

Child Marriage in Niger: A Strategy Note

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1. Introduction and background

Niger is one of 13 countries participating in a UNICEF project to carry out country studies, develop strategy notes and promote the exchange of learning on child marriage in West, Central, Eastern and Southern Africa. The purpose of the project is to:

- Develop a methodology for analysing country situation(s) and identify the highest-impact areas for investment to end child marriage.
- Support selected UNICEF country offices to understand the child marriage trends, drivers and options for accelerating and amplifying efforts to end the practice in their contexts.
- Establish and facilitate a platform for South-to-South information and knowledge exchange on issues related to child marriage in West, Central, Eastern and Southern Africa.

The country strategy note reviews available evidence and programme experience related to child marriage, including the Global Programme to End Child Marriage. It aims to:

- Strengthen the evidence on what works and what does not work in various country contexts to end child marriage.
- Provide an overview of the child marriage situation in Niger: trends and patterns; drivers of child marriage; political, economic and humanitarian context.
- Provide guidance on the contextualization of country strategies and on the fit between the global framework (theory of change) of the GPECM and country-level efforts to end child marriage.
- Present a list of priority interventions and strategies, including shifts in policies and programming that have the potential to achieve greater results towards ending child marriage.
- Specify the investments needed to implement the strategic interventions.
- Identify capacities and capacity gaps among implementing agencies, including the UNICEF country team, and needs for additional technical expertise.
- Provide country and regional programme staff (child protection, education, social and behaviour change, gender, social policy) and partners with a common basis for reflection and actions to review existing strategies and improve interventions to end child marriage. The note allows new staff and partners to get on board quickly and easily.



Key aims and considerations of the country strategy process (from inception report):

- Contextualise country strategies and, depending on available data, look beyond the national level to understand subnational and community realities. Ideally, this will require disaggregated data to compare subnational differences in the patterns and trends in child marriage, and to identify context-specific strategic interventions.
- Compare different programme approaches (and levels) to identify interventions that have the greatest potential to achieve large-scale results.
- Go beyond child marriage and pay greater attention to sexual debut, pregnancy and childbirth among adolescent girls and how these experiences are sequenced and impact each other.
- Consider marriage arrangements (arranged by family with and without input from girl, initiated by girl herself, etc), marriage types (cohort marriages, polygamy, informal unions, etc.) and marriage transactions (bride wealth, dowry, etc.) and how they affect child marriage socially, demographically and economically.
- Pay particular attention to the marriage of girls below the age of 15 years since they tend to be those most vulnerable and progress in the decline in very early marriage (10-15) has stalled in many contexts.
- Bridge the gaps in research and evidence between national and subnational statistical data, marriage practices and arrangements, and the realities of adolescent girls in their communities.

This report focuses on the broad strategic level, rather than going in-depth into the work done at the operational level at the community.

1.1 Methodology and process of developing the strategy note

Key questions for the country study:

- What is the situation of child marriage in the country?
- What are the main causes and drivers of child marriage and teenage pregnancy?
- What are the key challenges and opportunities for ending child marriage and preventing teenage pregnancy?
- What are the most promising large-scale interventions and strategies to prevent child marriage and teenage pregnancy in the country context?



Steps of developing the country strategy note:

A. Background on child marriage and adolescent fertility and their drivers based on a review of documents:

- Step 1: Get an overview of the political, economic and humanitarian situation
- Step 2: Analyse trends and patterns of child marriage and fertility
- Step 3: Analyse and identify the priority drivers of child marriage

A. Policies and programming to end child marriage based on a review of documents:

- Step 4: Review research, evaluations and programme documents related to the prevention of child marriage and fertility.
- Step 5: Get an overview of legislation, policies and programming to end child marriage, including the GPECM
- Step 6: Interview key informants at country level to get a more in-depth understanding of different aspects of programme implementation at community, service provision and policy levels.

B. Conclusion and recommendations:

- Step 7: Draft report and recommendations.
- Step 8: Revise and finalise the report based on feedback from UNICEF country and regional offices

1.2 Comments on data and evidence

Note on documents: Niger has many research and policy documents related to child marriage. They provide a large amount of information about the many challenges that prevent an acceleration in the decline of child marriage. These reports also provide many recommendations. Most programmes to end child marriage in Niger focus on community engagement and on social norm change. Only very few of these programmes have been evaluated. The DHS is the only source of data on child marriage trends and patterns in Niger (see below for a discussion of the ENAFEME survey of 2021).

Limitations and gaps in data: This report is based on documents and a limited number of key informant interviews. The report provides a broad overview of the situation of child marriage and fertility in Niger. Niger is a large and diverse country. The report does not account for the many differences between Niger's regions because most data and reports are for Niger as a whole and examining regional differences go beyond the scope of this study. In parallel to this report, a team of consultants has been working on the review of the national strategy to end child marriage and the draft of a new strategy. The documents developed by the team of consultants have informed this strategy note and cover many of the same aspects of this child marriage country strategy note. Every effort was made to avoid duplication.

Acknowledgements: I would like to thank Katherine Wepplo and Salmey Bebert and their colleagues at the UNICEF country office in Niger for their support and for providing documents, additional information and comments. The key informants (see list in Annex) added a wealth of information that helped make sense of the large body of literature related to child marriage and fertility in Niger. I would like to thank Catherine Muller and her colleagues at UNICEF and UNFPA WCARO for their comments. I would like to thank my colleague Gillian Mann for her helpful comments on the draft document.





2. Country context

2.1 Situating Niger

Niger is a landlocked Sahelian country with a population of about 26 million. Despite economic growth driven by the expansion of extractive industries, and recent progress in reducing poverty, broad-based development has been hampered by poor infrastructure, extremely low education levels, and multiple concurrent climatic shocks such as droughts and floods. Economic progress is being further challenged by the highest fertility rate in the world (7 children per woman), which is set to double the population over the next twenty years. These hurdles, coupled with the increasing presence of violence, crime, and extremism, particularly along the border regions with neighbouring Mali, Burkina Faso, and Nigeria, put Niger at risk of a reversal of its recent development gains. Niger is also grappling with a significant influx of refugees fleeing conflicts in the region, particularly in Nigeria and Mali. The military coup in July 2023 and the subsequent freezing of bilateral and multilateral donor support to the government of Niger has further constrained the country's ability to finance and implement key development programmes and services.

TABLE 1: NIGER POPULATION, GDP, POVERTY RATE AND LIFE EXPECTANCY

Indicator	2022
Population, million	26.2
GDP per capita, current US\$	654.3
International poverty rate (\$2.15)	50.60%
Life expectancy at birth, years	61.5



Niger's economy depends on agriculture and over 80 percent of Nigeriens rely on subsistence agriculture to meet their daily needs. Livestock is exported particularly to Nigeria, Libya and to the Maghreb countries. The mining industry is concentrated in the North of the country and is dominated by the exploitation of uranium, with uranium, coal and gold mined industrially. Niger is the world's fourth biggest producer of uranium, which accounts for at least 70% of the country's exports and contributes to around 5% of GDP. Other substances mined in the country are tin, gypsum, and phosphates.

The region's increasingly frequent climatic shocks, such as droughts and floods, lead to poor harvests and regular food shortages. The country's annual economic growth has been robust but volatile, ranging between 2.4 and 10.5 percent from 2011 to 2019. This growth has been associated with limited improvements in productivity, high population growth (averaging 3.9 percent over 2010-19), and climate shocks. Per capita GDP remained at US\$640 in 2022, towards the bottom of the world's income distribution. Around 50 percent of the population lives in extreme poverty, aggravated by gender disparities. After the COVID-19 pandemic and the global economic downturn, the country has continued to be shaken by natural disasters, worsening regional and domestic insecurity, and has suffered from increased costs of living overall, driven an increase in the price of food and fuel. Deteriorating regional security affects important agricultural areas, and addressing insecurity is key to improving economic performance, public finances, service delivery, and access to markets. Niger's economic outlook is subject to a high degree of uncertainty and multiple risks, owing to intensified climate change-related shocks, deteriorating security conditions that could drain additional resources, a slowdown in global oil prices and/or delays in production expansion, and delays in key structural economic reforms and complementary investments.



2.2 Humanitarian situation

Niger continues to face a combination of crises: armed conflicts, climate-induced disasters, nutritional emergencies and epidemics. These crises are being exacerbated by political instability following a military coup in July 2023. Armed conflicts are primarily impacting residents in Diffa, Maradi, Tillabéri and Tahoua regions and have displaced more than 660,000 people. At the same time, community resilience is low due 44 percent of people living in extreme poverty. Forced displacement triggered by conflict, floods and drought has placed 4.3 million people, including 2.4 million children, in need of humanitarian assistance in 2024. Insecurity makes it hard to provide humanitarian assistance to many of those in need. Political and economic sanctions put in place following a military coup in July 2023 have worsened this situation: restricted access to banking services and trade have led to price increases for essential goods, making it difficult for families to meet their basic needs.



Additionally 444,290 students are in need of emergency education assistance. As of 1 September 2023, 987 schools remained closed due to insecurity, mainly in Tillabéri Region, where 93 percent of schools were closed. The security crisis in the country has also led to an increase in grave violations committed against children in the Niger, including abduction, killing and maiming, and 1,085,458 children require child protection services. Niger remains a significant transit hub for migration to Europe, with thousands of people passing through Agadez region annually. Many migrants, among them unaccompanied and separated children, arrive in precarious situations and once arrived face dangers and exploitation.



3. Child marriage and fertility trends

3.1 Data quality

The last full Demographic and Health Survey for Niger is from 2012 and is available on the DHS website. For 2021, the DHS website lists the Malaria Indicator Survey (MIS, Enquête sur les Indicateurs du Paludisme au Niger) as an official DHS publication.

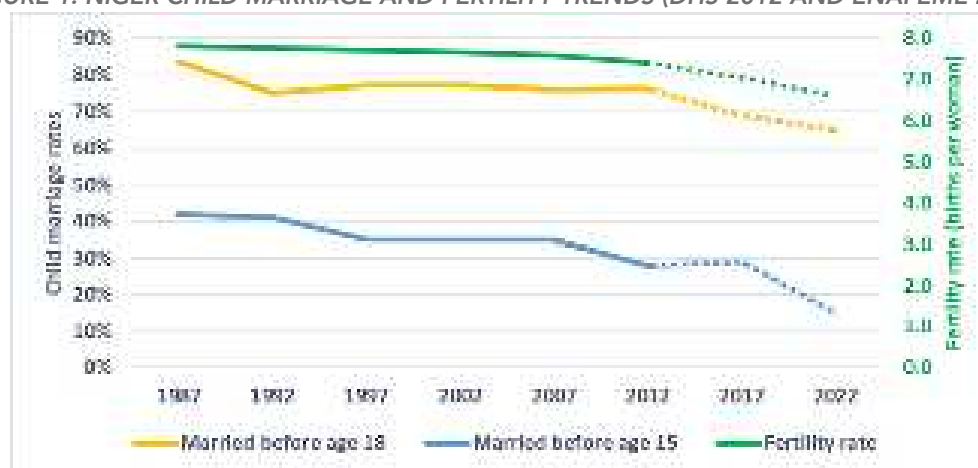
The 2021 Enquête Nationale Sur La Fécondité Et La Mortalité Des Enfants De Moins De Cinq Ans (ENAFEME) is not listed on the official DHS page for Niger and is only available for download from the website of the Institut National de la Statistique du Niger. Due to the ongoing conflict in Niger, ENAFEME could not be conducted in all sampling sites. The excluded population represents 3.3 percent of Niger's total population and ENAFEME is considered statistically representative for Niger as a whole. The Government of Niger and international organizations represented in the country (including UNICEF, UNFPA and the World Bank) are considering the published ENAFEME report as official data for Niger. However, UNICEF HQ and the regional office for West and Central Africa are not using ENAFEME data due to several data quality issues and inconsistencies.

While the concerns about the quality of the ENAFEME data are valid, we do not know to what extent the data are inaccurate. We know that the overall fertility rate and the rate of under 15 child marriage have declined over the past thirty years. We cannot be certain to what extent these rates have declined since 2012. This child marriage strategy note draws almost exclusively on the DHS 2012 and the MIS 2021 data; where ENAFEME 2021 data have been used, this is clearly indicated.

3.2 Child marriage data

Niger has the highest under-18 child marriage rate and one of the highest under-15 child marriage rates in the world. According to the published DHS data, the under-18 years child marriage rate did not change between 1992 and 2012 and remained at 76 percent. Similarly, there was little decline in the fertility rate, from 7.8 in 1992 to 7.4 in 2012. The 2021 ENAFEME shows a drop in the overall fertility rate from 7.4 in 2012 to 6.6 in 2022, as well as in the under-18 (from 76% to 65%) and under-15 (from 28% to 15%) child marriage rates. The reported decline was particularly steep for marriages among under 15-year-old adolescent girls. These reported drops are shown as dotted lines, since the ENAFEME data have not been accepted globally.

FIGURE 1: NIGER CHILD MARRIAGE AND FERTILITY TRENDS (DHS 2012 AND ENAFEME 2021)

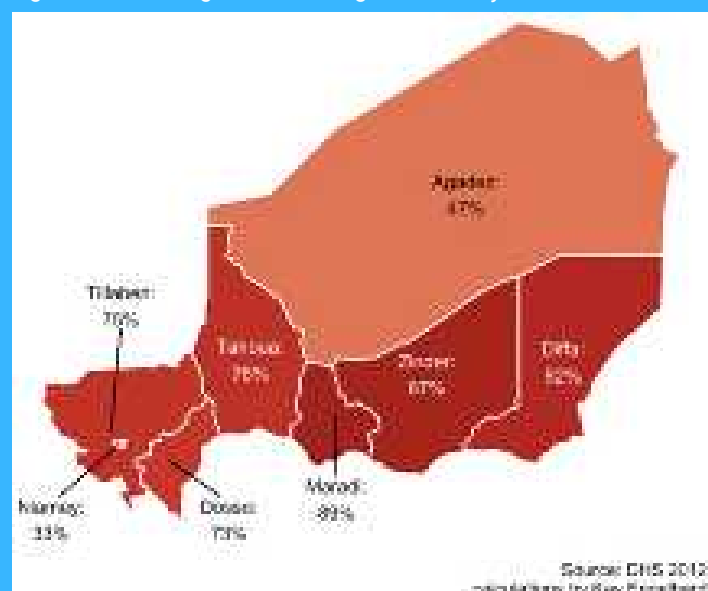


If we assume that the 2021 ENAFEME data are reliable, child marriage would have declined by a proportion of 14 percent in nine years (from 76% in 2012 to 65% in 2021) for under-18 marriages and by a proportion of an astonishing 46 percent for under 15-marriages (from 28% in 2012 to 15% in 2021).

Even if the 2021 ENAFEME data were to be considered valid – which is unlikely given the rapid decline over a relatively short period – and if child marriage rates continued to decline at the same rate, child marriage would nonetheless remain at 56 percent in 2030, suggesting that the practice will continue long into this century. This means that efforts to end child marriage in Niger will have to continue for decades – irrespective of the rate of decline reported by the ENAFEME national household survey. To put the magnitude of the challenge of ending child marriage into perspective, the estimated number of girls who were married before age 18 in Niger in 2023 is 187,000.

Regional variations: Child marriage rates vary significantly between the eight regions of Niger, reflecting differences in culture and religion, livelihood strategies and urban-rural differences. Overall, child marriage rates are highest in the southern regions of the country (Maradi 89%; Zinder 87%) and significantly lower in Agadez region in the north (47%). Niamey has the lowest child marriage rate with 33 percent (DHS 2012).

Figure 2: Percentage of women aged 20 to 24 years who were first married or in union before age 18



3.3 Fertility trends

In Niger, married girls tend to give birth to their first child soon after marriage. Accordingly, Niger's high child marriage rate is matched by a high adolescent birth rate. According to ENAFEME 2021, Niger's adolescent birth rate has begun to decline over the past decade or so.

