This Research Spotlight summarises the latest research and evidence related to child marriage programming in conflict- and crisis-affected settings. It includes key takeaways from featured studies, highlights current evidence gaps and under-researched geographical areas, and draws attention to where more research is needed.

**Key terms:**

*Ever-married girls:* Term referring to girls who are or have been married or in a union at least once in their lives, regardless of their current marital status.

*Polycrisis:* Term referring to the multiple crises facing the world today, including public health crises, armed conflicts and climate crisis.
1. Rationale for focus

The latest data from UNICEF shows that child marriage prevalence continues to decline at the global level, but that progress has been uneven. Prevalence amongst the poorest households actually increased in some regions, while overall progress has stalled in others. West and Central Africa – the region with the highest child marriage prevalence – has made little progress over the last 25 years, with many countries in the Sahel experiencing ongoing crises that exacerbate the drivers of child marriage. In Ethiopia, historically a success story, intense conflict is expected to cause a 15% rise in child marriage every year, which will be exacerbated by drought conditions.¹

So, multiple and interconnected global crises – or a “polycrisis”, comprised of conflict, climate crisis, the lasting effects of COVID-19 and rising living costs – are threatening progress and putting millions more girls at risk of child marriage. The UNICEF report confirms the impact of conflict and climate crisis on child marriage: for each tenfold increase in conflict-related fatalities, child marriage increases 7%; for every 10% change in rainfall due to climate change, child marriage increases 1%.

In a recent UNICEF survey of 17,000 adolescent girls (aged 14-19) in 29 countries, 8 out of 10 reported having experienced a climate-related shock, 16% reported disruptions to their education and 32% reported having less food to eat because of climate change.²

The latest estimates from Education Cannot Wait show that of the 224 million school-age children and adolescents affected by crisis, 72 million are out of school; of those out of school, 53% are girls and 21% have been forcibly displaced. Access to secondary education is also inadequate, and transition between education cycles is most problematic for girls. Gender disparities are more pronounced in secondary education and largest in high-intensity crises. But access is not the only issue – quality of education is also important. Nearly half (48%) of crisis-affected girls who are in school are not achieving minimum proficiency levels in reading or maths.³

UNICEF data from 2021 also estimated that an additional 10 million girls would marry or enter a union before age 18 by 2030, because of COVID-19 alone.⁴

In this context, progress would need to be 20 times faster to meet the Sustainable Development Goal Target 5.3 of ending child marriage by 2030.

The next section presents learnings and key takeaways from seven recent studies, grouped by thematic area: conflict, climate crisis and environmental emergencies, food insecurity, and COVID-19. They include a mix of research studies and programme evaluations, each contributing to the knowledge base for inclusive child marriage programming in crisis and conflict-affected settings.

PICTURED: Rufo, 18, was married in 2022. In Borena province of southern Ethiopia, child marriage is a common practice, which is increasing as prolonged drought puts families under increasing pressure. Photo: © UNICEF/UN0792207/Pouget
2. Conflict-affected settings and child marriage

Design and implementation of the Amenah early marriage pilot intervention among Syrian refugees in Lebanon

This paper documents – from development to evaluation – the Amenah multicomponent, community-based pilot intervention, which aimed to reduce child marriage and improve educational outcomes among adolescent Syrian refugee girls in Lebanon. It identifies community-based approaches as critical to ensuring project effectiveness and sustainability in refugee settings.

Key findings:

- **Refugee adolescent girls had positive attitudes towards education, but left and married early due to structural barriers.** At baseline, 92% of girls believed that the ideal level of education for a girl is university or above, and 80% expected to achieve this, even if they had already left school. School enrolment was around 70% for girls aged 9-12 years, but declined significantly from age 13; while marriage prevalence began to increase at age 15, by which point only one third of girls were still in school. Structural constraints to girls’ education include shortcomings in Lebanon’s education policy for refugees, poverty and insecurity in the context of displacement.

