Meta-synthesis and meta-analysis of evidence on child marriage in South Asia

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Meta-synthesis and meta-analysis of evidence on child marriage in South Asia

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Foreword

In each country I visit, I always spend time with children. It's what inspires me to do my job.

Last year, in Pakistan, I met 17-year-old Maina who told me of the multiple miscarriages she endured after being married at the age of 13. Worse yet, her 12-year-old sister, Laali, also faced pressure to marry because her family could not afford to look after her. She told me that all she wanted was to stay in school, learn and play with her friends. Fortunately, through UNICEF's efforts, she was referred to the social welfare department. Her marriage was delayed. But, for how long, I wondered.

Throughout South Asia, stories like Maina's and Laali's are, sadly, all too familiar. Child marriage remains one of the most persistent human rights violations in our region. While there has been significant progress in reducing child marriage rates, with notable progress over the last decade, South Asia is home to a staggering 290 million child brides. More than one in four girls are married before turning 18. This harmful practice not only cuts childhoods short and curtails the potential of young girls, it undermines broader development efforts and perpetuates cycles of poverty, gender inequality, and violence.

This report, commissioned by UNICEF South Asia, analyses 65 studies to present a comprehensive meta-synthesis and meta-analysis of child marriage programmes across the region. It highlights evidence on what works to prevent child marriage, where these interventions have been successful, and the ongoing gaps in knowledge that we must address. The findings will be instrumental in shaping our programmatic efforts and guiding evidence-based policies.

As the global community, including the United Nations and other agencies, intensifies its efforts to reduce child marriage in South Asia and beyond, this report highlights the urgent need for coordinated action amongst partners to accelerate progress.

Child marriage is driven by a range of interrelated factors, including poverty, harmful social norms, barriers to education, and inadequate enforcement of laws. The report also emphasizes the need for innovative approaches to address the challenges faced by marginalized communities, and the importance of coordinated interventions to provide girls with access to education, protection, and opportunities.

For example, addressing poverty through financial support for families and enabling girls access to quality education are both essential. The report also highlights how local beliefs and traditions can impact the success of these efforts. In some communities, changing harmful social norms requires working closely with local leaders to gain their support.

The journey to end child marriage is far from over. But through continued commitment, investment and partnership, we can build on what works and scale up solutions that empower girls and enable them to live a life of their choosing.

Only then, when girls like Maina and Laali are protected, educated and productive, will South Asia realise its promise and potential.

Sanjay Wijesekera
UNICEF South Asia Regional Director

Acronyms

AWLI	Afghan Women's Leadership Initiative in Support for Adolescent Girls
BPO	India's Business Process Outsourcing
CCT	Conditional Cash Transfer
CM	Child Marriage
CO	Country Office
CSE	Comprehensive Sexuality Education
COVID-19	Coronavirus 2019
CMRA	Bangladesh's Child Marriage Restraint Act
ERG	Evaluation Reference Group
FTP-FSP	Bangladesh's Free Tuition Policy and Female Stipend Program
GPECM	Global Programme to End Child Marriage
IALP	Improving Adolescent Lives in Pakistan
IES	Income and Economic Strengthening
MICS	Multiple Indicator Cluster Survey
NGO	Non-governmental Organisations
NPA	National Plan of Action
NREG	National Rural Employment Guarantee Scheme
PRISMA	Preferred Reporting Items for Systematic Reviews and Meta-Analyses
RCT	Randomised Control Trial
RE	Random Effects
ROSA	UNICEF Regional Office for South Asia
SAG-KP	Scheme for Adolescent Girls – Kanyashree Prakalpa
SRE	Sexual and Reproductive Health Education
SRH	Sexual and Reproductive Health
TOR	Terms of Reference
UCT	Unconditional Cash Transfer
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
VSLA	Village Savings and Loan Association
WHO	World Health Organisation

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1 Executive summary

1.1 Introduction

This Executive Summary presents findings from a meta-synthesis and meta-analysis of evidence on child marriage interventions in South Asia, commissioned by UNICEF South Asia, to provide a synthesis of evidence relating to the effectiveness of interventions aiming to prevent child marriage in the region. The overarching purpose of the study is to enhance learning, support evidence-based decision-making to improve the design of future interventions in South Asia, and support the overall performance of UNICEF and partners in their efforts to end child marriage. The findings will also contribute to UNICEF and UNFPA's joint efforts in implementing Phase III of the Global Programme to End Child Marriage (GPECM) (2024-30).

The objectives of this meta-synthesis and meta-analysis include:

1. To comprehensively and rigorously collate, assess and present evidence (using both peer-reviewed and grey literature) on interventions with an impact on ending child marriage (ECM) in South Asia;
2. To critically appraise the literature with regard to effectiveness (and, where possible, sustainability and scalability), identifying patterns of results as well as evidence and knowledge gaps;
3. To provide an estimate of average effect size of specified selected interventions, based on available data.

1.2 Methodology

The following research questions were developed to guide the meta-synthesis and meta-analysis.

- What is the current state of evidence related to interventions aimed at ending child marriage in the South Asia region?
- What type of interventions are effective in reducing child marriage incidence among girls aged 10-18 years or delaying age at marriage in South Asia? In what contexts and conditions are they effective? What is the mechanism through which they influence child marriage?
- What is the average effect size of specific interventions seeking to reduce or with an impact on reducing child marriage in South Asia? (specific to the meta-analysis).
- To what extent have the outcomes of UNICEF-UNFPA's Ending Child Marriage interventions been sustained and/or scaled up after the intervention period has ended?[1]

The meta-synthesis and meta-analysis comprised interventions which included preventing child marriage as a primary or secondary outcome; peer reviewed articles and grey literature published from 2010 onwards; interventions in Afghanistan, Bangladesh, Bhutan, India, Maldives, Nepal, Pakistan and Sri Lanka; and all programme contexts where UNICEF and UNFPA operate in South Asia. The eligibility criteria for inclusion can be found in the full report. The approach was guided by the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines.[2] Four comprehensive steps were taken to implement the meta-analysis and meta-synthesis methodology: identification of evidence, screening of evidence, data extraction and data analysis.

1.3 Findings

1.3.1 State of evidence of child marriage interventions: screening results

To our knowledge, this synthesis includes the largest number of studies relating to the effectiveness of child marriage interventions in South Asia covering the time period of 2010-2024. In total, 65 studies were identified as eligible for inclusion in the meta-synthesis. Of these, 29 studies (i.e. 45 per cent) were included in the meta-

analysis. The vast majority (82 per cent) of studies examined interventions in India and Bangladesh (28 and 25 studies, respectively), likely reflecting a concentration of interventions and high prevalence of child marriage in these countries. Studies were categorised into six typologies, including social norms change, income and economic strengthening, education, empowerment, sexual and reproductive health, and law and policy reform, in line with definitions within GPECM programme documentation and wider literature. Many interventions were multi-component interventions incorporating multiple typologies. Findings are presented according to each typology.

1.3.2 Effectiveness of child marriage interventions

Meta-analysis findings present quantifiable effect sizes (and statistical significance, or p value) of specific typologies or combinations of typologies (i.e. the percentage difference in child marriage rates between the intervention group and the control group). Meta-synthesis findings discuss factors impacting the effectiveness of each intervention typology, particular modalities that can be effective, and barriers to effectiveness. The small number of studies included within certain meta-analyses, high variability in interventions and high study heterogeneity mean that results should be interpreted with caution. The sub-sections below present findings from the meta-analysis and meta-synthesis according to intervention typology.

Cross-cutting findings

Although studies rarely took an experimental approach to assessing differential impacts of interventions on child marriage outcomes in different contexts, some studies indicated that the effectiveness of interventions might vary based on household income, location, age, and intervention duration and intensity. However, there was insufficient evidence to determine the exact contexts in which specific intervention typologies are, or are not, effective. Findings highlight issues with assuming a 'one size fits all' approach to implementing interventions. There is insufficient evidence on the sustainability of interventions, though there were examples of interventions considering sustainability in their design (e.g. stakeholder capacity building, establishing safe spaces, supporting girls' long-term employment), and of evaluations considering the potential sustainability of interventions (e.g. cost-benefit analyses or cost forecasting).

Social norms change

Meta-analysis findings: Social norms interventions can have a significant effect on reducing child marriage rates, both as standalone interventions (by 4.5 per cent, at $p < .001$) and when combined with other typologies (by 3.35 per cent, at $p < .001$). The effect of these interventions appears to increase when they are combined with empowerment and sexual and reproductive health components, with this combination seeing a 6.45 per cent reduction in child marriage ($p < .001$).

Meta-synthesis findings: Interventions targeting norms related to education appear to be particularly effective, because they can be adopted without significantly challenging more ingrained norms around gender roles and relations. By contrast, attitudes relating to gender roles and relations were found to be much harder to shift, reflecting the degree to which gender inequality is ingrained in communities where child marriage is practiced. Norms change interventions appear to be more effective when they implement multiple modalities (media, community mobilisation, training, etc.) and target a diverse range of stakeholders. Evidence shows that perceived effects of norms change interventions may appear stronger due to respondents reporting learned norms messaging, which may not represent authentic attitudes and meaningful change in views. Evidence demonstrates the importance of: 1) considering the complexity in decision-making dynamics when developing social norms programmes and including both males and females; 2) context-sensitive approaches to ensure community receptiveness, whilst taking effort to prevent interventions being overly shaped by existing local norms structures and community hierarchies, and; 3) sustained programming to support long-term changes in social norms and child marriage practices.

Income and economic strengthening

Meta-analysis findings: Income and economic strengthening interventions (such as conditional cash transfers [CCTs] and interventions supporting girls' labour force participation) can significantly reduce child marriage rates. CCTs were shown to reduce child marriage by 4.7 per cent ($p < .05$). However, notably, CCTs that do not have a marriage-delay condition (rather, only have a condition for girls to remain in education), did not significantly reduce child marriage. Non-CCT income and economic strengthening interventions might increase child marriage rates.[3]

Meta-synthesis findings: The interplay of economic pressures and other drivers of child marriage (particularly social norms) are complex and multi-faceted, and these factors play a role in the effectiveness of economic strengthening interventions on child marriage outcomes. The income and economic strengthening interventions that demonstrate the most success are those that are able to increase girls' human capital, such as through improving the acceptability of girls' participation in the labour market, building vocational skills and financial literacy, and attaching girl-centred conditions to cash transfer receipts. In certain contexts, the alleviation of financial hardship through cash transfers may lead to unintended consequences related to persisting child marriage, such as more readily accessible dowry. Income and economic strengthening interventions may be more effective when they also address social norms, target dowry practices, include child marriage prevention conditions for receipt of financial support, and seek to ensure that the value of girls and their real or potential capital is recognised by families and the wider community.

Education

Meta-analysis findings: Education interventions provide a significant contribution to the prevention of child marriage; all interventions with an education component reduced child marriage rates by 1.78 per cent ($p < .05$), while standalone education interventions reduced child marriage rates by 4.44 per cent ($p < .01$). Findings suggest that combining education interventions with other typologies might not increase their effectiveness.

Meta-synthesis findings: It was difficult to draw out the unique contributions of education elements of multi-component interventions to child marriage prevention. In addition, the narrative of how and why education interventions reduce child marriage was limited within the included studies; rather, a link between education and marriage prevention is often an implicit justification for intervention development. However, available findings suggest that, while participation in education can impact child marriage, effects may be stronger if interventions successfully increase girls' academic attainment and learning outcomes. Interventions appear to be particularly effective in preventing child marriage where education leads to increased economic opportunities for girls. Some evidence also indicates that education interventions may support more general empowerment and agency of girls, which supports them to raise their voice against child marriage. The provision of material support and efforts to improve the learning environment appear to be important elements of interventions to support girls' attendance in school, while tutoring and non-formal education support girls' academic outcomes; there were examples of each of these modes of intervention leading to the successful prevention of child marriages. Prevailing harmful social norms appear to be a key barrier to successful implementation, improvements in education outcomes and the prevention of child marriage.

Girls' (youth) empowerment

Meta-analysis findings: Empowerment interventions have a significant effect on reducing child marriage rates, with a 2.7 per cent reduction in child marriage rates for all interventions with an empowerment component ($p < .001$). Multi-component interventions which combine empowerment programming with other typologies were found to have a larger effect on reducing child marriage than standalone empowerment interventions, particularly those with social norms and SRH components.

Meta-synthesis findings: The success of empowerment interventions is somewhat dependent on others' receptiveness towards girls' empowered behaviours. This relates particularly to

individuals making the decisions regarding marriage timing, including parents (especially fathers), but also the wider community. Restrictive social norms are a key barrier to the success of empowerment interventions. Available evidence suggests that interventions that increase girls' integration and engagement in the community can be effective, such as through the establishment of safe spaces and girl mentors / girl leaders, as well as interventions which provide life skills and strengthen girls' economic empowerment.

Adolescent sexual and reproductive health

Meta-analysis findings: Too few studies were identified to calculate a pooled effect size for standalone SRH interventions. However, meta-analysis findings showed that interventions with an SRH component, combined with other typologies, can reduce child marriage by 2.73 per cent ($p < .05$), indicating that SRH interventions can contribute to preventing child marriage. Findings from the meta-analysis indicate that the inclusion of SRH components can strengthen the effectiveness of social norms and empowerment programming, with this combination seeing the highest reduction in child marriage, at 6.45 per cent.

Meta-synthesis findings: Interventions aimed at improving adolescents' knowledge and awareness on SRH issues tend to have high success rates, though this does not always lead to reduced child marriage. The sensitivity of the subject of SRH can limit community receptiveness to such interventions, which can be a barrier to effectiveness. This emphasises the importance of targeting parents, service providers and broader communities in order to ensure that SRH interventions are implemented, supported by stakeholders, and lead to delayed marriage outcomes (for instance, through social norms programming). Furthermore, incorporating SRH components into empowerment programming may help mitigate community resistance to such interventions.

Law and policy

Meta-analysis findings: Available evidence indicates law and policy interventions alone are ineffective, with findings showing a non-significant reduction in child marriage of 0.7 per cent.

Meta-synthesis findings: The limited number of studies and varied results offers little explanation as to why law and policy interventions have not proven hugely successful at substantively reducing child marriage practices in South Asia, though evidence points towards the need for interventions to focus on enforcement of laws and accountability, including through addressing underlying social, economic, and cultural factors contributing to child marriage. Further research and investigation is required to gather a more definitive understanding of the effectiveness of law and policy interventions.

1.4 Recommendations and implications for future programming

The full report provides detailed recommendations for strengthening evidence and programming implications for each typology. A summary is provided below.

- Filling research gaps, including: conducting rigorous research for intervention typologies lacking in evidence (for example, education); carrying out longitudinal follow-up studies; embedding sustainability within evaluation frameworks; developing clear Theories of Change for all individual interventions; and understanding the impact of key population characteristics on intervention outcomes.
- Strengthening monitoring and evaluation to improve evidence generation, including: conducting rigorous, quantitative, baseline, midline and endline assessments; incorporating comparison /control locations; including quantitative measures of implementation, exposure, child marriage outcome and confounding variables; triangulating quantitative data with qualitative data; and including rigorous mixed-methods MEL frameworks in evaluations.
- Recognising the value of economic strengthening interventions such as CCTs and interventions that increase girls' human capital, remove labour market barriers, and support norms change to increase acceptability of girls' labour

market participation, whilst mitigating potential unintended consequences of unconditional cash transfers through addressing social norms and other key drivers.

- Strengthening the link between education and delayed marriage through: promoting educational outcomes beyond school retention and attendance; focusing on academic achievements and skills acquisition; supporting girls' access to economic opportunities; combining educational interventions with empowerment and SRH components; and addressing norms change to ensure community and parental acceptance.
- Engaging decision makers and empowering girls, targeting key stakeholders, embedding norms change in interventions, and recognising girls as key advocates for changing marriage outcomes.
- Creating an enabling environment through community engagement and social norms change, maximising exposure and involving diverse stakeholders, whilst minimising the risk of unintended negative consequences and ensuring adequate safeguarding measures.
- Recognising the advantages of an integrated approach to adolescent SRH programming, embedding SRH within broader programmes, and including social norms and empowerment components to SRH interventions.
- Recognising the limitations of law and policy interventions as a standalone approach, and establishing clear legal frameworks and enforcement mechanisms, complementing other programmatic efforts.
- Widespread and sustainable programming, through piloting interventions across diverse contexts, strengthening data collection in existing contexts, and embedding sustainability by incorporating cost-benefit analyses, designing long-lasting intervention components, emphasising long-term evaluations, and securing government and stakeholder buy-in.

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2 Introduction

2.1 Background and rationale

This report presents findings from a meta-synthesis and meta-analysis of evidence on child marriage interventions in South Asia, commissioned by UNICEF South Asia, to provide a synthesis of evidence relating to the effectiveness of interventions aiming to prevent child marriage in the region. The overarching purpose of the study is to enhance learning, support evidence-based decision-making to improve the design of future interventions in South Asia, and support the overall performance of UNICEF and partners in their efforts to end child marriage. The findings will also contribute to UNICEF and UNFPA's joint efforts in implementing Phase III of the Global Programme to End Child Marriage (2024-30).

Child marriage – defined as a formal or informal union in which one or both parties are under the age of 18 years[4] – is a violation of human rights, as well as a significant public health and development concern. It is a global issue that threatens the lives, well-being and futures of millions of girls and adolescents around the world. South Asia has one of the highest rates of child marriage globally; it is estimated that more than one in four young women in South Asia first married or were in a union before their 18th birthday.[5]

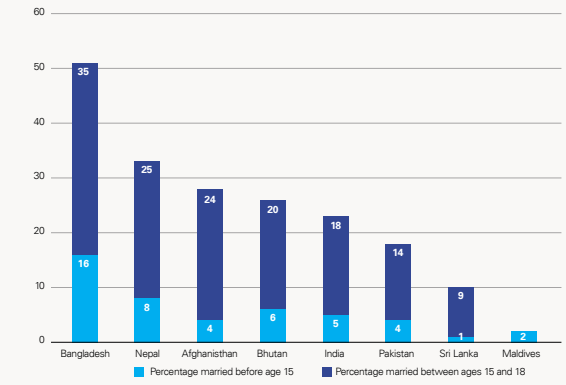
Child marriage rates vary significantly across the region, as shown in Figure 1, ranging from over 50 per cent in Bangladesh to 2 per cent in the Maldives.[6] Within countries, disparities are also notable; for instance, Afghanistan exhibits a tenfold difference in child marriage rates across provinces.[7] Typically, child brides in South Asia are more likely to reside in poor households, have lower levels of education, and live in rural areas, with three out of four married girls giving birth during adolescence.[8] Whilst boys are less likely to experience child marriage, it does occur, particularly among boys from the poorest families.[9] In Nepal, for example, nearly 1 in 10 young men were married in childhood.[10] This variability conveys the heterogeneity in experiences and indicators of child marriage in the region.

The drivers of child marriage are multi-faceted and complex. These include: poverty; harmful gender norms and attitudes towards girls, including a lack of recognition of adolescence as a distinct phase of life, and the resulting transition from childhood to adulthood at an early age for girls; barriers to education; weak enforcement of legal and policy frameworks; and restrictions on access to sexual and reproductive health services and rights. Available literature, such as the 2019 UNICEF and UNFPA Child Marriage in South Asia Evidence Review[11], highlights the complex interplay between these drivers, and their varying degree of influence on child marriage practices across the countries in South Asia. This underscores the need for varied, multi-sectoral responses to effectively combat child marriage in the region.

UNICEF and UNFPA, through their Global Programme to End Child Marriage (GPECM), play a crucial role in reducing child marriage at the global, regional, and country levels. Phase I of the GPECM (2016-2019)[12] focused on institutional strengthening and shaping community attitudes and behaviours. The application of the GPECM was adapted in each country to local contexts; however, only a few countries formally adapted the theory of change, and interventions did not reach the most remote areas in many instances. Nonetheless, there were signs of scale up and successful broader stakeholder engagement on child marriage and adolescent girls' rights across all countries.[13] Phase II (2020-2023) accelerated actions by investing in providing support for adolescent girls, increasing service delivery, political mobilization, policy development, and evidence

strengthening.[14] Activities during this phase highlighted that, while social and behaviour change (SBC) can help shift norms and practices, there was a lack of clarity with regards to what SBC and norms-shifting interventions should consist of to be most effective in reducing child marriage.[15] Phase III (2024-30) intends to pursue longer-term gender transformative goals that aim to support adolescent girls to fully enjoy a childhood free from marriage risks; the phase III theory of change outlines that the GPECM seeks to address a shift in attitudes and the growing opposition to gender equality, human rights and democracy, and child marriage.[16]

Figure 1: Percentage of women aged 20 to 24 years who were first married or in a union before ages 15 and 18 by country



Source: A Profile of Child Marriage in South Asia, UNICEF, 2023

Alongside the interventions implemented through UNICEF and UNFPA GPECM implementing partners, a multitude of interventions have been implemented at the global, regional, national and local levels by diverse stakeholders, which aim to respond to the multi-faceted drivers of child marriage and reduce the prevalence of child marriage. Whilst research on child marriage practices, drivers and responsive programming in South Asia has expanded considerably in recent years, challenges and gaps in available evidence persist. These gaps include conflicting evidence on interventions, unknown effect sizes, and insufficient longitudinal data to assess long-term impact. Additionally, there is a lack of evidence comparing the effectiveness of different interventions and the reasons for disparities, as well as an absence of literature providing an overarching perspective of interventions currently implemented in the region.

Greater insight is needed into which interventions address child marriage most effectively, and in which contexts.[17] Such knowledge can inform more effective policy and programming, thus ensuring that interventions are both-evidence based and contextually relevant.

This study aims to fill the knowledge gaps on intervention effectiveness by conducting a meta-synthesis and meta-analysis of evidence on the effectiveness of interventions to prevent child marriage in South Asia, from 2010 to April 2024. This combined analysis identifies, appraises, synthesizes, and compiles all relevant evidence relating to child marriage interventions in the region, including in humanitarian and fragile contexts and for minority or extremely vulnerable populations. It includes evidence for all interventions for which rigorous evidence has been produced[18], and therefore is not limited to interventions implemented through the GPECM.[19]

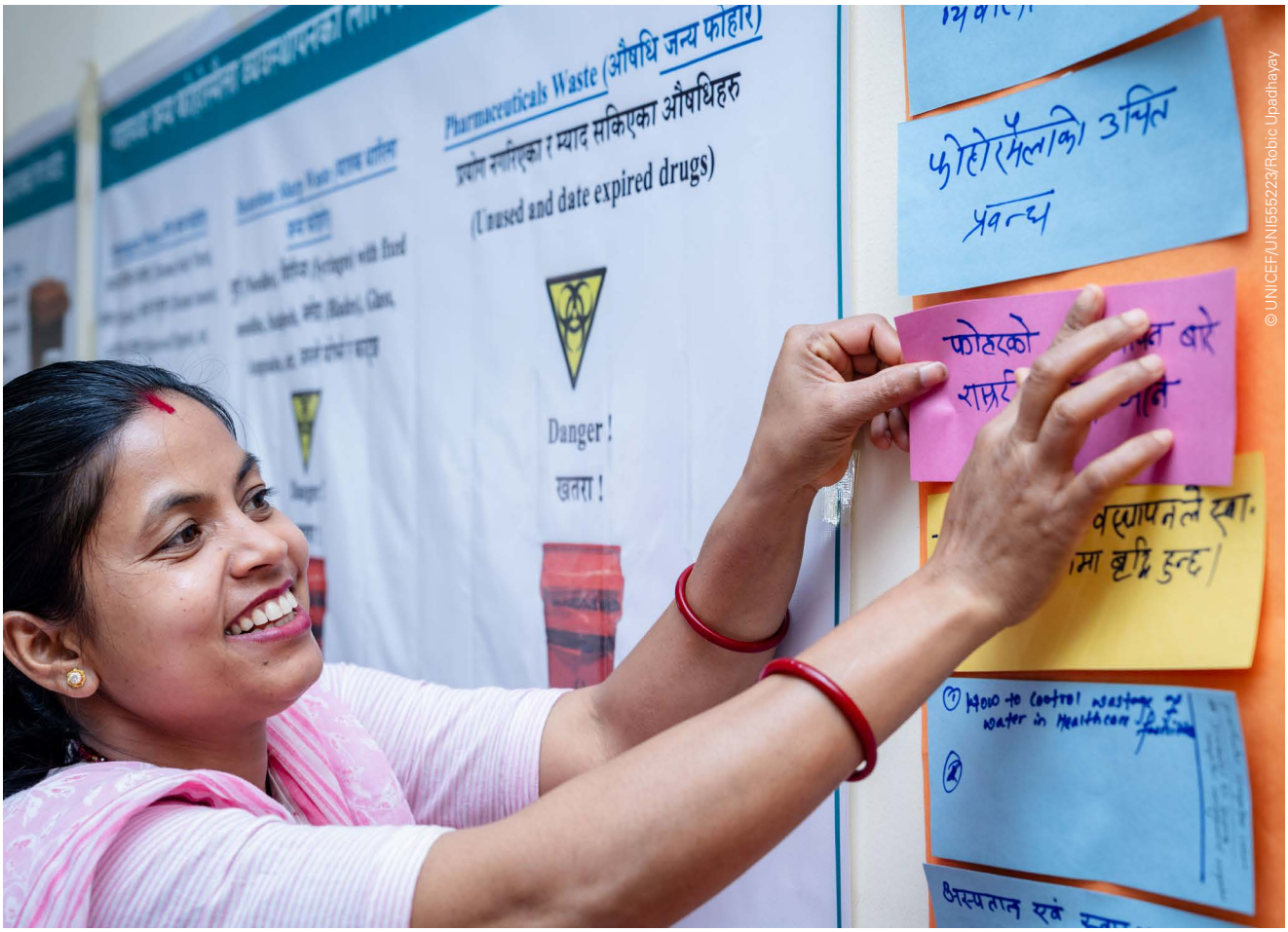
This meta-synthesis and meta-analysis sought to present evidence relating to effective strategies to combat child marriage and the contexts in which they have worked, enabling policymakers, practitioners, and stakeholders to make informed decisions. By consolidating and analysing a broad spectrum of data, this study highlights successful intervention models and demonstrates where there are evidence gaps and where further efforts to generate evidence are needed. This evidence-based approach adds to the body of evidence surrounding the efficacy of different child marriage interventions, ultimately contributing to the global movement to eradicate child marriage. The synthesis will also foster cross-sectoral collaborations, promoting a holistic and integrated approach to tackling this complex issue, thereby maximising the benefits for vulnerable populations across South Asia.

The objectives of this meta-synthesis and meta-analysis are:

1. To comprehensively and rigorously collate, assess and present evidence (using both peer-reviewed and grey literature) on interventions with an impact on ending child marriage in South Asia;

2. To critically appraise the literature with regard to effectiveness (and, where possible, sustainability and scalability), identifying patterns of results as well as evidence and knowledge gaps;
3. To provide an estimate of average effect size of specified selected interventions, based on available data.

The primary intended audiences and users for this meta-synthesis and meta-analysis are UNICEF, UNFPA and other implementing partners. Ultimately, it is intended to be useful to all stakeholders working on eradicating child marriage.



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3 Intervention typologies

3.1 Introduction to typologies

The following section presents various typologies of interventions aimed at ending child marriage in the South Asia region. These typologies were developed based on an initial review of literature and programme documentation (including GPECM guidelines which set out definitions of typologies), scoping interviews with UNICEF programme staff in each of the South Asian countries, and Coram's institutional experience of child marriage programming and evaluation in South Asia. These activities allowed the team to map the range of interventions that have been or are currently being implemented in the region and identify the particular 'modalities' or approaches used to implement each typology, to support the analysis framework for the meta-synthesis and meta-analysis. Typologies are framed on commonalities in the theoretical basis for interventions, or the driver of child marriage which they seek to address (e.g. addressing income poverty and economic deprivation, or attempting to change social attitudes and norms surrounding child marriage, etc.). The modalities capture the mechanism or specific intervention which has been applied (e.g. training programmes, individual counselling, cash transfers, or media campaigns). While, conceptually, there is some overlap between the typologies (for example, interventions can seek to address social norms relating to girls' participation in education), the team sought to create distinct categories to facilitate the analysis. Please note that, as the categories were developed based on a range of sources to guide analysis, including programmes that have been implemented historically by non-UNICEF partners, the categorisations and terminology used for each typology throughout the report may not reflect the same terminology used by UNICEF programming teams at present.

Table 1: Summary of intervention typologies and modalities to implement.

Typology		Modalities and approaches	
1	Social norms change	1.1	Media campaigns
		1.2	Community engagement
		1.3	Incentive-based
2	Income and Economic Strengthening	2.1	Unconditional cash transfers
		2.2	Conditional cash transfers
		2.3	Education / training to support income generation
		2.4	Provision of microfinances for small businesses
		2.5	Norms change relating to girls' labour force participation*
		2.6	Targeted recruitment and labour force opportunities
3	Education	3.1	Education Sector Reforms
		3.2	Tutoring, academic and vocational skills training for girls
		3.3	CCTs and education stipends
		3.4	Norms change relating to importance of education*
4	Girls' (adolescent and youth) empowerment	4.1	Life skills
		4.2	Safe spaces
		4.3	Counselling or mentorship
		4.4	Economic empowerment interventions
		4.5	Participation and youth governance
5	Sexual and reproductive health	5.1	Sexual and reproductive health education
		5.2	Direct service provision
		5.3	Advocacy and system strengthening
6	Law and policy reform	6.1	Legislative reform
		6.2	Action plans and strategies with specific aims of ending child marriage
		6.3	Technical support and capacity building to support implementation
		6.4	Interventions increasing knowledge of child marriage laws

*These were included within the social norms typology

3.1.1 Social norms change

Child marriage practices in South Asia are driven and supported by dominant attitudes and norms, particularly those relating to gender and the role of women and girls in society. While the nature of these norms and their influence on child marriage practices vary across contexts, evidence from the region demonstrates a relationship between child marriage practices and: norms that place significant value on girls' chastity and sexual innocence; norms that insist upon a gendered division of labour within the household, and place greater value on the roles and responsibilities of men; and norms that support patriarchal power structures, and are accepting of violence against women and girls.[20]

In acknowledgment of this relationship, programmatic work aimed at ending child marriage has focused on changing social norms and attitudes. Modalities or approaches for doing so have included media campaigns; sensitisation or awareness raising of communities, families and individuals; more participatory models, such as community dialogues and games or activities that challenge dominant gender norms and divisions of labour; and the use of incentives to influence decision-making. While many interventions have addressed attitudes around child marriage directly, for instance by explaining the advantages of delayed marriage, others have also targeted underlying attitudes and norms relating to gender roles and adolescent (girls') sexuality.

