“As religious leaders, we have an important role in protecting children, and I have learned a lot from this workshop to influence my members.”

— Pastor, Ashanti region
FIGURE 1: Percentage of women aged 20 to 24 years who were first married or in union before age 18.

Note: This map is stylized and not to scale. It does not reflect a position by UNFPA or UNICEF on the legal status of any country or area or the delimitation of any frontiers.

The global context

Child marriage threatens the lives, the well-being and the futures of girls around the world. Globally, the prevalence of child marriage has declined by around 15 per cent since 2010. Nevertheless, COVID-19, climate change and conflict have had lasting effects on poverty, school dropout and inequality, triggering increases in child marriage. UNICEF estimates that the COVID-19 pandemic alone will have put more than 10 million additional girls at risk of child marriage by 2030.

Ending child marriage is a global priority: 93 governments have signed up to Sustainable Development Goal (SDG) target 5.3 to end child, early and forced marriage, and 43 countries either have, or are working on, national action plans to end child marriage. Girls’ education is a consistent protective factor against child marriage, with child marriage rates among girls who complete secondary school 66 per cent lower than among girls with no education, and 80 per cent lower among those who complete higher education. COVID-19 increased the number of school dropouts, thereby increasing the risk that girls who are out of school will not return. Girls who drop out of school are significantly more likely marry early, and 87 per cent of married adolescent girls are out of school.

Global advocacy and dialogue

In 2022, the international community made key commitments to end child marriage at global and regional forums. On 15 November 2022, the United Nations General Assembly Third Committee resolution on child, early and forced marriage, led by Zambia and Canada, was adopted by consensus. A total of 125 Member States sponsored the resolution (compared to 114 co-sponsors the last time the resolution was put forward in 2020). Countries which sponsored the resolution for the first time included: Antigua and Barbuda, Bangladesh, Bhutan, the Democratic Republic of Congo, Mauritius, Nepal and Sri Lanka. Several of the countries have a high prevalence of child marriage — and, by sponsoring, demonstrated their political commitment to ending it. The resolution highlights the urgent need to reach the poorest and most marginalized girls and women—while calling upon the international community to increase its efforts to end child, early and forced marriage. It recognizes how global health threats, climate change, conflicts and forced displacement can have a particularly negative impact on women and girls and which, by extension, can also increase child, early and forced marriage. The resolution appreciates the UNFPA-UNICEF Global Programme to End Child Marriage and other

1 See Official Records of the General Assembly, Seventy-seventh Session, Third Committee agenda item 64(a) (A/C.3/77/L.19/Rev.1)
similar global, regional, and national initiatives, encouraging coordinated and comprehensive approaches across sectors and at all levels.

In March 2022, the Global Programme and partners led a high-level side-event at the sixty-sixth session of the Commission on the Status of Women (CSW), a session which culminated in the CSW66 Agreed Conclusions, calling for action to achieve gender equality and the empowerment of all women and girls in the context of policies and programmes on climate change, and environmental and disaster-risk reduction. This session, “No Time to Lose: Child Marriage and the Triple Crisis”, enabled United Nations Member States and other stakeholders to improve their collective understanding of the effects of the triple crisis on child marriage, and what could be done in response.

Key highlights in 2022

- **23,024** adolescent girls were reached with life-skills training or comprehensive sexuality education (CSE), including **15 girls with disabilities**, in 2022. Some **1,080 boys** were also engaged directly by the programme.

- **1,081** adolescent girls, who are among those most at risk of child marriage, were provided with support to complete junior high school, including funds to cover their school tuition, boarding fees and school materials.

- **590,900** boys, girls, women and men were engaged in dialogues on the consequences of, and alternatives to, child marriage, the rights of adolescent girls and gender equality.

- **8,881** boys and young men were engaged in dialogues that address harmful masculinities and gender norms.

- **4,216** local actors traditional, religious and community leaders participated in dialogues and consensus-building activities to end child marriage.
Child marriage country context

Child marriage has declined over the last decades in Ghana, from about 40 per cent in the 1980s to 19 per cent in 2017/2018. Although this level is among the lowest in the West and Central Africa region, one in five young women are still married or in union before the age of 18. The prevalence of young women married or in union before the age of 15 has stalled at 5 per cent over the last 10 years, without any visible improvement. Overall, child marriage is more common among those who live in rural areas, in poor households and who have little or no education.

The high prevalence of adolescent pregnancy, mostly unplanned and unintended, remains a serious concern with 18 per cent of women aged 20–24 years having given birth before the age of 18. There is an unmet need for contraception, with 36 per cent of married girls, and 61 per cent of unmarried girls, aged 15–19 years having no access to it. Maternal mortality is one of the leading causes of death for adolescent girls in Ghana; contributing to 7.75 per cent of the maternal deaths of all ages. Early pregnancy is both a cause and a consequence of child marriage in Ghana; 2 in 10 adolescent pregnancies precede marriage.