Figure 3: Adolescent birth rate per 1,000 girls aged 15-19 (ENAFEME 2021)



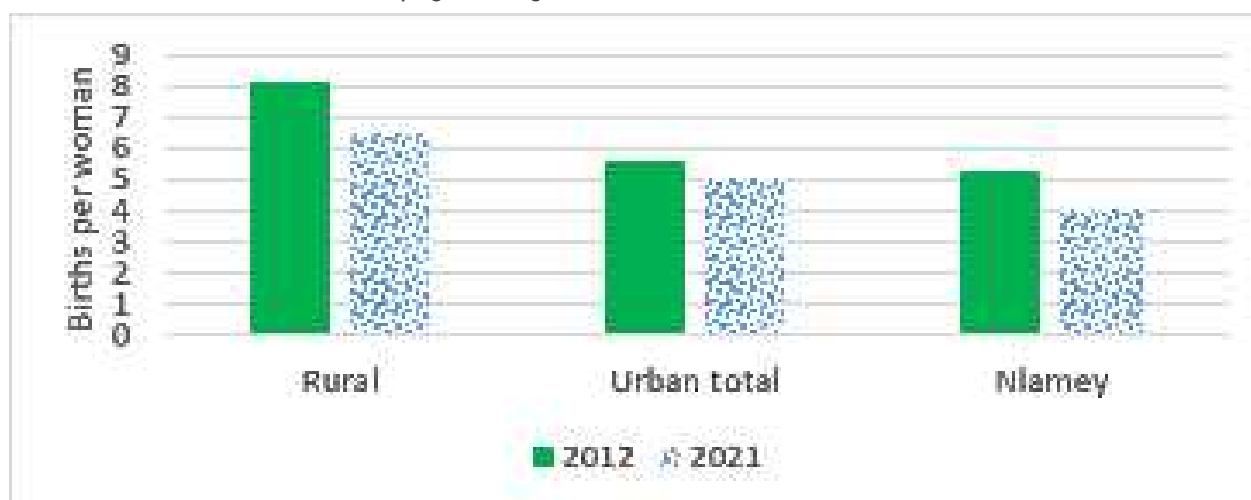
In the case of Niger and other countries in sub-Saharan Africa (but not in South Asia), there is a close relationship between child marriage, the adolescent birth rate, the total fertility rate and the desired number of children. At least in part, the high rates of fertility are sustained by an early onset of childbearing. In other words, if women started having babies later, it would be biologically almost impossible to sustain Niger's high fertility rate. After at least two decades of stagnation, DHS data shows a decline in fertility from 7.6 children per woman in 2012 (DHS) to 6.2 in 2021 (MIS). The reasons for this significant decline have not yet been analyzed.

Table 2: Statistics on the DHS webpage for Niger that include data for 2021

Indicator	1992 DHS	1998 DHS	2006 DHS	2012 DHS	2021 MIS
Total fertility rate	7	7.2	7	7.6	6.2

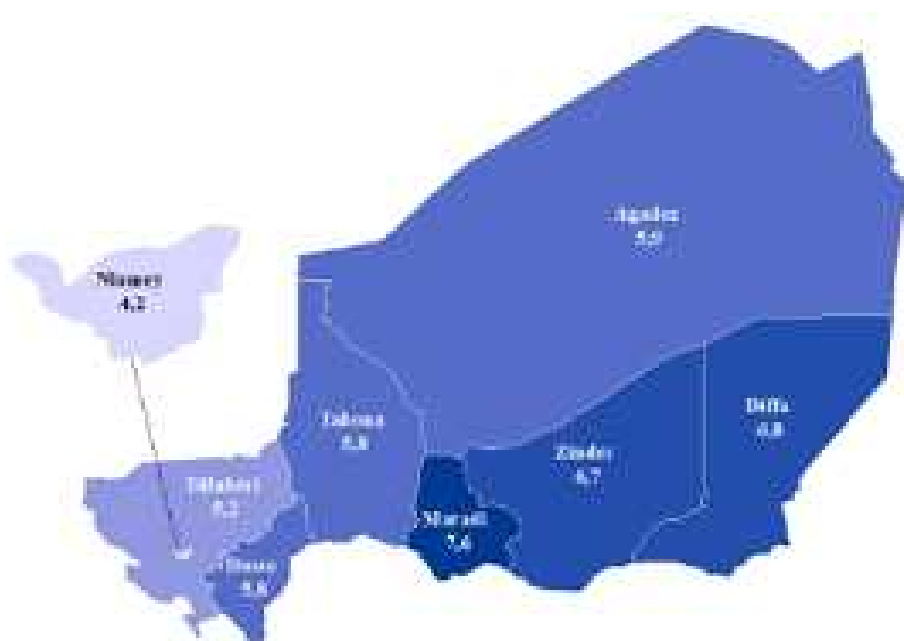
In general, fertility rates are lower in urban than in rural areas. The literature on fertility decline indicates that rural, agricultural livelihoods are associated with higher rates of fertility and a demand for large numbers of children to help with crop cultivation and animal husbandry. On a farm, a child is an investment—an extra pair of hands to milk the cow, or shoulders to work the fields. But in a city a child is a liability, just another mouth to feed. The following figure shows that the fertility rate declined fastest in Niamey and in rural areas, but more slowly in other urban areas (2021 ENAFEME data shaded blue). This indicates that fertility rates are affected by a range of variables (e.g., migration).

Table 2: Statistics on the DHS webpage for Niger that include data for 2021



The following map shows fertility rates by region (ENAFEME 2021).

Figure 5: Fertility rates by region in Niger (ENAFEME 2021)



Urbanization and rural-to-urban migration are one of the biggest drivers of the decline in fertility rates in the world in general. In urban areas, where housing is expensive and jobs in the informal sector are precarious, large numbers of children are a burden for households, rather than assets. Niger is one of the least urbanized countries in the world (16.9% urban population 2022), but the country also has one of the highest rates of urbanization (4.72% urbanization rate 2020-25).



What explains the decline in fertility and child marriage in Niger? If we assume that there has been a decline in child marriage and in fertility rates in Niger, what could be the causes of these declines? Statistical analysis and views from Niger suggest the following possible explanations:

- The literature on fertility decline credits a combination of urbanization, technology (radio, mobile phones, television), and the empowerment of women for declining fertility rates in many parts of the world: “The more a society urbanizes, and the more control women exert over their bodies, the fewer babies they choose to have.
- Agencies working in Niger to end child marriage and to reduce fertility rates are quick to credit the actions of traditional chiefs, government ministries delivering education, health and professional training services; and the actions of national and international NGOs for the progress made.
- The analysis of fertility trends in Niger and other countries in the Sahel over the past forty years reveals that Niger is in a “fertility pretransition” situation and illustrates the early steps towards the decline in fertility. This perspective attributes the decline in fertility to the postponement of the onset of childbearing (first birth) (the postponements of later births has been much smaller). “If these postponements were to continue in the future, it would become increasingly challenging, and physiologically impossible, for women in Niger to compress their fertility further in order to maintain a stable number of children.] In other words, the increase in the age of first births makes it physiologically impossible for Niger to maintain an average fertility rate of seven children per woman. The analysis done by Thomas Spoorenberg shows the kind of further analysis that can be done with DHS data to uncover changes in reproductive trends that are not visible by only looking at the fertility rate.
- Looking at the statistical evidence, the proportion of girls who go to school has increased and young women are marrying later (the median age of marriage has increased). However, there has not been a significant increase in the use of contraception. There is a need for a dedicated study to fully understand the forces that have contributed to the increase in the age of first marriage and the decline in fertility rates.



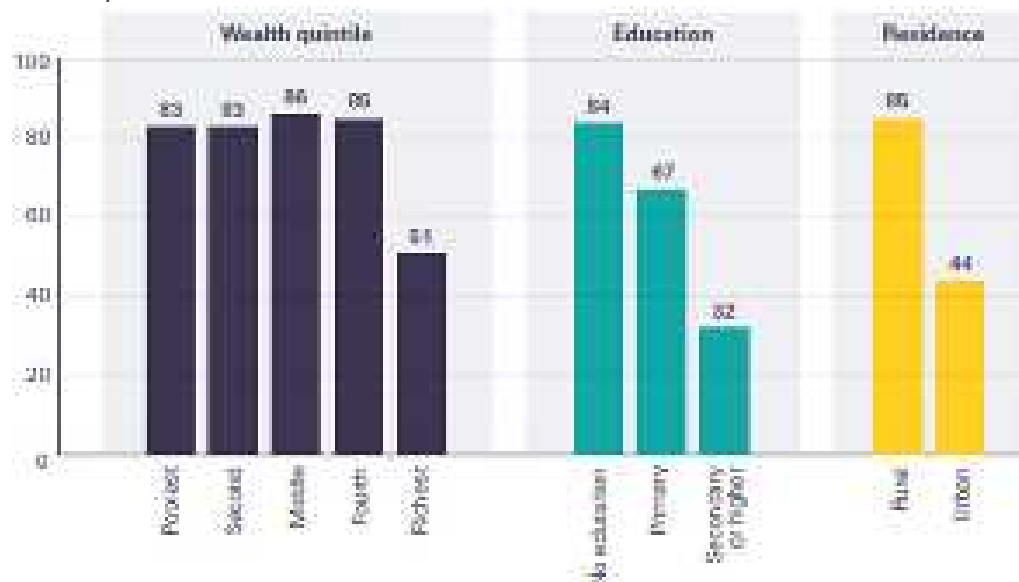


4. Drivers of child marriage

Child marriage in Niger is driven by a variety of factors that work together in different settings to compel girls to get married. Humanitarian crises tend to aggravate other drivers and contribute to an increase in child marriage (neither the literature on child marriage nor the key informants dwelled on the security situation in Niger and its impact on child marriage). This section provides an overview of the main drivers of child marriage.

a. Poverty, rural residence and agricultural livelihoods: Child marriage is highest among the poorest families, but there are only small variations in child marriage rates (or the median age of first marriage) across the poorest four quintiles. The under-18 child marriage rate remains at around 85 percent for the four poorest wealth quintiles and drops to 51 percent among the richest quintile (DHS 2012). Eighty percent of women aged 20-24 reside in rural areas of Niger and 85 percent of these women were married by 18, compared to 44 percent of women (age 20-24) in urban areas. Rural residence and agricultural livelihoods are strong predictors of child marriage in Niger and closely linked to poverty. Rural areas tend to be poorer than urban areas and Niger is an overwhelmingly rural with only 17 percent of the population living in urban areas. Rural areas have significantly less infrastructure and social services, creating access issues even for those who are better-off

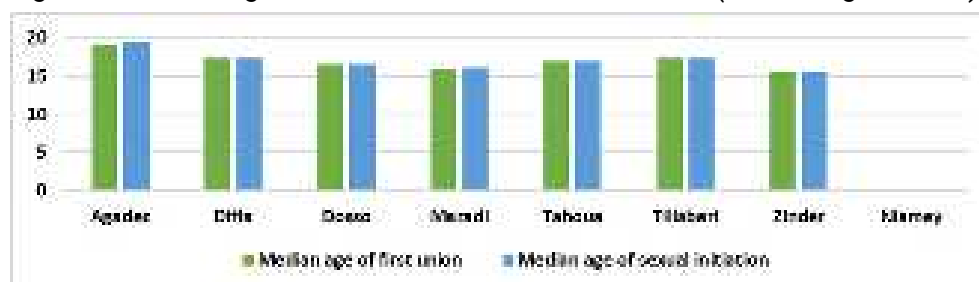
Figure 6: Percentage of women aged 20 to 24 years who were first married or in union before age 18, by wealth quintile, education and residence



b. Education: Rates of child marriage are highest among girls and women with no or only primary education (see education section below for additional statistics). Eighty-four percent of women aged 20-24 with no education and 67 percent with only primary education were married at age 18, compared to 32 percent of women with secondary education or higher. Many girls drop out of school due to an unsafe environment (e.g., violence in school, distance to school and risk for girls traveling alone). Dropping out of school places girls at heightened risk of marrying young due to a lack of other options. In a society dominated by a rural, agricultural livelihoods, formal education is often not valued. The low rate of school enrolment and completion among girls in Niger means that lack of education will remain a major driver of child marriage over the coming decades.

C. Avoidance of pre-marital sexual relations and control of the sexuality of adolescent girls are among the strongest drivers of child marriage in Niger. This finding is borne out (at least to some extent) by the available data on first unions and on sexual initiation. The overwhelming majority of girls have their first sexual relations in marriage.

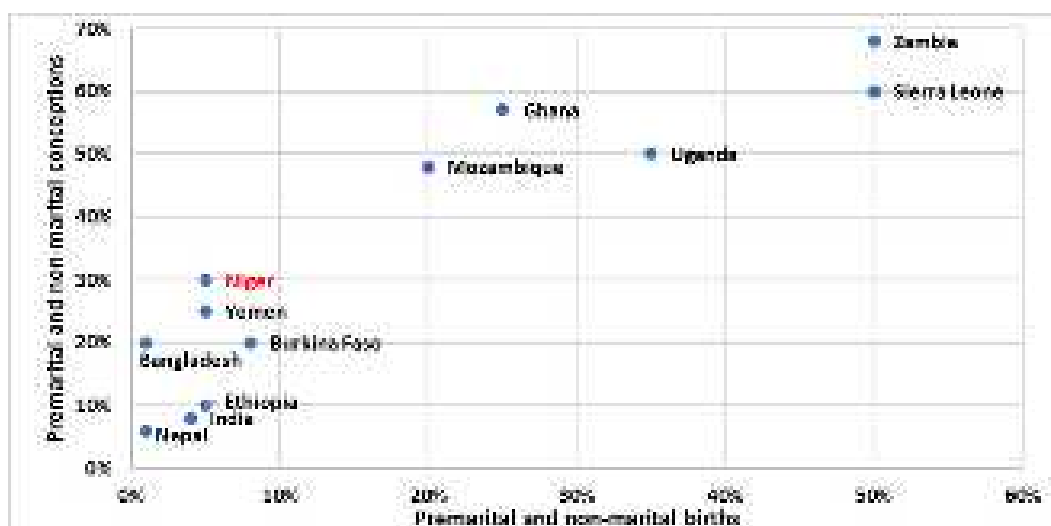
Figure 7: Median age of first union and sexual initiation (women aged 20-49) ENAFEME 2021



Child marriage is perceived as a means to protect a girl's dignity and preserve her virginity. The fear of dishonour from pregnancy outside of marriage is aggravated by high levels of sexual violence against women and girls in the country. Child marriage is linked to beliefs and sexism more than poverty. Even intellectuals marry their daughters early because they are desperate for girls to remain virgins until marriage.

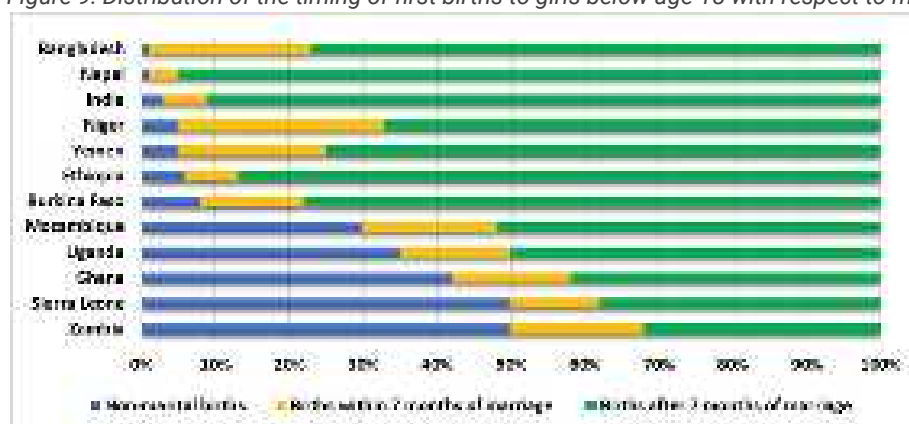
The following figure illustrates the differences between countries with arranged marriage, bride price or dowry and avoidance of pre-marital sexual relations on the one hand, and on the other hand, countries where pre-marital sexual relations are condoned and marriages and unions are more frequently self-initiated by adolescents. Countries in South Asia, the Middle East, the Sahel and the Horn of Africa, where premarital and non-marital births and conceptions are relatively rare, are clustered in the lower left corner of the scatter plot. This is where Niger is situated. In much of the rest of sub-Saharan Africa, premarital and non-marital conceptions and births are much more common – these countries appear in the upper half of the scatter plot.