- **Peer networks are important for attendance and acceptance of programme content, indicating the value of safe spaces for adolescent girls.** Disruptions to peer networks during displacement, safety concerns in the host country, and restrictions to married girls’ mobility may increase girls’ isolation and limit their participation in the programme.

- **Mothers attended fewer sessions than girls, but were positive about the programme.** They highlighted the sessions on puberty and menstruation, which relieved them of some responsibility and improved relationships with their daughters. They also valued the English support sessions, indicating concerns around the structural barriers faced by Syrian girls in the Lebanese school system. Their attendance was influenced by their own education level and partner’s employment status.

- **Syrian female community workers (CWs) served as a link between the community and research team, and between girls and their mothers.** With their knowledge of displacement and impacts of gender inequality and economic pressure in the community, they built trust and contributed to enrolment in the programme.

Key takeaways:

- **Qualitative research that engages community members to understand their priorities and capacities should be the starting point for adolescent interventions in conflict-affected contexts.** Understanding the social norms and gender roles that restrict adolescent girls’ access to sexual and reproductive health and rights (SRHR) resources is critical to developing a curriculum that is acceptable to the community. A community advisory board should be assembled to ensure interventions are tailored to their needs, and to strengthen their support and engagement.

- **Displaced populations need to be involved in the design and delivery of (health) interventions in conflict-affected settings, as they understand the context best.** However, researchers should be aware of and mitigate the economic and legal constraints faced by implementers from refugee – or otherwise excluded – communities. Refugee implementers also need appropriate training, including in project evaluation.

- **Parents must be engaged in interventions to address child marriage in displacement settings.** More research is needed on how to do this – especially with fathers – and how to overcome the structural inequalities that affect participation. Attention should also be paid to why parents might value academic or vocational support over approaches that work with girls to address norms around child marriage, as this can affect engagement.

- **Peer networks and safe spaces are essential elements of interventions working with refugee girls.** More attention to and development of peer dynamics is needed. This could include the use of peer educators as role models, particularly for adolescent SRHR interventions.

- **Cash transfers have increased girls’ school enrolment and delayed marriage** in other contexts, and should be tested for Syrian refugees in Lebanon. This should happen alongside efforts to ensure there are spaces for Syrian children in Lebanese schools.

- **Empowerment approaches cannot address the structural legal and economic constraints on refugee households that drive child marriage** – policy advocacy and community-based approaches are also needed.

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b. The initiative included eight sessions for mothers, designed to complement the girls’ component and to provide a forum for discussion around adolescence and early marriage but with a stronger focus on gendered norms and mother-daughter communication.
“There should be some freedom in our lives”: Exploring adolescent girls’ experiences of child marriage

This report draws on data collected as part of the Gender and Adolescence: Global Evidence (GAGE) longitudinal research programme. It explores the varied and intersecting ways in which child marriage limits girls’ trajectories and agency over their own lives. The sample of 1,194 ever-married girls is made up of 118 girls in Bangladesh, including 84 Rohingya girls living in refugee camps in Cox’s Bazar; 181 girls in Jordan, including 154 Syrian refugees living in host communities; 15 Syrian and Palestinian girls living in Lebanon; and 880 conflict-affected girls in rural and urban areas of Ethiopia.

Key findings:

• Marriages in conflict-affected areas were generally rushed, but more so among refugee girls. In Bangladesh, 45% of girls in refugee camps had known their husband for less than a month, compared to 25% of girls from host communities. In Jordan, 27% of Syrian girls had known their husband for less than a month, compared to 7% of Jordanian girls.

• Food insecurity, poverty, COVID-19 and conflict are drivers of marriage for some conflict-affected girls. In Jordan, 35% of married girls reported at baseline that they would have preferred to have waited until they were older to marry. Ever-married girls were disproportionately likely to live in poorer households; and married girls reported that the economic crisis, COVID-19 and conflict have pushed more families deeper into poverty and further compromised food security. Refugee girls face greater insecurity due to restricted formal employment opportunities.