Overall programme performance

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Target</th>
<th>Result</th>
</tr>
</thead>
<tbody>
<tr>
<td>Indicator 1111: Number of adolescent girls (aged 10–19) who actively participated in life-skills or CSE interventions in programme areas</td>
<td>40,302</td>
<td>23,024</td>
</tr>
<tr>
<td>Indicator 1121: Number of girls (aged 10–19) supported by the programme to enrol and/or remain in primary or secondary school</td>
<td>1,069</td>
<td>1,081</td>
</tr>
<tr>
<td>Indicator 1211: Number of boys and men actively participating in group education/dialogues that address harmful masculinities and gender norms</td>
<td>6,887</td>
<td>8,441</td>
</tr>
<tr>
<td>Indicator 1221: Number of individuals (boys, girls, women and men) who participate in group education/dialogue sessions on consequences of and alternatives to child marriage, the rights of adolescent girls and gender equality</td>
<td>185,686</td>
<td>590,900</td>
</tr>
<tr>
<td>Indicator 1222: Number of individuals (boys, girls, women and men) reached by mass media (traditional and social media) messaging on child marriage, the rights of adolescent girls and gender equality</td>
<td>616,304</td>
<td>290,987</td>
</tr>
<tr>
<td>Indicator 1223: Number of local actors (e.g., traditional, religious and community leaders) with meaningful participation in dialogues and consensus-building to end child marriage</td>
<td>882</td>
<td>4,216</td>
</tr>
<tr>
<td>Indicator 1231: Number of CSOs newly mobilized in support of challenging social norms and promoting gender equality by the Global Programme (cumulative)</td>
<td>13</td>
<td>10</td>
</tr>
<tr>
<td>Indicator 2121: Number of primary/secondary/non-formal schools in programme areas providing quality gender-friendly education that meets minimum standards</td>
<td>17</td>
<td>7</td>
</tr>
<tr>
<td>Indicator 2131: Number of service delivery points in programme areas providing quality adolescent-responsive services (health, child protection/ gender-based violence) that meet minimum standards</td>
<td>516</td>
<td>690</td>
</tr>
<tr>
<td>Indicator 2211: Number of partnerships (both formal and informal) established to deliver adolescent-responsive social protection, poverty reduction and economic empowerment programmes and services</td>
<td>16</td>
<td>19</td>
</tr>
<tr>
<td>Indicator 3111: Number of policies or legal instruments addressing child marriage drafted, proposed or adopted at national and subnational level with Global Programme support (cumulative)</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Indicator 3121: Number of subnational plans with evidence informed interventions to address child marriage</td>
<td>35</td>
<td>35</td>
</tr>
<tr>
<td>Indicator 3211: Number of generated evidence and knowledge that focus on what works to end child marriage (cumulative)</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Indicator 3212: Number of generated evidence and knowledge that apply a gender analysis (cumulative)</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Indicator 3221: Number of south-to-south cooperation events (conferences, expert visits, peer consultations, study tours, communities of practice) supported</td>
<td>0</td>
<td>2</td>
</tr>
</tbody>
</table>
Providing intensive support to marginalized girls

The Global Programme in Ghana is implemented through the joint UNFPA-UNICEF Promoting Adolescent Safe Spaces (PASS) programme, and other safe spaces initiatives, such as SISTAs Clubs and Orange Girls Networks. These, in partnership with the Government and multiple CSOs, continued to create and expand opportunities to help empower vulnerable adolescent girls. A total of 23,024 adolescent girls between the ages of 10–19 years in 12 regions were reached with structured training to help them make informed decisions on matters affecting them, such as:

- child marriage
- adolescent pregnancies
- sexual and reproductive health
- sexual gender-based violence.

The programme introduced the Sister-Sister safe space sessions into the PASS programme in 2022. These sessions were led by the 2019–2021 cohort of 280 girls aged 19 years and above who graduated from the safe space programme. The graduates are equipped with skills to facilitate peer-to-peer dialogue sessions and they share information on reproductive health and rights in the communities. These young women have become key influencers, mentors and role models for the younger girls enrolled in the programme and demonstrate increased ownership and leadership of adolescent girls in their own spaces.

Adolescents, parents, community leaders and district stakeholders see the formation of the ‘Am-A-Girl’ and ‘Am-4-Girls’ groups and adolescent safe corners, and their associated activities, as very beneficial. An evaluation of the PASS programme in 2022 shows that girls have learned a lot, including:

- developing the confidence to express themselves
- socializing with the opposite sex
- being responsible at home
- understanding their sexuality
- protecting themselves against sexually transmitted infections and unplanned pregnancies
- standing up for their rights.

Nearly 80 per cent of the adolescent girls indicated that they were either able to express their opinions a lot of the time or quite a lot, and 83 per cent indicated their ability to speak up without fear a lot of the time. Most adolescent girls interviewed had easy access to reproductive health services within their communities, while more than 81 per cent had received education on various topics related to reproductive health, including menstruation. While 61 per cent of the girls said they would refuse to be married below the age of 18, even if it were proposed by their parents, nearly a fifth of the girls were confident enough to delay marriage.

