴⁹ Young mothers may also lack parenting skills and decision-making powers regarding the care of their babies. Their babies often tend to have higher rates of child morbidity and mortality.

Girls under 15 are five times more likely to die in childbirth, while those aged between 15 and 19 are twice as likely to die in childbirth as a woman in her twenties.⁵⁰ In Nigeria, Cameroon and Ethiopia, maternal mortality amongst women under 16 was found to be six times higher than for those aged 20–24 years.⁵¹

Such deaths often occur immediately after birth (within 24 hours), and mainly as a result of untreated haemorrhaging before, during and after birth.⁵² When infections develop, they tend to go untreated because of the young mothers' poor knowledge of health complications, their low decision-making powers and the absence of health facilities, especially in rural areas. This is further compounded by the fact that the special needs of young married girls, particularly those below the age of 19, are often inadequately catered for within existing reproductive health services and programmes.⁵³

Figure 2: Maternal mortality ratio by age of mother



Source: WHO, 1996⁵⁴

Maternal morbidity is defined as illnesses and injuries that are due to childbirth and affect a mother's well-being. For "every woman who dies in childbirth, thirty more suffer injuries, infections and disabilities, which usually go untreated and some of which are lifelong".⁵⁵ Often younger mothers have a longer fertility life span and also have potentially a greater risk of maternal complications with each pregnancy.⁵⁶

A young mother may suffer from damage to her reproductive tract, ruptures in the birth canal, high blood pressure, anaemia, eclampsia, pelvic inflammatory disease, infertility and obstetric fistulas (see Box 2). These complications are compounded by lack of antenatal and specialist obstetric care in a number of developing countries. Ultimately poverty will also be a determining factor in increasing a girl's chances of dying from such life-threatening situations. The obstetric complications may also be greater when girls and women have undergone the more severe form of female genital mutilation, in which the vaginal opening is purposely cut and sewn up.

Box 2: Fistula

An obstetric fistula is a hole that develops between the vagina and the bladder or the rectum or sometimes both.⁵⁷ This is a pregnancy-related disability which is caused by obstructed labour. Fistulas result in incontinence due to loss of control over bowel and bladder movements. In most cases fistulas occur when a “young, poor woman has an obstructed labour and cannot get a Caesarean section when needed”.⁵⁸ The underlying causes of fistulas are poor malnutrition and stunted pelvic development, both associated with poverty. Young married girls in resource-poor settings are disproportionately affected by fistulas and least likely to have access to medical treatment and support.

In most cases fistulas occur during the first pregnancy, often with a higher chance of stillbirth and other complications which could lead to infertility. Fistulas are very devastating to the affected women, resulting in loss of status, abandonment and a life of poverty and misery. The humiliation of living with a constant smell of faeces and or urine leads to social isolation and rejection. Girls who formerly sold food have been known to lose their livelihoods, as their products are considered unclean.⁵⁹

Results from several studies confirm that between 50–80 per cent of women below the age of 20 develop fistulas, with the youngest patients being 12 or 13-years-old.⁶⁰ In Niger, it was estimated in 1995 that 80 per cent of fistula cases were among girls aged between 13–17 years.⁶¹ Fistulas have become a thing of the past in most developed countries. It is also less common in more affluent communities which tend to have more education, more resources to access information and services and also marry at an older age. The younger the girl the more likely that she will be unable to access treatment or have the means to pay for such services. The cost of treatment is prohibitive and beyond the reach of the poor and often ranges between US\$100 and US\$400. It will therefore make more economic sense to prevent fistulas by reducing early marriages and the push factors such as poverty.

Obstetric fistulas are a devastating form of maternal morbidity and are estimated to affect 50,000 to 100,000 girls and women annually, most commonly in Africa and parts of South Asia.⁶² This figure is a significant underestimation because it is predominantly based on hospital records. The majority of young women with fistulas who live in poor remote villages will remain poor, invisible, marginalized and exist without any hope of cure.

UNFPA’s initiative to address fistulas proposes the following measures to alleviate the problem and support affected women and girls:⁶³

- postpone marriage and pregnancy for young girls
- increase access to education and family planning services for women and men
- provide access to adequate medical care for all pregnant women and emergency obstetric care for all who develop complications
- repair physical damage through medical intervention and emotional damage through counseling.

One of the neglected areas within the care of fistulas is that of removing stigma and discrimination. The stigma associated with the condition means that girls who are repaired will also continue to carry the stigma throughout their lives. It is necessary to work with communities to ensure full integration of women and girls who have been repaired.

Some complications from pregnancy and childbirth are so common that they are accepted as normal. Similarly complications associated with pregnancy, which occur long after childbirth are often not directly linked to pregnancy. Ultimately poverty and other government policies also deny married girls access to medical care and other emergency procedures necessary to reduce these pregnancy complications and death. This is because most reproductive health services and programmes are either designed mainly for older women or target young people in schools.⁶⁴

2.3. Gender-based violence and early marriage

Gender-based violence is “...violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering of women, including threats of such acts, coercion, or arbitrary deprivations of liberty, whether occurring in public or in private life” (Declaration on the Elimination of Violence Against Women, Article 144).⁶⁵

It is now widely recognized that many women who are affected by gender violence are isolated and often suffer in silence. Gender-based violence is a public health problem which violates the human rights of women and girls. Early marriage is one form of sexual violence which is never publicly acknowledged. While sexual abuse of minors is considered a criminal offence under the penal code of several countries, sexual relations with minors who are married may not be viewed as a criminal offence. Sexual relations with minors within early marriage are “sanctioned by society and often result in repeated sexual abuse and other forms of gender-based violence”.⁶⁶

While the causes of gender violence are complex, powerlessness, poverty and gender inequality are known to be contributing factors for intimate partner violence. Early marriage creates a number of conditions that may expose married girls to poverty and violence. Men’s control over key resources, social isolation and the low socio-economic status and dependency of women may predispose married girls to further violence and poverty.⁶⁷ Some examples of gender violence which can be exacerbated by early marriage include domestic violence, rape, emotional abuse and trafficking. Although further research is needed on the links between poverty, early marriage and violence, available evidence confirms a strong correlation.

2.3.1. Gender violence affects the well-being of married girls

Gender violence can indirectly create vulnerability to poverty. This is because violence reduces women’s autonomy in decision-making on a range of issues and fear often prevents women from taking action. Gender-based violence is a threat to women’s well-being and productivity and affects the welfare of children in society at large. Gender-based violence saps “women’s energy, undermining their confidence, and compromising their health”.⁶⁸ It is likely that younger wives who tend to be more financially dependent on their spouses will be more affected by the consequences of partner violence and also less likely to leave as a result of this dependency.

Where girls are initiated into sexual activity, sometimes even before they reach the age of menarche and often with a virtual stranger, they are bound to be traumatized, and the experience will have far-reaching consequences in other aspects of their lives. Additionally young girls may typify the prevailing community views regarding violence and internalize these within their own lives. Recent figures from a study on early marriage confirmed this view. Among young women married before the age of 15, about 67 per cent in Benin, 62 per cent in India and 64 per cent in Turkey felt that physical abuse from one's husband was justified in some situations. However the figures were much lower among women who married after the age of 26; only 42 per cent from Benin, 40 per cent from India and 36 per cent from Turkey believed husbands were justified in using physical violence on their wives. In the Indian studies it showed that age at marriage correlated with physical security; girls who married at 15 years or below were about twice as likely as those who married at 21–25 years to be beaten by their husbands.⁶⁹

Box 3: Aberash's story

Aberash Bekele was 14 when she was abducted by seven horsemen in southern Ethiopia and taken to a remote hut, where she was repeatedly beaten and raped by the gang leader. In rural Ethiopia, this is a traditional way of procuring a bride. If a man wants a wife, he kidnaps her, and then rapes her until she becomes pregnant. "He hit me, I nearly lost consciousness," remembers Aberash. "He was such a huge man I could not push him away. Then he forced my legs apart. He beat me senseless and took my virginity." Tribal tradition has it that once the abducted girl has become impregnated, the man can put his claim on her. Village elders act as mediators between the families and negotiate the bride's price.