• Many child marriages are quickly followed by divorce, often initiated by girls. In Ethiopia, 22% of 15- to 19-year-old girls who had been married were already separated or divorced. The proportion was higher where divorce is more socially acceptable – like Amhara region and urban areas – compared to contexts where it is stigmatised and feared by girls.

• Marriage is rarely compatible with education, and refugee girls have less access to education than their peers. Less than 10% of married girls in Bangladesh, Jordan and Ethiopia’s Oromia and Afar regions were enrolled in school. In Bangladesh, 95% of girls in camps had not completed primary level, compared to 44% of girls from the host community, in part because of displacement, lack of formal schools and Bangladeshi government policy that until recently denied refugee girls access to informal education. In Ethiopia, ever-married girls’ access to education improved by 15 percentage points after divorce. Despite this, there were very few programmes focused on access to education for married girls.

• Child marriage is quickly followed by motherhood. Married girls reported little knowledge about contraception, and demand and use of contraception is limited. This is largely because of community and family pressure to have children, and partners’ control over married girls’ access to health care. Married girls also reported they could only rarely refuse sex with their husbands. Of married girls aged 15-17, 42% in Jordan, 48% in Ethiopia and 68% in Bangladesh were already pregnant or mothers. In Ethiopia, girls in the most remote communities had almost no access to health care services, especially since the onset of the recent conflict.

• Married girls are likely to experience violence but unlikely to access support. Husbands – and their families – are the most common perpetrators of emotional, physical and sexual violence, and controls over married girls’ mobility. Married girls are often physically and emotionally isolated with little access to emotional support, especially if they are out of school. Few girls seek support for intimate partner violence, in part due to norms around violence – over half of married girls in Ethiopia and Jordan, and almost all girls in Bangladesh agreed that husbands’ violence should not be discussed outside the household. Formal survivor support and justice services are limited and rarely prioritise girls’ needs and rights, especially for violence experienced within marriage. Traditional justice mechanisms focus on preventing divorce rather than protecting girls.
Key takeaways:

- **Programming to improve the lives of married girls in conflict-affected settings should start before marriage.** Drawing on efforts known to help prevent child marriage, they should increase girls’ agency to decide and act through education, life skills and knowledge about sexual and reproductive health (SRH). These efforts should begin with keeping girls in school as long as possible, using labelled or conditional cash transfers and school feeding where necessary.

- **Ever-married girls in conflict-affected settings need opportunities to spend time with peers and friends in safe spaces that also offer access to caring adults.** This social support should be coupled with supporting girls’ knowledge of their rights, including where and how to break taboos and report violence; and effective activities that support decision-making, self-confidence and communication skills.

- **Ever-married refugee girls need pathways for continued learning.** Depending on context, this might be targeted access to school, evening classes, or informal programming or skills-training opportunities. The feasibility of cash transfers as an incentive for marital and natal families to allow and encourage ever-married girls to study should be explored.

- **There is an urgent need to build support for better-spaced pregnancies and access to adolescent-friendly SRH services, so marriage is not quickly followed by parenthood.** Programmes must engage with married girls, their husbands, mothers-in-laws and communities to raise awareness of the role of delayed and spaced pregnancies in improving maternal and child outcomes. Similarly, health care providers need sensitisation on how age and gender norms shape married girls’ access to – and experiences of – health services, with critical attention paid to SRH services.

- **Married and divorced girls who are or have experienced violence need urgent and increased support.** This includes informal support from their in-laws and parents after marriage, and access to formal services like health care, psychological and legal services, and formal justice. Programming should support husbands to explore alternative masculinities that do not revolve around control and violence.

- **Social protection should be expanded to be more inclusive of newly married adult couples, so incentivising delayed marriage and reducing violence.** Social protection could be provided in the wife’s name or to the female head of household, to promote financial inclusion and more equitable decision-making.

