Mapping Social Protection Intervention Pathways to Address Barriers to Girls’ Education

A Visual Guide
Acknowledgements.

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A Visual Guide
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Introduction

In the 30 years since girls’ education was first raised as an international policy priority through the launching of the Education for All movement in 1990, tremendous progress has been made in getting girls into school. UNESCO (2020) reports that since 1995, an additional 180 million girls have been enrolled in school and that, on a global basis, gender parity in primary and secondary education has been reached. Indeed, in many developing countries, of children who enrol in school, girls are now more likely to complete primary school and transition into secondary school than boys. That said, this aggregate picture hides not only regional, national and sub-national diversity (including disparities across income groups), but girls’ continuing disadvantage – which has almost certainly been amplified by covid-19. Of the children who are completely denied their right to an education, three-quarters are girls. The 129 million girls who are denied access to school are disproportionately located in the world’s poorest and most conflict-affected countries. Furthermore, improvements in enrolment have not always been accompanied by improvements in gender parity. While gender gaps are closing in many countries (e.g. Nepal) – they are static (e.g. Ethiopia), or even growing in others (e.g. Burkina Faso) – as boys’ enrolment is climbing faster than girls’. In addition to participation barriers, girls also face barriers to learning. Psaki et al. (2021) observe that while the learning crisis impacts girls and boys, in many LMICs girls’ learning levels tend to be lower than boys’, most often because girls are afforded less time to study due to care and domestic work burdens.

Driving recent progress in girls’ education has been a multitude of actors and initiatives, working in tandem to identify – and overcome – the barriers that stand between girls and learning. An array of barrier mappings, most of which focus on a similar set of factors (e.g. poverty, child marriage, conflict) but none of which appear to have been undertaken with the specific goal of identifying social protection intervention pathways, are available online. There is also an ever-growing body of evidence that addresses what works to support girls’ education and learning. That evidence overwhelmingly concurs that social protection is a broad array of policies and programmes aimed at reducing poverty and vulnerability across the life course. It includes not only ‘pro-poor’ instruments such as cash and asset transfers (aimed at supporting household consumption more broadly as well as at supporting access to education and other outcomes), public works programmes, school feeding, and subsidies and fee waivers for accessing services— but also various instruments aimed at supporting life-course transitions, such as maternity, paternity, and parental leave, childcare and early childhood education, schemes aimed at helping young people transition into work, and old-age pensions. Although enshrined as a right in the United Nations Convention on the Rights of the Child (1989), social protection has sometimes been misconceptualised only as a ‘safety net’ of last resort, aimed only at protecting individuals and households from extreme deprivation. However, as was recognised by UNICEF in its 2012 Social Protection Strategic Framework, there is increasing consensus that well designed and comprehensive social protection programming can go beyond protection and promote resilience, support human capital development and empowerment, and even transform the structural inequalities that are the root causes of poverty and social exclusion. To move towards those more transformative ends, core poverty-targeted programming is increasingly coupled with ‘plus’ programming that is aimed at addressing socio-cultural – including gender – barriers. Examples include life-skills education for children and adolescents, sexual and reproductive health education, ‘empowerment’ classes for girls and women that seek to raise awareness of rights and gender norms and support the development of agency, and courses addressing masculinities for boys and men so that they can become champions of gender equality.

Box 1: Social protection

Social protection consists of a broad array of policies and programmes aimed at reducing poverty and vulnerability across the life course. It includes not only ‘pro-poor’ instruments such as cash and asset transfers (aimed at supporting household consumption more broadly as well as at supporting access to education and other outcomes), public works programmes, school feeding, and subsidies and fee waivers for accessing services— but also various instruments aimed at supporting life-course transitions, such as maternity, paternity, and parental leave, childcare and early childhood education, schemes aimed at helping young people transition into work, and old-age pensions. Although enshrined as a right in the United Nations Convention on the Rights of the Child (1989), social protection has sometimes been misconceptualised only as a ‘safety net’ of last resort, aimed only at protecting individuals and households from extreme deprivation. However, as was recognised by UNICEF in its 2012 Social Protection Strategic Framework, there is increasing consensus that well designed and comprehensive social protection programming can go beyond protection and promote resilience, support human capital development and empowerment, and even transform the structural inequalities that are the root causes of poverty and social exclusion. To move towards those more transformative ends, core poverty-targeted programming is increasingly coupled with ‘plus’ programming that is aimed at addressing socio-cultural – including gender – barriers. Examples include life-skills education for children and adolescents, sexual and reproductive health education, ‘empowerment’ classes for girls and women that seek to raise awareness of rights and gender norms and support the development of agency, and courses addressing masculinities for boys and men so that they can become champions of gender equality.

a. Devereux and Sabates-Wheeler, 2004
b. UNICEF, 2019
c. UNICEF, 2012
d. UNICEF, Innocenti, 2020; Devereux and Sabates-Wheeler, 2004; Molyneux et al., 2016; Holmes and Jones, 2013
e. Clover et al., 2014; Chakrabarti et al., 2020; UNICEF, 2021; Promundo, 2021; Powell-Williams, 2020; UNICEF, 2019
a valuable tool. It supports girls’ participation (enrolment, attendance, and progression) in basic and secondary education in low- and middle-income country (LMIC) contexts around the globe and often also supports their learning. With the caveat that most research has focused on cash transfers (conditional and unconditional and including subsidies for school fees) and school feeding, rather than other forms of social protection, which shapes the evidence base, the primary impact pathway identified by evaluations is reduced household poverty, which results in an improved ability to invest in education. A smaller body of evidence, however, has pinpointed myriad other ways in which social protection can support girls’ education. These include freeing girls’ time for learning (by providing health insurance that keeps mothers healthy), delaying their sexual debut (and preventing the pregnancies that drive drop out) and shifting social norms about girls’ mobility (e.g. by providing them with bicycles).

Critically, research repeatedly underscores that to address the myriad and intersecting economic and social barriers that stand between girls and learning it is necessary to take a multi-sectoral approach.

Recognising the potential for enhancing education outcomes with stronger and more systematic links between social protection and education systems, in this guide we present a thought exercise that builds on existing research with the aim of examining barriers to girls’ education (enrolment, attendance and progression) and learning so as to identify potential intervention pathways for social protection and education linkages across the course of childhood and adolescence. The guide includes a set of maps that seek to visually represent, in an accessible way, different types of barriers and how social protection could contribute to tackling these.

We have delineated two interwoven educational outcomes:

1) Participation in education, which encompasses enrolment, attendance and progression
2) Learning.

This relationship is bidirectional. Girls must participate in school to learn and girls who are not learning often have their participation in education truncated.

We have delineated 12 barriers to girls’ participation in education:

At the macro level (national/sub-national):

1) Laws, policies, systems and finance that disadvantage girls, especially those from marginalised groups (including girls with disabilities or girls who are refugees, or from ethnic or religious groups that face discrimination, or are pregnant or mothers).

Spanning the macro and meso levels:

2) National and local labour market realities—such as few, highly segregated, and inequitably paid job options— that limit girls’ ability to translate education into employment and economic empowerment (and thus reduce demand for girls’ education).

At the meso level (community and school):

3) Barriers that limit girls’ physical access to schooling, including inadequate educational infrastructure (especially in remote areas and for those with disabilities) and transportation as well as violence in the community.
4) Gender norms at the community level, including those that limit support for girls’ education, stigmatisate menstruation, lead to child marriage, and more broadly prioritise girls’ reproductive potential over their productive potential and broader human rights (including social and economic sanctions for girls and families who transgress).
5) Peer pressure, which while shaped by broader community norms can evolve quickly and in surprising ways.
6) Discriminatory beliefs and behaviours that leave girls with disabilities or those from marginalised groups excluded from school.
7) Poor school environments, where infrastructure (including for menstrual hygiene management) and human resources are inadequate and teacher and peer violence are common.

At the micro level (household and girl):

8) Poverty and financial barriers, which include real and opportunity costs that can limit girls’ enrolment, attendance, and progression as girls are truant for days, weeks and months.
9) Physical health barriers, including malnutrition, illness and disability (much
of which in LMICs is the result of poor nutrition and inadequate healthcare).