In return for the daughter, the abductor was willing to give an ox to Aberash's parents... Aberash knew her rapist wanted to become her husband. But on the second day of her kidnapping she found a Kalashnikov in the corner of the hut. Badly beaten, covered in blood and with a broken arm, she tried to escape. But it wasn't long before her rapist caught up with her. Hands trembling, Aberash fired three warning shots in the air. He kept advancing. Aberash lowered the gun, shot and killed him. This broke every taboo. She was arrested for murder, brought to trial which created a major rift between her family and the abductor's family... [who] sent her to an orphanage in Addis Ababa and ordered her family to pay compensation for the abductor's death. To raise the blood money Aberash's family had to sell their cattle and borrow from relatives.

*Source: Jelacic, 1999*⁷⁰

Marriage by abduction is by nature violent. It involves the "unlawful kidnapping or carrying away of a girl for marriage".⁷¹ Abductions such as that experienced by Aberash occur daily despite international declarations that all marriages be based on the full and free consent of both parties. In some communities, abduction remains an acceptable form of acquiring a bride. For example, although Ethiopia's constitution bans both early and forced marriage, 'abduction marriages' still occur in some rural contexts. A study conducted in Ethiopia with 227 wives showed that 60 per cent of them were abducted before the age of 15, and 93 per cent before the age of 20.⁷²

Poverty may reinforce certain traditions that encourage violence. Some men will resort to abducting young girls when they are unable to afford the bride price, or cannot accept a girl's refusal of a marriage offer. The abducted girl is

usually subjected to sexual abuse and can suffer vaginal tears, suffocation, infection and psychological trauma.⁷³ The bride price in such cases is often waived, as the girl is no longer a virgin. Where societies value the virginity of girls before marriage, an 'abducted marriage' is accepted to safeguard the family's honour (see *Box 3*). This form of early marriage legitimizes the marital rape of young girls,⁷⁴ and further violates the right of girls to be free from abuse and sexual violence.

Societal attitudes on discussions on sexuality as a taboo subject means that girls who show any knowledge of sexual matters are considered bad. Younger married girls may be socialized to accept violence in marriage and defer decisions on sexuality to their husbands. These attitudes are often found in sayings and proverbs. For example some African proverbs accept violence as a normal part of life for women: "a woman and a horse need to be harnessed", "a woman is a man's property", "a wife has to be submissive to her husband". The adolescent bride is socially conditioned "right from childhood, that women are inferior to men, they are expected to serve their husbands, obey their orders, satisfy their sexual needs and that men have the right to beat them if they fail to perform these expected duties properly".⁷⁵

The unequal decision-making powers conferred to husbands' means that decision-making and negotiating powers of women are either not respected or encouraged. Instead, wives are taught to succumb to the desires of their husbands, no matter how demeaning.⁷⁶ This unequal power relation between spouses will invariably be greater where the age gap between spouses is bigger. Since most early marriages occur in rural communities, sex within marriage is traditionally accepted as the norm and therefore it will be least likely that rape can be perceived to happen within such marriages. Perpetrators of gender violence believe they have the legitimacy of marriage. and abuse within marriage is subsequently very often ignored by the law, by families and by communities, all of which are supposed to protect and support the girls. When a girl resorts to defend herself as with the case of Aberash in Ethiopia (see *Box 3*) she is often treated as the perpetrator.

2.3.2. The commercialization of sex and marriage

Social attitudes on divorce and the stigma associated with single mothers, coupled with other financial constraints and family pressures make it impossible for many girls to leave abusive marriages. Where the bride price is returned at divorce and where families have given their daughters away as gifts in exchange for other favours, girls may not be accepted back by their families of origin. Girls and women who are able to escape from early marriage are often forced by poverty to go into commercial sex work to survive. In other contexts in Iraq and Egypt, for example, poverty has pushed many young women into short-term 'cash marriages'. Men take advantage of these so-called 'wives' for a few hours, primarily for sex and then subsequently divorce them.⁷⁷ Sex often becomes a commodity that runaway brides can exchange for cash. However, younger girls may further be at risk of abuse and violence as, unable to negotiate condom use, they can increase

their vulnerability to sexually transmitted infections such as HIV/AIDS.⁷⁸ Early marriage can therefore, be a contributing factor in the increasing rate of urbanization and the commercialization of sex.

2.4. Married girls and the risk of HIV/AIDS

“Married girls have higher levels of sexual activity than their sexually active unmarried peers, have limited ability to negotiate condom usage and have low power to refuse sex from their partner. Additional health risks are brought upon married girls by the pressure on them to become pregnant.”⁷⁹

The HIV/AIDS pandemic has highlighted the role that gender inequalities and inequities play in the spread of the infection. However the effects on early marriage and poverty and the individual livelihoods of married adolescent girls has hardly been addressed in any literature. Recent epidemiological data confirms that young women are being infected at a higher rate than men, especially in sub-Saharan Africa. About two-thirds of newly infected 15–19-year-olds in the region are female.⁸⁰ Being young and female in parts of Africa seems to be a major risk factor in becoming infected or affected by the HIV pandemic. In the early days of the HIV epidemic, heterosexual relationships were considered safe and, as such, early marriage may even have been encouraged as a safe haven for a number of girls now living with the virus. However, the low decision-making powers and limited economic autonomy of many married girls will further increase their vulnerability to HIV and poverty.

While the links between HIV/AIDS and poverty are now emerging in a number of developing countries heavily affected by AIDS, poor women are already known to be more adversely affected by the virus because they lack access to health services and treatment, and have limited income and resources. In the context of married adolescent girls, there may be a number of issues which will push them into risky behaviour as a survival strategy. As highlighted above, young girls who run away from early marriages may end up as sex workers or resort to use sex work as a way of earning additional income. Married girls and their children with older spouses infected by AIDs may also be widowed early and join the ranks of marginalized and poor women.

2.4.1. Gender, sexuality and HIV/AIDS

Box 4: An HIV-negative female’s story of abuse

During a study on HIV/AIDS transmission, an HIV-negative female volunteer reported to a member of the study team that she was being physically and sexually abused by her HIV-positive husband. The husband refused to use condoms, and beat his wife if she refused unprotected sexual intercourse. He also threatened to beat her child from a previous marriage if she refused intercourse. She was afraid to leave her husband because he was paying for food and school for their children. She had no independent income and no family to help support her financially.

*Source: Fitzgerald et al, 2003*⁸¹

A combination of biological, socio-economic, cultural and political factors put young people – particularly young women – at greater risk of HIV infection. A girl is physiologically more prone to contracting HIV/AIDS, as her vagina is not well lined with protective cells and her cervix may be more easily eroded. A global analysis of the epidemic shows that “the prevalence of HIV infection is highest in women aged 15–24 and peaks in men between five to ten years later”.⁸² In some of the worst affected African countries, teenage girls are being infected at rates five to six times greater than those of young men.⁸³

Marriage is very often perceived as the institution in which sexual relations are safe. The reality is that marriage does not offer any protection, but can instead increase married girls’ exposure to the virus, especially as older husbands may often engage in unprotected sexual relations with other partners.⁸⁴ The risk of HIV infection is also known to be higher among the poorest and most powerless in society, and as such married adolescent girls, who tend to have much older spouses, will be more at risk of infection than unmarried girls. Their inability to negotiate safe sex and other social pressures becomes a critical channel of vulnerability for a number of married adolescent girls.

One of the most popular strategies for preventing HIV relies on the ‘ABC paradigm’, i.e., ‘Abstain, Be faithful and use Condoms’. This strategy will be meaningless to married girls, who have little sexual decision-making powers, and can neither negotiate condom use nor ensure the fidelity of their partners. Often girls are under pressure to prove their fertility and acquire status within the family. In 2002 a study by Clark on HIV/AIDS in sub-Saharan Africa reaffirms that for many women, marriage equates the end of condom use and the increase in sexual activity.⁸⁵ Married girls are bound to have more frequent sexual activity than their unmarried counterparts and are less likely to have the power to be able to control the when and how of sex. Contraceptive use by married women in sub-Saharan Africa between 15–19 years is below 10 per cent⁸⁶ compared with an overall usage of 25 per cent by married women aged 15–59 in Africa.⁸⁷

A study in Rwanda confirms that the younger the age of sexual intercourse and first pregnancy, (as in the case of married girls), the higher the incidence of HIV infection.⁸⁸ In rural Uganda, girls aged 13–19, who were HIV positive, were twice as likely to be married as girls who were HIV-negative. The Prime Minister of Mozambique, Dr Pascoal Mocumbi, noted in 2001 that the rate of the virus infection in girls was twice that of boys, “not because the girls are promiscuous, but because nearly three out of five are married by the age of 18, 40 per cent of them to much older, sexually experienced men, who may expose their wives to HIV/AIDS. Abstinence is not an option for these child brides. Those who try to negotiate condom use commonly face violence and rejection”.⁸⁹ A study in Indonesia of married and unmarried girls of 15–19 revealed that respectively 13 per cent and 31 per cent knew what a condom was, and 59 per cent and 86 per cent respectively had heard of HIV/AIDS.⁹⁰ Unmarried girls were therefore by far more informed on safe sex.

