Ensuring a national legal framework in line with international human rights standards, including with regard to the age of majority and the legal age for marriage for girls and boys, the prohibition of forced marriage and birth and marriage registration;

Harmonizing national laws on marriage, including by amending existing laws to remove legal obstacles faced by girls who seek the enforcement of national laws on child marriage prevention or prohibition and legal remedies; removing unreasonable legal requirements for formally ending a child marriage; and providing access to remedies for those who leave a marriage;

- WHO has worked in strong collaboration with the Inter-Parliamentary Union (IPU) and other regional parliamentary forums on different areas including violence against women, family planning, maternal and child health, focusing in particular on traditional practices such as child, early and forced marriage.

- Within this collaboration one of the highlight achievement was the unanimous adoption of the landmark IPU resolution “Access to health as a basic right: The role of parliaments in addressing key challenges to securing the health of women and children”. The resolution highlighted the human rights, political and socioeconomic imperatives according to which parliamentarians can act to support women’s and children’s health.

- As a follow up to this work WHO worked on the engagement of parliamentarians in the process of development of the renewed Global Strategy for Women’s, Children’s and Adolescents’ Health including a focus on traditional practices. Parliamentarians have participated to the formal consultations held in Geneva, New Delhi and Johannesburg, which led to the development of the official IPU commitment to the Global Strategy. IPU committed to ensure that national parliaments continue to play a central role in improving women’s, children’s and adolescents’ health at national, regional and global levels as well as on accountability.

- IPU and WHO in particular collaborated in the area of child, early and forced marriage with a specific focus on impact of legislation on health outcomes. A first study on ten African countries was presented at the Pan African Parliament in November 2013, and was instrumental in the finalization of a Pan African Parliament resolution on gender based violence.

- WHO and IPU developed a second study on the impact of legislation on child, early and forced marriage in 37 Asia-Pacific countries. The findings of the study were presented at the Regional Seminar for Asia Pacific Parliaments “Ending the cycle of violence against girls in Asia-Pacific” Dhaka, 23-25 September 2014 (http://www.ipu.org/press-e/pressnote201409263.htm) and the final report will be presented at the 2016 IPU General Assembly. A first analysis has already been published: http://www.tandfonline.com/doi/pdf/10.1080/15570274.2015.1075759.

- WHO and IPU are currently developing a proposal for the creation of an on-line database on child, early and forced marriage legislations of countries where the practice is common.

Promoting girls’ access to high-quality education, in accordance with relevant international standards, including tailored reintegration programmes for girls who are forced to drop out of school owing to marriage and/or childbirth; the provision of economic support and incentives to girls attending schools and to their families has proven to be effective in allowing girls to pursue higher education and delay marriage;
WHO’s Guidelines on Preventing early pregnancy and poor reproductive outcomes in adolescents in developing countries strongly recommends keeping girls in secondary school:

In line with that we contributed to USAID’s work in developing a High Impact Policy Brief titled: Educating Girls: Creating a foundation for positive sexual and reproductive health behaviours:

We have advocated for policies and programmes to keep girls in school, using financial and other measures, in a variety of contexts including most recently the International Family Planning Conference 2016.

Promoting women’s economic empowerment and access to productive resources, including by addressing discriminatory norms and practices in this regard.

In our advocacy work, we have stressed the importance of creating education and employment opportunities for girls and young women.

Within the ongoing collaboration with IPU, WHO participates to the meetings of the IPU meeting of Women Parliamentarians to promote women’s economic empowerment and access to productive resources, including political activities.

Addressing the widespread cultural and social acceptance of child, early and forced marriage, including by raising awareness of its harm to the victims and the cost to society at large and by providing platforms and opportunities for discussion within communities and families on the benefits of delaying marriage and ensuring that girls receive education. The involvement of older women and of religious and community leaders, and the engagement of men and boys as key participants in these efforts is essential;

As mentioned above, we have published authoritative documents on this, engaged with influential leaders on this, and communicated this in a variety of meetings.

