**CARE International Submission on OHCHR report on Child Marriage in Humanitarian Contexts**

1. **Please provide information and data on the prevalence of child, early and forced marriage, in relation to the number of women and girls living in specific humanitarian settings. Kindly provide data disaggregated by sex and age, and in relation to the overall number of women and girls, as well as boys where relevant, in the population.**
* In South Sudan an estimated 52% of women aged 20-24 were married before the age of 18 and 7% before age 15 (UNICEF 2016) There is no major variation in child marriage rates between urban and rural areas. 59% of 15-19-year olds without education were married compared to 21% of women with secondary and higher education. In a CARE survey conducted in Rumbek, Juba city and in Juba protection of civilian camps(POCs) in 2017, up to a quarter of female respondents reported that they had no choice or input into the decision to get married, with a considerable percentage of respondents (particularly in Rumbek), reporting that the marriage decision was made by the couples’ families, although the girls were consulted about the marriage.[[1]](#footnote-1) In Juba City and the Juba PoCs, a majority of respondents reported that it was primarily the decision of the respondent and her future husband to get married.[[2]](#footnote-2)
* In Somalia, a large scale longitudinal study conducted by CARE in 76 rural communities of Somaliland and Puntland, involving a random sample of 1,741 girls, found 4% of girls aged 10-19 to be married. Age disaggregation is provided in the table below. The findings are consistent with the results obtained during previous rounds of data collection.

|  |  |
| --- | --- |
| Age | % married |
| 10 | 0.3% |
| 11 | 1.5% |
| 12 | 0.4% |
| 13 | 2.0% |
| 14 | 0.4% |
| 15 | 3.1% |
| 16 | 6.9% |
| 17 | 9.9% |
| 18 | 15.9% |
| 19 | 42.6% |