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3. **Climate and environmental crisis and child marriage**

**Not a dream wedding: The hidden nexus between climate change and child marriage**

This [paper](#) from the University of Chile explores the relationship between climate change and child marriage, as mediated and moderated by economic (income and poverty) and social norms (gender equality index) variables, in 180 countries.

Key findings:

- **The main effects of climate change vulnerability on child marriage are indirect, operating through gender inequality and extreme poverty by:**
  - Disproportionately affecting the incomes of the most marginalised people – especially girls – who are pushed into marriage due to gender discrimination.
  - Reducing total income, which increases the rate of extreme poverty, a major driver of child marriage.

- **Gender discrimination is relatively more important than extreme poverty as a driver of child marriage** before age 18 and before age 15:

Key takeaway:

- **Child marriage is complex and must be addressed from different perspectives**, including reducing poverty, promoting education for girls and women, and implementing policies and interventions that address gender inequality. This also means addressing (gendered) climate change vulnerability.
What is the current evidence for the relationship between the climate and environmental crises and child marriage? A scoping review, Global Public Health

This systematic review examines the relationship between environmental crises and child marriage. It finds that environmental crises worsen known drivers of child marriage, as families lose assets and opportunities for income generation, people are displaced, education is disrupted, and (actual and fear of) sexual violence increases. Local socio-cultural contexts – like bride price or dowry practices – further shape how these factors affect child marriage.

Key findings:

- Child marriage is used as a short-term coping mechanism in response to environmentally driven economic shocks. A higher number of dry months in Bangladesh were associated with an increased risk of child marriage in rural areas over the short term, especially in the poorest households engaged in agriculture. Extreme heat – over 30 days in a year – was also associated with increased child marriage prevalence, particularly for girls aged 11 to 14 years, who were twice as likely to marry as in baseline years. Natural disasters in Indonesia were associated with a significant increase in the likelihood of child marriage, particularly in villages with higher relative poverty.

- Bride price acts as an incentive for child marriage after environmental crises, while dowry may be a disincentive. In Tanzania and Vietnam, rainfall shocks during adolescence were associated with increased child marriage for girls, especially in villages where bride price payments were high. In India, where dowry practices are common, rainfall shocks and associated decreases in household expenditure reduced the likelihood of child marriage. However, the dowry disincentive can be minimised by reductions in dowry costs during crises.

- Environmental crises exacerbate existing gender inequality and control of girls’ sexuality. In Bangladesh, post-disaster situations are characterised by uncertainty and a lack of safe shelters and reporting systems, which increases the risk of sexual violence. In this context, families may see child marriage as a way to protect their – and their daughters’ – honour.

- Environmental crises disrupt education – by destroying infrastructure and increasing economic barriers and displacement – so removing a factor that is protective against child marriage, with intergenerational effects. A study of 886 girls and adolescents in India and Vietnam showed parental education and child school enrolment were protective against child marriage. Similarly, secondary education was found to be protective against child marriage after natural disasters in Indonesia. Urban location and disaster early warning systems are also protective factors, but the mechanism behind these associations is unexplored. In Bangladesh, 19% of survey respondents took their children out of school as a strategy for adapting to the effects of climate change. In Malawi, floods destabilised the educational system and increased the risk of early marriage, child labour and human trafficking.

