

# Taking action to address child marriage: the role of different sectors



## Food security and nutrition

Food insecurity and malnutrition can be both causes and consequences of child marriage. Discriminatory gender norms that undervalue girls' roles in the family and community can intersect with food insecurity and poverty to create powerful drivers of child marriage. Faced with limited food resources, families may marry their daughters in an attempt to lessen the burden on their constrained food allocations by having one less mouth to feed.

While food insecurity may sometimes contribute to child marriage, the practice can also perpetuate the cycle of food insecurity and malnutrition. Girls who are married young experience higher rates of anaemia and malnutrition than those who marry later in life. Children born to adolescent mothers are more likely to have low birth weight, suffer from poor nutritional status, and experience stunting. This may be due in part to maternal-foetal competition for nutrients and energy since adolescent mothers' bodies are still growing and developing themselves. It may also be related to the combination of a higher risk of violence faced by child brides coupled with the association between violence during pregnancy and poor infant and child health outcomes. The effects of poor nutrition can be seen throughout the life course of these children, with negative impacts on educational attainment and health into adulthood, perpetuating the cycle of poverty and malnutrition.

Girls who are out of school, poor, and living in rural communities are at greater risk of both child marriage and food insecurity. Reaching these girls, as well as those who are already married, with nutrition and food security interventions, including agricultural training to increase crop and animal production, can have lasting impacts on the health and well-being of girls and their families.

### Integrating child marriage prevention and response into food security and nutrition programmes

Programmes that aim to reduce food insecurity have the potential to simultaneously reduce a key driver of child marriage, as well as mitigate its effects. As married girls are often isolated from information and services, interventions should make efforts to explicitly include and conduct outreach to this vulnerable population.

Women's and girls' limited access to land, including legal ownership and inheritance, can both motivate child marriage and exacerbate its effects. When only men are entitled to land ownership and inheritance, it forces women and girls to be reliant on men for access to land and

### Strategies for integrating child marriage

- Agricultural skills training, for both household consumption and income generation
- Life skills and empowerment training
- Involve women and girls in designing response efforts
- Nutrition education
- Targeting information and services to young mothers
- Provision of agricultural assets (such as livestock)
- Train and deploy female agricultural extension agents
- Property rights reform



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food security. By addressing legal land constraints, programmes that advocate for improved land titling and inheritance rights and educate on land policies and laws can mitigate a key driver of child marriage by decreasing girls' dependence on men for key resources. This education needs to extend beyond the girls themselves to include families, communities, and judicial and enforcement officers. Programmes should also work to establish a legal framework that ensures women and girls have equal access to land and other productive resources, thereby lifting some of the key resource constraints that perpetuate child marriage.

#### Important topics to include in programmatic efforts include:

- Educating girls, their partners, and their families about nutrition
- Promoting maternal nutrition, optimal breastfeeding, complementary feeding, and appropriate foods for children under five
- Educating married girls and their families on water, hygiene, and sanitation, including safe drinking water, hand washing with soap, safe disposal of excreta, and food hygiene

#### Programme examples

While the following programme examples may not explicitly aim to reduce child marriage, they address relevant drivers and therefore have the potential to reduce child marriage or mitigate its impacts. If such programmes include an additional focus on child marriage and measure child marriage-related outcomes, greater impact may be possible.

***SHOUHARDO I and II***, funded by USAID and implemented by CARE since 2004, aims to reduce food insecurity and child malnutrition in Bangladesh's poorest communities utilising the empowerment knowledge and transformative action (EKATA) model to promote life-skills education, empowerment, and social change. Both iterations included child marriage in programme implementation, with EKATA groups discussing challenges and offering support to adolescent girls and married girls and women. Child marriage-related outcomes measured in the programme's monitoring and evaluation showed that some girls are able to advocate against child marriage.



***The Suaahara (Good Nutrition)*** project has been implemented in Nepal by USAID, the Ministry of Health and Population, and Save the Children since 2006. The project uses a community-based approach to target key nutritional points throughout the life course by improving the health and nutritional status of pregnant and lactating women and children under 2 years of age. In addition to health education, the programme also teaches women home-based gardening and poultry farming techniques so they can produce adequate and nutritious food for their families. Through social and behaviour change communication, Suaahara also influences sociocultural norms that impact food consumption and food purchase patterns.