Figure 8: Premarital and non-marital conceptions and births among first births by age 18 in Global Programme countries (DHS, calculation by UNFPA)



A recent analysis prepared by UNSD on child marriage and early childbearing confirms these patterns and shows very low rates of first births before age 18 outside marriage in South Asia, Yemen, Ethiopia and the Sahel, but up to fifty percent of those births occurring outside of marriage in the countries in coastal West Africa, Southern Africa and Uganda

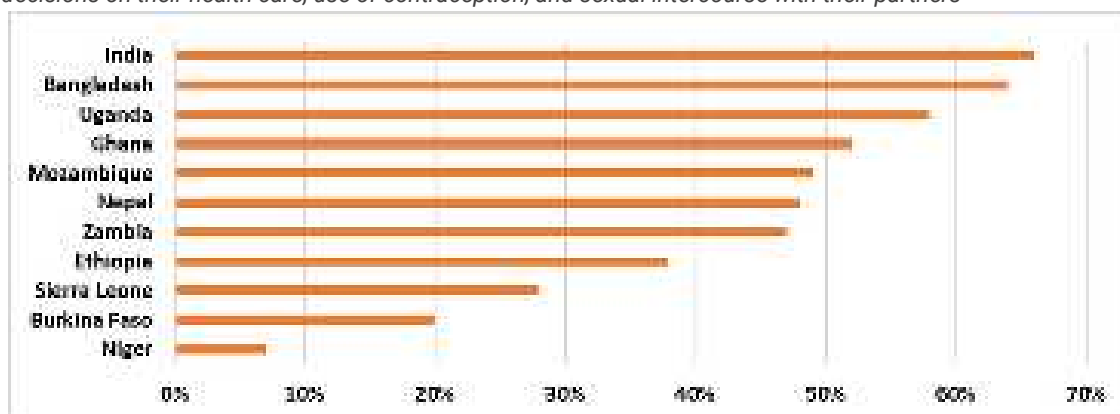
Figure 9: Distribution of the timing of first births to girls below age 18 with respect to marriage, post-2010



d. Gender norms: The primary role of girls in Niger is to become wives and mothers. They have little say in decisions that affect them, both before and during marriages. Child brides are judged by how respectful and obedient they are, how well they care for their mother-in-law and how they treat their husband.

e. Bodily autonomy: The concept of bodily autonomy is critical to understand the ability of women and girls to exercise their rights and to make decisions and choices over their bodies and lives. In Niger, girls are married early to maximise their reproductive potential and to avoid pre-marital sexual relations. In Niger, most women also lack the power to make their own decisions on their health care, use of contraception, and sexual intercourse with their partners.

Figure 10: Percentage of women aged 15 to 49 years who are married (or in a union), who make their own decisions on their health care, use of contraception, and sexual intercourse with their partners



The figure above is based on data from the UNFPA's State of World Population 2023 and presents the percentage of married women aged 15 to 49 years who make their own decisions regarding health care, contraception, and sexual intercourse. The graph provides gives an indication of the significant differences in women's decision-making ability related to sexual and reproductive health (SRH) in the Global Programme to End Child Marriage countries. India and Bangladesh had the highest percentage of women who stated that they made their own decisions regarding the three dimensions of SRH care, contraception and sexual intercourse. The lowest percentages were reported from Niger (7%) and Burkina Faso (20%). The power dynamics between young brides and older husbands further limit the decision-making powers of adolescent girls and young women.

f. Marriage arrangements and transactions:

- Arranged marriages and payment of bride price (bride wealth) in Niger are the norm where marriage arrangements are made between the parents of the girl and the prospective husband or his parents. The payment of bride price is an essential part of marriage, where the groom's family pays a sum to the bride's family. Not much in-depth research seems to have been carried out on the economics and trends in bride price payments in Niger.
- Younger brides are valued by men in Niger for their fertility and perceived subservience. This is reflected in bride price, which is often higher for younger girls. A girls' fertility is important because it is a manifestation of male virility and enhances men's social status. Men see girls married as children as more pliable to mould to their whims. Qualitative data from Maradi collected in the IMAGES study found that men's financial independence is increasing their ability to choose when and whom to marry but has not changed norms about fertility and age at first marriage.



- Girls having a say in marriage decisions: On the other hand, girls and young women in Niger frequently report that the decision to marry was their own choice. In the Nigerien context, girls often consider entering marriage as a way of obtaining relative independence from their parents, financial security, and respect and admiration from their peers and communities. Married girls are said to enjoy a certain level of respect within society which they cannot achieve if unmarried, regardless of how successful they may become professionally. The literature also points to a social system that does not recognize a period of transition between childhood and adulthood. Nigerien children – both boys and girls – become adults through marriage alone, and the onset of puberty for girls signals readiness for marriage/adulthood. As a result, “adolescence does not exist” and young people seeking acceptance into adulthood must be married.
- Window of opportunity to marry: Although girls report having made the decision themselves to marry, their decisions are highly constrained by gender and social norms, among many other factors. Girls make marital decisions within a context that stresses parental consent and community approval, places a high value on obedience, and is constrained by limited opportunities, gendered distribution of labour, and dominant social norms promoting an early and narrow “window of opportunity” for marriage. In a setting where child marriage is the prevailing norm, missing the “window of opportunity” to marry can harm girls’ futures.
- Cohort marriages: Girls in the same peer group are often married in cohorts following the harvest. Within this system, there is a narrow window of time in girls’ lives during which it is seen as acceptable to marry. Adolescent girls stress the benefits of marrying at the “right” time and prefer to be married first rather than last among their peers. Given the constrained economic opportunities and existing norms, there appears to be very little incentive for delaying marriage and few girls choose to go against the norm.
- Rational choice for girls to marry early: The central issue in Niger is that socially, economically, culturally and politically, it makes sense for girls to marry once they are considered to have reached physical, psychological, emotional and intellectual maturity. It is an expected milestone in a “proper” life. Individuals may hope to pursue alternate life plans, but most girls end up marrying young – either because their parents arranged for them to marry someone they did not know or because they were able to assert their preferences when it came to future husbands. There is a spectrum on which marital decisions can be placed. Interventions aiming to delay marriage in Niger must influence both community norms supporting child marriage and girls’ own motivations in marital decision-making (including social and economic drivers)

- Polygamy is relatively common in Niger with 29 percent of individuals living in polygamous (polygynous) households. According to some data, polygamy is highest in the south-western part of the country. Polygamy plays a role in sustaining child marriage, as Nigerien men prefer very young brides for their second, third, or fourth wives. According to Save the Children, “In Niger, 18.6% of girls between 15 and 19 years are engaged in a polygamous marriage. The practice of wahaya is practiced mainly in Tahoua region and involves the purchase of one or more girls, usually of slave descent, under the guise of a “fifth wife”. In Niger, a man can legally have up to four legal wives and then any number of “fifth wives”, who have a different status closer to that of a domestic and sexual slave. Many fifth wives have been trafficked as young girls from rural regions across West Africa to the houses of richer, older, urban males. This is a form of slavery as highlighted by the Special Rapporteur on Contemporary Forms of Slavery in 2015.
- Custom and Religion: Certain Islamic interpretations are being used to justify child marriage in Niger and to resist legislative and policy changes. Customary and Sharia (Islamic) law have a very strong influence in Niger, including in the process of marriage. Over 90 percent of Nigeriens are Muslim and the majority live in rural areas. Many families choose to marry their girls under customary or religious law, in part because the girl’s age is not requested. Determining children’s ages is difficult due to limited birth registrations.

A web of deeply rooted cultural and religious norms, beliefs and practices: The social norms, beliefs and practices listed above create an interlocking system in which the social and economic benefits of child marriage are broadly shared (by parents, husbands, in-laws, traditional leaders, and the bride herself) and the costs of child marriage (aside from macro-level costs) accrue almost exclusively to the girl. This gives girls and their communities strong incentives to maintain the status quo. It is so difficult to end child marriage in Niger in large part because decision makers and influencers derive social benefits from child marriage, as do the girls themselves. Yet the risks of child marriage fall solely on the girls. Girls are also most vulnerable to unintended harm if programming is poorly designed or encounters structural obstacles. “The longer she delays being married, the worse it is for her. By intervening, we ask her to delay marriage and she has no opportunity for her life. Have we really made a difference then?” The Iris Group report suggests to address difficult social norms from a “do no harm” perspective



Layers of drivers of child marriage: The different drivers of child marriage can be considered as layers. The bottom layers are deep-rooted gender inequality and discriminatory gender norms, as well as chronic and wide-spread poverty. These drivers of child marriage are often hardest to change. Gender inequality is difficult to change because it is deeply entrenched, is pervasive across all aspects of society (legal, social, economic, political), and faces stiff opposition from vested interests who oppose any challenge to the existing distribution of power. In the case of poverty, despite decades of anti-poverty programmes and policies, only a few countries in sub-Saharan Africa have had significant success in poverty reduction. Lack of education among girls may be relatively easier to tackle than poverty reduction, but this requires consistent investments over many years to achieve the desired results in girls' education, an expansion of their opportunities and a reduction in child marriage.

Across the Sahelian countries marriage practices and transactions such as arranged marriage, bride price and polygamy are common and child marriage rates have remained largely stagnant over the past thirty years. This is in stark contrast to the coastal West African countries (Sierra Leone, Ghana, etc.), where arranged marriages and bride price are practiced much less and where informal unions and pre-marital sex are normalized and much more common than in the Sahelian countries. Even at similar levels of poverty, the rate of child marriage in coastal West African countries (i.e., Sierra Leone, Ghana) are 20 percent lower than those in the Sahelian countries.

In countries and regions where adolescent girls and young women have greater freedom to choose when, if and with whom to enter into union, child marriage rates tend to decline much more rapidly than in contexts where adolescent girls have little control over marriage decisions. In these contexts, investments in education and job opportunities for adolescent girls and in ASRH services and contraception can have quite rapid results – despite existing norms and attitudes against comprehensive sexuality education in school and access to contraception for sexually-active unmarried adolescent girls. In the Sahelian countries, on the other hand, the effects of investments in education, health and social protection services for adolescents are blunted by the force of arranged marriage, bride price and polygamy. This means that efforts to reduce child marriage in the Sahel have limited options for achieving rapid reductions in child marriage and have to focus much more on slower approaches such long-term investments in strengthening the education system and in efforts to change norms, behaviours and practices related to child marriage. The conflict in the Sahel since 2012 is adding to the challenges and the lack of progress in eliminating child marriage.



5. Policies, strategies and programmes to end child marriage

This chapter provides an overview of different strategies and programmes to end child marriage in Niger. It highlights achievements and challenges.

5.1 Legislation

The family law in Niger has several sources: the civil code, penal code, customary law and international legal instruments. The civil code sets the minimum age of marriage at 18 years for boys and 15 years for girls, but most unions take place under customary law. The penal code is in the process of being revised in line with the civil code, penalizing marriage before the legal age of marriage for girls at 15, and at 18 for boys. The revision is not progressing due to customary and family laws being governed by traditional and religious leaders, who are not yet supportive of ending child marriage. As a result, even where there has been political support from the government in relation to updating the minimum age for marriage in Niger's civil code, there remains a resistance from conservative religious authorities that may block any change. There is a legal vacuum concerning sanctions that can be imposed for marriages before the legal age. Judges have no means with which to annul a marriage if a girl takes legal action. This even applies if a girl gets married aged 11, 12 or 13. An amendment to the Civil Code to raise the minimum age of marriage for girls to 18 would be an important step, but, on its own, is not sufficient to drive true behavioural change.

5.2 National strategy to end child marriage

The National Strategic Plan to End Child Marriage (2019-2021) and its theory of change were developed using the UNICEF MoRES bottleneck framework, rather than the Global Programme Phase II theory of change with its strong emphasis on gender transformation. The theory of change and the causal pathways are not fully aligned with the latest evidence and the most recent strategies to end child marriage (e.g., Global Programme). A new national strategy for 2024-2026 is being finalized. The National Strategic Plan (2019-2021) focuses heavily on interventions at the community level with relatively less emphasis on service provision for adolescent girls. Legislative and policy change are not prioritized. The National Strategic Plan has the following strategies, outputs and activities.

Table 3: Strategies and outputs of the National Strategic Plan to End Child Marriage (2019-2021)

Strategies	Outputs and activities
1. Empower girls with information, skills and support networks	Girls are informed, have access to alternatives, services
2. Enable the discovery of improved options by parents and community members	Parents, communities prefer alternatives
3. Improve accessibility and quality of education, protection and other social services for girls	Services are strengthened
4. Create new platforms for social dialogue	A social movement supports the abandonment of child marriage • Interactive popular theatre • Community mobilization (debates, dialogues, preaching, talks) • Collective declaration
	Coordination and monitoring of strategic plan

The National Strategic Plan has been funded by international donors and implemented largely by international and national NGOs and CSOs. The following paragraphs are, for the most part, excerpts from the unpublished evaluation of the 2019-2021 National Strategic Plan to End Child Marriage in Niger.



Achievements and challenges related to the implementation of the National Strategic Plan to End Child Marriage in Niger

Impact: The ENAFEME 2021 shows a decline in under 15 and under 18 child marriages and a decline in adolescent fertility rates that exceeded the targets of the National Strategy, although these results must be interpreted with caution. Positive changes from the implementation of the National Strategy included: postponement or annulment of child marriages; parents identifying alternatives to marriage for the social success of girls (e.g., jobs); the commitment of traditional chiefs to abandon child marriage; the participation of girls in decisions related to marriage; and changes in negative social and gender norms and values.

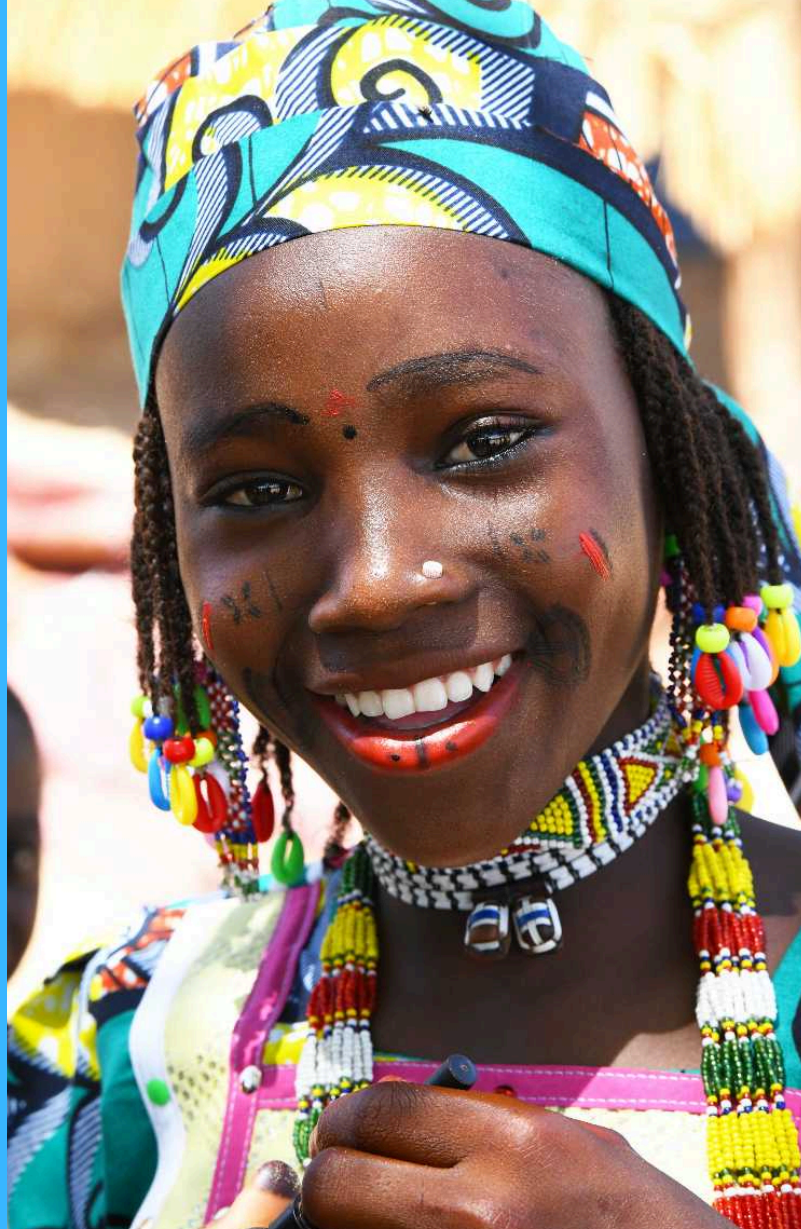
Effectiveness: The evaluation of the National Strategic Plan to End Child Marriage concluded that all four strategic outcomes were largely achieved, and that six approaches were effective and made significant contributions to the country's progress to eliminate child marriage: the Community-Based Child Protection (CBCP) approach; the Niger Adolescent Initiative (Illimin); School Governments; the Mata Masu Dubara women's organizations approach; Future Husbands' Clubs; and the Husbands' School. All these approaches are ongoing and based at the community level and are part of a comprehensive approach to change behaviours and social norms. Community-Based Child Protection is part of broader child protection interventions involving behavioural and social change. The setting up of child protection committees helped to ensure the planning and monitoring of activities at village level in the beneficiary communes. The community-level results were achieved through the involvement and public commitment of traditional leaders to abandon child marriage; the use of community facilitators and mentors; and the involvement of customary chiefs, religious leaders, fathers and mothers, young future husbands, local elected officials, and different government departments.

