



WHEC Update

Briefing of worldwide activity of the Women's Health and Education Center (WHEC)

June 2018; Vol. 13. No. 06

Achieving Global Health

Every 2 seconds a young girl is forced into marriage. Be part of the generation that changes that. Our June 2018 edition is focused on child marriage and introducing various global projects. We hope you all will support these global efforts. More than 140 million girls below 18 years of age will marry between 2011 and 2020. Furthermore, of the 140 million girls who will marry before they are 18; 50 million will be under the age of 15, as stated in joint news release of Every Woman Every Child / Girls Not Brides / PMNCH / United Nations Foundation / UNFPA / UNICEF / UN Women / WHO / World Vision / World YWCA. If current levels of child marriages hold, 14.2 million girls annually or 39,000 will marry too young. If these numbers are shocking – yes, they are shocking.

The next generation of development programs must make ending child marriage a priority. Investments should consider successful programmatic strategies, such as identified by our Working Group, while continuing to test innovative approaches and evaluation techniques. No single strategy, however, will offer the antidote to child marriage. Indeed, a combination of strategies, designed to fit the local context, will likely be most successful in transforming behaviors, attitudes and social norms.

Moving forward, there also must be more investment in documenting and evaluation what works to end child marriage. A body of successful programs now exists to expand on, but much more work is required across geographic settings and communities. It is critical that these efforts do not overlook girls who are already married. They are among the most marginalized members of society and need special attention in development programs and planning. Married girls, and their peers at risk of early marriage, must be at the center of programs. Families, community leaders and the broader community are also essential to helping change norms and expectations about what is possible for girls and women.

We all at the Women's Health and Education Center (WHEC) are grateful to UN DPI NGO, WHO, UNICEF and numerous international NGOs for collaborating with us in this initiative. WHEC recommends these strategies for development for ending child marriages:

1. Supporting and enforcing legislation to increase the minimum age of marriage for girls to 18 years;
2. Providing equal access to quality primary and secondary education for both girls and boys;
3. Mobilizing girls, boys, parents and leaders to change practices that discriminated against girls and to create social, economic, and civic opportunities for and young women;
4. Providing girls who are already married with options for schooling, employment and livelihood skills, sexual and reproductive health information and services (including HIV prevention), and offering recourse from violence in the home;
5. Addressing the root causes of child marriage, including poverty, gender inequality and discrimination, the low value placed on girls and violence against girls.
6. Support UNICEF's and WHO's work in reducing child marriage by connecting with the grassroots organizations and local non-profits working at the grassroots level.

With international networks WHEC will continue its work to prevent child marriages worldwide. Join our community. End child marriage once and for all.

Ending Child Marriage – A Call for Global Action

Rita Luthra, MD



Your Questions, Our Reply

Why is child marriage a global concern? What is child marriage? What are the factors that promote and reinforce child marriage?

A Call for Global Action: Child marriage, also known as early marriage, is defined as “[A]ny marriage carried out below the age of 18 years, before the girl is physically, physiologically, and psychologically ready to shoulder the responsibilities of marriage and childbearing.” Marriage is a formalized, binding partnership between consenting adults, which sanctions sexual relations and gives legitimacy to any offspring. It is still a respected and valued social institution throughout the world and may take different forms in different cultures. In many societies in developing countries, child marriages are used to build or strengthen alliances between families. Sometimes this may even include the betrothals of young children or babies. Child marriage – marriages of under-15 is more common in rural communities. This is because rural communities tend to hold on to more entrenched traditional attitudes and customs.

The silence on the plight of child brides must end. Tackling child marriage is a daunting but possible task, requiring political will and proactive multi-faceted strategies at the international, national and community



levels. Traditional notions of child marriage continue to justify it as a positive social norm with social and financial benefits. However, new studies on the health and social consequences reveal far more damaging results.