10) Mental ill health, which often manifests as a spill-over effect of household and community violence (and limits girls’ interest in and engagement with education).

11) Barriers linked to reproductive biology (and the limited services and supports that help girls deal with these), including menstruation, pregnancy and motherhood.

12) Limited aspirations for education on the part of caregivers, girls and marital families, which are shaped by poverty and limited opportunities – including for quality education, gainful employment and adult marriage – available in the community.

We have identified 10 barriers to girls’ learning—which overlap with barriers to participation, may prevent boys from learning as well, but are also often gendered:

At the school level:
1) Low number of contact/instructional hours, resulting from the school calendar, daily school schedule and teacher absenteeism.

2) Poor-quality ‘soft’ resources, including teachers who are poorly trained or violent; pedagogies, curricula, and learning materials that are not child-friendly, sensitive to multicultural contexts, gender-responsive or disability-inclusive; and disciplinary practices that condone violence.

3) Inadequate school infrastructure and equipment, including school buildings that are poorly adapted, insufficient books and desks, and lack of school water, sanitation and hygiene (WASH) facilities (including menstrual hygiene facilities).

4) Violence and discrimination at school, perpetrated by both teachers and peers and including gender-based violence as well as discrimination and stigma directed at those with disabilities and those from marginalised groups.

At the household and girl level:
5) Limited capacity and/or school readiness (e.g. cognition damaged by malnutrition or malaria and inadequate stimulation in early childhood).

6) Irregular/distracted attendance (i.e. the barriers to participation above).

7) Physical illness, malnutrition or hunger—which even when not severe enough to keep girls at home can prevent them from learning.

8) Poor mental health, which can limit attention and retention.

9) Limited (natal and marital) family support for education (both in terms of provision of learning materials and light to study, and attitudes towards education).

10) Limited personal aspirations for education, shaped by other barriers at the household and community level.

For this visual guide, we have created eight maps aimed at supporting both ‘wide angle’ and ‘micro’ perspectives:

These maps aim to delineate areas where existing evidence suggests that social protection does play an impactful role in supporting girls’ access to education and learning as well as areas where social protection might be leveraged for impact.

‘Wide angle’ maps (which focus on girls’ participation and learning):
- A bird’s eye view of the above barriers to participation and learning that includes sub-barriers (but not social protection intervention pathways). This is Map 1 in the guide.
- A pair of maps that detail barriers to girls’ learning (and social protection intervention pathways), because learning first requires participation. This is Map 8 in the guide and has been laid out on two pages to improve readability.

Micro maps (which focus on girls’ participation in education):
- Poverty and financial barriers – including sub-barriers as well as social protection intervention pathways. This is Map 2 in the guide.
- Barriers that limit girls’ physical access to schooling– including sub-barriers as well as social protection intervention pathways. This is Map 3 in the guide.
- Physical and mental health barriers – including sub-barriers as well as social protection intervention pathways. This is Map 4 in the guide.
• Community gender norms and peer pressure – including sub-barriers as well as social protection intervention pathways. This is Map 5 in the guide.
• Barriers linked to girls’ reproductive biology and the limited resources that girls have to deal with these --including sub-barriers as well as social protection intervention pathways. This is Map 6 in the guide.
• Aspirations for education – including sub-barriers as well as social protection intervention pathways. This is Map 7 in the guide, because it is important to first understand the factors and barriers that shape and limit aspirations.

Note that while these micro maps capture barriers that are in real life deeply interwoven, we have attempted to avoid as much interweaving as possible, in order to better focus the readers’ attention on each map’s core framing.

We have taken account of three ‘age brackets’1 in conceptualising these barriers:

1) Barriers that potentially impact girls’ enrolment and attendance from the earliest days of formal education, which may or may not (depending on context) include pre-primary school (e.g. disability or school accessibility). In the maps, these are marked with a blue dot.

2) Barriers that tend to become more important as girls grow up and move through primary school (e.g. school quality and poverty). In the maps, these are marked with a red dot.

3) Barriers that become more important as girls experience the physical and social transitions related to adolescence (e.g. menstruation, concerns about girls’ ‘honour’, child marriage and laws that exclude pregnant girls from education). While contexts and girls’ own development vary, this typically coincides with the transition from primary to secondary education. In the maps, these are marked with an orange dot.

Many barriers are important to girls’ initial engagement with formal education (and drive their lower enrolment rates) but become ever more important the older girls get (and drive their higher drop-out rates). For example, the cost of education keeps some girls from ever enrolling but is more likely to lead girls to drop out over time, as the real and opportunity costs of education grow.15 Costs can be especially high for adolescent girls, given that secondary schools in many countries are fee based or require expensive transport/boarding (because schools are not local). These barriers have three dots: blue, red and orange.

Note that dots are applied differently across maps. Some barriers have sub-barriers that share age-brackets. For example, barriers that limit girls’ physical access to school (educational infrastructure, transportation, and community violence) are all important from the earliest days of enrolment, tend to become more important over time, and are particularly important in adolescence. Because the age brackets are the same across sub-barriers, the dots are placed on the main barrier rather than on the sub-barriers. Other barriers have sub-barriers that have different age brackets. For example, poverty and financial barriers include both the real cost of education (which is important from the earliest days of enrolment) and opportunity costs due to forgone child marriage (which does not typically become important until adolescence). Because of these age bracket differences, the dots are placed not on the main barrier, but on sub-barriers.

We have considered three intervention pathways:

1) Core social protection mechanisms such as cash transfers, public works programmes, educational stipends, social health insurance/subsidies for healthcare, free/subsidised childcare, nutrition support, and maternity/paternity/parental leave. Case management for girls with complex needs (e.g. in humanitarian contexts or those with disabilities) is also included here.

2) ‘Plus’ programming that is (or could be) linked to core mechanisms16 aimed at addressing a range of knowledge, attitudes and behaviours – e.g. parents’ (or caregivers’)17 parenting practices, adolescents’ life skills and SRH

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1 ‘Age brackets’ are necessarily broad and variable because of the way school systems are organised (with formal education beginning at age four in some countries and age seven in others), because children progress through grades at different paces (with over-age enrolment common in many countries due to grade repetition), and because children experience puberty at different ages

2 We have used parents rather than parents/caregivers on maps to save space.
knowledge, community social cohesion, and beliefs about gender equality and disability. ‘Plus’ programming can be either included as part of a broader social protection package or implemented independently with linkages then made to complementary services.

3) Policy advocacy and supply-side investments aimed at improving the national, regional and local environments in which girls live and learn. As these are varied and vast, and do not fall under the rubric of social protection, we provide illustrative examples only.

We have also included a short, recommended reading list on the barriers that limit girls’ access to education and learning and how social protection might help.
Map 1: Bird’s eye view of barriers to girls’ participation in education and learning

This map sets the scene and captures the 12 main barriers to girls’ participation in education – spanning the micro, meso and macro levels – and also the two-way relationship between girls’ participation in education and learning.

**Micro-level barriers** are those that operate at the girl and household level. These include poverty and financial barriers, physical health barriers (including the disabilities that in LMICs are often related to poverty and are preventable), mental ill health (including that caused by household and community violence and amplified by social exclusion), barriers linked to reproductive biology (and the limited resources that girls have to deal with these), and limited aspirations for education (which are shaped by a complex interplay between household and community factors).

**Meso-level barriers** are those that operate at the community and school level. These include barriers that prevent girls from physically accessing schooling, poor school environments (e.g. schools that are disproportionately staffed by men or lack menstrual health management facilities), discriminatory beliefs and behaviours (especially towards those with disabilities or from marginalised groups), peer pressure and community-level gender norms (that devalue girls’ need for education).