- Laws in Bangladesh and Mozambique do not acknowledge any link between climate crisis and child marriage; Uganda’s National Adaptation Programme of Action acknowledges child marriage as a coping strategy used during crisis. Passing laws and policies is not enough; they also need to be enforced, especially where environmental crises increase the likelihood of child marriage. Enforcement gaps in child marriage laws were identified in Bangladesh, as legal barriers – like presenting a birth certificate at wedding ceremonies – and sanctions can be avoided.

c. Dowry is paid by a bride’s family to the groom, while the bride price is paid by the groom or his family to the bride’s family. Dowry practices are most common in South Asia, while bride price practices predominate in West, Central and Eastern Africa.

d. Abasan is low-cost housing provided by the government for rural populations who have been displaced, largely due to environmental crises.
Key takeaways:

- **Environmental crisis exacerbates existing – and interrelated – drivers of child marriage; and gender inequality and poverty drive climate vulnerability.** In altering access to resources and education, and in potentially driving sexual violence, displacement and migration, environmental crisis impacts on decisions around child marriage. Girls from rural populations – especially those with limited resources and those who are dependent on the local environment for their livelihood – are at greatest risk. Prevention and response efforts need to consider these linked drivers and address them at the local, national and global level.

- **The effects of environmental crisis on child marriage are mediated by practices like dowry, bride price, female genital mutilation/cutting (FGM/C), and the application of laws and policies.** This relationship – and how it changes at the local and regional level – should be considered in child marriage interventions, and be the focus of future research.

- **Child marriage increases among populations who are displaced by – or in anticipation of – environmental crises.** This needs to be considered in crisis planning and response, including in the delivery of services like education and SRHR.

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4. **Food insecurity and child marriage**

According to the World Food Programme (WFP) and the Food and Agriculture Organization (FAO), organised violence/conflict and weather extremes are significant drivers of food insecurity. Such crises can disrupt agricultural livelihoods, food production and distribution, agricultural assets, and safe access to water or food. This disruption can lead food insecurity and increased poverty, and, in turn, to girls’ leaving school and marrying before age 18.

**Our voices, our future: Understanding child marriage in food-insecure communities in Chiredzi District, Zimbabwe**

This research report investigates child marriage drivers and existing support and resources for adolescents in food-insecure urban and peri-urban communities in Chiredzi District, Zimbabwe, with a sample of 1,668 adolescents and adults. It is part of a Plan International Child Marriage in Humanitarian Settings Initiative launched in 2019 to prevent and respond to child marriage, with a focus on girl-centred, community-based research. It finds that extreme and recurrent food insecurity further worsens pre-existing drivers of child marriage, with increased household economic hardship adding complexity to the risks already faced by adolescent girls.

**Key findings:**

- **Child marriage, poverty and unmet basic needs – including lack of access to menstrual products, school supplies and food – emerged as dominant issues among research participants.** They reported that child marriage was widespread, normalised and also viewed negatively, interpreted as the result of socially unacceptable adolescent (girl) behaviour, poor parenting, or a way out of poverty (adults) or violent family dynamics (adolescent girls). Data indicate that despite expectations of greater security in marriage, married and pregnant girls are ostracised and can face cycles of abandonment and violence from parents and partners, leading to adverse mental health and psychosocial outcomes.

- **Food insecurity is a key risk factor for child marriage, as it interacts with poverty and the inability of families to meet basic needs.** This risk was exacerbated by climate hazards – like drought and flooding – COVID-19 containment measures and by the practice of lobola, or bride price. Parents might force girls to marry to relieve economic pressure, or adolescent girls may seek relationships with men to escape food insecurity at home. Data also showed food insecurity drives violence in the home, with some parents withholding food from girls as punishment for unsanctioned relationships.

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e. Food insecurity is a lack of access to sufficient food for a healthy lifestyle, with five levels of severity based on food consumption, livelihoods, nutrition and mortality.

f. In this context, co-habitation – where the marriage has not been formalised through customary processes or legal registration – is the most common marriage relationship type. This puts the girl or adolescent girl at greater risk of being left by her partner.
Sexual violence and exploitation were a key concern facing adolescent girls, particularly those living in child-headed households or who migrate from rural areas. This can be in the context of selling sex to meet basic needs—including food—recruitment for prostitution and child trafficking. In some cases, sex work leads to (pregnancy and) child marriage, while in others it is a necessity for married girls to ensure their own and their children’s survival. Power imbalances in relationships, the prevalence of informal unions, practice of musengabere—or abduction to formalise a marriage—and the speed at which relationships develop also reduced adolescent girls’ decision-making power, and increased the risk of violence, pregnancy and child marriage. All this in the context of high unmet SRHR needs and lack of alternatives for girls.

