





Too Young to Wed

The Lives, Rights, and Health of Young Married Girls



Sanyukta Mathur Margaret Greene Anju Malhotra

The authors would like to thank Monica Agarwal, Kathleen Barnett, Carole Mahoney, Cherreka Montgomery, Rohini Pande, Jennifer Redner, Nadia Steinzor, and Margo Young for their support in producing this report.					
Design: Manu Badlani					
This work was made possible by financial support from the John D. and Catherine T. MacArthur Foundation.					

 $Copyright ^{\circledcirc} 2003\ International\ Center\ for\ Research\ on\ Women\ (ICRW).\ All\ rights\ reserved.\ Sections\ of\ this\ document\ may\ be\ reproduced\ without\ express\ permission\ of\ but\ with\ acknowledgement\ to\ the\ International\ Center\ for\ Research\ on\ Women.$

Too Young to Wed:

The Lives, Rights, and Health of Young Married Girls

Sanyukta Mathur Margaret Greene Anju Malhotra

Millions of young girls in the developing world are married when they are still children, and as a result are denied the ordinary experiences that young people elsewhere take for granted: schooling, good health, economic opportunities, and friendship with peers. Despite national laws and international agreements forbidding early marriage, gender roles and marriage systems in many countries dictate the practice, through which girls are deprived of basic rights and subjected to discrimination and health risks.

Instead of being viewed as children or teenagers with potential and opportunities in their lives, girls are often defined by social custom solely as wives and mothers. This limited view exposes girls to responsibilities and risks that they are often not physically or mentally prepared to undertake, while at the same time disrupting their prospects for education and employment. In addition to having a negative impact on girls themselves, the practice of early marriage also has negative consequences for children, families, and society as a whole.

Nearly all of the world's nations have concurred repeatedly that childhood—with the ongoing investment in the young person that the notion implies—should last until age 18. Many governments and a number of international agreements have also settled upon age 18 as the minimum legal age at marriage (see Box 1).¹ This consensus reflects both an understanding of

the adverse effects of bearing children at a young age, and the increasing recognition that secondary education and economic options are essential for young people to succeed in life and contribute to society.

The number and scope of international and national statements on early marriage and the laws that regulate the practice in most countries are extensive, making the degree to which they are disregarded even more startling. Significant proportions of girls marry before age 18 in countries, such as Mali, Bangladesh, Uganda, and Nicaragua, that have established 18 as the legal minimum age at marriage. The case of Cameroon provides an even more staggering example: although the legal minimum age at marriage for women is 21, 62 percent of women in their early 20s are already married before age 18, according to Demographic and Health Survey (DHS) data.² In a number of countries (including the United States), marriage of girls may take place as early as 14 or 15 with the consent of parents.

I. The global prevalence of early marriage

Worldwide, there are more than 51 million adolescent girls aged 15–19 who are married and bearing the burden of domestic responsibility and the risks associated with early sexual activity, including pregnancy.³ As Figure 1 shows, rates of early marriage are highest in West Africa,

¹The United Nations Convention on the Rights of the Child in particular calls on states to protect children against discrimination and includes several clauses that relate directly to child marriage and the protection of girls.

²Unless otherwise noted, figures provided on early marriage and related trends are from national Demographic and Health Surveys conducted in the corresponding country. For more information on how DHS are conducted and country data, visit http://www.measuredbs.com

³This brief details the experiences of females 15 years of age and older. It is difficult to obtain data on marital status or age at marriage among adolescents aged 10–14 because of the legal norms surrounding marriage and the fact that official statistics do not document illegal behavior; in some societies, the proportions of girls who are married when they are younger than 15 may not be insignificant.

Box 1. United Nations agreements on the minimum age at marriage and protection of children from sexual exploitation

1948

The *Universal Declaration of Human Rights* states that "men and women of full age, without any limitation due to race, nationality or religion, have the right to marry and to found a family. They are entitled to equal rights as to marriage, during marriage and at its dissolution. Marriage shall be entered into only with the free and full consent of the intending spouses."

1962

The Convention on Consent to Marriage, Minimum Age for Marriage, and Registration of Marriages calls not only for the establishment everywhere of minimum ages at marriage for both boys and girls, but also for the official registration of those marriages as a public statement of the union and as a source of legal recourse if problems in the marriage arise.

1979

Convention on the Elimination of All Forms of Discrimination against Women confirms that "States parties shall take all appropriate measures to eliminate discrimination against women in all matters relating to marriage and family relations and in particular shall ensure, on a basis of equality of men and women: the same right to enter into marriage; the same right freely to choose a spouse and to enter into marriage only with their free and full consent; the betrothal and the marriage of a child shall have no legal effect, and all necessary action, including legislation, shall be taken to specify a minimum age for marriage and to make the registration of marriages in an official registry compulsory."

1989

The Convention on the Rights of the Child (CRC) defines children as people under the age of 18.

1994

The International Conference on Population and Development Programme of Action (PoA) refers specifically and repeatedly to the need to increase age at marriage. It recommends efforts to eliminate coercion and discrimination related to child marriage, to enforce minimum age at marriage laws, and to generate social support for these laws by providing educational and employment opportunities to girls and young women.

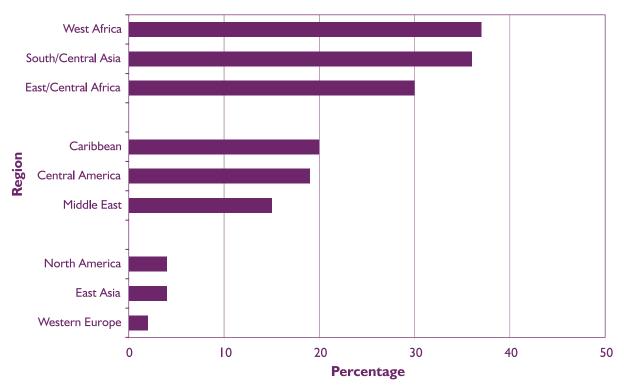
South Asia, and East and Central Africa, where approximately 30 percent or more of girls aged 15–19 are already married.⁴ Rates are also relatively high, but more moderate, in Central America and the Caribbean, where 20 percent of girls aged 15–19 are married, compared to 2–4 percent in North America, East Asia, and Western Europe.

The data contained in Figure 1 presents a snapshot across time and does not include millions of other girls who are yet to marry while still in their teens. Figure 2 presents a more comprehensive picture by showing proportions of young women aged 20–24 who were married before age 18 in selected countries across the world.