Challenges related to the implementation of the National Strategic Plan to End Child Marriage:

- **Legislation:** There has been little action to bring the legal framework in line with international standards on the minimum age of marriage.
- **Government commitment:** While the government affirms its commitment to end child marriage, this commitment does not translate into concrete policy, legislative or programmatic actions or budget allocations.
- **Education:** Community-based interventions have created greater demand for girls' education, but the education sector is unable to provide sufficient access and quality of education across the country. The education system remains very weak. The provision of school support in the form of scholarships, school kits and accommodation does not necessarily guarantee the completion of girls' schooling, due to the short duration of the NGO- and CSO-run projects which end before girls are able to complete their education. There are insufficient linkages between the 'formal' education system and 'informal' education support provided by internationally funded CSO and NGO projects. In some cases, older girls who live far from secondary schools receive scholarships to continue their education. These girls tend to lodge with host families who live closer to a secondary school. The scholarships are provided to the host families rather than to the biological families of the girls. This can create conflicts between biological and host families.
- **Professional training:** The provision of vocational training outside of occupations traditionally reserved for girls (sewing, catering, knitting) aimed to promote the economic empowerment of adolescent girls. While the interventions were relevant and useful, income-generating activities and professional training were poorly implemented, limiting the achievement of results in terms of girls' economic empowerment.
- **Human resources:** Not all regions have enough social workers to properly support the implementation of interventions and supervise village child protection committees.
- **Religious norms:** Some religious leaders misinterpret religious norms to defend continuing cultural practices of child marriage.
- **Coordination:** The coordination framework is not working well. Inadequate coordination has considerably affected the planning, budgeting, and monitoring of all interventions, preventing opportunities for greater synergy and efficiency. With the exception of a few complementarities observed within the framework of SWEDD, Spotlight and GPECM between UNICEF, UNFPA, UNDP and ONUFEMME, most projects are carried out in isolation, which does not make it possible to take advantage of the lessons learned from the implementation of certain approaches in order to maximize the achievement of results and guarantee the complementarity also necessary for the attainment of objectives. Working groups set up by the National Strategic Plan are not working. The Ministère de la Promotion de la Femme et de la Protection de l'Enfant is not providing adequate leadership to coordinate the National Strategy.
- **Financial resources:** Only donor-funded projects were implemented. The ministry did not provide any funding for project implementation which limited the reach and coverage of interventions to end child marriage.
- **Monitoring:** The lack of a functioning monitoring system did not allow to assess progress towards achieving the results of the national strategic plan in terms of gender, equity and human rights over the three years. Monitoring and evaluation mechanisms remained specific to each project, with no coordination focused on the plan's specific objectives. Several indicators lacked a baseline.
- **Shocks:** The results would have been better if the country had not been faced with a number of shocks (security, health related to COVID, climate, socio-economic), and institutional change linked to the appointment of new leaders in 2020 following the new presidential and legislative elections.

5.3 NGO approaches to end child marriage

As mentioned above, national and international NGOs are implementing a range of community-based initiatives to end child marriage in specific geographic areas. These approaches are implemented with a wide range of community actors and religious leaders and focus heavily on social and behaviour change communication. Some programmes work inter-sectorally and provide education, health and/or professional training support for adolescent girls. Some NGOs collaborate with the Ministry of Education and the Ministry of Women's Affairs and Social Development and other ministries. Coordination between child protection and education actors are not sufficiently strong to scale up efforts to reduce child marriage.



Evaluations: Only few NGO programmes to end child marriage in Niger have been evaluated. Published evaluations have highlighted the pervasiveness of the challenges to end child marriage in Niger. More Than Brides implemented a programme in India, Malawi, Mali and Niger. The evaluation states: *“Despite a similar approach in each context, we see uneven results, with India’s intervention demonstrating the most impact. The results of the MNCP evaluation challenge our conception that it is easier to demonstrate effectiveness in areas where child marriage is highest. Indeed, we see significant improvements in child marriage even in Odisha, India, where child marriage prevalence was 8.9% among girls 12–19 in intervention areas at baseline, while we do not see significant improvements in Niger.”*

5.4 Global Programme to End Child Marriage

Niger was the first UNICEF office in West Africa to initiate a project to end child marriage in 2010. The UNFPA-UNICEF Global Programme to End Child Marriage was initiated in 2016 with Niger as one of 12 countries included in the programme. UNICEF and UNFPA use two different approaches and associated interventions, but both are heavily community- focused.

Community-based Child Protection Approach: UNICEF's core approach to ending child marriage in Niger is the Community-based Child Protection Approach (CBCP), a multi-component programme targeted at whole villages in areas where child marriage is almost universal (e.g., in Maradi and Zinder where child marriage rates are 89% and 87% respectively). CBCP was inspired by the Tostan Community Empowerment Program. The approach is based on the socio-ecological model and assertion that child marriage, like many other harmful practices, is deeply entrenched in social norms. Therefore, changing these practices requires "collective behaviour change" by the community and social networks taking a gender-transformative approach. The CBCP aligns with the GPECM theory of change via three strategies: a) girls' empowerment (via life skills education classes), b) broader social and behavioural change interventions (via a variety of group-based and whole village activities) and c) community-based child protection (a "systems" level approach). The main activities centre around education talks carried out through reference groups set up in each village and a community-based case management function. CBCP implementation occurs over three phases lasting from 15 to 19 months in total: i) preparatory phase (3 months), ii) intensive phase (6-8 months) and iii) consolidation phase (6-8 months). The program has reached 884 villages since 2020 in the regions with the highest prevalence of child marriage, including over 530,000 direct and indirect participants.^[2] There were plans to expand to an additional approximately 500 villages in 2023, however this depends in part on budget availability. The CBCP is funded by a consortium of donors via the UNICEF country office, including the GPECM, Spotlight, BMZ, the German National Committee for UNICEF, Shiseido and others.

UNFPA implements the community based Illimin programme, which focuses on adolescent girls supervised by mentors, and includes monthly community dialogues in the village square, led by a community facilitator. The Illimin programme was developed by UNFPA in partnership with the Ministry for the Promotion of Women and the Protection of the Child. To date, the Illimin programme has enabled more than 150,000 adolescent girls, including 45,000 girls supported by the Global Programme, to acquire knowledge, skills and attitudes to say no to child marriage in order to develop their full potential and participate fully in the development of their community. UNFPA supports safe spaces to reinforce girls' life skills and knowledge about reproductive health and rights. In addition, the programme builds financial literacy and financial management skills and offers professional training so that girls can help their communities. However, the cost-per-beneficiary of vocational training programmes are much higher than other interventions (e.g., life skills classes, education) and, given the limited budget available, only some girls benefit from professional training. In addition, UNFPA supported 14,500 adolescent girls to access health and education services. UNFPA created demand for services, but there are gaps in supply and affordability. While preventive prenatal services are free, curative services cost money. While primary education is free, secondary education is not. The programme also promotes community dialogues to induce change and adoption of positive attitudes and behaviours towards investing in and supporting adolescent girls. These dialogues, which have reached nearly 350,000 Nigeriens, are organized around traditional chiefs, religious leaders and other power holders with the effective participation of adolescent girls, young boys, and parents, on issues related to child marriage, girls' education, and reproductive health.

The entire programme is focused on the community level and is implemented by NGOs. One Safe Space reaches 100 girls over a period of seven months. Communities demand more Safe Spaces but UNFPA lacks the resources to meet the demand. Since Niger is a very large country and the population is dispersed, much larger resources would be required to spread the messages across the entire population. UNFPA's adolescent programme collaborates with the ministries of health, women's development, education, and professional training for 15–19-year-olds. The ministry of education develops all materials for literacy training, the ministry of health develops the reproductive health modules. UNICEF's community approach to child protection uses almost the same content and therefore UNFPA and UNICEF interventions target different communities.

The following box puts the quantitative achievements of the Global Programme in Niger into perspective. See the annex for more details on Global Programme outputs.

Key Global Programme achievements in Niger in 2022

- 3,000 **adolescent girls** were supported by the programme to **enrol and/or remain in** primary or secondary school.
- 19,603 **adolescent girls** actively participated in **life-skills or comprehensive sexuality education** (CSE) in programme areas.
- 94,870 **individuals** (boys, girls, women and men) participated in **dialogue sessions** on consequences of, and alternatives to, child marriage, **the rights of adolescent girls and gender equality**.
- 544 **local actors** (e.g., traditional, religious and community leaders) were **mobilized to participate in dialogues and consensus-building** to end child marriage.

The following box presents highlights from the Phase I and Phase II evaluations of the Global Programme in Niger.

Highlights from Phase I and Phase II evaluations of the Global Programme in Niger

- Programme achievements were rated as **'moderately effective'**. The most effective community engagement interventions include community dialogues; village talks; and radio sessions/talks. On the contrary, the TV campaigns and door-to-door campaigns proved less effective. [Phase I]
- Overall, the Niger programme was rated **'moderately compliant' with the Global Programme** minimum standards, with higher compliance in design and lower compliance in implementation. Programme results vary across regions. [Phase I]
- Norm change related to child marriage is so deeply entrenched and driven by religious beliefs and customs, that it requires patience, perseverance and commitment, recognizing that it **takes longer to change norms**. [Phase I]
- **Mobilizing and engaging community influencers** (traditional and religious leaders) in a religious society as in Niger proved effective and should continue. [Phase I]
- **Use of community facilitators** for community mobilization proved useful in anchoring the change within the communities. [Phase I]
- **Use of mixed community engagement approaches** (including inter-personal and mass communication) implemented in parallel proved effective in achieving wider outreach; inclusiveness; and enabled repetitive messaging. [Phase I]
- **Enablers** included: joint UNICEF-UNFPA partnership; wider social mobilization among all community groups and engagement of traditional/religious leaders as key community influencers; and diversity and parallel implementation of community engagement interventions for wider outreach and repetitive messaging. [Phase I]
- **Disablers** included: inconsistent legal framework; beliefs and customs; and poor education infrastructure (for girls in particular) and value associated with girl's education. [Phase I]
- The evaluators were unable to comment on programme efficiency for limited performance and financial data shared with the evaluators for Phase I.
- The Phase I evaluation recommends an **overhaul the current monitoring system** with a focus on a system-wide child protection M&E system.
- **The monitoring unit** set up at the start of the intervention is designed to take over the identification and referral of cases and continue some of the awareness raising activities. They are accompanied and followed-up by the local representatives of the ministry which have been coordinating the implementation of activities.



- **Some community level activities and engagements are conducive to sustainability.** Engagement of traditional leaders, coaching of men and boys, community dialogue and safe spaces and community-based case management driven by local people and community structures as well as participation of community are considered to have potential for sustainability as there is **local ownership**. For example, the process of making village authorities sign a public declaration to end child marriage is meant to encourage them to continue addressing the issue of child marriage and supporting communities in holding their leaders accountable. The public declarations do however prevent further interventions on child marriage to be implemented in the villages that have signed these as communities become engaged and own the ending child marriage message.
- The 'correspondantes' in **Niger** (girls from the safe spaces selected and trained to become peer educators) are also meant to continue awareness raising activities among their peers. In Niger, there has been institutionalisation of community **child protection mechanisms**. This includes the setting up of women's groups, the involvement of traditional chiefs and religious leaders, the involvement of local authorities, the networking of adolescent girls, and the elaboration of action plans at community level. Social workers have benefited from capacity-building activities and have been involved in planning, implementation, and monitoring (by IPs). An assessment showed that 64 per cent of village committees in former target villages in Zinder city were still active.

Summary comments on the implementation of the Global Programme in Niger based on interviews and a review of documentation:

- The work of the Global Programme is highly concentrated at the community level. UNICEF's work to end child marriage focuses on the Community-Based Child Protection approach while UNFPA supports the Illimin programme. This approach reflects only part of the Global Programmes theory of change.
- Complementary investments in services are not visible in Global Programme annual reports. The UNICEF education section supports education work that complements the community-based work and UNFPA has complementary interventions in ASRH. However, none of the UNICEF and UNFPA expenditures and outputs in education or reproductive health are shown in the Global Programme annual reports.
- The Global Programme has raised demands for education that the education sector is not able to meet. The success of the UNICEF's community-based interventions has raised expectations and demands regarding the benefits of keeping girls in school, for themselves, their families, and communities. But the national education system is too weak to meet all these demands.
- The UNICEF education programme focuses on structural causes related to education access and quality in Niger – not specifically on ending child marriage. UNICEF tackles the systemic and structural barriers to education in Niger. At the same time, the education section recognizes that education is a social and family issue and supports adolescent girls to remain in school. The package of interventions includes cash support for families and girls. There is inadequate geographic overlap and alignment between community-based and education sector interventions.

- **Linkages with health, education, professional training and social protection services for adolescent girls and their families are weak.** While the UNICEF education section is supporting interventions in some of the same communes where the UNICEF child protection work is being implemented, it is not clear from the existing documentation where and how these parallel education and child protection interventions converge and benefit girls at the community level.
- **Religious leaders have greater authority than the civil law and public officials in relation to marriage and family affairs.** Religious leaders have not come out against child marriage during their Friday sermons. Existing strategies to encourage religious leaders to come out against child marriage have not resulted in a breakthrough.



5.5 Gender transformation

Efforts by UNICEF and UNFPA to support gender transformation in Niger have highlighted the realities, challenges and opportunities associated with work to promote gender equality in Niger.

Niger's government has made commitments towards greater gender equality, but this runs up against discriminatory gender norms and structures. Niger adopted a new national gender policy in 2017 with a five-year implementation plan, undertook policy, institutional and legal reforms, and made gender equality one of the priorities of the National Development Plan 2022-2026. However, challenges remain considerable due to the pervasive influence of regressive gender norms and the lack of adequate measures to prevent and manage cases of gender-based violence including child marriages. In addition, the health and nutritional status of women and girls remain of concern, their access to essential social services is limited, and they are disproportionately at risk of violence, exploitation, abuse, and harmful practices.

The Global Programme and the Spotlight Initiative are designed to promote gender equality and gender transformation but their implementation in Niger is not fully aligned with these strategies. The 2023 evaluation of Phase II of the Global Programme notes that most countries ranked their strategy as "gender-responsive" except Niger, which assessed it as "gender aware" and moving towards "gender-responsive". Niger also faced challenges with the GTA terminology, particularly related to explaining the GTA to local partners. For instance, the language of positive masculinity was not well understood and requires further training of partner agency staff.

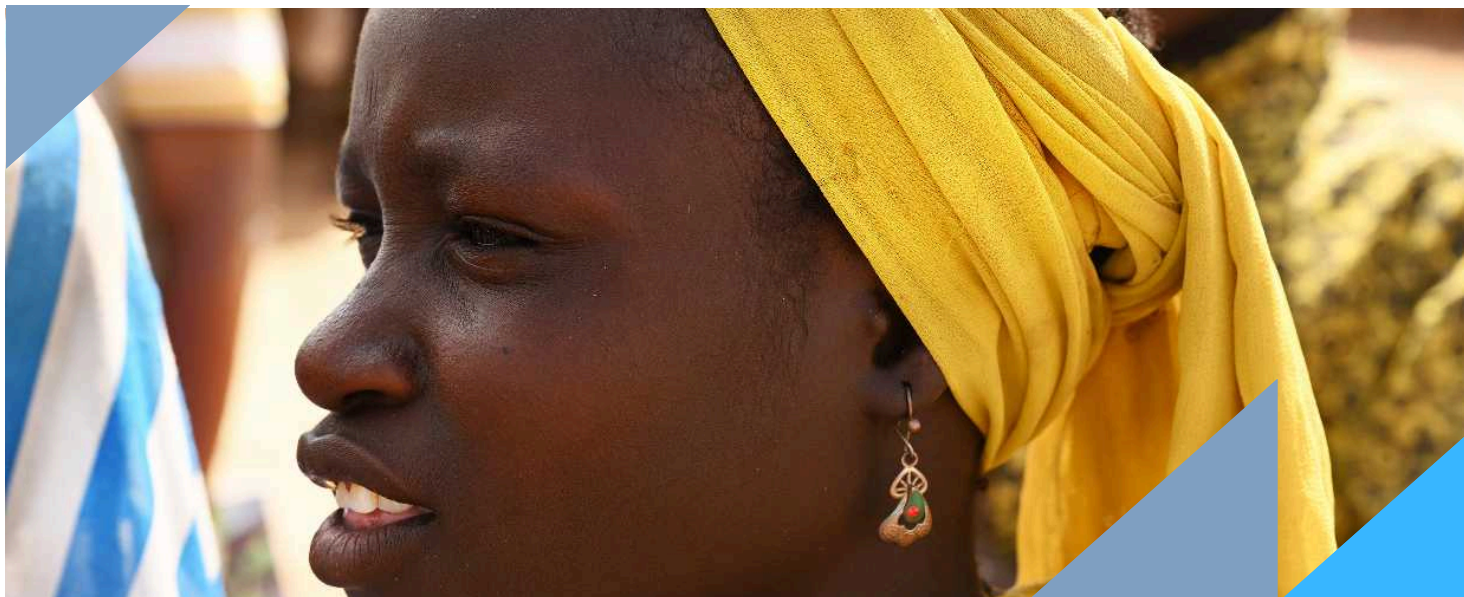
The Gender-Transformative Accelerator (GTA) identified a number of additional initiatives that could be integrated into child marriage programming, particularly in relation to positive masculinities; capacity building for service providers and policy makers in a gender-transformative approach; and gender mainstreaming in economic empowerment and vocational education for girls. But these feel like GTA add-ons to a child protection programme, rather than a reorientation of the Niger programme in line with the Phase III Global Programme theory of change.