Suaahara does not specifically focus on adolescent mothers, but nutrition programmes such as this are well-positioned to target child brides and adolescent mothers and thereby reach some of the most vulnerable girls and children with a high risk of malnutrition. Collecting child marriage-related indicators, including the age and marital status of programme participants, would help nutrition programmes measure the impacts of their programme on the risks and consequences related to child marriage.



### Monitoring and evaluation: illustrative examples

An initial and powerful way to integrate child marriage prevention and response into programming is by measuring changes related to child marriage, learning how these changes impact other programme areas, and then adjusting programming accordingly. The following are sample indicators that can be used in food security and nutrition programmes to understand child marriage-related impacts. For a more complete list of indicators, please refer to the [USAID Child, Early, and Forced Marriage Resource Guide](#) or [Girls Not Brides' Measuring Progress: recommended indicators](#).

### Monitoring and evaluation: illustrative indicators

Indicator	Data source and notes
Prevalence of anaemia among (married and non-married) adolescent girls.	Information on women's and girls' micronutrient deficiencies is collected through the WHO Vitamin and Mineral Nutrition Information System. More localised data could be collected via community- or programme-level blood tests among the target population.
Prevalence of wasting/stunting in children under five, born to adolescent mothers.	Information on children's height and weight is collected in DHS, MICS, and other national surveys. More localised data could be collected via community- or programme-level anthropometric measurements among the target population.
Extent to which adolescent girls (married and unmarried)/women have sole or joint decision-making over food and cash-crop farming, livestock, and fisheries, as well as autonomy in agricultural production.  <i>Disaggregate by age and marital status</i>	A survey of individuals in the target population. Methods pulled from IFPRI's Women Empowerment in Agricultural Index (WEAI) available on their <a href="#">website</a> .
Percentage of adolescent girls who are members of groups for girls that address life skills, protection, nutrition, health, sexual health and reproductive health rights, gender norms etc.  <i>Disaggregate by age and marital status</i>	A survey of individuals in the target population.
Percentage of adolescent girls (married and unmarried) who have accessed nutritional services in the last six months (e.g., anaemia control).  <i>Disaggregate by age and marital status</i>	A survey of individuals in the target population.
Existence of laws giving married men and married women equal ownership rights to property.	Data are collected and made publically available via the World Bank's Women, Business and the Law database.



### Suggested further reading

The briefs in this series are based on the Child, Early, and Forced Marriage Resource Guide (2015), written for USAID by Allie Glinski, Magnolia Sexton and Lis Meyers on behalf of ICRW and Banyan Global. References, programme examples, and further information can be found in that guide, located here:

<https://www.usaid.gov/documents/1865/child-early-and-forced-marriage-resource-guide>.

For additional information, see:

FAO. (2014). **Youth and agriculture: key challenges and concrete solutions**. Food and Agriculture Organisation of the United Nations (FAO), Technical Centre for Agricultural and Rural Cooperation (CTA), & the International Fund for Agricultural Development (IFAD). Available at: <http://www.fao.org/3/a-i3947e.pdf>

Malhotra, A., Warner, A., McGonagle, A., & Lee-Rife, S. (2011). **Solutions to end child marriage: what the evidence shows**. Washington, DC: ICRW. Available at: <http://www.icrw.org/files/publications/Solutions-to-End-Child-Marriage.pdf>

Raj, A., Saggurti, N., Winter, M., Labonte, A., Decker, M., Balaiah, D., & Silverman, J. (2010). **The effect of maternal child marriage on morbidity and mortality of children under 5 in India: cross sectional study of a nationally representative sample**. *BMJ*, 2010;340:b4258. Available at: <http://www.bmj.com/content/340/bmj.b4258.full.pdf+html>

Victora, C.G., Adair, L., Fall, C., Hallal, P.C., Martorell, R., Richter, L., Maternal and Child Undernutrition Study Group. (2008). **Maternal and child undernutrition: consequences for adult health and human capital**. *The Lancet*, 371(9609), 340–357. Available at: [http://www.thelancet.com/pdfs/journals/lancet/PIIS0140-6736\(07\)61692-4.pdf](http://www.thelancet.com/pdfs/journals/lancet/PIIS0140-6736(07)61692-4.pdf)