“...There is a culture of silence that surrounds sex that dictates that ‘good’ women are expected to be ignorant about sex and passive in sexual relations.”⁹¹

Consequently, parents are unable to talk to their daughters before their marriages about sexual matters and sexual relationships. This lack of knowledge and informed discussion has also led to the spread of myths in many communities, such as the myth that marriage to and/or intercourse with a young virgin girl can cure, or protect a man from, HIV/AIDS. Such myths only serve to increase the vulnerability of young virgin girls.

2.4.2. Poverty, gender inequality and access to AIDS treatment

Decision-making on access to sexual and reproductive health and HIV/AIDS services is often influenced by the power dynamics between spouses, which puts absolute decision-making powers in men. A study in Tanzania revealed that while men independently seek voluntary counseling and testing, women felt compelled to get consent from their partners. This is because socially, women do not have the decision-making powers and financial resources needed to access health services. Access to HIV/AIDS services is often more restricted for married adolescent girls.⁹² Additionally, men usually go to formal health services, while women tend to seek medical assistance from traditional services which are cheaper, closer to home and are more familiar.⁹³

A study from Zambia showed a two-thirds decline in the number of HIV/AIDS out-patients in a government hospital following the introduction of user charges as part of the SAPs. SAPs may therefore be raising the incidence of HIV/AIDS as people can no longer afford to attend health clinics.⁹⁴ SAPs can subsequently be viewed as an infringement of the rights of women (and men) to access health care. Such data needs to be disaggregated by sex to enable policy makers to understand how men and women are adversely affected. In many countries HIV/AIDS statistics are mainly based on data from antenatal services, yet it is possible that many younger mothers will be unable to access such services and therefore result in the underestimation of statistics.

Many men, women and children who are affected or infected by HIV/AIDS experience increasing stigma and social discrimination. Women in general often face greater stigma and negative consequences than their male counterparts because of their generally inferior status. Where young girls are infected by HIV they may not even have the knowledge to recognize the infection and its symptoms. Further research is clearly required as well.

An equally challenging dilemma is women's role as carers and their burden in caring for sick spouses and family members. The implications of the HIV/AIDS pandemic will affect women differently because of their gender roles. As wives girls will be at risk of infection because of entrenched social and economic vulnerability; as mothers they are blamed for infecting their babies; as care givers they bear the burden of supporting and caring for those infected. Many ill women may be forced to ignore their own needs so as to meet the needs of other family members. The consequences of caring for and supporting those infected by AIDS often leads to further impoverishment in the family, and to younger girls being withdrawn from school or married off early, with detrimental consequences on individual, family and community development.

Section 3: Towards transformation – promoting a gender and rights agenda

The previous two sections have explored some of the social risk factors and causal links between early marriage and poverty. A number of issues pertaining to rights and gender-related biases were highlighted. This section introduces some strategies for policies and programmes on early marriage and presents practical examples for promoting change and supporting women and girls affected by early and forced marriages.

In the absence of specific studies linking early marriage and poverty, this review has provided adequate grounds for more focused studies and demonstrated the need for policy makers to acknowledge these links. We all have to recognize that married girls and their children are at risk of poverty by virtue of their low status and lack of decision-making powers especially in sexual matters and reproductive health issues. Increasing the age at marriage of girls while fulfilling their right to education and livelihood opportunities will ultimately have ripple effects on overall economic and social development.

It is possible to use the new Millennium development agenda agreed by governments to transform the situation of married girls. These “millennium development goals are mutually supportive and require multisectoral programmes that tackle each of the goals simultaneously. Countries should ensure that poverty reduction strategies increase the focus on the poorest and most vulnerable through an appropriate choice of economic and social policies”.⁹⁵ This review provides further guidance for addressing the needs of vulnerable people who have remained invisible for far too long in both social and economic policies and programmes that reduce poverty. This gender-based analysis has provided more insights into the social inequalities and discrimination faced by married adolescent girls; a rights-based agenda will ensure equity and accountability and help transform the reality of vulnerable women and girls so as to enhance their capabilities and well-being.

3.1. A rights-based agenda

Although there is little international consensus on what a rights-based agenda is, what is needed here requires a commitment to married girls and women who have been voiceless simply because it is their due as human beings. This rights-based approach is an adaptation from the United Nations High Commissioner for Human Rights. Its key elements are essentially: legally enforceable entitlements, accountability by way of duties and obligations of a range of actors, empowerment, participation, non-discrimination and attention to vulnerable and marginalized groups.⁹⁶ There needs to be a process of change. However, this will require rights education, adopting protective measures as well as creating an enabling environment to give a voice to girls’ and women’s agencies. It is essential therefore that they have the necessary skills and confidence to exercise these rights. Women and young girls should

be able to make informed choices in all aspects of their lives without coercion or fear. The removal of gender-related obstacles will help to protect the decision-making, negotiation and bargaining powers of women and girls.⁹⁷

While the human rights approach is often criticized as being individualistic, this element of accountability from a range of players – including governments, civil society and community leaders – is often very necessary to safeguard the interests of married girls and those who are at risk, so as to secure their individual entitlements in all aspects of their lives.

The UN Convention on the Rights of Children (CRC), one of the most widely signed and ratified international conventions, grants all children their rights in relation to education, health, survival and development and protection from sexual and other forms of exploitation. This Convention requires that the best interests of the child should be promoted at all times. The continuous practice of early marriages undermines a number of the clauses recognized by governments. Among them are the following:

- To take all effective and appropriate measures with a view to abolishing traditional practices prejudicial to the health of children (Article 24/3)
- To respect and ensure the rights set forth in the present Convention to each child within their jurisdiction without discrimination of any kind, irrespective of the child's or his or her parent's or legal guardian's race, colour, sex, language (Article 2/1)
- The right to education (Article 28)
- To ensure to the maximum extent possible the survival and development of the child (Article 6/2)
- To take all appropriate legislative, administrative, social and education measures to protect the child from all forms of physical or mental violence (Art 19) and from all forms of sexual exploitation (Article 34)

However, the CEDAW is the most valuable instrument for making states accountable in the area of married girls. It can serve as a useful tool for action by civil society to bring about transformation and change. This Convention outlines a number of socio-cultural and gender-based issues which are underlying causes of poverty both within the private and public lives of women. In particular, Article 16 and General Recommendation No. 24 focus on the elimination of discriminatory practices related to marriage and the health of women, girls and adolescents. Child marriages are categorically viewed as illegal and discriminatory and governments are required to enact and effectively enforce laws that prohibit marriage of girl children.⁹⁸

The International Planned Parenthood Federation's Charter on Sexual and Reproductive Rights (1995)⁹⁹ also highlights a number of human rights that are integral to women's sexual and reproductive well-being. These include:

- the right to equality and to be free from all forms of discrimination
- the right to freedom of thought
- the right to information and education

- the right to choose whether or not to marry... found and plan a family
- the right to decide whether or when to have children
- the right to be free from torture and ill treatment
- the right to health care and health protection.

In the development of poverty eradication policies it will no longer be acceptable to ignore the needs of married girls because they are a vulnerable and voiceless group. A rights-based perspective will introduce accountability measures which will protect and ensure the active participation and empowerment of women and girls. It is also recognized that women who marry at a later age and have the option to choose their spouses are often better educated and come from communities where there is social recognition of wider choices for young women.¹⁰⁰ Therefore, women's entitlement to rights within the wider society is critical for exercising other sexual and reproductive rights within the sphere of marriage.

3.2. Programme interventions

There have been a number of programme interventions either to delay early marriage or to help improve the special situation of young married girls. Although some of these initiatives have had positive impacts on communities, they have mainly been on a small scale and have primarily been initiated by NGOs. Integrated action is needed from both governments and civil society for any meaningful change to take place.