Ghana is home to over 2 million child brides; 1 in 5 young women were married in childhood.
“One day, a non-governmental organization called NORSAAC (Northern Sector Action on Awareness Centre) had a meeting in our community and all the children attended. When Salmu was asked a question and she could not answer, she began to cry. The local NGO staff facilitating the meeting came home with my daughter. Ever since that day, various partners have collaborated to ensure that my daughter enjoys her right to education and to a better future.”

— Alhassan Fuseini, Salmu’s father

The programme has continued to target the most vulnerable adolescent girls and supported them to enrol and remain in school, including Salmu Alhassan – a girl with a hearing impairment. Salmu is among a cohort of 1,000 adolescent girls who continue to receive intensive support to attend and complete junior high school; support funded by the Global Programme in partnership with the Ghana Education Service. In 2022, another 81 of the most marginalized adolescent girls, including adolescent mothers and those who experienced child marriage, were supported by the programme to enrol in formal and non-formal educational and vocational training institutions.

Most of the adolescent girls among the cohort who receive educational support completed training at the SISTA’s clubs or another safe space supported by the Global Programme. Once selected, they went through a comprehensive process to prepare for enrolment in formal education.

“The bursary support supported my learning greatly. Through this support, I had my own textbooks with which I could read, prepare for class and make references at my own convenience. Again, the courtesy for boys and girls book I received has made me confident and helped me to know how I should manage myself among people and in public - I have become a lady indeed!”

— Feruzah, student at Cathedral Junior High School
Challenges, lessons learned and next steps

The lingering effects of COVID-19, climate change and the Sahel crisis that has spilled over into Ghana have increased the vulnerabilities of adolescent girls and their families. With the influx of migrants from the Sahel region and the anticipated challenges for both host community members and migrant families, adolescent girls in five regions (Greater Accra, Ashanti, Bono-East, Upper-East and Northeast) affected by the Sahel crisis have experienced a lack of opportunities, especially in vocational training. In rural communities there have also been reports of adolescent girls being sexually abused, which is contributing to increases in teenage pregnancies and school dropouts, with some girls fleeing their communities to work in urban areas as marketplace porters (‘kayayei’).

Continuous engagements through safe spaces for girls and boys have provided an opportunity for adolescents to deepen conversations on matters that affect them and find lasting solutions. For instance, providing platforms for adolescents to express themselves in a non-judgmental environment gives them the confidence to make informed decisions about topics such as their relationships, childbearing and education.

The programme will continue to support the Government in implementing the Safe Schools Initiative, which is aimed at ensuring children and adolescents are protected from sexual violence in and around schools, and at providing gender-responsive pedagogical training for junior high school teachers in science, mathematics, English and social studies.

During a gender-transformative assessment workshop run by the Global Programme, the Government and civil society partners identified actions to make education systems more adolescent girl-friendly and gender-responsive. Data from the Education Information Management System and the District Health Information Management System have indicated that most adolescent girls who received antenatal care at health facilities did not go back to school after having their babies. To address this, it was agreed during the workshop to further strengthen referral pathways, especially between health and education sectors, and to develop interoperability among relevant information management systems.

The programme recognizes the vulnerability of adolescent girls in migrant communities, and will continue to link them to economic opportunities; increasing their engagement in vocational training, especially for non-traditional skills (such as carpentry and driving). Furthermore, the programme will spend more on providing scholarships and educational bursary packages that include school fees, uniforms and sanitary pads, especially for the most marginalized girls who are pregnant, mothers, married or widowed, enabling them to go back to school or receive vocational training.

Enhancing the family and community environment

“...I had no idea cooking was an interesting task even for a male: I have learned how to build a fire and fry yam during the implementation of the PASS Project. As a young boy, I feel useful to my mother, which makes me proud of myself. Together with my brother, I helped my mother early in the morning to build a fire and sell a few pieces of yam before leaving for school. My dream is to become a chef and I intend on making my dream come true.”

— Saeed, 13, student in Nyankpala D/A primary school and participant in the PASS project

The Global Programme continued to partner with the Government and CSOs to target more communities and individuals with social and behaviour change interventions that address child marriage, adolescent pregnancies and gender inequality. UNICEF and the United Nations Population Fund (UNFPA) continued to support the use of standard tools, such as the Child Protection Community Facilitation Toolkits and the Child Marriage Advocacy Toolkit, aimed at triggering social and behaviour change. The agencies organized the structured engagements of adolescent boys and men via safe spaces and, in some areas, they complemented this by using community information centres and radio stations to disseminate key messages.

Overall, the programme engaged 590,900 people in 35 districts through community dialogues on a range of issues that promote a safe and protective environment for adolescent girls, including positive attitudes and practices aimed at addressing child marriage. The Global Programme also contributed to the scaling-up of community engagement interventions through the rollout of the Child
Protection Community Facilitation Toolkits, training 352 community facilitators and regional level government officers (156 female and 196 male) in 60 new districts, bringing the total number to 160 districts that support the crucial components of the Integrated Social Service (ISS) programme. The Global Programme, by training the community facilitators, contributed towards the engagement of, and dialogues with, an additional 1,097,378 people through sessions supported through complementary funding.