Child marriage is public health concern that violates international human rights laws and seriously compromises the development and health of affected individuals. Child brides are pressured to initiate sexual activity and become mothers too early. Marriage of girls often correlates with low levels of education, or no education. Globally, child marriage affects more girls than boys. On average only 5% of males marry before they reach 19 years.

Domestic violence thrives in an environment where women feel powerless and lack access to vital resources and decision-making powers. Child marriages tend to create a multitude of conditions that make affected young women vulnerable to violence. The wide gap between child brides and their spouses make them less able to negotiate, they have limited social support networks, and economically dependent and have limited social support networks, are economically dependent and have limited mobility. Younger child brides may also be at risk of sexual violence and abuse from older men in their spouses' families and are known to be more likely to tolerate violence and less likely to leave abusive partners.

The persistent neglect of the plight of child brides in parts of South Asia, Africa, the Middle East and Latin America is a direct reflection of failure of our collective responsibility to protect the human rights of vulnerable young people. The silenced voices of the many millions of young women and girls forced into marriage before their eighteenth birthday signify complacency and discrimination. Most countries have laws on the minimum age of marriage, but they are largely ineffective, not enforced or operate alongside customary and religious laws.

Do you think this does not exist in United States or other developed countries? Think again.

Some studies sponsored by UNICEF show the practice of child marriage in a few developed countries, including the United States where parents can give consent to the marriage of their daughters below the age of 15 years (1).

Reference:

1. Mathur S, Greene M, and Malhotra A. (2003) *Too Young To Wed: The Lives, Rights and Health of Young Married Girls*, Washington DC: International Centre on Research on Women

Efforts of World Health Organization to End Child Marriage: An Introduction

By Manahil Siddiqi and Venkatraman Chandra-Mouli

Accelerating Progress in Ending Child Marriage

The recently announced global decline in child marriage marks remarkable progress – from 15 million girls married below the age of 18 each year, to 12 million. South Asia has witnessed the largest drop in child marriage over the past decade, due largely to progress made in India. While the global decline is a celebratory moment in our fight towards ending child marriage, there is much more to be done.

The Department of Reproductive Health and Research at the World Health Organization, in collaboration with the University of Washington School of Public Health, are investigating the factors associated with child marriage declines in various countries. Our study in Rajasthan, India – a region that has seen rapid declines in child marriage prevalence over the last decade, pools data from multiple district-level data sources to examine the association between changes in various sociodemographic and district development indicators and changes in child marriage prevalence in all 33 districts of Rajasthan, India.

Generalized global and national estimates mask the immense variations in levels and trends of child marriage within countries, and among different groups, and obscure the localized aspects of this practice. Analyses of sub-national (i.e. district, state, regional, provincial level) data, provide a more nuanced, and detailed picture of child marriage within countries to inform effective policies and practice.

Here are 3 reasons why a sub-national analysis of child marriage is critical to progress:

1. Identifies vulnerable sub-groups to ensure we are “leaving no one behind” and illuminates variations in child marriage trends. Generating detailed, sub-national estimates of child marriage is valuable in monitoring trends over time and understanding the immense variations that exist within countries. In both Ethiopia and India, child marriage is declining, but progress has been uneven.
2. Reveals differences in the drivers of child marriage in different contexts and enables tailored approaches. National and district-level policy makers, program planners and community members can use the evidence from sub-national analyses of child marriage, to plan tailored strategies for different populations.
3. Highlights opportunities to utilize sub-national data for a range of health indicators. Analyzing public health data at smaller administrative units is important across the board. Sub-national analyses of adolescent pregnancy, which child marriage is a key driver of, have also been instrumental in highlighting where progress in reducing adolescent births is being made within countries.

The Road Ahead

As we celebrate the global declines in child marriage, it is important to not be complacent. Using sub-national analyses of child marriage can continue and strengthen what has worked so far in reducing child marriage and inform strategy to accelerate progress at every level moving forward.