Media campaigns: Social and behavioural change programming often draws upon traditional mass media, such as radio, television, newspaper, and film, as well as social media platforms, to disseminate messages. Several interventions have adopted an '**Entertainment-Education**' approach, through the development of serial content designed to both entertain and educate, such as a fictional television or radio series.[21]

Community engagement: Social and behavioural change interventions also attempt to change attitudes and norms through close engagement with community platforms and institutions. Such interventions are used widely and, in many cases, delivered alongside other types of programming. They often involve engaging figures of influence, particularly in relation to (decisions around) child marriage, such as local government structures, faith leaders, service providers (such as teachers or health workers), parents, men and boys, and finally, girls and young women themselves. The specific design and modalities for engagement vary widely, but they may involve: structured meetings and conversations with relevant stakeholders; larger group sessions or activities aimed at raising awareness and sharing information; or, mobilising community members or existing collectives to disseminate messages and lead community dialogue. Recent interventions have emphasised community-led and participatory approaches that are both more sustainable and more likely to gain traction with local authorities. Community engagement interventions are often delivered alongside or as a complement to other types of programming.

Incentive-based programming: A less common approach to pursuing social norms change has involved the use of financial incentives, such as cash payments, to 'nudge' individuals towards a different choice with regards to marriage timing.[22] This approach is based on an economic model of decision making around marriage timing, in which a small incentive can shift the balance of influencing factors (e.g. the value of young or gender conforming brides on the marriage market) towards delaying marriage.

3.1.2 Income and economic strengthening

Interventions aiming to achieve income and economic strengthening are based on the evidence that poverty is a key driver of child marriage in South Asia.[23] Improving families' and girls' economic stability can lessen the impact of financial hardship and reduce the number of families resorting to child marriage as a negative coping mechanism, while integrated approaches as well as conditional economic support creates a financial incentive for families to delay girls' marriage. Additionally, conditional economic support creates a financial incentive for families to delay girls' marriage. Common approaches to economic/income security include cash transfers. These can be either **unconditional cash transfers** (UCTs) and **conditional cash transfers** (CCTs) and can be combined with other interventions, such as SBC to make cash plus approaches. Cash transfers often have wider linkages to human capital development, particularly for children. Other interventions, such as wider labour market programmes, including skills-building, income generating or livelihood

programmes, aim to support girls to generate income and access the labour market through skills training, recruitment and norms change. Interventions aim to address the lifecycle risks related to poverty and income insecurity, and hence often primarily target more vulnerable groups. These groups may include households with girls at risk of child marriage or associated outcomes (e.g. high poverty, out of school children, rural areas, urban slums, etc.). Cash transfer programmes often try to enable greater human capital accumulation, by being provided in combination with other typologies, such as linking families to education or health services and SBC interventions. Child marriage prevention may be framed as a secondary outcome of interventions with cash transfer components, with the primary aim being for girls to remain in education or access nutrition and health services.

UCTs and CCTs: In this study, cash transfers are a primary intervention modality for income and economic strengthening to reduce child marriage risk, and may also aim to provide a financial incentive or behavioural nudge for delaying child marriage (when conditional or combined with other interventions such as SBC). Unconditional cash transfers (UCTs) involve the provision of payment without any conditions beyond meeting eligibility criteria, whereas conditional cash transfers (CCTs) have varying conditions for receipt of payment, such as delaying a girl's marriage until the age of 18 or education-related conditions such as a certain attendance rate (e.g. 80 per cent),[24] or a certain proficiency in exams.[25] Payment schedules and the duration of transfers vary per scheme, including short term payments, regular or annual payments to one-off payments upon proof of girls reaching 18 years and remaining unmarried (e.g. Apni Beti Apna Dhan, India).[26] These design features tend to lead to different outcomes of the programmes (i.e. regular payments are spent on daily needs and address better child outcomes, such as nutrition and education, lump sums tend to be used for investments into businesses and have less immediate impacts on children. Some cash transfer programmes, known as 'Cash Plus' programmes, are accompanied by another intervention element, such as health, education, social behaviour change or life skills.

In-kind transfers: The In-kind transfers looked at within the study are often utilised as a means to encourage parents to keep their children in education and/or prevent child marriage, as an alternative to stipends or CCTs. In-kind transfers can include school supplies or food items. In-kind transfers often have broader eligibility criteria than other means of financial support, often serving as an incentive for middle-income families to support their daughters to remain in education.

Education / training to support income generation: Interventions targeted at improving girls' economic opportunities include programmes to educate girls about income generation prospects and rights, such as land rights and land assets (e.g. SABLA, India)[27], and training related to financial management, budgeting, saving and small business management (e.g. Kishoree Kontha Program, Bangladesh).[28] Additionally, vocational training interventions aim to equip girls with the knowledge and skills to participate in income generating activities (e.g. tailoring, beauty, etc.). Education and training to support income generation are often integrated into life skills training packages (discussed further under the girls' empowerment section). Finally, education-focused interventions recognise the long-term implications of enabling girls' participation in the workforce.

Provision of microfinances for small businesses: Certain interventions provide microfinances for girls following completion of training in relation to income generation, financial management and business start-ups. The aim of these finances is to enable girls to set up businesses and establish their own income generating activities.

Norms change relating to girls' labour force participation: Norms change interventions (addressed in further detail under the social norm change section) often aim to increase awareness of the benefits and contributions girls can make to the labour force, with the aim of increasing acceptance of girls engaging in income generating activities.

Targeted recruitment and labour force opportunities: Other interventions aim to increase girls' labour force participation through recruitment activities designed to raise awareness and improve the accessibility of certain labour markets to girls. In some cases, interventions which provide education and training to girls also include an intervention component that ensures participants' access to relevant roles after completing their training. More broadly, systemic / structural efforts to increase

available labour market opportunities are an essential enabling factor for girls' participation in the labour force.

3.1.3 Education

Existing research demonstrates a strong correlation between girls' participation in education and delayed child marriage.[29] While findings in relation to the direction of this correlation vary, evidence indicates that remaining in education is a protective factor for child marriage. For this reason, one of the key intended outcomes of the GPECM has been to ensure that girls remain in education.[30] There are several modalities of interventions aiming to prevent child marriage through girls' participation in education, including education reforms, CCTs dependent on school attendance, direct provisions of academic and vocational education and training, and norms change to increase knowledge and perceptions relating to the importance of girls' education.

Education sector reforms: At the national level, governments can implement policies to strengthen the education system and girls' access to education. Reforms support structural elements of education, such as government expenditure on education, free tuition policies, school infrastructure, recruitment and training of teachers, provision of educational supplies and strengthening school councils.[31] The establishment and strengthening of schools can be carried out at the national level through government policy but may also be conducted at the local level with support of NGOs/CSOs.

Tutoring, academic and vocational skills training for girls: Interventions aiming to support girls in education include additional tutoring or supplementary training in core education subjects to help improve academic outcomes for girls. Others provide vocational education and training with the aim of improving girls' income generation prospects. Often, supplementary academic training and livelihood skills are provided as part of life skills training packages, discussed further under the girls' empowerment section (see for example the BALIKA intervention).

Education stipends: A common form of intervention to promote girls' participation in education involves the provision of educational stipends to girls to remain in education (e.g. Female Secondary School Stipend Programme; FSSP), funding to cover enrolment or tuition fees, or scholarships for girls entering further education (e.g. Kanyashree Prakalpa postgraduate degree scholarship, India).[32] Please note that CCTs and in-kind transfers often involve the condition that girls remain in education, but these are categorised within the economic strengthening section.

Norms change relating to importance of education: Norms change interventions which aim to sensitise people to the importance of girls' engagement in education can operate at the community level or can target specific groups, such as parents, boys and education providers / teachers (e.g. Samata intervention, India).[33]

3.1.4 Girls' (adolescent and youth) empowerment

A significant area of child marriage prevention and response programming is aimed at empowering girls (and young people more broadly) through interventions that are designed to increase their individual agency and capacity and reduce their vulnerability to child marriage and its drivers. In addition to empowering girls, such interventions may contribute to changes in attitudes and norms within communities, particularly when they seek to engage families and communities. Empowerment interventions tend to be cross cutting and often seek to promote girls' access to education or economic empowerment, as well as strengthening decision-making, self-esteem and other psychosocial capacities. The main modalities of empowerment programming include life skills sessions, 'safe spaces' or youth-friendly centres, counselling or mentorship, and skills training or material support aimed at promoting girls' economic empowerment, with many interventions combining two or more of these.

Life skills: Life skills programmes involve targeted programming aimed at building the capacity of girls (or adolescents more broadly) to make decisions and take actions that promote their wellbeing and have a positive impact on their lives. Life skills sessions often cover a range of topics including goal setting, planning and decision making; self-esteem; critical thinking; communication, negotiation and conflict resolution; healthy relationships and sexual and reproductive health; and practical skills to promote self-sufficiency, such as financial literacy or computer skills training. As mentioned under the SRH and economic strengthening typologies, life skills curricula often incorporate sexual and reproductive

health education, and education and training to support income generation.

Safe spaces: Girls' empowerment interventions often include the establishment of a physical space – a youth centre, resource centre, or 'safe space' – where interventions can be implemented. These spaces are particularly valuable given social restrictions on girls' mobility in some communities – they allow girls to join activities and socialise without concern from parents.[34] Such spaces may also provide girls access to resources such as workspaces, libraries, computers and access to sexual and reproductive health services.

Counselling or mentorship: Girls' empowerment interventions may also incorporate a mentorship component. In many cases, life skills sessions and other activities are implemented by young women who also serve as mentors or counsellors, providing individual support to participants.[35] Mentors may also establish relationships with girls' families, and potentially influence family decision making around topics like girls' education and marriage timing. Counsellors or mentors may also support participants to develop a case plan, setting goals for the future and identifying actions they can take to achieve these.

Participation and child-friendly governance: Adolescent empowerment programming may include efforts to support adolescents to organise, or establish opportunities for them to participate in, local governance bodies and mechanisms, such as youth parliaments. These approaches can promote adolescents' ability to voice their concerns and priorities to duty bearers within their schools and communities, and even within their households.[36]

Economic empowerment interventions: Finally, as noted under the economic strengthening section, interventions often focus on empowering girls through promoting their economic potential, livelihoods training, skills development around financial skills and autonomy, savings and start-ups.

3.1.5 Sexual and reproductive health

Sexual and reproductive health (SRH) and child marriage are closely interlinked in South Asia. Adolescent pregnancy is a key driver of child marriage, particularly in contexts where pre-marital sexual activity is socially sanctioned. In many of these contexts, girls' virginity is highly valued and viewed as a reflection of family honour, and marriage is considered the only acceptable outcome when a girl becomes pregnant, or is known to have been sexually active, regardless of whether pregnancy occurs. Young people's access to sexual and reproductive health services, including contraceptives, are often restricted in the contexts where these drivers are the most influential. Restrictions on access to information, contraception and other services contribute to unintended pregnancy, and ultimately, child marriage.

Given these linkages, a number of programmes aimed at ending child marriage have included interventions designed to improve adolescents' access to their sexual and reproductive health rights. Such interventions often have other intended outcomes, including preventing unintended pregnancy, reducing age of first pregnancy, or promoting safe and healthy reproductive choices. The majority of these interventions involve providing adolescents and young people with information and education relating to sexual and reproductive health. Other modalities include the direct provision of services, such as confidential counselling services, contraception or sexually transmitted infection (STI) testing, and advocacy to reduce barriers to young people's access through working with service providers and policymakers to promote an enabling environment.

Sexual and reproductive health education (SRE): As the most widely used approach to SRH programming, these interventions range in intensity, from the incorporation of information on SRH and healthy behaviours into life skills programming, to the delivery of SRE focused curricula through multiple sessions. SRE may be delivered in school contexts, in a classroom setting, or through community outreach or peer-to-peer learning models. The highest standard in SRE, comprehensive sexuality education, involves providing young people with clear, accurate and age-appropriate information across relevant topics, including anatomy, puberty, contraception, sexually transmitted infections, consent, gender and sexuality, and healthy relationships. Delivering SRE programming often requires navigating taboos around adolescent sexuality and sexuality more broadly. In many contexts in South Asia, SRE is highly controversial, due to concerns that information will enable or encourage sexual activity among young people.

Direct service provision: Other interventions have focused on improving young people's access to safe and confidential SRH services through direct provision of contraception, testing and counselling services. Services may be provided through existing healthcare settings, in youth-friendly centres or distributed by teams of peer educators or outreach workers.

Advocacy and system strengthening: Finally, SRH interventions have involved collaboration with relevant government authorities to strengthen young people's access to SRH services, including through incorporating comprehensive sexuality education into school curricula. Examples include the development of Government strategies and action plans to strengthen SRH services, or advocacy and capacity building with relevant authorities and service providers to establish a more enabling environment for young people's access. Such approaches are likely to promote sustainability, but risk being shaped by restrictive social norms, resulting in limitations on the provision of information and services.

3.1.6 Laws and policies

Legal and policy frameworks provide an essential foundation and legal basis for the prevention of child marriage. Research indicates that there may not be a strong association between protective laws and rates of child marriage, due to limited knowledge of laws amongst communities and a lack of capacity or political will from government officials or relevant actors mandated to enforce the laws[37], demonstrating a need for interventions to focus on implementation (some of which is specified within the systems strengthening section). The GPECM has developed the 'Sevens Steps to Strengthening Legislation, Policy and Public Financing to End Child Marriage', which outlines key concepts / modalities for strengthening legal and policy frameworks, including legislative and policy reform, national strategies and action plans, public finance management, accountability and advocacy.[38]

Legislative reform: Legislative reform for child marriage involves the development of laws defining the minimum legal age of marriage and bylaws sanctioning individuals involved in the facilitation of child marriages and enabling divorce or annulments of child marriages. Other relevant laws include those which provide for free and full consent to marriage, prohibit dowry practices or bride price, and specify birth and marriage registration requirements, in addition to laws aiming to prevent, and ensure access to support for girls who experience, violence and discrimination and ensure the protection of children.

Action plans and strategies with specific aims of ending child marriage: Action plans exist at the country and regional level. In some cases, national action plans are dedicated to the prevention of child marriage (e.g. Afghanistan's National Action Plan to Eliminate Early and Child Marriage, 2017), while in other cases, child marriage prevention policies are embedded within broader action plans to prevent violence against children and support girls' access to education. Action plans outline principles, objectives, implementation strategies, activities and indicators, monitoring and reporting plans, funding plans, stakeholder responsibilities and coordination mechanisms.

Technical support and capacity building to support implementation: Programmatic work can include providing technical support and guidance to enhance government capacity to implement legislation and action plans. This technical guidance aims to ensure coherent programming, increase stakeholder accountability and establish coordination networks to support implementation across sectors.[39] Capacity building activities include facilitating workshops with key implementation stakeholders which centre on accountability, leveraging / advocacy for public financial investment, increasing knowledge of child marriage laws and the implications of not upholding laws and policies, and providing training and guidance for implementing legal provisions.[40]

Interventions increasing knowledge of child marriage laws: Life skills and norms change interventions often include components designed to educate communities and increase knowledge about child marriage laws and the legal rights of girls. However, interventions aiming to increase knowledge about child marriage laws are not always shown to be effective, with some evidence suggesting that these interventions can increase child marriages.[41]

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4 Methodology

4.1 Meta-synthesis and meta-analysis questions

The following research questions were developed to guide the meta-synthesis and meta-analysis. Note that questions with an asterisk (*) are specific to the meta-analysis, while the others will be addressed by both the meta-synthesis and meta-analysis where possible:

- What is the current state of evidence related to interventions aimed at ending child marriage in the South Asia region?
- What type of interventions are effective in reducing child marriage incidence among girls ages 10-18 years or delaying age at marriage in South Asia? In what contexts and conditions are they effective? What is the mechanism through which they influence child marriage?
- What is the average effect size of specific interventions seeking to reduce (or with an impact on reducing) child marriage in South Asia?*
- To what extent have the outcomes of UNICEF-UNFPA's Ending Child Marriage interventions been sustained and/or scaled up after the intervention period has ended?[42]

4.2 Scope

The scope and parameters of the meta-synthesis and meta-analysis are set out below.

Sectoral: The meta-synthesis includes all studies that examine the impact of an intervention on ending child marriage, either through preventing child marriage or delaying age at marriage, regardless of whether the intervention was designed to prevent child marriage or to address broader risk factors (e.g. health, schooling, etc.). The meta-analysis only includes rigorous studies that provide a statistical analysis of the intervention's estimated effect size with regards to child marriage reduction.

Temporal: The meta-synthesis and meta-analysis includes research articles / papers published from 2010 onward. The decision to extend the time frame from 2014 to 2010 was taken in order to ensure that a sufficient number of eligible studies will be retrieved for the meta-analysis.

Geographic: The meta-analysis and meta-synthesis includes all countries within the South Asia region (Afghanistan, Bangladesh, Bhutan, India, Maldives, Nepal, Pakistan and Sri Lanka).

Source: The meta-analysis and meta-synthesis includes all published evidence extracted from peer reviewed evaluations, research and reviews, as well as grey literature, conducted by UNICEF, UNFPA and other actors.

Programme context: The review includes multiple programme contexts operating in South Asia, including within rural and urban locations, in-school and out-of-school contexts, and national and sub-national programmes.

Evaluation criteria: The meta-synthesis and meta-analysis focuses on effectiveness. Where data is available, the evaluation addresses sustainability and scalability of interventions.

4.3 Approach and methods

The approach to conducting the meta-synthesis and analyses is guided by internationally recognised methods and standards, namely the Preferred Reporting Items for Systematic reviews and Meta-Analyses (PRISMA) guidelines.[43] Specifically, we guarantee the following:

- To be broad, comprehensive and objective;
- To avoid researcher bias, through the inclusion of a diverse team of researchers in the review, and the development of a predefined review protocol;
- To ensure full transparency in the methods and systems utilised throughout the review process;

- To ensure the quality, relevance and reliability of all evidence included in the review, through the development of a quality assurance process and checklist;
- To follow detailed procedures with methods set out in advance, that could be replicated in the future.

The evaluation was carried out through a five-phase process: a preparation / inception phase; a data collection phase; a data analysis and review phase; a reporting phase, and a validation and finalisation phase. The preparation / inception involved an initial literature review and scoping interviews with UNICEF and UNFPA country offices to inform: the development of the intervention typologies / categories to guide the analysis; a mapping of actors working on ending child marriage in the South Asia region; a preliminary analysis of existing evidence on child marriage interventions; and, drawing on these, the development of a methodology for the evaluation.

4.4 Data gathering and review

4.4.1 Identification of evidence and data sources

A search strategy and screening process was implemented to obtain relevant evidence (studies, research and data) regarding interventions aimed at ending child marriage in South Asia. The search strategy involved both automated and manual search methods to ensure the identification of relevant research in both peer-reviewed journals and grey literature, though note only studies published in English were included in the scope of this mapping.

Automated search strategy

Automated searches involved systematically entering a set of pre-determined search terms into digital libraries and search engines. The search terms were developed to cover the range of child marriage interventions and modalities set out in the intervention typology section (see section 3). Sets of search terms were grouped into four strings, where one term from each string had to appear in each result. The following strings and corresponding search terms were included in the automated literature search:

String 1: *Child, early, force*, adolescent, girl*

String 2: *Marriage, bride, groom, union, cohabitation*

String 3: *South Asia*, Afghanistan, Bangladesh, Bhutan, India, Maldives, Nepal, Pakistan, Sri Lanka, Andhra Pradesh, Arunachal Pradesh, Assam, Bihar, Chhattisgarh, Goa, Gujarat, Haryana, Himachal Pradesh, Jharkhand, Karnataka, Kerala, Madhya Pradesh, Maharashtra, Manipur, Meghalaya, Mizoram, Nagaland, Odisha, Punjab, Rajasthan, Sikkim, Tamil Nadu, Telangana, Tripuru, Uttar Pradesh, Uttarakhand, West Bengal*

String 4: *Intervention, programme, initiative, evaluation, cash transfer, livelihood*, stipend, microfinance, income generation, economic opportunity, vocational training, labour market, land, education, tutoring, tuition, school completion, social norm*, attitude*, behaviour, media, campaign, sensitisation, awareness raising, engagement, life skills, incentive, safe space, community, counselling, helpline, mobile app, mentor*, sexual and reproductive health, CSE, contraception, advocacy, law, policy, legal reform, action plan, strategy, capacity building, case management, service prov**

Piloting the search terms

The team conducted an initial pilot of the search process in the databases PubMed and PsychINFO to identify how the strategy works in databases covering different subjects. The pilot included scanning a sample of retrieved records to identify any faults with the strategy, such as the production of too many irrelevant hits because of 'rogue' terms, and to check for any relevant terms that had been missed. The search terms yielded a high number of irrelevant hits, so the team adjusted the search terms to be more *specific* (to increase the relevance of results). This included iteratively removing the more general terms in String 4, such as *evaluation, education, law* and *policy,* that were yielding many irrelevant results. However, this adjustment

resulted in several relevant articles no longer being present in search results (e.g. The Foundation for Development's 2022 *External Evaluation of Aarambha Project,* and the 2017 Collin et al. report *Do Age-of-Marriage Laws Work? Evidence from a Large Sample of Developing Countries*), highlighting the need for these more general search terms to capture all potentially relevant evidence. The team therefore reverted back to the original search terms to carry out the full search.

Full automated search

Following the finalisation of the search strategy, the team carried out 10 separate automated searches using the search terms outlined above in each of the 10 following databases: PubMed; Medline; PsycINFO; EBSCOhost; CINAHL; ERIC; Cochrane Library; Web of Science; Sociological Abstracts, and 3ie Impact Evaluation Repository. Additionally, 10 searches were carried out in Google Scholar, separating the terms in String 4 (due to character limits in google scholar searching).

Manual search strategy

The manual search strategy involved a general web-based mapping of relevant journals, websites, databases, conferences and reference lists, with the aim of gathering further peer reviewed studies as well as to comprehensively map relevant grey literature. The comprehensive manual search was guided by a preliminary actors mapping of relevant actors working on ending child marriage in the South Asia region, which was informed by the expertise of the UNICEF and UNFPA regional and CO colleagues and the Coram team. Manual searching also incorporated a 'snowball' approach, which involved identifying relevant intervention studies through the bibliographies and reference lists of relevant evaluation studies or background / contextual literature.

Inclusion criteria

To guide reporting on the meta-synthesis and analysis, the research team adhered to the PRISMA checklist, due to its primary focus on the reporting of reviews evaluating the effects of interventions. As per the PRISMA checklist, the eligibility screening for studies was conducted through the specification of an inclusion and exclusion criteria, as set out below. For the meta-analysis, a tighter specification was applied to ensure that sufficient statistical information is provided for the effect sizes of the studies to be aggregated. The following inclusion criteria sets out a minimum set of standards to preserve study quality and rigor, whilst ensuring the inclusion of as many studies as possible to maximise the breadth and scope of the evaluation. Note that *indicates additional criteria required for the study to be included in a meta-analysis:

- The study was legal and ethical
- A study publication date since 2010
- An adequate description of study setting and location which allows the study to be stratified by country or state / district, restricted to countries in the South Asian region
- A clear description of the intervention which enables the identification and categorisation of typologies / modalities
- Clear study outcome(s) reporting the impact of the intervention on child marriage as a primary or secondary outcome measure
- An adequate description of the methods for how the sample was identified and recruited and a reported sample size
- A minimum sample size threshold of 20
- A minimum sample size threshold of 200*
- A clear description of the duration of the study, with the minimum threshold of at least a year between intervention and evaluation
- An adequate description of the methods used to collect data
- An adequate description of the methods used to analyse data
- An RCT or quasi-experimental study design*
- Child marriage outcomes recorded as either a dichotomous measure (i.e. married or not by age 18) or a continuous measure (i.e. age at marriage)[44] *
- Effect measure as a risk difference, standardised mean difference or a log odds ratio*
- Reported standard error alongside effect measure*
- Evidence of controlling for key confounders*

Screening process

All prospective studies from each search were compiled in the reference management software EndNote and duplicates were removed. Two members of the team independently conducted

a title screening of all articles, comparing results to ensure consistency in the application of criteria and avoid any individual research bias. For the studies that passed the title screening, abstracts were retrieved and reviewed independently by both members of the team to identify the articles eligible for a full-text screening. The title and abstract screening involved each independent reviewer voting 'yes' (the study is eligible), 'no' (the study is ineligible), or 'maybe' (eligibility is unclear) based on the information provided in the title and abstract, respectively. At each stage of the screening process, discrepancies between the studies selected for inclusion by each reviewer were resolved through interactive meetings until a complete consensus was reached. To guide the full-text quality review process, a quality scoring tool was developed and populated to record the status of each study against each criteria. The results from this screening process are presented in section 5.

Development of coding forms

For the full text screening, the team developed a coding sheet with the use of Microsoft Excel to enable extraction of information on the key characteristics of studies – e.g. the name, date, intervention typology, country context, sample size, type of data collected (for meta-synthesis), effect size measure (for meta-analysis) and so on (see Annex C for the populated coding sheets). A code system was also developed to guide the extraction of qualitative findings and information from included studies, and all included studies were uploaded in MAXQDA software so coding could take place (for further information, see data analysis section below).

Data collection and review report

The data gathering, validation and selection phase of the study was concluded with the preparation and submission of a Data Collection and Review Report which summarised the steps taken and outcomes for each stage of the data gathering, validation and selection processes. The report was presented via Microsoft PowerPoint to the evaluation reference group (ERG) for comment and feedback.

4.4.2 Data analysis

Pilot data extraction for meta-synthesis and meta-analysis

Before rolling out the full data extraction and analysis process, the team conducted two pilot studies (one for the meta-synthesis and one for the meta-analysis). The empowerment typology was selected for the pilot of both the meta-synthesis and meta-analysis. The purpose of the pilot was to test out the validity and reliability of the data extraction and coding protocols on a small subset of evidence to identify any issues and determine whether any changes needed to be made to the methodology before conducting the full analysis. No changes were made to the data extraction and coding protocols. However, many empowerment interventions were combined with other typologies, which highlighted that the meta-analysis would encounter limitations and challenges with regards to disaggregating results to assess the contribution of distinct intervention typologies to child marriage prevention. As a result, it was decided that a subgroup analysis would be carried out where possible for each combination of intervention typologies where interventions did not have distinct study arms examining the effects of single typologies.

The team conducted a preliminary sensitivity analysis on the pilot data to ensure the robustness of the pilot results in light of potentially different decisions that could be made during the process of data extraction and analysis (e.g., chosen conversion methods). The sensitivity analysis helped to identify any outlier observations that may have had a significant influence on the overall results. Findings from the sensitivity analysis indicated that there was no significant difference in effect sizes when excluding these results, thus all studies were included.

Approach to data extraction and analysis: Meta-synthesis

Analysis for the meta-synthesis involved a qualitative process of coding, synthesising and analysing the results for each type of intervention. A 'realist' framework was adopted for data synthesis, which included an explanatory analysis of each intervention's **context, mechanisms,** and **outcomes**, with the aim of answering "what works well, for whom, to what extent, in what circumstance, and how?". The team completed this process with the assistance of MAXQDA software. The coding process followed the coding system mentioned above, which set out high level categories of information to be extracted from included studies. In particular, these reflected the research questions and high-level categories within the intervention typology. The process of coding

relevant evidence contributed to the analytical process, with more detailed coding being driven by emerging themes, patterns and relationships relevant to the research questions.

Approach to data extraction and analysis: Meta-analysis

By supplementing the meta-synthesis with a meta-analysis, a more rigorous analysis was possible with regards to quantitative effect size data on child marriage outcomes, where the effect size refers to a quantitative measure of the magnitude of the effect of the intervention. A meta-analysis improves the precision of the quantitative conclusions from individual studies by aggregating results to give a single pooled effect size, providing the opportunity to report on an overall result and to settle controversies arising from conflicting claims.

Data extraction

For the studies identified as eligible for the meta-analysis, data extraction was carried out to ascertain key outcome measures such as type of child marriage outcome (continuous or dichotomous), effect size, standard error and confidence intervals. The most commonly reported effect size measure was the dichotomous measure of the percentage point difference between the proportion of child marriages occurring between intervention and control groups. Therefore, all dichotomous effect sizes were recorded as (or converted to) percentage point difference between intervention and control groups and, where pre-intervention baseline measures were available, effect sizes were adjusted for baseline differences. Where odds ratios were reported, raw data was used to calculate the effect size as a percentage point difference by calculating the difference in percentage change between baseline and endline for intervention and control groups. Due to the lack of individual-level data reported, continuous age of marriage effect sizes were not able to be converted to dichotomous effect sizes, so these were aggregated into a separate meta-analysis where possible. For studies that reported on more than one intervention arm or included separate outcome measures for multiple distinct sample groups, multiple effect size measures and their corresponding standard errors were extracted from an individual study. Where studies reported more than one follow-up (e.g. a midline and an endline assessment), the effect sizes from the endline measurements were used in order to provide a stronger test of the effectiveness of the intervention. Where studies did not report a standard error or confidence interval, the standard error was estimated using the intervention and control group sample sizes and a conservative probability of p=0.5 to maximise the variance of the data given an unknown underlying probability of the outcome of interest.

Assessing heterogeneity

Prior to the analysis of effect sizes, several tests were carried out in order to assess the level of heterogeneity between studies *(i.e. differences in studies that increase the likelihood that differences in effects are due to certain factors beyond the intervention, for example location, sample characteristics, etc.)*. Heterogeneity tests are an essential step to inform the choice of meta-analysis model; fixed effects models would be possible where there is homogeneity between studies, whereas significant heterogeneity requires random effects models to be implemented. Heterogeneity tests included the Tau-squared, I-squared, H-squared and Q statistics (see Annex A for details of the heterogeneity tests and results, as well as a detailed outline of rationale for the selection of effects models). Due to the nature of variation in interventions, unsurprisingly, across all meta-analyses for all typologies, there was significant heterogeneity. Therefore, it was concluded that a random effects model should be implemented.