My name is Busah Noah, and I am a student of Mafi Dugame D/A [Junior High School, JHS] in the central Tongu District. I am in JHS 3 and 18 years old. I was one of the beneficiaries of the 2021 adolescent mentorship and empowerment programme that was held in Ho [a city in Ghana]. The programme was very educational and has changed my lifestyle. Before I was selected to be part of the mentorship camp, I did not know that touching girls on their buttocks was bad. My friends and I used to hang out at night and chase after girls in the neighbourhood, because it was a trending behaviour. After the camp, I stopped such behaviour. I took up the challenge to contest for the position as school prefect and won. This experience changed my life. I had to do away with all my friends and walk with new ones to be a good example to my peers. During the ‘Social Leaders Future Club’ on Fridays, I share with my mates lessons taught at the camp.”

The engagement of men and boys is a critical component of the Global Programme and has proven to be effective in promoting the protection of adolescent girls in Ghana. UNICEF, in partnership with NORSAAC, mobilized adolescent boys to form ‘I am for Girls Groups’. These are safe spaces to support boys in leading intergenerational dialogues with men in their communities. Addressing harmful and discriminatory social norms against women and girls is also carried out via radio discussions. Men from Model Gendered Households, including the male mentors, were also engaged on combating harmful gender norms and related topics. UNFPA, in partnership with International Needs Ghana (INGH) engaged men and boys through the PASS programme to address harmful masculinities and gender norms and enhanced their capacity to become Champions of Gender Equality and Advocates against Child Marriage and SGBV. Overall, 3,980 boys and 4,461 men were engaged in gender-transformative programmes that promote healthy relationships, positive masculinities and gender equality.

The programme in Ghana uses traditional and social media channels to scale up messaging on child marriage, the rights of adolescent girls, and gender equality. However, the weekly episodes of the Girlz-Girlz television talk show, which draws big viewing figures, was temporarily suspended in 2022 and rescheduled for 2023 by the Ministry of Gender, Children and Social Protection. Instead, the Global Programme used other channels like the Ghanaians Against Child Abuse social media platforms. In 2022, 290,987 individuals were reached by traditional and social media with messages on child marriage, the rights of adolescent girls and gender equality.

The Global Programme further engaged 4,216 traditional and religious actors, leading to them committing to use their platforms to educate their members and followers on child marriage as well as to develop and implement local by-laws to end child marriage and related protection issues in their communities.

To tell you the truth, I had no idea I could help my wife take care of the children. [But] my wife and I sat and talked about issues affecting our home. My wife is a seamstress and I help her take care of our last child when she is busy. This has reduced the burden on my wife, and even my son can light a fire for my wife to come and cook for the family.”

— Rahaman is part of the Gender Model Family of the PASS Programme together with his wife Lamnatu

Challenges, lessons learned and next steps

Working with adolescent boys and parents/caregivers in addressing child marriage, adolescent pregnancies and other protection issues affecting girls, has yielded results, particularly in addressing the social and gender norms that perpetuate gender inequalities and associated violence and abuse. For example, intergenerational conversations between adolescents and their caregivers were helpful in delving into uncomfortable conversations
within households to promote positive parenting and good communication as well as challenging discriminatory gender norms and cultural practices harmful to the development of adolescent girls.

Entrenched cultural beliefs and norms and resistance towards change continue to be a challenge, and changing beliefs and attitudes require constant awareness-raising and education over a prolonged period. Although the engagement of men and boys was prioritized in 2022, the programme lacks specific content and toolkits to guide facilitators on how to navigate such conversations aimed at promoting positive masculinities and changing toxic narratives that perpetuate gender inequality and violence against women and girls. Development of such tools is a priority.

Data-collection on community engagements has been strengthened with the design and roll out of the child protection mobile application toolkit developed by the Metropolitan, Municipal and District Assemblies through the integrated social services initiative. However, dedicated time and capacity are needed to support tracking, follow-up and reporting.

The programme realized the importance of continuous engagement with identifiable groups in targeted communities, including traditional and religious groups. This provides support for initiatives which build on community structures to ensure sustainability.

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**Strengthening systems**

Child protection, education, and health systems, including information management were strengthened for effective and efficient delivery of results for adolescent girls through support for the training of service providers and the roll out of national tools that included the Intersectoral Standard Operating Procedures for Child Protection and Family Welfare, Case Management SOPs for Children in Need of Care and Protection, the Child Protection Community Facilitation Toolkits, and the standards and guidelines for engaging young people in health services.

In 2022, UNICEF collaborated with the Ghana Education Service, through the Science Education Division and the Girls’ Education Unit, to strengthen the capacities of 181,660 teachers in 10 districts and 60 District Teacher Support Teams’ members, including District Science Coordinators, School Improvement Support Officers and other schedule officers who provide monitoring, supervision, coaching and mentoring support to teachers and other school staff in their respective districts.