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Efforts of UNICEF

Child Protection



Child Protection Issues

In many cases, a child will be exposed to different types of violence, exploitation and abuse, each with their own characteristics. Changes in legislation, policies, services and social norms can improve the protection of children in multiple ways. UNICEF therefore works with partners on several issues by strengthening child protection systems and promoting positive social norms in all contexts – development and emergency – to prevent and respond to violence, exploitation and abuse directed at children.

Where prevalent, child marriage functions as a social norm. Marrying girls under 18 years old is rooted in gender discrimination, encouraging premature and continuous child bearing and giving preference to boys' education. Child marriage is also a strategy for economic survival as families marry off their daughters at an early age to reduce their economic burden during times of stability and in crisis.

Empowering girls and women and ensuring girls and boys are healthy is at the core of UNICEF's mission. Because UNICEF works across multiple sectors, and because it works both with high-level decision makers as well as with grassroots community organizations, it is uniquely positioned to identify and address some of the systemic and underlying factors that pose a challenge to reproductive health, rights and gender equality.

Child Marriage: Status + Progress

The issue of child marriage is addressed in several international conventions and agreements. The Convention on the Elimination of All Forms of Discrimination against Women, for example, covers the right to protection from child marriage in article 16. Across the globe, levels of child marriage are highest in sub-Saharan Africa, where around 4 in 10 young women were married before age 18, followed by South Asia, where 3 in 10 were married before age 18. Lower levels of child marriage are found in Latin America and Caribbean (25%), the Middle East and North Africa (17%), and Eastern Europe and Central Asia (11%).

UNICEF seeks to prevent and respond to violence, exploitation and abuse of children everywhere.

Details: <https://data.unicef.org/topic/child-protection/child-marriage/>

Child Marriage and U.S. Foreign Policy

Issues related to human security, issues like child marriage are simply not "soft" issues

It was not so long ago in this country that girls got married regularly as young teenagers. But as we have industrialized, as we have become wealthier nation, that age of maturity has gone higher and higher. What, therefore, constitutes the basis to define a child? Physical development and emotional maturity are important markers, but we cannot overlook the ability to truly develop the skills one needs to assume the responsibility of adulthood.

Solving Child Marriage on the Ground

Ending child marriage is a daunting task, but several strategies have proven successful in curbing the practice. The Council on Foreign Relations identifies the following approaches:

- Expand access to education;
- Spread awareness;
- Offer incentives to families;

- Expand maternal and reproductive health services;
- Strengthen laws and enforcement mechanism;
- Improve data collection; and
- Raise diplomatic pressure.

“Education for girls is one of the best strategies for protecting girls against child marriage.”
 – BAN KI-MOON, SECRETARY-GENERAL OF THE UNITED NATIONS

Council on Foreign Relations, The Value of a Bride
https://www.cfr.org/interactives/child-marriage?cid=otr_marketing_use-child_marriage_InfoGuide#!/



United Nations at a Glance

The Permanent Mission of Fiji To The United Nations

Fiji became Member State of the United Nations on 13 October 1970



Fiji, officially the **Republic of Fiji**, is an island country in Melanesia in the South Pacific Ocean about 1,100 nautical miles (2,000 km; 1,300 miles) northeast of New Zealand's North Island. Its closest neighbors are Vanuatu to the west, New Caledonia to the southwest, New Zealand's Kermadec Islands to the southeast, Tonga to the east, the Samoas and France's Wallis and Futuna to the northeast, and Tuvalu to the north. Fiji is an archipelago of more than 330 islands – of which 110 are permanently inhabited – and more 500 islets, amounting to a total land area of about 18,300 square kilometers (7,100 sq. miles).

Fiji has one of the most developed economies in the Pacific due to an abundance of forest, mineral and fish resources. Today, the main sources of foreign exchange are its tourist industry and sugar exports. The country's currency is the Fijian dollar. Fiji was a Crown colony until 1970, when it gained independence as the Dominion of Fiji. A republic was declared in 1987, following a series of coups d'etat.



