



## Child marriage and HIV: an information sheet

While relatively little is known about the causal relationship between child marriage and HIV, the limited available research, anecdotal evidence and what we have learned from HIV programming for adolescent girls suggests that **child marriage can increase the risk of girls becoming infected with HIV**. Given that child brides are often isolated and have limited opportunities to learn about HIV prevention and treatment, the practice of child marriage can hinder efforts to control the HIV epidemic. Child marriage is therefore not only a violation of human rights, but is also a public health issue.<sup>1</sup>

### Child marriage and HIV: priority issues that must be addressed

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- Despite global gains in expanding access to HIV prevention and treatment, **AIDS is now the leading cause of death among adolescents (aged 10–19) in Africa** and the second most common cause of death among adolescents globally.<sup>2</sup>
- Child marriage is a global problem: **15 million girls a year are married before the age of 18**. If there is no reduction in the practice of child marriage, 1.2 billion women alive in 2050 will have married in childhood – the equivalent of the entire population of India.<sup>3</sup>
- **Adolescent girls and young women are disproportionately affected** when it comes to HIV infection rates:
  - In 2015, **more than 7500 young women aged 15–24 years acquired HIV every week**, the vast majority in southern Africa.<sup>4</sup>
  - Adolescent girls and young women aged 15–24 years accounted for **19% of new HIV infections globally in 2015** and **23% of new HIV infections in sub-Saharan Africa**.<sup>5</sup>
  - Of all new HIV infections among young people aged 10–24 years, approximately **two out of three are girls and young women**.<sup>6</sup>

### Child marriage and HIV: what do we know?

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The HIV infection rate **among married adolescent girls tends to be higher than among their unmarried, sexually active peers**.<sup>7</sup> There are a number of factors which make child brides particularly vulnerable:

- Child brides are at a relatively high risk of HIV infection due to their **young age and physical immaturity**,<sup>8</sup> their **limited power to negotiate safer sex**, the **frequency of unprotected sexual activity**, and the **pressure on them to demonstrate their fertility**.<sup>9</sup>

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<sup>1</sup> Nawal M. Nour, 2009. *Child Marriage: A Silent Health and Human Rights Issue*, Reviews in Obstetrics & Gynaecology, Vol. 2, No. 1, p. 51-56.

<sup>2</sup> World Health Organization, 2014. *Health for the world's adolescents: a second chance in the second decade*. Available from: [www.who.int/adolescent/seconddecade](http://www.who.int/adolescent/seconddecade)

<sup>3</sup> UNICEF, 2014. *Ending Child Marriage. Progress and prospects*.

<sup>4</sup> UNAIDS, *Get on the Fast-Track, The life-cycle approach to HIV, Finding solutions for everyone at every stage of life*, 2016

<sup>5</sup> UNAIDS, *Get on the Fast-Track, The life-cycle approach to HIV, Finding solutions for everyone at every stage of life*, 2016

<sup>6</sup> UNAIDS, 2016. Panel meeting on *Children, adolescent girls and young women: preventing new HIV infections*. Available from: [http://www.unaids.org/en/resources/presscentre/featurestories/2016/june/20160610\\_panel5](http://www.unaids.org/en/resources/presscentre/featurestories/2016/june/20160610_panel5)

<sup>7</sup> UNAIDS, 2015. *Focus on location and population*. Geneva: UNAIDS.

<sup>8</sup> G. Bolan, A. Ehrhardt & A. Wasserheit, 1999. Gender perspectives and STDs. In K. K. (eds), *Sexually Transmitted Diseases*, p. 117-127. New York: McGraw-Hill.

<sup>9</sup> UNAIDS, 2014. *The Gap Report* (based on UNAIDS 2013 estimates).

- Child brides are **more likely to experience gender-based violence, such as intimate partner violence and rape.**<sup>10</sup> Women exposed to intimate partner violence are one and a half times more likely to acquire HIV in regions with HIV prevalence.<sup>11</sup>
- The older husbands of child brides have often had previous sexual partners, which can **increase child brides' lifetime risk of HIV infection.**
- Girls are **more likely to be married or in a union than boys**, they often **drop out of school** before or at the time of marriage, and they are far less likely than boys to **have comprehensive knowledge of HIV and how to protect themselves.**<sup>12</sup>
- **Despite their significant need for sexual, reproductive, and maternal health services, child brides are often isolated, hard to reach, and unaware that such services are available.** This makes it harder for them to reach HIV prevention and treatment programmes.