In addition, we have supported country-level action. One tangible example is India, where we supported its inclusion in an updated national strategy on adolescent health, and led the evaluation of a Ford Foundation supported, NGO-led district-level programme aimed at stimulating/supporting different government departments to work together to prevent child marriage, including addressing prevailing social norms that accept/support the harmful traditional practice. http://healthmarketinnovations.org/program/mamta-health-institute-mother-and-child
Providing age-appropriate, culturally relevant and empirically based comprehensive education on sexuality, sexual and reproductive health, gender equality and life-skills training for women and girls, and ensuring that women and girls are made aware of and have the capacity to claim and exercise their rights in relation to marriage;

- We have reviewed research evidence and implementation experience in comprehensive sexuality education in the twenty years since the International Conference on Population and Development, and published the review in the Journal of Adolescent Health: http://www.sciencedirect.com/science/article/pii/S1054139X14003450

- We have documented case studies of outstanding low and middle income country initiatives that have scaled up sexuality education. We are preparing to conduct a meeting bringing together representatives from these and other countries to draw out lessons learned in the first generation of scaled up adolescent sexual and reproductive health: http://www.tandfonline.com/doi/pdf/10.1080/14681811.2015.1123148

- Advocacy is a key focus of our work. To reach the wider public, we have used digital media, which a TEDX talk that has been accessed 9500 times: https://goo.gl/XNgKmj. To reach representatives of government missions in Geneva and New York, who play key roles in intergovernmental negotiations, we have worked with NGOs such as YWCA, International Women’s Health Coalition and IPPF.

Supporting the establishment of networks to facilitate the exchange of information between girls and young women on child, early and forced marriage through the innovative use of technology;

- We have not directly worked on facilitating an exchange between/among girls/young women through the use of technology. However, we have engaged and built the capacity of young leaders to engage in this discussion. A concrete example is our contribution to the young pre-conference before the International Family Planning Conference:https://www.youtube.com/watch?v=4k_r1zOfpRY

- Within the context of the collaboration with IPU and the current work on child, early and forced marriage legislation we are planning the development of an online database to regularly update information of legislative tools developed to address this issue.

Implementing training programmes for government officials, the judiciary, law enforcement and other State officials, teachers, health and other service workers, those working with immigrants and asylum seekers, and relevant professionals and sectors on how to identify girls at risk or actual victims and on applicable legislation and prevention and care measures;

- We have not worked in this area.

Providing adequate financial resources and support to comprehensive programmes to address child, early and forced marriage, including those aimed at married girls and those within indigenous and rural communities, in cooperation with United Nations agencies, regional organizations, civil society organizations and other relevant stakeholders;

- Using funds provided by the French Government in the context of the Every Woman, Every Child initiative, and working in conjunction with other UN agencies, WHO has
been supporting a group of Francophone African countries to address the needs of adolescent girls in their countries; a key focus of this work in preventing child marriage.

Improving data collection, research and dissemination of existing good practices and ensuring a clear analysis and assessment of the impact of existing policies and programmes as a means of strengthening them, ensuring their effectiveness and monitoring their implementation.

- Working with UNICEF and other partners, we contributed to the development of indicators on child marriage to include in the Sustainable Development Goals.
- In 2013, WHO worked with Girls Not Brides and UNICEF to develop research priorities on child marriage: http://www.reproductive-health-journal.com/content/12/1/80 In follow up we have decided to focus on two areas identified as priorities – developing and testing approaches to scale up child marriage prevention, and determining why child marriage rates have declined in some locations of some countries, and not elsewhere.
- Within the context of the work on child, early and forced marriage legislation in collaboration with IPU, we worked with IPU and the parliament of Bangladesh to conduct a country study on child, early and forced marriage legislation and health in the country. The study aims at identifying gaps in policies and legislations and outcomes as relates girls’ and children’s health. In this context IPU and WHO conducted a workshop to support capacity building and community outreach at national level. A final report will be developed to assess the impact of existing policies and programmes as a means of strengthening them, ensuring their effectiveness and monitoring their implementation. Other countries expressed interest in a similar study.