Random effects modelling

Following the confirmation that the studies were highly heterogenous, a random effects meta-analysis model was employed through the use of R software. The default choice of the DerSimonian and Laird meta-analysis model was used due to its wide acceptance, ease of implementation, and suitability for studies with heterogenous underlying populations.[45] A univariate version of this model was implemented, supplemented by a sensitivity and sub-group analysis to assess the robustness and reliability of the meta-analysis results.

Sensitivity analyses were conducted to assess whether the inclusion of effect sizes with manually calculated standard errors skewed results; it was determined that they did not substantially affect pooled estimates and were thus included in the meta-analyses. Univariate meta-analysis and

subgroup analysis findings are presented in the findings section under each respective typology, while Forest plots, heterogeneity tests and sensitivity analyses are detailed in Annex A.

Reporting measures

To report on the results of the meta-analysis, each section includes a table with the meta-analysis finding for that particular typology. In these tables, we report the effect size measure, z-value, p-value, and the confidence intervals. An **effect size** estimate quantifies the magnitude of the difference between the intervention and control groups, providing a measure of practical significance. The **z-value**, derived from the standard normal distribution, indicates how many standard deviations an element is from the mean, and is used in hypothesis testing to determine the statistical significance of a result. The **p-value**, representing the probability of observing the data given that the null hypothesis is true, helps in deciding whether to reject the null hypothesis; a smaller p-value suggests stronger evidence against the null hypothesis. A **confidence interval** provides a range of values, derived from the sample data, within which the true population parameter is expected to lie with a certain level of confidence, and for this study we have used a 95% confidence interval, offering an estimate of the precision and uncertainty associated with the sample statistic.

4.4.3 Limitations and mitigation strategies

This section outlines limitations encountered in this meta-analysis and meta-synthesis. However, these should be regarded as findings as much as limitations, as they provide insight to one of the key questions of this evaluation relating to the '**state of evidence**' of the effectiveness of child marriage interventions. These limitations highlight the substantial gap in terms of rigorous, high-quality evidence evaluating the effectiveness of child marriage interventions in South Asia.

Publication bias: The inclusion of grey literature aimed to mitigate publication bias, whereby non-significant results are less likely to be published. This was particularly important for the identification of studies which highlight limitations / barriers to impact of interventions. Scoping interviews during the inception phase of this mission sought to identify additional grey literature to mitigate publication bias. Researchers also took measures to reassure respondents that this evaluation / meta-synthesis would serve as a learning at a regional level, and provide important contributions to the shaping of future programme implementation during the next phase of the GPECM, and was not an evaluation of individual actors' efforts.

Publication Language: A limitation of the study was the exclusive use of English-language journal articles, reports, and other documents in the meta-synthesis and analysis, driven by the team's language proficiency, unavailable financial and time resources required to translate technical documents into English, and the limited number of journals specialising in the subject field in native South Asian Languages. This restriction may have excluded valuable insights from non-English publications, potentially limiting the study's comprehensiveness. However, given the substantial involvement of English-speaking international organizations in funding and implementing child marriage interventions in South Asia, it was anticipated that the vast majority of publications would be in English.

Low number of studies meeting eligibility criteria: As indicated below (section 5), the screening of results yielded a relatively small number of studies that were eligible for inclusion based on the criteria, with a particularly low number of studies being identified for inclusion in the meta-analysis, especially for certain countries (e.g. no studies evaluating the effectiveness of child marriage interventions were identified for Sri Lanka). There was an insufficient number of studies to enable a meaningful synthesis of 'systems strengthening' interventions, thus this typology was excluded from the meta-synthesis and meta-analysis. While there were sufficient studies to include all other typologies in the meta-synthesis and analysis, the small number of studies for certain typologies, including law and policy, education and SRH, limits the conclusions that can be drawn from analyses. There was also an insufficient number of studies to carry out meta-analyses for specific 'modalities' of intervention within each typology, thus results provide an overarching picture of the effectiveness of a typology more broadly. For certain typology analyses, the number of studies and effect sizes included is small, meaning the

statistics presented should be interpreted with caution. Findings have been presented as reflecting 'emerging' themes, and should be interpreted as such. Although results provide a useful indication of the efficacy of different types of child marriage interventions and examples of positive, effective practices and barriers to effectiveness, it is not possible to draw definitive conclusions on what does and does not work in the child marriage intervention sphere in South Asia. This is due to the limited number of studies included, the differing contexts in which they are implemented, and the varying quality of data from which the insights are drawn. For example, it is not possible to determine in which countries or geographic contexts CCTs are effective, because there was not a sufficient number of studies nor available disaggregate data to conduct either quantitative or qualitative analysis to draw such conclusions.

Limited longitudinal data: There was a shortage of studies with sufficient longitudinal data to ascertain the long-term effects of interventions on child marriage prevention, which is a limitation of existing evidence. Data was rarely captured at more than two time points; for a study to measure pathways from intervention to outcome meaningfully and quantifiably, a minimum of three data points are needed (baseline, midline and endline). However, few studies utilised this method to assess results, limiting understanding of the mechanisms through which interventions lead to outcomes. To mitigate this, where possible, researchers drew on the meta-synthesis to explore possible mechanisms for effectiveness.

Heterogeneity in studies: As indicated above and in Annex A, there was significant heterogeneity in all meta-analyses and subgroup analyses across all typologies. This was expected, due to the nature of interventions being diverse in their implementation, even within typologies, in relation to location, implementation modalities, target groups, duration, reach, etc. To mitigate this limitation, the effect size measure implemented in analyses (Der Simonian Laird) provides a more robust estimate to account for such heterogeneity (see annex A for further explanation). The meta-synthesis, where possible, sought to highlight effects of specific modalities and highlight how different implementation factors contributed to differences in child marriage outcomes (across all findings sections, but particularly in relation to 'cross-cutting' themes, section 6.8).

Multi-component interventions presenting challenges for analysis: A high proportion of studies that met the criteria for inclusion were multi-component studies and did not assess the effectiveness of a particular intervention typology in isolation. This presented challenges in analysing the effectiveness of specific intervention typologies. For example, it was not possible to conduct a meta-analysis on interventions that address only SRH (i.e. 'distinct' SRH interventions). To mitigate this, the meta-analysis included subgroup analyses to assess effectiveness of particular combinations of interventions. In addition, care was taken in the synthesis to draw out any distinct findings for particular typologies, emphasise where caution should be taken in interpreting findings if it was not possible to discern unique contributions, and to draw out findings in relation to interactions between different typologies for the prevention of child marriage.

Inclusion and exclusion criteria within programmes and ethical implications: This meta-synthesis and meta-analysis focused on effectiveness of interventions, and did not include an examination of inclusion and exclusion criteria for receipt of interventions themselves. This issue is especially important for institutions such as UNICEF and UNFPA, which operate under a rights-based approach in line with their mandates. While the inclusion criteria for the meta-analysis and meta-synthesis included ensuring that each study / evaluation was ethical, the ethical considerations of the interventions themselves were not examined. Implications for future programming provided in section 8.3 are based on evidence of effectiveness of interventions, and the ethical implications of suggestions should be considered when using this document during any future programme design.

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5 The state of evidence on child marriage interventions in South Asia

Summary of the state of evidence

A relatively small number of studies were identified as eligible for inclusion in the meta-synthesis (only 65 studies, over 7 countries, over 14 years). It should be noted, however, that this number is substantially larger than the number of studies that have been included in previous reviews of evidence on child marriage interventions, which often present global evidence (i.e. with few studies examining interventions in South Asia, specifically).[46] To our knowledge, this synthesis includes the largest number of studies relating to the effectiveness of child marriage interventions in South Asia covering the time period of 2010-2024. Only three studies were UNICEF publications; the majority of studies represent interventions implemented by other stakeholders as opposed to UNICEF programmes (either GPECM or previous UNICEF-supported interventions).

Of all 65 studies, 29 (i.e. 45 per cent) were eligible for inclusion in the meta-analysis. The vast majority of studies examined interventions in India and Bangladesh. There were a relatively small number of studies per typology, and an insufficient number to examine the effectiveness of specific modalities of intervention within each typology. Income and economic strengthening (IES), norms change and empowerment interventions had the highest number of studies eligible for inclusion in the meta-synthesis and meta-analysis. A high proportion of studies examined multicomponent interventions, making it difficult to discern distinct contributions of specific typologies. Certain typologies had few studies, with only a small number of effect sizes for the meta-analysis, meaning the pooled estimate should be interpreted with caution, particularly given the high levels of heterogeneity across studies. The high heterogeneity of interventions in terms of duration, context, location and content makes it challenging to draw conclusions regarding the contexts in which interventions work to prevent child marriage, how and why.

5.1 Overview of results

The screening process and eligibility assessment was carried out and recorded in accordance with the PRISMA guidelines, and the results are shown in Figure 2. In total:

- 7,668 studies were identified through the searches (after removing duplicates)
- 412 studies remained after title screening
- 181 articles remained after abstract screening and underwent full-text screening
- 65 studies met the initial quality criteria and underwent the full quality check

Of these:

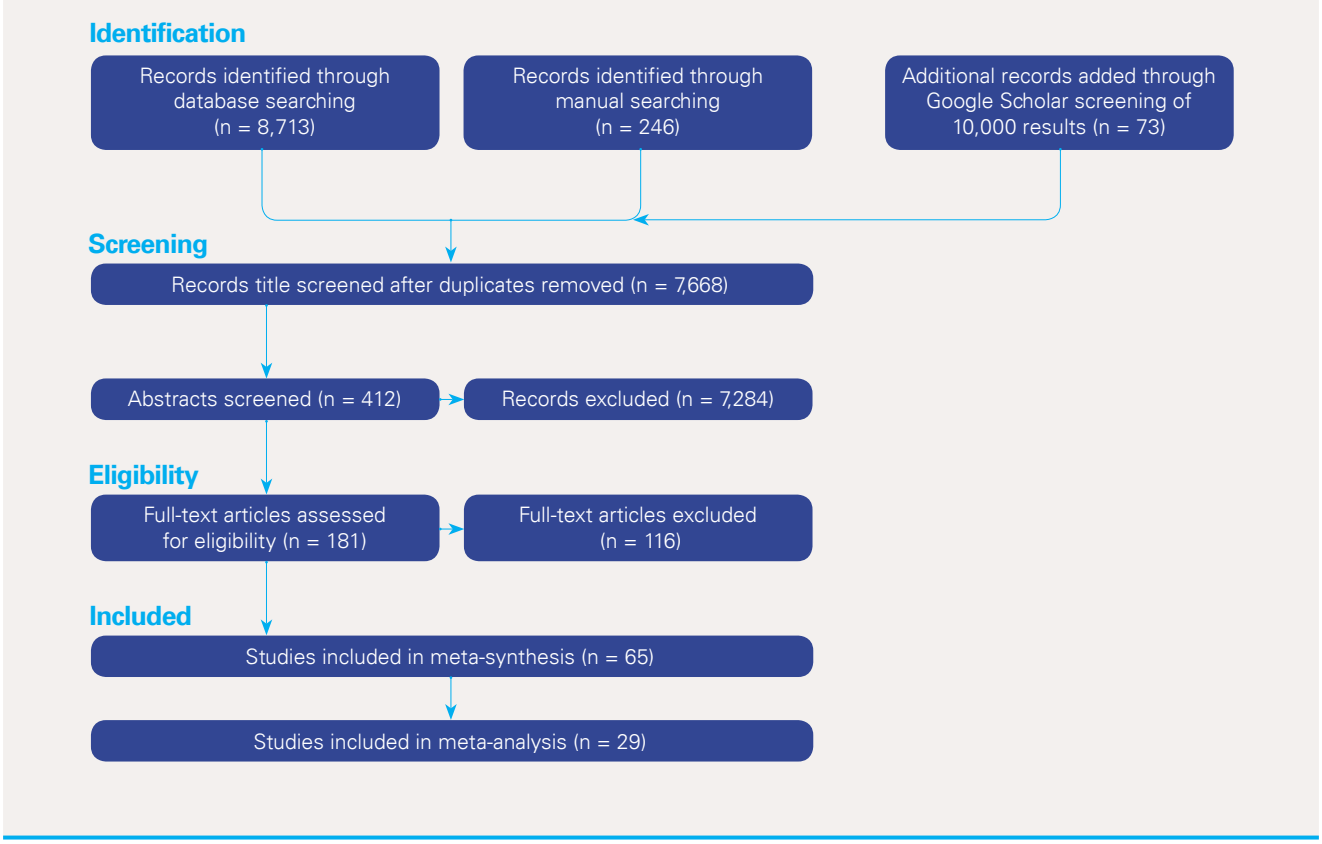
- All 65 studies were included in the meta-synthesis
- 29 studies were included in the meta-analysis

Of the 116 studies excluded at the full-text screening stage, over half were excluded due to having no clear child marriage outcome measure. A full list of reasons for exclusion of studies is provided in Annex A.

The screening results highlight limitations in the 'state of evidence', demonstrating a relatively small number of high-quality research papers documenting the effectiveness of child marriage interventions, specifically, only 65 studies across seven[47] countries over a period of 14 years.

An in-depth profile of each intervention and their respective studies is provided in the table in Annex B. However, a summary of study characteristics is provided below.

Figure 2: PRISMA diagram indicating the number of studies identified, screened and eligible for inclusion in the review



5.2 Study types

In total, 55 per cent of the studies included for quality review were grey literature studies (see Table 2). This highlights the importance of including such literature in the meta-synthesis (and where applicable, meta-analysis). A substantial number of grey literature publications were internal evaluations from various actors implementing child marriage intervention programs, including UNICEF, UNFPA, Girls Not Brides, and national/state governments. The majority (62 per cent) of studies with sufficient data for inclusion in meta-analysis were grey-literature studies, indicative of high-quality grey literature. Of the 36 grey literature studies, three included evidence generated by UNICEF.

Table 2: Number of eligible studies by type of study

Type of study	Number of studies in meta-synthesis	%	Number of studied in meta-analysis	%
Journal articles	29	45	11	38
Grey literature	36	55	18	62
Total	**65**		**29**	

5.3 Geographic coverage

There are geographic disparities with regards to the availability of evidence of the effectiveness of child marriage interventions in South Asia. Table 3 sets out the number of studies identified for each country. The countries with the highest number of studies providing evidence on child marriage interventions were Bangladesh and India, followed by Nepal and Pakistan.

The lack of evidence in other countries may be attributed to these countries not being included in the GPECM and having received less child marriage programming attention. However, it could be reflective of lack of evidence generation and evaluation of programmes in these countries, or might be reflective of fewer interventions themselves, irrespective of GPECM involvement (potentially due to lower child marriage rates in countries such as Sri Lanka and the Maldives, as shown in Figure 1). It was therefore not feasible to conduct analysis to draw meaningful comparisons between the effectiveness of interventions by country in this study.

Table 3: Number of eligible studies by country

Country	Number of studies	Percentage %
Afghanistan	1	2
Bangladesh	25	39
Bhutan	1	2
India	28	43
Maldives	1	2
Nepal	6	9
Pakistan	7	11
Sri Lanka	0	0

5.4 Intervention typologies/modalities

Capturing an intervention under a particular typology is challenging due to the cross-cutting nature of interventions or the presence of multiple interventions in the same programme; this is mentioned in the limitations section and is presented in the findings section for each relevant typology. Table 4 outlines the number of studies identified by typology, and indicates how many of these are combined or distinct intervention programmes, and whether the studies have adopted a qualitative, quantitative or mixed-methods approach.

The typology that was most commonly evaluated was income and economic strengthening, with 38 studies evaluating this typology. Social norms change and empowerment interventions also had a high number of evaluations relative to other typologies. These typologies were commonly part of multi-component interventions, although a relatively high number of studies look at these interventions independently. It was possible to conduct a meta-analysis to understand the unique contributions of each typology (i.e. there were a sufficient number of studies including effect sizes of standalone interventions for each typology), with the exception of SRH interventions.

Due to the small number of eligible studies per typology and high heterogeneity in terms of intervention implementation within typologies, it was not possible to conduct meta-analyses on specific modalities within typologies. The only exception was CCT programmes within the income and economic strengthening typology; 21 of the 38 income and economic strengthening programmes included CCTs. Thus, a meta-analysis and meta-synthesis was carried out for this modality independently of other income and economic strengthening initiatives.

Table 4: Number of eligible studies by typology and data collection method

Typology	Number of studies (note, all were included in synthesis)				
	Qualitative	Quantitative	Mixed-methods	Meta-analysis	Total
Income and economic strengthening	2	27	9	17	38
CCTs[48]	0	18	3	14	21
Education	1	6	5	7	12
Social norms change	4	7	10	6	21
Empowerment	6	14	12	12	32
Sexual and reproductive health	1	8	7	7	16
Law and policy reform	0	4	2	5	7

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6 Meta-analysis and meta-synthesis results

6.1 Overview

The sections below present the findings from the meta-analysis and the meta-synthesis. Sections are divided according to intervention typology (income and economic strengthening, education, social norms change, empowerment, sexual and reproductive health and law and policy). However, due to a large number of studies evaluating multicomponent interventions, there are overlaps between these different typologies. These overlaps and linkages are discussed throughout the findings, and findings are cross-referenced to other sections, where relevant.

For ease of interpretation, the findings section presents the **effect sizes for the meta-analyses**, which, in simple terms, reflect whether the intervention led to a statistically significant change in child marriage, presented as a percentage point difference between the intervention and control group.[49] In the text, asterisks are reported alongside an effect size to indicate their level of significance: * reflects a significant p value of <.05; ** reflects a p value of < .01; *** reflects a p value of < .001. When interpreting meta-analysis results, please note that a **negative effect size is indicative of a percentage point reduction in child marriage** in the intervention group relative to the control group. In the discussion of findings, the use of **the term 'significant' reflects a statistically significant finding** in the meta-analysis.

As noted above, limitations in terms of the availability of high-quality data and high heterogeneity of studies means that **meta-analysis findings should be interpreted with caution,** particularly in cases where there are a small number of studies available. In particular, it is recommended that the meta-analyses are not interpreted comparatively, for instance to determine which typology is the 'most' effective, based on pooled effect sizes. This is due to the high levels of heterogeneity between the study contexts, intervention modalities and the underlying populations receiving each intervention, meaning that comparisons between typologies would not be reliable. Rather, **meta-analysis findings should be interpreted alongside the meta-synthesis findings to explore the circumstances under which, how and why certain intervention typologies (and combinations of typologies) can be effective, and the challenges and barriers to programme effectiveness.** Please note that while it was the intention to assess the specific contexts in which each intervention typology can be most effective and why, in addition to the sustainability of interventions in each typology, there was insufficient evidence to do so. Therefore, findings in relation to how different intervention contexts can impact the effectiveness of interventions and the sustainability of interventions are presented as 'cross-cutting findings', which summarises findings across all intervention typologies (see section 6.8).

Moreover, given the diversity in interventions and the large number of studies included in the synthesis, it is **strongly recommended that readers refer to Annex B** to see detailed information about the content and duration of interventions, and contexts in which all interventions were implemented and their outcomes, alongside the synthesised information in this report.

6.2 Social norms change

Summary

Meta-analysis findings indicate that social norms interventions can have a significant effect on reducing child marriage rates, both as standalone and combined programming. The effect of these interventions appears to increase when they are combined with empowerment and sexual and reproductive health components. While the effect of interventions on knowledge and attitudes were often mixed, evidence suggests that attitudes and practices relating to some social norms might be easier to shift than others; in particular, interventions targeting norms related to education appear to be more effective, because they can be adopted without significantly challenging more ingrained norms around gender roles and relations. Evidence shows that perceived effects of norms change interventions might appear stronger due to respondents reporting learned norms messaging rather than their authentic attitudes, that interventions do not always result in meaningful change in views, and that certain groups or individuals may be more receptive to norms change interventions than others.

Evidence demonstrates the importance of targeting both males and females and considering the complexity in decision-making dynamics when developing targeted strategies for social norms programmes. Findings also highlight the advantages to incorporating modalities that prioritise both breadth and depth; that is, targeting norms through multiple modalities (media, community mobilisation, training, etc.) and reaching a diverse range of stakeholders. Findings reinforce the need for context-sensitive approaches to engaging communities and designing messaging, to ensure receptiveness and minimise risk of push-back, yet they also highlight the risk of interventions being overly shaped by existing local norm structures and community hierarchies. Navigating this tension will require a sensitive and responsive approach throughout the implementation of programming. Finally, findings suggest the need for sustained engagement and long-term programming to ensure that programming contributes to meaningful changes in social norms that will result in changes to child marriage practices over the longer term.

6.2.1 Overview

As will become evident through this report, 'social norms' was a key cross-cutting theme when examining the effectiveness of other intervention typologies. There are two reasons for this: 1) social norms interventions were often included alongside other typologies in multicomponent interventions, and; 2) harmful social norms regarding child marriage were identified as a key barrier to the effectiveness of other intervention typologies. Thus, for clarity, findings relating to social norms interventions have been presented first, followed by the other typologies.

Child marriage practices in South Asia are driven and supported by dominant attitudes and norms, particularly those relating to gender and the role of women and girls in society. While the nature of these norms and their influence on child marriage practices vary across contexts, evidence from the region demonstrates a relationship between child marriage practices and: norms that place significant value on girls' chastity and sexual innocence; norms that insist upon a gendered division of labour within the household, and place greater value on the roles and responsibilities of men; and norms that support patriarchal power structures, and are accepting of violence against women and girls.[50]

In acknowledgment of this relationship, programmatic work aimed at ending child marriage has focused on changing social norms and attitudes. Modalities or approaches for doing so have included media campaigns; sensitisation or awareness raising of communities, families and individuals; more participatory models of community engagement, such as community dialogues, theatre or activities that challenge dominant gender norms and divisions of labour; and, more rarely, the use of incentives to influence decision-making. While many interventions have addressed attitudes around child marriage directly, for instance by explaining the advantages of delayed marriage, others have also targeted underlying attitudes and norms relating to gender roles and adolescent (girls') sexuality.

There is potential overlap between interventions that fall within the social norms typology and the empowerment typology: interventions designed to empower girls will inevitably need to address dominant attitudes and beliefs surrounding marriage and the roles of women and girls in society, and these topics are often included in life skills training packages. For the purposes of this study, we have used the following criteria to determine whether an intervention falls within the social norms typology: whether the aim of the intervention is to shift attitudes and norms around marriage and gender, and the extent to which the intervention targets parents and the broader community, rather than focusing on adolescent girls.

6.2.2 Availability of evidence on the effectiveness of social norms change interventions

Twenty-one studies with evidence on the impacts and effectiveness of social norms change interventions were selected for inclusion in the meta-synthesis and seven of these met the requirements for inclusion in the meta-analysis. Whilst the programme design varied significantly across interventions, dominant modalities included various forms of community engagement and awareness raising, as well as media and information campaigns. Social norms change interventions were often implemented alongside other typologies, particularly empowerment, sexual and reproductive health, and, to a lesser extent, education and law and policy.

Studies included in the meta-analysis and meta-synthesis included interventions that targeted a range of different knowledge and attitudes, including: the impact of programming on child marriage acceptability; knowledge of the minimum legal age of marriage; knowledge around risks and negative consequences of child marriage; and other attitudes and norms underlying child marriage practices, such as those relating to girls' education and labour force participation, gender roles and hierarchies, domestic violence and other mechanisms for social control of women and girls, and (girls') sexuality.

Many of the studies on the impact of social norms change programming include evidence on changes in attitudes and norms, for instance as an intermediate outcome of programming. This provides helpful insight into the change pathway through which social norms programming impacts child marriage outcomes.[51] Relevant findings are explored further below.

6.2.3 Effectiveness of social norms change interventions

Meta-analysis

Meta-analysis results suggest that interventions involving a social norms component have a significant effect on child marriage outcomes. The pooled effect size of all interventions with a social norms component (drawing on 17 effect sizes from seven studies) was -0.0335***, meaning that according to available evidence this category of interventions leads to 3.35 percentage reduction in the likelihood of experiencing child marriage, with high levels of statistical significance. When effect sizes from distinct or standalone social norms interventions are considered the effect size remains highly statistically significant and increases somewhat to -0.0450*** (i.e. reducing the likelihood of marriage by 4.5 percentage points). Analysis of different combinations of intervention types suggests that social norms interventions may be particularly effective when combined with girls' empowerment and sexual and reproductive health

interventions; this combination yielded a significant reduction of 6.45 percentage points[52] though the lower level of significance indicates greater uncertainty around this result.

Results of the effect of different combinations of interventions on child marriage outcomes are presented in Table 5 below. It is important to interpret these findings with caution given the limited number of studies available, and the high levels of heterogeneity across studies.[53] Yet the results do indicate that based on the data available, programming designed to change social norms can be effective in delaying or preventing child marriage.

6.2.4 How social norms change interventions can prevent child marriage

Results from the meta-synthesis provide insight into how shifting attitudes and norms can lead to reductions in child marriage.

Findings on the effectiveness of interventions aimed at shifting social norms show mixed results; evidence demonstrates that while social norms interventions can contribute to changes in knowledge and attitudes, they are not always successful in doing so. There are many barriers that can impact the effectiveness of norms

Table 5: Social norms meta-analysis and subgroup analysis results.[54]

Intervention combination	n	N (studies)	Effect size estimate	SE	z-value	p-value	95% CI
All social norms	**17**	**7**	**-0.0335*** **	**0.0080**	**-4.1799**	**<.0001**	**[-0.0492, -0.0178]**
Distinct typology							
Social norms (standalone)	5	2	-0.0450***	0.0093	-4.8237	<.0001	[-0.0632, -0.0267]
Grouped typology combinations							
Social norms + any other typology component(s)	12	6	-0.0301**	0.0112	-2.6839	0.0073	[-0.0520, -0.0081]
Specific typology combinations							
Empowerment + social norms	4	2	-0.0319*	0.0156	-2.0465	0.0407	[-0.0624, -0.0013]
SRH + empowerment + social norms	3	2	-0.0645*	0.0318	-2.0279	0.0426	[-0.1269, -0.0022]

interventions, including the variability of contexts, the interaction with structural drivers, the need to engage with communities as a whole, and the potential for new vulnerabilities to arise following norms changes. The majority of studies that found significant effects of norms change interventions on attitudes relating to child marriage also identified limitations. For instance, an evaluation of the '*Improving Adolescent Lives in Pakistan (IALP)*' programme found that the intervention reduced agreement with the statement that 'it is OK for parents to marry sons before the age of 18' in programme areas, but did not affect agreement with the same statement for daughters (though results did reveal a decrease in acceptability to marrying girls before the age of 16 in programme areas).[55] Broadly speaking, however, norms change interventions were found to contribute to changes in attitudes and perceptions of child marriage and its acceptability. Qualitative evidence suggests that such programming contributes to a shift in both empirical and normative perceptions around child marriage, from viewing child marriage as a normal practice or the 'status quo', to seeing it as an exceptional occurrence, or even one that should be questioned or challenged.[56]

Interestingly, evidence from the meta-synthesis suggests that norms on some topics may be

easier to shift than others. As an evaluation of the *Tipping Point* intervention in Nepal observed, "the normative environment in which TPP was implemented was complex, showing change over time in some norms and less change over time in most others."[57] While the particular areas where norms change initiatives are likely to have the most traction depend on context, evidence from a number of studies indicates that communities may be particularly receptive to messages around the importance of girls' education.[58] In addition to influencing individuals and communities to place greater value on girls' education, evidence suggests that these attitudinal changes can be successful in shifting attitudes towards marriage timing, building consensus around the view that marriage should be delayed in order to enable families to prioritise girls' education. Qualitative evidence illustrates that this may be the case because supporting girls' education can be compatible with traditional norms around marriage and gender. According to an evaluation of the *Breakthrough* child marriage campaign for example, "education was considered the means to secure better matrimonial prospects and manage traditional household roles, rather than to empower women to be financially independent".[59] By contrast, attitudes relating to gender roles and relations were found to be much harder to shift, reflecting the degree to which gender inequality is ingrained in communities where child marriage is practiced.