Programmes and policies regarding early and forced marriages should be about creating an enabling environment through which adolescent girls, especially adolescent wives, can reclaim their entitlements and their human rights and through which livelihood skills and gender equity can be promoted. This is possible through active and organized constituencies at community level where safe spaces for the self-organization of vulnerable groups can be created.¹⁰¹ A strategy to protect the needs of young girls at risk of early marriage should involve different levels of players. It is necessary to focus on changing community attitudes to early marriage and to get commitment and support from the family and the wider community, as this is where individual decisions are made. Government agencies, on the other hand, often have the political decision-making powers and are more likely to assist the creation of structures necessary for providing support and skills development.

The diverse needs of married and unmarried girls of all ages, both illiterate and literate, living in rural and urban areas, should also be recognized. Ideally, all programmes should be informed by the following guiding principles:

- Promoting gender equity and empowering women and girls
- Protecting vulnerable groups and individuals
- Working in partnerships with parents, families, opinion leaders and communities to improve the status of young girls and women
- Safeguarding and defending the rights of women and girls to bodily integrity, security of the person, human dignity, health and education;

- making this integral in the planning and implementation of all programmes
- Providing opportunities for services, support and skills development.

3.2.1. Increasing Self-Determination in Adolescent Girls¹⁰²

In response to meeting the specific needs and concerns of unmarried adolescent girls in India, Swaasthya, a non-governmental organization based in India, conducted a study on sexual behaviour among adolescents in Tigri, Delhi, between 1996 and 1997 which became the basis of a community-based initiative to improve adolescents' life skills and reproductive and sexual health concerns.

The intervention which was being implemented by Swaasthya set out to enhance the sexual health of adolescent girls by addressing them and their immediate environment through a participatory, community development approach. The intervention, which was conducted in Tigri, a migrant resettlement community in Delhi, included the following key elements:

- **Skills Building Modules** – which consisted of a set of seven training modules to build understanding of 'self', and to increase adolescents' capacities and life skills to enable them to deal effectively with real life situations, both social and health related issues.
- **Communication Package** – disseminating information by interpersonal communication with trained Swaasthya field workers and through indigenously made videos aired on local television.
- **Social Support** – creating a support network for the girls by forming women's and adolescent girls' community groups that met monthly to increase understanding between mothers and daughters.

The results of the evaluation showed that the knowledge of reproductive and sexual health and knowledge of legal issues were very effective in increasing girls' perceived self-determination, especially regarding their ability to decide whether and when to marry, and when to have a first child. The social support strategy also helped improve communication between girls and their mothers and changing adult gate-keepers perceptions of adolescent girls' lives and needs.

This intervention study is part of a multi-site program of intervention research on adolescent reproductive health and development coordinated by the International Centre for Research on Women (ICRW) since 1999. In-country partners for these studies are the Christian Medical College, the Institute of Health Management, Swaasthya, KEM Hospital Research Centre, and the Foundation for Research in Health Systems.

3.2.2. The Family Planning Association of Kenya's Initiative on early and forced marriages

The Family Planning Association of Kenya (FPAK), an affiliate of the International Planned Parenthood Federation, initiated the 'Options Project for Improving the Status of Women' in the Kilifi District.¹⁰³ The overall goal of the project is to increase the capacity and capability in decision-making (on issues of reproductive health) of women and girls, particularly those aged 10–24 years. Parents, especially fathers, are the key stakeholders that FPAK targets in this initiative to combat early marriage.

Volunteer Community Gender Educators (VCGEs) are recruited as role models because they command respect in the communities, and they carry out the activities of the project. The key activities include the identification of girls who have already been married at an early age and advocacy to lobby support from administrative leaders and education officers. The VCGEs have also been known to use the intervention of court rulings in cases where parents have refused to dissolve early marriages. Girls rescued from early and forced marriages are able to stay in the Waa boarding school, provided by the District Education Board, where a special school programme has been developed for them. (See Box 5).

As a result of awareness-raising meetings, men are now at the forefront of advocating for the eradication of practices that are harmful to young women. Information, education and communication (IEC) materials, such as T-shirts, posters, bags and flags, have also been used to raise awareness.

FPAK recognizes that sustainability of the project will require enhancing the capacity of the community to tackle change themselves. Although this could be a much longer process, FPAK felt that it was necessary to empower the community.

Box 5: Mary Mwabaya's story from Kenya

Mary was forced to get married after her parents realized she was pregnant. The father-to-be was a fellow classmate and age mate. By the time the VCGE and District Youth Advocate (DYA) learned of her case, Mary was already a wife and a mother. She looked neglected by her in-laws. Her health and that of her baby had deteriorated and she was leading a pathetic life. After counselling the girl through a series of visits, she was introduced to service providers at the Chasimba Health Centre. Mary expressed her wish to go back to school if given an opportunity. After consulting her parents and in-laws it was agreed that Mary would be sent back to school. Her father promised to pay her school fees. The area Chief who was present offered to secure a school for her at the beginning of the year (2002). Mary has now joined Waa boarding school.

Source: FPAK, 2002 ¹⁰⁴

3.2.3. Support Centres for Girl Brides in Burkina Faso¹⁰⁵

In Burkina Faso, early marriage is a tradition that is widespread especially within the rural communities. Officially the legal age for marriage for girls is 17 years. According to the legislation on the code of persons and the family marriages below 17 years are illegal and punishable under the penal code. Population Council figures indicate that between 62 per cent of women aged between 25–29 years were married before 18 years. There are different forms of marriage practices in Burkina Faso: girls can be promised in marriage at birth or during childhood, although the marriage often takes place between 12 to 17 years. Although bride price is officially forbidden in Burkina Faso, it continues to be a major push factor for marrying off girls early.

Due to social taboos around fear of being rejected by parents girls are forced to accept parental choice of spouses. In spite of this girls ignore such pressures and escape forced marriages. Often the only route of escape from early marriage is under extremely dangerous conditions with very little financial support. Often girls have to walk for several days, hiding in trees during the day. Some of these runaway girl brides end up seeking refuge in Catholic Religious Centres. There are ten centres across the country which caters for between 25–80 girls. Parents often disown and banish these girls and it becomes impossible for them to be reconciled with their family of origin.

Pugsada a local organization, with a mission to improve the status and wellbeing of girls, has initiated a partnership with the Catholic Church to provide support, mediation between families and vocational training to the girls in the centres.¹⁰⁶ Girls who acquire vocational skills are often given further assistance to set up their own businesses. Some of these girls have managed to be re-integrated into their families, because they were able to bring financial support to their parents and family members. In addition, Pugsada initiated a study on the prevalence of early and forced marriage in the central region of Burkina Faso where the religious centres are located.

Anti-Slavery International has provided financial support to Pugsada for the recruitment of a lawyer (a women's human rights activist) to conduct the study. A national seminar was organized to discuss the findings of the study and representatives from women's associations and NGOs were invited to report on their experience of girls' marriage in their respective regions. Each representative was asked to organize locally a meeting with women's groups to share the findings of the study and the recommendations of the meeting. In the localities where the study has been carried out, one month of campaigning was organized, using street theatre, radio programmes and live broadcast meetings with parents, religious leaders and girls with different stories to tell (of success and suffering). Currently the Ministry of Social Action and National Solidarity, the Ministry for the Promotion of Women and the Ministry for Human Rights are all working actively in collaboration with other local NGOs to tackle early and forced marriages in Burkina Faso.

3.2.2. Using advocacy as an intervention strategy

Advocacy, partnerships and networking are pivotal parts of any intervention to address early marriages because of their potential for reaching larger audiences and creating an opportunity for multi-faceted action. The Forum on Marriage and the Rights of Women and Girls is a network of UK-based NGOs with international affiliates, sharing a vision of marriage as a sphere in which women and girls have inalienable rights. The Forum's shared commitment to social justice places central importance on the need to bring principles and rights, which are accepted in the public sphere, into effective operation in the private sphere, particularly within marriage.

The Forum, which was established in 1998, is committed to the inalienability of human rights of women throughout their lives, which cannot be reduced or violated by marriage, and to the breaking down of barriers (including legal, social and cultural barriers) that impact adversely on women's and girls' rights within marriage. The Forum works to develop common strategies and to carry out joint advocacy activities to monitor implementation of international conventions on the human rights of women and girls.