The Permanent Mission Of Fiji
 To The United Nations



Fiji established its Permanent Mission to the United Nations on 13 October 1970, three days after obtaining its independence from the United Kingdom. Since then, Fiji's participation in the United Nations has been notable primarily for its active role in UN

peacekeeping operations, which began in 1978.

Fiji's contribution to United Nations peacekeeping are noteworthy. The country had suffered had suffered human loss in doing so, it took pride in helping to protect people in troubled parts of the world. For the Fijian people, climate change is real. Whether it was whole villages moving out the way of rising seas or salinity seeping into crops, global warming had changed Fiji's understanding of its national interests. It may be tempting for political leaders to show that they are protecting some national industry or near-term economic goal, but at what cost?

Details: <https://gadebate.un.org/en/72/fiji>

Collaboration with World Health Organization (WHO)

WHO | Fiji



Health Situation

Fiji is comprised of over 100 inhabited islands covering over 18,000 square kilometers in the South Pacific Ocean. In 2010, the leading causes of death in Fiji were diseases of the circulatory system (44%), endocrine, nutritional, or metabolic diseases (13%), and neoplasms (10%). The leading causes of morbidity were diseases of the circulatory system and respiratory system and certain infectious and parasitic

diseases.

Health services are delivered through 98 nursing stations, 84 health centers, 17 sub-divisional hospitals, three divisional hospitals, and three specialty hospitals, with TB, leprosy and medical rehabilitation units at Tamavua Hospital and St. Giles Mental Hospital. There is also a private hospital located in the capital city, Suva. According to data collected in 2008, the health worker-to-population ratio was 1:2609 for doctors, 1:493 for nurses, and 1:4580 for dentists.

Health Policies and Systems

The Ministry of Health and Medical Services National Strategic Plan 2016-2020 documents the policy priorities the ministry has set regarding its strategic direction for health care in Fiji over the next five years. The strategic plan has two strategic pillars: 1) preventive, curative and rehabilitative services; and 2) health system strengthening.

Cooperation for Health

The MOH implements support from development partners through memorandums or letters of understanding, annual work plans, or mutual agreements of biennium budgets that are based on MOH's National Strategic Plan and are prioritized in the annual corporate plan.

Details: <http://www.who.int/countries/fiji/en/>

Bulletin Board

Privacy Policy

...Continued

Personally, identifiable information

WHEC may use the personal information you provide to: Contact you – either in response to a query or suggestion, or to mail newsletters, documents, publications etc. to you; "Remember" your online profile and preferences; Help you quickly find information that is relevant to you based on your interests and help us create site content most relevant to you.

Statistical analysis

What if I don't want to provide personal information?

Providing personal information on the WHEC site is optional. If you choose not to provide personal information, you can still browse and use the WHEC site.

Security

We do not sell or share any personally identifiable information volunteered on the WHEC site to any third party. Any information provided to WHEC by users of the WHEC site is held with the utmost care and security and will not be used in ways other than as set forth in this privacy policy, or in any site-specific policies, or in ways to which you have explicitly consented. WHEC employs a range of technologies and security measures to protect the information maintained on our systems from loss, misuse, unauthorized access or disclosure, alteration, or destruction. All our employees who have access to, and are associated with the processing of personal data, are obliged to respect the confidentiality of official business matters, including personal data.

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Collaboration with UN University (UNU)

*UNU-WIDER (World Institute for Development Economics Research)
Expert Series on Health Economics*

Food Security in the South Pacific Island Countries with Special Reference to the Fiji Islands

This paper analyses the food security in selected South Pacific Island countries, namely Cook Islands, Fiji Islands, Papua New Guinea, Samoa, Solomon Islands, Tonga, and Vanuatu at the national and household levels during the period 1991-2002. Due to narrow resource base and production conditions, Pacific Islands concentrate on a few primary commodities for production and exports. During recent years import dependency for items has increased mainly due to decline in per capita food production and a rapid rate of rural-urban migration. Currently, export earnings can finance food imports, but earnings could fall short of the requirements needed after the expiry of some commodity preferential price agreements with importing countries.