While findings from the meta-synthesis demonstrate that social norms programming can have a significant effect on participants' knowledge and (reported) attitudes, evidence also suggests that reported attitudes do not always reflect substantive or meaningful change. For instance, an evaluation of the *It's Her Turn* programme in Nepal cited numerous examples of respondents professing to support gender equality and then proceeding to share discriminatory views. It concluded that: "there seems to be a general acceptance that (gender) discrimination is bad and equality is good, but this has not yet had a significant impact on gender norms."[60] This finding may reflect a tendency for research participants to repeat familiar messaging around gender norms that doesn't reflect their authentic attitudes and views, effectively telling researchers or evaluators what they want to hear. It may also reflect the fact that social norms, particularly those around gender roles, are deeply entrenched; an individual's willingness to explore new ideas may not immediately result in a fundamental change in perspectives; and certain members of the communities receiving interventions may be slower to adapt their perspectives than others, limiting the extent to which the effects of norms change interventions can be captured in relatively short-term evaluations. The evaluation of the *Samata* intervention noted that "norm change happens in stages – first among those most ready for change, and later among those less ready for change who may only change during subsequent programmes. Thus, a (randomised control) trial may capture those girls and families who are most ready for change but miss those who were brought to a higher level of readiness for change."[61]

Finally, a number of studies found that significant changes in attitudes and norms had occurred over time in both intervention and control communities, meaning these changes could not be attributed to social norms interventions.[62] These studies provided a number of explanations for this, including that messages, information and ideas may have been shared across communities, resulting in 'spill-over effects' to non-intervention locations.[63] Such findings may also reflect the presence of other interventions aimed at changing social norms or preventing child marriage, which led to similar changes in control communities.[64] Finally, as one study observed, social norms change interventions are merely one factor contributing to an ongoing process of normative change which is complex and dynamic; they may play a role in influencing change, but simply as a contributing factor in a process driven by other causes.[65]

Target groups for social norms change

Findings from the meta-synthesis also provide insight into the question of who social norms change programmes should target. Several studies emphasised the importance of casting the net widely, to ensure that stakeholders with decision-making power in relation to marriage are engaged; in the South Asian context, this is typically parents, as well as wider communities. Failing to do so can undermine the effectiveness of norms

change interventions in preventing child marriage, as illustrated by findings from an evaluation of the *Samata* programme in Karnataka, India:

"The qualitative data provides important insights in terms of programme implementation and reveals the pivotal role that families play in decision making about marriage and education for their daughters…Following a mid-line programme review (2016), we've focused our efforts on engaging with parents/carers, but this was likely too late in the study to have had an impact. Based on our experience, we would recommend future programmes focus more intensely on working with family members in the first instance and start when girls are younger (pre-menarche)."[66]

The *Samata* experience reinforces the importance of considering the dynamics around decisions on marriage timing when designing social norms change interventions. This is supported by findings from other studies, which concluded that targeting decision makers, including parents and caretakers as well as community level authorities, is key to achieving outcomes. In contexts where men are the dominant decision-makers, this implies focusing norms change interventions on men and boys. Yet evidence suggests that simply focusing on the most influential decision-makers may not always be the most effective strategy, particularly given that women's information and beliefs have been shown to be more responsive to interventions.[67]

A cluster-randomised control trial of an entertainment intervention aimed at delaying marriage of adolescents in Pakistan explores the question of how social norms change interventions influence different stakeholders and the implications for marriage outcomes, with particular insights for targeting.[68] The intervention consisted of mobile cinema screenings of a street-theatre performance, developed by local NGOs and performed by actors, followed by facilitated group discussions. The study compared results from three intervention arms, one targeting men, a second targeting women and a third targeting both men and women, to a control. It found that targeting the intervention at men only significantly reduced the likelihood of child marriage for girls in intervention households.[69] The male and female arm produced the same results at a comparable magnitude, while the female only arm was found to have no significant impact on child marriages in intervention households.[70] This suggests that social norms that place males as the decision-makers in households may limit the extent to which female-focused norms change interventions can lead to changes in decision-making relating to child marriage. Meanwhile, the study found that targeting men does not lead to a sustained reduction in child marriages at the *village* level, but that either targeting men and women jointly or targeting women alone leads to a decrease in the probability of observing a girl child marriage at the village level. Further evidence from the study provides insight into the dynamics behind these results, which involve spillovers between fathers and mothers and between women and the community. For instance, while fathers were inclined to update their beliefs about the private returns to delaying their daughter's marriage, such as 'improved spouse quality', mothers were also influenced by social returns, or a concern for the attitudes towards child marriage of other men and women in the community. Interestingly, fathers were also found to update their beliefs about community members' attitudes towards delaying marriage when treated jointly with their spouse. While fathers are the dominant decision-makers at household level, mothers in the joint treatment arm were found to become more involved in decision making, resulting in both delayed marriage outcomes and long-term attitudinal change.

It is worth noting that an unintended consequence of this intervention was that mothers in the joint treatment arm who were highly involved in decision-making experienced an increase in physical violence perpetrated by their spouse at endline. As the study observes, "this is consistent with a mechanism in which fathers and mothers engage in substantial renegotiation over adolescents' marriage, with some conflict, in the female + male arm".[71] This highlights an important consideration when designing and implementing social norms interventions which seek to shift attitudes when engaging both mothers and partners in order to impact decision-making relating to child marriage.

While the dynamics around how attitudes and behaviours change are context specific, the Cassidy study demonstrates the complexity of the pathways through which social norms interventions influence outcomes, reinforcing the value of engaging with multiple stakeholders. A number of other studies reached similar conclusions, emphasising that failing to engage the community is likely to undermine outcomes. Even in cases where parents wish to deviate from a dominant normative framework around marriage timing, powerful rational incentives, such as dowry payments or match quality, are likely to pressure them towards child marriage. This dynamic can create a cycle in which norms are highly resistant to change. The Cassidy study highlights the importance of engaging decision makers, but also demonstrates how interventions targeting women can play a crucial role in coordinating a shift in norms at the community level.

Approaches to social norms programming: good practice and emerging challenges

This section discusses evidence on the effectiveness of different approaches to social norms change. It presents good practice examples that emerge from the evidence, as well as barriers and challenges which can undermine effectiveness, and considers why some interventions were found to be more effective than others.

Different modalities for norms change: Effective approaches for engagement

Given the diversity of programming approaches across included studies, as well as the diversity of the contexts in which they were implemented, it is not possible to draw generalisable conclusions about the effectiveness of particular modalities for social norms change. Findings from the meta-synthesis do provide insight into the strengths and limitations of different approaches, however. For instance, while media campaigns were found to be an effective strategy for influencing social norms and ultimately marriage outcomes[72], evidence suggests that they often only achieve low levels of exposure and engagement, which limits their effectiveness.[73] On the other hand, while sensitisation and community engagement approaches are more intensive, they tend to have more limited reach.

Perhaps the most useful evidence on the comparative value of different modalities comes from an impact evaluation of Breakthrough's Early Marriage Campaign in the Indian states of Jharkhand and Bihar, which included diverse modalities for social norms change, including a mass media campaign, sensitisation and training, and a community mobilisation and interactive media component. The evaluation compared the outcomes between four groups: communities receiving the full package of interventions; communities receiving training and mass media components; communities receiving mobilisation and mass media components; communities receiving only the mass media component; and a control. While a range of outcomes were considered across the five arms, and these were mixed in some areas, findings suggest that the full package was the most effective approach in achieving change in both attitudes and child marriage practices. The study concludes that, "a multi-pronged, multi-stakeholder focused and comprehensive intervention that reinforces messages at different segments of the society… has potential to bring change in areas influenced by sticky social norms like early marriage".[74]

Indeed, while findings from the meta-synthesis demonstrate the advantages of intensive approaches, they also highlight the added value of more 'shallow' forms of engagement in supporting processes of normative change through knowledge transfer to 'indirect beneficiaries'. For instance, an evaluation of the *It's Her Turn* programme in Nepal, which involved the delivery of an intensive training package to adolescent girls through trained mentors in the local community, including health, safety and leadership skill development, observed that project materials were an effective vehicle for sharing project messages.[76] According to the evaluation, the most common way in which knowledge from the training was shared with non-participants was through the literature provided by the project. Similarly, girls who participated in the training were given bags decorated with the Her Turn logo, to promote visibility of the intervention, which were found to promote knowledge sharing by sparking

conversations about the content of the training. According to the evaluation, "not every instance of knowledge change resulted in an impact on the other stakeholder… however there is evidence of knowledge transfer resulting in a change in behaviour in all Village Development Committees surveyed."[76] These findings suggest that social norms programming can benefit from approaches that prioritise breadth and depth.

Findings from the meta-synthesis also highlight the importance of a sensitive approach to community-based interventions to reduce resistance from communities and lend legitimacy to messaging.[77] This is likely to involve engaging with or even directly involving local authorities in programming. As an evaluation of the A*fghan Women's Leadership Initiative* observed, "the strategy of acknowledging that the "messenger matters" resulted in partnerships with mullahs, and other religious leaders, and community leaders, which in turn translated into community / peer acceptance".[78] The *It's Her Turn* evaluation, as well as several other studies included in the meta-synthesis, described examples where social norms interventions had served to 'activate' local actors and authorities with a role in preventing child marriage, such as the 'Girls Support Committees' in It's Her Turn communities, which were peer-led by programme beneficiaries.[79]

A number of studies also observed that utilising existing community-based institutions, such as schools, youth groups, or community centres, to deliver interventions can be an effective way to mobilise communities, ensure acceptance of interventions and lend legitimacy to messaging, while also promoting the efficiency and sustainability of programming. Yet doing so may risk undermining the elements of programming that seek to transform power relations; it is important to ensure that such an approach doesn't unduly influence the content of interventions aimed at normative change.

Developing effective messaging for social norms change

Meta-synthesis findings highlight the importance of crafting messages sensitively, to ensure that communities are receptive and mitigate the risk of encountering resistance and push-back. Social norms change can be perceived as threatening existing value systems or ways of life, or infringing on private, family matters, and several studies identified cases where programme staff encountered verbal threats and even physical violence.[80] An evaluation of the *Afghan Women's Leadership Initiative*, which encountered particularly strong push-back from leaders and communities, undertook a content analysis to determine which messaging strategies for communicating the harmful effects of child marriage were most effective. The analysis concluded that effective messages tended to draw on four themes: physical (maternal) health, mental health, building a future (or economic gains), and messaging from religion or faith that aligns with the aims of the programme (e.g. through religious references from Holy Quran).[81]

It is important to consider the potential unintended consequences of messaging approaches which may inadvertently reinforce discriminatory gender norms, particularly when they are crafted to be perceived as acceptable by the communities where these norms exist. Indeed, a number of studies also identified instances where social norms messaging had been misapplied or misunderstood, highlighting the need for a sensitive and responsive approach to implementing social norms programming. For instance, the *It's Her Turn* evaluation found that while in some programme sites the intervention (which included messaging around child marriage and the harm it can cause) had resulted in fewer barriers between girls and boys, in other sites these barriers had been reinforced.[82] The evaluation quotes a respondent who told researchers that:

> **"Before girls used to spend most of the time playing with boys but after training this act has been less… Now girls know that after menstruation if they take wrong move with boys they can get pregnant, or other unexpected things can happen, so nowadays they maintain their distance with boys."** [83]

As the evaluation concludes, "depending on the way the subjects are taught and the existing preconditions in the villages, the same training can be interpreted in different ways. To minimise the unexpected negative impacts, it must be ensured

that the training does not accidentally create fear and misunderstanding between the sexes or exacerbate existing misunderstandings that may exist."[84] In another concerning example, authorities reacted to *It's Her Turn* programme messaging about stopping child marriage by stating that they would not allow married girls to attend school, a concerning outcome that undermines *It's Her Turn's* goal of promoting girls' access to education.

Another programme that engaged with social norms, *Her Choice,* implemented in Bangladesh, Nepal and Pakistan, also highlights the importance of considering how messages may be received or interpreted in a particular context. As part of their strategy to mobilise communities to transform social norms, the intervention included messaging and community dialogue on, for example, the negative effects of child marriage and female genital mutilation/cutting, and the importance of girls' education. A young man in Pakistan reflected on how 'men dominate in our society, [and] so should help our girls to acquire education.' The notion of young men now more or better 'protecting' girls, suggests that young men who had taken part in *Her Choice* activities felt an increased sense of responsibility for the welfare of young women around them. It would be important to build on these initial, important steps and unpack ideas concerning perceived needs to 'protect' and 'help' girls, and the underpinning notion that women require men's protection. The latter entrenches the idea of women as weak, passive and needy, and men as strong, active and ultimately, the decision-makers and leaders, which are exactly the kinds of notions that programmes such as *Her Choice* seek to tackle.[85]

These examples highlight the complexity and interconnectedness of social norms surrounding gender, marriage, sexuality and education. It is of course impossible for programming interventions to transform these normative frameworks overnight, highlighting the need for sensitive programming and long-term engagement to ensure that norms change interventions do not inadvertently reinforce problematic attitudes or behaviours, and aim for a sustained, community-owned modality that lives on after the course of intervention has ended.

Time frame for social norms interventions

> **"We need more time to improve the situation. It felt like we were in the middle of the project [when it ended]. Creating awareness, changing attitudes is not so easy."**
>
> – Former Plan Regional Manager[86]

Finally, a number of studies emphasised that social norms change is a long-term endeavour that requires sustained commitment over several years. While a discreet intervention should be viewed as one factor contributing to this process, it is necessary for interventions to be sufficiently long to have a meaningful impact, particularly on marriage outcomes. As one evaluation aptly concluded, "… change in gender norms take time and programmes must continue for empirical change [to occur]. Our article charts a catalytic process that has begun to spark important changes in gender norms in Bangladesh. It is imperative that the momentum is sustained and the shifts in gender norms and how they impact girls, boys, women and men are assessed over time."[87]

Some quantitative evidence seems to confirm these findings. For instance, the *"Marriage: No Child's Play" (MNCP)* intervention in India was implemented over a four year period, and while the improvements in knowledge related to child marriage and sexual and reproductive health were detected at midline (conducted in the programme's second year), change in child marriage outcomes that are attributable to the programme were not detected until the endline, conducted towards the end of the programme's fourth and final year.[88] While there may be a number of explanations for this result, it is possible that there was simply not enough time for changes in knowledge (and other programme outcomes) to translate into different marriage outcomes for girls.

6.3 Income and economic strengthening

Summary

Overall, there is promise in the implementation of income and economic strengthening interventions and the role they can play in the prevention of child marriage. Meta-analysis findings showed income and economic strengthening interventions (such as CCTs and interventions supporting adolescent girls' labour force participation) to significantly reduce child marriage rates. However, notably, CCTs that do not have a marriage-delay condition (rather, only have a condition for girls to remain in education), did not lead to a significant reduction in child marriage.

Findings demonstrated that the interplay of economic pressures and other drivers of child marriage (particularly social norms) are complex and multi-faceted, and these factors play a role in the effectiveness of economic strengthening interventions on child marriage outcomes. In certain contexts, the alleviation of financial hardship through cash transfers may lead to unintended consequences related to persisting early marriage, such as the use of cash transfers as dowry.

The income and economic strengthening interventions that demonstrate the most success are those that were able to increase girls' human capital alongside poverty alleviation, such as through improving the acceptability of girls' participation in the labour market, building vocational skills and financial literacy, and attaching girl-centred conditions to cash transfer receipts to encourage higher enrolment and retention rates among girls and improve attainment and education levels. Findings demonstrate that taking a comprehensive approach when implementing income and economic strengthening initiatives may enhance their effectiveness. This can be achieved by addressing social norms, targeting dowry practices and including the condition of the beneficiary remaining unmarried under the age of 18 for receipt of financial support, as well as designing interventions to ensure the value of girls and their real or potential capital is recognised.

6.3.1 Overview

Interventions aiming to achieve income and economic strengthening are based on the evidence that poverty is a key driver of child marriage in South Asia.[89] Improving families' and girls' economic stability can lessen the impact of financial hardship and reduce the number of families resorting to child marriage as a negative coping mechanism. Within income and economic strengthening (IES) interventions, conditional economic support may be used to create a financial incentive for families to delay girls' marriage through the requirement of certain conditions, such as school enrolment or remaining unmarried, for receipt of transfer.

Common approaches to economic strengthening include **unconditional cash transfers** (UCTs) and **conditional cash transfers** (CCTs), some of which are provided to households with girls (e.g. Punjab Female School Stipend Programme (FSSP) in Pakistan), while others are transferred directly to girls (e.g. Female School Stipend Programme (FSSP) in Bangladesh). Other interventions seek to enable employment opportunities for girls, supporting girls to generate income and access the labour market, through skills training, recruitment and norms change around the acceptability of girls' participation in the labour market. Interventions primarily target groups who are identified as at risk of child marriage or associated conditions (e.g. high poverty, out

of school children, rural areas, urban slums etc.). Child marriage prevention is often a secondary outcome of income and economic strengthening interventions, with the primary aims often being for girls to remain in education, build skills, gain financial literacy or increase their earning potential. Note that this analysis does not examine inclusion and exclusion criteria for beneficiaries, which is an important programming consideration for ethical implementation and risks associated with CCTs.

6.3.2 Availability of evidence for income and economic strengthening interventions

There was a considerable amount of evidence examining the effectiveness of income and economic strengthening interventions for child marriage prevention, the majority of which examined programmes implemented in India, Bangladesh and Pakistan. Generally, the income and economic strengthening interventions identified were not cross-cutting in nature, tending to focus solely on tackling the burden of financial hardship, a key driver of child marriage. However, several programmes (e.g. Gandhi Scheme for Empowerment of Adolescent Girls (SABLA) – Landesa in West Bengal, India) were multifaceted, addressing economic drivers of child marriage alongside other key mechanisms such as empowerment, social norms change and education.

The income and economic strengthening interventions largely corresponded to the modalities outlined above, with CCTs being the most commonly reported intervention modality. CCT schemes implemented varying conditions for receipt of payment, such as delaying a girl's marriage until the age of 18 (e.g. Apni Beti Apna Dhan, India) or education-related conditions such as a certain attendance rate, or meeting a particular proficiency in exams (e.g. Female School Stipend Program (FSSP), Bangladesh). Some programs provided an additional non-cash incentive, such as the Scheme for Adolescent Girls – Kanyashree Prakalpa (SAG KP) in India which addressed nutritional needs through take-home rations and supplements. Others provided in-kind transfers (e.g. the Kanyashree Kontha+ programme in Bangladesh provided cooking oil to families of unmarried adolescent girls aged 15-17). Payment schedules and the duration of transfers vary per scheme, including short-term payments, regular or annual payments to one-off payments upon proof of girls reaching 18 years and remaining unmarried (e.g. Apni Beti Apna Dhan, India).[90] Due to the high levels of variability between CCT components such as frequency of transfer, transfer amount, and context in which the various schemes were implemented, it is difficult to attribute the effectiveness of different programmes to these variables. Some cash transfer programmes, known as 'Cash Plus' programmes, are accompanied by another intervention element, such as health, education or life skills.

There were also a number of income and economic strengthening interventions that did not include the use of CCTs (hereby referred to as 'non-CCT income and economic strengthening interventions'). Commonly occurring non-CCT income and economic strengthening (IES) interventions implemented modalities such as the provision of labour opportunities, education or training to support income generation, and unconditional cash transfers (UCTs). Other interventions aimed at alleviating financial barriers which affect child marriage outcomes included the free tuition policy in Bangladesh, and the *Tipping Point* intervention (also in Bangladesh) which included girls' participation in their Village Savings and Loan Association.

In total, 38 studies were categorised as having an income and economic strengthening intervention component and 17 of these had sufficient data to be included in the meta-analysis. Relative to other intervention typologies, the CCT interventions provided a robust evidence base, with a higher proportion of studies meeting the rigorous inclusion criteria for the meta-analysis. For CCT interventions, it was possible to extract 20 effect sizes from 14 studies. In contrast, the quality of evidence was less robust for non-CCT income and economic strengthening interventions; only three studies could be included in the meta-analysis (yielding five effect sizes). Therefore, the majority of evidence relating to the effectiveness of non-CCT income and economic strengthening interventions is drawn from the meta-synthesis.

Please note that, for CCT intervention studies, there was a split in the type of child marriage outcome measures that were reported. Some studies used a dichotomous measure for child marriage (i.e. the difference in likelihood of being married under 18 between the intervention and control groups), consistent with the data for other typologies (ten effect sizes from eight studies). However, some CCT studies reported the child marriage effect as a continuous measure of age at marriage (10 effect sizes from six studies). Therefore, two separate meta-analyses were conducted using these two different types of outcome measure, meaning the presentation of findings in Table 6 differs slightly to the findings reported in other sections.

6.3.3 Effectiveness of income and economic strengthening interventions

Meta-analysis

CCT interventions

Meta-analysis results indicate that CCTs can be effective in preventing child marriage. The pooled effect size for CCT interventions based on the 10 **dichotomous effect sizes** from eight studies was -0.0477* (p=0.01), meaning that child marriage reduced by a significant 4.77 percentage points in the intervention group compared to the control group (see Table 6). The results from the 10 **continuous effect sizes** based on six studies indicate that receipt of CCTs increases the age of marriage by 0.7817 years (statistically significant at p=0.01), meaning that marriage was delayed in the intervention groups by 9 months compared to those who did not receive the intervention. Together, findings indicate that CCT interventions are effective in reducing child marriage rates.

Subgroup analyses were run based on the conditionality of the cash transfer within the dichotomous outcome studies, with four studies only requiring girls' school attendance to be eligible for the transfer, two studies with the requirement to remain unmarried until eighteen, and two studies with both school and marriage conditions. The results demonstrated a statistically insignificant reduction of 3.29 percentage points for CCTs based solely on school attendance, whilst the pooled effect for CCTs that had a marriage condition attached to schooling condition had a statistically significant reduction of 7.30* percentage points. A subgroup analysis was also run for the seven effect sizes from CCTs with continuous outcomes that were conditional on the recipient both attending school and remaining unmarried up until age 18. Results demonstrated significant increase in age of marriage by 1.04** years in the intervention groups, which is higher than the change for all pooled CCTs with continuous outcome measurement.

Together, these findings suggest that incentivising school attendance alone through CCTs may not be sufficient to elicit a significant preventative effect on child marriage. However, having the requirement of girls remaining unmarried below the age of 18 may result in a higher reduction in child marriage, and CCTs with both an education and marriage age requirement may be particularly effective.

Table 6: CCT meta-analysis and subgroup analysis results.[91]

Modality	n (effect sizes)	n (studies)	Effect size estimate	SE	z-value	p-value	95% CI
CCT (dichotomous, all)	**10**	**8**	**-0.0477***	**0.0191**	**-2.5021**	**0.0123**	**[-0.0851, -0.0103]**
CCT (continuous, all)	**10**	**6**	**0.7817***	**0.3099**	**2.5222**	**0.0117**	**[0.1742, 1.3891]**
Specific modality combinations							
CCT (dichotomous, school)	4	3	-0.0329	0.0235	-1.4031	0.1606	[-0.0790, 0.0131]
CCT (dichotomous, school + marriage OR marriage only requirement)	4	4	-0.0730*	0.0344	-2.1218	0.0339	[-0.1405, -0.0056]
CCT (continuous, school + marriage)	7	5	1.0366**	0.3990	2.5978	0.0094	[0.2545, 1.8187]

Non-CCT IES interventions

The meta-analysis provides concerning results for non-CCT income and economic strengthening interventions, indicating that such interventions have the potential for an adverse effect in increasing child marriage. The pooled effect size of all interventions with a non-CCT income and economic strengthening component (based on five effect sizes from three studies) was 0.0247***, meaning that there was a statistically significant increase in child marriage for participants that had been exposed to the intervention compared to those in the control group (a 2.47 percentage point increase; see Table 7).

At an individual level, the only study included in the meta-analysis to demonstrate decrease in child marriage rates was the Skills Training for Advancing Resources (STAR) intervention implemented by the NGO, BRAC Bangladesh, which happened to be the only combination intervention in this group (income and economic strengthening combined with empowerment).[92] Unsurprisingly, the subgroup analysis showed a stronger increase in child marriage rates when removing this multicomponent intervention (i.e. removal of the effective intervention strengthened the pooled adverse outcome effect; Table 7). The interventions with an increase in child marriage rates were Nepal's social pension UCT and the National Rural Employment Guarantee Scheme (NREGS) in India, which were targeted at parents and households rather than girls, suggesting differential impacts based on the beneficiaries targeted.

However, the findings relating to the non-CCT income and economic strengthening interventions should be interpreted with caution, given the small number of studies included in the meta-analysis relative to the total evidence available when including meta-synthesis studies, and the high diversity between the few interventions that were included. The majority of studies examining non-CCT income and economic strengthening interventions were not eligible for inclusion in the meta-analysis, and meta-synthesis results suggest that these interventions can result in positive outcomes and support the prevention of child marriage.

Meta-synthesis

Several interventions targeting income and economic strengthening which were included in the meta-synthesis but did not have sufficient data to be included in the meta-analysis were also shown to be effective in reducing child marriage rates, such as an intervention supporting girls' recruitment into India's Business Processing Outsourcing sector (referred here-on-out as the BPO intervention).[94] Moreover, the *SABLA-Landesa* scheme, also in India, which sensitised girls on land rights, asset creation and equal inheritance, as well as providing land-based livelihood skills training, found a delay of marriage of one and a half years for participating girls.[95]

6.3.4 How different approaches to IES interventions can prevent child marriage

There are multiple channels through which income and economic strengthening interventions may have a preventative effect on child marriage. The evidence on IES interventions provides a relatively straightforward narrative, whereby the modality of intervention is the direct mechanism for child marriage prevention. However, other themes relating to how and why intervention effects were (or were not) successful are also outlined, as well as providing examples of the reasons for unintended consequences. These themes relate to positive impacts through increasing girls' social capital and supporting girls' labour market participation, the interplay between empowerment and IES, and barriers to effectiveness, such as prevailing social norms.

Table 7: Non-CCT income and economic strengthening meta-analysis and subgroup analysis results.[93]

Intervention combination	n (effect sizes)	n (studies)	Effect size estimate	SE	z-value	p-value	95% CI
All income non-CCT	**5**	**3**	**0.0247*** **	**0.0064**	**3.8830**	**0.0001**	**[0.0122, 0.0371]**
Distinct typology							
Income non-CCT (standalone)	4	2	0.0266**	0.0061	4.3473	<.0001	[0.0146, 0.0385]

Poverty alleviation

Alleviating poverty is one of the key mechanisms through which income and economic strengthening initiatives are expected to be effective in preventing child marriage. This is based on evidence that shows poverty to be a key driver of child marriage. Whilst all income and economic strengthening interventions discussed in this section (e.g. CCTs or labour market opportunities for girls) may have a direct or indirect impact on poverty alleviation, unconditional cash transfers (UCTs) are the only modality that focus on poverty alleviation alone. UCTs involve the provision of payment without any conditions beyond meeting eligibility criteria, **assuming** these transfers have the potential to reduce child marriage directly by alleviating financial pressure on families. However, the limited evidence from the two UCT studies included in this synthesis suggests that UCTs may not be effective in reducing child marriage rates. For example, the evaluation of the effects of Nepal's social pension programme on child marriage outcomes found that this scheme inadvertently accelerates the marriage of adolescent girls in households with eligible elderly recipients.[96] This indicates that general attempts to alleviate poverty may not be sufficient on their own to prevent child marriage, suggesting that other drivers affect the impact that the provision of financial support can have on child marriage outcomes. Notably, this study hypothesised that the elderly household members receiving the pension may have been using this money for dowry purposes, a theme that is explored further below. Conversely, the effectiveness of CCTs with the condition of preventing child marriage (as evidenced in the meta-analysis) shows that financial incentives are sufficient to reduce child marriage when the conditionality for receipt provides a direct message with the aims of the programme, suggesting that messaging around income and economic strengthening interventions is important alongside the poverty reduction function when the aim of the CCT is to prevent child marriage.

Economic advancement opportunities for girls

One mechanism through which IES interventions can work to prevent child marriage and increase girls' human capital is through providing **economic advancement opportunities** and **alternative pathways to adulthood**. Again, these mechanisms are intrinsically linked to increasing the human capital of girls.

Learning to earning, including skills building opportunities: vocational or livelihoods skills training have been evidenced as effective means to delay marriage through girls' economic advancement. For example, the *SABLA-Landesa* scheme in India provided land-based livelihoods training, which resulted in girls' increased engagement in productive work and increased financial independence, and delayed marriage by 1.5 years.[97] Other interventions improved child marriage rates through vocational training that opened employment opportunities for girls. The *GIRLS Inspire* programme, implemented in Bangladesh and Pakistan, aimed to improve girls' financial literacy, facilitated access to financial resources, and improved girls' learning environments to support participation in vocational training (as well as providing empowerment components, such as life skills training and safe spaces). The intervention resulted in higher employment rates among women and girls[98], enabled girls to start their own businesses, and supported the prevention of more than 1,000 child marriages. Non-formal education and training to support income generation are often integrated into life skills training packages (which, collectively can be effective in preventing child marriage; see findings relating to girls' empowerment, section 6.5).

However, it has been recognised that simply providing training alone may not be sufficient to ensure girls' economic advancement and prevent child marriage, if there are no concrete employment opportunities available to girls following the training.[99] Interventions, such as *Kishori Abhijan* and BRAC STAR (both Bangladesh-based programmes), included training to support income generation in the form of on-the-job training (i.e. providing both training and direct employment opportunities), with these interventions successfully reducing child marriage.

Several interventions have been shown to be effective in reducing child marriage rates by **increasing girls' labour force participation**.

In some cases, the general availability of labour market opportunities in the community has been evaluated as an intervention itself, whereas, in other cases, interventions have directly worked to recruit and support girls' access to such opportunities. A study on the recruitment drive for young women in India's BPO sector saw a significant decrease in the likelihood of marriage, with participants choosing instead to enter the workforce or continue education.[100]

The acceptability and encouragement of labour market opportunities for girls in a specific industry in the local area also appears to reduce child marriage rates and increase the likelihood of girls in employment out of the home in other industries. A study of manufacturing growth in the garments industry in Bangladesh examined outcomes for girls living in villages close to garment factories (labelled 'garments-proximate villages', i.e. where there are high levels of employment opportunities for females in the garment industry). Findings showed a delay in marriage and childbirth for girls in these villages, as well as an increase in the likelihood of girls being employed outside the home (in any industry).[101] These findings suggest that the availability of labour opportunities in a specific market in the local area may support girls' access to wider economic opportunities, potentially due to female employment being somewhat normalised in these locations; this highlights an interesting link between income and economic strengthening and social norms, which is explored further below.

Interestingly, girls from households in which a family member was employed in the garment industry also had higher levels of education. These findings were interpreted within the study to indicate that even the potential of labour opportunities is sufficient to keep girls in school and delay their marriage.[102] This further supports the concept that, where there is a higher or more visible potential for girls' human capital to increase, child marriage can be delayed. However, it may also be interpreted that other factors impact this finding, such as the rise in household income allowing employed family members to keep daughters in school and invest in their education.

Factors supporting economic advancement and child marriage prevention

There is evidence that an increase in female labour force participation **increases parents' investment in girls and value of girls' human capital**, which can be a further buffer against child marriage. The *business process outsourcing (BPO) sector initiative* in India (which saw a significant reduction in child marriage rates) observed that the cohort of 15-21 year old girls and women from treatment villages were more likely to enrol in computer/English language courses at fee-paying institutions (for which it is presumed parents paid), whilst younger school-aged girls had increased school enrolment and a greater body mass index, indicating improved nutrition.[103] This demonstrates parents' increased willingness to invest in girls' human capital in anticipation of future labour market returns, through better investment in schooling and health/nutrition, and increased likelihood of delaying daughters' marriages.