1. **What measures were taken to strengthen data gathering, contextual analysis and analysis of social factors contributing to child, early and forced marriage in humanitarian settings?**
* As noted above, CARE has undertaken a large scale longitudinal study in rural communities in Somalia, analysing multiple factors affecting girls’ education and choices for their future, including displacement, socio-economic condition, education, self-employment, violence and attitudes and practices towards gender. The sample was randomly selected from a sampling framework of rural communities, stratified by region. Data was collected at household level to prevent biased selection (e.g. reaching only girls enrolled in schools, or only girls who are able to access other types of services). Data was collected on girls who had left the household as well as sampled girls living in the household in order to determine the proportion of girls who might have left the area to get married/ work / study in urban areas. Data collection tools included caregiver and individual girl surveys. Caregiver’s and girls’ responses were triangulated for validation and interpretation.
* In South Sudan, CARE and other organizations have undertaken a number of studies touching on CEFM, including:
* “No Safe Place: A lifetime of violence for conflict affected women and girls in South Sudan” by IRC, CARE International and Global Women’s Institute at George Washington University <https://globalwomensinstitute.gwu.edu/research-reports>. Among other things this study assessed the number of child marriages in three sites in South Sudan using a household survey among a representative sample of 2,728 (of which 2,244 were women) people, ages 15 to 64 years old,
* An analysis of Social Norms and barriers for (agro)-pastoralist women and girls in South Sudan (Twic East in Jonglei and Torit, Eastern Equatoria). Full document [here](https://www.dropbox.com/s/qude5wg7rd0e6le/Social%20Norms%20and%20Barriers%20Analysis%3B%20focusing%20on%20agro%20pastoralist%20women%20and%20girls%20in%20Jonglei%20and%20eastern%20Equatoria-%20South%20Sudan.pdf?dl=0).
* Progressive gender and GBV analysis; Inequality and Injustices; the deteriorating situation for South Sudan women and girls in south Sudan (CARE 2016) <http://insights.careinternational.org.uk/media/k2/attachments/CARE_Inequality-and-injustice_South-Sudan-progressive-gender-analysis_Dec-2016.pdf>.
* The Girl Has No Rights: Gender based violence in South Sudan (CARE 2015 <http://www.care.org/%E2%80%98-girl-has-no-rights%E2%80%99>
* An analysis of south sudan’s healthcare: (<http://www.careinternational.org.uk/critical-diagnosis-case-placing-south-sudans-healthcare-heart-humanitarian-response>).
* CARE’s South Sudan ‘gender in briefs’: see <http://www.care.org/sites/default/files/documents/Gender%20in%20Brief%20South%20Sudan%20.pdf>
1. **What are the specific challenges and gaps in the prevention and eliminating of the practice of child, early and forced in humanitarian settings? How could such challenges and gaps be overcome?**
* **Lack of alternative pathways for adolescent girls**: In Somalia and Afghanistan, the provision of education services (formal or no-formal) remains limited, particularly for older girls who have dropped out of school or have never enrolled. Education-related expenses pose a serious challenge to displaced families and those who lost livelihoods due to prolonged drought. The provision of alternative education / accelerated education options is a promising practice. The expansion of community-based education to lower secondary has proven to be a ground-breaking solution in Afghanistan. Only 10% of the girls transition from community education into formal schools upon completing Grade 6; transition rates soar to 87% when community based education is provided up to Grade 9, showing that the longer the investment made in girls’ education by the household, the higher the likelihood of girls staying in school as opposed to getting married.
* **Gender norms and aspirations for girls**: Patriarchal gender norms and cultural practices restrict girls’ options, and parental and community expectations for girls often limited to early marriage. In South Sudan, for example, the practice of bride price is an important factor in the high rates of child and forced marriage. In Afghanistan, restrictions to girls’ mobility and participation in activities outside the home affect their ability to attend school and in result in early marriage becoming the only option for girls. A lack of local role models/examples of educated women engaged in professional jobs or leadership positions is also a challenge, as many girls are first generation learners who require exposure to different roles for girls and women to envision a different future for themselves. Gender mainstreaming in teacher training; the mobilization of community groups for girls’ education; and the engagement of a cadre of young female teachers has resulted in dramatic shifts in the expectations for girls and parental investment on girls’ education instead of marriage. Working with community education committees and religious leaders in Somalia was instrumental to shift gender norms in rural Somalia and create new expectations for adolescent girls. The participation in leadership skills development activities helped girls in Somalia, Zimbabwe and Afghanistan to envision different future pathways and to make informed choices about marriage.
* **Gender-based violence and insecurity**: The risk of GBV influences parental decision on marriage with the goal of protecting girls to avoid compromising family honor. In South Sudan, for example, high rates of sexual violence including rape, gang rape and abduction of girls, drive parents towards marrying girls off. Early marriage is also used to escape stigma after rape or out of wedlock pregnancy, to preserve family honour. Restrictions on girls’ mobility due to insecurity also affect school attendance and often result in dropout. The mobilization of community groups to raise awareness on GBV and respond to cases was instrumental to increase reporting and reduce instances of harassment and abuse in Somalia, Afghanistan and Zimbabwe.
* **Poverty and limited economic opportunities due to conflict**: In South Sudan, CARE research has found a spike in child marriages as an ‘economic strategy’ for families to cope with crisis, both as a way of reducing the number of mouths to feed in the bride’s family, as well as a source of assets, in ‘cashing in’ of girls’ dowries/bride price. [[3]](#footnote-3)
* **Weak legal and social protection structures**: Laws against child marriage are poorly unimplemented and the formal legal system thwarted by customary practices. For example, in South Sudan, there is little knowledge of current legislation related to children, marriage and sex either within local communities, or within local institutions such as the police and traditional courts. Customary law also contradicts national law: for example, unmarried girls and women that are raped are often forced to marry the perpetrator (with the rapist charged with paying the bride price). Notably, customary law has also been greatly shaped by people’s experiences during decades of war, altering familial structures and giving rise to new customs, such as an ‘increasing reliance on bride wealth as a source of family income
* **Limited funding and programming:** In South Sudan, focused programming to address CEFM is limited to small and tangential interventions, many of which are integrated within other sectors or wider gender- based violence or SRHR programming. There is a challenge of limited short-term funding, with a priority on life saving interventions i.e. service provision to survivors of gender-based violence with a specific focus on conflict -elated sexual violence.
* **Constant population movements / displacement** in contexts such as South Sudan make programming challenging and reduce effectiveness of interventions.
1. **What are the lessons learned and promising practices identified in preventing and eliminating child, early and forced marriage in such settings? Please refer to the definition of humanitarian settings provided in resolution 35/16 enclosed.**
* Important to promote the integration of interventions on CEFM with other longer term programmes addressing violence against women and girls (VAWG), community-level violence and other long-term peacebuilding (ARC), Women’s Economic Empowerment (WEE) with adolescent girls participating in life skills, adolescent and Sexual and Reproductive Health and rights, , social protection, tackling changes in negative social norms in communities through communities care programme (CC) and start, awareness, support and action (SASA!) approaches while engaging men and boys as allies and champions of change.
* Need to create safe spaces, including women and girl friendly spaces (WGFS) and girls’ clubs in schools communities and in IDP settings.
* Support for women’s groups, youth groups and the women’s movement to build local capacity to improve the status of women and girls and the work on CEFM besides other forms of GBV.

