Child marriages in focus

Millions of girls around the globe get married before they reach the age of puberty, entering into a vicious circle of abuse, exploitation and increased risk from early pregnancy and childbirth. What is worse, they usually stop going to school after marriage and are deprived of the right to making decisions affecting their lives.

UNICEF estimates based on Multiple Indicator Cluster Survey, Demography and Health Survey and other national surveys show that in developing countries, more than 60 million women aged 20-24 were married before the age of 18 and over thirty-one million of them live in South Asia.

Child marriages were quite common in Azerbaijan before the Soviet rule in 1920, but disappeared for almost 70 years. With Azerbaijan’s independence in 1991, this social phenomenon came back on a wave of different factors such as economic hardships and traditional attitude. In recent years, experts and human rights activists have raised alarm about the increasing prevalence of child marriages in Azerbaijan.

The Azerbaijani State Committee on Family, Woman and Children Affairs and UNICEF Azerbaijan in cooperation with the International Centre for Social Studies conducted a study on child marriages in Azerbaijan and discussed its results with government entities, international organizations and civil society in a roundtable in Baku on 8 May 2009.

Opening the roundtable, the chairperson of the State Committee on Family, Woman and Children Affairs, Hijran Huseynova, and UNICEF Azerbaijan Acting Representative Mohamed Bendriss Alami spoke about the importance of the study and the negative consequences of child marriages on overall development trends in the country.

The UN Convention on the Rights of the Child (CRC), which was adopted in 1989 and ratified by 193 countries, including Azerbaijan, says that anyone below the age of 18 is a child. Thus, any marriage of children or adolescents under 18 is considered to be a child marriage.

The Azerbaijani law defines the age of marriage for boys at 18 and for girls at 17. In special circumstances, this age can be lowered to 17 and 16 respectively, something that creates a contradiction with the CRC. To make it worse, the decision to lower the age of marriage is taken not by courts, as in many other countries, but by local executive authorities.

It is difficult to trace child marriages because they are not officially registered.

The study covered four regions of Azerbaijan, Baku-Absheron, Lenkaran, Guba and Agstafa, interviewing 488 people. The regions were chosen on the basis of their diverse socio-ethnic groups, different degree of economic prosperity, traditionalism and religiosity of their inhabitants. It provides interesting findings in terms of the scope and reasons for child marriages. It found the highest prevalence of child marriages in Lankaran and Baku-Absheron regions, noting high acceptance of such marriages by families and local communities.

There are two key reasons for child marriages: cultural-psychological such as traditional attitudes, mismatched religious norms and perception of marriage and childbearing as the main accomplishment in women’s lives and socioeconomic such as poverty. Decisions on marriage are often taken by the parents or relatives of girls. The harmful consequences include separation from family and friends, lack of freedom to interact with peers and participate in community activities, and decreased opportunities for education. Child marriage can also result in bonded labour or enslavement, commercial sexual exploitation and violence against the victims. Because they cannot abstain from sex or insist on condom use, child brides are often exposed to such serious health risks as premature pregnancy, sexually transmitted infections and, increasingly, HIV/AIDS.

The recommendations from the roundtable were about amending the law, for example, rising the minimum age of marriage to 18 both for girls and boys, increasing efforts to fight child marriages, raising awareness about their negative consequences and drafting special programmes to ensure girls’ and women’s empowerment.
Combating IDD: Government, civil society join hands

All humans need iodine in their diet for proper intellectual and physical development. Iodine is especially important for children at early ages. Recent studies show that lack of iodine can bring about such serious health disorders as mental retardation and goiter and reduce IQ by as much as 15%.

The effective way to prevent iodine deficiency disorders (IDD) is to add iodine to salt, which costs just a few cents per person per year – a small price to pay compared to the lost potential of the nation. Universal salt iodization is central to achieving full elimination of IDD.