These effects are also indicative that supporting girls' labour market participation can support **norms change in relation to the acceptability of girls' participation in the labour market,** which further increases girls' ability to participate in employment, gain more financial independence, and delay child marriage. One study assessing the effectiveness of an intervention supporting girls' employment in a textile mill in India (which saw significant reductions in child marriage rates) showed that attitudes towards girls' value improved, as families recognised that girls are able to contribute to their households' overall wealth.[104] Linked to the general theme of such interventions strengthening girls' human capital, findings suggest girls' participation in the labour market can support the prevention of child marriage through a shift in norms, whereby girls are seen as less of a 'financial burden' and more as active contributors to households . Respondents also mentioned that engaging in this employment provided girls with the benefits of exposure to life outside of the village, allowing them to form new networks at the workplace and increase future opportunities outside of their village.[105]

Another pathway through which IES interventions may reduce child marriage is through improving girls' **empowerment and aspirations**. Education-focused CCTs that support girls' access to education may develop girls' aspirations for their future, including higher education, careers and autonomous marriage decisions. A study carried out from the FSSP in Bangladesh (which saw a significant reduction in child marriage rates) observed a higher level of long-term self-reported empowerment amongst girls who had received five years of the cash transfer in comparison to the control group. These girls and young women were also more likely to have a bank account and be employed.[106] As girls gain access to educational and financial resources and become more empowered, they may gain confidence to **challenge social and gender norms** that perpetuate child marriage. One evaluation of the *Kanyashree Prakalpa* programme in West Bengal, India, measured changes related to intra-household bargaining power in resisting family pressure for child marriage; the cash transfer group reported significantly higher success in resisting family pressures for marriage compared to the control group.[107]

Barriers to effective IES interventions

One of the barriers to the effectiveness of certain IES interventions may be the rationale / driver of child marriage that the intervention seeks to address. The rationale behind CCT programmes including an education-related condition is that this will delay marriage through i**ncreasing educational opportunities** for girls, encouraging families to prioritise the education of their daughters over child marriage. By reducing the financial barriers to education, this, theoretically, should offset costs to education. However, as indicated in the meta-analysis findings, this condition alone may not be the most effective means to reduce child marriage rates. Additionally, findings relating to education interventions suggest that supporting education *enrolment* alone may have limited effects on child marriage prevention (see section 6.6). This may be one reason why these interventions do not see such positive effects.

The ineffectiveness of CCTs with a condition to remain in education only (with no marriage delay condition) may also reflect the limitation that these interventions do not place any importance on delaying marriage. Education CCTs permit parents to arrange marriages for their daughter and continue to keep their daughter in education for the receipt of the incentive; in other words, the education incentive increases the human capital of girls, without the requirement for girls to remain unmarried. A lack of focus on child marriage prevention as the condition of incentive may **prevent a shift in attitudes** in terms of perceived importance of child marriage prevention. Therefore, interventions that provide cash incentives for education participation and seek to address norms relating to child marriage prevention may be more effective. Supporting this argument, in the *Afghan Women's Leadership Initiative (AWLI)* Afghanistan programme, UCTs were provided to reduce education costs for girls, alongside life skills training and initiatives to shift social norms in the community. Findings showed that recipients of the UCTs generally allocated the funds to education expenses, and results provided examples of child marriages being prevented.[108] Unfortunately, there is insufficient evidence further exploring the impact of education CCTs when accompanied by norms change interventions.

The framing of education CCTs and their effectiveness: Interestingly, findings suggest that education CCTs can be effective, depending on how the intervention is framed. A study examining education CCTs in Bangladesh found that, when recipients were informed that non-attendance would result in a loss of money (i.e. the 'loss-framing' condition), girls were more likely to continue attending school and less likely to be married, compared to when they were informed that greater attendance would increase pay (i.e. the 'gain-framing' conditions).[109] These findings suggest that families are more likely to abide by the conditions and ensure their daughter's school attendance when they perceive the risk that they will lose what is otherwise a 'guaranteed' income, compared to when they have the perception that attendance will lead to 'bonus' income. This highlights a complex dynamic where perceptions relating to the purpose and benefit of a payment can influence the extent to which it is effective for supporting girls' education and delaying child marriage.

Linked to the importance of social norms, several studies identified **dowry practices** as a driver of the unexpected negative consequences of IES interventions increasing child marriage. *Nepal's Old Age Allowance* on adolescent life outcomes

demonstrated an increased risk of child marriage in households receiving the allowance, with a stronger effect observed where the only eligible recipient is an elder male.[110] It was stipulated that households may exploit the pension funds to secure loans for dowry and marriage expenses, with men being particularly well placed to determine the use of the available funds for dowry and lead decision-making for girls' marriage.[111] Findings from the *National Rural Employment Guarantee Scheme (NREGS)* in India further support this; although female employment rates increased with the scheme, participation in *NREGS* was associated with an increase in child marriage rates, which was again attributed to the use of increased household income for dowry purposes, as all members of a household participating in the intervention were eligible for employment under the scheme.[112]

Notably, even where CCTs were effective in preventing child marriage, there was evidence of an increase in the proportion of beneficiaries of such CCTs marrying during their 18th year following the intervention.[113] There was suggestive evidence that CCT funds are often utilized by parents to cover dowry expenses and hasten their daughters' marriages, as beneficiary families tend to marry their daughters in close succession following the receipt of the cash transfer, indicating the instrumental use of cash transfers for marriage purposes. These findings highlight the need for interventions providing cash incentives to also address entrenched social behaviours like dowry practices and the belief that girls should be married off as early as possible, and to have a further reaching long-term impact on gender norms. However, further research is also needed to determine a concrete link between unconditional financial incentives and dowry.

6.4 Education and learning outcomes

Summary

The meta-analysis indicates that education interventions provide a significant contribution to the prevention of child marriage. Although there are too few studies to draw definitive conclusions, the available evidence from the meta-analysis indicates that interventions combining education and non-formal learning opportunities with other components have a lower effect size than standalone education interventions, suggesting that combining education interventions with other typologies might not increase the effectiveness of the intervention. In the meta-synthesis, it was difficult to draw out the unique contributions of education elements of multi-component interventions to child marriage prevention.

The narrative of how and why education interventions reduce child marriage are, in general, limited within the included studies; rather, an implicit link between education and marriage prevention is often recognised within intervention development and justification itself. Nonetheless, qualitative and quantitative findings drawn from the meta-synthesis suggest several explanations for how education interventions can contribute to a reduction in child marriage.

Findings suggest that, while participation in education and learning in and of itself can impact child marriage, effects may be stronger if interventions successfully increase girls' academic learning outcomes. Interventions appear to be particularly effective in preventing child marriage where education leads to increased economic opportunities for girls. Some evidence also indicates that education including non-formal learning interventions may support more general empowerment and agency of girls, which supports them to raise their voice against child marriage. The provision of material support and efforts to improve the learning environment appear to be important elements of interventions to support girls' attendance in school, while tutoring and non-formal education support girls' academic attainment; there were examples of each of these modes of intervention leading to the successful prevention of child marriages. Prevailing harmful social norms appear to be a key barrier to successful implementation, improvements in education outcomes, and the prevention of child marriage.

6.4.1 Overview

Existing research demonstrates a strong correlation between girls' participation in education and delayed marriage.[114] This correlation is shown to be bidirectional (i.e. some studies show child marriage predicts school dropout, whilst others show being out of education predicts child marriage). However, as there is evidence to suggest that remaining in education is a protective factor for child marriage, one of the key intended outcomes of the GPECM has been to ensure that girls remain in education.[115] There are several modalities of interventions aiming to prevent child marriage through promoting girls' participation in education, including education reforms, CCTs dependent on school attendance, direct provisions of academic and vocational education and training, and norms change interventions aimed at promoting attitudes which are supportive of girls' education.

Some education modalities overlap with those of other typologies. CCTs with a condition for girls to remain in education can also be regarded as economic strengthening initiatives. In addition, some programmes are described as education interventions, but provide only vocational training to support employment, or in some cases, broader life skills education. While the provision of this training was sometimes framed as supporting the education of girls, particularly for those out of mainstream education (e.g. the GIRLS Inspire Programme)[116], these interventions can also be regarded as economic strengthening or empowerment programmes. To avoid repetition and help ensure consistent and distinct categorisation of interventions, CCTs with a condition of participation in education are addressed in the income and economic strengthening section of the findings. Education / life skills training courses were only included within the analysis of education interventions if they included 'core' academic / educational components (e.g. literacy, mathematics), rather than promoting other knowledge and skills. Findings relating to the effectiveness of life skills and vocational training programmes can be found in the empowerment and economic strengthening, respectively (in addition to the SRH section, where life skills programmes had strong SRH components).

6.4.2 Availability of evidence of the effectiveness of education interventions

Education typology interventions had a relatively low number of eligible studies included in the meta-synthesis. In total, 12 studies with an education component were included in the meta-synthesis, seven of which met the criteria for inclusion in the meta-analysis. These interventions incorporated modalities such as academic tutoring, the promotion of education enrolment and attendance through advocacy and communications, improving education facilities / environments and providing girls with resources to assist their attendance, academic scholarships and free tuition policies. Only three studies examined the effectiveness of a standalone education programme; all other studies assessed multicomponent programmes with an element of education.

While all studies included in the meta-synthesis explored child marriage as an outcome of interventions with an education component, most education interventions examined education participation and attainment as the primary outcome; child marriage was a secondary outcome.

6.4.3 Effectiveness of education interventions in preventing child marriage

Meta-analysis

Meta-analysis findings indicate that education interventions provide a significant contribution to the prevention of child marriage. The pooled effect size of all interventions with an education component was -0.0178*, demonstrating a statistically significant reduction in child marriage in the intervention group compared to the control group by 1.78 percentage points.

Table 8 provides the results for the meta-analysis of all interventions with an education component, in addition to the subgroup analysis. Subgroup analyses indicated that standalone education interventions had a statistically significant effect size of -0.0444***, indicating that interventions focusing only on education reduce child marriage by 4.44 percentage points.

In the grouped typology combinations, *education + any other typology component(s)* interventions demonstrated a statistically significant reduction of 1.14 percentage points.[117] However, the subgroup of interventions which included *education + empowerment + social norms + any other typology* component(s) did not result in a reduction of child marriage rates.

Together, results indicate that standalone education interventions significantly reduce child marriage, and that the integration of other typology components alongside education may not improve results. However, due to the limited evidence base for these interventions, caution should be exercised when interpreting the quantitative results from the meta-analysis.

Meta-synthesis

It was difficult to ascertain the contribution of education components to reductions in child marriage within multicomponent interventions where education arms were not examined in isolation. In addition, as with all interventions, other factors outside of interventions limit the extent to which child marriage outcomes can be directly attributed to (particular) education interventions.[119] Similarly, the *Samata* evaluation highlighted that a number of other initiatives were being implemented in intervention districts at the time of the intervention, specifically noting a range of education initiatives that participants had also received outside of the intervention (including scholarships, exam preparation classes and tutorial classes).[120]

Table 8: Education meta-analysis and subgroup analysis results.[118]

Intervention combination	N (effect size)	n (studies)	Effect size estimate	SE	z-value	p-value	95% CI
All education	**11**	**7**	**-0.0178***	**0.0071**	**-2.5169**	**0.0118**	**[-0.0316, -0.0039]**
Distinct typology							
Education (standalone)	4	3	-0.0444**	0.0160	-2.7701	0.0056	[-0.0758, -0.0130]
Grouped typology combinations							
Education + any other typology component(s)	7	4	-0.0114**	0.0042	-2.7530	0.0059	[-0.0196, -0.0033]
Education + empowerment + social norms + any other typology component(s)	5	3	-0.0081	0.0083	-0.9718	0.3312	[-0.0244, 0.0082]

6.4.4 How education and learning interventions can prevent child marriage

Due to many education and learning intervention evaluations having a primary focus on the outcome of education with child marriage as a secondary outcome, often, the discussion on *how* these interventions contributed to child marriage outcomes was limited. Rather, the theories of change and **rationale for interventions often outlined an implicit link between education and child marriage outcomes** based on existing evidence, and did not tend to explore the mechanisms behind this link in their findings. In addition, there was often limited exploration of the direction of this relationship; in most cases, education and child marriage outcomes were assessed concurrently, meaning there was no longitudinal exploration of this relationship to determine the extent to which the primary outcome of education contributed to child marriage outcomes. Nonetheless, while it was difficult to draw concrete and consistent themes, studies provided examples of how interventions can be (or in some cases are not) effective.

This section explores certain modalities of education intervention that can be effective in preventing child marriage; the role that interventions play in increasing girls' participation in education versus supporting improved academic outcomes and how these approaches differentially impact child marriage outcomes; how girls' empowerment and economic prospects mediate the pathway from interventions to outcome; and barriers to the effectiveness of education interventions, including prevailing social norms.

Supporting education enrolment and retention

The mechanism through which education interventions often seek to prevent child marriage is through **supporting enrolment and school attendance**. Indeed, several interventions showed significant concurrent reductions in child marriage rates and increases in education enrolment and attendance. Based on interventions' ToCs and rationales, there was an implicit understanding that ensuring girls were receiving an education would support the prevention of child marriage. As an example, the *Her Choice* intervention saw a reduction in child marriage rates alongside an increase in enrolment of girls in education in intervention locations in Pakistan and an increase in school attendance rates in Bangladesh and Pakistan. In Nepal, there was a reduction in child marriage rates in Morang and Banke, but no increase in school attendance rates.[121]

The Keeping Girls in School (*KGIS*) intervention in Bangladesh saw a reduced likelihood of child marriage, an increase in the percentage of adolescent in-school girls, and a higher level of retention of girls in school in the intervention group compared to the control group, again indicating co-occurring improvements in education and child marriage outcomes. However, a substantial proportion of girls who were married before the endline (i.e. where the intervention had not been successful in preventing child marriage) reported child marriage as a primary reason for dropout.[122] This emphasises the bidirectional relationship between education and child marriage, and highlights that interventions focused on education may be failing to tackle other factors that underpin child marriage, such as harmful social norms.

Evidence suggests that participation in *formal* education (i.e. enrolment in schools to complete core curricula) is not a necessary mechanism for education interventions to prevent child marriage; informal education (i.e. academic and vocational or life skills lessons outside of school) can also be effective. For example, one of the assumptions of the Improving Adolescent Lives in Pakistan (*IALP*) intervention (which provided non-formal basic education to girls out of school) was that exposure to non-formal education would encourage re-enrolment in formal education (and thus prevent child marriage). However, while the intervention saw a reduction in child marriage rates and increased attendance of girls who were already enrolled in school, there was no increase in the number of girls enrolled in formal education.[123] In addition, a multicomponent SRH and education intervention in India established a peer education scheme, with the hypothesis that this would increase school retention for girls; however, this outcome was not achieved, despite the overall positive outcome of preventing child marriage.[124] This suggests that, while the peer educators played a role in preventing child marriage, it was not through encouraging participation in school, but another mechanism; in this case, likely through impacts related to increasing awareness of and access to SRH (see section 6.6).

COVID-19 saw the particular disruption of education interventions, as schools were forced to close. This provides an important opportunity to assess the extent to which education components of multi-component interventions contribute to child outcomes. Interestingly, although limited, available evidence indicates that interventions continued to have positive outcomes for children, even when education was disrupted. For example, Scheme for Adolescent Girls – Kanyashree Prakalpa (*SAG-KP*) in West Bengal, India, saw a steep reduction in the number of girls it was able to enrol in schools (from 665 in 2019 to 225 and 275 in 2020 and 2021, respectively). The implementation of the intervention was altered, with a greater focus on providing girls with vocational training. There was an apparent increase in the number of child marriages that were prevented throughout this intervention (158 and 181 in 2020 and 2021 respectively, compared to only 109 in 2019).[125] During COVID-19,

while girls' access to mainstream education was disrupted, the KGIS intervention was able to keep more girls enrolled in private tutoring compared to control groups, showing a level of success in adaptation to ensure girls' access to education during the COVID-19 period.[126] Moreover, other adaptations, such as the use of online platforms (WhatsApp, Zoom and Google Meet) and telephone calls, also proved successful in reaching adolescent girls who had access to a mobile phone and internet. In the first lockdown, 1,914 girls were reached through WhatsApp and 2,931 through one-to-one telephone calls, which rose to 5,325 and 6,948, respectively, during the second COVID-19 lockdown.[127] Together, these findings suggest that the benefits of education and learning for preventing child marriage may be linked to improved educational attainment (and related learning and economic prospects) rather than participation in mainstream education per se, explored further below.

Strengthening academic learning outcomes

Some evidence suggests that for education interventions to be more effective in preventing child marriage, they need to improve academic learning outcomes; merely supporting girls to participate in education may not be sufficient. For example, the *Samata* programme increased the proportion of girls who completed secondary school in the Vijayapura district, but there was no change in child marriage. However, girls in the intervention group who sat their secondary exams and those who passed their 10th standard exam were four times less likely to be married than girls who did not sit or pass exams, and were less likely to be married than girls in the control group.[128] This suggests that education attainment (i.e. effective learning) might be the mechanism through which education interventions can reduce the likelihood of child marriage.[129] This finding might be linked to economic empowerment; performing well in school might increase the likelihood that girls will participate in income generating activities, which in turn reduces the likelihood of marriage (see below and section 6.3 for more in relation to links between education and economic empowerment).

Tutoring appears to be an important mode of intervention to improve academic learning performance and prevent child marriage. Academic tutoring for in-school girls was the primary component of the *BALIKA*[130] and *KGIS* programmes'[131] education arms, which were both successful in terms of girls' retention in school and reducing the likelihood of marriage, indicating that extracurricular support to aid learning can be an effective mode of intervention. The education arm of the *BALIKA* intervention also demonstrated a significant increase in girls' mathematics rates relative to the control group.[132] Moreover, *IALP* significantly increased girls' reading and writing skills through its non-formal education programme alongside a reduction in child marriage. This further suggests that the academic learning outcomes of an intervention may be more important for reducing child marriage rates than simple school attendance and demonstrates that non-formal education can be effective in achieving positive educational outcomes.

Increasing economic opportunities

The success of interventions preventing child marriage by improving girls' academic outcomes is likely linked to the economic prospects that educational qualifications open for girls and allow girls to contribute to the labour market. Indeed, there is some evidence to suggest that the effectiveness of education interventions in reducing child marriage may be dependent on the employment and income generation opportunities available to girls.

The *BALIKA* intervention in Bangladesh examined the impact of the education arm for child marriage amongst girls in 'high economic participation villages' (i.e. villages where there are a higher number of 'white collar' jobs that would require a higher level of education) and 'low economic participation villages' (i.e. where there were fewer such employment opportunities).[133] Overall, they found that child marriage rates were only reduced in the high economic participation villages. This suggests that education interventions are less effective when education is unlikely to increase economic prospects. Subgroup analysis showed that within low economic participation villages, the education arm significantly reduced child marriage

amongst girls who were illiterate at baseline,[134] but not amongst girls who were already literate. Again, this suggests that the education provided a means for previously uneducated girls to access the jobs in the area that require a lower level of education.[135]

Stakeholders reporting on the effectiveness of *BALIKA* also stated that parents are willing to allow girls to continue education if they believe it will provide the opportunity for girls to earn money. Indeed, the study also found that girls who were enrolled in school throughout the intervention were in higher paying jobs at the endline, suggesting these beliefs were founded, and demonstrating a potential pathway from education interventions to child marriage prevention.[136]

Education interventions and girls' empowerment

From the education interventions, some evidence indicates that girls' participation in education empowers them to speak out against child marriage. Girls who participated in the *Her Choice* intervention (implemented in Bangladesh, Nepal and Pakistan), which supported girls' participation in education by creating girl-friendly schools, found that the intervention resulted in an increase in girls speaking out about their rights and against child marriage, with a particularly high increase in Pakistan.[137] At the endline, a higher share of girls reportedly felt they had control over if, when and who to marry compared to baseline.[138] Stakeholders reported that the distribution of bicycles (to support girls' attendance in school) gave girls the confidence to stand up for themselves and speak out against boys who tried to harass them, meaning this was less of a deterrent to their participation in school.[139] In addition, participation in the *Her Choice* intervention broadly appeared to shift young men's attitudes and increase their understanding of the importance of girls' education and the role that males can play in supporting girls to acquire an education.[140]

Findings relating to greater agency following education interventions were replicated in the *BALIKA* and *KGIS* interventions. Girls who participated in the education arm were significantly more likely to report being allowed to go to specific destinations by themselves or after dark, allowed to visit friends, and allowed to go to the playground, relative to girls in control villages.[141] Respondents in the intervention villages were more likely to say girls could say no to marriage.[142]These findings were also present in the KGIS evaluation.[143] Moreover, feedback from the *Samata* intervention was that girls who performed well and achieved good exam results were particularly well placed to exercise agency and decision making relating to child marriage.[144]

Based on the general finding that education and learning can address child marriage through empowerment, it would be logical to assume that the effects of interventions combining education/skilling and empowerment would be more effective than standalone education interventions. However, this does not appear to be the case. Standalone education interventions reduced child marriage in the intervention groups by 4.4 percentage points (see Table 8), whereas various combinations of education and empowerment interventions appear to yield a smaller effect (Table 8 and Table 9). While the small number of studies and high heterogeneity in combinations means it is difficult to conclude why this may be the case, it could be linked to negative social norms and increased concerns amongst parents relating to girls sexual purity; often, parents make the decision relating to girls' marriage timing, and interventions targeting girls' education and empowerment might sometimes yield negative responses from parents and fail to prevent marriage (this parental resistance or negative response to empowerment interventions is discussed further below and in section 6.5.4). However, a higher number of studies exploring the impact of education and empowerment combined interventions are required before definitive conclusions can be drawn.

Nonetheless, there are positive examples of where education and empowerment combined interventions can have stronger combined effects. The IALP intervention found that the effects of intervention on education and child marriage were stronger amongst communities in which girls received both the non-formal education and empowerment components of the intervention. Qualitative data indicated that the IALP intervention empowered children and adolescents to learn how to read and write and to express their desire for further education to their parents. Stakeholders also

noted that, as a result of the non-formal education programme, male family members became aware of the importance of education for girls, increasing the likelihood of parents seeing education as an alternative to marriage for adolescents.[145]

In some cases, education interventions also provide the opportunity to supply girls with information and support relating to SRH that would otherwise be inaccessible, which can also support child marriage prevention (as discussed in section 6.6). For example, the *Her Choice* intervention embedded SRH into the curriculum and provided this information to girls during school hours. The *BALIKA* and *KGIS* education arms were successful in increasing girls' knowledge of SRH and support seeking behaviours for menstrual health.[146] However, as outlined in Table 10, the combination of SRH and education did not appear to significantly reduce child marriage rates. While the small number of studies make it difficult to draw conclusions, this provides preliminary evidence that jointly providing education and SRH may not be demonstrating improved effectiveness in terms of child marriage prevention. This may be linked to perpetuating social norms regarding girls' purity and honour, whereby parents and communities respond negatively to the knowledge that girls and boys are mixing in schools and receiving knowledge and access to SRH services that may in their opinion be seen to promote sexual relations between adolescents outside of marriage.

Approaches to education programming: good practice and emerging challenges

This section discusses evidence on the effectiveness of different approaches to education interventions. It presents good practice examples that emerge from the evidence, as well as barriers and challenges which can undermine effectiveness, and considers why some interventions were found to be more effective than others.

Improving the learning environment appears to play an important role in girls' participation in education (and child marriage outcomes). The *Her Choice* evaluation found that supporting schools to be more girl-friendly resulted in an increase in girls' regular attendance in school and, according to key stakeholders, a reduction in child marriage. Measures to establish girl-friendly schools included creating separate sanitation facilities for boys and girls, establishing a girls' club within the school, provision of menstrual pads, creation of a 'safe room' for girls, development of a child protection policy, and recruiting a counsellor/focal person for girls. Although the *Her Turn* intervention (which reduced the likelihood of marriage) was not regarded as an education intervention, as it focused on norms and empowerment, it was noted that the provision of menstrual and hygiene support within schools was encouraging girls who had dropped out to re-enrol in school,[147] providing further evidence of the role of improving the environment in school on child marriage outcomes.

Practical support and item provisions appear to be important elements of an intervention to support girls' attendance in school, which are both linked to providing support to mitigate safety and financial barriers to education. The *Her Choice* intervention (which saw a reduction in child marriage rates in intervention areas in Pakistan and Nepal) increased girls' attendance in Pakistan through the provision of a bicycle for girls to travel safely to school. In Nepal, school enrolment was said to have increased because girls were supported with stationery, thereby reducing costs for parents.[148] In juxtaposition, the IALP intervention (which failed to increase enrolment in education) identified that a lack of a resources, transportation or safety measures remained key barriers to girls attending school.[149] In addition, girls who received the *Her Choice* intervention in Nepal noted a lack of transportation as a key barrier (though it is unclear why implementation of *Her Choice* and provisions differed between Pakistan and Nepal). The *Female Secondary School Assistance Programme (FSSAP)* implemented in Bangladesh found that the education stipend (which provided money directly to girls' bank accounts to pay for tuition, examinations, textbooks and uniform) significantly reduced child marriage, but that the free tuition policy did not impact child marriage rates.[150] Together, these findings suggest that interventions that support participation in education through practical support and financial incentives may be more effective in reducing child marriage. Further evidence of the use of financial incentives for education participation and child marriage prevention are explored within the CCTs findings in section 6.3.

Finally, as mentioned above, **tutoring** appears to be an important means to supporting girls' academic achievement, which, as evidence indicates, may have a stronger impact on preventing child marriage than merely supporting girls' attendance.

Prevailing social norms as a barrier to effectiveness of education and learning interventions

One factor that appears to limit the effectiveness of education interventions is prevailing social norms which act as drivers of child marriage. A number of girls participating in the *Samata* intervention dropped out of school and were pushed into child marriage due to parents' concerns about girls' sexual purity.[151] In some cases, despite the intervention, some parents had low educational aspirations for their daughters and were concerned about the reputational damage that could occur if girls were to spend more time with boys in school.[152] In this intervention, girls who were already married by midline were from families who believed that child marriage could protect their daughters' safety and respectability. Although the *Samata* intervention took this midline learning and attempted to engage with parents to shift their perspectives and support girls' participation in education, they noted that this adaptation likely occurred too late into the intervention to result in meaningful change, and recommended that future interventions focus on shifting parents' attitudes from the onset of intervention to more effectively reduce concerns relating to girls' reputation.[153] Social norms relating to girls' safety and risk of harassment were also reported as a barrier to effective participation in the IALP intervention.[154]

6.5 Adolescent girls' empowerment

Summary

Meta-analysis findings indicate that empowerment interventions have a significant effect on reducing child marriage rates. Multi-component interventions which combine empowerment programming with other typologies were found to have a larger effect on reducing child marriage than standalone empowerment interventions. This appears to be largely due to the need to address social norms and engage the wider community, to ensure that girls' views and preferences are considered by those who make the ultimate decision of marriage timing and that communities are receptive to girls' empowered behaviours.

While the limited number of studies and diversity of programming approaches makes it difficult to ascertain which empowerment modalities are most effective at reducing child marriage, evidence suggests that interventions that increase girls' integration and engagement in the community, such as safe spaces and establishing girl mentors / girl leaders, can be effective, as well as those which provide life skills and strengthen girls' economic empowerment.

6.5.1 Overview

A significant area of child marriage prevention and response programming is aimed at empowering girls (and young people more broadly) through interventions that are designed to increase their individual agency and capacity and reduce their vulnerability to child marriage and its drivers. In addition to empowering girls, such interventions may contribute to changes in attitudes and norms within communities, especially parents and fathers specifically, particularly when they seek to engage families and communities. Empowerment interventions tend to be cross-cutting, and often seek to promote girls' access to education or economic empowerment, as well as strengthen decision-making, self-esteem and other interpersonal and psychosocial capacities. The main modalities

of empowerment programming include life skills sessions, 'safe spaces' or adolescent-friendly centres, counselling or mentorship, and skills training or material support aimed at promoting girls' economic empowerment, with many interventions combining two or more of these.

6.5.2 Availability of evidence relating to empowerment interventions

The interventions identified within eligible research studies largely aligned with the modalities outlined in section 3.1. Empowerment was a key mechanism through which these interventions aimed to reduce child marriage. Almost all interventions included a component on building girls' life skills, with programmes focusing on a range of different topics, from financial literacy and communicative English, to land-based livelihoods and land rights knowledge. However, safe spaces, economic empowerment and mentoring were also common components, with most empowerment interventions including multiple modalities.

Empowerment programmes were the most common intervention typology to be carried out alongside other typologies (as can be seen in the meta-analysis section, Table 9). Norms change was a particularly common typology to be implemented alongside empowerment programmes, and often, elements of empowerment interventions were designed to utilise girls as active agents in shifting social norms (e.g. the *Tipping Point* programme in Bangladesh). The design of empowerment interventions (and multifaceted interventions with empowerment components) and the design of the evaluation often made it difficult to ascertain exactly if, how, and why empowerment interventions generate impact, and it was particularly difficult to ascertain which empowerment modalities are most effective.

While a considerable number of studies evaluating empowerment interventions (or interventions with empowerment components) were identified, it was sometimes the case that these interventions did not measure child marriage outcomes; rather, they only measured attitudes towards child marriage or child marriage prevention behaviours, and were thus not included in the synthesis.

In total, 32 empowerment intervention studies were included in the meta-synthesis, 12 of which had sufficient data to be included in the meta-analysis (with these twelve studies yielding 25 effect sizes).

6.5.3 Effectiveness of empowerment interventions

Meta-analysis

Meta-analysis results indicate that empowerment interventions have a significant contribution to the prevention of child marriage. The pooled effect size of all interventions with an empowerment component was -0.0270***, meaning that there was a statistically significant 2.7 per cent reduction in the likelihood of child marriage outcomes for participants that had been exposed to the intervention compared to the control group.

Table 9 provides a breakdown of subgroup analyses. The results show that **standalone empowerment** interventions had a moderately significant effect, reducing child marriage by 2.7 percentage points compared to control groups, suggesting that interventions that focus on empowerment alone have a statistically significant impact on child marriage outcomes. In the grouped typology combinations, all pooled effect sizes demonstrated a statistically significant reduction in child marriage outcomes.

Interventions that targeted both **empowerment and social norms** *(i.e. subgroup Empowerment + social norms)* demonstrated a significant reduction of 3.19 percentage points, indicating that empowerment interventions that incorporate social norms can be particularly effective. Reasons for this finding are explored below (in addition to section 6.2, which provides an in-depth analysis of the role of social norms).

Interventions targeting both **empowerment and SRH** also demonstrate effective reductions in the likelihood of child marriage; the *empowerment + SRH + any other typology subgro*up analysis showed a large and highly significant pooled reduction of 4.06 percentage points. Moreover, interventions that addressed empowerment, social norms and SRH *(Empowerment + social norms*

+ SRH subgroup) had the highest reduction in child marriage by 6.45 percentage points. Note that the mechanisms of effectiveness for SRH interventions are explored in-depth in section 6.6.