Regional patterns of early marriage are welldefined, but they hide considerable intraregional variation among countries. In Africa, there are countries with very high rates of early marriage, such as Niger (77 percent), Chad (71 percent), and Mozambique (57 percent), but others such as Togo in West Africa have a more moderate rate of early marriage (31 percent), while South Africa has a fairly small percentage of young women who marry early (8 percent). Similarly, countries in Asia show wide variation in rates of early marriage among young women. For example, in South Asia, the rate is very high in Bangladesh (65 percent), moderately high in India (48 percent), and very low in Sri Lanka (14 percent). Compared to other parts of Asia, rates

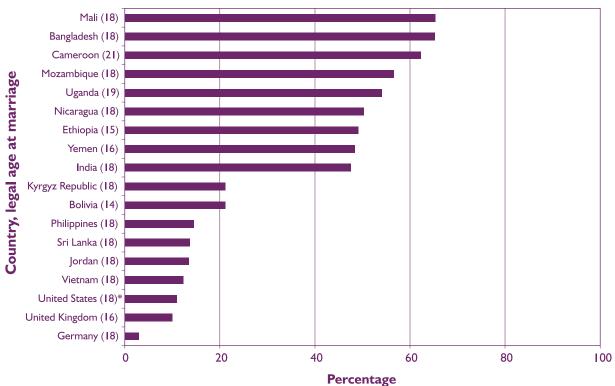
⁴In Africa and Latin America, marriage refers to both legal and consensual unions.

Figure I
Percentage of girls (aged 15-19) who are currently married



Source: Population Reference Bureau 2000

Figure 2
Percentage of women aged 20-24 married before age 18



*US legal age at marriage may vary by state

Sources: DHS data since 1990; UN 1989; Cornell University 2003

of early marriage are generally lower in Southeast and East Asia. For example, among young women in their early 20s, only 15 percent in the Philippines and 12 percent in Vietnam were married by age 18.

In the Middle East, Central Asia, and Latin America, where overall rates of early marriage are moderate, there is also variation across specific countries. Proportions of women aged 20–24 who were married before age 18 range from 14 percent in Jordan, to 21 percent in the Kyrgyz Republic, to 48 percent in Yemen. Marriage statistics in Latin America often do not fully capture the extent of marriage-like cohabitation and consensual unions that are so common in the region. However, official marriage rates vary across countries in that region as well, from 54 percent in Nicaragua to 21 percent in Bolivia.

II. Causes of early marriage

Nobody [protests against early marriage] because all take daughters as a burden. They fear that their daughters might get involved with other boys and that is why they want their daughters to get married at an early age.

—Respondent in a focus group of rural unmarried girls, Nepal 2000

Historically, there have been two major motivations for marrying girls at very young ages. Since high mortality rates have existed for much of human history—especially high maternal and infant mortality rates—the marriage of girls at or near puberty has been important for maximizing fertility in socially sanctioned unions. Moreover, rarely has marriage been an affair between two individuals; early marriage of children was an important means for securing critical social, economic, and political alliances for the family, clan, or lineage.

The world has changed radically since many of these institutional mechanisms and norms were established and, for the most part, such motivations have become much less important, if not obsolete. Mortality rates have declined sharply in the last century through much of the developing world and, in the last several decades, fertility rates have also declined significantly. In a globalizing world, numerous mechanisms have supplanted marriage for the purposes of social, economic, and political influence or alliance-building. However, established norms and social structures that encourage the marriage of young girls have been difficult to change in many societies and have been most tenacious where demographic and socioeconomic change have been slowest.

Gender roles and a lack of alternatives

Adolescence—the juncture between childhood and adulthood—is a period when both boys and girls face a number of pressures to adjust to, explore, and experience life as their culture defines it. In many societies, boys face social and cultural pressures during adolescence to succeed in school, prove their sexuality, engage in sports and physical activity, develop a social group of peers, and demonstrate their ability to shoulder household economic and financial responsibilities. Rarely do these pressures translate into early marriage for boys.

In contrast, the adolescent experience of girls in many developing countries may be defined almost entirely in terms of entry into the marital state; emphasis is placed on domestic work and obedience, traits seen as essential to being good wives and mothers. The wider range of developmental activities, including schooling, skill building, sports, and friendships, are often not part of the adolescent experience of girls because marriage is on their immediate horizon. Research on age at marriage in different cultures and ethnic and religious groups suggests that getting married and bearing children are often the only means for young girls to secure identity and status in families and as adults in society.⁵ The more central the role of wife and mother is to women's identities—and the fewer alternative social and economic activities that are available—

⁵For more information on dimensions related to age at marriage, see Schreck 1998 on ethnicity; Sureender, Prabakaran, and Khan 1998, Das 1998, and Islam and Ahmed 1998 on religion; and Caldwell and Caldwell 1987 on identity and status.

the earlier girls will tend to marry (Okonofua 1995 and Gage 1998).

In most countries, a significantly higher proportion of young women aged 15–19 is currently married when compared to young men of the same age group. This ratio is not only extremely skewed in countries where girls marry very early, such as Mali (72:1), but in other countries as well; for example, it is 8:1 in the United States and 6:1 in El Salvador (Alan Guttmacher Institute 1998). With a few exceptions, it is therefore mostly girls, not boys, who enter the marital state during, or even before, their teen years.

It is important to note that prevailing gender roles can limit the full impact of educational or employment opportunities for girls. For example, research in Bangladesh shows that parents pull daughters out of school because of expectations that husbands should be better educated than wives (Arends-Kuenning 2000). Research in Nepal shows that although young people and their parents aspire to having daughters experience education, careers, and delayed marriage and childbearing, they find it difficult to go against social custom, which stigmatizes girls who break existing norms by engaging in activities that delay marriage and childbearing (Mathur, Malhotra, and Mehta 2001).

Value of virginity and fears about premarital sexual activity

In many cultures around the world, a woman's sexuality is not her own to control, but the property of her father, husband, family, or ethnic group. Because of this, the decision to marry—and to initiate sexual activity—is often not a young woman's but that of family members, whose honor and shame are defined by whether or not she is a virgin before she marries. Once a girl has menstruated, fears of potential pre-marital sexual activity and pregnancy become the major concern among family members who are accountable for "protecting" her sexuality.⁶

Thus, the timing of a girl's first menstruation is associated with the first steps toward marriage in many settings.

Research shows that young married girls' understanding of their bodies and sexuality is often severely limited by the importance placed on virginity in their cultures (Dowsett et al. 1998). Adolescents in Brazil report that negative repercussions from losing one's virginity include hurtful gossip, pressure from boys to have sex, and being socially ostracized (Vasconcelos et al. 1995). In Bangladesh, parents feel the pressure to marry their daughters early out of fear that a girl may make an unsuitable match of her own or that malicious gossip will circulate about her and spoil her chances for a good marriage (Huq and Amin 2001). In the event that premarital sexual activity does occur and results in pregnancy, many young people find themselves thrust into early marriages. Research from Indonesia and northeastern Brazil suggests that marriage sometimes provides the only acceptable solution to a pregnancy that occurs outside of marriage (Bennett 2001 and Gupta 2000).

Marriage alliances and transactions

Pressure to use marriage to reinforce family, caste, and tribal linkages—which in turn create political, economic, and social alliances—tends to lower the age at marriage in a variety of settings (Chandrasekhar 1996 and Hussain 2001). For example, in Yemen the growth in marriage among relatives has contributed to a lower age at marriage for women (Jurdi and Saxena 2003). Moreover, in most cultures around the world, economic transactions are integral to the marriage process, with an underlying assumption that these costs are lower when marriage occurs at an early age.