A total of 2,095 decentralized social service workers received ISS training, including virtual orientation, virtual one-week training and in-person coaching sessions, while the capacity of 207 service providers across 10 regions was strengthened for the provision of coordinated SGBV response services as part the roll out of the Minimum Services Package for Women and Girls Subject to Violence.

UNICEF, through the Global Programme, continued to provide technical and financial support to the Ghana Health Service in implementing the ‘Safety Net’ programme. This reached about 18,425 pregnant girls and adolescent mothers (350 of them aged 10-14 years and 18,075 aged 15-19 years) with gender- and age-responsive prevention and care services, including maternal and newborn health care and services addressing SGBV. Some 49,725 adolescent girls (978 aged 10-14 years and 48,747 aged 15-19) were provided with preventive and response services including reproductive, maternal, newborn and postnatal counselling in four targeted regions. The safety net programme was scaled up to an additional 394 health facilities across 44 districts in the four regions to provide gender-responsive sexual and reproductive health services to adolescents and young people. Some 287 service providers (87 males and 200 females) were trained to deliver adolescent-friendly and youth-friendly health services, including a social safety net, with 330 service providers (164 males and 166 females) being trained on the...
safety net electronic register (e-tracker) for effective data capture and utilization. As part of the efforts to improve access to sexual and reproductive health services through advocacy and information-sharing across all four implementing regions, 146 adolescents (32 males and 114 females) were trained as champions/peer support persons. Peer review meetings were also organized at the subnational level to review the progress of implementation, and to share lessons learned and best practices.

UNFPA, through the Global Programme, supported the Ghana Health Service to enhance the capacity of service providers to improve the provision of adolescent-friendly and youth-friendly health services. The programme supported the Adolescent Health and Development programme to roll out standards and guidelines for engaging young people in health services, in addition to enhancing the capacity of service providers on e-lessons developed for online facilitators on adolescent contraception, and updating models of the Adolescent Health Manual. The Adolescent Health and Development programme uses a hybrid strategy to train health service providers. A total of 28 service providers were trained as trainers to support online training and 1,507 service providers have registered for the course, out of which 482 have completed it. In addition, the capacity of 24 young people was enhanced as lay counsellors (to complement the 10 nurses certified as cybercounsellors) to serve as peer facilitators/mentors to provide sexual and reproductive health (SRH) counselling services. A total of 4,074 adolescents (3,133 girls and 941 boys) were provided with adolescent-friendly and gender-responsive health services through the Adolescent Health Development programme.

Challenges, lessons learned and next steps

To work towards a more cost-efficient training approach, UNICEF also proposed a hybrid training method for the social service workforce, including virtual orientations on Integrated Social Services (ISS) and Social Welfare Information Management Systems. Government counterparts were initially resistant to this approach, which resulted in considerable delays. However, following advocacy and technical meetings, the Government ministries agreed to proceed, as it was found to be more cost-effective with the potential for scale-up.

Inadequate funding in the health sector to support home visits and outreach services by community health nurses has hampered the delivery of services to those who cannot access facilities. More support is required for health care professionals
to increase the reach and scale of community outreach services, in communities and schools, for adolescent girls at risk of child marriage and adolescent pregnancy, including contraceptives.

As part of the Adolescent Health and Development programme, 10 health service providers across the 16 regions of Ghana have been trained and certified by the Ghana Psychological Council to practice as cybercounsellors. These counsellors provide youth-friendly online counselling to adolescents across the country and provide referral services. However, currently, there is an inadequate number of cybercounsellors to meet the growing number of adolescent clients.

Although adolescents are becoming increasingly aware of their right to good quality health services and to demand for these services, there is still a need to address sociocultural barriers to SRH programming and service delivery to adolescent girls. The programme intends to refocus mainstreaming gender issues in service delivery and creating more outreach points to improve access to SRH services.

Strengthening systems’ resilience and shock responsiveness is more important than ever, due to the economic deterioration and the Sahel crisis in the region. This can be done by building on the lessons learned from the response to COVID-19. UNICEF developed an internal child protection emergency preparedness plan for the Sahel crisis, to effectively support the Government and relevant partners to improve emergency preparedness.

**Building partnerships**

The Global Programme in Ghana continued to partner with state and non-state actors across all sectors to address challenges and risks facing migrant girls in five regions (Greater Accra, Ashanti, Bono-East, Upper-East and Northeast) to equip them with adequate information and support and reduce their vulnerability to teenage pregnancies, SGBV and harmful practices including child marriage. The integrated model uses a multidimensional approach to engage the marginalized girls and enhances their knowledge on SGBV and SRH and to build legal literacy and entrepreneurial skills.

The interventions have greatly transformed the lives of these marginalized adolescent girls, mainly kayayei and adolescent mothers. The programme reached 7,362 girls in 2022; of these 2,232 were trained in sewing, cosmetics, root and tuber processing, confectionery, leather works and batik tie and dye and have been introduced to cooperatives to run businesses to support their livelihoods. Enterprise Development Centres continued to also be a safe space for adolescent girls to access SRH and SGBV services in addition to livelihood training.