The Forum's aim is to build a global network, to gather and share information and to reach a better understanding of the legal, social and health implications of the violations of girls' and women's human rights in relation to marriage. The Forum's primary focus has been on advocacy action around early marriage and this has resulted in some ground-breaking work highlighting different aspects of early and forced marriages. The Forum's first publication *Early Marriage: Whose Right to Choose?* (2000) formed the basis of a comprehensive publication by UNICEF's Innocenti Research Centre – *Early Marriage: Child Spouses* (2001). The second publication of the Forum explored: *Early Marriage: Sexual exploitation and the human rights of girls* (2001). The Forum's position that early and forced marriage should be seen in the context of commercial exploitation of children gained some recognition at the Second World Congress against the Commercial Sexual Exploitation of Children, held in Yokohama in December 2001.

The Forum on Marriage and the Rights of Women and Girls and FORWARD organized a joint Technical Consultation on Early and Forced Marriage in October 2003 in Ouagadougou, Burkina Faso. The four-day technical consultation, which was attended by twenty-four representatives from six African countries agreed to adopt the term child marriages in the Ouagadougou Declaration:

“That our Governments and the African Union adopt a clear and unambiguous position on child and forced marriages and rectify the legislative loopholes between religious, customary and civil marriages, and sign the Protocol to the African Charter on Human and People's Rights on the Rights of Women in Africa and ensure that special measures are taken to help end this practice.”

3.3. Framework for action and recommendations

The growing international attention to human rights and to the concerns of young people – and young girls in particular – provides an added opportunity to break the vicious cycle of poverty and socio-cultural practices which violate the rights of women and girls and hampers their development. In particular, much more remains to be done by way of effective programmes to meet the needs of young girls trapped in early and forced marriages, living in rural communities, who are invisible from most development efforts. Additionally action should focus on prevention and increasing the age at first marriage and on addressing the needs of girls at risk of early marriage. Three areas for breaking this vicious cycle of poverty and early marriage are suggested here, and will require joint action from governments, civil society, communities and young women themselves. Other actions to be taken at the community, national and the international levels are also provided.

Advocacy at national and international levels

Evidence-based advocacy to reduce child marriages and to promote, respect and protect the rights of girls and women should aim at changing public policy and attitudes towards child marriages with the ultimate goal of reducing the demand for such practices. In addition to the prevention approach, the focus of an advocacy initiative will also serve to ensure the development of appropriate programmes that will address the situation of girls and women affected by or at risk of early and forced marriages.

It will be necessary to build a constituency of support through networking and collaboration with a variety of key stake holders at local, national and regional levels to strengthen advocacy efforts to stop child marriages. Examples of advocacy initiatives can include the following:

- Mobilize action to improve gender equity and protect the rights of young girls and women to have education and vocational and livelihood skills;
- Use research results to highlight child marriages as a public health concern which is detrimental to individuals and communities;
- Action to introduce legislative changes including the legal age of marriage and rationalize institutional and legislative loopholes between religious, customary and civil marriages;
- Undertake research to examine the links between poverty and early marriages and use for advocacy purposes;
- Work with governments and health providers to develop policies to meet the special needs of young married girls and those at risk of marriage.
- Work with community/women's groups and local political and religious leaders to increase awareness and address misconceptions and myths around women's rights in marriage and change attitudes and behaviour towards girl child marriages.

Services and programmes

The main focus of the provision of support services and programmes is about upholding the rights of women and girls while seeking to improve gender equity, empowerment, participation and women's agency, accountability and

attention to vulnerable and marginalized groups. Concerns around availability and affordability of services are just as important as the quality of care. Since a number of the bottlenecks around services have to do with institutional structures and attitudes of service providers, institutional capacity-building and strengthening will be required to enable providers to acquire the relevant skills and approach to working with young mothers and young girls.

It will be necessary to ensure that access to comprehensive sexual and reproductive health services and programmes be appropriate to the age and developmental needs of all young people including young girls. This focus will require implementing fully the Programme of Action from the 1994 International Conference on Population and Development for youth-friendly sexual and reproductive services which meets the requirements of young people of all ages. It is important to identify ways of helping young married and unmarried girls participate in programmes. This will require looking critically at organizational and community structures, decision-making processes, and making changes to support young people's voices and inputs.¹⁰⁷ In a number of cases specialist services will be needed to address the health specific concerns of girls and women, for example specialist care for fistula sufferers. There are a number of innovative programmes such as the "Newlywed Programme" in Bangladesh which addresses the sexual and reproductive health needs of young couples by helping them to plan better for their pregnancy.¹⁰⁸ Other forms of support services aim to improve communication between parents and children by providing them with relevant information and skills for open dialogue on sexuality, relationships and sexual well-being. This is really critical in rural communities where discussions on sexual matters are not encouraged between parents/guardians and children.

Since a number of married adolescent girls either have no education or stop their education when they marry, there is a need for alternative forms of education to enable girls to acquire key literacy and numeracy skills as well as other life skills necessary to enhance their capabilities to become meaningful players within their families and their communities. Livelihood programmes should be geared to create opportunities, increase self-determination and independence of girls by improving their access and control over essential productive, decision-making and social resources.

Clearly there is a need for innovative and gender-sensitive programmes that are tailored to provide education and vocational training for both unmarried and married girls. Ultimately employment opportunities for women should encourage 'non-servile occupations', i.e., non-domestic employment.¹⁰⁹ Often the traditional focus on knitting and sewing create marketing problems and do not improve incomes. Social activism should be incorporated into support programmes to help girls acquire critical life skills in decision-making, negotiation and confidence building so as to enhance their social capabilities.

Laws and policies

A positive policy climate is central for transforming the situation of married girls. It is necessary to create an enabling environment for reducing gender

inequities and biases and to improve the bargaining powers and rights of girls and women so that they can actively improve society.

This will require awareness-raising and education to ensure that governments review national laws on the legal minimum age of 18 years to adhere to international agreements and standards on marriage and the rights of women and children. Any legal changes should be made widely known and all discrepancies between customary, national and international laws be removed. Laws on registration of marriages will only be meaningful where national legislation upholds the rights of women in marriage, divorce and inheritance. Younger women with much older spouses are more at risk of losing property and their livelihoods after the death of their spouses.

The existence of national legislation and policies should be supported with adequate resources to enable both governments and NGOs to play complimentary and supportive roles in meeting the needs of girls and women affected by early and forced marriage. Invariably this process will create a more conducive climate for working in partnership or in collaboration between governments and civil society who are better placed to work on such sensitive issues within communities.

Recommendations

At the International Level:

1. International pressure should be exerted on all countries to ratify the Women's Convention and to remove all reservations.
2. The Committee on the Rights of the Child should request that countries include progress on implementation of the legal minimum age of marriage.
3. Poverty Reduction Strategies and SAPs should address the feminization of poverty and include reduction in early marriage as an indicator for effectiveness of development programmes.
4. Further research is needed on the links between early marriage and social poverty.

At the National Level/Governments:

1. Should reform marriage and family laws to meet the human rights standards which they have ratified and to monitor the implementation and impact of these laws, especially the Convention on Consent on Marriage, Minimum Age of Marriage and Registration of Marriages (CCM), the Women's Convention and the CRC.
2. Need to provide safety nets and/or employment opportunities for girls and women affected or at risk of early marriage.
3. Should ensure the right to education and information for girls, *including* those who are married.
4. Should provide incentives to encourage parents to send their daughters to school and address the 'pull factors' of education and not just the 'push factors'.
5. Should fulfil their commitments on adolescent sexual and reproductive health and the girl child made at the International Conference on Population and Development and the Beijing Conference on Women and remove legal and social barriers to sexual and reproductive health information and care.
6. Should target activities to change the attitudes and behaviour of community and religious leaders with regard to early marriage, girls' education, inheritance and employment.

At the Civil society/NGO Level:

1. Should create a 'Country Manual' to monitor the Conventions their governments have signed and identify the gaps between ratification and implementation. This should include the gaps between customary and legislative laws. This manual can be a tool for raising awareness about girls' and women's rights and to advocate for change.
2. Should lobby government and traditional and opinion leaders to fulfil the rights of girls and women to enable them to exercise self-determination in relation to marriage.
3. Should ensure that projects and programmes are innovative and respond to the real concerns of girls at risk of marriage and young married girls.
4. Should work with communities to support girls and women who are from minorities groups as well as other socially excluded groups.