There is potential to advance gender and women's rights in Niger as a strategy to end child marriage. Women's rights are deeply contested in Niger, but an active women's movement, including several women's rights CSOs, have existed for decades. Most progress for women as visible leaders in business and politics has been concentrated in Niamey. Attempts to change gender norms have taken an incremental approach, focusing on girls' and boys' clubs, with some attempts to change gender norms among adult influencers. The following table summarizes the advantages and disadvantages of a gender norms/women's rights approach:

Table 4: Advantages and disadvantages of a gender and women's rights lens in Niger

Advantages of a gender/rights lens	Disadvantages of a gender/rights lens
• Addresses the gender norms at the core of child marriage. • Aligns with international standards. • Provides a clear metric for the advocacy of CSOs. • Can build on an active Nigerien women's movement.	• Rights-based approaches to child marriage are seen as unproductive, and girls' rights, especially related to child marriage, are controversial. • Many people associate women's rights with reproductive rights, which is considered taboo. • Any perception that a rights agenda is externally imposed (from Niamey or internationally) may provoke backlash in other issues. • Requires long-term engagement for results.

The following sections explore the potential of different sectors to contribute to ending child marriage in Niger.



5.6 Child protection

The UNICEF Niger child protection programme has three pillars: strengthening the national child protection system; case management services; and community-based child protection.

UNICEF Niger: planned child protection outcomes:

- By 2027, national child protection systems and actors at central, regional and local levels with strengthened capacities plan, coordinate, develop and implement the child-friendly legal framework, evidence-based plans, policies and programmes.
- By 2027, child protection services and actors at national, regional and local levels have strengthened capacities to record vital events and to prevent, detect, report, refer, monitor, respond to and document cases of violence, exploitation and abuse of children and women, including in situations of humanitarian crisis.
- By 2027, communities and their leaders, including adolescents, civil society and the media, particularly in the regions of Diffa, Maradi, Tahoua, Tillabéry and Zinder with high prevalence of harmful practices and low rates of civil registration, have strengthened knowledge and capacities to promote gender-equitable norms, attitudes and behaviours conducive to the elimination of violence and civil registration, including in situations of humanitarian crisis.

Challenges faced by those working in the child protection sector to reduce child marriage in Niger: The achievement of the desired child protection outcomes has been hampered for several reasons, including:

- The programme lacks adequate human and financial resources at central, regional, local and community levels to strengthen structures, deliver services and change attitudes, beliefs and behaviours. The number of social workers in Niger is very limited and most social workers are concentrated in Niamey and other urban centres. Investments in child protection systems depend on international donors, while scaling up the coverage of community-based child protection mechanisms are dependent on the capacities of NGOs and CSOs.
- Any child protection system depends on strong linkages with health, education and social protection systems. All of these 'allied' systems are weak and under-resourced in Niger. As in any low income and fragile context, systems linkages in Niger are weak across all services, but especially for child protection.

5.7 Education

Findings from the literature and interviews show both the promise of education-based interventions to decrease child marriage and the daunting obstacles along this path.

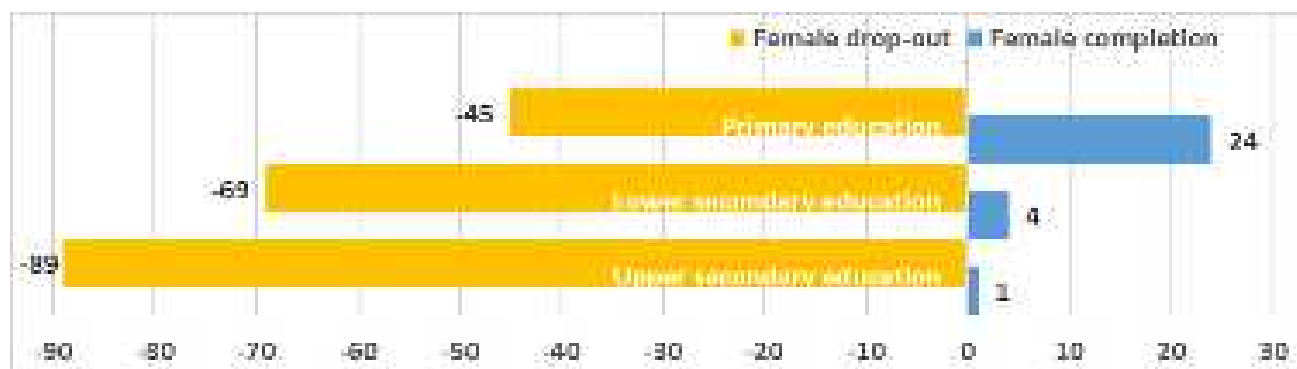
a. Arguments in favour of girls' education as a key strategy to end child marriage in Niger

- Globally, evidence has shown that the longer a girl remains in school, the higher the chances that she will not get married in childhood.
- Parents in Niger are becoming more comfortable letting girls stay in school. But once girls are not in school, these same parents marry the girls. See box below for an overview of supply- and demand-side barriers to girls' education in Niger.
- Education exposes girls to alternative visions of the future and to role models outside of their family and village.
- Many girls want to remain in school and delay marriage, but the supply and quality of education are major obstacles to girls' continued schooling.
- Complementary interventions (life skills education, girls' and boys' clubs, safe spaces, etc.) can address gender norms among girls and boys.

b. Why girls' education may not be a panacea in Niger

Education rates in Niger are extremely low. Niger has the lowest rates of formal ("western") education in the world. The youth literacy rate (age 15-24) is just 36 percent (SWOC 2023). Only 24 percent of girls complete primary and four percent complete lower secondary and just one percent complete upper secondary education. Many girls drop out of school or are excluded due to an unsafe environment. Dropping out of school places girls at heightened risk of marrying young due to limited alternative opportunities. In a society dominated by agricultural livelihoods, formal education is not valued.

Figure 11: Girls' primary and secondary education drop-out and completion rates (%) SWOC 2023



The following box summarizes the many challenges faced by Niger's education system.

The education system in Niger is very weak and faces overwhelming obstacles

Supply-side bottlenecks

- **Rapid population growth:** Niger's population increases by 3.9 percent per year and doubles every twenty years. This means that the cohort of 6-year-old children is 50 percent larger than the cohort of 16-year-olds (900,000 children aged 6 years vs 610,000 children aged 16 years). Even though many children do not attend school, these figures give a sense of the sheer numbers of additional children entering the school system each year and the challenges the government is facing in providing sufficient schools, classrooms, teachers, adequate quality education, a safe learning environment and learning achievements.
- Schools often have **poorly trained teachers and inadequate infrastructure**, including lack of fencing, water or hygiene facilities.
- Most **schools lack basic amenities** and are unable to provide learning environments that are safe from epidemics, disasters, violence or conflict. Most classrooms are built from straw and schools lack electricity and basic sanitation and hygiene facilities.
- There are few secondary schools which means that secondary schools students have to travel further to reach school. This not only increases transport costs but travel to and from school may also expose girls to increased **risk of sexual violence**.
- School hours, due in particular to the late start of the school year or the closure of schools due to the onset of the rainy season or the lack of security.
- Challenges with traditional, technical and vocational training provision, including inequitable geographical distribution, very pronounced gender differential by stream, as well as a mismatch with labour market demand.
- Prolonged disruption due to various shocks, including those caused by **climate change**. According to the HNO 2022, population movements linked to **armed conflicts** at borders, and natural disasters including floods and forage shortages will continue to have a negative impact on the sector.



Demand-side bottlenecks

- Limitations due to high direct, indirect and opportunity costs: As poverty is widespread, most families are unable to pay direct or indirect school fees for all their children, according to the PTSEF 2020-2022. The probability of accessing basic education is 80% for children in the richest quintile, compared with 57% for children in the poorest quintile.
- Support from parents depends on girls' success in education with the result that less academically inclined girls receive less support from their parents and drop out of school early.
- Value on younger girls for marriage means an educated 18-year-old may have worse economic and marriage prospects than a younger girl without schooling.
- Parents do not see the value of educating children with special needs, and this is combined with a lack of institutional resources for inclusive education.
- Limited demand for schooling in rural areas. Rural children are much likely to attend and complete school than urban children. The rural-urban disparities increase with the level of education. Urban children are 1.5 times more likely to be enrolled in primary education and six times more likely to be enrolled in lower secondary education than rural children.
- Gendered domestic responsibilities in the household keep girls from being able to study outside of school.
- School costs – including opportunity costs of girls' labour – can be prohibitive.
- Persistence of discriminatory socio-cultural norms: gender identities are rooted in the traditional belief that boys' education is more important than the education of girls. Girls are seen above all as mothers: most girls (76%) are married before the age of 18 and 36% of girls aged between 15 and 19 are already mothers. For girls who study, the gender gap is high and drop-out rates increase as schooling progresses. When girls drop out of school, they are at higher risk of getting married. Once married, girls no longer go to school.

Environment

- Governance of the sector is weak, mainly because of a data crisis that has become structural in terms of credibility, relevance and reliability for effective planning, and effective accountability. Several categories of children, such as children with disabilities or those enrolled in Koranic schools, are invisible to the education system.
- Despite considerable efforts (the 2nd largest item of expenditure) to finance the sector, which have been made in a restrictive context, the structure of current expenditure is called into question by its distribution of 75% to salaries, 20% to grants and subsidies for higher education, leaving little room for investment in teaching.

C. Support for girls' education will reduce child marriage but this will be a slow and long process

Niger will continue to experience strong demographic growth in the short and medium term, while the education system will continue to struggle to increase the quantity and quality of education. Even if Niger experiences a rapid decline in fertility, several decades will pass before the population stabilizes. At the same time, the education levels of most of the population will remain low. The education sector is not able to meet the demand and every year hundreds of thousands of additional children reach school age. According to a UNESCO projection for Niger, if current trends continue, girls living in rural areas will not achieve universal primary completion until 2068, thirteen years after rural boys. They will not achieve universal lower secondary education for a further twenty years – 2087. These structural and demographic conditions mean that improving girls' access to education, even if it were easy to enact, while important and necessary, will not reduce child marriage in the short or medium term.



The expectations that education and professional training will create significant opportunities for large numbers of adolescent girls are overly optimistic and raise false expectations. Globally, education looks like the answer to child marriage, but in Niger the system is very weak, and the level of girls' education is very low. Education efforts are promising, but in the absence of changes in social norms and economic conditions, they may leave girls worse off.[1] "In impoverished countries like Niger, the promise of education dangled by politicians, corporate elites, development workers, and rights activists often turns out to be 'cruelly optimistic'.

UNICEF's education programme in Niger works on the system and on structural barriers to education – rather than specifically on child marriage. The education programme has the following outcomes and outputs: By 2027, girls and boys have access to equitable, quality education and training and acquire fundamental skills to develop their full potential, their commitment and their active participation in the life of their communities.

- Output 1: Central, regional and local institutions have the capacity and resources to improve governance, coordination and management of the education system in development and humanitarian contexts.
- Output 2: Decentralised education services and local authorities have the capacity and resources to keep children in school and ensure the acquisition of basic skills in development and humanitarian contexts.
- Output 3: Private sector and civil society actors have the capacity and means to offer adolescents and young people opportunities for greater participation and employability in development and humanitarian contexts.



d. Summary of implications for the Global Programme:

- **Safety and security related to girls' access to school.** Most girls are not in school, and the education environment is not always safe. This means that education in Niger is not yet the protective force against girls' marriage that it could or should be. Coordinated efforts and support are required from family, community and religious leaders, health and protection services to protect girls. It is not just the role of education. Focusing just on education does not work.
- **Education must be seen as a community issue and not just an education systems issue in Niger.** Strengthening the education system (supply side) without the demand and support from the community(demand side), education does not work. UNICEF must strengthen community demand for education at the community level to keep girls in school.
- **Weak links between child protection and education programmes.** Links and coordination between child protection and education are not sufficiently strong to scale up efforts to reduce child marriage.
- **There are tensions between traditional education and 'imported education'.** Imported education is not in touch with existing values and sociocultural beliefs. Approaches must be based on existing strengths and values in Niger.
- **There are no quick solutions.** Investments in education and community support have to continue for a very long time. UNICEF has to support and strengthen the government's education policy and implementation, rather than setting up parallel initiatives to fix problems in a few communities.

5.8 Health

The provision of quality, accessible health and nutrition services has been shown in many contexts to contribute to reductions in child marriage. In Niger, however, there are numerous supply- and demand-side obstacles to the provision of this kind of support.

Obstacles to health and nutrition (from Gender Programme Review)

- Health care services are not adapted to the specific needs of women. This hinders the provision of essential support.
- The shortage of female health workers limits the availability of gender-sensitive healthcare assistance.
- Gender-based differences in nutritional status and eating practices affect the overall well-being of girls.
- Social and gender norms limit women's economic autonomy, decision-making power, and access to resources.
- Discriminatory gender norms result in minimal involvement of girls and women in household food planning and decision-making.
- Gender norms create dependency, making women and girls reliant on husbands for access to crucial services
- Gender norms constrain the freedom of women and girls to make independent decisions about their sexual and reproductive health.

Opportunities:

- The presence of women community relays in UNICEF'S intervention regions presents an opportunity for positive change.
- Priority places and platforms for change: actively engage with health and nutrition centres, the primary providers of community-level healthcare services.
- Collaborate with the management bodies of women community relays, recognizing their key role in local health care.
- Facilitate community dialogue forums involving all stakeholders, including influential entities shaping social norms (households, notables, traditional and religious leaders, local associations, child protection committees, and women leaders).

Because child marriage in Niger is so strongly linked to early childbearing and fertility, organizations implementing sexual and reproductive health programmes see child marriage as a critical barrier to achieving their health-related objectives (UNFPA; CARE, 2017). A health approach to child marriage may also be politically more palatable. In 2014, the government branded its national child marriage campaign with a fistula focus to avoid angering religious conservatives (UNICEF, 2016). The table below summarizes the advantages and disadvantages of employing a health lens to work to end child marriage in Niger

Table 5: Advantages and disadvantages of a health lens to ending child marriage in Niger

Advantages of a health lens to ending child marriage	Disadvantages of a health lens to ending child marriage
• Messaging around the risks to young mothers of early childbearing has been less controversial because morbidities such as fistula are common among child mothers in Niger. • There may be more openness to family planning in difficult economic conditions because of the expense of raising children and decreased agrarian focus. • Leverages families' desire to protect girls from harm. • Health sensitization is culturally more acceptable than a children's rights lens	• Issues of family planning for young people can be just as difficult to raise as child marriage in communities, due to the high stigma related to pre-marital sex and high value on fertility, although birth spacing is acceptable. • Men continue to want young brides to prove their virility by fathering many children. • Access to family planning for adolescents is controversial. • Access to health services and information and is limited, especially for adolescent girls. • Health services mostly focus on pregnant and lactating mothers.