In Bangladesh, for example, dowry increases in tandem with age at marriage, placing pressure on parents to marry their daughters early. This may be especially true if the family or the bride suffers from other disadvantages in the marriage

⁶In some cultures, a girl can incur the stigma of being sexually promiscuous simply by looking at a man, smiling, or appearing in a location or setting that is not considered appropriate.

market (such as the lower social status of her family or darker skin tone) (Hug and Amin 2001). In fact, the relatively recent introduction of dowry in such places as southern India and Bangladesh may be a factor in keeping the marriage age lower than it would be otherwise, given the degree of other social and economic changes that have occurred. In many African cultures, bridewealth⁷ signifies wives' obligation to bear children and to fulfill other duties and can reinforce their subordinate position in relation to husbands (Bawah et al. 1999). Like dowry, bridewealth can foster early marriage because it is when a girl is young that her productive labor and reproductive capacities are seen as "best buys" in exchange for valued cattle or other goods (Nasimiyu 1997).

The role of poverty

Poverty and low levels of development are also important reasons for the early marriage of girls. In families that are very poor, a daughter may be seen as an economic burden that must be shed through marriage as early as possible. Similarly, the economic gains incurred through the marriage of a daughter may also be an important motivating factor for poor families. In settings as diverse as Ethiopia, India, and Malaysia, families cite economic reasons for marrying girls early. In Ethiopia, parents explicitly state that they married their daughters when they did for the purposes of economic gain or to relieve economic burden (Berhane-Selaisse 1993). In both Malaysia and India, poverty in general, but especially among those in the agricultural sector, is an important determinant of early marriage (Pandey 1984 and Anderson, Hill, and Butler 1987).

At the societal level, countries, states, and regions that are less developed and poorer tend to have fewer resources and a lower level of motivation for investing in alternative options for young girls. Early marriage is therefore more common than it is in richer and more developed settings, where investments in the lives of girls are commonplace. Generally, countries with

higher levels of economic or social development tend to have higher average ages at marriage for women than countries that are poorer or lacking in social progress. Many studies show that aggregate levels of education and literacy, as well as community development, are positively associated with age at marriage (Prakasam and Upadhyay 1985, Ganiger 1992, and Tripathy, Rao, and Pradhan 1992). Research suggests that this is because of greater social acceptability of unmarried girls and young women, as well as young girls' own aspirations for other experiences and ambitions in life before entering marriage.

III. Consequences of early marriage

Early marriage contributes to a series of negative consequences both for young girls and the societies in which they live. Young married girls are at greater risk of reproductive morbidity and mortality. The timing of early marriage almost always disrupts girls' education, reducing their opportunities for future financial independence through work. Young women are often married to men who are much older, and find themselves in new homes with greater responsibilities, without much autonomy or decision-making power, and unable to negotiate sexual experiences within marriage. This relative lack of power is associated with higher levels of violence in marriage and higher rates of unwanted pregnancy and sexually transmitted disease, including HIV/AIDS (Heise, Ellsberg, and Gottemoeller 2002). These impacts on young married girls subsequently contribute to negative consequences for their children, families, and societies.

Health and related outcomes

Early childbearing, unwanted pregnancies, and unsafe abortions

Early marriage means early sexual activity, and therefore early childbearing. Despite the wide-spread recognition in societies and the medical community that childbearing during the adolescent years is harmful to both mother and child, it is a common phenomenon in large parts of the developing world. For example, in Uganda, 42

⁷ In certain cultures and societies, bridewealth (or bride price) is a payment made in the form of money, property, or other valuable asset by or on behalf of a prospective husband to a bride's family.

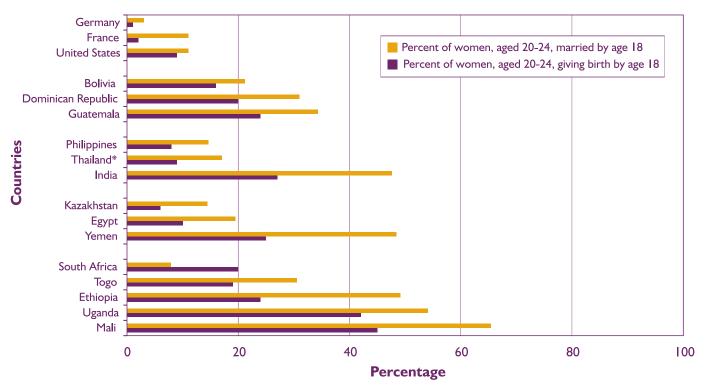


Figure 3
Percentage of women, aged 20-24, married and giving birth by age 18

*Percent of females aged 15-19 who are currently married Source: DHS data since 1990; Population Reference Bureau 2000

percent of women have given birth by age 18, whereas only 2 percent of women in France have done so. As Figure 3 shows, 24–45 percent of women in countries such as Guatemala, India, Mali, and Yemen have given birth by age 18, compared to only 1 percent in Germany and 2 percent in France.

Recent research shows that most young married girls in developing countries do not want to bear children at such early ages. Nor do they want to bear the burden of repeated pregnancies and large families while they are themselves still children. In many situations, young married girls are under pressure to demonstrate fertility soon after marriage and lack the personal autonomy to make decisions about their reproductive lives. Data from India shows that for these reasons, as well as the lack of options for effective temporary methods of contraception,

significant proportions of young girls are either sterilized in their early 20s or resort to unsafe abortions (Malhotra et al. 2003).

Lack of knowledge, information, and access to services

Early marriage usually means that young girls enter marriage without adequate information about critical sexual and reproductive heath issues, such as sexual intercourse, contraception, sexually transmitted diseases, pregnancy, and childbirth. For example, general awareness of HIV/AIDS and condoms is high in most countries, but among currently married 15–19-year-old girls, only 27 percent in Ethiopia, 40 percent in Malawi, and 40 percent in Haiti know that condoms can be used to prevent the disease. Even lower proportions of young married girls in these countries know that condoms can also be used to prevent pregnancy.

⁸For more on this issue, see Bledsoe and Cohen 1993 on fertility concerns and marriage and Mensch, Bruce, and Greene 1998 on young girls' reproductive decision-making.

The negative consequences of a lack of information and knowledge are further compounded by a lack of access to services for pregnancy and disease prevention and proper antenatal and postnatal care. Social norms about what questions are acceptable for young girls to ask, restrictions on girls' mobility, and girls' lack of decision-making authority and resources in the marital home severely limit access to the services required to address reproductive health needs. Research in India, Nepal, and several African settings confirms the importance of the above factors in limiting access to services for young married girls. Research in India has also documented that decisions about whether young married girls seek health care when necessary are largely controlled by husbands and mothers-inlaw (Barua and Kurz 2001).