## **Ending child marriage and making progress on tackling HIV: what more needs to be done?**

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Ending child marriage and tackling the HIV epidemic both require action across multiple sectors. For more information about solutions to ending child marriage see: <http://www.girlsnotbrides.org/how-can-we-end-child-marriage/>

The following three recommendations focus specifically on the importance of linking up efforts to end child marriage and tackling the HIV epidemic:

### **1. Increase research on the links between child marriage and HIV**

- While a few studies have shown alarming trends and links between child marriage and HIV prevalence, **there is still very little comprehensive research on the causal links** in different regions. It is therefore vital that **research is funded to expand and strengthen the evidence base** so as to design more effective HIV and sexual and reproductive health and rights programmes for adolescent girls.
- Research is also required to **better understand the diverse needs of girls** who are at risk of child marriage and married girls, to ensure targeted and relevant programming.
- Further **evaluation of programmes working to end child marriage** is needed, so as to understand what works and what does not work, to inform comprehensive HIV prevention and treatment programming.

### **2. Recognise and prioritise adolescent girls as a key population to target in HIV programming**

- Married and unmarried girls alike should be **recognised as a most-at-risk population**, just like injecting drug users, sex workers, men who have sex with men, prisoners, and mobile/migrant workers.
- Efforts to target adolescent girls with HIV programmes must also **involve families and communities**. For example, men and boys need to be **engaged and empowered as positive agents of change** in addressing harmful gender and societal norms and promoting gender equality.

### **3. Link HIV programming with multi-sectoral national initiatives to end child marriage and empower girls**

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<sup>10</sup> I.S. Speizer & E. Pearson, 2011. *Association between early marriage and intimate partner violence in India: A focus on youth from Bihar and Rajasthan*. Journal of Interpersonal Violence. Vol. 26, No. 10. Available from: <http://www.girlsnotbrides.org/reports-and-publications/association-early-marriage-intimate-partner-violence-india-focus-youth-bihar-rajasthan/>

<sup>11</sup> WHO, 2013. *Global and regional estimates of violence against women: prevalence and health effects of intimate partner violence and non-partner sexual violence*. Department of Reproductive Health and Research, London School of Hygiene and Tropical Medicine, South African Medical Research Council, p.2.

<sup>12</sup> UNICEF, 2015. *State of the World's Children 2015: Reimagine the Future – Innovation for Every Child*. Digital report is available at [www.data.unicef.org](http://www.data.unicef.org).

- A number of countries are developing **national strategies, plans of action, and campaigns to tackle child marriage** across multiple sectors including health, education, employment and justice.<sup>13</sup> Other countries are exploring ways **to integrate child marriage interventions** into existing government policies and programmes across sectors.<sup>14</sup>
- It is vital that **comprehensive HIV programmes are linked to these multi-sectoral initiatives** to end child marriage, particularly those focused on **sexual and reproductive health interventions for adolescent girls** and their sexual partners.
- The HIV response has required **commitment and engagement** across governments, UN agencies, and international organisations. The **leadership, solidarity and activism of civil society, including the women’s rights movement, and networks of women living with HIV, has been critical**. Similarly, civil society must continue to play a leading role in the movement to end child marriage and to fast-track the end of the HIV epidemic by 2030.

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### **About *Girls Not Brides: The Global Partnership to End Child Marriage***

*Girls Not Brides* is a global partnership of more than 700 civil society organisations from over 85 countries united by a commitment to work in partnership to end child marriage and enable girls to fulfil their potential. In consultation with more than 150 members, partners and experts, *Girls Not Brides* created a common [Theory of Change](#), which outlines the range of approaches needed to end child marriage.

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<sup>13</sup> For more information see *Girls Not Brides* “A Checklist for National Strategies to End Child Marriage”. Available from: <http://www.girlsnotbrides.org/resource-centre/check-list-national-strategies/>

<sup>14</sup> For more information see ICRW and *Girls Not Brides*’ series briefs on “Taking action to address child marriage: the role of different sectors”. Available from: <http://www.girlsnotbrides.org/resource-centre/child-marriage-brief-role-of-sectors/>