**Macro-level barriers** are those that operate at the sub-national and national levels. These include laws, policies and systems, some of which deliberately exclude some girls (e.g. those that prohibit pregnant girls from attending school or limit enrolment to those with citizenship) and others of which fail to be inclusive (e.g. curricula that are not gender-responsive or data management tools that do not disaggregate by sex), as well as the (gender-responsive) financing required for implementation. They also include labour market realities that limit girls’ access to employment and economic independence, such as occupational segregation born of a need for flexible work hours (to accommodate domestic responsibilities including child care), unequal pay for equal work, and females’ poorer access to credit and extension services.

Where main barriers lend themselves to disparate social protection intervention pathways, they are broken down into sub-barriers that will be explored in detail on micro-level maps. For example, ‘barriers that limit girls’ physical access to schooling’ is broken into three sub-barriers (educational infrastructure, transportation and violence en route to and from school), two of which are further disaggregated (educational infrastructure into insufficient schools and inaccessible facilities, and transportation into insufficient infrastructure and limited access to affordable and accessible transport).
Map 2: Poverty and financial barriers to girls’ participation in education

This map, which is broken down into two main barriers and five sub-barriers, lays out myriad intervention pathways for social protection, most of which are for 'core' social protection mechanisms such as cash and assets transfers, public works programmes, health insurance and parental leave. Although these interventions are generally not targeted to girls specifically, they are sometimes found to be particularly effective at improving girls’ access to education, because girls’ education can be more sensitive to costs than boys.17

In terms of real costs, it is important to distinguish between the costs of education itself (e.g. fees, uniforms, school supplies) and the costs that are required to support education (e.g. transportation, period products, boarding). In many LMICs, preschool and kindergarten are not provided by the government and are consequently expensive, which means that girls from the poorest families are disproportionately likely to be shut-out and to arrive in first grade without the school readiness skills that support learning.18 In addition, although primary school is ostensibly free in most contexts, it may entail significant hidden costs (e.g. school maintenance fees).19 Eliminating the costs associated with schooling itself may be insufficient. Girls may require support for items/services that enable participation in school but are not education-specific--such as shoes, sanitary pads or bus fare.20

It is important to note that the real costs of education usually increase as children get older, which is the primary reason that evaluations tend to find larger programme impacts on adolescents versus younger children.21 Some costs are associated with grade level. Although primary education is free in most LMICs, secondary (let alone post-secondary) education is not and even when it does not entail tuition it may still require expensive transport or boarding (as schools are clustered in more urban areas) or necessitate exam fees. In some LMICs, quality deficits resulting from poor-quality schooling also require families to invest in tutorial support if their children are to succeed in exams.22 Some costs are associated not with grade level, but with age. Adolescents are especially sensitive to fitting in with their peers and may require not only toiletries and new (rather than second-hand) uniforms but the ‘right’ sports shoes.23

Opportunity costs for girls, which also tend to grow as girls get older and are larger in conflict-affected contexts and when parents (or caregivers) have a disability or are ill,24 can be disaggregated into three categories. The first opportunity cost is lost income, because pursuing education takes time that could be spent on paid work. This is relatively rare, especially prior to middle-adolescence, because boys and not girls are generally tasked with paid work due to social norms that position them as breadwinners.25 (The major exception is girls’ paid work as domestic workers which becomes markedly more common in early adolescence.) The second opportunity cost is lost time, because girls who are attending school and doing homework have more limited availability to fetch water and fuel, herd livestock or care for younger siblings. Research suggests that across LMIC contexts this is the primary perceived opportunity cost of girls’ education and impacts their enrolment, attendance, and progression as girls miss hours of school (e.g. when they are late collecting water), days of school (e.g. when they are caring for ill family members), and weeks of school (e.g. when they are assisting with farming tasks).26 This cost is likely to be higher for girls from marginalised groups, who are disproportionately likely to be poor and to have more limited access to services-- and speaks to the continued need for programming specifically aimed at marginalised girls.27 Finally, where households use child marriage as a negative coping strategy, to reduce daily expenses or optimise bride wealth, forgoing child marriage may result in financial costs to households and to girls themselves.28

Some poverty-related sub-barriers have specific social protection intervention pathways. For example, supporting schools to offer grants to students reduces the real costs of education.29 Alternatively, measures such as providing households with bed nets to prevent malaria or improving access to early childhood education can reduce demands on girls’ time for care work.30 Other intervention pathways work to mitigate both real and opportunity costs. For example, health insurance helps households cover the real costs of
educating daughters, by protecting adults’ health and earning capacity as well as by reducing out-of-pocket health expenses.\textsuperscript{31} It can also address opportunity costs – by keeping family members from needing the care that girls quite often provide.\textsuperscript{32}

Case management should be used to ensure that girls with the most complex cases, including those with disabilities and in humanitarian contexts, are linked with the broader services and support they need in order to pursue education.\textsuperscript{33}

Social protection significantly reduces the real and opportunity costs of girls’ participation in education. To further enhance these impacts (and sustain them over time) it is important to simultaneously invest in enhanced supply-side linkages to community infrastructure and services. Investments might include education, health, early childhood care and education (ECCE), WASH, and power – each of which are critical to girls’ ability to participate in education. Expanded social protection should also be paired with policy advocacy at sub-national and national levels aimed at ensuring that education is affordable for all (including refugees and those without citizenship, who are often required to pay fees even when citizens are not). This should include improved access to quality ECCE, stepped up and gender-responsive educational finance that eliminates fees (including for tuition, books, exams and transport) through the end of secondary school, and need-based scholarships to encourage continuity through to tertiary education.
POVERTY AND FINANCIAL BARRIERS TO GIRLS’ PARTICIPATION IN EDUCATION

INTERVENTION PATHWAYS FOR SOCIAL PROTECTION:
- Represents core social protection programming
- Represents ‘plus’ programming

Real costs

- Cost of education — e.g. fees, uniforms, books
- Costs to support education — e.g. boarding, period products, shoes, transportation
- Lost income — forgone paid work (including part-time paid work)

Opportunity costs

- Lost time — forgone domestic, care or agricultural labour
- Lost opportunities for child marriage — and resultant financial costs to girls and natal families

Interventions:

- School grants (to allow schools to target students rather than households)
- Cash or cash substitutes (e.g. uniforms, bikes, transport vouchers, period products, assistive devices) specifically aimed at offsetting the costs of education — targeted to households or children and accounting for those with higher costs
- School feeding or take-home rations to free HH income for other expenses
- ‘Plus’ programming that supports mothers/women’s economic empowerment to open financial space for investing in daughters’ education
- ‘Plus’ programming that supports adolescents to generate their own income/ save money for their own educational costs
- Income support to households (e.g. cash, assets or work), tailored to reflect local real costs as well as age-driven opportunity costs and accounting for those with higher costs
- Health insurance/fee waivers to protect adults’ work capacity and reduce HH expenses on health care
- Consider using public works to build educational and transport infrastructure
- ‘Plus’ programming that supports HH financial literacy and savings
- ‘Plus’ programming aimed at improving awareness of the importance of education — and girls’ education in particular — vis-à-vis other household expenditures
- Case management for complex needs — e.g. in humanitarian contexts, disability, OVCs
- Bikes or transport vouchers to reduce time spent in transit to school
- Child care subsidies/ improved access to early childhood education for younger siblings
- Support aimed at reducing HH needs for care due to ill health (e.g. health insurance, fee waivers, WASH, bed nets)
- Consider using public works to build health, WASH and ECCE infrastructure
- Use public works to provide child care services/ ECCE
- Ensure that parents have access to maternity/ paternity/ parental leave to care for newborn and ill children
- Cash or assets for delaying marriage until age 18 (to HHs or girls)
- ‘Plus’ programming aimed at communities, parents, and girls and boys addressing gender norms more broadly and child marriage specifically, to help actors understand the shorter- and longer-term costs of child marriage and how they are disproportionately born by girls and their children

Social protection programming should be supported by:

Supply side investments in educational (including ECCE), health, transport, WASH, and power infrastructure and services.