National food security is dependent on the continuation of subsistence farming and tapping ocean resources in conjunction with the on-going commercial farming of those crops in which Pacific Islands have a comparative advantage. Increased productivity is crucial for improving agricultural research and extension, irrigation and appropriate price incentives. This would also help alleviate poverty for improvement in economic accessibility of food by households. There is also a need to design appropriate disaster risk management programmes to minimize any adverse effects on the food supply.

Author: Kanhaiya Lal Sharma; Publisher: UUNU-WIDER; Sponsors: UNU-WIDER acknowledges the financial contributions to its research programme by the government of Denmark (Royal Ministry of Foreign Affairs), Finland (Ministry of Foreign Affairs), Norway (Royal Ministry of Foreign Affairs), Sweden (Swedish International Development Cooperation Agency – Sida) and the United Kingdom (Department for International Development)

Details of the paper can be accessed from the link of UNU-WIDER on CME Page
<http://www.WomensHealthSection.com/content/CME>



United Nations Girls' Education Initiative (UNGEI) *The Effort to Advance the Global Strategy (continued)*

Gender Equality in Education: East Asia and Pacific – Progress Note

Author: UNICEF

This report was developed by UNICEF EAPRO in collaboration with the East Asia and Pacific Regional United Nations Girl' Education Initiative (UNGEI) and in cooperation with UNESCO Bangkok and the UNESCO Institute of Statistic office for Asia-Pacific (AIMS Unit), as a contribution to the larger set of results from the Asia and Pacific Education for all Mid-Decade Assessment process.

The progress note draws extensively on findings and data from national assessments and thus special acknowledgement must be given to those coordinators and teams, which led this important process in their countries. The Progress Note also draws extensively upon other research, evaluations, household surveys and analytical reports – and we acknowledge the excellent work done by a wide range of partners as cited in this note.



In 1948, the General Assembly of the United Nations adopted and proclaimed the Universal Declaration of Human Rights (UDHR), in which Article 26 asserts that “everyone has a right to education.” This fundamental right was further expanded in 1988 in the Convention on the Rights of the Child (CRC), with stipulates that every child has a right to a basic education, of good quality, and in their own language. In 1990, using these documents as their guides, the United Nations Development Programme (UNDP), the United Nations Educational, Scientific and Cultural Organization (UNESCO), the United Nations Children’s Fund (UNICEF) and the World Bank organized the World Conference on Education for All (EFA).

The Dakar EFA (Education For All) Goals:

- Expanding and improving comprehensive **early childhood care and education**, especially for the most vulnerable and disadvantaged children;
- Ensuring that by 2015 **all children** particularly girls, children in difficult circumstances and those belonging to ethnic minorities, **have access to and complete free and compulsory primary education** of good quality.
- Ensuring that the learning needs of all young people and adults are most through equitable access to **appropriate learning and life skills** programmes;
- Achieving a 50% improvement in levels of adult **literacy** by 2015, especially for women, and equitable access to **basic and continuing education** for all adults;
- **Eliminating gender disparities in primary and secondary** education by 2005, and achieving gender equality in education by 2015, with a focus on ensuring girls’ full and equal access to and achievement in basic education of good quality;
- **Improving all aspects of the quality of education** and ensuring excellence of all so that recognized and measurable learning outcomes are achieved by all, especially in literacy, numeracy and essential life skills.

Details: http://www.ungei.org/resources/files/Gender_progressNote_web.pdf

To be continued...

Two Articles of Highest Impact, May 2018

Our friendship has no boundaries. We welcome your contributions.