Appendix 1

Background Information on the Forum on Marriage and the Rights of Women and Girls

Mission statement

The Forum on Marriage and the Rights of Women and Girls is a network of organizations mainly based in the UK but with international affiliates, sharing a vision of marriage as a sphere in which women and girls have inalienable rights. Our shared commitment to social justice places central importance on the need to bring principles and rights which are accepted in the public sphere into effective operation in the private sphere, particularly in marriage.

As a Forum we are committed to:

1. the inalienability of the human rights of women and girls throughout their lives, which cannot be reduced or violated by marriage
2. to the breaking down of barriers (including legal, social and cultural) that impact adversely on women's and girls' rights within marriage.

Two areas of principal concern to the Forum are:

- **early marriage:** the Forum supports absolutely the need to eliminate the forced marriage of girls. We draw on the Convention on the Right of the Child (CRC) age threshold to argue that marriage of people aged 18 years or under constitutes 'early marriage'. We advocate prevention of the marriage of minors;
- **violence against women and girls:** including forced, coerced and non-consensual activities in all forms are intolerable. Our focus is on violence against women and girls in and related to marriage.

The Forum defines marriage existing in all societies as a 'formalized relationship with legal and/or social standing between individual men and women, in which sexual relations are legitimized and as an arena for reproduction and child rearing which has state recognition'.

We promote the rights of women and girls to all recognized human rights including civil, political, economic, social and cultural rights, with a particular focus on sexual and reproductive rights, rights to inheritance and the right to marry or not. Forum members work together and individually, sharing information on models of good practice and carrying out joint advocacy activities for the greater realization of these rights.

The Forum does not advocate *against* marriage but *for* the recognition and support of the human rights of girls and their right to full and free consent to any action which impacts on their lives. We recognize that some girls under the age of eighteen do actively wish to be married and although their families perhaps make all the arrangements, that this is with the full and freely given consent of the girl. We are concerned, however, that sometimes the distinction between coercion and consent may not be clear and wish to stress that the Forum's primary concern is to promote the best interest of the child.

Membership of the Forum on Marriage and the Rights of Women and Girls

UK-based

Anti-Slavery International	Minority Rights Group
AVIVA: Women's Worldwide Web	Black Women's Health & Family Support
British Council	Oxfam
Centre for Gender Equality	Population Concern
CHANGE	Population Council
Child and Woman Abuse Studies Unit	Rights and Humanity
Commonwealth Secretariat	Save the Children UK
DfID Health Programme	Southall Black Sisters
ECPAT UK	UNICEF
Equality Now	Women Living Under Muslim Laws
Foundation for Women's Health Research and Development (FORWARD)	Womankind Worldwide
ICI Health Rights	World Association of Girl Guides and Girl Scouts
International Planned Parenthood Federation (IPPF)	World Vision UK

International

Asian Human Rights Commission (Hong Kong)
Centre for Reproductive Law and Policy (USA)
Children's Concern Organization (Uganda)
Human Rights Watch
ILO
International Women's Health Coalition
IPAS Uganda
National Council for Childhood and Motherhood (Egypt)
National Council of NGO Networks
Rayalaseema Rural Development Society
Sudan National Committee on Harmful Traditional Practices

Appendix 2

Marriage: Women's rights and the laws that protect them*

Entering marriage

- You have the same right as a man to freely choose a spouse and enter marriage only with full consent.
UDHR 16; CEDAW 16:1; ICCPR 23:3; ICESCR 10:1; CCM 1; ICERD 5d, iv; SCAS 1c; PFA 274e
- Countries must set a minimum age for marriage. A woman married under that age will not be considered legally married.
CEDAW 16:2; ICCPR 23:2; CCM 2; SCAS 2; FPA 274e
- All marriages must be registered in an official registry.
CEDAW 16:2; CCM 3
- If you marry someone with another nationality, you will not have your nationality automatically changed to that of your husband. Nor will you suddenly find yourself stateless. If you choose, however, you must be granted your husband's nationality.
CEDAW 9:1; CNMW 1.3

During marriage

- You have the same rights and responsibilities as a man during a marriage.
ICCPR 23:4; CEDAW 16:1
- You have the right to equal access to health services, including those related to family planning.
CEDAW 12:1, 14:2b, 16:1e; CRC 24:2f; PFA 106e
- You have the right to protection from violence within the family.
CEDAW 1, 16; DEVAW 2a
- You have the same rights as a man to decide freely about the number and spacing of children and to have access to information, education and means to exercise these rights.
CEDAW 16:1e; PFA 106i
- You have the same rights and responsibilities as a man towards your children regardless of your marital status.
CEDAW 16:1d, f; CRC 18; PFA 106i
- You have the same rights as a man to family benefits.
CEDAW 13a

* See page 6 for the full list of abbreviations used in this appendix.

- A change in nationality of your husband during marriage shall not automatically change your nationality.
CEDAW 9:1; CNMW 1
- You and your husband have equal rights with respect to the nationality of your children.
CEDAW 9:2
- You have the same right as a man to choose a family name, a profession and occupation.
CEDAW 16:1g
- If you are employed you must not be discriminated against on the grounds of marriage and maternity.
CEDAW 11:2; PFA 165c
- Countries must ensure that family education includes recognition of maternity as a social function and the recognition of the common responsibility of men and women in upbringing and development of their children.
CEDAW 5b; PFA 106g

End of marriage

- You have the same rights as a man when a marriage ends.
CEDAW 16:1c; ICCPR 23:4
- Neither your nationality, nor that of your children, shall automatically be affected by the ending of a marriage.
CEDAW 9:1, 2; CNMW 1
- You have the same rights and responsibilities as a man towards your children regardless of your marital status.
CEDAW 16:1d; CRC 18:1

Source: *Rights of Women, A Guide to the Most Important United Nations Treaties on Women's Human Rights*, produced by the International Women's Tribune Centre (1998), New York

References and notes

Every effort has been made to ensure that the referencing of article found on the Internet is accurate and up-to-date. However, some websites have inevitably changed or been closed down since the authors conducted their research. Any website addresses that were known to have changed or closed at the time of publishing this report have been annotated as such. The Forum does not accept responsibility for any subsequent changes to other website addresses cited below.

¹ Dhillon, A (2002) 'A mum at 11, a great grandmother at 38', *The Times*, 28 August 2002

² UN (2002a) *Implementation of the United Nations Millennium Declaration: Report of the Secretary-General*, General Assembly, Fifty-seventh session

³ UN, General Recommendations Made by the Committee on the Elimination of Discrimination Against Women, General Recommendation No. 21, thirteenth session, 1994. See <http://www.un.org/womenwatch/daw/cedaw/recomm.htm> (last accessed 6/10/03)

⁴ United Kingdom Foreign and Commonwealth Office, (2000) *A Choice by Right: Working Group on Forced Marriages*

⁵ Bruce, J (2002) 'Married adolescents girls; human rights, health and development needs of a neglected majority,' paper presented by the Population Council at the Supporting Event: Early Marriage in a Human Rights Context, United Nations Special Session on Children, 8–10 May 2002; p.1

⁶ Singh, S and Samara, R (1996) 'Early marriage among women in developing countries', in *International Family Planning Perspectives*, vol. 22, issue 3, December 1996

⁷ UN Population Division (2000) *World Marriage Patterns*, Department of Economic and Social Affairs, Washington

⁸ Innocenti Research Centre (2001) *Early Marriage, Child Spouses*, UNICEF Digest no. 7, March 2001

⁹ Sajeda Amin, Simeen Mahmud and Lopita Huq (2002), *Baseline Survey Report on Rural Adolescents in Bangladesh: Future Directions for Programs and Policy*, Kishori Abhijan Department of Women's Affairs, Ministry of Women and Children's Affairs, Government of the People's Republic of Bangladesh.