Ending child marriage contributes to child and maternal health

- **Improved maternal and child health:** delaying marriage reduces complications during pregnancy and childbirth, promoting better maternal and child health outcomes. Older mothers, resulting from delayed marriage, are more likely to access prenatal care and maintain healthier pregnancies.
- **Reduced maternal mortality rates:** early pregnancy, a leading cause of maternal mortality in young girls, is mitigated by delaying marriage. Delaying marriage allows girls to complete education, acquire skills, and access better healthcare, ultimately reducing maternal mortality rates.
- **Enhanced reproductive health:** delaying marriage enables girls to make informed decisions about their reproductive health. Access to reproductive health services empowers girls to plan pregnancies, space births, and protect themselves from sexually transmitted infections.
- **Increased educational opportunities:** early marriage often leads to girls dropping out of school, hindering educational attainment. Completing education is linked to better health outcomes, fostering informed health decisions for individuals and their families.
- **Empowerment and agency:** delaying marriage allows girls to develop personal, social, and economic potential. Empowered girls are more likely to assert their rights, make informed health choices, and actively participate in decision-making processes.



- **Cultural resistance:** cultural norms and traditions may resist delaying marriage for girls, posing a challenge to health-focused interventions. Overcoming deep-rooted beliefs may require delicate strategies to avoid community backlash.
- **Access to healthcare:** limited access to healthcare facilities in some regions may hinder the effectiveness of health-focused initiatives. Insufficient infrastructure may impede the delivery of essential health services to address the needs of young girls.
- **Economic challenges:** delaying marriage may be perceived as a challenge to economic stability, especially in impoverished communities. Economic factors influencing child marriage may need to be addressed simultaneously for long-term success.
- **Resistance to behavioural change:** convincing communities to adopt new behavioural patterns regarding marriage and family planning may face resistance. Cultural norms and societal expectations may slow down the acceptance of delaying marriage for health benefits.
- **Coordination and resources:** implementing health-focused strategies requires effective coordination among various sectors, demanding significant resources. Inadequate resources and coordination may limit the scalability and impact of health interventions to end child marriage.

5.9 Economic approaches

Child marriage economics: The literature and informants conclude that child marriage in Niger is a resilience mechanism for families with high vulnerability to economic crisis and no social safety net. While gender and social norms are main drivers for child marriage in Niger, economic conditions shape the context in critical ways. The table below summarizes some of the advantages and disadvantages of an economic approach to child marriage in Niger.

Table 6: Advantages and disadvantages of an economic lens to ending child marriage in Niger

Advantages of an economic lens	Disadvantages of an economic lens
• Education scholarships can improve girls' leadership and empowerment and support school costs. • Cash and in-kind incentives can change community's perceptions of girls' value. • Cash transfers can be a politically palatable approach to addressing child marriage.	• Lack of internal markets and entrepreneurial opportunities related to poor economic conditions. • Adds work on top of girls' schoolwork and/or household responsibilities. • Stakeholders may not view economic activity as incompatible with early marriage and childbearing. • Income earning opportunities may cause girls to abandon school

Limited fiscal space and public funding unfavourable to investment in children at scale:

Economic approaches to ending child marriage in Niger are severely hampered by very limited structures, capacities and financing. The available fiscal space, limited by one of the lowest tax bases in the region (16% of GDP), is dependent on the price of raw materials (uranium, oil), making the country heavily dependent on official development assistance (10% of GDP; 30% of the national budget) and external funding. Faced with deteriorating internal and external security, the government is having to make budgetary choices to the detriment of social sectors that are already largely under-invested (in 2021, approximately 20% of the national budget was allocated to education, 6% to health and 0.2% to child protection).

Weak social protection system:

The coverage of social protection programmes in Niger remains low and too short-lived to sustainably protect poor and vulnerable households in the face of multiple shocks. One of Niger's real challenges is to establish a social protection system that matches the scale of deprivation and vulnerability in the country and capable of increasing people's resilience in the face of recurring shocks, crises and insecurity. The current social protection system covers only a small minority of vulnerable children and families (6% coverage of people living below the poverty line for multi-annual social safety nets, 88% of people living in situations of food insecurity or affected by crises). Shock response programmes (Targeted Free Distribution, Low-Cost Sale, Cash for Work, Cash Secheresse) provide one-off assistance to vulnerable populations but are not comprehensive enough to support sustainable recovery. Education scholarships for girls in secondary school, a form of social protection supported by agencies working to end child marriage in Niger, have reached only relatively small numbers of girls and often do not last long enough to enable girls to complete secondary school. Most cash transfer programmes pay little attention to the multidimensional needs of children and young people, to maximise their human potential, such as health, nutrition and education. Marginalised groups (children living in remote and sparsely populated rural areas, people with disabilities, street children and talibé children, migrants, seasonal workers, people in precarious informal sectors, other social cases) are the most likely to be excluded from these programmes.

Social and cultural barriers to the design of public policies to promote equal opportunities:

Current public policies exacerbate existing forms of marginalisation in society. Social assistance programmes (social safety nets, free distribution, low-cost sales, etc.) do not target or reach socially and geographically marginalised groups and do not enable their economic inclusion. Advocacy of children's and women's rights is disconnected from social and cultural realities. Talk of children's rights is perceived by parents as inhibiting their authority. Alongside the promotion of children's rights, the promotion of women's rights, particularly their financial autonomy, is seen as restricting the authority of the father as head of the family.

Sahel Adaptive Social Protection Programme in Niger (SASPP). SASPP's current activities are anchored in the Niger Adaptive Safety Net Project 2, which aims to improve the capacity of the Niger adaptive safety nets system to respond to shocks and to provide access for poor and vulnerable people to safety nets and accompanying measures. It provides regular support to around 120,000 impoverished and vulnerable households, most of them also receiving human capital building measures. Around 50,000 households are expected to benefit from productive inclusion measures and around 66,000 from cash-for-work measures. Initial financing of \$80 million from IDA in FY19. Additional Financing of \$100 million from IDA and \$30 million from the SASPP MDTF in FY21.

UNICEF and WFP's Sahel Social Protection Joint Programme (Sahel SP-JP) is a regional joint programme (funded by the German Cooperation), which began in 2020 and is in its 4th phase (through 2026). The programme covers Niger and four other countries and links to SASPP. The programme works with and through government and includes elements of social assistance, productive cash transfers, and pilot cash transfers for people with disabilities. The project will reach 225,531 households in Niger with nutrition and child sensitive cash transfers.



Niger's potential for gender-responsive social protection and child marriage: The UNICEF HQ team working on social protection identified six out of the twelve Global Programme countries that currently have the potential to leverage large-scale social protection programmes with proven or promising potential for impact on child marriage and provide an opportunity to test what works for even stronger results. Niger is not one of these countries. Niger has a nascent and fragmented social protection system and there is no evidence of impact of social protection on child marriage rates in Niger. UNICEF Niger's planned work on social protection during 2023-2027 consists of strengthening institutional capacity-building for inclusive, adaptive and shock-responsive social protection aimed at reducing poverty at the household level, rather than on cash plus approaches to ending child marriage. However, the next phase of the Sahel Social Protection Joint Programme could be made more sensitive to ending child marriage.

5.10 Civil registration

UNICEF is supporting the government to strengthen Niger's civil registration system. Here are some recent statistics on birth, marriage and death registrations in Niger.

Birth registration statistics for Niger (UNICEF SWOC 2023)

Birth registration rate for children under 1: 67%

Birth registration rate for children under 5: 64% (65% for boys; 62% for girls).

Civil registration results for the first half of 2023 in Niger (from 266 civil registration centres):

Total number of births registered: 336,182

Total number of births expected: 1,199,138

Birth registration rate: 28% of expected births

Marriages registered: 10,293[3]

Deaths registered: 9,539

Is civil registration, including marriage registration, a way to accelerate the decline in child marriage in Niger? Existing evidence shows that governance interventions (incentives and disincentives) such as legislative reform, law enforcement, birth and marriage registration are unlikely to be effective tools for social change in contexts with very high child marriage rates. In contexts where child marriage is the norm, there is generally too much resistance to the application of laws and regulations that are at odds with existing norms and practices. As a result, government staff, community leaders and the general population will find ways to get around unpopular laws and avoid the enforcement of existing laws. A governance and social policy study on child marriage in India hypothesized that governance interventions (including law enforcement and marriage registration) are most likely to work only once child marriage has become a deviation from the norm of marrying as adults, and is expected to only be effective in areas where the rate of child marriage has already dropped below 20%. Investments in a robust civil registration system has multiple benefits and should be supported in Niger. However, birth registration is currently not an effective tool for preventing child marriages in Niger.





6 Conclusions

6.1 Summary of child marriage trends, drivers, policies and programmes

This section presents a summary of the main points made in the preceding chapters.

Child marriage trends: Even following the decline in child marriage and fertility rates reported by the ENAFEME, Niger continues to have the highest child marriage prevalence and fertility rate in the world. Not enough research has been carried out to understand the changes that are happening in Niger in relation to marriage, sexuality and fertility. A better understanding of the causes for the decline in fertility and the rise in the median age of marriage in some of Niger's regions is an important ingredient in the development of strategies to end child marriage at the national and sub-national level in Niger.

Drivers of child marriage: Poverty is widespread and is linked to multiple deprivations, some of which are tied to child marriage drivers. Yet, while economic insecurity influences decisions about marital choice and timing, other primary socio-cultural drivers of child marriage take precedence in Niger. The desire for large families and accompanying high fertility rates, especially in rural farming and herding communities, arranged marriage, bride price, polygyny and religious beliefs form a tight web of interlocking practices that have prevented a more rapid decline in child marriage. Education levels, especially among girls, are extremely low. Education, health and protection services are of low quality and their coverage and reach is limited. The rapid increase in the child population is putting added strain on the capacity of insufficient and already-stretched social services. In addition to these systemic challenges, Niger is facing political, security and climate-related challenges. The recent military coup and subsequent sanctions has further constrained the fiscal space for Niger's government. Together, all these factors explain the slow rate of progress in reducing child marriage.

Legislation and policies: The legal minimum age of marriage for girls in Niger is 15 years old, but even this low minimum age is not being enforced. Legislation to reform the family law has been blocked for years due to resistance from conservative and religious leaders. Niger has a national strategy to end child marriage and the government has made a commitment to end the practice. However, this commitment has not yielded tangible results. There has been no government funding for the national strategy and the government has not provided effective leadership and coordination for its implementation. In a context where child marriage continues to be a strong norm, a significant number of actors relevant to ending child marriage do not actually oppose the practice.

Programming: Most programmes implemented by Nigerien and international organizations focus on the community level. To date, there have been challenges moving from a gender-aware to gender-responsive approach. Although there is broad agreement in the literature and among implementing agencies that efforts to end child marriage have to work with all community actors, including religious leaders, according to the few evaluations that have been carried out, the results of these programmes have been low to moderate in effectiveness and scale. Likewise, supply and demand-side barriers have also limited linkages between community-based programmes and the provision of services. The reality is that many mutually reinforcing factors keep child marriage in place: there is no single pathway to reducing child marriage in Niger. There are currently no sectors that have the capacity and funding to accelerate efforts to end child marriage in country. Key pathways through education or poverty reduction will be slow to show impacts at scale, and extremely long-term endeavours as Niger has amongst the highest poverty and lowest education rates in the world. Moreover, resistance to education and to reproductive health are significant barriers.



6.2 Programming principles

This report has highlighted several principles that are important for reducing child marriage in Niger:

A multi-generational perspective and a long-term approach: The Global Programme to End Child Marriage has been implemented in Niger since 2016 with the aim to end child marriage by 2030. Despite the recent ENAFEME decline in child marriage rates, there is no chance that this target will be met. In the context of Niger, change is very slow. It will take generations to end child marriage. There is no quick fix, no single sector intervention, and no clear pathway that will end child marriage within a short or medium time horizon. Accepting that ending child marriage in Niger will take a couple of generations should lead to longer-term approaches and strategies (see next section).

Community engagement: Change is slow and community engagement on its own will not be enough to end child marriage. Community level approaches that address social and gender norms and behaviours must be complemented by access to quality education, health and protection services for adolescent girls and address economic vulnerabilities. Community engagement must include parents, boys and men in order to promote a conducive and enabling environment and support for the development, protection and empowerment of adolescent girls. Dialogue must build on the strengths and positive values in the community: dialogue that focuses on a community's values, traditions, feelings, and respect for a community's perspectives and the social role and value of child marriage (rather than a narrow focus on harmful practices). The effectiveness of community engagement depends on the quality and sensitivity of community facilitators.

Engagement of religious and traditional leaders as well as fathers and husbands as essential influencers. Work with religious and clan leaders is critical, given their influence on marriage practices and ceremonies. It is important to build local ownership and long-term relationships based on trust. Evidence shows that providing financial incentives may be counterproductive and undermine true ownership and commitment.

A multi-sectoral approach with simultaneous and complementary investments in girls' knowledge and assets: Community engagement is not enough to end child marriage. At the same time, social services are of poor quality, offer limited coverage and are not able to meet existing demands for education, health care and social protection. Complementary, long-term investments are needed in education, health, nutrition, social protection, and economic opportunities for adolescent girls. This requires long-term advocacy and investments in strengthening social service systems. Actors working on ending child marriage must engage with social and economic policy makers and service providers to ensure that strategies, plans and investments take sensitive to efforts to end child marriage and the needs of adolescent girls, including those that are pregnant and mothers.



Coordination and linkages between departments, agencies and interventions: The government of Niger has the ultimate responsibility for the provision of services. This requires continued strengthening of basic social service systems, coordination structures and constructive engagement for legislative reform. None of this will come quickly or easily. Civil society organizations in Niger need increased investment and attention to influence norms, support a human rights-based approach and increase political will for legal and institutional reform.

Continuous investments in evidence generation and dissemination: coordinated efforts to end child marriage are needed, as is the identification of successful models for local action.

6.3 Parallel narratives and the need for a common programmatic framework for a multi-sectoral approach to end child marriage

One of the challenges for implementing agencies are the overlapping narratives related to ending child marriage. Here are the core narratives for Niger.

Tradition in support of child marriage: The desire for large families and many children leads to marrying girls early to maximise their reproductive potential. Marrying girls early also protects them from sexual violence and prevents adolescent girls from engaging in premarital sexual relations and thereby dishonouring their family. Girls' education is not highly valued because it conflicts with the ideal of women and girls as obedient wives and mothers. Contraceptives are avoided to ensure large numbers of children.

The demographic dividend is the accelerated economic growth that can result from changes to a country's age structure as it shifts from high birth and death rates to low birth and death rates. When a country's total fertility rate (the average number of children per woman) drops, average family size declines. In economic terms, this decreases the number of child dependents relative to the working-age population—freeing up personal and societal savings that support economic growth. In human terms it means that parents, communities, and governments can devote proportionately more resources to educating and nurturing each child. It also means that families can invest more in their farms and small businesses.

Gender transformation refers to efforts to change gender and social norms to address inequalities in power and privilege between persons of different genders, in order to free all people from harmful and destructive norms. Gender transformative approaches seek to challenge gender inequality by transforming harmful gender norms, roles and relations, while working towards redistributing power, resources, and services more equally. A gender transformative approach aspires to change inequalities. It tackles the root causes of gender inequality and seeks to change unequal power relations. Gender transformative: contributes to change of social norms, cultural values, power structures, and the roots of gender inequalities and discrimination.

Community-based Child Protection (CBCP) is UNICEF's core approach to ending child marriage in Niger. It is a multi-component programme targeted at whole villages. CBCP was inspired by the Tostan Community Empowerment Programme and is based on the socio-ecological model and assertion that child marriage, like many other harmful practices, is deeply entrenched in social norms. Therefore, changing these practices requires "collective behaviour change" by the community and social networks taking a gender-transformative approach. The CBCP aligns with the GPECM theory of change via three strategies: a) girls' empowerment (via educational talks and life skills), b) broader social and behavioural change interventions (via a variety of group-based and whole village activities) and c) community-based child protection (a "systems" level approach).

Illimin: In Niger, UNFPA implements the community based Illimin programme, which focuses on adolescent girls supervised by mentors, and includes monthly community dialogues in the village square, led by a community facilitator. The Illimin programme enables adolescent girls to acquire knowledge, skills and attitudes to say no to child marriage in order to develop their full potential and participate fully in the development of their community. The programme also promotes community dialogues to induce change and adoption of positive attitudes and behaviours towards investing in and supporting adolescent girls. These dialogues are organized around traditional chiefs, religious leaders and other power holders with the effective participation of adolescent girls, young boys, and parents, on issues related to child marriage, girls' education, reproductive health etc. UNICEF's community approach to child protection uses almost the same content and therefore UNFPA and UNICEF interventions target different communities

Sectoral frameworks: Community engagement must be complemented by investments in services for adolescent girls, especially in education, ASRH, professional training and social protection. Each of these services and systems come with their own conceptual frameworks and approaches, as reflected in UNICEF's programme rationales and national sector priorities.]Gender transformation should be a cross-cutting approach embedded in all narratives. Often, these frameworks and approaches exist in parallel and are not fully aligned. This undermines the potential synergies between complementary investments related to ending child marriage.