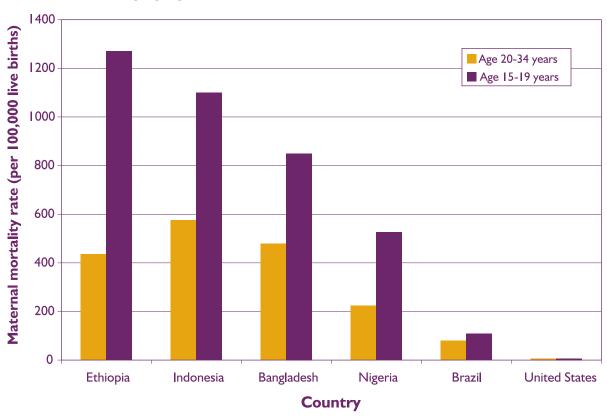
The provision of reproductive health services for young married couples is rarely a priority in most governmental or nongovernmental (NGO)

programs. In fact, services are so explicitly tailored for older age groups that young married girls are among the most underserved clientele. Many service providers—including doctors, nurses, midwives, and traditional birth attendants—do not recognize this age group as one in need of advice, information, or services. To the contrary, data shows that many health providers have highly judgmental and nonsupportive attitudes toward young people regardless of their marital status (Mensch, Bruce, and Greene 1998 and Singh and Samara 1998).

High maternal mortality and morbidity

Underdeveloped physiology, combined with a lack of power, information, and access to services, means that young married girls experience much higher levels of maternal mortality and morbidity than do women who bear children when they are older. As Figure 4 shows for countries where data according to age is available, maternal mortality rates are significantly





Source: Family Care International 1998; Centers for Disease Control and Prevention 2002

higher among younger than older women. In Mali, for example, the maternal mortality ratio (MMR) for women aged 15–19 is 178 per 100,000 live births, compared to an MMR of only 32 for women aged 20–34. The contrast in Togo is even sharper, with MMRs for these age groups of 286 and 39, respectively. In Guatemala, 15–19-year-olds have an MMR of 35, in contrast to an MMR of 5 for women aged 20–24. These divergent experiences, determined by age of the mother, persist even where maternal mortality is very low overall, as it is in developed countries such as the United States.

At young ages, health problems associated with pregnancy and childbirth are also more common. Morbidity levels among young mothers are very high, especially for severe complications such as obstructed labor or obstetric fistula, which is often a result of obstructed labor and occurs most commonly among young women (UNFPA and EngenderHealth 2003 and Jarrett 1994).9 If the obstructed labor is not interrupted in a timely manner, a fetus' head may push against a young woman's pelvis for days, cutting off blood supply and killing surrounding tissue. Such conditions often lead to the death of the baby and permanent morbidity (sometimes mortality) for the mother. Studies in Ethiopia show that obstructed labor accounts for 46 percent of maternal deaths and that three in 1,000 pregnant women develop fistula (UNFPA and EngenderHealth 2003). This problem is especially common among women giving birth for the first time (Gaym 2000). Obstetric fistula is not limited to Africa, however, but is also common in many countries, such as Bangladesh (Akhter, Chowdhury, and Sen 1996).

Increased risk of contracting sexually transmitted diseases and HIV/AIDS

Young women generally enter into marriage with partners who are much older and more sexually experienced. In these marriages, women have little negotiating power in sexual behavior and practices, putting them at greater risk of contracting reproductive and sexually transmitted infections. Research from 16 countries in sub-

Saharan Africa indicates that the husbands of 15–19-year-old girls are on average at least 10 years older than their wives (UNICEF 2001). In Kenya and Zambia, data shows that young married girls are more likely to be HIV-positive than their unmarried peers because they have sex more often, use condoms less often, are unable to refuse sex, and have partners who are more likely to be HIV-positive (Clark 2003 and Luke and Kurz 2002).

Thus, evidence gained from research disproves the belief that early marriage may protect young women from HIV/AIDS. Moreover, comparative research on cross-generational sex corroborates that in partnerships with older men, adolescent women have very little control over sexual relations because of the risk of violence and the sense of obligation incurred by dependency on gifts or other forms of economic exchange (Luke and Kurz 2002).

Life outcomes

Lack of opportunity, skills, and social support

With regard to access to educational and economic opportunities and resources, girls in the developing world are generally disadvantaged compared to boys. This disadvantage is especially acute among girls who are married at very young ages. Young married girls are least likely to benefit from educational and economic policies and programs, such as those that encourage primary and secondary school enrollment or expand opportunities for credit or participation in the paid workforce. Indeed, many of the basic resources and services available to other segments of the population are beyond the reach of young married girls.

Early marriage sharply reduces girls' access to education, while anticipation of early marriage often precludes education (Huq and Amin 2001). Furthermore, since in most cultures girls leave their parental home upon marriage, parents are often less interested in investing in the education of daughters (as opposed to sons) because the

⁹Fistula is an abnormal link between the urinary tract or rectum and vagina that results in continuous leaking of urine and feces.

benefits of their investment will be lost. After marriage, young married girls' access to formal and even non-formal education is severely limited because of a lack of mobility, domestic burdens, childbearing, and social norms that view marriage and schooling as incompatible. Data shows that girls with fewer than seven years of schooling are more likely to be married by age 18 than those with higher levels of schooling. Similarly, Figure 5 shows that the enrollment of young women in secondary school is inversely related to the proportion of girls married before the age of 18.

Early marriage, early childbearing, and lack of access to continued educational opportunities limit young women's access to employment opportunities and, in turn, their productive value to society. Young women's employment is often seen as a threat to culturally accepted gender roles, and many families fear for the safety of girls at workplaces. Moreover, even when young married girls want to work or need to earn

money in order to support their families, they have few marketable skills that can translate into high-paying jobs or entrepreneurial options.

This does not mean, however, that young married girls do not work. In fact, research shows that the majority of young married girls are either employed in home-based work or the informal sector (Population Council and ICRW 2000). Informal work is characterized by parttime or casual jobs that do not have the benefits and security of regular employment and that are performed outside the scope or application of legal and institutional frameworks (Farnsworth Riche 2003). At home, young married women are primarily responsible for household-related tasks, yet they have limited access to productive resources such as land, housing, credit, water, and agricultural technical assistance (Panda 2002).

As young brides, girls are virtually entrapped at home as "apprentices" in charge of domestic

160 United Kingdom Female gross enrollment for secondary school South Africa Kazakhstan 100 80 60 ietnam Guatemala Yemen 20 Mali 0 0 10 20 30 40 50 60 70 80 90 100

% of women married by age 18

Figure 5
Proportion of women married by age 18 and gross enrollment in secondary school

Sources: Population Reference Bureau 2000; DHS data since 1990; Alan Guttmacher Institute 1998

responsibilities. As a result, their social mobility is dramatically reduced (Mensch, Bruce, and Greene 1998). Nor have they experienced a period during adolescence in which they could interact with their peers and develop friendships and social support systems. Research in Nepal shows that young girls in general lack safe social spaces, and that those who are married are particularly isolated from peers (Mathur et al. 2001).