¹⁰ Ramachandran, S (2002) 'Child marriage means child labour for daughters'. See Panos website, <http://www.panos.org.uk/newsfeatures/featuredetails.asp?id=1002> (last accessed 6/10/03)

¹¹ Kabir, 1998; cited in Innocenti Research Centre, 2001

¹² Saloucou, L et al (2002) 'Etude Diagnostique du Vecu des Adolescentes Mariees et de Leurs Besoins en Opportunités Economiques et en Santé de la Reproduction', paper presented by the Population Council at the IPPF/GTZ Gender-based Violence Conference, Burkina Faso, August 2002

¹³ *ibid.*

¹⁴ UN (1996) *Platform for Action and the Beijing Declaration*, UN Department of Public Information: p.38

¹⁵ UN (2002a) *Implementation of the United Nations Millennium Declaration: Report of the Secretary-General*, General Assembly, Fifty-seventh session: p.8

¹⁶ *ibid.*

¹⁷ Forum on Marriage and the Rights of Women and Girls (2000) *Early Marriage: Whose Right to Choose?*, Forum on Marriage and the Rights of Women and Girls, London

¹⁸ The Allen Guttmacher Institute (1997), 'Risks and realities of early childbearing worldwide'. See <http://www.guttmacher.org/pubs/ib10.html#summarypoints> (last accessed 6/10/03)

¹⁹ Bruce, 2002

²⁰ Erulkar A, et al (2002) 'How marriage changes girls' lives: Married adolescents in Kenya', paper presented at the Reproductive Health Priorities Conference, Durban, South Africa, 1–4 October 2002

-
- ²¹ Meyers, C (2002) 'Data on adolescents on program planning: what we need, what we have and where to find it', in *Background document prepared by the Population Council for the UNFPA workshop on adolescent and youth sexual and reproductive health: charting directions for a second generation of programming*, May 2002
- ²² Harper, C et al, (2003) 'Enduring poverty and the conditions of childhood life course and intergenerational poverty transmissions', forthcoming article in *World Development*, vol. 31, no. 3
- ²³ Conway-Turner, K and Cherrin, S (1998) *Women, Families and Feminist Politics: A global exploration*, Harrington Park Press, New York: p.76
- ²⁴ Diop, N et al, (2002) *Etude pour l'amélioration de la santé de la reproduction des adolescents à Louga et Saint-Louis: Enquête de base*, [Improving adolescent reproductive health in Louga and Saint-Louis: Baseline study] Population Council, Dakar, Senegal
- ²⁵ UNFPA (2002a) *State of the World Population 2002: People, poverty and responsibilities*, UNFPA
- ²⁶ World Bank (2001) *World Development Report 2000/2001: Attacking poverty*, Oxford University Press: p.34
- ²⁷ Cagatay, N (1998) *Gender and Poverty*, Social Development and Poverty Elimination Division, United Nations Development Programme: p.8
- ²⁸ Harper et al, 2003: p.3
- ²⁹ *ibid*: p.17
- ³⁰ World Bank (2001) *World Development Report 2000/2001: Attacking poverty*, Oxford University Press
- ³¹ Sajeda Amin et al, (2002), p.6.
- ³² Cooke, RJ et al (2003) *Reproductive Health and Human Rights: Integrating medicine, ethics and law*, Clarendon Press, Oxford: p.215
- ³³ Centre for Reproductive Rights, (2000) *Reproductive Rights 2000: Moving Forward*, Centre for Reproductive Right, New York: p.52
- ³⁴ Forum on Marriage and the Rights of Women and Girls (2001), *Early Marriage: Sexual Exploitation and the Human Rights of Girls*, Forum on Marriage and the Rights of Women and Girls, London
- ³⁵ *ibid*.
- ³⁶ WHO, (2001a) *Macroeconomics and Health: Investing in Health for Economic Development*. Report of the Commission on Macroeconomics and Health, World Health Organisation: p.21
- ³⁷ Sadik N, 2001; cited in Innocenti Research Centre, 2001: p.18
- ³⁸ 'The Plight of the Girl-Child in Pakistan', *Binti: The Newsletter for Girl Child Programme in Kenya*, issue no.24, July–September 2002: p.7
- ³⁹ UNFPA, 2002a
- ⁴⁰ Zabin, LS and Kigaru, K (1998) 'The health consequences of adolescent sexual and fertility behaviour in Sub-Saharan Africa', in *Studies in Family Planning*, vol. 29, no. 2: p.212
- ⁴¹ Conway-Turner and Cherrin, 1998
- ⁴² Zabin and Kigaru, 1998
- ⁴³ Assani, A (Dr) et al (2000) 'Etude sur les mariages précoces et grossesses précoces au Burkina Faso, Cameroun, Gambie, Liberia, Niger et Tchad', UNICEF/WCARO, Abidjan, Cote D'Ivoire
- ⁴⁴ Conway-Turner and Cherrin, 1998
- ⁴⁵ Zeinab's case study was found on the UNICEF website www.unicef.org on 19/11/02. However, this specific item is no longer available on the site.
- ⁴⁶ WHO (2001b) *Advancing Safe Motherhood through Human Rights*, World Health Organisation.
- ⁴⁷ WHO (1996) 'Early sex, early motherhood: facing the challenge', *WHO Safe Motherhood Newsletter*, issue 22, no. 3

-
- ⁴⁸ *ibid.*
- ⁴⁹ Population Action International (2001) 'Fact Sheet: How Family Planning Protects the Health of Women and Children'.
See: http://www.populationaction.org/resources/factsheets/factsheet_2.htm (last accessed 6/10/03)
- ⁵⁰ WHO, 1996: p.4
- ⁵¹ *ibid.*
- ⁵² Ransom, EI and Yinger, NV (2002) *Making Motherhood Safer: Overcoming obstacles on the pathway to care*, Population Reference Bureau, Washington
- ⁵³ USAID (1999) 'Reaching Newlywed and Married Adolescents', *In Focus*, July 1999, USAID
- ⁵⁴ WHO, 1996
- ⁵⁵ Innocenti Research Centre, 2001: p.11
- ⁵⁶ UN (2000) *The World's Women: 2000 trends and statistics*, Social Statistics and Indicators, Series K no. 16, UN New York: p.61
- ⁵⁷ UNFPA (2002b) *Addressing Obstetric Fistulas, Promoting Reproductive Health*, UNFPA Fact Sheet, New York. See <http://www.unfpa.org/issues/factsheets/pdfs/fistula.pdf> (last accessed on 6/10/03)
- ⁵⁸ UNFPA and ENGENDERHEALTH (2003) *Obstetric Fistula: Needs Assessment Report: Findings from Nine African Countries*
- ⁵⁹ UNFPA, 2002b
- ⁶⁰ *ibid.*
- ⁶¹ Assani et al, 2000: p.27
- ⁶² UNFPA and ENGENDERHEALTH, 2003
- ⁶³ UNFPA and ENGENDERHEALTH, 2003
- ⁶⁴ Sajeda Amin, Simeen Mahmud and Lopita Huq (2002), Baseline Survey Report on Rural Adolescents in Bangladesh: Adolescents' Exposure to Risk: (6) Kishori Abhijan Department of Women's Affairs, Ministry of Women and Children's Affairs, Government of the People's Republic of Bangladesh
- ⁶⁵ UN (1994) Declaration on the Elimination of Violence Against Women. The text can be found on the United Nations High Commission on Human Rights (UNHCHR) website <http://www.unhchr.ch>
- ⁶⁶ Forum on Marriage and the Rights of Women and Girls (2001), *Early Marriage: Sexual Exploitation and the Human Rights of Girls*, Forum on Marriage and the Rights of Women and Girls, London
- ⁶⁷ Heise, L, Ellsberg, M, and Gottemoeller, M (1999), *Ending Violence against Women*. Population Reports, Series L, No. 11, Baltimore, MD: Johns Hopkins University School of Public Health, Population Information Program
- ⁶⁸ *ibid.*
- ⁶⁹ Jensen, R and Thornton, R, (2003) 'Early female marriage in the developing world' in *Gender and Development: Marriage*, vol. 11 no.2, July 2003, Oxfam, UK
- ⁷⁰ Jelacic N, (1999) 'Outcast in land where rape is a proposal of marriage' in *The Observer*, 13 June 1999
- ⁷¹ Segni, T (2002), 'Poverty and illiteracy aggravate abduction', ICEDA-Ethiopia, a paper presented at the 46th session of the CSW, New York
- ⁷² *ibid.*
- ⁷³ *ibid.*
- ⁷⁴ Ouattara and Thomson (1998) 'Forced marriage, forced sex: the perils of childhood for girls, in *Gender and Development*, vol. 6, no. 3, November 1998, Oxfam, UK
- ⁷⁵ Khan, ME (2000) 'Sexual violence in Bangladesh: Observations from a field study', paper presented for Consultation on Sexual Violence Against Women, Melbourne, Population Council: p.7