Interventions that combined **empowerment and education/skilling** *(Empowerment + education/ skilling + any other typology subgroup)* yielded the smallest, yet still statistically significant, effect size, with a pooled reduction of 1.14 percentage points, suggesting that this combination may not be as effective as those which address social norms. Note that this does not mean education interventions are ineffective, as demonstrated by the significant effect size, and in-depth analysis in section 6.4.

Based on available evidence, there is no clear pattern in relation to the effectiveness of certain empowerment modalities or approaches, with very few studies examining the differential impact of different modalities. However, the narrative below provides insight into how specific approaches can be effective in preventing child marriage, and their limitations.

Meta-synthesis

Qualitative studies often provided positive examples to illustrate that empowerment interventions can be effective for preventing child marriage.[156] For example, girls who participated in the *'It's Her Turn'* intervention reported successfully preventing either their own or other girls' marriages, as a result of being empowered to speak up and advocate for their rights and wishes.[157]

While the findings show that empowerment interventions can be successful, the narrative within qualitative studies shows mixed results. There were several examples where increasing girls' empowerment did not lead to the successful prevention of child marriage.[158] Additionally, although the meta-analysis indicates effects of empowerment interventions are significant, some quantitative studies with standalone empowerment arms showed no impact of this intervention on child marriage (e.g. *Kishori Kontha+* in Bangladesh). Only one study measured outcomes for boys (the

Table 9: Empowerment meta-analysis and subgroup analysis results.[155]

Intervention combination	n	n (studies)	Effect size estimate	SE	z-value	p-value	95% CI
All empowerment	**25**	**12**	**-0.0270*** **	**0.0063**	**-4.3151**	**<.0001**	**[-0.0393, -0.0148]**
Distinct typology							
Empowerment (standalone)	5	4	-0.0274*	0.0130	-2.1009	0.0356	[-0.0529, -0.0018]
Grouped typology combinations							
Empowerment + any other typology component(s)	20	11	-0.0273***	0.0074	-3.6796	0.0002	[-0.0418, -0.0127]
Empowerment + education + any other typology component(s)	7	4	-0.0114**	0.0042	-2.7530	0.0059	[-0.0196, -0.0033]
Empowerment + social norms + any other typology component(s)	12	6	-0.0301**	0.0112	-2.6839	0.0073	[-0.0520, -0.0081]
Empowerment + SRH + any other typology component(s)	11	6	-0.0406***	0.0104	-3.9109	<.0001	[-0.0609, -0.0202]
Specific typology combinations							
Empowerment + social norms	4	2	-0.0319*	0.0156	-2.0465	0.0407	[-0.0624, -0.0013]
Empowerment + social norms + SRH	3	2	-0.0645*	0.0318	-2.0279	0.0426	[-0.1269, -0.0022]

IALP intervention in Pakistan), and found that the intervention did not change boys' marriage rates.[159]

There is also some evidence to suggest that empowerment interventions might lead to the adverse outcome of girls eloping (i.e. an unanticipated consequence of driving child marriage as opposed to preventing it). Certain qualitative studies found cases of girls eloping after participating in an empowerment intervention, and stipulated that this pattern might be a result of girls feeling empowered to make their own decisions relating to who and when they marry.[160] This suggests that, to help ensure empowerment interventions do not have an adverse effect of driving child marriage, interventions may need to consider including components that address the issue of elopement, which seems to be an increasing concern in South Asia.

6.5.4 How different approaches to empowerment interventions can prevent child marriage

Given the multifaceted nature of interventions with empowerment components and the diversity of contexts in which they are implemented, it is difficult to ascertain *how and why* some empowerment interventions are effective while others are not. However, qualitative studies provide insight to the role that empowerment components have played in child marriage outcomes and the mechanisms through which these interventions have (or have not) led to a reduction in child marriage, providing an opportunity to learn about how and why interventions can be effective, in addition to barriers to their effectiveness. Themes explored include the impact of interventions in empowering girls to raise their voice; the importance of social norms, parents and communities in supporting girls to exercise decision-making; how particular modalities can empower girls; and how change can occur through girls' economic empowerment in particular.

Empowering adolescents to raise their voice and make decisions

Empowerment interventions have been shown to support the prevention of child marriage by giving adolescent girls the confidence and skills to voice their preferences and desires about their own marriage timing, and, in some cases, to advocate against the child marriage of other girls. For example, the *RISHTA* programme evaluation, a community-based initiative led by youth in rural Jharkhand, India, showed that the empowerment of girls was a crucial factor for preventing marriage. Girls who had successfully prevented their own marriage stated that without the programme, they would not have felt brave enough to voice their opinions.[161] The *It's Her Turn* programme implemented in rural Nepalese communities also resulted in girls feeling more confident to intervene in instances of child marriage and advocate for themselves and other girls, with examples of when this successfully prevented marriage.[162]

In reverse, the *Tipping Point* intervention in Bangladesh was (overall) unsuccessful in reducing child marriage rates. This intervention also failed to achieve several outcomes that are indicative of achieving female empowerment, one of which was girls' confidence in discussing child marriage and exercising decision making.[163] This suggests that, in some cases, empowerment interventions may fail to impact child marriage because they have, in fact, failed to achieve the intended output / intermediary outcome of empowering girls to raise their voice and make decisions. Though the study did not explicitly explore why this intervention was unsuccessful in empowering girls, it did find that *Tipping Point* resulted in a significantly lower connectedness between girls and their parents, suggesting that this negative effect may have reduced their ability to assert their views and exercise decision making with their parents. The role of parents as gatekeepers between empowerment and child marriage is explored further below.

Safe Spaces that provide the opportunity for adolescent girls to socialise, learn about girls' rights and issues relating to child marriage, and voice their opinions appear to play an important role in empowering adolescents to prevent child marriage. Safe spaces are often used as locations to facilitate life skills training, connect girls with mentors, and implement other components of empowerment interventions. As an example, qualitative data from the evaluation of the *BALIKA* intervention in rural Bangladeshi communities (which saw a reduction in child marriage) suggests that girls gained

confidence through their participation and access to the *'BALIKA centers'* (i.e. safe spaces established within schools) to voice their opinions relating to marriage timing and choice of partner.[164]

The establishment of girl mentors and leaders (i.e. adolescent girls or young women who support knowledge sharing, education, and facilitate girls' participation in empowerment groups) has been shown to be an important means to prevent marriage through raising girls' voices. Girl 'leaders' and 'activists' appear to have a direct role in preventing child marriages from taking place.[165] Although the *Tipping Point* evaluation did not significantly reduce child marriage rates, findings provided concrete examples of how girl leaders had used their position within the community to intervene and prevent child marriages. When girls came forward and brought a potential child marriage case to the attention of the local village girl leaders, these individuals instigated a dialogue between the girls, their parents and themselves (to provide knowledge to the parents and change their perceptions relating to girls' rights and marriage), which ultimately prevented the marriage.[166] This is an example of how girl mentors both serve as a person with whom girls feel confident to share their worries, and as someone in the community who can speak up on behalf of other girls and take action to prevent child marriage.

Some studies noted that empowerment interventions that establish adolescent 'mentors', 'champions' or 'leaders' are strong in design, as they provide girls with empowering role models, support the development of meaningful relationships and ensure there is someone with whom girls can share their experiences.[167] However, this method can face substantial challenges. Often, implementation requires the identification of girls who have sufficient education levels and ability to complete training, or who have a particularly strong will to become leaders. It was noted that these individuals are not necessarily representative of the general adolescent population, which can reduce their relatability and deter other girls from fully engaging in the intervention.[168] Other interventions have found that prioritising relatable mentors creates challenges in identifying individuals with the capacity to engage in training and deliver the interventions effectively.[169] These challenges to successful implementation may have implications for intervention effectiveness, although there was insufficient evidence to determine which approach (i.e. prioritisation of qualified girls versus girls who are most relatable) is more effective.

Supporting girls' integration into the community

Linked to raising girls' voices, evidence indicates that empowerment interventions can lead to reduced child marriage rates by increasing girls' integration within the community. As outlined above, the establishment of **safe spaces** provides a place within the community for girls to come together as a group, share their experiences and feelings, partake in civic engagement, and build knowledge; this physically increases girls' presence in the community and outside of the home. However, some interventions experienced challenges in the implementation of safe spaces or found uptake to be low. This was linked to social stigma or cultural resistance to such centres existing in the community (for example in certain locations within the AWLI intervention), suggesting that community attitudes may prevent such interventions from supporting the integration of girls into communities.[170]

As also noted, establishing **girl mentors, leaders and activists** increases the presence and influence of girls in the community. As an example, *'Girls Support Committees'* were established as part of the *It's Her Turn* intervention, which were comprised of a group of girls whose roles were to provide mentoring and advocacy. In the intervention follow-up, these girls were reported as active in the community and perceived by those in the community as able to intervene and successfully prevent cases of child marriage. This was supported with evidence of cases in which girls on the committees had successfully intervened and prevented child marriage.[171] The *Deepshikha* evaluation in India also found that adolescent girl groups established in the intervention had successfully prevented child marriages, and had spread awareness about girls' rights.[172] Moreover, the *World Vision Girl Activists* intervention in Bangladesh found that girls' position within youth parliaments gave them an authority to exercise

governance in the community, mobilise key stakeholders and intervene in child marriage, with local government stakeholders recognising that they somewhat relied on the girls within the youth parliament to perform this role in the community.[173]

Empowerment interventions with **life skills** components can have positive effects by providing girls with the skills that enable them to better integrate themselves into the community. For example, the *BALIKA* intervention (which resulted in lower child marriage rates at endline by one third)[174] found that the *Gender-Rights Awareness* arm resulted in higher levels of empowerment amongst adolescent girls compared to the livelihood arm. This change was attributed to the life skills curriculum that was embedded into the Gender Rights Awareness intervention; this increased girls' presence and involvement in the community, built girls' negotiation and critical thinking skills, and resulted in more progressive values and a greater sense of voice and agency among adolescent girls.[175]

Supporting girls' economic empowerment

Several interventions that were successful in preventing child marriage included an **economic empowerment** component.[176] Economic empowerment interventions have been shown to increase levels of employment of girls, increase girls' knowledge about how to earn a livelihood and increase girls' desire to pursue economic livelihood activities.[177] For example, the '*GIRLS inspire*' project (implemented in Bangladesh and Pakistan) supported skills training and provided employment placements. This intervention resulted in more than 1,000 child marriages being prevented.[178] In the endline assessment, stakeholders felt that girls' economic empowerment was an essential part of the intervention's success. They noted that life skills training ensured that girls could earn a significant income, become economically independent and contribute to the family expenditure. They also reported that girls' employment increased community awareness about girls' participation in education and the labour market, which in turn prevented child marriage.[179] As another example, the livelihood component of the *BALIKA* intervention (which provided information on female occupations and training on specific vocations and entrepreneurship) showed a reduction in child marriage rates, albeit less so than for the other modalities.[180]

Life skills interventions which incorporate elements relating to girls' **economic empowerment** also appear to increase girls' voices and empower them to make decisions; the *PAGE* intervention in New Delhi, India, (which saw a slight reduction in child marriage rates in the intervention group compared to a slight increase in the control group) found a significant increase in the percentage of girls in the intervention group who reported that they have a say in the decision on when to marry, in addition to a significant increase in girls' employability.[181] However, this study did not directly explore the association between these changes and child marriage outcomes, meaning the pathway to child marriage outcomes through empowerment cannot be concluded.

Social norms and stakeholders' receptiveness to girls' empowerment as barriers to effectiveness

As indicated in the meta-analysis, interventions targeting both empowerment and social norms can be particularly effective in preventing child marriage. Qualitative evidence strongly supports the importance of social norms in the pathway from empowerment to child marriage outcomes. Findings provide examples where positive social norms change has facilitated receptiveness to girls' empowerment. Conversely, evidence also demonstrates that, although interventions may successfully empower girls, prevailing social norms will act as a barrier to the prevention of child marriage as individuals are unreceptive to girls' empowered behaviours. It appears that interventions that are focused solely on empowering girls may not be sufficient to ensure wider responsiveness to girls' empowered behaviours, or to change others' views and decisions relating to child marriage, particularly those of parents and others in the community who are facilitators / gatekeepers of child marriage.[182] Findings suggest that empowerment interventions may be more effective when combined with norms change or when targeting areas in which there are more progressive social norms.

The role of parents, especially fathers

The importance of engaging parents in the prevention of child marriage was a common theme to arise when exploring why empowerment interventions sometimes fail to prevent child marriage. Studies that found girls' attempts to prevent child marriage were not successful proposed that a key reason for this was that empowering girls is not always enough to change parents' behaviour. For example, following the *Tipping Point* intervention in Bangladesh, girls who tried to voice their views and educate their parents on their rights sometimes failed to change their parents' decisions relating to marriage. Moreover, despite quantitative data showing a significant increase in the perception that girls should play a role in decision making relating to child marriage, interviews suggested that many parents continued to feel that the decision of girls' marriage should be made by the parents (i.e. norms relating to child marriage decisions were not changed).[183] However, qualitative data indicated that, where parents had strong connections with their daughter, high aspirations for their daughter, and high sensitivity to the negative consequences of child marriage, the *Tipping Point* intervention was more successful in averting child marriage compared to when parents did not hold these views.[184] It was noted that parents can often be unreceptive to girl activists' attempts to intervene in child marriage cases, and at times respond to girls with hostility.[185] These findings demonstrate the importance of parents as mediators in the link between girls' empowerment and child marriage outcomes.

A possible explanation for why parents may be unreceptive to girls' empowerment is that parents might perceive girls who try to contravene traditional gender norms as 'rebellious'. This may lead parents to reassert their authority and ensure social norms are upheld by enforcing marriage.[186] Norms relating to SRH and girls' sexual 'purity' and reputation also appear to continue to influence parents' decisions relating to their daughters' marriage timing, irrespective of girls' feelings of empowerment or attempts to prevent their marriages.[187] Issues relating to SRH and social norms are explored further in section 6.6. Findings indicate that empowerment interventions might be more effective if they also target parents through norms change interventions to increase their receptiveness to girls' empowered behaviour and shift their attitudes on child marriage and girls' decision making.

Social norms and the wider community

Beyond parents, the evidence suggests that the broader community also plays an important role in influencing whether child marriage occurs, and that negative social norms in the wider community can prevent girls from being empowered to prevent child marriage. Qualitative data supports that interventions to change the knowledge, perceptions and attitudes of the wider community can work complementarily with empowerment interventions to prevent child marriages.[188] Positive attitudes regarding child marriage prevention provide an enabling and receptive environment for girls who have been empowered to ask others within their communities for help if they are unable to change parents' decisions.[189] Norms change interventions inform individuals within the wider community about issues related to child marriage and girls' rights, encourage them to listen to girls' calls for help and be receptive to girls' empowered behaviours, and teach them how to engage in child marriage prevention behaviours.

In some cases, the empowerment interventions themselves appear to play a role in shifting social norms. For example, the *World Vision Girl Activists* intervention, which established youth parliaments with girls' participation in Bangladesh, found that, while some community members responded negatively to girls in the youth parliament's attempts to intervene on child marriage matters and did not respect nor take girls' knowledge and information sharing seriously, stakeholders noted a shift in community attitudes over time, whereby communities were becoming more receptive to the girls' active presence and role in the community to support child marriage prevention.[190]

Norms change and empowerment combinations targeting wider communities can be used to support a shift in parents' behaviour; community members who received the *'GIRLS Inspire'* intervention (Bangladesh and Pakistan) reported

successfully mobilising others in the community and intervening with parents who were attempting to arrange marriages, by engaging in knowledge-sharing dialogues with the parents relating to girls' rights.[191] The *RISHTA* programme in India also found that girls' improved capacity to build support from family allies was a means to help girls influence their primary decision-maker on child marriage.[192] However, individuals involved in the *Improving Adolescent Lives in Pakistan* intervention emphasised that increasing knowledge and changing attitudes amongst community members did not necessarily lead to behaviour change, because parents remain the primary gatekeepers for child marriage.[193]

There were also examples of prevailing negative social norms being a barrier to communities' receptiveness to girls' empowerment, preventing positive outcomes in relation to child marriage prevention. For example, the *World Vision Girl Activists* intervention evaluation found that these girls were perceived to be disrupting generational order, and some stakeholders felt that these girls were out of place and equipped with an inappropriate level of knowledge.[194] Notably, although the *Tipping Point* intervention aimed to support girls' empowerment and decision-making and shift social norms, at endline, community members' receptiveness to girls' voices and transgressions from social norms relating to marriage remained low, and community members were no more likely to report that girls participate in decision-making relating to their marriage.[195] Community members continued to view girls who rejected marriage proposals negatively, and regarded girls who interacted with boys as 'unruly', which often resulted in harassment of girls. As a result, parents remained concerned about the reputation of their daughters who refused a marriage proposal.[196] These factors likely contributed to the failure of the *Tipping Point* intervention to reduce child marriage rates.

Some interventions were designed with the assumption that girls could be empowered to educate communities and change social norms. However, outputs were not achieved as anticipated, disrupting the expected series of events from intervention to child marriage outcomes. For example, Nepal's *It's Her Turn* intervention was designed to support a transfer of knowledge about gender rights from girls who participated in the intervention to others in the community, but results in the one-year follow-up showed that the majority of community stakeholders (influential individuals, boys and parents) were largely unaware of the content taught in girls' empowerment trainings. This further highlights that empowerment interventions placing responsibilities only on girls may have limited impact on shifting knowledge and behaviour of other stakeholders who have important roles in preventing child marriage.[197]

Together, these findings demonstrate that social norms play a considerable role in the effectiveness of empowerment interventions. Where negative social norms prevail, individuals are less responsive to girls' empowered behaviours, ultimately inhibiting child marriage prevention. Findings suggest that empowerment interventions may be more effective when combined with norms change or when targeting areas in which there are more progressive social norms. The effectiveness of norms change interventions more broadly are explored in section 6.2.

SRH and empowerment

As outlined, meta-analysis results show that interventions including empowerment and SRH components have a highly significant pooled effect size in terms of reducing child marriage rates (see Table 9). Although there was limited explanation of why this combination is particularly effective, the *It's Her Turn* evaluation concluded that a lack of inclusion of SRH limited the effectiveness of the intervention. The evaluation theorised that empowering girls to make their own decisions without providing sufficient SRH support increases the risk that girls will be married due to SRH related factors (i.e. actual or fear of early pregnancy), and concluded that had it been possible to include an SRH component, results may have been better achieved.[198]

6.6 Adolescent sexual and reproductive health

Summary

While evidence on the effectiveness of SRH interventions on reducing child marriage in the South Asian context is limited, available evidence suggests that SRH interventions can contribute to preventing child marriage when combined with programming from other typologies. In fact, results from the meta-analysis indicate that the inclusion of SRH components can strengthen the effectiveness of social norms and empowerment programming.

The included studies from the meta-analysis provide some insight into this finding. The majority of the included studies found that interventions aimed at improving adolescents' knowledge and awareness on SRH issues tend to have high success rates, though this did not *always* lead to reduced child marriage. Findings also highlight that the sensitivity of the subject of SRH can limit community receptiveness to such interventions, which can be a barrier to effectiveness. This emphasises the importance of targeting parents, service providers and broader communities in order to ensure that SRH interventions are implemented, supported by stakeholders, and lead to delayed marriage outcomes, for instance through social norms programming. Furthermore, incorporating SRH components into empowerment programming may help mitigate community resistance to such interventions.

6.6.1 Overview

Sexual and reproductive health (SRH) and child marriage are closely interlinked in South Asia, where child marriage is a key driver of adolescent pregnancy. Moreover, in many of these contexts, girls' virginity is highly valued and viewed as a reflection of family honour, and marriage is considered the only acceptable outcome if a girl becomes pregnant, or is known to have been sexually active, regardless of whether pregnancy occurs. Child marriage may also be viewed as a solution to the potential threat of pre-marital sexual activity, and a way of 'protecting' adolescent girls' honour. Young people's access to sexual and reproductive health services, including contraceptives, is often restricted in the contexts where these drivers are the most influential. Of course, restrictions on access to information, contraception and other services contribute to unintended pregnancy and the fear of unintended pregnancy, and ultimately, child marriage.

Given these linkages, a number of programmes aimed at ending child marriage have included interventions designed to improve adolescents' access to their sexual and reproductive health rights (such interventions often have other intended outcomes, including preventing unintended pregnancy, reducing age of first pregnancy, or promoting safe and healthy reproductive choices). The majority of these involve providing adolescents and young people with information and education relating to sexual and reproductive health. Other modalities include the direct provision of services, such as confidential counselling services, contraception, STI testing, and advocacy to reduce barriers to young people's access through working with service providers and policymakers to promote an enabling environment.

In South Asian contexts where instances of adolescent pregnancy leading to child marriage are relatively uncommon, the link between improved SRH related knowledge and behaviours and child marriage prevention is less direct than in other contexts. Improved access to SRH information and services can contribute to reducing stigma around female sexuality and the severity of the prohibition

on sexual relationships outside of marriage, both drivers of child marriage in South Asia, yet these changes are likely to occur more gradually and over the longer term.

6.6.2 Availability of evidence on the impact and effectiveness of SRH interventions

While several of the studies selected for inclusion consider programming that incorporates SRH components, studies that assess distinct SRH interventions were found to be very rare; only three of the 16 studies evaluating SRH programming that were included in the meta-synthesis were considered 'discrete' SRH programmes, and all three involve the same intervention. This is consistent with findings from previous reviews, which identify evidence on the impact of SRH interventions on child marriage as a gap in the evidence base.[199]

Because life skills curricula often touch on topics related to SRH, a considerable proportion of empowerment programmes could be categorised as combined SRH and empowerment interventions. For the purposes of this study, interventions are considered to include an SRH component if they include the provision of comprehensive sexual and reproductive health education or information and/or promote access to SRH services, but not if they simply covered one or several SRH related topics.

This gap is likely partly explained by the fact that it is rare for SRH modalities to be implemented in isolation, due to the sensitivity surrounding adolescent sexuality in the South Asian context. The integrated approach to SRH programming may also reflect an understanding of the need for a holistic approach, which promotes adolescents' access to their sexual and reproductive health rights while considering other drivers. These dynamics are explored further in the discussion of the effectiveness of SRH programming below.

SRH modalities covered by the meta-synthesis and meta-analysis reflect those outlined above, with provision of information and education on topics in sexual and reproductive health emerging as the most common: in many of the programmes considered, SRH education was integrated into broader life skills curricula, and a number of the studies reported improvements in young people's knowledge and understanding of SRH related topics as an outcome of programming. Other SRH modalities included interventions targeting service providers with the aim of making SRH services more accessible to young people and promoting youth friendly service provision.

In total, 16 studies which consider the SRH typology were included in the meta-synthesis, 7 of which qualified for inclusion in the meta-analysis.

6.6.3 Effectiveness of sexual and reproductive health interventions

Meta-analysis

Given that only one study included in the meta-analysis considered results from a distinct SRH intervention, it is not possible to isolate the impact of SRH interventions on marriage outcomes. However, meta-analysis results do suggest that interventions involving a sexual and reproductive health component can have an effect on child marriage outcomes. The pooled effect size of all interventions with an SRH component (drawing on 14 effect sizes from seven studies) was -0.0273*, meaning that according to available evidence, this category of interventions leads to 2.73 percentage reduction in the likelihood of experiencing child marriage, with moderate statistical significance. However, it is not possible to attribute these results to the SRH component of the interventions as there was not sufficient data to conduct a separate meta-analysis on single-component SRH interventions (i.e. assess their effectiveness in isolation, without other typologies).

Results of the effect of different combinations of interventions including an SRH component on child marriage outcomes are presented in Table 10 below. As with the other typologies, it is important to interpret these findings with caution given the limited number of studies available, and the high levels of heterogeneity across studies.[200]

Table 10: SRH meta-analysis and subgroup analysis results.[201]

Intervention combination	n	N (studies)	Effect size estimate	SE	z-value	p-value	95% CI
All SRH	**14**	**7**	**-0.0273***	**0.0122**	**-2.2412**	**0.0250**	**[-0.0512, -0.0034]**
Grouped typology combinations							
SRH + empowerment + any other typology component(s)	11	6	-0.0406***	0.0104	-3.9109	<.0001	[-0.0609, -0.0202]
SRH + education + any other typology component(s)	4	2	-0.0276	0.0283	-0.9769	0.3286	[-0.0830, 0.0278]
Specific typology combinations							
SRH + empowerment + social norms	3	2	-0.0645*	0.0318	-2.0279	0.0426	[-0.1269, -0.0022]

Interestingly these results do suggest that an SRH component can increase the effect of other typologies, particularly social norms and empowerment interventions, in preventing child marriage. The meta-analysis finds that interventions which include SRH, empowerment and social norms components lead to a 6.45 percentage reduction in child marriage outcomes, with moderate statistical significance; this is a much larger effect than that achieved by distinct empowerment or social norms interventions (-0.0274* and -0.0450*** respectively), or by combined social norms and empowerment interventions without an SRH component (-0.0319*). This result is consistent with findings from the meta-synthesis, discussed further below.

6.6.4 How sexual and reproductive health interventions can help prevent child marriage

Given that evidence on the effectiveness of SRH interventions in reducing child marriage is limited, it is not possible to conclusively say whether or not discreet SHR interventions lead to reduced child marriage. Yet, evidence from the meta-synthesis demonstrates how SRH programming has resulted in intermediate outcomes in the change pathway towards child marriage prevention, particularly through improving SRH knowledge and awareness, improved access to SRH services and changes in SRH related behaviours. The majority of SRH studies included in the meta-synthesis presented evidence on the impact of SRH programming on young people's knowledge and awareness on sexual and reproductive health topics, with overwhelmingly positive results. In addition to resulting in increased knowledge about SRH, evidence indicates that interventions have increased young people's levels of comfort in discussing and asking questions about SRH related topics.[202] This is an important achievement given the level of stigma and taboo surrounding adolescent sexuality and sexual health in many of the programme sites.

The consistent impact of SRH interventions on knowledge and awareness of SRH is likely a reflection of the level of need for education and information on these topics in programme sites. Indeed, a study of the effects of the PRACHAR programme noted that, *"the overwhelming majority – more young women than men – had attended the entire three-day session, recalled every topic covered in the programme, and believed that the training had been useful in enabling them to make subsequent decisions in their life, ranging from the timing of marriage and childbearing to contraception and health seeking,"* though in this instance, perceived decision making did not translate to long-term reduction in child marriage, suggesting this SRH awareness-raising is not always sufficient in preventing child marriage.[203] Other studies found that of all the topics covered in life skills curricula,

sexual and reproductive health topics were amongst the most appreciated.[204]

Evidence also suggests that SRH interventions can lead to meaningful changes in behaviour, including increased access to SRH services; increased contraceptive use (the majority of evidence around this in the South Asia context was amongst young married couples); improved health and hygiene practices; and sharing knowledge with family members, friends and neighbours.

Barriers to changing marriage practices through SRH programming

Findings from the meta-synthesis provide insight into the limitations of SRH interventions in preventing child marriage in South Asian contexts. In particular, findings suggest that given the prevalence of arranged marriages in many South Asian countries, and the broader influence of families and community members on decision making around marriage, interventions will need to engage parents and communities in order to be effective. This learning is illustrated by the following excerpt from an evaluation of the PRACHAR programme:

> **"We hypothesised that young people trained in the intervention would be more likely than others to communicate and negotiate with parents to delay marriage, and therefore more likely to delay marriage than those in control sites. Findings do not support this hypothesis. Large proportions of those from both intervention and control sites had wanted to delay their marriage but, in both groups, were unsuccessful in doing so."**[205]

Indeed, evidence from the evaluation suggests that for the most part, young people's marriages are arranged by their parents, and that they have little to no input in the process. No significant differences were found between intervention sites and controls. According to the study: 47–52 percent of young men and 72–73 percent of young women reported that they had no say whatsoever in the selection of their spouse; 44–48 percent of young men and 24–25 percent of young women reported that their marriage had been fixed by their parents, but they had been consulted; and only 4–5 percent of young men, and 3 percent of young women reported that they had selected their own spouse. This highlights the need to engage parents as well as other 'gatekeepers' in programming. As an earlier study exploring the effectiveness of PRACHAR concluded:

> **"…programs and policy targeting young people should, ideally, inform the mother, as well as the men in the household. Trainers also suggested that Pandits and Maulavis (Hindu and Muslim priests) who perform wedding ceremonies and community elders be sensitized to issues related to early marriage so that they can put social pressure on families to stop early marriage and perhaps commit to not performing underage marriages."**[206]

An evaluation of another (combined) SRH programme highlighted the importance of engaging service providers and health care staff, who may create barriers to access if they are not supportive of the provisions of SRH related services to unmarried young people.[207] These findings are consistent with conclusions from a number of studies included in the meta-synthesis, which emphasised the importance of complementing SRH programming with social norms interventions in order to effectively achieve outcomes; even if young people's knowledge of and access to SRH services is improved, without an accompanying change in knowledge and attitudes amongst the broader community, and particularly parents, this is unlikely to result in changes to marriage practice. These findings also help to explain meta-analysis results which suggested that SRH interventions combined with social norms and empowerment programming have a larger effect on marriage outcomes than any of these typologies implemented alone.