**Investment in and support to youth-led, women-led and feminist CSOs**

Partnerships are important for advancing gender-transformative programming and, recognizing this, in 2022, the Global Programme assessed the extent to which the CSOs were implementing gender-transformative approaches – based on the partners identified as focusing on promoting girls’ and women’s rights from the previous year (five in Ghana). The assessment aimed to guide UNFPA and UNICEF on how better to identify and support opportunities to advance gender-transformative approaches within the Global Programme.
The assessment was conducted by building on information from various online resources, including the CSOs’ websites, reviews of available annual reports, analysis of strategy documents, social media pages, descriptions and commentary about the CSOs from external parties (for example funders, coalitions, or networks), and news articles.

The programme in Ghana has a decent spread of gender-responsive organizations, and those that are ranked as gender-sensitive require only minor changes. Gender-responsive organizations adopt a gender-sensitive and rights-based approach in their access throughout their work and have sought to address gender inequalities in their work and within their organizational structures. NORSAAC, whose aim is to mobilize young people to discuss and find ways of addressing sexual and reproductive health issues in schools, has indicated that it has zero tolerance for abuse and exploitation of its staff, partners and associates and commits to preventing circumstances that may negatively affect well-being. A core part of the organization’s vision and mission is to create a healthy and empowered society for everyone by working with networks of women, youth, children and excluded groups to strengthen their agency.

Challenges, lessons learned and next steps

Gender-sensitive organizations are struggling at the structural level. For example, women are absent when it comes to strategic decision-making processes. It is important that organizations reflect on their internal gender dynamics to make a meaningful impact in their surrounding communities. All organizations currently ranked gender-sensitive can likely become gender-transformative through gender training and analysis. Targeted support on policy development and strategic development, as well as some guidance on monitoring and evaluation tools, are recommended. Similarly, workshops on the value of a gender-transformative approach will likely improve the organizations’ rankings as a more nuanced understanding of gender-transformative approaches would be infused into their work.

Facilitating supportive laws and policies

In 2022, UNFPA and UNICEF Ghana continued to provide financial, technical and coordination support for ministries, departments and agencies at national and subnational levels with a mandate to implement specific laws and policies. The National Operational, Monitoring and Evaluation Plan has been reviewed, updated for 2023-2024 and validated. The Domestic Violence Secretariat (under the Ministry of Gender, Children and Social Protection), is the Chair of the National Coordination Function on Ending Child Marriage. It has overseen a gender-transformative assessment and a maturity assessment of policies on harmful practices, to make the plan more gender-transformative and ensure the alignment with global standards. The Gender-Transformative Accelerator (GTA) tool workshop was held to strengthen national capacity and identified key actions by the Global Programme, Government and NGOs at national and subnational levels. With these combined efforts, a two-year GTA plan has been developed, including action points, which was incorporated into the National Operational and M&E Plan 2023-2024. One indicator to assess how mature systems are to respond to the needs of adolescent girls has been incorporated into the plan, whose progress will be assessed by the maturity model.

The Global Programme in Ghana supported the Ministry of Gender, Children and Social Protection in organizing stakeholder meetings every six months to track the implementation of the Adolescent Pregnancy Strategy 2018-2022. The meetings highlighted progress in some areas as well as major gaps and challenges that require increased attention due to the effects of the COVID-19 pandemic. The meetings also provided a platform for stakeholders to share ideas on successful approaches that can be replicated.
The Global Programme in Ghana supported the quarterly Domestic Violence Management Board meetings. These meetings brought together members to identify and discuss current issues of domestic and sexual and gender-based violence in Ghana, issues pertaining to the Domestic Violence Victim Support Fund and current cases at the Orange Support Centre. These meetings contributed to the release of GHS1.5 million (US$134,000) into the Domestic Violence Fund from the Ministry of Finance. Additionally, a fundraising committee was formed to mobilize additional funds into the Domestic Violence Victim Support Fund.

In 2022, the Global Programme directly supported 35 districts and, with other partners, a total of 160 districts, for the delivery of integrated social services to vulnerable children, adolescents and their families, including adolescent girls at risk of, or affected by, child marriage. Through financial and technical support to the National Development Planning Commission, all 160 districts were supported to integrate SDG target 5.3 and its related indicators into their medium-term development plans which informed the development of their annual action plans. This has put indicators on child marriage at the centre of these districts’ annual progress reports. It made it mandatory for these districts to incorporate interventions, such as the ISS programme, to address child marriage in their annual action plans.

The public policy maturity model

Elimination of harmful practices such as child marriage requires the integration of strategic approaches, processes, systems and information. UNFPA and UNICEF recognize the role national action plans play in strengthening policy coherence to achieve this. Lessons from the Organization for Economic Cooperation and Development peer review process emphasize that the plans need:

- political commitment and policy statements
- policy coordination mechanisms
- systems for monitoring, analysis and reporting.