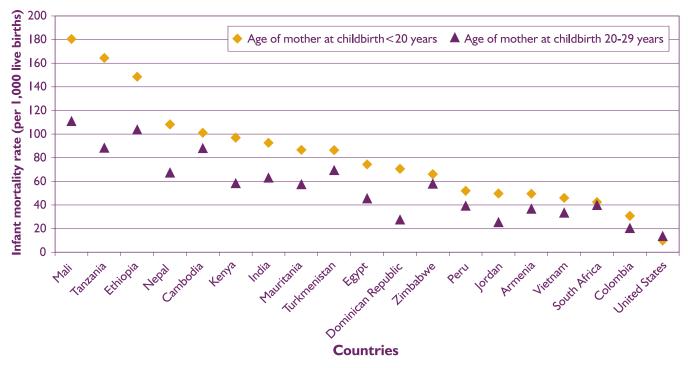
Lack of power

Since early marriage limits skills, resources, knowledge, social support, mobility, and autonomy, young married girls often have little power in relation to their husbands or in-laws. They are also extremely vulnerable to violence, abuse, divorce, and abandonment. Violence may include physical, sexual, psychological, and economic abuse. Data from Chile, Peru, Malaysia, Mexico, Panama, Papua New Guinea, and the United States shows that between one-third and two-thirds of known sexual assault victims are 15 years old or younger (Heise, Pitanguy,

and Germain 1994). In Haiti, for example, 25 percent of young, married women aged 15–19 have experienced violence within marriage in the last year.

Young women's initiation into sexual activity often occurs under coercive conditions. Thus, even within unions that are formally consensual, nonconsensual sexual activity is common (Heise, Ellsberg, and Gottemoeller 1999). This is particularly the case when girls are economically dependent on their husbands, and are thereby not in a position to resist violence or coercion or to negotiate condom use or other preferences. A study of women's risk for HIV/ AIDS in 15 countries found that women frequently mentioned being physically forced to have sex or to engage in types of sexual activity that they found degrading and humiliating (Weiss and Gupta 1998). Many other women stated that they gave in to sex out of fear of the consequences of refusal, such as physical abuse, loss of economic support, or accusations of infidelity.

Figure 6
Infant mortality rates by age of mother



Source: DHS data since 1990; Centers for Disease Control and Prevention 2002

Outcomes for children

The consequences of early marriage reach beyond the lives of young married girls themselves to the next generation. Poor infant and child health outcomes are strongly associated with the early age of mothers, due in part to young women's physical vulnerabilities and in part to the lack of social and reproductive health services for this high-risk group. In most countries, infants and children of mothers who give birth to them before the age of 20 face consistently higher mortality rates even through the age of five. 10 The starkest effects are seen in the Infant Mortality Rate (IMR), which is 181 per 1,000 for the children women in Mali who give birth before age 20, versus 111 per 1,000 for the children of women who give birth at age 20–29. The corresponding figures are 164 versus 88 in Tanzania, 108 versus 68 in Nepal, and 71 versus 28 in the Dominican Republic (see Figure 6).

Development outcomes

Early marriage stands in direct conflict with the objectives of the Millennium Development Goals (MDGs), such as the promotion of basic education, child survival, and the prevention of HIV/AIDS.¹¹ When the relationship between age at marriage and development is examined, it becomes clear that later marriage is a precondition for the attainment of desired development-related goals. These can include completion of school, acquisition of training for employment, and attainment of the skills and information related to the roles of citizen, family member, and consumer that are part of a successful adulthood.

The link between age at marriage and development holds at the societal level as well. Thus, when the relationship between early marriage and the Human Development Index (HDI) indicators is examined, the negative relationship between widespread early marriage and national development is quite striking. ¹² As illustrated in Figure 7, countries where the proportion of currently married 15–19-year-old women is high have a low rank on the HDI. Many factors affect both early marriage and human development, but reducing the former is certainly an important part of the equation for attaining successful national development.

IV. Programmatic and policy responses to early marriage

In many cultures, early marriage for girls is strongly entrenched. However, social and economic investment and active policy and programmatic efforts can bring about changes in social norms and institutions that will lead to later marriage for young girls. Improvements in social welfare, employment, and education levels have been associated with later age at marriage for women in countries such as the Republic of Korea, Sri Lanka, Taiwan, and Thailand (Xenos and Kabamalan 1998 and Malhotra and Tsui 1996). In other settings, policies aimed at changing laws, regulations, social norms, attitudes, and opportunities related to girls have yielded positive results. Some initiatives have also reduced the negative effects of early marriage for young married girls. Examples follow of successful efforts to meet the following goals using a range of strategies.

¹⁰ The divergent effects of age at childbirth on children's well-being are remarkably persistent, though somewhat less consistent than infant mortality rates, through age 5. Childhood mortality, or mortality among children ages 1–5, is 48 per 1,000 live births among Kenyan children whose mothers gave birth to them before age 20 and 32 for women who give birth between ages 20 and 29. The comparable figures are 90 versus 83 in Ethiopia, 40 versus 19 in South Africa, and 15 versus 13 in Egypt.

¹¹ At the Millennium Summit in 2000, the 189 member states of the United Nations made a commitment in the Millennium Declaration to achieve eight Millennium Development Goals (MDGs). These goals commit the international community to a vision of development that promotes human development as the key to sustaining social and economic progress in all countries, and recognize the importance of creating a global partnership for development.

¹² The Human Development Index (HDI) is a composite index measuring average achievement in three basic dimensions of human development: 1) A long and healthy life, as measured by life expectancy at birth; 2) Knowledge, as measured by the adult literacy rate (two-thirds weight) and the combined primary, secondary and tertiary gross enrollment ratio (one-third weight); and 3) A decent standard of living, as measured by GDP per capita (in PPP US\$). The HDI rank is determined using HDI values to the sixth decimal point.

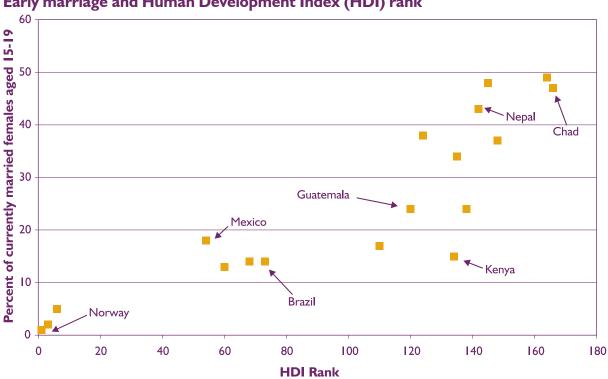


Figure 7
Early marriage and Human Development Index (HDI) rank

Source: Population Reference Bureau 2000; United Nations Development Programme 2002

Goal: Delay marriage

By providing economic opportunities

- ▶ Research in Bangladesh and Taiwan shows that when jobs are available to girls, both daughters and parents become interested in delaying marriage. The garment industry in Bangladesh has played an important role in extending the period before marriage, while at the same time providing young women with the means to earn a living (Amin et al. 1998).
- ▶ A number of Indian states have developed long-term programs that allow young women to receive the money that the state invested in them at birth only when they have completed a certain level of schooling and are still unmarried (Government of Manipur 1997).

By educating girls

► The acceptance of education as a desirable activity for girls during their adolescent years has been a critical factor in increasing age at

- marriage in a number of Asian countries, including Indonesia, Taiwan, Thailand, and Sri Lanka. In India and Pakistan as well, increased school enrollment has been associated with a decline in marriage among girls before age 14 (Hussain and Bittles 1999 and Unisa 1995).
- ▶ In Bangladesh, secondary school scholarships for girls have had an immediate effect in delaying marriage (Arends-Kuenning 2000 and Amin and Gilda 1998). Both girls and their parents receive a stipend that is conditional upon the girl remaining unmarried through completion of the 10th standard. In areas targeted by the project, female enrollment in secondary schooling more than doubled between 1994 and 2001 (World Bank Group 2003).
- ▶ The state of Gujarat in India has offered new bicycles to girls completing the 10th standard, an approach that effectively provides both education and mobility (Greene 1997).