Yet even interventions which combine empowerment, social norms change and SRH components may face other barriers to achieving results. Several studies observed that addressing underlying structural drivers of child marriage, particularly economic incentives to marry a daughter early, is critical to changing outcomes. For instance, one study described how respondents consistently attributed delayed marriage to families' economic circumstances:

> **"girls are marrying at a later age now, but the main contributor to this, from the point of view of young female participants, is parents' financial ability. The mandate to wait until the legal age of marriage (18 and 21 years) and fear of consequences have no bearing on the decision to marry off girls. It is the financial capacity that has the greatest bearing on this decision."**[208]

Approaches to SRH programming: good practice and emerging challenges

Engaging adolescents and communities on a sensitive topic

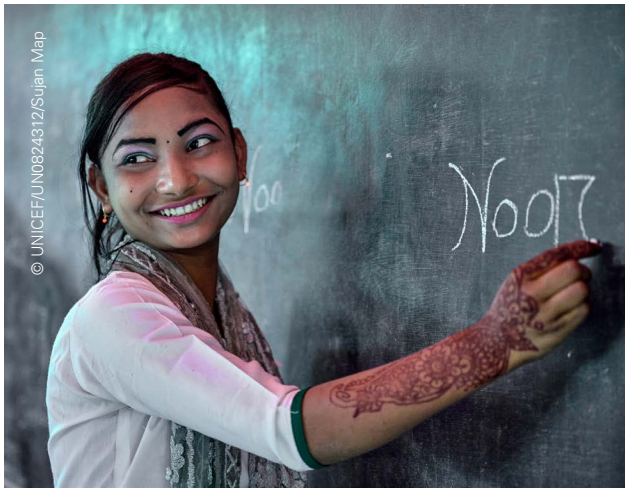
It is clear that sensitivities and stigma around sexuality, and particularly adolescent sexuality, have created challenges for the delivery of SRH programming. The discussion of SRH related topics is considered taboo in many South Asian contexts, particularly those where child marriage is practiced. For instance, a research study on project *RISHTA*, a community-based programme including both empowerment and SRH components, quoted a respondent who told researchers:

> **"Initially all used to say that, 'It is a shameless initiative and all involved are also shameless. They just teach about mating, physical relations, and HIV, which is altogether shameful information. It will spoil all our children, so one should not attend.'… Some were even quite violent. The coordinator even called a meeting and it was very difficult for him to make the people understand."** [209]

In some cases, these challenges have led organisations to deliberately exclude SRH components from programme design. This was the case in the *'It's Her Turn'* intervention in Nepal, which took the conscious decision not to address sex and reproduction in its curriculum to avoid alienating participants and their broader communities. Yet an evaluation of *It's Her Turn* identified this as a significant gap in the programme's design, concluding that, "as child marriage is a major issue facing all of these communities, it may be that talking about sex would be both relevant and useful for the girls".[210] Indeed, qualitative evidence from a number of studies does suggest that providing adolescent girls with information on sexual and reproductive health, their rights, and how to access services can strengthen empowerment programmes. Furthermore, incorporating SRH into empowerment programmes may help reduce communities' resistance by embedding highly sensitive content into less controversial curricula.

Staffing considerations

A related finding which emerged from the meta-synthesis highlights the importance of ensuring that programme staff, particularly those in mentor or counsellor roles, establish strong and trusting relationships with beneficiaries. This was a finding across the typologies, with many studies identifying challenges around recruitment and retention of high-quality staff as a threat to effective programming. Given the sensitivity around SRH topics, ensuring that adolescent girls (or other target groups) are comfortable with programme staff is particularly crucial to effective programming. Findings suggest that recruiting young female staff, particularly from local areas, can support improved outcomes, particularly around access to services. For instance, an evaluation of the SAG-KP Programme, which involved the provision of regular reproductive and sexual health sessions for adolescents, found that 30 per cent of the girls who attended those sessions reported to have visited adolescent-friendly health clinics. The evaluation attributed the high rates of access to the programme's staffing arrangements: "the adolescent girls opined that they were much more comfortable to discuss such issues with peer leaders, rather than the frontline workers who were senior women living nearby."[211]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6.7 Law and policy

Summary

The small number of studies examining the effectiveness of law and policy interventions in reducing child marriage makes it difficult to reach any conclusions, though available evidence indicates these interventions alone are ineffective. The limited number of studies and varied results offer little explanation as to why law and policy interventions have not proven hugely successful at substantively reducing child marriage practices in South Asia, though evidence points towards the need for interventions to focus on enforcement of laws and accountability. Further research and investigation is required to gather a more definitive understanding of the effectiveness of law and policy interventions. Findings suggest that strengthening interventions under this typology will require a more holistic approach that goes beyond legislation and policy to more substantially address underlying social, economic, and cultural factors contributing to child marriage.

6.7.1 Overview

Legal and policy frameworks provide an essential foundation and legal basis for the prevention of child marriage. There are several modalities that fit within legal and policy frameworks, with the primary modality being legislative reform. This means the development of laws defining the minimum legal age of marriage and bylaws sanctioning individuals involved in the facilitation of child marriages and enabling divorce or annulments of child marriages, as well as those which provide for free and full consent to marriage, prohibit dowry practices or bride price, specify birth and marriage registration requirements, and those aiming to prevent and respond to violence against women and girls. Other modalities include the development of action plans and strategies, technical support and capacity building amongst key stakeholders to support implementation, and interventions aiming to increase awareness of child marriage law.

6.7.2 Availability of studies relating to law and policy interventions

The limited number of studies and evaluations of law and policy interventions underscores a critical gap in the literature, meaning findings drawn out from these studies should be interpreted with caution, and are only reflected of 'case examples' in terms of effectiveness. Overall, only seven studies addressed law and policy programming that satisfied the quality criteria for inclusion, and therefore were included in the meta-synthesis. Three of these seven studies had sufficient data to be included in the meta-analysis.

The main modalities identified mostly reflect the law and policy modalities outlined above. For example, four of the seven studies considered interventions that contained legislative and policy reform components. One of these studies considered the impact of an education policy reform on child marriage outcomes, meaning the policy was not directly targeting child marriage. The other three studies exclusively focused on legislative reform efforts (i.e. the introduction of child marriage laws), implemented in isolation from other typologies and modalities. Only one study relating to an intervention that exclusively aimed at enhancing knowledge of child marriage laws met the standards for inclusion.[212] Two studies of the seven studies examined interventions that provided technical support and capacity building to aid the implementation of law and policy.[213]

6.7.3 Effectiveness of law and policy interventions

Meta-analysis

Meta-analysis findings indicate that law and policy interventions have limited impact on child marriage outcomes. The pooled effect size of all interventions with a law and policy component based on 7 effect sizes from three studies was 0.0077, meaning that there was no statistically significant effect of law and policy interventions on child marriage outcomes, with a less than one percentages point reduction in child marriage.

Table 11 provides a breakdown of subgroup analyses of standalone law and policy interventions. The results show that standalone law and policy interventions had a statistically insignificant effect size of 0.0090. However, given that the effect sizes are extracted from only two studies, there is likely to be a high level of bias in these results due to the limited evidence base. Overall, the results suggest that there may be no demonstrable effect on child marriage outcomes from law and policy interventions, based on the results from a limited number of studies.

Meta-synthesis

Qualitative studies tended to support the finding that law and policy interventions have a limited impact on child marriage outcomes alone, irrespective of the modality. The reported success of reforms varied significantly in both the short and long term, rendering it challenging to draw definitive conclusions regarding the effectiveness of the modality. For example, a 2022 assessment of Bangladesh's Child Marriage Restraint Act (CMRA) found that despite a decline in underage marriage prevalence between 2006-2019, there was also a plateau in progress between 2013 and 2019, particularly for girls aged 16 and 17.[215] Moreover, the study evaluating an intervention to increase awareness of child marriage laws found that the intervention in fact *increased* child marriage rates among girls in treatment households by 7.2 per cent relative to the control group.[216] However, this singular outcome cannot be a definitive reflection of this modality's overall effectiveness in reducing child marriage occurrences.

Table 11: Law and policy meta-analysis and subgroup analysis results.[214]

Intervention combination	n (effect size)	n (studies)	Effect size estimate	SE	z-value	p-value	95% CI
All law and policy	**7**	**3**	**0.0077**	**0.0274**	**0.2810**	**0.7787**	**[-0.0461, 0.0615]**
Distinct typology							
Law and policy (standalone)	4	2	0.0090	0.0347	0.2598	0.7950	[-0.0589, 0.0769]

6.7.4 How law and policy interventions aim to prevent child marriage

Despite the fact that the law and policy interventions identified for this review led to a statistically insignificant effect on child marriage rates, it is useful to explore evidence on how these interventions were intended to reduce child marriage rates, and *why* they may have failed to do so. This approach will aid in learning valuable lessons about the limitations of law and policy reform interventions and how these can be overcome, which can then be used to inform future interventions.

The main aim of legal and policy interventions is to establish a robust legal framework against which people can be held accountable. In the context of child marriage, more stringent legal definitions of the minimum age of marriage, along with clear penalties for violations, serve to deter child marriage and provide legal recourse for victims. Strong legal and policy frameworks also facilitate clearer guidelines, regulations and mechanisms for governing efforts to reduce child marriage, therefore playing a pivotal role in creating a more coherent system and enabling environment for tackling child marriage. The *Protecting Human Rights* intervention

in Bangladesh paid particular attention to the role of the law in this regard, referring to several legislative achievements, including the revision of the Child Marriage Restraint Act.[217] Legal frameworks also encourage partnerships and collaborative efforts between government agencies, civil society, and communities, ensuring coordinated actions and resource allocation towards combating child marriage, including consistent reporting of child marriages.

The rationale behind interventions raising awareness on legal frameworks relating to child marriage is that, through informing communities about legal prohibitions and consequences, awareness campaigns encourage a value shift in communities, thus providing a normative influence comparable to social norms interventions. These value shifts serve to empower individuals to recognize and report instances of child marriage, thus also fostering a culture of accountability. However, whilst this increased awareness should contribute to a positive change in behaviour, findings from a number of studies suggest that this often does not occur in practice. The Amirapu et al (2020) study found that informing individuals in Bangladesh about the higher penalty associated with child marriage laws had little effect on their perceptions of community attitudes or practices prevalent in their community.[218] Although the *Her Choice* intervention (implemented in Bangladesh, Nepal and Pakistan) led to a significant increase in legislative awareness, such as in Pakistan where awareness rose from 6.8 per cent at baseline to 79.5 per cent at endline, the intervention did not lead to a statistically significant reduction in child marriage.[219]

One study conducted an evaluation of the impact of policies targeting identified drivers of child marriage on child marriage outcomes; it focused on the role of the Bangladesh free tuition policy, which was designed to enhance girls' access and retention in secondary education by reducing school tuition fees. As with other interventions targeting girls' education (see section 6.6) the underlying rationale for this approach is that fostering girls' education serves as a protective measure against child marriage. This intervention did not decrease child marriage rates.[220] Though there is insufficient evidence to draw conclusions, this one example suggests that national policies related to drivers of child marriage might not have substantive impacts of child marriage.

Why law and policy interventions have failed to prevent child marriage

While the studies in this review provide limited explanation as to why law and policy interventions failed to see widespread reduction in child marriage rates, there are some shared themes that arise across the studies, including weak law enforcement; the existence of legal loopholes; and social norms resulting in low adherence to the law.

A commonly cited explanation for the failure of legal interventions is the **weak law enforcement** mechanisms implemented alongside these laws, which have prevented the full effectiveness of the legal provisions.[221] Various factors contribute to weak enforcement, including limited engagement from government or local authorities, inadequate follow-up by the police, unreliable marriage registration systems, and courts exercising wide discretionary sentencing powers.[222] While the existence and awareness of child marriage laws represent crucial steps in combating the issue, effectively reducing rates requires more robust enforcement mechanisms. Without proper enforcement, laws merely serve as symbolic measures and fail to deter individuals and families from engaging in child marriage.[223] Some references point to lack of capacity among authorities and the need for continuous training on relevant laws for enforcement agencies as reasons for poor implementation.[224]

A barrier to the effectiveness of legal reform is the existence of **exceptions in minimum age of marriage provisions**. Research indicates that legal exceptions, such as parental permission and customary or religious laws overriding the minimum legal age of marriage, undermine child marriage laws as they create loopholes that effectively lower the legal minimum age of marriage below 18.[225] These exceptions are frequently utilized in practice, thereby allowing for child marriage practices to persist without repercussion, particularly in light of other drivers.

Restrictive social norms and a lack of girls' agency were found to be a limiting factor that curtailed the outcomes of interventions focused on raising awareness about the law. While informative interventions empower girls by providing knowledge about their rights and the legal recourse available to them in forced or child marriage situations, and support girls to make more informed decisions, this knowledge does not automatically translate to a change in outcome. For example, girls who were informed about child marriage laws through the *Her Choice* intervention were, often, no more able to prevent their marriages from taking place.[226] Prevailing social norms were noted as a key barrier to girls exercising agency to successfully prevent child marriage, despite the fact that the intervention led girls to feel that they had more agency.

Concerningly, the intervention aiming to increase knowledge of child marriage laws in Bangladesh found that disseminating this knowledge led to an *increase* in child marriage among girls within treatment households, and proposed that this finding linked to a 'backlash' to perceived threat of laws going against social norms.[227] The inverse effect was found in households where the father and family elders were informed about the new law, but was less present when parents and family elders were also informed about the exception clause contained in the law (i.e. parents were less likely to arrange their daughters' marriage when they knew the law provided a loophole to allow continued child marriage). The researchers presented various explanations, including (i) increased perceptions of heightened law enforcement or state support for girls' agency in the future prompted an immediate rush to marry, and (ii) customary authorities reacted to progressive changes in the law by reverting to more traditional beliefs and practices.

Findings provide insightful examples of how traditional gendered norms and structures present in South Asian contexts drive responses to child marriage law and policy implementation, and highlight the need for a multi-dimensional approach that addresses legal issues and deeply ingrained societal and cultural norms concurrently in order to effectively combat child marriage.

Factors that can strengthen the effectiveness of law and policy interventions

A couple of studies identified a need for increased collaboration and co-ordination among relevant policy stakeholders,[228] which would help create a more cohesive system capable of enforcing child marriage laws and policies more effectively. Through co-ordination, actors can pool resources, share expertise, and coordinate actions to develop and implement policies that combat child marriage. The *Protecting Human Rights* evaluation found that there was little synergy between the intervention and other stakeholders working in the space, noting how this was a missed opportunity to collaborate on advocacy efforts and other activities, which could have led to greater impact and reach of their efforts.[229] Stronger co-ordination helps to create a system that can more effectively develop, resource and implement laws and strategies seeking to end child marriage.

6.8 Cross-cutting themes

Summary

Although studies rarely took an experimental approach to assessing differential impacts of interventions on child marriage outcomes in different contexts, across all studies, there were some emerging themes with regards to factors or characteristics which can increase or decrease the effectiveness of certain interventions in reducing child marriage, and highlight issues with assuming a 'one size fits all' approach to implementing interventions. Although no definitive conclusions can be drawn about specific contexts in which certain interventions are most effective, limited evidence indicated that the effectiveness of interventions can depend on: the location in which they are implemented (i.e. with some interventions being shown to work in certain South Asian countries or specific states / provinces, but not others); household poverty rates; baseline child marriage rates; age of girls receiving the intervention; and the duration and intensity of interventions.

Few studies examined the long-term sustainability of either intervention implementation or child marriage outcomes. However, there were examples where evaluations considered the potential sustainability of interventions, and where interventions were explicitly designed for elements of implementation to be able to continue when projects ended. Some studies included a cost-benefit analysis or cost forecasting to justify sustained implementation. Elements of interventions designed with sustainability in mind or which were reported to continue functioning after projects ended included the establishment of safe spaces for girls, the knowledge stakeholders gained through interventions, and the long-term impacts of girls being engaged in employment.

A number of findings that emerged from the meta-synthesis cut across typologies, particularly in relation to factors that can impact the effectiveness of interventions. Given the limited evidence available in relation to each typology, and the high number of studies that examined the effects of multi-component interventions, it is helpful to analyse these findings together in order to draw from a larger evidence base, avoid repetition and consolidate learning. It should also be noted that studies rarely quantifiably examine differential impacts of interventions on child marriage outcomes according to key characteristics, perhaps due to the fact that interventions often target more vulnerable populations (alongside other methodological limitations), meaning the extent to which data can be stratified is limited.

While these findings are 'top-level' and cannot draw firm conclusions according to each typology, modality or country, they provide preliminary insight into some of the dynamics that shape programme effectiveness. They also reinforce that a 'one size fits all' approach to the delivery of interventions aimed at ending child marriage is unlikely to be successful. Although heterogeneity in studies made it difficult to ascertain which interventions may be most effective in achieving outcomes, there is some indication that the effectiveness of interventions differs depending on how, when, where and to whom they are implemented. Evidence on considerations relating to the sustainability of interventions is also presented below.

6.8.1 Beneficiary characteristics and other factors impacting intervention effectiveness

Location, context and effectiveness

Evidence suggests that the effectiveness of a particular intervention is likely to differ depending on the context where it is implemented and differences in implementation between locations. For example, the MTBA intervention (which provided skills training for girls aged 12-17) was only successful in reducing the prevalence of child marriage in India, but not other countries (outside of South Asia),[230] and within India, did not significantly reduce child marriage rates in Bihar, indicating within and between country differences in effectiveness. However, there was limited exploration of why the intervention was effective in Odisha and Rajasthan but not in Bihar.

The *Samata* intervention was found to be successful in increasing secondary school completion in Vijayapura district, but not in Bagalkote district (India).[231] Researchers examined possible explanations for this difference, and found that the educational qualifications (years of schooling) of the teachers in Vijayapura were significantly higher than those in Bagalkote, and that those in Vijayapura worked on the intervention for longer. It appears that the outcomes of the *Her Choice intervention* differed between Pakistan, Bangladesh and Nepal, though some level of positive outcome was seen in all locations (for example, effects through the education component appear to be weaker in Bangladesh, due to higher baseline school attendance compared to Nepal and Pakistan).

The location was found not only to impact effectiveness, but also to impact the approach to implementing the intervention itself. For example, in the *IALP* intervention, there were difficulties in deciding where to locate the non-formal basic education centres, as the intervention villages were remote, meaning it would be difficult for individuals to reach. Difficulties in locating the centres were also reported in connection with tribes living in the area who did not want their children to mix with those of other tribes. There were also concerns amongst those in the community relating to people from other castes entering their neighbourhood to attend the centres, which inhibited implementation. Another problem involved the absence of proper sanitation in some of the centres, especially in poor areas, meaning attendance was relatively low.[232] In addition, the *AWLI* intervention in Afghanistan was forced to cease the provision of CCTs in certain areas due to security risks that arose to beneficiaries and implementors, linked to misinformation.[233] These findings demonstrate the importance of considering local geographical and sociocultural contexts when designing the nature of interventions to be implemented.

It is worth noting that implementation and broader programmatic factors also effect implementation, differences in effectiveness between locations, and the ability to assess these differences. For example, the UNICEF-implemented IALP programme found intervention effects to be greater in Sindh compared to Punjab, and posited that this finding could reflect several factors: 1) the education component of the intervention was only administered in Sindh; 2) the child protection intervention in Punjab was temporarily paused due to a termination in the contract with the original implementing partners, and 3) contextual differences, such as the legal age of marriage (18 in Sindh and 16 in Punjab). Unfortunately, as the education component of the intervention was introduced part-way through the evaluation, the baseline methodology was not designed to enable the researchers to capture changes specifically due to certain intervention arms (though it was able to assess outcomes at endline for locations that implemented both arms versus education-only arms). The evaluation was unable to draw definitive conclusions about how and why these various factors affected outcomes between the locations, and this highlights challenges of evaluating evolving child marriage programmes in different contexts.

Household circumstances and effectiveness

In some cases, interventions were found to be more effective in contexts with higher household poverty rates, potentially driven by the lower prevalence of knowledge for child marriage risks leading to a stronger intervention effect. As an example, the *IALP* study found that the intervention

was more effective in reducing child marriage for individuals living in *very* poor households compared to individuals living in poor households, where those in very poor households had a lower knowledge of child marriage risks at baseline.[234] This finding may appear contrary to expected patterns, given that poverty is an evidenced driver of child marriage. In addition, reductions in child marriage following exposure to the *BALIKA* intervention (overall) were only achieved for the poorest girls in the poorest communities.[235]

The *IALP* study also found that the intervention had a greater effect on reducing child marriage in households with high COVID-19 exposure. While the authors could not pinpoint how or why COVID-19 exposure increased effectiveness, taken together, these findings seem to suggest that interventions might have a greater effect on more vulnerable families or families in greater crisis.[236]

Age and effectiveness

The effectiveness of some interventions appears to differ depending on the age of girls receiving the intervention.[237] When breaking down the findings of the *BALIKA* intervention by arm, the gender-awareness arm only reduced child marriage rates for girls aged 16 and over, whereas the education arm was most effective for girls under the age of 16.[238] It may be that education interventions are less effective when girls pass schooling age, though this is speculative, given the limited evidence exploring this issue. On the other hand, the effectiveness of the IALP intervention in reducing child marriage rates was found to be particularly strong for the 15-17 age group, for whom child marriage is more prevalent.[239] Similarly, the PaNKH programme, an integrated intervention aimed at promoting girls' empowerment, social norms change and improved SRH, was only found to have an effect on child marriage rates for the 15-17 age group.[240]

Duration of intervention

Limited evidence suggests that the duration of an intervention can influence its effectiveness, with the direction of this change differing across intervention typologies. Unsurprisingly, evidence suggests that longer exposure to CCTs can increase their effectiveness in terms of delaying child marriage. Evaluations of the *Punjab FSSP* indicated that, at midline, girls in stipend districts married 1.2 – 1.5 years later than girls in control areas,[241] and that the probability of marriage decreased by 3.5 percent with each year of exposure to the programme.[242] Another study found that girls who receive an education stipend during the entire secondary period are less likely to be married than girls who only received the stipend for a portion of their secondary education.[243] Conversely, based on the findings of the *NREGS* study, authors concluded that higher programme intensity might be associated with a *higher* probability of child marriage (i.e. the more money received through the schemes, the higher the likelihood of marriage, perhaps again linked to dowry).[244]

Duration or intensity of interventions also appears to be an important factor for effectiveness across other typologies. The PRACHAR SRH intervention evaluation concluded that the 3-day intervention was ineffective in reducing child marriage due to its short duration.[245] In addition, the *Tipping Point* evaluation saw a slightly (but non-significant) *higher* percentage of girls married by 18 in the intervention compared to control group overall (i.e. reflecting ineffectiveness).[246] However, girls who received the 36-40 sessions exhibited a 63 per cent lower risk of marriage. This finding suggests that some interventions may require intensive or sustained input to be effective, although there is insufficient evidence to determine *which* interventions require a more intensive approach.

Baseline child marriage rates and rates of intervention-targeted drivers

Although limited, there is some evidence to suggest that intervention effectiveness is more pronounced in areas where there are higher baseline rates, both in relation to child marriage and the drivers through which interventions target as a means to reduce child marriage. For example, the *It's Her Choice* programme resulted in reductions in marriage rates in Pakistan and Nepal, and the reduction was highest in sites with the highest initial child marriage rates.[247] In addition, the study found relatively limited impact of education components in Bangladesh, due to already high enrolment rates.

On the other hand, an evaluation of the More than Brides Alliance's intervention, 'Marriage: No Child's Play', which was implemented across diverse contexts with highly variant levels of investment and achievements in ending child marriage, found that the programme had an impact in areas where child marriage was already declining.[248]

Interventions and self-initiated marriages

Although not a highly prevalent theme, a few studies provided examples of when interventions had failed to prevent self-initiated marriages. There were examples of empowerment interventions potentially leading girls to exercise their decision-making powers and marry someone of their choice at an early age, girls dropping out of school (and education interventions) due to self-initiated marriages,[249] and girls who benefited from CCT interventions eloping.[250] These findings suggest the need for interventions to consider the type of marriage or union they are seeking to address, and to ensure that interventions consider that girls may have the ability to exercise their agency and may wish to marry, rather than assuming that marriage is driven solely by factors such as parents, economic prospects and access to education.

6.8.2 Sustainability

Evidence on the sustainability of outcomes of programmes aimed at ending child marriage was found to be extremely limited. This emerged as a clear gap in research, indicating a need to commission research designed to understand whether child marriage outcomes have been sustained after interventions comes to an end. Evidence on the sustainability and scalability of activities and interventions themselves was also found to be lacking. Several of the evaluations included in the study do comment on elements of programme design which are conducive to sustainability, or point to evidence which indicates that activities are likely to be sustained going forward. These findings are discussed further below.

Sustainability of outcomes

Evidence on the sustainability of outcomes is essential to understand the effectiveness of different strategies for preventing child marriage in the longer term. Unfortunately, very few of the studies included in the meta-analysis and meta-synthesis were designed to examine the sustainability of outcomes. Exceptions include a longitudinal study designed to identify the longer term effects of an SRH intervention through a survey conducted three to four years after the completion of the intervention (the results of this are discussed further in the second section on SRH outcomes - notably, the study found rates of child marriage to be unaffected by the intervention).[251] Additionally, a number of studies observed differences in outcomes between programme participants who participated in early and late stages of interventions, but none of these findings were rigorous enough to draw conclusions about the sustainability of outcomes.[252]

Finally, several studies considered the long term impacts of structural changes, such as the expansion of the garment industry in Bangladesh[253] and the establishment of free tuition and female stipend programmes, also in Bangladesh.[254] While these studies show positive changes in child marriage rates in the long term, they are less relevant for understanding the sustainability in child marriage outcomes *after* a programme comes to an end. In sum, evidence on the long term sustainability of child marriage outcomes is limited. As one evaluation rightly noted, "we have to be cautious regarding the sustainability of progress made, that is, a five-year programme is too short to be certain of lasting effects on, for example, the observed changes in community attitudes on child marriage, premarital pregnancy and the importance of formal education for girls. Events may occur which lead to a decline in the positive results observed during the endline".[255]

Sustainability and scalability of activities and interventions

Evidence on the long-term sustainability of activities and interventions aimed at ending child marriage is also an important gap in evidence. Some studies explicitly mentioned that activities do not appear to have continued at the point of the endline assessment, primarily due to a lack of funding (e.g. AWLI), indicating a lack of sustained implementation.

Many of the evaluations and studies included in the review did however consider the potential sustainability of interventions and activities, with some promising findings. In several cases, interventions included cost-benefit analyses or cost forecasting, with the aim of justifying further investment and ensuring the availability of information necessary for scaling up programming.[256] Other interventions included components which were intended to be taken over by the community after the intervention had ended (such as mentorship programmes or safe spaces). For instance, the *It's Her Turn* programme involved delivering a training of trainers to Girls Support Committees, to enable them to introduce new members once the *It's Her Turn* intervention had come to a close.[257] An evaluation of the programme noted positive results in the short-term, finding that two and a half years after the 'Girls Support Groups' workshops ended, these groups continued to run and have a positive impact in their communities.[258]

As an example of sustainability of interventions, phase III of the PRACHAR SRH programme in Bihar, India, aimed to effectively scale up the intervention in partnership with the government of Bihar state through the use of government appointed frontline health workers (ASHAs).[259] The ASHAs conducted home visits to young couples and mobilised unmarried adolescents to participate in SRH training. An evaluation also noted the sustainable nature of PRACHAR's design, which does not rely on the provision of services, but rather: "creates demand for [reproductive health / family planning] services among the target population, enables the social environment to acquire healthy reproductive behaviour, and facilitates the existing service delivery systems in the public and private sectors that help increase service utilization."[260]

Finally, a number of studies emphasised the importance of engaging government partners and local/community leadership in order to promote prospects for sustainability.[261] In particular, collaborating with health and education sectors may facilitate the incorporation of skills and knowledge-based learning approaches into standardised curricula. For instance, the life skills component of the *Deepkshikha* programme (in India) was later embedded into the government empowerment initiative, *SABLA*, and the government's National Programme for Education of Girls at Elementary Level.[262] Indeed, several evaluations highlighted how the failure to incorporate interventions into national policy or engage governments effectively were missed opportunities which limited the reach of programming.

Some interventions outlined specific components of the intervention that were designed with sustainability in mind, and in some cases, evaluations indicated that activities had indeed been sustained after the project ended. Interventions establishing **mentors / girl leaders** and **safe spaces** were designed to support sustained implementation and results. Within the *BALIKA* intervention, the *BALIKA* centres (safe spaces) were established with the intention that they would continue to be used following the end of the project;[263] however, it is not clear whether the use of these spaces continued. It was also noted that interventions that **invest in schoolteachers** ensure a long-term capacity development of the education system that would benefit adolescent girls beyond those enrolled in the programme and in the future.[264] In some cases, interventions which provide education and training to girls also include direct support to recruit girls into employment (e.g. the recruitment drive for *BPO* services in India), which in itself is an intervention design that supports the sustainability of outcomes through **long-term employment**.

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7 Conclusions

7.1 State of evidence

Regarding the 'state of evidence' on child marriage interventions, there are relatively few studies that met the standards for inclusion in the meta-synthesis (65 in total for the region), with less than half of these studies consisting of data for inclusion in the meta-analysis. However, it is notable that a larger number of studies were included than previous reviews of evidence on child marriage interventions (which often provide a global overview with limited focus on South Asia)[265], reflecting the comprehensive search strategy employed and inclusive approach to high quality grey literature. The majority of interventions considered by studies included in the meta-synthesis were implemented in India and Bangladesh, with a notable gap of evidence in other countries in the region, which likely reflects a concentration of interventions addressing child marriage in Bangladesh and India relative to other countries, as well as relative population and prevalence of child marriage in these countries. Notably, only three of the included studies were produced by UNICEF. Some intervention typologies, particularly law and policy and education, had very few studies meeting the eligibility criteria for inclusion in the meta-analysis and synthesis. High heterogeneity of studies in terms of the intervention design, modalities implemented, location, duration, and target groups also limits the extent to which conclusions can be drawn.

The strongest and highest concentration of evidence available relates to interventions that target income and economic strengthening, particularly CCTs, as well as norms change and empowerment. Many interventions incorporate several typologies (i.e. multicomponent interventions), which also creates challenges in assessing the effectiveness of particular typologies in isolation, but can provide some preliminary insight to if and how certain intervention combinations can be effective. Studies rarely collect high-quality longitudinal data over a sufficient number of time points to enable a quantitative assessment of pathways and mechanisms from intervention to outcome.

7.2 Meta-analysis findings: effect size of child marriage interventions

The relatively small number of studies included in the meta-analysis, and high heterogeneity of results, limits the extent to which conclusions can be drawn regarding which categories of intervention are most effective; findings should be interpreted with caution. However, meta-analysis findings suggest that most intervention types (education, skilling, economic strengthening, empowerment and social norms), when examined independently (i.e. to assess their unique contributions), significantly reduce the likelihood of child marriage. There were a few exceptions to this; law and policy interventions do not appear to have a significant effect on child marriage outcomes; CCTs with only an education condition (and no marriage delay condition) appear to be ineffective and yield insignificant effect sizes; and the evidence indicates that non-CCT income and economic strengthening interventions might *increase* child marriage rates. Conversely, CCTs with a condition for delaying marriage appear to have the strongest overall effect size of all intervention typologies, with the greatest percentage point reduction in child marriage rates across all analyses. Limited data meant that it was not possible to assess the unique contribution of SRH interventions on child marriage. The meta-analyses of multicomponent interventions indicated that those which combine empowerment, social norms and SRH might also be particularly effective.