-
- ⁷⁶ Musick, J (2000) 'The causes and consequences of sexual abuse and exploitation: Reducing the risks and building on strengths' in *Vulnerability of the Girl Child to HIV/AIDS*, UK NGO AIDS Consortium, UK
- ⁷⁷ Tilgay and Sarhan, 2001; cited in Mikhail, LB (2002) 'Trafficking and slavery' in *Gender and Development*, vol.10, no.1, March 2002, Oxfam, UK
- ⁷⁸ Mane et al, 1998; cited in Gupta, GR (2000) 'Approaches for empowering women in the HIV/AIDS pandemic: A gender perspective', International Center for Research on Women, paper presented at the Expert Group Meeting on The HIV/AIDS Pandemic and its Gender Implications, Windhoek, 2000, UN Division for the Advancement of Women
- ⁷⁹ UNFPA, (2002c) 'Expert Panel Calls for Action Against Early Marriage', See <http://www.unfpa.org/news/news.cfm?ID=105&Language=1> (last accessed 6/10/03)
- ⁸⁰ UNICEF, UNAIDS, WHO: (2002), *Young People and HIV/AIDS: Opportunity in Crisis*
- ⁸¹ Fitzgerald D, et al (2003) 'Women's health and human rights in HIV prevention research', *The Lancet*, vol. 361, issue 9351, p.8
- ⁸² Tallis, V (2002) *Gender and HIV/AIDS: Overview report*, BRIDGE Development Report, BRIDGE, Institute of Development Studies, University of Sussex, Brighton: p.12
- ⁸³ *ibid.*
- ⁸⁴ UNFPA, 2002c; Also The Europe Commission (2000) 'The Gender Paradigm Shift'. *[NB this item was previously available on <http://europa.eu.int>, but is no longer available]*
- ⁸⁵ Clark, S (2002) 'HIV and early marriage in Sub-Saharan Africa' (forthcoming publication by the Population Council)
- ⁸⁶ McDevitt, 1996; cited in USAID, 1999
- ⁸⁷ UN, (2002b), 'World contraceptive use 2001: Substantial use increase in 1990s', *UN Chronicle Online Edition*, issue 3, 2002, See http://www.un.org/Pubs/chronicle/2002/issue3/0302p44_world_contraceptive_use.html (last accessed 6/10/03)
- ⁸⁸ UNICEF, 1994; cited in Innocenti Research Centre, 2001
- ⁸⁹ UNFPA, 2002a: p.29
- ⁹⁰ East-West Centre, 1999; cited in Haberland, N (2002) 'The neglected majority: Married adolescents', in *Background document prepared by the Population Council for the UNFPA workshop on adolescent and youth sexual and reproductive health: charting directions for a second generation of programming*, May 2002
- ⁹¹ Gupta, 2000: p.2
- ⁹² Maman et al, 1999; cited in Gupta, 2000
- ⁹³ UNFPA, 2002a
- ⁹⁴ Raikes, A (2000) 'The socio-economic context and policy agenda concerning the vulnerability of the girl child to HIV/AIDS' in *Vulnerability of the Girl Child to HIV/AIDS*, UK NGO AIDS Consortium, UK: p.7
- ⁹⁵ United Nations (2001) Road map towards the implementation of the United Nations Millennium Declaration: Report of the Secretary-General A/56/326. p.19
- ⁹⁶ United Nations Office of the High Commissioner for Human Rights (2001) Human Rights in Development: Rights-based approaches. www.unhchr.ch
- ⁹⁷ Kabeer, N (2003) *Gender Mainstreaming in Poverty Eradication and the Millennium Development Goals*, Commonwealth Secretariat and the International Development Agency, London
- ⁹⁸ United Nations, (2000) Assessing the Status of Women: A Guide to Reporting Under the Convention on the Elimination of All Forms of Discrimination Against Women
- ⁹⁹ International Planned Parenthood Federation (1995) *IPPF Charter on Sexual and Reproductive Rights*, Banson Production, UK
- ¹⁰⁰ UNFPA, 2002a
- ¹⁰¹ *ibid.*

¹⁰² Source: International Centre for Research on Women (ICRW) & Swaasthya, 2003: extract from “Addressing Girls’ Reproductive & Sexual Health Concerns: The Roadmap to Increased Self-Determination”

Contact Persons Swaasthya@satayam.net.in and rpande@icrw.org.

¹⁰³ Partners in the project include Plan International Kenya (Eastern), Programme for Appropriate Technology in Health (PATH) and the Ministry of Education and Health.

¹⁰⁴ ‘FPAK Experience in Eradication of FGM and Early Marriage’; a presentation by FPAK at an IPPF’s capacity building workshop, Addis Ababa, 2002

¹⁰⁵ Based on Ouattara, Sen and Thomson, 1998, and a paper presented by Pugsada on “Early Marriage in Burkina Faso” at the technical Consultation on Early Marriage, held in October 2003.

¹⁰⁶ Ouattara, Sen and Thomson, 1998

¹⁰⁷ Faulkner, KM and Nott, J (2002) ‘Institutionalising youth participation in a large international organisation: Experiences from the International Planned Parenthood Federation’, in *Realizing Rights: Transforming approaches to sexual and reproductive well-being*, edited by Cornwall A. and Welbourn A, Zed Books, London

¹⁰⁸ UNFPA (2003) State of the World Population 2003: investing in adolescents’ health and rights

¹⁰⁹ Innocenti Research Centre, 2001

Suggested reading

Cagatay N (1998) *Gender and Poverty*, Social Development and Poverty Elimination Division, United Nations Development Programme

Conway-Turner K and Cherrin S (1998) *Women, Families and Feminist Politics: A global exploration*. Harrington Park Press, New York

Cooke R J, et al (2003) *Reproductive Health and Human Rights: Integrating medicine, ethics and law*. Clarendon Press, Oxford

Forum on Marriage and the Rights of Women and Girls (2000) *Early Marriage: Whose right to choose?* Forum on Marriage and the Rights of Women and Girls, London

Forum on Marriage and the Rights of Women and Girls (2001), *Early Marriage: Sexual Exploitation and the Human Rights of Girls*, Forum on Marriage and the Rights of Women and Girls, London

Innocenti Research Centre (2001) 'Early marriage, Child Spouses' UNICEF Digest no. 7, March 2001

International Planned Parenthood Federation (1995) *IPPF Charter on Sexual and Reproductive Rights*, Banson Production, UK

Kabeer N (2003) *Gender Mainstreaming in Poverty Eradication and the Millennium Development Goals*, Commonwealth Secretariat and the International Development Agency, London

Mensch B, et al (1998) *The Uncharted Passage: Girls' adolescence in the developing world*, Population Council, New York

Ransom E I and Yinger N V (2002) *Making Motherhood Safer: Overcoming obstacles on the pathway to care*, Population Reference Bureau, Washington

Singh S (1998) 'Adolescent childbearing in developing countries: A global review', in *Studies in Family Planning*, vol. 29 no. 2

Singh S and Samara R (1996) 'Early marriage among women in developing countries', in *International Family Planning Perspectives*, vol. 22, issue 3, December

Tallis V (2002) *Gender and HIV/AIDS: Overview report*, BRIDGE Development Report, BRIDGE, Institute of Development Studies, University of Sussex, Brighton

UN (2002a) *Implementation of the United Nations Millennium Declaration: Report of the Secretary-General* General Assembly, Fifty-seventh session

UNFPA (2002a) *State of the World Population 2002: People, poverty and responsibilities*, UNFPA

UNFPA (2002b) *Addressing Obstetric Fistulas, Promoting Reproductive Health*, UNFPA Fact Sheet, New York

WHO (1996) 'Early sex, early motherhood: facing the challenge', *WHO Safe Motherhood Newsletter*, issue 22, no. 3

WHO (1999) 'Reduction in Maternal Mortality: A Joint WHO/UNFPA/UNICEF/ World Bank Statement'

Zabin L S and Kigaru K (1998) 'The health consequences of adolescent sexual and fertility behaviour in Sub-Saharan Africa', in *Studies in Family Planning*, vol. 29, no. 2