By creating safe social spaces

- ▶ Parents need to be reassured that when their unmarried daughters leave the house, they will be in safe places and can get to where they are going without harm. This concern is an important reason why girls experience reduced mobility and early marriage. A program in Kenya has allowed girls to play soccer together, providing them with opportunities to be with peers and to be exposed to health messages and other information provided by adult mentors (Brady and Khan 2002). In this way, a safe social space becomes an alternative to early marriage.
- ► The Ghanaian government has just launched a major campaign creating "Sara Clubs" for girls who encourage each other to stay in school. Some of the major themes addressed in this campaign and through club activities include early marriage, sexual exploitation, HIV/AIDS, and unwanted pregnancy (UNICEF and JHUCCP 2003).

Through public education and enforcement of existing laws and regulations

- Women's groups in a number of countries are trying to hold governments accountable for prosecuting individuals who force young women to marry their rapists.
- ► The state of Uttar Pradesh in India has worked to increase awareness of the legal minimum age at marriage (18 years) and to deny government jobs to people who marry before that age (Government of Uttar Pradesh 2000).
- ► A district-level campaign in Rajasthan, India, has prolonged the traditional period of engagement, allowing girls to marry a little later (Chandrasekhar 1996).
- ► Educating parents and other community members about the harm caused by early marriage is increasingly recognized as an important undertaking. The Government of Nepal, in collaboration with the United

Nations Fund for Population Activities (UNFPA), has created educational materials that encourage parents to delay marrying their daughters until they are over the age of 20 (Nepal Health Education, Information, and Communication Center 1995).

Goal: Address the needs of married youth

By preparing young people for the challenges of sexual relationships

Increasingly, programs are being developed and implemented in recognition of the need to provide young people with access to reproductive health information and services both before and after marriage. Since all young people are "atrisk" of early marriage, providing them with the right tools for safe sexual and reproductive lives is immensely important.¹³

- ▶ In Nepal and India, international and incountry groups operate adolescent reproductive health programs that provide information and services to married and unmarried adolescent boys and girls. Young people receive information on a range of issues, including puberty, sexual intercourse, and childbearing. In addition, program staff work with health providers and members of the community to make reproductive health services and counseling more accessible to young people.
- ▶ In Botswana, Ghana, Tanzania, and Uganda, adolescent reproductive health programs collaborate with health service providers in order to make services more friendly and accessible to young people. Programs also focus on providing life skills and reproductive health information so that both married and unmarried young people can learn how to avoid disease and unwanted pregnancies.

By providing negotiation skills for sexual relationships

Program strategies have focused on developing curricula that impart life skills information to young people, which is particularly important

¹³ In both developing and developed countries, abstinence-only-until-marriage programs have been most effective when they have been linked to efforts to reduce the number of sexual partners and promote condom use. For more information, see Green et al. 2003 and Kirby et al. 1997

because young girls are vulnerable to coercion, sexual abuse, and violence even within marriage. Some programmatic efforts have focused on developing girls' ability to negotiate sexual relations within marriage (Brown 2001).

- ▶ Program staff in Mexico, South Africa, and Thailand are implementing a school-based HIV/AIDS curriculum for both young women and men that places special emphasis on life skills (Stewart et al. 2001).
- ▶ In India, married and unmarried girls are provided with life skills training to help them prepare and navigate their sexual and reproductive lives before and within marriage (Esim et al. 2001).

By focusing on the needs of couples

Some countries are creatively using marriage registration systems to provide young people with reproductive health information.

- ► Iran has made reproductive health counseling a prerequisite for obtaining a marriage license (Greene et al. 2002).
- ► In Indonesia, marriage counselors from the Islamic marriage registry system have been trained as reproductive health educators (Dornsife and Mahmoed 1985).
- ▶ Mexico's National Population Council has assisted three states in requiring a statement from a doctor or social worker indicating that a couple has discussed reproductive health matters before a marriage license can be obtained (UNFPA 1990).

Some governments and NGOs make an effort to specifically reach young married couples through their services, clinics, and programs.

▶ As part of a large intervention research program in India, several NGOs have tested innovative models to improve services for young married couples by working with the couples themselves, communities, and health providers (ICRW 2001).

- ▶ In China and Bangladesh, family planning workers visit young couples who have recently had a child with congratulatory letters that also encourage them to take advantage of existing family planning services (Alauddin and Rob 1999).
- ► In many countries, health workers are being trained to show more sensitivity toward young people, especially married couples (Alauddin and Rob 1999).
- Foundation for Research in Health Systems and the Society for the Integrated Development of the Himalayas are working with young married girls and their husbands to explore constraints and identify the best approaches for increasing access to and utilization of health services by young married couples (Gupta, Joshi, and Crook 2003 and Barua et al. 2003).

Goal: Improve education and economic options for young married women

Efforts to improve the access of young married girls to economic resources have focused on expanding employment and entrepreneurial opportunities. Additional efforts to enforce property and inheritance laws and to mobilize community efforts may also be required.

- Several well-known economic and livelihood programs, such as the Grameen Bank in Bangladesh and the Self-Employed Women's Association in India, have begun to include young married girls in their initiatives.
- ► In an effort to continue girls' schooling after marriage, Iran has established a few schools specifically for young married women (Greene et al. 2002).
- ► In Kenya, local groups have organized nonformal education and livelihood training sessions for teen mothers.

V. Conclusion

Despite international agreements and national laws to the contrary, the practice of marrying girls below the age of 18 is prevalent in many parts of the world and affects the lives of millions of young girls. As a result, girls—even when they are still children—often are defined solely as wives and mothers and are exposed to responsibilities and risks for which they are often not physically or mentally prepared. When married young, girls lose the opportunities for education, employment, or other important experiences for the duration of their lives. The negative developmental consequences that early marriage has in the realms of health, welfare, and economics not only affect girls and their children, but also societies as a whole.

In many countries, a combination of tradition, poverty, and lack of opportunity put a large number of young people "at-risk" for early marriage. Increased policy and program attention toward young people is therefore critically needed and warranted. Although early marriage

remains a pervasive practice, there is evidence that social and economic investments can make a significant difference in improving the life options of young people.

Fortunately, many governments, NGOs, and development agencies are recognizing the need often as part of overall efforts to improve development outcomes—to address the problem of early marriage through a range of policy and programmatic solutions. These efforts are targeted both at delaying marriage and at equipping those who are married young with increased access to the information, resources, skills, and services they need to deal with their situation. It is clear that programmatic and policy actions need to address not only the legal basis of early marriage, but also its social and economic underpinnings. Continued effort should be made to understand the needs of girls and their families, as well as the types of innovative, targeted strategies that can effectively counter the practice of early marriage.