UNICEF has developed and tested a policy maturity model and tools for assessing public policies to end harmful practices and achieve SDG 5.3 by 2030 in 12 countries (Bangladesh, Burkina Faso, Ethiopia, Ghana, India, Lebanon, Mozambique, Nepal, Niger, Sierra Leone, Uganda and Zambia).

The maturity model provides a framework for key national stakeholders to review and assess national policy approaches and systems for

- eliminating and preventing female genital mutilation (FGM) and child marriage
- identifying priorities or critical investments
- building consensus around the interventions.

The model is structured around six intermediate outcomes and different subdomains that are defined by distinct levels of maturity i.e., weak-building, average-enhancing, good-integrating; and excellent-mature (see Figure 4).
TABLE 2: Snippet of the policy maturity model

<table>
<thead>
<tr>
<th>Intermediate Outcome</th>
<th>Sub-Domains</th>
<th>Score</th>
</tr>
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<tbody>
<tr>
<td><strong>Governance and Coordination</strong></td>
<td>A1: Political Commitment</td>
<td>✔</td>
</tr>
<tr>
<td></td>
<td>A2: Coordination structures</td>
<td>✔</td>
</tr>
<tr>
<td></td>
<td>A3: National Action Plans</td>
<td>✔</td>
</tr>
<tr>
<td><strong>Policy and Legislation</strong></td>
<td>B.1: Legislation, policies and implementation mechanisms</td>
<td>✔</td>
</tr>
<tr>
<td><strong>Engagement and Participation</strong></td>
<td>C1: Independent complaint mechanism exists for children and women</td>
<td>×</td>
</tr>
<tr>
<td></td>
<td>C2: Civil Society Engagement, including women and children</td>
<td>✔</td>
</tr>
<tr>
<td></td>
<td>C3: Community based mechanisms for Harmful practices prevention</td>
<td></td>
</tr>
<tr>
<td><strong>Financing &amp; HR</strong></td>
<td>D1: Financing of harmful practices services</td>
<td>✔</td>
</tr>
<tr>
<td></td>
<td>D2: National budget establishment</td>
<td>×</td>
</tr>
<tr>
<td></td>
<td>D3: National Budget execution</td>
<td>×</td>
</tr>
<tr>
<td></td>
<td>D4: National Budget amount</td>
<td></td>
</tr>
<tr>
<td></td>
<td>D5: National Budget monitoring and review</td>
<td>×</td>
</tr>
<tr>
<td></td>
<td>D6: Human Resources</td>
<td>✔</td>
</tr>
<tr>
<td><strong>Access to Services</strong></td>
<td>E1: Availability of Standard Operating Procedures and/or Protocols for harmful practices services</td>
<td>×</td>
</tr>
<tr>
<td></td>
<td>E2: Understanding and articulation of harmful practices system</td>
<td>✔</td>
</tr>
<tr>
<td></td>
<td>E3: Modelling testing and scaling of harmful practices services</td>
<td></td>
</tr>
<tr>
<td></td>
<td>E4: Availability of harmful practices services, case management a and referral systems</td>
<td>✔</td>
</tr>
<tr>
<td><strong>Data collection, M&amp;E</strong></td>
<td>F1: Administrative data systems and monitoring to routinely generate data on FGM</td>
<td>×</td>
</tr>
<tr>
<td></td>
<td>F2: Data security and governance</td>
<td></td>
</tr>
<tr>
<td></td>
<td>F3: Research and surveys</td>
<td></td>
</tr>
</tbody>
</table>

The benchmarks for each level of maturity have been defined and require certain priorities, processes, and results to be achieved for each subdomain, and can be contextualized by country. Feedback from the testing emphasized the role of the model as:

- a useful advocacy tool
- something that builds Government accountability and action towards elimination of harmful practices
- a tool to review and track the implementation of a national action plan.

On average, overall country ratings on a 4-point scale ranged from 1.8 (weak-building in Bangladesh) to 3.0 (good-integrating in Zambia). Financing and human resources (rating 1.3) emerged as the area where countries were rated the least, while governance and coordination (rating 2.7) were rated highly.

FIGURE 4: Policy maturity assessment for Ghana

Challenges, lessons learned and next steps

The Ministry of Finance committed to allocating three per cent of its recurrent budget to ending child marriage coordination functions in 2021 – a commitment which has not been allocated in the budget. There is, therefore, need to better understand the current situation regarding the budget allocation of three per cent of its recurrent budget for the National Coordination Function for Ending Child Marriage as well as to identify specific barriers that hinder the actual allocation to the Domestic Violence Secretariat who coordinates the function.

The National Strategic Framework on Ending Child Marriage 2017–2026 included a costing framework for 2017–2018, however, it has never been updated. The framework could be updated
in line with the National Strategic Framework to identify any financial gaps to achieve the overall targets up to 2026.

The Government allocated part of its budget to the Domestic Violence Fund to support survivors of SGBV and child marriage. However, 2022 was the first time the money had been released. Nevertheless, disbursement remains a challenge. Service providers in the field are consulted less on budget issues. Joint advocacy efforts are required to ensure the fund actually benefits the survivors.