Policy advocacy aimed broadly at reducing the cost of education for all (including refugees and those without citizenship) — including expanding the availability and quality of ECCE, eliminating tuition and fees through secondary school, and providing need-based scholarships for tertiary education. Stepped up financing should be evaluated in terms of its gender-responsiveness.
Map 3: Barriers that limit girls’ physical access to schooling

Barriers that limit girls’ physical access to education can be pulled apart into three sub-barriers: those relating to educational infrastructure, those related to transport, and those related to community violence en route to (and from) school. The first two—which are closely related—can share similar social protection intervention pathways. The last, which can be significantly exacerbated in conflict-affected contexts, requires a different approach.

The lack of educational infrastructure acts as a barrier to girls’ education in two ways. In many contexts, there are too few schools. This particularly impacts girls living in the most remote areas (who are disproportionately likely to be those from marginalised populations), and at the secondary (and post-secondary) level, given that in many LMICs post-primary educational infrastructure has not been scaled as rapidly as primary infrastructure—and has knock-on implications for girls’ safety. In addition, in nearly all LMICs, school facilities are not well adapted for those with certain disabilities. Some school buildings are not accessible; others have classrooms, labs or toilets that are not accessible.

Transportation as a barrier to girls’ participation in education must also be disentangled into two threads: lack of transport infrastructure and lack of affordable and accessible transport. The former is particularly acute for girls in remote communities, which are underserved both by roads and bridges, while the latter impacts even girls in urban areas — when transport is expensive or not door-to-door for girls with disabilities. Both sub-barriers tend to be higher for adolescent girls, particularly those studying at the secondary and post-secondary levels.

Harassment and violence on the way to and from school, the potential for which often rules out girls walking to school even when schools are relatively close, also limits girls’ participation in education. This is particularly true for adolescent girls, girls from marginalised groups, and in conflict-affected contexts.

Intervention pathways through which social protection might contribute to addressing deficits in educational infrastructure and transportation are concrete and range from using public works to build and improve roads and schools, to providing girls with disabilities with the assistive devices that make schools accessible (e.g. wheelchairs), to cash or vouchers to allow enrolment in (closer) private school or offset the costs of transportation.

Addressing the community violence that prevents girls from accessing education, on the other hand, is better tackled through ‘plus’ programming aimed at empowering girls, addressing violent masculinities and disability-related stigma, and fostering social cohesion. It also requires working with parents (or caregivers) and communities to shift beliefs about the sanctity of girls’ honour to their future marriage prospects and family reputation.

To better address accessibility challenges, efforts to expand access to social protection should be paired with supply-side investments in schools within walkable distance (or safe and affordable boarding facilities where walkability is not possible); safe, affordable and accessible transport that includes attention to girl-friendly details such as better community lighting; and justice services that can help improve girls’ safety en route to and from school. They should also be paired with policy advocacy at sub-national and national levels aimed at reducing exclusion (for those with disabilities as well as those from minority groups), national investment in community projects that empower girls and address violent masculinities, and fostering the rule of law, especially regarding strengthening reporting and prosecution of perpetrators of age- and gender-based violence.

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3 There is also a deficit of pre-primary educational infrastructure, but in most LMIC contexts this primarily due to the invisibility of ECCE at the policy level

4 We acknowledge that there is little evidence regarding the efficacy of using public works programmes to build infrastructure — and that there is concern that such an approach is not cost effective. This is in part because the impact of ‘public goods’ has not been included in evaluations of public works programmes (which have primarily focussed on food security). We note that many authors have highlighted the potential for this approach to create multiplier effects — perhaps especially for women and girls — and that a few have found evidence of efficacy (albeit in regard to agricultural infrastructure) (del Ninno et al., 2009; Tanzarin and Gutierrez, 2015; Ismail, 2018; Gehrke, 2018).
BARRIERS THAT LIMIT GIRLS’ PHYSICAL ACCESS TO SCHOOLING

Not enough schools/school too far

- Consider using public works to build schools
- Provision of assistive devices (e.g. wheelchairs, crutches) or financial support to allow for purchase
- Consider using public works to retrofit existing schools
- Case management for girls with the most complex needs

Schools and facilities not accessible to those with disabilities

- Provision of assistive devices (e.g. wheelchairs, crutches) or financial support to allow for purchase
- Consider using public works to retrofit existing schools
- Case management for girls with the most complex needs

Insufficient infrastructure (e.g. roads, bridges)

- Consider using public works to build transport infrastructure

Limited access to (affordable and accessible) transport

- Income support to reduce HH poverty
- Cash/vouchers to offset cost of transport specifically
- Provision of bikes
- Provision of assistive devices (e.g. wheelchairs, crutches)
- Direct provision of transport (esp. for those with mobility disabilities)
- Case management for girls with the most complex needs

Violence en route (esp. in conflict affected contexts)

- ‘Plus’ component aimed at empowering girls and teaching them their right to be free of violence and how to report
- ‘Plus’ component working with boys and men to shift gender norms and violent masculinities
- ‘Plus’ component aimed at parents addressing restrictive gender norms — including perceived threats to girls’ honour
- ‘Plus’ component aimed at addressing community norms about all forms of violence (including SGBV)
- ‘Plus’ component aimed at fostering social cohesion and reducing disability-related stigma

Social protection programming should be supported by:

Supply side investments in walkable and inclusive educational infrastructure (or safe and affordable boarding options as needed); safe, affordable, and accessible transport (including improved community lighting as well as services); and policing and justice.

Policy advocacy aimed at improving educational inclusivity, reducing social and geographic exclusion, shifting the gender norms that disempower girls and lead to violent masculinities, and fostering the rule of law in regard to age- and gender-based violence.
Map 4: Physical and mental health barriers to girls’ participation in education

Physical health barriers – which include malnutrition, physical illness and disability – and mental ill health share broadly similar social protection intervention pathways. This is because all are shaped by poverty and social exclusion. Although understandings of disability have evolved in recent decades and now focus on the ways in which physical and social environments, rather than disability itself, are barriers to participation (including in education), disability is included on this map for two reasons, both of which are especially relevant in LMICs.44 First, many childhood disabilities in these contexts are the result of malnutrition and inadequate healthcare and as such are preventable with tools already in our toolboxes.45 Second, where countries and communities are still scaling up access to education, resources have not been made available to meet average learners’ needs, much less those requiring accommodations or adaptations on account of specific needs.46 This makes functional limitations all the more relevant.

Malnutrition in LMICs is the result of interactions between household food insecurity, poor quality care (e.g. feeding and hygiene practices as well as health-seeking behaviour) and unhealthy environments (e.g. access to shelter, healthcare, and WASH facilities).47 Physical illness reflects this same trinity, with infectious disease and environmental risks more common in poverty-stricken environments; healthcare that is geographically, economically or socially out of reach; and caregivers sometimes unaware of the importance of timely – and modern – care seeking. Better maternal and child nutrition (e.g. folic acid and vitamin A) and more timely and appropriate treatment for illnesses and accidents (e.g. river blindness and broken bones) would do much to prevent childhood disability.48

Mental ill health in children is often related to violence— in the household, at school, or in the community.49 Household violence is often related to poverty-related stress, with both mothers and fathers experiencing stress over resource allocation.50 Poor social cohesion—and disability related stigma— has also been linked to child and adolescent mental ill-health.51

Intervention pathways through which social protection might contribute to addressing the physical health barriers that limit girls’ participation in education include income support, asset transfers of ‘health supplies’ (e.g. bed nets and water filters) aimed at reducing environmental risks, and ‘plus’ parent-education courses that promote good practices in feeding, sanitation and care seeking—all especially critical in the first 1,000 days.52 These serve to reduce all three sub-barriers. Intervention pathways also include approaches such as parental leave (especially maternity leave to support breastfeeding); nutrition support for children (e.g. food vouchers or in-kind support for households, school feeding and take-home rations); and health insurance that attends to the cost of care (including maternity care), medication and transport.53
While mental ill health is also addressed by relieving poverty (and stress and violence) and improving access to parental leave and healthcare, the ‘plus’ components best suited to improving girls’ psychosocial outcomes are distinct. These include supportive positive parenting courses aimed at expanding parents’ (and other caregivers’) repertoires for non-violent discipline strategies and fostering parent–child communication and connection. They also include support services and safe spaces for girls (and boys) – including those with disabilities and from marginalised populations – that offer opportunities to interact with caring adults and peers as well as programming designed to support social cohesion and reduce violence in schools and communities. Programming meant for adolescents, parents, and communities must directly address restrictive gender norms if it is to open the wider opportunities that support girls to thrive.