The level of consumption of iodized salt by households in Azerbaijan in the early 1990s was very low with poor quality and coverage of salt iodization. That is when UNICEF came in to help the government address IDD in 1996 and a working group was set up within the Health Ministry in 1999 to deal with the problem. UNICEF carried out successful advocacy and communication campaigns to promote USI and IDD elimination, providing test kits and other equipment to salt producers. As a result, the Azerbaijani parliament passed the law on universal salt iodization in 2001 and the situation with consumption of iodized salt has changed.

According to the Azerbaijani Demographic and Health Survey (DHS) conducted in 2006, a significant proportion of households in Azerbaijan – 94.6% use iodized salt as compared to only 41.3% in 2000. However, the DHS found that only 53.8% of households in Azerbaijan use adequately iodized salt, a figure that is much lower than recommended by the World Health Organization (WHO), the United Nations Children Fund (UNICEF) and the International Council for the Control of Iodine Deficiency Disorders (ICCIDD).

Another major study, the national biomonitoring of IDD (2007) found that 65% of Azerbaijan households use adequately iodized salt, while the overall number of households using iodized salt was 85.8%.

With so much progress and a step away from Azerbaijan’s certification as an IDD free country, UNICEF, the Azerbaijani government, local and international NGOs gathered for an IDD roundtable on 16 April 2009 to discuss the problem.

The roundtable was crucial in exchanging views and collecting feedback on the best way to proceed with USI and IDD elimination. The government, the parliament, international organizations and civil society are supposed to prepare proposals on improving the IDD and USI situation. Then, the Ministry of Health and UNICEF will refine those proposals and submit them to the Cabinet of Ministers for further action.

“We will continue supporting the Azerbaijani government in eliminating IDD and achieving USI in every way we can”, UNICEF acting representative in Azerbaijan, Mohamed Bendris Ali said at the roundtable.

1999 – an intersectoral committee and a working group were set up on the order of the Ministry of Health under the leadership of the Deputy Minister of Health.

1999 – the law on Universal Salt Iodization was drafted.

1999 – iodized salt production started and three pilot salt producers were provided with the necessary iodization equipment and potassium iodate with the support of UNICEF.

2000-2009 - a broad awareness-raising campaign started throughout the country and is under way now.

2001 - the law “On salt iodization” was adopted to ensure IDD prevention.

2003 – the clause of the law that prohibits production, sale and import of non-iodized salt became effective.

2003 – the standards for iodized salt were developed and adopted.

2004 – external assessment of the IDD/USI programme was carried out.

2005-2008 – measures were implemented to enhance monitoring and control over the quality of iodized salt

UNICEF Acting Representative in Azerbaijan Mohamed Bendris Ali (left), Azerbaijani MP Hadi Rajabli (middle) and Ministry of Health official Viktor Qasimov (right) at the IDD roundtable.
Study shows poor child development, nutrition cost millions

What happens – or doesn’t happen – to children in the earliest years of their lives is of critical importance, both to their immediate well-being and to their future.

If children received the best start in the earliest years of life, they are more likely to have grown healthily, developed language and learning capacities, gone to school and led a productive, rewarding life. Yet millions of children around the world are still being denied the right to reach their full potential.

Extensive evidence demonstrates that lack of optimal nutrition and learning experiences for young children, particularly in the earliest years of life, have short term consequences for intellectual growth and school performance, as well as long term consequences for future earnings and productivity.

A recent UNICEF study highlighting damage from lack of nutrition and development in the early years of childhood in Azerbaijan has produced compelling data and evidence on the national burden the country has to shoulder for failing to invest in children.

The Economic Consequences of Child Growth and Cognitive Developmental Deficits in Azerbaijan provides data to project national economic deficits connected with 10 indicators, including maternal and childhood anemia, chronic malnutrition, insufficient breastfeeding, sub-optimal parenting and lack of preschool attendance. The resulting Damage Assessment Report (DAR) estimates the magnitude of preventable mortality, lost work potential, depressed productivity and excess health care costs in Azerbaijan.