Insufficient national capacity, especially for the Domestic Violence Secretariat, remains a challenge when monitoring and tracking the progress of the National Strategic Framework. The Child Marriage Information Portal, managed by the secretariat, can be improved by integrating the dashboard to track and monitor the progress of the framework in line with the existing reporting format in the Operational M&E Plan.

Generating and applying data and evidence

The Global Programme in Ghana invested significantly in increasing national capacity to generate new knowledge and evidence regarding the challenges faced by adolescent girls in Ghana, including child marriage. It was intended to enable evidence-based advocacy for enhanced legal and political response to effectively support those who are at risk of, and affected by, child marriage.

The study on the impacts of COVID-19 on adolescent girls was completed by UNICEF in 2022 and is being edited and designed for publication in 2023. The study’s findings highlight the impacts of the COVID-19 pandemic and school closures on adolescent girls, including heightened risks of child marriage and unintended pregnancy, as well as restricted access to, and utilization of, services such as adolescent sexual and reproductive health services.

UNICEF is conducting a study on the causes of sexual violence in partnership with the University of Edinburgh and the Research, Statistics and Information Management Department under the Ministry of Gender, Children and Social Protection. Preliminary findings have indicated that young women in Ghana who were married under the age of 15 are 9 times more likely to have experienced sexual intimate partner violence (IPV) in the past year, compared with women who were not married that young – the strongest link between child marriage and sexual IPV in countries with comparable data in Africa. The strong link between being married as a child and experiencing sexual IPV during young adulthood also holds true for women who wed between the ages of 15 and 17 years – with women in Ghana being at greatest risk among African countries with comparable data.
The UNICEF Ghana Child Protection team is conducting a study on social protection and child marriage in collaboration with the UNICEF Ghana Social Policy and Inclusion team, with financial and technical support from the UNICEF West and Central Africa Regional Office. A gender analysis of social and behaviour change programming for ending child marriage is also being conducted by UNFPA and UNICEF in collaboration with the Strategic Technical Assistance for Research (STAR) initiative.

UNFPA has partnered with the University of Cape Coast to conduct a study on cohabitation in the central region where there are a high number of adolescent pregnancies. Cohabitation has existed side by side with the institution of marriage for generations, as it has traditionally been regarded as a preparatory step towards marriage. Anecdotal evidence suggests a rise in cohabitation among students at tertiary institutions, including the University of Cape Coast (UCC), and among minors in communities with a high incidence of adolescent pregnancies (Coastal Regions of Ghana) who are not necessarily cohabiting in preparation for marriage. There is evidence that these relationships can lead to gender-based violence (GBV), child marriage, adolescent pregnancy, a drop in school participation, and mental health problems. There is, however, little known about the social dynamics and depth of cohabitation, or the support required by cohabitants in times of need. UNFPA has supported the university’s Centre for Gender Research, Advocacy and Documentation and the College of Humanities and Legal Studies to conduct a study of cohabitation among students and young people from the Global Programme’s target communities in central Ghana to inform policy and programming.

Lastly, the programme supported the analysis of the programmatic approaches related to gender-transformative change using the Gender-Transformative Accelerator tool. In addition to analysing the level of ownership of strategies and their contributions to accelerate change, the gender-transformative assessment made it possible to develop a road map to accelerate progress.

**Strengthening gender-transformative programming to address harmful practices in Ghana**

A gender-transformative accelerator (GTA) workshop was held in September 2022, attended by the Honourable Lariba Zuweira Abudu, Minister Designate for the Ministry of Gender, Children and Social Protection, with the active participation and engagement of technical staff from UNICEF, UNFPA, Government and CSOs. A big part of the workshop was reactivating the activities of the coalition to end child marriage in Ghana and to strengthen programming capacity.

The workshop focused on identifying opportunities for shared action among the coalition members. The GTA process aims to incorporate gender-transformative elements into existing workplans, so the gender advocates and other key stakeholders were asked to identify crucial areas within their existing workplan where gender-transformative approaches can have both an immediate, and potentially amplified, impact. Around 30 Government and NGO partners across sectors and levels participated and discussed how Ghana can further integrate GTA into programming in the three key priority areas:

- adolescent girls’ agency, skills and empowerment
- engagement of men and boys
- adolescent girl-responsive service systems.

Participants prioritized three types of actions to move ahead within these areas of focus:

- scale up adolescent girls’ skills, agency and empowerment
- address masculinities and engaging boys and men
- policy and structural change through institutional partnerships and systems-strengthening, facilitate more conversations.

**Challenges, lessons learned and next steps**

UNFPA and UNICEF, in partnership with the other United Nations agencies and development partners, have been providing technical and financial support to the Ghana Statistical Service to conduct the Demographic Health Survey in 2022. It will help better strategize the programmatic approach to ending child marriage, including for the Global Programme Phase III. However, within the Global Programme, one of the major challenges is the lack of funds to generate data and evidence demonstrating the changes the programme has made.