Disconnects between community engagement for social norms change on the one hand, and the strengthening of systems and services for adolescent girls on the other.

While the Global Programme in Niger is guided by the theory of change and the overarching aim of gender transformation, the government of Niger and multi-lateral agencies are more focused on reaping the demographic dividend. The child protection and SBC sections are focusing on community engagement, while education and social protection sections in UNICEF are concentrating more on strengthening national systems rather than providing complementary services in the communities where the Global Programme is being implemented. These strategic, programmatic and sectoral disconnects create many missed opportunities and gaps in service delivery that undermine the effectiveness of the programme to end child marriage.

What needs to be done? To bridge the gaps between different programme components, a multi-sectoral approach is needed to the health, nutrition, education, protection and empowerment of adolescent girls. This approach must be underpinned by a common commitment to gender transformation.



7 Recommendations

UNICEF Niger has concentrated its efforts on implementing interventions at the community level and on achieving outputs related to adolescent girls and communities. Because it will take a very long time to end child marriage in Niger, the Global Programme should become more of a catalyst for change, take more risks, experiment and learn – not just for the programme itself, but also for other actors working to end child marriage in Niger (and possibly for and with other countries in the Sahel).



This section presents some areas for further exploration and makes three broad suggestions:

- Incorporate the Global Programme activities into a long-term and **multi-sectoral programme for the development, protection and empowerment of adolescent girls**. This programme should strengthen inter-sectoral linkages and convergence between community engagement and services for adolescent girls.
- Develop a strong **learning programme** to inform and guide all the work done in relation to child marriage in Niger. UNICEF should move beyond programme implementation and become more of a catalyst for change by influencing policies and programmes through evidence-generation and advocacy.
- Identify approaches to increase programming for **particularly vulnerable groups of adolescent girls**, including the youngest and those who are married.

Labels for programme strategies

Strategies	Global Programme to End Child Marriage	Spotlight Initiative
Adolescent girl empowerment	Empower adolescent girls at risk of and affected by marriage	NA
Gender-equitable social norms	Work with families and communities to promote positive behaviours towards girls and their rights	Promoting gender-equitable social norms, attitudes and behaviours
Systems and services	Ensure that health, education, protection and other systems are responsive to the needs and demands of girls	Making high-quality essential services for survivors of violence available
Laws, policies and budgets	Support governments in creating a positive legal and policy environment in relation to child marriage	Promoting laws and policies to prevent violence, discrimination and address impunity Strengthening national government and regional
Data and evidence	Use and build the data and evidence on what works to end child marriage and harmful practices	Improving the quality, accuracy and availability of data on violence against women and girls
Women's movements	NA	Promoting strong and empowered civil society and autonomous women's movements

7.1 LINKAGES: Develop a multi-sectoral programme for the development, protection and empowerment of adolescent girls

Strategies	Global Programme to End Child Marriage	Spotlight Initiative
Adolescent girl empowerment	Empower adolescent girls at risk of and affected by marriage	NA
Gender-equitable social norms	Work with families and communities to promote positive behaviours towards girls and their rights	Promoting gender-equitable social norms, attitudes and behaviours
Systems and services	Ensure that health, education, protection and other systems are responsive to the needs and demands of girls	Making high-quality essential services for survivors of violence available

Why is this a priority? Ending child marriage in Niger requires long-term changes at the community level and complementary investments in services and opportunities for adolescent girls in: education, life skills, ASRH, and livelihood opportunities. A multi-sectoral approach is needed with common objectives for the development, protection and empowerment of adolescent girls across all sectors and within systems that are conducive to the development of adolescent girls. The Community-based Child Protection approach (CBCP) is funded by a consortium of donors via the UNICEF country office, including the Global Programme, Spotlight, BMZ, German National Committee, Shiseido and others. In addition, child protection, education, health, nutrition, WASH, social policy/social protection sections each have their own strategies, priorities and frameworks. There is no clear picture or overall monitoring of all the work that is being done by UNICEF and its partners that is benefiting adolescent girls in Niger. It is also not clear to what extent the different sectoral interventions are reaching adolescent girls and how they are converging to generate positive outcomes for girls and their families.

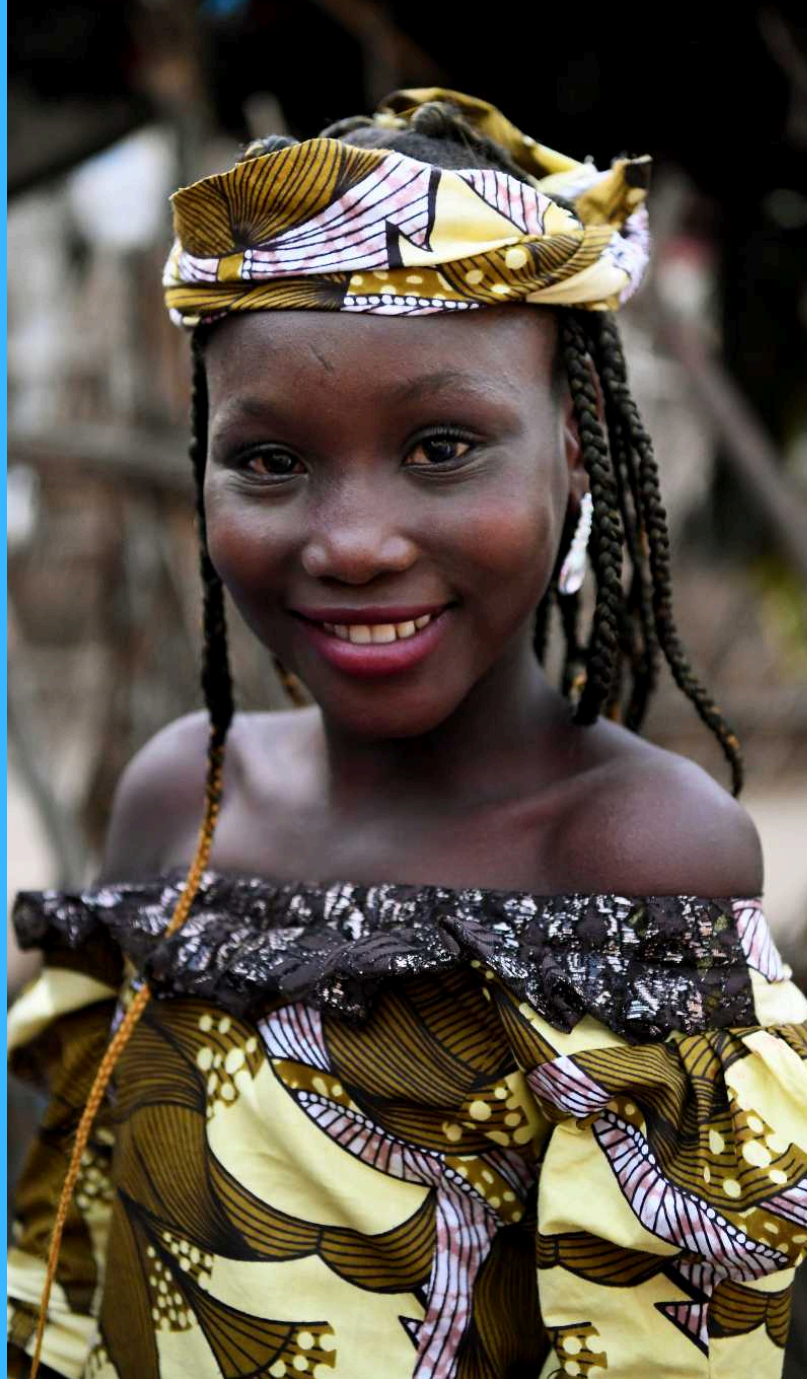
Challenges:

- Social and gender norms are slow to change and deeply embedded in rural/ agricultural life, culture, religion.
- Services and systems have limited coverage and are often of poor quality. Given the limited capacities and limited fiscal space, political and security challenges, investments in social services are struggling to keep pace with the increase in the child population, with little left to expand the coverage and improve the quality of services.
- There is a lack of convergence between sectors and inadequate linkages between community-level interventions for adolescent girls on the one hand, and the provision of health, education and protection services on the other.
- While the theory of change of the Global Programme provides a chapeau for all interventions related to ending child marriage, each section continues to be guided by its own theoretical frameworks. There is a lack of a common programme framework and common narrative that guides all interventions related to the development, protection and empowerment of adolescent girls. Moreover, strategies for gender equality are not fully operationalized across all sectors.
- The child protection section is in charge of the coordination of the child marriage programme but focuses largely on its own the CBCP at the community level (with SBC). There is a lack of overall leadership and coordination of education, health, nutrition, WASH, social protection and child protection work in UNICEF (and beyond) to respond to the needs and rights of adolescent girls.

What needs to be done?

A multi-sectoral approach to the health, nutrition, education, social and child protection and empowerment of adolescent girls supported by a strong SBC and gender transformative approach. Rather than supporting a programme that focuses on ending child marriage, the Niger Country Office should consider implementing an integrated and multi-sectoral programme for the development, protection and empowerment for adolescent girls and young women. Such a programme would involve all UNICEF sections to ensure that all needs and rights of adolescent girls are addressed: health, education, nutrition, WASH, economic opportunities, social protection, community engagement, advocacy, mobilization.

To achieve synergy between different sectoral interventions, a fully integrated multisectoral programme would need a **common theoretical framework, a common results framework, common planning and monitoring**. Ending child marriage would continue to be an important outcome indicator and a source of funding, but not the singular focus of the programme. Some UNICEF country programmes (e.g., India, Namibia, Mali) have used a lifecycle framework (early childhood, middle childhood, adolescence) to enable better alignment and closer convergence between sections. Each of the three lifecycle stages had a coordinator. In the case of India, the Chief of Health coordinated the early childhood component; Chief of Education the middle childhood; and the Chief of Child Protection coordinated the adolescence component. In the Sahel, Plan International is implementing a strategy for adolescent girls, rather than a programme focused on ending child marriage. These examples can offer inspiration for Niger. There is no single model or blueprint of how such a programme is designed and implemented and the Niger office should carefully consider the pros and cons of each approach.



How?

- Develop a common conceptual and results framework for adolescent health, nutrition, WASH, education, child protection and social inclusion with a strong gender transformative focus.
- Joint work planning to align sector interventions and ensure convergence for the health, education and protection of adolescent girls.
- Joint monitoring of results.
- Joint annual reviews and learning across sections.

Key partners: All UNICEF sections under the leadership of the Deputy Representative.

When? This could be fully operationalized during the Mid-term Review of the current country programme (2023-2027). Work on the common framework could start in 2024 to identify ways to improve cross-sectoral convergence.

7.2 LEARN AND LEVERAGE: Develop a strong learning approach to adapt programming, leverage and advocate

Strategies	Global Programme to End Child Marriage	Spotlight Initiative
Adolescent girl empowerment	Empower adolescent girls at risk of and affected by marriage	NA
Gender-equitable social norms	Work with families and communities to promote positive behaviours towards girls and their rights	Promoting gender-equitable social norms, attitudes and behaviours
Systems and services	Ensure that health, education, protection and other systems are responsive to the needs and demands of girls	Making high-quality essential services for survivors of violence available
Laws, policies and budgets	Support governments in creating a positive legal and policy environment in relation to child marriage	Promoting laws and policies to prevent violence, discrimination and address impunity Strengthening national government and regional institutions
Data and evidence	Use and build the data and evidence on what works to end child marriage and harmful practices	Improving the quality, accuracy and availability of data on violence against women and girls
Women's movements	NA	Promoting strong and empowered civil society and autonomous women's movements

Uncovering changes in age of marriage and in reproductive strategies in Niger are an important part of developing effective strategies to reduce child marriage and fertility.

Why is this a priority?

- The Global Programme focuses on implementing community-based interventions and on monitoring outputs. As in most other Global Programme countries, there has been very limited outcome monitoring and evaluations regularly recommend the overhaul of current monitoring and evaluation systems.
- Since ending child marriage in Niger will take a long time, there is a need for much greater investments in learning about what works and what doesn't to end child marriage and to understand the many changes that are happening in different parts of the country in relation to marriage, sexuality and fertility.
- The Global Programme was conceived as a catalyst for broader change rather than just an implementing agency. The Global Programme should support a learning programme that informs other programmes and agencies of what works and what does not work to end child marriage. Such a learning programme should also invest in understanding the change processes that are taking place in Niger and how they could be harnessed to advance gender equality and the empowerment of adolescent girls.



Challenges:

- Few programmes to end child marriage in Niger have been evaluated. Most interventions continue without assessing their effectiveness and outcomes, let alone their impact.
- The Global Programme does detailed output monitoring but hardly any outcome monitoring.
- There is limited understanding of the changes that are happening in Niger in relation to the age of marriage, sexual initiation and fertility.
- Impact-level data on child marriage and fertility depend largely on the DHS. The further analysis of DHS data is limited and there are no studies to understand the declining trends of child marriage and fertility.
- DHS data are representative for the national level but disaggregation by region is possible only to a limited degree due to the DHS sampling size and method.
- The DHS may be able to identify where change is happening but is of limited value for understanding the reasons for these changes.

What needs to be done?

Ending child marriage in Niger is a long-term endeavour. Promote experimentation as part of a learning programme. This would allow to develop new approaches, adapt the programme over time and for practitioners to learn by doing.

What needs to be done?	How?	Key partners	When?
Identify the most urgent questions for research related to child marriage programming and to changes related to marriage and fertility in Niger.	Discussions with key partner agencies in Niger.	Key implementing partners.	2024 Q1
Identify options for carrying out this research, considering methodology, cost, research agencies, audiences.	- Consult with RO, Innocenti, GPSU. - Look at the work of GAGE in Ethiopia, Young Lives, IDRC, CRANK, CAPEG, etc. - Discuss with partner agencies in Niger.		2024 Q2
- Develop a learning strategy and build broad ownership among agencies working to end child marriage in Niger. - The learning strategy needs a strong focus on dissemination and use of findings to inform programming to end child marriage in Niger.	Commission a consulting firm.		
Clarify who will manage this learning strategy. This requires people who can manage research projects and research partnerships but also who have expertise in disseminating research findings.			

Examples of research on child marriage and adolescent girls: There are many good examples of research programmes that study changes in society in relation to marriage, adolescent girls and reproductive health. Here are some examples to draw inspiration from.

GAGE (Gender and Adolescence: Global Evidence)^[1] employs a mixed-methods research approach that includes analysing existing data as well as collecting and analysing new longitudinal quantitative and qualitative data. This combination helps us to understand adolescent experiences across the second decade of life, including which change strategies work for which adolescents, at which ages and in which contexts. GAGE's work has greatly contributed to the understanding of child marriage in Ethiopia.^[2]

Young Lives supports longitudinal studies on the lives of children and adolescents as they grow up. Ethiopia is the only country in Africa included in this long-term research programme. Gina Crivello and Gillian Mann (Editors) (2020) *Dreaming of a Better Life: Child Marriage Through Adolescent Eyes*, Oxford: Young Lives/Ottawa: International Development Research Centre

<https://www.younglives.org.uk/publications/dreaming-better-life-child-marriage-through-adolescent-eyes>

IDRC gender-transformative research projects to improve sexual, reproductive and maternal health in Africa. This African-led interdisciplinary cohort of research teams works across eight countries in East, West and southern Africa. Each project uses gender-transformative approaches to address root causes of poor sexual, reproductive and maternal health outcomes. Expected outcomes include shifts in structural power relations and norms, roles and inequalities that determine the differentiated experiences of women and adolescent girls seeking healthy and respectful sexual and reproductive lives. Knowledge and practice gaps are being addressed through a learning-oriented and participatory set of activities, which will produce localized research frameworks, methodologies, metrics and knowledge products that represent African experiences led by African researchers.

<https://idrc-crdi.ca/en/news/new-cohort-gender-transformative-research-projects-improve-sexual-reproductive-and-maternal>

CAPEG Niger has carried out studies on changes in perspectives and aspirations of women and adolescents, and in relation to education. These studies demonstrate changing values and expectations and variations between urban and rural areas and between regions:

<https://www.capegniger.org/publication/etudes.html>

The analysis done by Thomas Spoorenberg shows the kind of further analysis that can be done with DHS data to uncover changes in reproductive trends that are not visible by only looking at the published fertility rates. The analysis of fertility trends in Niger and other countries in the Sahel over the past forty years reveals that Niger is in a “fertility pretransition” situation and illustrates the early steps towards the decline in fertility. The beginnings of the decline in fertility has been due mainly to the postponement of first births (the postponements of later births have been on a much smaller scale than the postponement of first births) “If these postponements were to continue in the future, it would become increasingly challenging, and physiologically impossible, for women in Niger to compress their fertility further in order to maintain a stable number of children. In other words, the increase in the age of first births makes it physiologically impossible for Niger to maintain an average fertility rate of seven children per woman.