Case management should be used to link especially vulnerable girls— including those with chronic illness or disability or exposure to violence— to the broader services and support they need to pursue education (and to optimise their overall well-being).

To better address girls’ physical and mental health needs, efforts to expand access to social protection should be paired with supply-side investments in community services (especially health, WASH, and community- and school-based counselling services). Policy advocacy at sub-national and national levels— aimed at improving public health (physical and mental) and reducing the stigma that surrounds mental illness and experiences of violence—is also required.
**Physical and Mental Health Barriers to Girls' Participation in Education**

### Physical Health Constraints
- **Malnutrition**
  - Nutrition support for children (e.g., vouchers or in-kind support to HHs, school feeding, take-home rations)
- **Illness**
  - Income support to reduce HH poverty (levelled for higher costs including disability)
  - Provision of ‘health supplies’ such as water filters and bed nets
  - Ensure that parents have access to maternity/paternity/parental leave to care for newborn and ill children — esp to support breastfeeding
  - ‘Plus’ component aimed at concrete parenting practices such as feeding and caretaking, which are especially critical during the first 1,000 days
  - Case management for complex cases
- **Disability**
  - Health insurance/fee waivers to improve women's and children's access to health care (including for reproductive health care) and medication
  - Transport vouchers to improve women's and children's access to health care (including for reproductive health care)
  - Consider using public works to build (more) local health clinics and roads to facilitate access
  - Nutrition support for children and pregnant/lactating women
  - Provision of assistive devices or financial support to allow for purchase

### Mental Ill Health
- **Income support to reduce HH poverty** (levelled for higher costs including disability) — which will also reduce HH stress/violence
- **Health insurance/fee waivers to support access to mental health care**
- **Ensure that parents have access to maternity/paternity/parental leave to support the bonding that promotes mental health**
- ‘Plus’ component aimed at positive parenting practices such as communication and discipline
- ‘Plus’ component aimed at shifting restrictive gender norms — including those around girls’ access to mobility, free time, and peers — to open the many opportunities that support girls’ overall wellbeing
- ‘Plus’ component that provides psychosocial services to children (and parents)
- ‘Plus’ component aimed at reducing violence/stigma in the community and improving social cohesion
- Case management for complex cases

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**Social Protection Programming** should be supported by supply side investments and policy advocacy aimed at improving access to and quality of health services (including for reproductive health), WASH, and public health outreach — including for marginalised communities.

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**Social Protection Programming** should be supported by supply side investments and policy advocacy aimed at improving access to and quality of mental health services, including through school- and community-based counselling, and reducing the stigma that surrounds mental illness.
Our barrier mapping includes two types of norms: community gender norms and peer pressure. The first, which intersects with poverty and myriad forms of social exclusion, shapes girls’ access to education from early childhood but becomes increasingly important as girls approach and move through adolescence. The latter is almost exclusively an issue in adolescence. Social protection intervention pathways overlap and target both behaviours and beliefs.

Community gender norms include four sub-barriers. The first centres directly on support for girls’ education and whether and how it is valued vis-à-vis boys. The second centres on beliefs about menstruation and how in some contexts it is stigmatised and limits girls’ opportunities, including for schooling. The third focuses on preferences for and norms surrounding child marriage, which—depending on context—can be driven by fathers, mothers, husbands, extended family members or girls themselves. In many contexts, norms surrounding child marriage are accompanied by social and economic sanctions that may significantly limit girls’ future options (e.g. they may be forced to marry a much older man or become a second wife if they do not marry in their most ‘desirable’ years). The fourth sub-barrier more broadly focuses on how girls’ and women’s reproductive roles are valued vis-à-vis their productive potential and broader human rights. In LMICs where girls do not have access to independent livelihoods, and marriage and motherhood provide girls with both a roof over their heads and a place in the community, social pressures to ensure that girls remain marriageable (even if they are to marry as adults) limit many adolescent girls’ access to schooling. This is especially true in conflict-affected contexts where there are added threats to girls’ bodies and reputations.

Some of the intervention pathways through which social protection might contribute to shifting community gender norms and peer pressure target behaviours. These include cash and assets conditioned on or labelled for girls’ education (rather than children’s education) or avoiding child marriage (because married girls’ access to education is extremely limited). Though contexts is key, targeting girls themselves, rather than households, may improve impacts – especially in adolescence, because it ensures that education is prioritised vis-à-vis other household needs and may facilitate girls’ broader empowerment. Although highly context dependent, several studies have found that providing girls with bicycles may be particularly effective and cost-effective in supporting their access to secondary school, because it reduces transport time and improves safety. There is evidence that social protection programmes that are aimed at improving girls’ participation in education can, over time and depending on context, trigger changes in beliefs about the value of girls’ education, as communities reach and pass the tipping point where behaviours are normalised. The same is true of ‘plus’ interventions that support older girls’ and women’s employment and economic empowerment. By providing them with courses that teach hard, soft, and financial skills and opportunities to save and borrow, these programmes may improve access to education by demonstrating to the community that marriage is not the only form of security.

Other intervention pathways aimed at shifting community gender norms and peer pressure directly target beliefs. Indeed, there is evidence that without this it is difficult to create longer-term change in the broader gender norms that limit girls’ lives. Girls’ access to education may improve but come to be seen as a way to make them more marriageable or support them to become better mothers. Interventions in this genre include ‘plus’ empowerment programming for girls, masculinities programming for boys and young men, and gender-sensitivity or empowerment programming for parents/caregivers and communities.

Where peer pressure diverges from community gender norms, either in terms of what young people do that may limit girls’ opportunities for education or what young people believe about girls’ versus boys’ roles, it is vital that programming respond accordingly. For example, in Ethiopia’s East Hararghe zone (in Oromia), recent research has found that girls as young as ten and boys as young as 15 are...
increasingly defying their parents and ‘choosing’ of their own accord to marry-- in part because they wish to demonstrate their ‘adulthood’ to their peers. Unsurprisingly, messages aimed at encouraging girls to resist arranged child marriages have fallen flat.72

To shift the community and peer gender norms that limit girls’ participation in education, efforts to expand access to social protection should be paired with policy advocacy at sub-national and national levels. This should include attention to developing gender equitable curricula and comprehensive sexuality education, scaling up adolescent-friendly sexual and reproductive health services, ensuring that pregnant girls and young mothers have access to education, changing the inheritance laws and labour market policies that disadvantage girls and women by depriving them of the assets and opportunities that support their financial independence, and stepped up and gender responsive budgeting. Supply-side investments in community implementation of these are also key. Actors should also consider engaging with media partners to develop mass and social media approaches to addressing gender norms, especially for young people.73
**INTervention Pathways for Social Protection:**

- **Limited support for girls' education**
  - Cash/assets to girls or HHs for eschewing child marriage
  - ‘Plus’ programming aimed at communities encouraging girls’ education
    - Tailoring messaging to contexts and using local role models where possible

- **Beliefs about menstruation**
  - School- and community-based ‘plus’ puberty education programming for girls and boys
  - Fold menstruation/MHM into existing community-based programming for women (including health care)
  - ‘Plus’ parent education programming for mothers (and fathers) that includes attention to menstruation and how to support daughters
  - ‘Plus’ programming aimed at communities and de-stigmatizing menstruation

- **Preferences for child marriage**
  - Cash/assets to girls or HHs for eschewing child marriage
  - School- and community-based ‘plus’ programming directly targeting child marriage — using community and religious leaders as possible — for girls and boys, parents, and the broader community, to raise awareness about the shorter- and longer-term costs of child marriage and the advantages (to girls, their children, and communities) of adult marriage

- **Value of girls’ and women’s productive vs reproductive roles**
  - Programming for older girls and women that supports employment and financial independence — including hard, soft and financial skills; stepped up access to savings and credit opportunities, etc.
  - ‘Plus’ gender empowerment programming for girls and women aimed at teaching rights and life skills and providing mentors and role models
  - ‘Plus’ programming aimed at communities and de-stigmatizing menstruation

- **Gender Norms and Peer Pressure**
  - Cash/assets to girls themselves for education
  - Highly contextualized ‘plus’ school- and community-based programming for adolescents that addresses peer pressure, supports adolescent girls to value themselves beyond marriage and motherhood, encourages boys to find other ways to demonstrate masculine prowess, and raises both girls’ and boys’ awareness about the importance of education and adult marriage, the risks of early and unprotected sex and child marriage, how to protect self and peers from violence, etc.