1. Teen Pregnancy: Understanding the Social Impact;
<http://www.womenshealthsection.com/content/obs/obs002.php3>
WHEC Publications. Funding: WHEC Global Initiatives are funded by a grant from an anonymous donor.
2. Adolescent Health Care
<http://www.womenshealthsection.com/content/gyn/gyn022.php3>
WHEC Publications. Funding: WHEC Global Initiatives are funded by a grant from an anonymous donor.



From Editor's Desk *A Perception Change Project*

Is this the world we want? Is this the future of our neighbors and friends?

Faces of Child Brides



Human Rights Violations

Many families and religions believe blessings will come upon them if they marry off their girls before their first menstruation. Child marriage is a violation of Article 16(2) of the Universal Declaration of Human Rights, which states that "Marriage shall be entered into only with free and full consent of the intending spouses." Article 16 of the Convention of the Elimination of all Forms of Discrimination Against

Women (CEDAW) states that women should have the same right as men to "freely choose a spouse and to enter into marriage only with their free and full consent," and that the "betrothal and marriage of a child shall have no legal effect."

In 41 countries, the prevalence of child marriage is 30% or more (UNFPA)



Mental Health and Violence

"In my whole life, I have never felt love" – statement of a victim of child marriage in Afghanistan. A child bride often enters her marriage with feelings of fear and powerlessness, which are reinforced by abrupt changes in her life over which has no control. Besides what is often a rough and traumatic introduction to sex, she will be expected to carry the burden of household responsibilities, in almost complete

isolation from her birth family and friends.



Stories from The Burn Units

Self-Immolation (suicide) has long been recognized as an extreme form of political or religious protest. In countries where girls are married off before they even reach puberty, are denied education, suicide by fire is the most common form of ending

one's life. Those who admit to setting themselves on fire – almost without exception cite a desperate need to escape a forced marriage, a violent spouse and/or the brutality of family members. About 80% of these suicide attempts are successful, according to the research done by a German medical NGO, serving in Asia and Middle East. More than half of the cases involve girls between the ages of 16 and 19. Many end up in burn-units with no or very limited medical resources of the public hospitals, with 95 % of their bodies burnt.



Giving Young Girls and Young Boys A Chance

Most of these young girls and boys likely to marry before the age of 18 reside in rural and remote areas, have little or no education, and reside in the poorest households. To access the patterns and prevalence of child marriage, a precondition for effective policy and programs, each country should collect and analyze its own data so that it can identify and target areas with high proportions of girls at risk. On this basis, programs should be put in place, supported by appropriate allocation of

resources, to prevent and end child marriage and to manage its consequences. It is no coincidence that countries with high rates of child marriage are also grappling with high adolescent birth rates and high levels of maternal mortality.

Suggestions for Policy and Programming

Countries with high rates of child marriage, high adolescent birth rates, and low levels of satisfied demand for family planning should consider a multi-pronged approach across sectors that encourages delayed marriage for girls. Approaches should include to end child and support married girls and focus on the youngest first-time mothers:

- The enforcement of laws against child marriage including the enactment and enforcement of laws that raise the minimum age at marriage to 18 for both girls and boys.
- Countries should expand girls' opportunities for post-primary education, especially for rural and isolated girls during adolescence, and
- Consider incentives to families and communities to address the economic and social factors underlying child marriage.
- Offering girls themselves the opportunity to develop new skills and to show their families a positive alternative to child marriage.
- Investment in girls is not only a good but can also have a powerful multiplier effect on a range of outcomes, including population dynamics.

Bringing an end to child marriage, therefore, is a matter of national priorities and political will. It requires effective legal frameworks that protect the rights of the children involved and it requires enforcement of those laws in compliance with human rights standards. It requires the engagement and support of families and communities who, when they do stand up for their daughters and granddaughters, will win change in otherwise long-standing but harmful social norms and traditions.