 **6.What measures (e.g., legislative, regulatory, policy and programmatic) are in place or have been adopted to address the root causes and exacerbating factors of child, early and forced marriage?**

* In recent years, South Sudan has made some progress on ratifying international human rights’ laws, and formulating laws related to early and arranged marriage but many more key instruments remain to be signed relating to the rights of women and children. South Sudanese law outlines some provisions against early and forced marriages, including: Article 15 of the Transitional Constitution that prohibits ‘subjecting children to negative and harmful cultural practices which affect health, welfare or dignity’, Article 23 of the Child Act that provides for the right to protection from child marriage and the Penal Code Act which provides for an offence punishable with imprisonment not exceeding 10 years or a fine for kidnapping or abducting a woman with intent to compel her to enter into marriage. Article 26 of the Child Act indicates that every female child has the right to be protected from forced and child marriage, with both government and society responsible to ‘ensure that child marriages and other harmful cultural and social practices are abolished.’ The Penal Act also includes a provision for both rape and statutory rape, with sex illegal with minors under the age of 18 (and up to 14 years imprisonment and/or a fine).
* However, research indicates that there is little knowledge of current legislation related to children, marriage and sex either within local communities, or within local institutions such as the police and traditional courts. Customary law also contradicts national law: for example, unmarried girls and women that are raped are often forced to marry the perpetrator (with the rapist just charged with paying the bride price).[[4]](#footnote-4) Notably, customary law has also been ‘greatly shaped by people’s experiences during decades of war’, altering familial structures and giving rise to new customs, such as an ‘increasing reliance on bride wealth as a source of family income.
* Formal policy in South Sudan includes the *National Gender Policy* (2013), yet family law is still absent and progress on marriage issues is slow, with little change in attitudes and practices at the local level.[[5]](#footnote-5) In early 2017, a taskforce to end child marriage was finally launched by the Ministry of Gender, in collaboration with UNFPA East and Southern Africa. The taskforce is said to be developing a “roadmap to end child marriage” spearheaded by the Ministry of Gender[[6]](#footnote-6) by 2030.

**8. What measures are/have been taken to effectively engage family members, community and religious leaders in raising awareness about, and countering child, early and forced marriage in humanitarian contexts?**