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**Social Protection Programming should be supported by:**

- **Policy advocacy** that contributes to shifting gender norms, including developing gender equitable curricula inclusive of comprehensive sexuality education, eliminating policies that prevent pregnant girls and young mothers from accessing education, changing the inheritance laws and labour market policies that exclude girls and women from equitable access to assets and economic opportunities, and stepped up and gender-responsive budgeting.

- **Supply side investments** that deliver on policy objectives, including prioritising the hiring of female teachers and administrators, scaling up adolescent-friendly sexual and reproductive health services, and making financial services and community leadership roles more available to women.

- **Engagement with media partners**, attending carefully to generational differences in mass and social media messaging.
Map 6: Participation barriers linked to reproductive biology--and the limited supports and services girls have to deal with these

This map focuses on the barriers born of girls’ reproductive biology and the limited resources that girls have to deal with these-- which become salient after the physical transitions of adolescence. It includes three sub-barriers: menstruation, pregnancy and motherhood. Social protection intervention pathways overlap considerably with those on other maps but are pulled out in order to highlight the unique disadvantages that girls face by dint of the fact that they are female. These intervention pathways are diverse where they address the practical needs delineated as sub-barriers and more shared (between the three sub-barriers) where they involve ‘plus’ interventions aimed at shifting the social norms that surround biological differences.

Adolescent girls need practical support to care for their developing bodies. Because girls can lose access to school for days each month in contexts where schools lack toilets, running water, and rubbish bins, and even reusable period products are uncommon (due to custom or cost), practical support should include supplies and spaces to manage menstruation. Menstrual pain can also limit girls’ attendance, which has heightened implications for girls who live in remote communities or poorer households—who are less likely to have access to medication. Girls also need access to contraceptives and reproductive health care, given that adolescent pregnancy is associated with school drop-out. This is especially the case in countries (e.g. Tanzania) where pregnant girls are prohibited from attending school. Social protection could play a role in meeting these practical needs by providing period products, building school and community WASH infrastructure (again with caveats on the efficacy and cost-effectiveness of public works programmes), and supporting girls’ access to health services, contraceptives, and medication through the provision of cash or assets or with health insurance/waivers.

Young mothers need practical support in order to combine education and parenthood. This includes not only income support, so that girls can afford to stay in school, but also improved access to nutrition and health care (especially during the months of pregnancy and lactation), programming aimed at keeping their children healthy (to reduce demands on girls’ time), and childcare. Social protection could contribute to childcare in several ways. For example, although there is evidence that mothers are often reluctant to leave their young children with non-family members, as well as legitimate safeguarding concerns, expanding the rubric of ‘public work’ to include ECCE services—as has been done in South Africa—could simultaneously deliver on young mothers’ need for childcare and women’s need for work. Alternatively, and modelled on Mexico’s Estancias, young mothers (and fathers) could be provided with vouchers/fee waivers/subsidies to access existent community childcare services, which research has found families are generally willing to use if quality is acceptable.

Socially, girls – and boys – need to know how their bodies work and how to avoid (and manage) pregnancy. Comprehensive sexuality education, which could be delivered as part of ‘plus’ programming provided in schools and communities, could help meet this need. Adolescents, as well as parents/caregivers and communities, also need exposure to programming that addresses gender norms, especially those related to girls’ reproductive biology but also broader aspects including the importance of fathers to children’s development.

Given that barriers linked to girls’ reproductive biology are primarily a result of the limited resources available to adolescent girls, it is vital to pair social protection with supply side investments in community infrastructure and services as well as policy advocacy at national and subnational levels. The former should centre on improving WASH (including school toilets and MHM facilities), SRH information and care, and ECCE. The latter should include efforts to scale up comprehensive sexuality education, expand the types of work seen as ‘public works’, and address the myriad legal, policy, financial, and normative barriers that prevent girls from attending school while menstruating, pregnant, or mothering.
BARRIERS LINKED TO REPRODUCTIVE BIOLOGY — AND LIMITED SERVICES AND SUPPORT TO ADDRESS THESE

INTERVENTION PATHWAYS FOR SOCIAL PROTECTION:
• Represents core social protection programming
• Represents ‘plus’ programming

Barriers

Blue dot indicates it can shape enrolment and attendance from the first engagement with formal education
Red dot indicates it gets more important as children get older and progress through primary school
Orange dot indicates it gets (even more) important due to physical and social transitions during adolescence

Menstruation

• Provision of period products
• Income support to open financial space for improved access to period products
• Consider using public works to build school toilets/ MHM facilities

• ‘Plus’ programming aimed at providing girls and boys with comprehensive sexuality education
• ‘Plus’ programming for girls that provides life skills and mentoring, encourages them to stay focused on education and longer-term objectives, and directly addresses gender norms and how they serve to limit girls’ lives
• ‘Plus’ programming for adolescents, parents, and communities aimed at destigmatising menstruation and adolescent/pre-marital pregnancy and motherhood
• Case management for girls with the most complex needs

Pregnancy

• Provision of/ waivers for/ health insurance to support access to contraceptive supplies and services
• Consider using public works to build (more) community health clinics

• ‘Plus’ component aimed at improving girls’ nutrition and uptake of antenatal care and facility and skilled delivery

Motherhood

• Cash/ assets/ health insurance/ waivers aimed at improving pregnant and mothering girls’ nutrition and access to health care
• ‘Plus’ component (or conditions) aimed at improving girls’ nutrition and uptake of antenatal care and facility and skilled delivery

• Income support to ensure that young mothers can afford to stay in school
• Support aimed at reducing girls’ children’s needs for care due to malnutrition and ill health (e.g. supplementation, health insurance, fee waivers, WASH, bed nets)
• Improved access to quality early childhood care and education services through income support or waivers/ vouchers/ subsidies
• Consider using public works to build health, WASH and ECCE infrastructure
• Use public works to provide ECCE services
• ‘Plus’ component for girls and their partners aimed at improving parenting practices (to help keep children healthier and reduce demands on girls’ time)

Social protection programming should be supported by:

Supply side investments in community infrastructure and services, especially WASH (including school toilets and MHM facilities), SRH information and care, and ECCE.

Policy advocacy aimed at scaling up comprehensive sexuality education, expanding the types of work seen as ‘public works’, and addressing the myriad legal, policy, financial, and normative barriers that prevent girls from attending school while menstruating, pregnant, or mothering.
Map 7: Participation barriers born of limited aspirations for education

Aspirations for girls’ education – whether they be girls’ own, caregivers’ or those of their marital families – are shaped by a combination of personal, household, community and national/market level factors. These include not only poverty and social exclusion (which are particularly amplified for those with disabilities and make education feel unobtainable), gender norms (which limit the perceived value of education), and labour and marriage market realities (which can limit actual returns on investment), but also individual and household preferences vis-à-vis other opportunities. The latter is especially important when girls and families are deeply invested in maintaining cultural lineages.

Parents'/caregivers’ aspirations for girls’ education limit girls’ participation from early childhood. Girls’ own aspirations for education begin to be important in late childhood, when girls have more agency over where and how they spend their time. Given that most girls who marry before adulthood marry in adolescence, not in early or middle childhood, marital families’ aspirations (including husbands and parents-in-law) generally become important only in adolescence.