<https://www.gbv.ie/wp-content/uploads/2019/08/LB-8-ME-of-GBV-Campaigns-Programmes-and-Projects.pdf>

<https://www.interaction.org/wp-content/uploads/2021/05/GBV-Prevention-Evaluation-Framework-05-26-21.pdf>

7.3 EXPLORE: Further accelerate the decline in under-15 marriages and invest more in very young adolescent girls

Strategies	Global Programme to End Child Marriage	Spotlight Initiative
Adolescent girl empowerment	Empower adolescent girls at risk of and affected by marriage	NA
Gender-equitable social norms	Work with families and communities to promote positive behaviours towards girls and their rights	Promoting gender-equitable social norms, attitudes and behaviours
Systems and services	Ensure that health, education, protection and other systems are responsive to the needs and demands of girls	Making high-quality essential services for survivors of violence available

Why focus on very young adolescent girls (ages 10-14)?

- Highest rate of under-15 marriages: Niger has (one of) the highest rates of child marriage under age 15 years in the world. In Niger, men may prefer to marry very young and less educated girls because they are more obedient, are virgins (less likely to have relationships with boys) and are perceived to be more amenable to instruction/teaching of responsibilities etc.
- Greatest risks: The youngest adolescent girls (10-14 years) are facing the greatest risks from child marriage to their physical and mental health, education and developmental opportunities. Focusing more on very young adolescent girls is a priority for their health, development and protection. The younger the bride, the more vulnerable she is to intimate partner violence. The risk of maternal mortality and fistula is highest for adolescent girls under 15 years old and their babies are at highest risk of infant mortality and of low birth weight.



- **Early prevention:** A wide-ranging lit review of interventions to improve several aspects of adolescent girls' wellbeing, including delaying marriage, found that a "delay of one year in age at first pregnancy or marriage is not linear in age: a delay during early adolescence can have substantially larger benefits than an equal one in late adolescence."
- **Decline in under-15 marriages:** Child marriage rates in Niger are declining faster for under 15-year-old girls than the overall under-18 child marriage rate. This could be an opportunity to mobilize greater support and achieve quicker results than for the older adolescent girls.
- **Easier access to and more programming opportunities for younger girls:** Younger girls are also more likely to still be in school, while only very few older girls continue their education. A life cycle approach and a segmentation of programming for adolescent girls of different ages may make programming more relevant and effective.

What we know about very young adolescent girls: One sub-group that has received minimal attention is "very young adolescents" (VYAs) - those 10-14-years-old. Younger children may be reached by immunization or school registration initiatives, and older adolescents may be targeted for peer education or youth centre activities, but VYAs tend to fall outside the purview of most programs and policies. Pre- and early adolescence is a period of dramatic physiological, social, and emotional changes. Changes include: solidification of gender role identification and attitudes; sexual development; emerging needs for greater privacy; development of abstract thinking skills; and higher susceptibility to peer pressure. Importantly, girls experience menarche and boys spermarche, which has profound social significance, particularly for girls.

There is a wealth of information about the physical and mental development of adolescent girls of all ages; an extensive literature on sexual and reproductive health for younger and older adolescent girls; knowledge about grade- and age-specific education; protection risks; age-specific life skills curricula. However, programming to end child marriage has paid little attention to the specific needs and requirements of the youngest adolescent girls. While life skills curricula are often age-specific and the Global Programme tracks younger and older adolescent girls for two of its indicators, there is no overall guidance on programming for the youngest adolescent girls. Niger could develop and pilot such approaches and these could be refined and used in other contexts.

There is a big gap in knowledge about the sexual and reproductive health of under-15 years old girls in Niger, as elsewhere. There are no statistics about marriage and fertility rates for under-15-year-old girls in Niger. The following table presents some proxy indicators from the ENAFEME 2021 that shows that Maradi and Zinder regions have the lowest median age at first union, median age at first sexual relations, highest fertility rates and highest live birth rates among 15–19-year-olds in Niger.

Table 7: Proxy indicators for regions in Niger with the highest rates of under-15 marriage

Region	Median age at first union (women 20-49 years)	Median age at first sexual relations (women 20-49 years)	Fertility rate (women 15-49 years)	Women aged 15-19 who had a live birth
Agadez	19.2	19.6	5.9	11
Diffa	17.4	17.4	6.8	14.2
Dosso	16.5	16.6	5.8	17.8
Maradi	15.9	16.1	7.6	24.5
Tahoua	16.9	16.9	5.8	15
Tillaberi	17.3	17.4	5.2	11.9
Zinder	15.5	15.6	6.7	28.6
Niamey	NA	NA	4.2	6.1

The Global Programme in Niger disaggregates monitoring data by sex, age, disability and other criteria. The 2022 annual report presents age-specific data for two output indicators. The table shows that the Global Programme in Niger focuses mostly on girls aged 15 to 17 years. Only 13 percent of girls participating in life skills education were below the age of 15, and no girls under 15 benefited from education support funded by the Global Programme (these numbers do not consider complementary programmes and services for girls' education). The reasons for the preferential focus on older adolescent girls are not clear but would be important to understand were UNICEF Niger to decide to prioritise interventions at these younger girls.

Table 8: Niger GPECM results 2022

	Indicator 1111: Number of adolescent girls (aged 10-19) who actively participated in life skills or CSE interventions in programme areas,	Indicator 1121: Number of girls (10-19) supported by the programme to enrol and/or remain in primary or secondary school, disaggregated by age
2019 Results	9,505	NA
2020 Results	12,471	276
2021 Results	43,009	1,649
2022		
Targets	16,000	3,000
Results	19,603	3,000
Unmarried girls	16,074	3,000
Married girls	3,529	0
Girls 10-14 years	2,548	0
Girls 15-19 years	17,065	3,000
Girls with disabilities	22	

What needs to be done?

- Find out why the programme has focused so much more on older girls, especially when the rate of under-15 marriage is so high. Gather information on what different sections are doing or not doing in relation to very young adolescent girls and why.
- More thinking and work on programming for the youngest adolescent girls is needed. Perhaps this kind of research could be undertaken in a regional study of the Sahel, in order that its findings could inform more than one country programme.

Some preliminary programme considerations:

- Younger adolescent girls may be easier to reach than older adolescent girls because more of the younger adolescents are still in primary or lower secondary education.
- Adolescent frameworks make a distinction between younger and older adolescents.
- Many curricula for life skills education, sexuality education, violence prevention, online protection, etc. have age-specific modules.
- A life cycle approach segments programming for children according to early childhood, middle childhood and adolescence.

How?

- Approaches have to be adapted to younger and older girls: Interventions that prove to be effective vary across contexts and according to the age and development of a girl. Effective interventions for younger adolescents aged 10 to 14 years may differ from those that are effective for older girls aged 15 to 17 years. Examples of age cohort-specific interventions may include: primary or secondary education, different life skills and sex education curricula; greater challenges to access ASRH services and different kinds of ASRH information; or scheduling of clubs for younger and older adolescent girls according to their schooling and household responsibilities. Monitoring data has to be disaggregated by age.
- Segment programming and targeting of girls in early adolescence (ages 10 to 14) is a key age at which to engage both girls and boys considering their increasing opportunities to reflect on and reinforce or question inequitable gender norms.
- Understand the under-15 child marriage rates by regions in Niger.
- Pilot in regions with the highest rates of under 15-year-old marriage (Maradi and Zinder).

Key partners: UNICEF health, nutrition, WASH, education, SCB sections; UNFPA; WCARO; ADAP section New York.

When? Start in 2024.

7.4 EXPLORE opportunities for supporting adolescent mothers

Strategies	Global Programme to End Child Marriage	Spotlight Initiative
Adolescent girl empowerment	Empower adolescent girls at risk of and affected by marriage	NA
Gender-equitable social norms	Work with families and communities to promote positive behaviours towards girls and their rights	Promoting gender-equitable social norms, attitudes and behaviours
Systems and services	Ensure that health, education, protection and other systems are responsive to the needs and demands of girls	Making high-quality essential services for survivors of violence available

Why support adolescent mothers? Niger has one of the world's highest adolescent birth rate with 154 births per 1,000 adolescent girls and young women aged 15–19 (4 births per 1,000 adolescent girls aged 10–14). Married adolescent girls and girls who are already mothers have unique needs, which health care, education and social services systems are often not set up well to meet. Responses to adolescent pregnancy to date have been heavily focused on prevention and maternal health, ignoring broader sexual and reproductive rights, the psychological and socio-economic consequences of adolescent pregnancy, and the complex needs of married girls, pregnant adolescents and adolescent mothers.

Adolescent mothers: Girls who get pregnant are excluded or drop out from school; they are especially vulnerable. This is particularly important in Niger, as elsewhere on the continent, where the formal education of benefits for girls, their families, and the communities in which they live. Malnourished adolescent mothers present an increased to transfer malnutrition to their child and then enhance the vicious cycle of inter-generational under-nutrition girls already lags behind that of boys. School enrolment has been demonstrated to yield many

- **Married adolescents:** Married adolescents are forced to mature early. They constitute the majority of those with fistula, who often face high levels of stigma and ostracism within their families and communities. They are hardly able to take care of their children when they themselves deserve care.
- **Married adolescent girls** are the next generation of mothers. There is a need to invest in continuing adolescent girls' education prior to and during marriage, as well as in related economic empowerment initiatives, while working with institutions and policymakers to enforce and promote continuing-education initiatives for adolescent girls.
- The focus of the Global Programme has been on prevention of child marriage and on the health risks posed by child marriage, but more **support is needed for girls and adolescents who are already pregnant or mothers.**

Supporting adolescent mothers, girls who are pregnant and married girls is important to prevent:

- **Health Risks:** 99% of all maternal deaths happen among adolescent girls aged 15-19.
- **Disruption to education:** due to lack of awareness of re-entry policies, lack of flexibility, finance, parental support, ongoing stigmatisation and discrimination.
- **Impact on future life prospects:** less access to secure, well-paid employment; financial insecurity, leading to informal unions and/or transactional sex; stigmatisation; daughters more likely to become adolescent mothers.
- **Reproductive coercion:** removing the right to decide if and when to have children.
- **Mental health:** increased risk of depression, anxiety and suicidal thoughts.
- **Gender-based violence:** Adolescent mothers are more likely to experience intimate partner violence.

Challenges

What needs to be done?

- Explore the extent to which implementing agencies in Niger are providing services for married adolescent girls and their willingness to do so in the future (the Global Programme focuses more on unmarried girls according to the 2022 Annual Report). While it is too late to prevent the marriages of already married girls, adolescent mothers are raising the next generation of girls. Are they a "lost cause" or are there opportunities for early prevention for the next generation of girls who are at risk of child marriage? A long-term approach to ending child marriage must think in terms of generations rather than years of programming strategies.
- New initiatives should be developed to reach out to this group and young adolescent girls should be consulted and engaged in the articulation of their needs and potential solutions to the challenges they face.

How to support adolescent mothers? Multi-sectoral recommendations:

- Responses to adolescent marriage, pregnancy and motherhood should be multi-sectoral, integrated into existing national strategies and consider girls' education; economic opportunities; reproductive coercion; mental health, discrimination and support for new mothers; gender-based violence; HIV; and access to justice and support services.
- Create referral and tracking mechanisms between the health, education and child protection systems to identify pregnant adolescents in school and refer them to appropriate maternal health, support and child protection services.
- Create safeguarding policies in schools to refer girls to appropriate child protection and psychosocial support services where the pregnancy is the result of rape or the father is an adult.
- Track adolescent girls who have left school due to pregnancy and actively reach out to girls after birth to facilitate reintegration into school.
- Combine access to education, health and child protection services with community-based programmes to lessen the stigma associated with adolescent pregnancy and motherhood and build girls' agency.

Recommendations from Girls Not Brides:

- Implementation of clear referral and tracking mechanisms between the health and education systems to identify pregnant adolescents in school, support them to access appropriate maternal health and support services, and return to school after birth.
- Establishment of mechanisms for identifying cases of pregnancy arising from sexual violence or coercion and referral to child protection services and legal authorities where appropriate.
- Implementation of flexible return-to-school policies that accommodate the specific needs and rights of adolescent mothers, including the provision of affordable or free childcare.
- Financial support; provision of scholarships or cash transfers for adolescent mothers to support their return to school and/or support them to enter the workforce or generate income.
- Implementation of social support programmes to help adolescent mothers overcome stigma and navigate becoming a mother for the first time, including building support networks, agency, and life skills, and engagement with the wider community.
- Training of sexual and reproductive health care staff on the rights of adolescent mothers to access health services – regardless of age or marital status – and on the risks faced by pregnant adolescents.
- Access to contraception for married girls and adolescent mothers who wish to delay or space their pregnancies.
- Access to safe abortion and post-abortion care for adolescents who do not wish to continue with their pregnancies.

Key partners: UNICEF health, nutrition, WASH, education, SCB sections; UNFPA; WCARO; ADAP section New York.

When? Start in 2024.



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Annexes

Key informants

Participants at 23 October 2023 discussion with Niger sections and zonal offices:

Héla Skhiri

Patricia Safi Lombo

Fatouma Ali Goudal

Harouna Moussa Ibrahim

Jean-Claude Mubalama

Kadre Seini

Katherine Wepplo

Moutari Zezi Dade

Priscilla Ofori-Amanfo

Raisa Edwige Vanian

Salmey Bebert

Sylvain Nkwenkeu Fils

Zacko Francis

Table 9: Interviewees

Title	Name	Position/organization	Interviewed
1. UNICEF Child Protection	Katherine Wepplo	Chief Child Protection	
2. Gender Focal Point UNICEF	Salmey Bebert	Child Protection Specialist	
3. UNICEF Education	Patricia Safi Lombo	Chief of Education	Nov 6, 2025
4. UNICEF Social Policy	Moutari Zezi	Social Policy Specialist	
5. UNICEF SBC	Abdou Ali	SBC Specialist	
6. UNFPA	Nounou Mamane	Chargé de programme Illimin	Oct 27, 2025
7. UNFPA	Alzouma Mahamadou	Chargé des données statistiques	Oct 31, 2025
8. Save the Children	Moutari Abdoul Madjidi	Chargé de programme	Oct 31, 2025
9. SongES Niger	Haidara Mohamed	Coordonnateur Programme	Oct 26, 2025
10. ENABEL (Coopération Belge)	M. Hama Amadou Roufahi	responsable du projet Education et VBG	Nov 3, 2025

Key indicators for Niger (2022)

Indicators	Data
Child marriage	
Child marriage rate	76
Child marriage trend	Stagnation
Reproductive health	
Annual population growth rate	3.30%
Fertility rate	6.70%
Adolescent birth rate	154
Births by age 18	48%
Demand for family planning satisfied with modern methods (females aged 15-19, %)	28%
Median age at first sex (women ages 25-29)	15.5
Median age at first marriage (women ages 25-29)	15.3
Median age at first child (women ages 25-29)	17.3
Economy and human development	
Income category	low
GDP per capita (current US\$)	595
GNI per capita	590
Poverty headcount ratio at national poverty lines (% of population)	41
HDI	0.4
HDI rank	189
Life expectancy at birth	62
Education	

Gender	
Gender Development Index	0.724
Women making their own decisions regarding sexual relations, contraceptive use and reproductive health care (% of women age 15-49)	7
Attitude to violence (3 is best)	1
Social independence (3 is best)	1
Decision making (3 is best)	1
Female adolescents not in education, employment or training	71%
Female labour force participation	61%
Female mobile phone ownership	55%
Female financial inclusion	11%
Worldwide Governance Indicators (range from +2.5 to -2.5)	
Government effectiveness	-0.62
Political stability and absence of violence/terrorism	-1.74
Regulatory quality	-0.74
Rule of law	-0.55
Control of corruption	-0.66
Voice and accountability	-0.52

Primary education completion rate girls	24%
Lower secondary education completion rate girls	4%
Upper secondary education completion rate girls	1%
Youth literacy rate girls (15-24 years)	36%
Girls out of primary education (%)	45%
Girls out of lower secondary education (%)	69%
Girls out of upper secondary education (%)	84%
Marriage patterns and practices (culture)	
Gap in median age at first marriage between males and females	7.4
Polygamy	29%
Informal union	0
Religion	
Christian	1%
Muslim	98%



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