According to the study, suboptimal child nutrition and development on the basis of the 10 nutrition and development indicators depresses national economic activity by AZN 435.6 million annually. This summary figure includes lost future work potential in today’s children, current depressed work performance in adults and excess preventable health care expenditures. The DAR also estimates that more than one quarter of mortality in children less than 5 years of age is associated with four indicators: maternal anemia, child nutrition status, maternal feeding and caring behaviours.

The DAR offers a series of evidence-based and systematic interventions to reduce this 435.6 million economic burden to Azerbaijan’s developing economy. These interventions include better nutrition and child care education for children 6-36 months, improved breastfeeding behaviours to move up from the current exclusive breastfeeding rate of 12% for infants under six months, iron folic acid supplementation for women to reduce anaemia-related birth deficits, flour fortification with iron and folic acid, improved parenting practices for children 0-6 years old to prepare them for school and investments to increase the pre-school enrolment of 3 to 6 year old children from 22% to 80%.

The DAR results suggest that strategically focusing interventions on child health and development during an 80 month “window of opportunity” - stretching from pregnancy to 6 years of age - may yield high returns from reduced child mortality, improved child health, physical growth and mental development, and consequent improved school performance and gains in future national productivity. Therefore, two phased and coordinated programs are proposed – the Program for Children’s Integrated Nutrition & Development incorporating primarily supplementation and education strategies with focus on the lifetime period from pregnancy through age 3 and Azerbaijan Pre-school and Parenting Education (APPE) Programme offering an integrated preschool-parent education intervention to cost-effectively raise coverage of preschool to children 4-5 years of age to 80%.

The full implementation of the proposed CIND, APPE and flour fortification programs is projected to reduce the national economic burden of malnutrition and suboptimal child development by about one half after reaching the proposed program scale. The cost-benefit ratio for investments in these early years is high enough to compete with any attractive economic project ranging from 2 AZN for each 1 AZN invested for early childhood education to 21 AZN for each 1 AZN invested in nutrition.

### Summary Damage Assessment Report (DAR)

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Imagine a school operating in the best interests of the child with a safe, healthy and protective education environment, endowed with trained teachers, adequate resources and appropriate physical, emotional and social conditions for learning. It is where children’s rights are protected and their voices are heard. Now, it is more than imagination – this is the Child Friendly School that UNICEF is promoting all over the globe as a “package solution” and a holistic instrument for pulling together a comprehensive range of quality interventions in education.

The CFS model promotes inclusiveness, gender-sensitivity, tolerance, dignity and personal empowerment, which perfectly suits UNICEF’s commitment to provide safe, rights-based and quality education for every child. In order to promote the CFS, UNICEF organized the Global Capacity Development Program on Child-Friendly Schools in Geneva, Switzerland on 27-30 April 2009 with delegations from most CEE/CIS countries attending. Several senior officials from the Azerbaijani Ministry of Education also participated in the training together with UNICEF Development Officer, making a presentation on the CFS in Azerbaijan.

The introduction of Child Friendly School (CFS) in Azerbaijan started as an expansion of the Active Learning project, which represents one of the five elements of the CFS framework (the Effective School) in 2005. The Active Learning project has been implemented in Azerbaijan by UNICEF since 2000. The expansion began with the “Community Participation” element of the CFS framework establishing and supporting Parent-Teachers Associations (PTAs) at the school, district and national levels. The project started in 15 pilot schools.

Efforts are gearing up to roll out the CFS model to all the existing schools in Azerbaijan and this year is going to be crucial as the CFS project will be evaluated and CFS quality standards will be prepared. Then, the draft policy on the CFS roll-out will be submitted to the government in 2009 to access financial resources. To support the high-level policy interventions awareness raising and learning workshops on CFS will be organized for all stakeholders.

In the meantime, the School Quality Standards have been developed based on main CFS principles, covering effective management of the school, professional capacity of teachers, organization and management of teaching process, development and participation of children and active involvement of families and communities in school activities. It is hoped that the CFS will bring Azerbaijani schools the dynamism and openness, which will help children get the skills they need.