The COVID 19 pandemic worsened pre-existing drivers of child marriage, including increased poverty and food insecurity—particularly for households with informal incomes and who relied on school feeding programmes—reduced access to education and other services for girls, violence at home, adolescent pregnancy, and weakened protective structures and spaces. This impacted girls through household decision-making that prioritises food and education for boys.

Despite the challenges, adolescent girls can drive change in their communities when they have a support system that provides information and support around education, SRH, and child protection services. This includes parents, paternal aunts, youth networks and peer interventions, community leaders, teachers and service providers, non-governmental and feminist organisations, government agencies, and international NGOs across the humanitarian-development continuum. However, the research also found that parents’ mistrust of adolescents and protection and SRHR services was a barrier to reaching adolescent girls, along with service provider attitudes, limited institutional funding and climate hazards that exacerbated poor infrastructure beyond urban centres.

Key takeaways:

- Climate hazards, pandemic containment measures and sexual exploitation—operating within the context of gender inequality and poverty—further exacerbate food insecurity and increase the risk of adolescent pregnancy and child marriage.
- Individual-level interventions are not sufficient—the complex and interconnected drivers of child marriage require a collaborative response across the social, institutional and resource levels. This means tailoring responses to adolescent girls’ needs, and combining feeding and livelihoods programming with community-led gender-transformative programming that also engages parents, young men and community leaders as champions for gender equality. Humanitarian actors should better coordinate with national and longer-term actors to address the recurrent consequences of cyclical food insecurity and the impacts of climate change.
- Assistance programming can have unintended consequences, as tensions and violence increase with loss of livelihoods and unmet basic needs. Caregivers may seek marriage for dependent girls and boys to make aid go further.

5. COVID-19 and child marriage

The pandemic has exacerbated many challenges for adolescent girls, including increased risk of child marriage, gender-based violence (GBV), higher rates of anxiety and depression, and reduced access to SRHR services.

Assessing the hidden burden and costs of COVID-19 pandemic in South Asia: Implications for health and well-being of women, children and adolescents

This research article assesses the impact of COVID-19 on essential health services coverage, disruptions and prolonged school closures for girls and women in Afghanistan, Bangladesh, India, Nepal, Pakistan and Sri Lanka between January 2020 and June 2021.

Key findings:

- Disruptions to essential health services—including modern contraceptive methods—resulted in more than 5.4 million additional unintended pregnancies, and maternal and child deaths increased by 19% and 13% respectively, compared to 2019. These systems have not yet recovered.
• Extended school closures – exacerbated by economic hardship – increased the risk of adolescent pregnancy and child marriage. School closures due to COVID-19 are expected to result in 9.4 million school-age children permanently leaving school in South Asia. Of these, 4.5 million are girls and, based on limited data, 29-50% are likely from the poorest households, who are most likely to leave school permanently. In turn, girls being forced to leave school could result in an additional 500,000 adolescent pregnancies, 150,000 low birthweight births and 27,000 additional children becoming stunted by age two.

Key takeaways:
• Services need to be rebuilt in a targeted way to reach the most marginalised populations, to address inequality and build resilience for future crises. This includes continued provision in essential sexual, reproductive, maternal and child health services, and keeping schools open during future health emergencies.
• Investments in health systems, poverty alleviation, education and gender equity can help mitigate some of the negative impacts caused by COVID-19 on the most marginalised and at-risk populations. The impact on these populations needs continued monitoring.

Assessing the health, social, educational and economic impact of the COVID-19 pandemic on adolescents in low- and middle-income countries: A rapid review of the literature

This review analysed the impact of COVID-19 on adolescents in low- and middle-income countries, drawing on 89 articles. It finds that the pandemic has had a significant negative impact on the health, social, educational and economic outcomes of adolescents.