References

Akhter, H.H., M.E. Chowdhury, and A. Sen. 1996.

A cross-sectional study on maternal morbidity in Bangladesh. Bangladesh Institute of Research for Promotion of Essential and Reproductive Health and Technologies (BIRPERHT): Dhaka.

Alan Guttmacher Institute (AGI). 1998.

Into a New World: Young Women's Sexual and Reproductive Lives. AGI: New York.

—— 1995.

Women, families and the future: Sexual relationships and marriage worldwide. AGI: New York.

Alauddin, M. and U. Rob. 1999.

"Meeting the Needs of Newly-Married Youth: The Bangladesh Case." *International Quarterly of Community Health Education* 18(4): 459–469.

Amin, S.D. et al. 1998.

"Transition to adulthood of female garment-factory workers in Bangladesh." *Studies in Family Planning* 29(2): 185–200.

Amin, S.D. and S. Gilda. 1998.

Incentive Schemes for School Attendance in Rural Bangladesh. Policy Research Division, the Population Council: New York.

Anderson, K.H., M.A. Hill, and J.S. Butler. 1987.

"Age at marriage in Malaysia: a hazard model of marriage timing." *Journal of Development Economics* 26(2): 223–34.

Arends-Kuenning, M.A. 2000.

The effects of schooling incentive programs on household resource allocation in Bangladesh. Policy Research Division Working Papers No. 133. Population Council: New York.

Barua, A. et al. 2003.

Caring Men? Husbands' Involvement in the Maternal Care of their Young Wives. Paper presented at the Population Association of America Annual Meeting, Minneapolis.

Barua, A. and K. Kurz. 2001.

"Reproductive health-seeking by married adolescent girls in Maharashtra, India." Reproductive Health Matters 9(17): 53–62.

Bawah, A. et al. 1999.

"Women's fears and men's anxieties: the impact of family planning on gender relations in northern Ghana." *Studies in Family Planning* 30(1): 54–66.

Bennett, L. 2001.

"Single women's experiences of premarital pregnancy and induced abortion in Lombok, eastern Indonesia." *Reproductive Health Matters* 9(17): 37–43.

Berhane-Selaisse, T. 1993.

Research on early marriage or child marriage in Ethiopia; summary of interim report. Newsletter of the Inter-African committee on traditional practices affecting the health of women and children, issue 15:11.

Bledsoe, C. and B. Cohen. 1993.

Social Dynamics of Adolescent Fertility in sub-Saharan Africa. National Academy Press: Washington, DC.

Brady, M. and A. Khan. 2002.

Letting girls play: the Mathare Youth Sports Association's football program for girls. The Population Council: New York.

Brown, A. 2001.

Sexual relations among young people in developing countries: evidence from WHO case studies. World Health Organization: Geneva.

Caldwell, J. and P. Caldwell. 1987.

"The Cultural Context of High Fertility in sub-Saharan Africa." *Population and Development Review* 13(3): 409–437.

Centers for Disease Control and Prevention (CDC). 2002.

Vital Statistics Report. CDC: Atlanta.

Chandrasekhar, R. 1996.

"Childhood in Rajgarh: too young for wedlock, too old for the cradle." *Economic and Political Weekly* 31(40): 2721–2722.

Clark, S. 2003.

Early marriage and HIV risks in sub-Saharan Africa. Harris Graduate School of Public Policy, University of Chicago: Chicago.

Cornell University. 2003.

Marriage Laws of the Fifty States, District of Columbia, and Puerto Rico. Law Information Institute. http:// www.law.cornell.edu/topics/ Table_Marriage.htm.

Das, N.D. 1998.

"Female age at marriage in India: trends and determinants." *Demography India* 27(1): 91–115.

Dornsife, N. and A. Mahmoed. 1985.

An Evaluation of Pathfinder's Early Marriage Education Programs in Indonesia. Pathfinder International: Jakarta. Unpublished manuscript.

Dowsett, G.W. et al. 1998.

"Changing gender relations among young people: the global challenge for HIV/AIDS prevention." *Critical Public Health* 8(4): 291–309.

Esim, S., et al. 2001.

Making it work: linking youth reproductive health and livelihoods. International Center for Research on Women: Washington, DC.

Family Care International (FCI) and the Safe Motherhood Inter-Agency Group (IAG). 1998.

"The Safe Motherhood Initiative." FCI: New York.

Farnsworth Riche, M. 2003.

Equal Opportunity and Youth Employment. Background paper for the Equal Opportunity Working Group of the Youth Employment Network. Unpublished manuscript.

Gage, A.J. 1998.

"Sexual activity and contraceptive use: the components of the decision-making process." *Studies in Family Planning* 29(2): 154–66.

Ganiger, S.B. 1992.

"Determinants of age at marriage in Karnataka during 1971–1981: a district level analysis." *Journal of Institutional Economic Research* 27(2): 13–23.

Gaym, A. 2000.

"A review of maternal mortality at Jimma Hospital, Southwestern Ethiopia." *Ethiopian Journal of Health Development* 14(2): 215–23.

Government of Manipur. 1997.

Balika Samridhi Yojna (BSY). Social Welfare Department, Government of Manipur: Inphal.

Government of Uttar Pradesh. 2000.

Uttar Pradesh Population Policy.
Department of Family Welfare, Government of Uttar Pradesh: Lucknow.

Green, Edward C. et al. 2003.

Literature Review and Preliminary
Analysis of "ABC" Factors (Abstinence,
Partner Reduction, Condom Use) in Six
Countries. Unpublished manuscript.
Harvard Center for Population and
Development Studies: Cambridge, MA.

Greene, M.E. et al. 2002.

In this generation: sexual and reproductive health policies for a youthful world. Population Action International: Washington, DC.

Greene, M.E. 1997.

Watering the neighbour's garden: Investing in adolescent girls in India. Population Briefs 3(4). Population Council: New Delhi.

Gupta, N. 2000.

"La formation des unions chez les adolescentes du Nordeste (Bresil)." ("The formation of adolescent unions in northeast Brazil.") *Cahiers Quebecois de Demographie* 29(2): 287–306.

Gupta, P.K., A. Joshi, and B. Crook 2003.

Gender and Social Justice: Nurturing Young Men's Partnerships with Women to Improve Reproductive Health. A Case Study of the Central Himalayas, Uttaranchal, India. Interagency Gender Working Group: Washington, DC.

Heise, L., M. Ellsberg, and M. Gottmoeller. 2002.

"A global overview of gender-based violence." *International Journal of Gynaecological Obstetrics* 78 (Supplement 1): 5–14.

Heise, L., M. Ellsberg, and M. Gottemoeller. 1999.

"Ending Violence against Women." *Population Reports Series L: Issues in World Health* 11: 1–43.

Heise, L., J. Pitanguy, and A. Germain. 1994.

Violence against women: The hidden health burden. Discussion Paper #255. The World Bank: Washington, DC.

Huq, L. and S. Amin. 2001.

"Dowry negotiations and the process of union formation in Bangladesh: implications of rising education." Unpublished manuscript.

Hussain, R. 2001.