Most of all, it requires the empowerment of girls themselves; empowerment so that girls are positioned to make decisions at the right time; empowered so that, exercising free and informed consent, girls can make the decisions that will safeguard their own futures, transform their own lives and enable them to live in the dignity to which they, as human beings, are entitled.



In The News

GIRLS NOT BRIDES

Child marriage remains a widely ignored violation of the health and development rights of girls and young women. Governments are often either unable to enforce existing laws or rectify discrepancies between national laws on marriage age and entrenched customary and religious laws. This is because of the “official tolerance of cultural, societal and customary norms that shape and govern the institution of marriage and family life.” In general, there is seldom political will to act when it comes to women’s and girls’ human rights. Child marriage is culturally packaged as a social necessity, but in many cases, this amounts to “socially licensed sexual abuse and exploitation of a child.”



GIRLS NOT BRIDES, is a global partnership of more than 900 civil society organizations committed to ending child marriage and enabling girls to fulfil their potential. Members are based throughout Africa, Asia, the Middle East, Europe and the Americas. We share the conviction that every girl has the right to lead the life that she chooses and that, by ending child marriage, we can achieve a safer, healthier and more prosperous future for all. This program was initiated in September 2011 by The Elders, a group of independent global leaders working together for peace and human rights, as part of their efforts to more to the harmful practices that hold girls and women back, and to encourage and empower others to work to create a world without child marriage. It became an independent charity in 2013. Archbishop Desmond Tutu, Ms. Garca Machel and Sonia Alizadeh are *Girls Not Brides* Global Champions.

Girls Not Brides USA became the first official *Girls Not Brides* National Partnership in 2012. Before then, the group was known as the U.S. Child Marriage Coalition and was instrumental in pushing forward key policies key policies on child marriage in the United States. It is composed of over 50 civil society organizations working at the international and national level. E-mail: info@GirlsNotBrides.org

Today, there are nearly 70 million child brides worldwide. With marriage, a girl’s childhood abruptly ends. Her health and future-prospects immediately fall in jeopardy. Tens of millions of girls in the developing world are at risk of being forced to wed as part of this deeply entrenched practice that significantly impedes progress on human rights, education, global health and economic development. Fortunately, there are ways to make a difference.

Health costs of early sexual initiation and early pregnancy are enormous. For every woman who dies in childbirth, some 15 to 30 survive but suffer chronic disabilities, the most devastating of which is obstetric fistula. Fistula is an injury to a woman’s birth canal that leaves her leaking urine and/or feces. Young women under age 20 are especially prone to developing fistulas if they cannot get a cesarean section during prolonged obstructed labor. Prevalence is highest in impoverished communities in Africa and Asia. Child marriage is often associated with other multiple health risks. This is because young brides have limited access to, and use of, contraception and reproductive health services and information. The majority are exposed to early and frequent sexual relations and to repeated pregnancies and childbirth.

Ending child marriage is indeed a mandatory task if we are to make progress in global efforts to attain the Sustainable Development Goals (SDGs). It is that simple. But this will require political commitment, visionary leadership, and support for grassroots advocacy to address many of the cultural practices and behaviors that place young women and girls at increased multiple health risks, including sexually transmitted diseases, such as HIV.

Let us join our forces to end this social injustice and achieve SDGs by 2030.

Words of Wisdom

Child marriage happens because adults believe they have the right to impose marriage upon a child. This denies children, particularly girls, their dignity and the opportunity to make choices that are central to their lives, such as when and whom to marry or when to have children. Choices define us and allow us to realize our potential. Child marriage robs girls of this chance.

- *Statement by Archbishop Desmond Tutu (1984 Nobel Peace Prize Winner) and Ms. Graça Machel (The Chair of the PMNCH from April 2013 – March 2018).*

*Monthly newsletter of WHEC designed to keep you informed on
The latest UN and NGO activity*

<http://www.WomensHealthSection.com>