Key findings:
• Almost all articles found worse mental health among adolescents during the pandemic across various regions. They reported on anxiety, depression, stress, loneliness and substance abuse. The paper also notes that mental health outcomes were worse for adolescents from groups who had been marginalised, like those living in poverty or those who identify as LGBTQIA+.
• Remote education was seen as a negative experience, with gender and other disparities putting marginalised adolescents at risk. Enrolment was lower among married girls, those with lower socio-economic status, older adolescents and those from smaller households; school dropout was also higher among these groups, and among refugees and girls from rural areas.
• Adolescent girls across different countries faced challenges in accessing healthcare and menstrual products. Between 25% and 57% of adolescent girls reported difficulty accessing menstrual products or maintaining menstrual hygiene. In one study across Côte d’Ivoire, Ethiopia and Lebanon, refugee girls reported this to a greater extent than those from host communities.
• In some countries, adolescent girls faced challenges in accessing SRH services due to lockdowns and other containment measures, particularly in humanitarian settings. There was little specific information on the impact of COVID-19 on SRH, but related issues also have consequences for SRH – depression, social isolation and anxiety; loss of access to comprehensive sexuality education during school closures; and economic constraints. One study in Kenya suggested pregnancy risk before high school completion was double that before the pandemic.
• During COVID-19, refugees faced higher community-level violence by the police, lack of pedagogy during remote learning, increasing fears of dropping out of school, higher food insecurity and lower income/livelihood.

Key takeaways:
• School closures and remote learning impact negatively on girls’ mental health and future aspirations, leading to child marriage and distress for married girls. Social support, positive coping skills and parent-child discussions can improve mental health outcomes. Interventions need to acknowledge the importance of peers in adolescents’ lives, and attention needs to be paid to how education – including comprehensive sexuality education – is delivered, so that all girls can access it during health emergencies. Solutions include online modules, group sessions and radio edutainment lessons.
6. Discussion

The studies in this Spotlight offer a strong argument and some necessary evidence to strengthen child marriage interventions in conflict- and crisis-affected settings. Conflict and crisis exacerbate existing drivers of child marriage, which is often used – by girls and their families – as a short-term coping mechanism to reduce the pressure on limited household resources, and to gain financial and physical security. Such decisions are often taken under pressure, further contributing to adolescents’ reduced decision-making power.

In addition to generalised conflict- and crisis-related trauma, insecurity and the breaking down of support networks and services, married and parenting girls are less likely to go to school, and experience greater – often overwhelming – domestic responsibilities, isolation and intimate partner violence than their peers. They face financial, legal and social obstacles to accessing education, SRHR, GBV and child protection, and separation and divorce services.

Interventions need to be tailored to adolescent girls’ needs, consider the linked structural constraints on conflict- and crisis-affected households, and address them at the social, institutional and resource levels over the longer term. This means engaging adolescent girls in a context-appropriate way, and also building community trust and consensus around girls’ participation and wellbeing, particularly with regards adolescent SRHR, GBV and divorce. Interventions should be co-created – including with fathers, young men, community leaders and service providers – and/or engage a community advisory board and community implementers to increase support and transform the gender norms that are the root cause of child marriage. More research is needed on how to engage parents, and especially fathers, in child marriage interventions in displacement settings.

Peer networks and designated safe spaces are also essential components of interventions working with refugee girls. Peer educators could be used as role models, particularly for SRH interventions, but researchers should be aware of the constraints faced by implementers from refugee and otherwise marginalised communities.

Keeping girls in school is one of the best ways of preventing child marriage. Analysis from the Education Cannot Wait notes that girls consistently show a strong learning potential whenever they are given the opportunity. Even in crises, the proportion of girls who achieve minimum proficiency in reading is consistently higher than that of their male counterparts.