"The effect of marriage preferences on women's autonomy: a case study." In *Pakistan's population issues in the 21st century: the Population Association of Pakistan 2001 conference proceedings.* Population Association of Pakistan: Karachi.

Hussain, R. and A.H. Bittles. 1999.

"Consanguineous marriage and differentials in age at marriage, contraceptive use, and fertility in Pakistan." *Journal of Biosocial Science* 31(1): 121–38.

International Center for Research on Women (ICRW). 2001.

The critical role of youth in global development. ICRW: Washington, DC.

International Center for Research on Women. 2001.

Youth, Gender, Well-being and Society: A Contextual Approach to Adolescent Reproductive Health and Sexuality in India. ICRW: Washington, DC.

Islam, M.N. and A.U. Ahmed. 1998.

"Age at first marriage and its determinants in Bangladesh." *Asia Pacific Population Journal* 13(2): 73–92.

Jarrett, D. 1994.

"The Health of Women." In Nasah, B.T., J.K.G. Mati, and J.M. Kasonde, eds., Contemporary Issues in Maternal Health Care in Africa. Harwood Academic Publishers: Luxembourg.

Joint United Nations Program on HIV/AIDS (UNAIDS). 2000.

Report on the global HIV/AIDS epidemic. UNAIDS: Geneva.

Jurdi, R. and P.C. Saxena. 2003.

"The prevalence and correlates of consanguineous marriages in Yemen: similarities and contrasts with other Arab countries." *Journal of Biosocial Science* 35(1): 1–13.

Kirby, D. et al. 1997.

"The impact of postponing sexual involvement curriculum among youths in California." *Family Planning Perspectives* 29(3): 100–108.

Luke, N. and K. Kurz. 2002.

Cross-generational and transactional sexual relations in sub-Saharan Africa: prevalence of behavior and implications for negotiating safer sexual practices.

International Center for Research on Women and AIDSMARK: Washington, DC.

Malhotra, A. et al. 2003.

Realizing Reproductive Choice and Rights: Abortion and Contraception in India. International Center for Research on Women: Washington, DC.

Malhotra, A. and A. Tsui. 1996.

"Marriage Timing in Sri Lanka: The Role of Modern Norms and Ideas." *Journal of Marriage and Family* 58(2): 476–490.

Mathur, S., A. Malhotra, and M. Mehta. 2001.

"Adolescent Girls' Life Aspirations and Reproductive Health in Nepal." *Reproductive Health Matters* 9(17): 91–100

Mensch, B.S., J. Bruce, and M.E. Greene. 1998.

The Uncharted Passage: Girls' Adolescence in the Developing World. Population Council: New York.

Nasimiyu, R. 1997.

"Changing women's rights over property in western Kenya." In Thomas, C.B., S. Weisner, and P. L. Kilbride, eds. (in collaboration with A.B.C. Ocholla-Ayayo, Joshua Akong'a and Simiyu Wandibba), *African Families and the Crisis of Social Change*. Bergin and Garvey: Westport, Connecticut.

Nepal Health Education, Information, and Communication Center. 1995.

"Arrange the Marriage of Your Daughter after 20 Years of Age." United Nations Population Fund: New York.

Okonofua, F.E. 1995.

"Factors associated with adolescent pregnancy in rural Nigeria." *Journal of Youth Adolescence* 24(4): 419–38

Panda, P.K. 2002.

Rights-based strategies in the prevention of domestic violence. International Center for Research on Women: Washington, DC and Centre for Development Studies: Trivandrum, India. Unpublished manuscript.

Pandey, A. 1984.

"Determinants of age at marriage of females in India." *Janasamkhya* 2(2): 105–115.

Population Council and International Center for Research on Women (ICRW) 2000.

Adolescent Girls' Livelihoods. The Population Council: New York and ICRW: Washington, DC.

Population Reference Bureau (PRB). 2000.

State of the World's Youth. PRB: Washington, DC.

Prakasam, C.P. and R.B. Upadhyay. 1985.

"Socio-economic variables influencing mean age at marriage in Karnataka and Kerala." *Janasamkhya* 3(1-2): 81–90.

Schreck, L. 1998.

"Expectations about marriage and childbearing vary by race and ethnicity among girls in grades 6–8." *Family Planning Perspectives* 30(5): 252–253.

Singh, S. and R. Samara. 1998.

"Early Marriage among Women in Developing Countries." *International* Family Planning Perspectives 22(4): 148– 57.

Stewart, H. et al. 2001.

Reducing HIV Infection among Youth: What Can Schools Do? Key Baseline Findings from Mexico, South Africa, and Thailand. Population Council, Horizons publication: Washington, DC.

Sureender, S., B. Prabakaran, and A.G. Khan. 1998.

"Mate selection and its impact on female marriage age, pregnancy wastages, and first child survival in Tamil Nadu, India." *Social Biology* 45(3–4): 289–301.

Tripathy, P.K., I.S. Rao, and P.N. Pradhan. 1992.

"An integrated path analysis approach to study the variation in the age of female nuptiality of Orissa." *Janasamkhya*, 10(1-2): 31–43.

Unisa, S. 1995.

"Demographic profile of the girl child in India." *Social Change* 25(2–3): 30–37.

United Nations Children's Fund (UNICEF) and Johns Hopkins University Center for Communication Programs (JHUCCP). 2003.

Sara, a role model for girls as they face HIV and AIDS in Africa: A review of the Sara Communication Initiative for its introduction to Ghana. UNICEF: New York and JHUCCP: Baltimore.

United Nations Children's Fund (UNICEF). 2001.

Early Marriage: Child Spouses. UNICEF: Florence.

United Nations Department of International Economic and Social Affairs. 1989.

Adolescent reproductive behaviour: Evidence from developing countries. Population Studies Report No. 109, Vol. 2. United Nations: New York.

United Nations Development Programme (UNDP), 2002.

Human Development Report. United Nations: New York.

United Nations Fund for Population Activities (UNFPA) and EngenderHealth. 2003.

Obstetric Fistula Needs Assessment Report: Findings from Nine African Countries. UNFPA and EngenderHealth: New York.

United Nations Fund for Population Activities (UNFPA). 1990.

Review and Analysis of Premarital/ Newlywed Education Activities in Mexico, Indonesia, and the Philippines. UNFPA: New York. Unpublished manuscript.

Vasconcelos, A. et al. 1995.

Sexuality and AIDS Prevention among Adolescents from Low-Income Communities in Recife, Brazil. International Center for Research on Women: Washington, DC.

Weiss, E. and G.R. Gupta. 1998.

Bridging the Gap: Addressing Gender and Sexuality in HIV Prevention. International Center for Research on Women: Washington, DC.

World Bank Group. 2003.

Public and Private Initiatives: Working Together in Health and Education. The World Bank: Washington, DC.

Xenos, P. and M. Kabamalan. 1998.

The changing demographic and social profile of youth in Asia. East-West Center, Program on Population: Honolulu.

International Center for Research on Women

1717 Massachusetts Avenue, NW Suite 302 Washington, DC 20036, U.S.A.

Tel: (202) 797-0007 Fax: (202) 797-0020 e-mail: info@icrw.org

www.icrw.org