Intervention pathways through which social protection might contribute to shifting aspirations for girls’ education are myriad and varied and reflect the factors that shape aspirations. Where aspirations are limited by poverty, income support (including cash and asset transfers as well as public works) to households allows girls and their caregivers to reimagine what is possible. With the caveats that conditions are not feasible in many contexts and are not desirable in others, there is a not insubstantial body of evidence that conditioning or labelling this support as for education tends to improve impacts, because it helps shift the priority of education vis-à-vis other household needs. Where aspirations are limited by gender norms that deprioritise girls’ education (vis-à-vis boys’), cash or assets to households – or to adolescent girls themselves – contingent upon girls’ regular attendance (and sometimes exam scores) can play a role in shifting the value placed on girls’ schooling. Interventions of this ilk are varied and include stipends for girls that are higher than those for boys (e.g. Mexico and Turkey), take home rations for girls (e.g. Ghana and South Sudan), bicycles for girls (e.g. India and Zambia), and cash paid into bank accounts for girls (e.g. Bangladesh and various Indian states). While supporting girls to stay in school has been found the best way to prevent child marriage, there is evidence from Bangladesh that the reverse pathway may also be effective—and that supporting girls to remain unmarried (in this case by incentivising them with cooking oil) may help them stay in school.

‘Plus’ programming aimed at raising awareness of the importance of girls’ education – for parents/caregivers (including fathers, given that in most LMICs they are the primary decision-makers), girls, marital families and communities – is also important to raising aspirations for education and has been found by numerous studies to be one of the more cost-effective ways of improving girls’ access to education. Depending on context, effects of awareness-raising can be amplified when girls (or their mothers) are also provided with empowerment programming that directly addresses gender relations and expands real and perceived opportunities, including for employment (including part-time after school in order to cover educational costs). Given that girls’ and parents’/caregivers’ aspirations for education tend to decline over time where learning outcomes are poor, a critical intervention pathway through which social protection might improve aspirations is ‘plus’ programming that provides tutorial support for girls who are struggling academically. Programming that reduces social exclusion – of girls with disabilities and girls belonging to marginalised groups – is important to ensuring that all girls have opportunities to aspire. For girls with the most complex cases, case management may also be important.

Given the feedback loop between educational aspirations and learning, efforts to use social

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5 This body of evidence is not only from Latin America, but also countries in Asia and North Africa. Similar evidence from Eastern and Southern Africa shows that unconditional cash transfers also address economic barriers to education.

6 Building schools and providing cash transfers/stipends tends to deliver larger results, but at higher cost (J-Pal, 2017; Snilstveit et al, 2016)
protection to raise aspirations for girls’ education should be paired with the supply-side investments in inclusive and quality education that are necessary to support learning. These include ensuring that schools have the physical (e.g. desks, books, toilets) and ‘soft’ (e.g. trained—and female-- teachers, gender-responsive curricula and pedagogies, anti-violence policies) resources that support learning for all. They should also include investments in community-level infrastructure and services that reduce demands on girls’ and women’s time, especially WASH (given water collection responsibilities) and health and childcare (given care responsibilities). Social protection interventions should also be paired with policy advocacy at the national and subnational levels. In addition to efforts (including improved financing) to deliver on community-level provisions, this should include direct attention to ensuring that all girls – including those who have disabilities, are married or mothers, or are minorities or lack citizenship – have access to not only education but the eventual employment that justifies investments in schooling. This will require broad efforts to address labour market failures as well as discriminatory laws and policies, which work in tandem to deprive girls and women of the assets and opportunities that support longer-term aspirations.
LIMITED ASPIRATIONS FOR EDUCATION

Social protection programming should be supported by:

**Supply side investments** in the inclusive and quality education necessary for learning as well in the WASH, health, and ECCE infrastructure and services that reduce demands on girls' and women's time.

**Policy advocacy** aimed at ensuring that all girls — including those with disabilities or who are minorities, refugees, pregnant or mothering — have access to quality education as well as the eventual employment that justifies HH's investment in girls' schooling. This must include direct attention to labour market failures as well as discriminatory laws and policies.
Barriers to girls’ learning—while far more dependent on the quality of schooling available than barriers to girls’ participation—generally overlap with barriers to participation. This is true for both barriers at the school level and those faced by individual girls. Social protection intervention pathways reflect these overlaps.

At the school level, girls’ learning is hindered by supply-side deficits that are largely beyond the reach of core social protection mechanisms, outside of grants to schools (to facilitate the purchase of educational materials or assistive devices or hire support staff) and potentially using public works to build and retrofit educational infrastructure. School level barriers to girls’ learning include low contact/instructional hours, which reflect annual school calendars, the length of the school day and the teacher absenteeism that plagues many LMIC contexts. These also include insufficient and poorly adapted physical resources (e.g. too few schools, under-resourced classrooms, and a deficit of school toilets) and poor-quality ‘soft’ resources (e.g. poorly trained teachers who rely on violent discipline strategies to control classrooms and curriculum and pedagogies that are not child friendly, gender responsive or disability inclusive). Supply-side investments in teachers and schools and policy advocacy at the sub-national and national levels are better suited to addressing these barriers.97

School-level barriers to girls’ learning also include discrimination, stigma and violence (including GBV)—from teachers as well as peers—that is often amplified for those with disabilities or who are marginalised on account of minority status.98 The school- and community-based ‘plus’ programming highlighted on other maps could be important to addressing these barriers. Programming should target teachers’ and students’ beliefs and behaviours in regard to violence, working to build young people’s communication and conflict-resolution skills (including how to report predatory teachers and bullying), and also the gender norms, disability-related stigma and social exclusion that limit girls’ learning.99

Girl-level barriers to learning, of which there are seven on the map, represent three pathways through which social protection might improve girls’ learning. The first pathway involves tackling girls’ limited capacity and school readiness so that girls matriculate at school ready to learn. Recent evidence, from longer-term studies of Latin American cash transfers and public works programmes in Ethiopia and India, suggest that social protection is sometimes associated with improved learning outcomes for school-aged children because it can improve children’s cognitive capacity. Impacts are through improved nutrition in the first 1,000 days, more stimulation and less violence at home, better access to ECCE, reduced chances/mitigation of disability, etc.100

The second pathway through which social protection can contribute to girls’ learning addresses their irregular attendance. Here an array of social protection mechanisms supports girls’ learning by assisting them to attend school on a regular basis across days, weeks, and seasons; reducing their odds of repetition; and improving their likelihood of transitioning to the next grade. Myriad and diverse individual intervention pathways are laid out in Maps 2–7.

The remaining girl-level barriers to learning highlight what schoolgirls need on an ongoing basis if they are to optimise their time in the classroom. They need to be physically and mentally healthy and well-nourished, because girls who do not feel well, are hungry or are anxious and/or depressed cannot pay attention or retain what they have learned.101 They also need to be invested not only in attending school, but in acquiring knowledge and skills.102 Finally, learning depends on practical and emotional family support. Caregivers (and siblings) must allow girls to prioritise education (stepping in to take over their chores as needed), ensure that they are appropriately provisioned with learning supplies (including not only books and pens but also light at home for after-dark homework and all necessary assistive devices—which can be as simple as eyeglasses) and encourage them to work hard.103
With caveats, the intervention pathways through which social protection might contribute to schoolgirls’ learning again largely mirror those that impact their participation in education (see Maps 2-7). As noted above, the first caveat is that learning is far more dependent on quality services than is participation. This means that effects of social protection on learning tend to be less commonly reported and generally smaller. The second caveat is that where social protection contributes to improved access to education, it can negatively impact learning in contexts where overcrowding becomes an issue. Caveats aside, however, there is some evidence that cash, school feeding, and take-home rations can improve girls’ test scores, perhaps even through improved nutrition (rather than merely reduced hunger). There is also some evidence that making girls—rather than households—primary beneficiaries of cash or assets results in improved learning (perhaps because this increases girls’ buy-in). There is substantial evidence, albeit largely from relatively small pilots and NGO-run programming (e.g. Camfed’s work in Tanzania and Zimbabwe), that a cash-plus approach that provides girls with financial, academic and social support can result in very large learning gains. Depending on context and needs, to better support girls’ learning social protection interventions might consider providing ‘top-up’ transfers to girls or households to recognise learning accomplishments. While these could take the form of merit scholarships, to recognise the girls who are the most able students, there is some evidence that this type of reward disincentives less able students—making rewarding girls for successfully completing grade levels and matriculating to the next year a potentially better approach.
BARRIERS TO GIRLS' LEARNING: SCHOOL LEVEL

LEARNING

- Girl level barriers
- School level barriers

Low contact hours (e.g. school calendar, daily schedule, teacher absenteeism)

- Poor quality 'soft' resources (e.g. teachers poorly trained or curricula and pedagogies that are not child/girl/disability friendly)

- Insufficient/ non-adapted physical resources (schools, desks, books, toilets, etc.)