* + Community mobilization: CARE has supported the mobilization of community groups for girls’ education in Afghanistan and is also working with community education committees and religious leaders in Somalia to shift gender norms and create new expectations for adolescent girls. In South Sudan, CARE has trained community leaders, traditional chiefs, women’s leaders and religious leaders on child marriage. CARE is implementinga range of community mobilization strategies, including use of Information Volunteers, the Communities Care model in collaboration with UNICEF, SASA (Start, Awareness, Support Action), Economic and social empowerment (SA$E) together with Engaging Men and Boys in Accountable Practices (EMAP). Community activists lead the GBV prevention efforts through four major strategies; use of local activism, communication materials, media and advocacy and trainings including building capacities of women’s rights organizations/ women’s focused CSOs. The aim of these prevention strategies is to work with communities as “Champions of Change” to promote positive norms and transform beliefs to reduce tolerance for violence against women and girls and to spark community-led action.
	+ Media: In South Sudan, CARE has partnered with a national NGO (Communication for Life Change (CLC) to produce video and audio drama and documentary series with strong participation from girls to raise awareness in the community and help catalyze shifts in attitudes and practices that contribute in reducing CEFM. The documentary and drama are delivered through radio, TV stations and Cinema and provide for feedback from the audience, with the goal of building self-confidence and advocacy skills among participating community members and girls faced with the harmful traditional practices and attracting the attention and involvement of religious leaders, community leaders, and government officials in advocating for end in child marriage.
1. **What concrete actions are/have been taken to provide appropriate protection and accountability mechanisms for women and girls at risk and also to victims or survivors of child, early and forced marriage, including those living in isolated and remote areas**.
* **Enhancing safety in public areas:** Recognizing that child marriage is linked to insecurity, CARE in South Sudan has supported creation of women and girls’ friendly spaces, and undertaken sensitization of law enforcers and the public about the importance of safety for women and girls. CARE has established 16 women and girl’s friendly spaces (WGFS) across 3 States of Eastern Equatoria, Unity and Jonglei as a corner stone of GBV prevention and response programing. The spaces are located in a safe environment where women and girls gather, bring their voices and ideas together and talk about their challenges. The friendly spaces are also an entry point for lifesaving services with a focus to decrease the risk of stigmatization on women and girls within their own communities and provides regular group and individual recreational psychosocial support including basic counselling, skills building and social networking for women and girls. The safe spaces collaborate with other sectors to provide information on a range of issues such as health including sexual and reproductive health rights, water and sanitation but it is critical to ensure integrity of the center as a space designed for women and girls is not compromised.
* **Strengthening registration systems;** CARE works with women’s rights organizations to advocate for birth and marriage registration systems, to raise awareness of the importance of registration and to make it accessible for marginalized communities.
* **Investing in girls’ education;** CARE works with women’s rights organizations to advocate for pprovision of education especially at the secondary level to girls as a key strategy for eliminating child marriage. States are encouraged to invest in girls’ education by allocating sufficient resources from national and state budgets to ensure safe and quality education for girls.  CARE engages families in income generating activities to in order to earn income to provide support to the children in order to make education affordable.
* **Provide life skills and reproductive health education and services.** In South Sudan,adolescents have been supported to manage their sexual and reproductive health issues through different approaches such as comprehensive sexuality education in school, life skills-based education and youth information centers, material support for the adolescent girls (provision of dignity kits, hygiene kits for the girls). These efforts targeted both unmarried and married girls with the objective of delaying child marriage until age 18 and delaying pregnancy as well.

**10. What efforts were taken to enhance coordination of programmes in humanitarian contexts towards the prevention and elimination of CEFM?**

* In South Sudan, CARE joined other stakeholders in development and launching of national action plan (NAP) on ending CEFM led by Ministry of gender, child and Social Welfare, with support from UNFPA and UNICEF. Also as part of coordination of programmes in humanitarian context towards addressing CEFM and other types of GBV, CARE is one of the two INGOs in South Sudan selected as members of National GBV Sub Cluster Strategic Advisory Group (SAG) and takes part in providing strategic direction to the work of the GBV Sub Cluster in consultation with other GBV Sub Cluster and Protection cluster partners.
1. No Safe Place: A lifetime of violence for conflict affected women and girls in South Sudan” IRC, CARE and Global Women’s Institute at George Washington University (2017) <https://globalwomensinstitute.gwu.edu/research-reports>. [↑](#footnote-ref-1)
2. Ibid [↑](#footnote-ref-2)
3. Progressive gender and GBV analysis; Inequality and Injustices; the deteriorating situation for South Sudan women and girls in south Sudan (CARE 2016) <https://insights.careinternational.org.uk/media/k2/attachments/CARE_Inequality-and-injustice_South-Sudan-progressive-gender-analysis_Dec-2016.pdf> [↑](#footnote-ref-3)
4. African child policy forum 2015 <http://africanchildforum.org/en/index.php/en/> [↑](#footnote-ref-4)
5. Interview with Director of Gender, Child and Social Welfare, Juba 14 August 2017 [↑](#footnote-ref-5)
6. UNFPA South Sudan, [tweet](https://twitter.com/UNFPASouthSudan/status/834410465065312257), 22 February 2017 in http://www.girlsnotbrides.org/child-marriage/south-sudan/ [↑](#footnote-ref-6)