Interventions therefore need to focus on girls’ school enrolment and retention through adolescence, especially when they are displaced or refugees. Solutions include online modules, group sessions and radio edutainment lessons. The feasibility of using labelled or conditional cash transfers for natal and marital families should also be explored, and school feeding programmes used where necessary. Social protection should also be more inclusive of newly married adult couples – particularly wives – to reduce the tensions that fuel violence and school dropout, and incentivise delays to marriage.

While the evidence base on what works to prevent child marriage and support married girls in crisis- and conflict-affected settings is growing, there are still significant gaps. It is critical that governments, donors and NGOs invest in disaggregated data (including by age, sex and disability), pilot interventions and long-term evaluations.

There is a lack of understanding around the needs and priorities of displaced populations, and in particular the unique aspects of implementing and evaluating interventions with refugees in low- and middle-income countries. Given it is home to one of the largest refugee populations in the world, the Arab region should be a geographical focus.

Another challenge is that of inferring causality from correlational quantitative research – that is, research that investigates the relationship between variables without testing for cause and effect. For example, as this relates to climate crisis, many of the quantitative studies use a single meteorological variable as a proxy for the full complexity of the local climate and environment.

Future research should investigate the effects of a wider variety of ecological and environmental changes, and examine the links between child marriage and other practices like bride price and FGM that may increase after conflict or crisis.
Some key questions for consideration in future programme design and evaluations could be:

- How can the design of interventions involving crisis- and conflict-affected persons better serve their community, particularly with regards to engaging parents (especially fathers) and incorporating peer networks/safe spaces for adolescent girls?
- How does remote education impact adolescents' daily lives during conflict and crisis?
- How does access to SRHR, education and socio-economic support differ among adolescent girls across different countries, and within different conflicts or crises?
- What are some of the solutions to community acceptability and engagement with married adolescents in conflict and crisis settings?
- What types of support programmes might improve the lives of ever-married girls?
- What actions should policymakers or intervention designers take when looking to improve access to essential primary care services for adolescents living through conflict or crisis?
- What are the pre-existing social norms and policies that exacerbate gendered risk during conflict and crisis, and how can we address them?
- What types of investments should governments, donors and NGOs make to better understand the experiences of ever-married girls, and optimise outcomes for them and their children?
- What are the main challenges faced by ever-married girls in accessing formal psychosocial support services, and how can these be addressed through programming?
- How do social norms surrounding gender and age impact married girls’ ability to seek emotional support from their families and friends?
- How can cash transfers programmes linked to increasing school enrolment/retention and delaying marriage be adapted and tested for girls and adolescents from refugee or displaced populations?
- What is the cost-effectiveness and the impact of using multiple modalities of care provision – like telehealth – on the uptake of healthy behaviours and outcomes among adolescents?

Recommended reading and tools

Johns Hopkins University, UNFPA, UNICEF, 2021, *A practitioner’s guide to the ethical conduct of research on child marriage in humanitarian settings*.

UNFPA, 2021, *Transcending norms: Gender-transformative approaches to women’s and girls’ safe spaces in humanitarian settings*.


HIAS and UNICEF, 2022, *Affective cartographies: Migrant, displaced and refugee girls and adolescent girls in Latin America and the Caribbean*.

UNFPA, 2022, *Fulfilling the protection needs of women and girls affected by conflict and drought in Oromia, Ethiopia*.


Girls Not Brides and the UNFPA-UNICEF Global Programme to End Child Marriage, 2023, *CRANK Research Spotlight: How to ensure efforts to address child marriage reach the most marginalised girls*.

Pincock, K., Verhoeven, D., Jones, N., and Isimbi, R., 2023, “*They say it was her fault... This is not true!* Using vignettes with adolescent girls to collectively address norms about sexual violence.”
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13. HIAS and UNICEF, 2022, *Affective cartographies: Migrant, displaced and refugee girls and adolescent girls in Latin America and the Caribbean*