- Violence and discrimination at school, from teachers as well as peers

**INTERVENTION PATHWAYS FOR SOCIAL PROTECTION:**
- Represents core social protection programming
- Represents 'plus' programming

Social protection programming should be supported by:

- **Supply side investments** in inclusive and well-resourced schools — prioritising the hiring of female teachers.

- **Policy advocacy** aimed at increasing contact hours; improving the quality of teaching staff; ensuring that pedagogies and curricula are child-friendly, gender-responsive, and disability-inclusive; and that laws and policies meant to deliver on objectives are uniformly enforced.
Social protection programming should be supported by:

- **Supply side investments** in the community-level infrastructure and services that improve the time that girls have for school and study — including WASH, health care, childcare, transport, and electricity.

- **Policy advocacy** aimed broadly at delivering on community-level goals, including through improved financing, and addressing the laws and policies and labour market failures that prevent all girls — including those with disabilities, or are minorities, displaced, or are pregnant or mothers — from accessing the assets and opportunities they need to transform their lives.
ENDNOTES

1 UNESCO, 2020; UNICEF et al., 2020; Psaki et al., 2021
2 Ibid.
3 UNESCO, 2021; Malala Fund, 2021
4 UNESCO, 2020; Antoninis, 2018
5 Psaki et al., 2020; UNICEF et al., 2020; GPE, 2021
6 Psaki et al., 2021. Note that the Ethiopian Ministry of Education (2021) reports that gender parity has been dropping in recent years.
7 Outhred et al., 2020
8 see also World Bank, 2018; UNICEF, 2020; UNESCO, 2020; UNGEI, 2018
9 EGFR, 2021
10 e.g. Sperling and Winthrop, 2016; Evans and Yuan, 2021; Psaki et al., 2021; Gordon et al., 2019; Haberland et al., 2018
11 Molina Millán et al., 2019; Mishra and Battistin, 2018; J-Pal, 2017; Garcia and Saavedra, 2017; Glewwe and Muralidharan, 2016; Bastagli et al., 2016; Snistveit et al., 2015, 2016; de Hoop et al., 2020; Davis et al., 2016
12 Woode, 2017
13 Barham et al., 2018; Olson et al., 2018; Baird et al., 2011; Pereira and Peterman, 2015
14 Fiala et al., 2020; Muralidharan and Prakesh, 2017
15 Gordon, 2019; Psaki et al., 2021
16 Roelen et al., 2017; McLean et al., 2020
17 Bastagli et al., 2016; Snistveit et al., 2016; Sperling and Winthrop, 2016; Garcia and Saavedra, 2017; Evans and Yuan, 2021; de Hoop et al., 2020
18 Gordon et al., 2019
19 Ibid.
20 Ibid.
21 Garcia and Saavedra, 2017
22 Joshi, 2020; Bray, 2013
23 Adato et al., 2016; Jones et al, 2021b
24 Gordon et al., 2019; Pereznie et al. 2017; Woode et al., 2017; Presler-Marshall et al., 2020a
25 Dayıoğlu, 2013
26 Gordon et al., 2019; Putnick et al., 2015; Presler-Marshall et al., 2021; Marcus, 2018
27 Rose and Yorke, 2019
28 Girls not Brides, 2021; Adekoya et al., 2021; Presler-Marshall et al., 2020b
29 J-Pal, 2017; World Bank, 2018
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Selected recommended readings

Here we provide a list of recommended readings with a very brief explanation as to why the listed sources are recommended (in blue bullets).

  • For an overview of how social protection can promote school readiness for girls and boys.

  • For a look at how social protection, improved access to services (including education and health) and improved access to infrastructure (including for water and transport) can support gender equality.

  • For an overview on how social protection can support gender equality, including impacts on girls’ education.

  • For a review of how cash transfer programming supports girls’ and boys’ education in emergencies.

  • For a review of evaluations of programmes aimed at improving girls’ and boys’ access to education and learning.

  • For an explanation of why focusing on girl-centered educational programmes is not necessarily the best way to help girls overcome barriers to education.

  • For a detailed look at the patterning of educational gender parity across countries and over time, and an explanation of why focusing too closely on parity may be counterproductive.

  • For a detailed review of evidence that addresses what works to help get girls and boys in school and learning in LMICs – and how social protection fits in.

  • For a detailed look at trends and gaps in girls’ access and learning in the LMICs of the Commonwealth— and how it might be improved.

  • For an easy-to-read piece offering a different take on the barriers to girls’ education.

  • For a database that allows custom visualisations to explore girls’ educational outcomes and actors/programmes working to improve them.


- For a brief review of girls’ programming that includes impacts on girls’ education.


- For a review of what works in LMICs to help ensure that young girls and boys are ready for school.


- For an easy-to-read review of what works to support girls’ and boys’ access to education and how social protection fits in.


- For a review of interventions – including social protection – aimed at improving girls’ and boys’ access to education and learning in LMICs.


- For a look at how social protection could be used to transform girls’ lives – including through education.


- For a review of how to prevent child marriage—and keep girls in school.


- For a review of the longer-term evidence that speaks to whether and how social protection delivered in two stages of life (early childhood and primary school) can improve longer-term outcomes – including education and learning – for girls and boys.


- For an exploration of social protection design features that matter – such as conditions, ‘plus’ components and a focus on quality.


- For an explanation of why it is important to understand the patterning of girls’ educational exclusion.


- For a review of barriers to girls’ education, what works to help girls overcome barriers and what actors are delivering what programming where.


- For an exploration of how ‘plus’ interventions can improve the impact of mainstream social protection interventions – including education.


- For a response to Evans and Yuan (above)—and an explanation of why girl-targeted interventions remain critical to reach the most marginalised.

Interventions for improving learning outcomes and access to education in low- and middle-income countries: a systematic review. New Delhi: International Initiative for Impact Evaluation (3ie)
- For a review of interventions aimed at improving girls’ and boys’ access to education and learning in LMICs.

- For a review of why girls’ education is the world’s best investment and what works to support it.

- For an exploration of how educational inclusion of the most marginalised girls supports broader gender equality objectives.

- For an exploration of how the poorest children are being left further behind in terms of both access and learning.

- For an exploration of the progress girls have made over the last 25 years – and the hurdles they still face.

UNGEI and Leonard Cheshire (2021) Leave no girl with disabilities behind: Ensuring efforts to advance gender equality in education are disability-inclusive. NY: UNGEI
- For an exploration of how gender and disability interact to leave girls with disabilities particularly excluded from education.

- For an analysis of why girls’ education is the world’s best investment.

- For a review of how girls’ and boys’ learning can be supported, including with social protection.
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Disclaimer

This document is an output of the Gender-Responsive Social Protection programme (GSP), which aims to enhance outcomes for the most marginalised women and girls from social protection and gender equality programmes and policies globally. This document has been produced by ODI contracted through the EACDS Lot D service ‘Tackling Extreme Poverty and Helping the World’s Most Vulnerable’, in collaboration with UNICEF and the FCDO, managed by HEART and funded by the UK Foreign Commonwealth and Development Office. The views expressed in this document are entirely those of the authors and do not necessarily represent UNICEF’s or the UK Foreign Commonwealth and Development Office’s own views or policies, or those of HEART. Comments and discussion on items related to content and opinion should be addressed to the authors, via HEARTforEACDS@opml.co.uk