Alignment of present findings with previous systematic reviews

The purpose of this meta-synthesis and meta-analysis was to assess the effectiveness of interventions in preventing child marriage in South Asia, by synthesising findings and calculating pooled effect sizes, including only studies which met a set of strict criteria, to ensure the findings are reflective of studies that were conducted with methodological rigour. While the purpose of this report is **not** to compare meta-analysis and meta-synthesis findings with previous evidence reviews, this section provides examples of where key findings from this synthesis align with other global evidence reviews, and where (and why) certain findings may differ.

CCTs may be more effective than UCTs and other income and economic strengthening interventions in preventing child marriage: Notably, some key findings from the meta-analysis are consistent with previous evidence reviews; a 2020 systematic review of the effectiveness of child marriage interventions by Malhotra and Elnakib found that UCTs were less effective than CCTs. [266] The authors stipulated that this might be due to UCTs often having the primary focus of poverty alleviation, and these transfers not contributing to activities that increase values or opportunities for girls. This is consistent with other reviews, which have shown impacts of UCTs on delaying marriage to be minimal and/or diminish over time.[267]

Standalone interventions may yield higher effect sizes than multicomponent interventions: The meta-analyses found that standalone social norms interventions and standalone education interventions yielded higher effect sizes than multicomponent interventions with either a social norms or education element. This is consistent with the findings of the Malhotra systematic review[268], which found the effects of standalone interventions to yield stronger effects than multicomponent interventions; they proposed that this might be due to interventions being delivered with greater intensity when there is only one component.

The ineffectiveness of education-focused CCTs in preventing child marriage: Whilst this meta-analysis found that standalone educational CCTs were found to be ineffective (i.e. have a statistically insignificant pooled effect size), the Malhotra and Elnakib systematic review found that school-based CCTs had the most definitive pattern of success in child marriage prevention.[269] These conflating findings may be attributed to several differences between approaches. First, the Malhotra synthesis includes a global review of child marriage interventions, whilst this study examined the South Asian context only; specific cultural norms and practices may contribute to the difference in findings. Moreover, the systematic review did not include a meta-analysis so did not examine the pooled statistical significance of education CCTs. The present meta-analysis provides a more granular analysis of the efficacy of different conditionalities for cash transfers in relation to reducing child marriage, as it enabled a comparison of effect sizes for CCTs with and without the condition for remaining unmarried for the receipt of transfer.

7.3 How, and under which circumstances, interventions are effective, and barriers to effectiveness

Interpreted together, meta-analysis and meta-synthesis results provide insight into how different combinations of interventions can improve child marriage outcomes and highlight mechanisms and barriers for effectiveness. Evidence widely suggests that dominant social norms relating to child marriage, gender roles and the value of women and girls serve as a barrier to the effectiveness of other intervention types. This indicates that social norms are an important area to consider when implementing child marriage interventions, irrespective of the typology. Social norms interventions are most effective when they prioritise both breadth in terms of engaging stakeholders at various levels and depth of content, and require a balanced approach to employing context-sensitive messaging and strategies without being overly shaped by existing local norm structures and community hierarchies.

Interventions that combine social norms, empowerment and sexual and reproductive health components appear to have particularly strong effects. Safe spaces, mentors / girl leaders and life skills can be effective empowerment modalities for supporting girls to articulate their preferences and participate in decision-making, while increasing girls' knowledge and access to SRH rights can also contribute to reductions in child marriage. However, positive shifts in social norms which engage parents and communities to support delayed marriage were found to be essential in enabling these outcomes, which is perhaps why interventions addressing these three issues together appear to interact particularly well.

Interventions that strengthen girls' economic prospects and increase their human capital appear to be particularly effective in delaying marriage. This is a cross-cutting finding for different typologies, with positive child marriage outcomes for interventions that: support girls' economic empowerment; support participation in the labour market; provide incentives that give girls who remain unmarried a financial 'value'; support girls' academic attainment; and increase their earning potential. When girls are able to generate an income, or even where there is *potential* for this and an enabling environment to do so, child marriage rates are significantly reduced, whether this occurs through empowerment, education or income and economic strengthening initiatives. Moreover, the economic strengthening of girls appears to also support a shift in social norms relating to the value of girls, which may further support child marriage reductions.

While there is insufficient evidence to determine whether certain intervention approaches are ineffective for particular groups, it is clear that factors such as household income, location, age, and duration and intensity of intervention can impact the effectiveness of child marriage interventions. Findings highlight the importance of considering how wider characteristics have the potential to limit effectiveness of interventions in addressing child marriage, reinforcing the need to generate evidence in diverse contexts to effectively inform programme design. Moreover, emerging evidence suggests that self-initiated marriages may not be effectively addressed through existing approaches.

Unfortunately, there is a need for further evidence on the sustainability of child marriage interventions and their outcomes. It is promising that many programmes addressed in the review incorporated elements aimed at supporting sustainability and scale up, such as cost-analyses to enable sustained implementation in the future, or by incorporating plans for community (or government) uptake into the programme design and rationale.

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8 Implications for evidence generation and programming

The following reflections are shared based on findings from the meta-synthesis and meta-analysis. These draw on the evidence mapping and identified gaps to suggest areas where there is a need for investment in further research. They include suggestions for improvements to monitoring, evaluation and data gathering approaches that can strengthen evidence generation going forward. Finally, the reflections draw out implications for future programming including lessons learned and good practices identified, noting limitations in available evidence and the need for further research.

Based on the relatively small number of interventions per typology and the heterogeneity of interventions (in terms of implementation modalities, location, context, duration, intensity, etc.) it is not possible to provide concrete programming recommendations in terms of defining which types of intervention should be implemented in which context, when and how. However, high-level reflection have been provided based on findings in relation to good practice examples and barriers to effectiveness, and these should be considered when developing interventions targeting child marriage through the typologies examined in this meta-analysis and meta-synthesis.

8.1 Filling research gaps: Areas for further investment

- Increased focus should be placed on generating evidence for all intervention typologies, where a stronger evidence base would allow more concrete conclusions to be drawn and a greater disaggregation of results. Note that, in particular, education interventions and law and policy interventions had very limited inclusion within the meta-analysis.
- The sustainability of interventions should be embedded within all evaluation frameworks, and should be explicitly considered in both the write-up of intervention design (with clear consideration of intended sustainability of implementation and outcomes) and endline methodology to assess short and long term sustainability (i.e. evaluations should examine the extent to which intervention components could continue to be implemented following the end of the project, the extent to which outcomes were sustained over time, and barriers to sustained implementation and outcomes).
- Longitudinal studies / follow up studies should be carried out to understand the long term effectiveness and sustainability of interventions included within the meta-analysis and should be planned for ongoing and future interventions. Follow-up studies should assess:
  - The extent to which intervention components continue to be implemented at least 1 year following the official 'end' of intervention implementation;
  - The percentage of girls who participated in the intervention remaining unmarried until the age of 18 (which would require, as a minimum, a follow-up at the time of the youngest individuals in the cohort turning 18);
  - Intermediary outcomes / mechanisms that may or may not continue to contribute to sustained outcomes.
- Evaluations (whether single-or multi-component) should factor other drivers of child marriage that are not captured within the typologies through

which their intervention aims to prevent child marriage into methodology development, such as social and gender norms, structural inequality, girls' agency, or family poverty, to develop understanding of the interplay of different drivers of child marriage in the context of intervention delivery and effectiveness. Given the cross-cutting nature of social norms, particular attention should be given to ensuring that social norms are captured within data collection to understand this dynamic in the context of interventions across all typologies.

- Clear theories of change should be developed for all individual interventions targeting or measuring child marriage as a primary or secondary outcome, and evaluation methods should be designed (following the steps outlined below) to ensure that all elements of the ToC are uniformly (and if possible, quantifiably) captured, to support the assessment of the pathways and mechanisms from intervention to outcome. ToC for each intervention should include inputs, outputs and outcomes for each modality that is implemented through the intervention to identify an intended pathway to change for each component of the intervention.
- Findings from this meta-synthesis should be used to inform future evaluation designs and ToCs for interventions, to ensure that future evaluations systematically examine how and why certain intervention typologies or combinations may or may not be effective.
  - As an example, interventions assessing the impact of education interventions should have a stronger focus on the relationship between school attendance / access to education and marriage, employing the methods suggested below to support longitudinal assessment of this relationship and determine a causal (or bidirectional) pathway between these two outcomes. Education intervention evaluations should continue to measure access to schooling, education outcomes and potential / actual economic prospects that the education provides, to strengthen understanding of how, why and in what contexts interventions can be effective.
- Future evaluations should focus on understanding how key characteristics affect intervention outcomes, such as location, age, household circumstances, duration of intervention, baseline child marriage rates, etc.
- Future studies should place increased focus on understanding the dynamics of elopement / self-initiated marriages in the context of interventions.

8.2 Strengthening monitoring and evaluation to improve evidence generation

- UNICEF and other stakeholders should invest in rigorous, quantitative, baseline, midline and endline assessments in order to examine mechanisms for change using longitudinal data, utilising consistent quantitative methods and tools at all three team points to enable the analysis of change over time.
- Where possible, evaluations should include intervention and comparison /control locations.
- Baseline data collection should always be implemented prior to the intervention commencing.
- Quantitative measures should be developed to enable the computing of variables / data indicators relating to the following factors, as collection of these indicators would facilitate meaningful analysis relating to how and under what circumstances interventions do or do not change child marriage outcomes:
  - Intervention implementation and exposure (i.e. time period of implementation, frequency of exposure, intensity of exposure);
  - Hypothesised mechanisms or intermediary outcomes specific to the type of intervention being implemented (e.g. school enrolment and attainment, empowerment, social norms change);
  - Child marriage outcome (either average age at marriage or yes/no married at 18 years);
  - Confounding variables (key demographic characteristics, contextual factors, access to other programmes or interventions which may impact findings, other drivers of child marriage, etc).

- Evaluations should employ rigorous statistical analysis techniques and ensure that findings report effect sizes, statistical significance levels, confidence intervals and standard errors, to enable statistically-driven conclusions and to support the inclusion of evaluations in future meta-analyses.
- The collection of core indicators at baseline, midline and endline assessments would enable the implementation of more rigorous statistical methods such as structural equation modelling to understand longitudinal pathways, infer causal relationships, understand unique contributions of different intervention components to outcomes and control for confounding variables and contextual differences in evaluations.
- All quantitative evaluations should be complemented with sufficient qualitative data collection, with tools developed to meaningfully explore mechanisms and barriers to effective interventions, guided by ToCs and an evidence base on drivers of child marriage.
- To the extent possible, methods should be designed to ensure that the effectiveness of specific intervention components and intervention arms contribute to outcomes; where it is not possible to quantifiably disentangle multicomponent interventions, qualitative methods should be strengthened to capture perspectives relating to the contributions of different intervention components.
- To minimise input of evaluators (i.e. minimise level of requirement of primary data collection from external evaluators) and ensure cost-efficiency, all interventions should include clear, comprehensive, mixed-methods MEL frameworks, with adequate support provided to implementing partners to collect and manage such data.
- To the extent possible, evaluation designs should take into consideration potential adaptations to interventions during the evaluation period and methods should be designed to enable the assessment of how such adaptations contribute to outcomes.
- When planning adaptations to programming, relevant actors should take into consideration the potential impact that this will have on evidence generation and conclusions regarding the effectiveness of interventions:
  - To the extent possible, efforts should be taken to ensure the intervention implementation remains consistent through the evaluation period to support the intervention's evaluability;
  - Where intervention adaptations are necessary, the evaluation teams should be supported (through effective, ongoing communication on implementation outside of the core data collection periods and any necessary financial support) to adapt the ToC and evaluation methodology to capture and assess the impact of such changes (including, if necessary, an additional data collection phase to capture the status of outcomes immediately prior to changes).
- More broadly, to support long-term measurement of child marriage outcomes, UNICEF and UNFPA should support governments to strengthen administrative data systems to capture child marriage statistics and key demographic and contextual statistics on an ongoing basis.

8.3 Implications for future programming

Please note, this section has implications that have been drawn from the findings. Given the limited number of studies and diversity in modalities and contexts of implementation, it is emphasised that these suggestions should not be regarded as an indication that there are 'right' or 'wrong' approaches to implementation. Moreover, there might be numerous modalities of child marriage interventions that have previously been evidenced as effective but were not highlighted in this report, due to studies of these interventions not meeting the eligibility criteria for inclusion in this meta-analysis and meta-synthesis. Therefore, implications should be considered according to individual contexts, with consideration of the risks of implementation.

Recognising the value of economic strengthening interventions:

- Partners should continue to support government to include the package of tools, cash transfers particularly CCTs, which were found to be effective in delaying marriage, particularly where the transfer is conditional on marriage being delayed until 18. However, it is essential to acknowledge the associated risks of this approach, including ethical and implementation risks related to inadvertently excluding the most vulnerable girls and families who may have the hardest time fulfilling these conditions.
- Future interventions should learn from the good practice examples and support implementation of interventions that increase girls' human capital, remove barriers to their labour market participation, and contribute to an enabling environment through supporting norms change.
- When designing economic strengthening interventions, and particularly unconditional cash transfers, it is important to consider whether, in light of other contextually relevant child marriage drivers, these interventions may have the unintended consequence of supporting child marriage, for instance through enabling a family to provide a (larger) dowry.
- Context-specific understanding of drivers, including social norms and other barriers, is essential for designing cash transfer programs that empower girls and their families. Partners should consider integrating economic strengthening into comprehensive programming which addresses social norms and other key drivers to ensure that the change pathway between poverty alleviation and delayed marriage outcomes is not disrupted.
- Rigorous research is needed to thoroughly explore and unpack the impact pathways of traditional conditionalities. This should include an analysis of how various implementation mechanisms—such as payment frequency, recipient type (e.g., girl or parent), payment amount, and other factors—differentially influence child marriage as an outcome. More evidence is also required for integrated approaches, such as the cash plus as well as alternative strategies, that include behaviour change communication, nudges, or social contracts to better understand their effectiveness and potential impact.
- Interventions seeking to reduce child marriage by strengthening girls' opportunities to generate income and increase their human capital should ensure that the vocational and skills-based trainings are aligned with the economic opportunities and industries that are present in their local area. This may require targeting broader, structural income and economic strengthening interventions and engagement with diverse stakeholders (including at government and private sector level) and norms change interventions to increase the number and diversity of economic opportunities for girls in their area.
- Vocational and skills-based training should be accompanied by the provision and access to labour market opportunities, where possible, providing direct employment opportunities and ensuring girls enter the labour market following the training.
- Interventions targeting girls' labour market opportunities should also take into consideration the types of employment of other household members, and therefore the potential avenues of employment that family members are likely to be supportive of for girls.

Strengthening the link between education, including non-formal, and delayed marriage:

- UNICEF and partners should pursue strategies that go beyond improving school retention and attendance to promote educational outcomes (such as academic achievements, and acquisition of knowledge and skills). This could include through informal education, tutoring on academic subjects, vocational training and additional support to ensure girls are able to complete examinations. Crucially, existing evidence on which modes of education and learning are most effective for improving academic and learning outcomes should be considered when developing interventions that seek to prevent child marriage through this mechanism.
- Education and learning interventions should be designed with consideration of how the

intervention will support girls' access to economic opportunities, as this is the primary mechanism through which education interventions appear to yield the best results in marriage delay. Specifically, non-formal education should focus on skills-based training that will provide girls with knowledge and skills to enter the workforce and should therefore be tailored based on the employment opportunities available to girls in the local area, in order to increase the likelihood that this will lead to sustained positive outcomes.

- Interventions that use girls' participation in education and skilling opportunities to support wider interventions / access to other services, (i.e. those that combine education with other components, such as empowerment and SRH) should consider - and seek to mitigate - potential negative consequences of this, with particular focus on norms change to ensure parent and community receptiveness to girls' receipt of such interventions and any resulting behaviour change in girls.
- Education interventions should incorporate social norms components to increase acceptability of girls' participation in education amongst community and family members, and to minimise the likelihood of parents' opting for the marriage of daughters instead of prioritising their engagement in education. In particular, norms interventions should focus on addressing fears for girls' safety and sexual purity, increasing parents' recognition of the potential for education to lead to girls generating income, and targeting boys to reduce eve-teasing and harassment of girls who are in education. Other measures can also be implemented to ensure that families and community members do not remove girls from education or arrange their marriage as a means to ensure their safety. This could include providing transportation for girls from their homes to education facilities.

Engaging decision makers and empowering girls:

- UNICEF and partners should ensure that programme design is informed by a strong understanding of who influences decisions around marriage timing and that interventions target all relevant stakeholders; norms change should be embedded within interventions to ensure that parents and community members are receptive to any empowered behaviours displayed by girls.
- This should not diminish the importance of empowering girls themselves. Analysis of empowerment interventions suggest that girls can be the most determined advocates for changing their own marriage outcomes and, in some cases, those of their peers. Particular mechanisms that were shown to be effective in certain contexts included establishing safe spaces for girls, supporting girl mentors and leaders, providing life skills and promoting economic empowerment.
- Interventions aiming to support girls through empowerment should consider ensuring the availability of safe spaces for girls, which can be maintained as spaces following the end of programme implementation to support sustainability of the intervention.
- Interventions should consider establishing girl mentors and girl leaders as part of empowerment interventions, who can be used to support other girls with life skills and disseminate information and engage in norms change through activism in the local community. It is crucial for such an approach to support the establishment of positive relationships between girls and the community and to take steps to help ensure that community members respect and respond positively to girl leaders.

Creating an enabling environment through community engagement and social norms change:

- Across typologies, social norms that support child marriage emerged as a potential barrier which can undermine the effectiveness of other intervention types. UNICEF and partners should consider integrating norms change approaches and mechanisms for promoting community engagement into programmes' designs to mitigate this. Meta-analysis results suggest that social norms components have the potential to increase the effectiveness of empowerment interventions in particular.

- Messaging campaigns must be designed sensitively, tested in the communities where they will be used, and revisited throughout their implementation to ensure that they do not inspire backlash or reinforce counterproductive attitudes and practices.
- Social norms change interventions should be designed to maximise exposure and engagement; higher-intensity interventions that include direct engagement with a diverse range of stakeholders and community mobilisation appear to achieve better results than broad media campaigns.
- The finding that engaging women in norms change interventions to shift decision-making in the home and prevent child marriage led to increases in gender based violence highlights the need for intervention design to prioritise minimising the risk of unintended, potentially negative consequences, and ensuring adequate safeguarding measures are in place to address any risks faced by women and girls in the community during and following intervention exposure.
- Interventions should also seek to avoid inadvertently reinforcing discriminatory gender norms (for example, avoiding reinforcing that it is the responsibility of men in the community to protect girls, thus reinforcing the notion that girls are weak and need protection).
- Social norms interventions should consider the specific norms that are most likely to yield positive effects in terms of delaying marriage; findings indicate norms change in relation to the acceptability of marriage, the importance of girls' participation in education, and girls' income-generating prospects may lead to more positive outcomes than interventions aiming to shift norms in relation to gender roles. Other messaging that might be particularly effective in reducing child marriage include those which focus on negative health implications of child marriage and childbirth, mental health and religion.
- Interventions and future evidence generation should focus on understanding the mechanisms through which norms change interventions can have spillover effects to non-intervention villages, in order to maximise reach.
- Interventions should target families when girls are younger, before girls reach the age of menarche, rather than waiting until girls are nearing the age at which marriage is considered.
- Norms change interventions should ensure that men are directly targeted, given that they are often the primary decision-makers in the household. Interventions should also focus on modalities that support community discussions and dialogue, and should ensure that influential individuals in the local community are actively engaged in the dissemination of positive social norms to prevent child marriage.

Advantages of an integrated approach to adolescent SRH programming:

- Programming that provides knowledge and information on SRH fills a crucial gap, and was highly valued by adolescents for this reason;
- Evidence from the meta-analysis suggests that SRH components can increase the effects of other typologies. In particular, programmes including social norms, empowerment and SRH components were found to have larger effects than those achieved by distinct SRH or empowerment interventions. Future initiatives should therefore consider embedding SRH components within girls' empowerment interventions, given that this combination of intervention yielded particularly high effect sizes in the meta-analysis.
- Furthermore, given the sensitivity and even stigma around SRH topics in some South Asian contexts, embedding SRH interventions into a broader programme may reduce resistance to these interventions. However, consideration should be taken to implementing interventions that recognise sensitivities of SRH interventions, and seek to mitigate potential negative repercussions of SRH interventions, including by addressing social norms alongside SRH to ensure receptiveness.
- Interventions addressing SRH should take efforts to ensure that individuals tasked with implementing support on the ground are invested in the programme and ensure that their values align with that of the programme, and that

implementors do not hold negative bias against SRH, to help ensure effective implementation.

Limitations of law and policy interventions as a standalone approach to ending child marriage:

- Given the limited evidence, it is difficult to draw conclusions about good practice approaches to law and policy programming. Available evidence suggests that in the current South Asian context these interventions are unlikely to succeed in preventing child marriage when implemented in isolation.
- Given the finding that loopholes can impact the effectiveness of implementing child marriage laws and that poor law enforcement is a key barrier to successful prevention of child marriage, establishing a clear legal framework for marriage timing and mechanisms for enforcement are essential to protecting children's rights. However, UNICEF and partners should view these as complementary to other areas of programmatic work, at least in the short term.
- Future law and policy interventions should focus on mechanisms to ensure that laws are enforced, and stakeholders are held accountable to laws, particularly influential individuals in communities and individuals working in law enforcement.

Widespread and sustainable programming:

- There should be wide-spread programming / piloting across countries and in different contexts in order to generate more knowledge about what works, how, for whom, when and why; in particular, interventions should be piloted in regions with higher child marriage rates where there appears to be limited programming and evidence generation (i.e. all countries with the exception of Bangladesh, India, and to a certain extent, Nepal).
- As outlined above, strengthening data collection methods in existing programme locations will also support evidence generation to provide insight relating to contexts and characteristics that can impact intervention effectiveness, which can help inform programming in similar contexts.
- Interventions should be designed with consideration of how implementation and impact can be sustained, for example by:
  - Incorporating cost-benefit analyses / return on investment within evaluations to present the case for long-term funding of interventions.
  - Ensuring components of interventions are designed to have long-lasting impact upon the end of project funding (learning from good practice examples such as community capacity building, training girl agents of change, establishing safe spaces within readily-available facilities that can be used after project ends, etc.).
  - Placing emphasis on evaluations examining long-term sustainability of interventions and outcomes, to ensure greater availability of resources for learning and future intervention development.
  - UNICEF and NGOs should work to ensure government and other stakeholder buy-in to ensure long-term resourcing of child marriage intervention components that demonstrate positive results.

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Endnotes

1 This question was only answered where evidence on sustainability and scalability was available within evaluation reports.

2 BMJ, The PRISMA 2020 statement: an updated guideline for reporting systematic reviews, 2021.

3 Based on a meta-analysis of three studies, meaning conclusions should be interpreted with caution.

4 This is the definition used by the United Nations, and is consistent with the UN Convention on the Rights of the Child.

5 UNICEF, A profile of child marriage in South Asia, May 2023.

6 UNICEF, A profile of child marriage in South Asia, May 2023.

7 ibid.

8 ibid.

9 Gaston, C., et al., 'Child marriage mong boys: a global overview of available data,' *vulnerable children and youth studies,* 14:3, 2019, 219-228.

10 UNICEF, A profile of child marriage in South Asia, May 2023.

11 United Nations Children's Fund and United Nations Population Fund, Child Marriage in South Asia: An evidence review, UNICEF, Kathmandu, 2019

12 UNFPA-UNICEF Global Programme to Accelerate Action to End Child Marriage Phase I 2016-2019 Report, August 2020, Available at: https://www.unicef.org/media/83516/file/Child-marriage-annual-report-2019.pdf

13 UNFPA-UNICEF Global Programme to Accelerate Action to End Child Marriage, Joint Evaluation Report, May 2019.

14 UNICEF-UNFPA Global Programme to End Child Marriage, Phase II Programme Document 2020-2023, November 2019. Available at: https://www.unicef.org/media/69671/file/GP-2020-Phase-II-Programme-Document-ENG.pdf

15 UNICEF-UNFPA Global Programme to End Child Marriage, Phase II Programme Document 2024-2030, August 2019. Available at: https://www.unicef.org/media/145651/file/Programme%20document%20.pdf

16 ibid

17 Plesons et al, 'Updated research gaps on ending child marriage and supporting married girls for 2020-2030.' *Reproductive Health,* 18(152), 2021.

18 For information regarding the eligibility criteria, see section 4.4.1.

19 Note, section 5.1 outlines that only three UNICEF studies met the criteria for inclusion, meaning that the majority of interventions included in this meta-analysis and meta-synthesis are non-GPECM interventions.

20 See for example: Plan International and Coram Children's Legal Centre, Getting the Evidence: Asia child marriage initiative, Plan International, London, 2014.

21 See for example: A. Sengupta, S. Sood, N. Kapil, and R. Advisor, "Enabling Gender Norm Change Through Communication: A Case Study of A Trans-Media Entertainment-Education Initiative in Bangladesh," *Journal of Development Communication*, vol. 31, no. 2, 2020.

22 See for example: R. Jensen, "Do labor market opportunities affect young women's work and family decisions? Experimental evidence from India," *Quarterly Journal of Economics*, vol. 127, no. 2, pp. 753–792, May 2012, doi: 10.1093/qje/qjs002.

23 E.g. Nepal MICS 2019, p.394; UNFPA and the Department of Population Sciences, Context of Child Marriage and its Complications, 2018, p.97.

24 Musaddiq and Said, Educate the girls: Long run effects of secondary schooling for girls in Pakistan, *World Development* (161), 2023.

25 Hahn, Islam, Nuzhat, Smyth & Yang, Education, marriage, and fertility: Long-term evidence from a female stipend program in Bangladesh. *Economic Development and Cultural Change, 66(2)*, 2018, pp. 383–415.

26 Nanda, Das, Datta et al. *Making Change with Cash? Impact of a Conditional Cash Transfer Program on Girls' Education and Age of Marriage in India*, 2016.

27 Halda, *Empowering Adolescent Girls Through Land: A Public-Private Partnership in West Bengal, India*, 2014.

28 Field, Glenner, Latif et al. *Age at marriage, women's education and mother and child outcomes in Bangladesh*, 2016.

29 Scott, S., Nguyen, P. H., Neupane, S., Pramanik, P., Nanda, P., Bhutta, Z. A., Afsana, K., Menon, P. Early marriage and early childbearing in south Asia: Trends, inequalities, and drivers from 2005 to 2018.Annals of the New York Academy of Sciences, 2020; Raj, A., 'Cross-sectional time series analysis of associations between education and girl child marriage in Bangladesh, India, Nepal and Pakistan, 1991 – 2011, PLOS ONE, 9(9), September 2014.

30 UNICEF and UNFPA, GPECM Theory of Change, South Asia, [internal document] 2019.

31 IEG World Bank, *Do Conditional Cash Transfers Lead to Medium-Term Impacts? Evidence from a female school stipend program in Pakistan*, 2011.

32 Dey and Ghosal, Can Conditional Cash Transfer Defer Child Marriage? Impact of Kanyashree Prakalpa in West Bengal, India, Warwick Economics Research Papers [Working Paper], 2021.

33 Prakesh et al. The Samata intervention to increase secondary school completion and reduce child marriage among adolescent girls: results from a cluster-randomised control trial in India, Journal of Global Health, 2019.

34 N. Buchmann, E. Field, R. Glennerster, S. Nazneen, X. Y. Wang, and L. Barisal, "Financial Incentives and an Adolescent Empowerment to Reduce Child Marriage in Rural Bangladesh Researchers: Fieldwork: Innovations for Poverty Action (IPA)," 2022.

35 See for example, the BALIKA programme and its scale up in Bangladesh.

36 See for example interventions discussed in: UNICEF, "The Turning Point: Transformative actions for ending child marriage in India", Global Programme to End Child Marriage, 2022.

37 UNFPA and the University of Dhaka Department of Population Sciences, Context of Child Marriage and its Complications, in Bangladesh, 2017, p. 8.; Evidence synthesis background paper 24 April 2023.

38 UNICEF-UNFPA GPECM, Seven Steps to Strengthening Legislation, Policy and Public Financing to End Child Marriage, Juily 2020.

39 UNFPA-UNICEF Global Programme to End Child Marriage 2021 Annual Results Report, 2021.

40 ibid.

41 Amirapu, Asadullah and Wahhaj, *Can Child Marriage Law Change Attitudes and Behaviour? Experimental Evidence from an Information Intervention in Bangladesh*, University of Kent, School of Economics Discussion Papers, 2020.

42 This question was only answered where evidence on sustainability and scalability was available within evaluation reports.

43 BMJ, The PRISMA 2020 statement: an updated guideline for reporting systematic reviews, 2021.

44 To pool dichotomous and continuous variables, statistical approaches must be applied to convert between them, and these are subject to several assumptions that may not hold in certain contexts.

45 *Cochrane Handbook for Systematic Reviews of Interventions.* Chapter: Random-effects (DerSimonian and Laird) method for meta-analysis. Version 6.4, 2023.

46 See for example: Malhotra, A. and S. Elnakib, 20 years of the evidence base on what works to prevent child marriage: A systematic review. Journal of Adolescent Health, 2021.

47 No studies were identified in Sri Lanka.

48 CCTs are a modality that falls under the income and economic strengthening typology, and so CCT study numbers also contribute to the total numbers for income and economic strengthening. As this modality of income strengthening yielded a large number of studies, a decision was taken for this to be included as a standalone category.

49 Annex A presents the in-depth results.

50 See for example: Plan International and Coram Children's Legal Centre, Getting the Evidence: Asia child marriage initiative, Plan International, London, 2014.

51 A number of studies which consider the impact of child marriage programming on relevant attitudes and norms were excluded from the meta-synthesis and meta-analysis because they did not measure child marriage outcomes.

52 95% CI = -0.1269 to -0.0022 and p<0.0426

53 See section 4.4.2 for an explanation of the heterogeneity and the implications for interpreting meta-analysis findings.

54 ES = percentage point difference effect size; SE = Standard error; CI = Confidence interval; for definitions, see 'reporting measures' in section 3.4.2.
Significance codes: ***very high statistical significance (p-value < 0.001), **high statistical significance (p-value < 0.01), *moderate statistical significance (p-value < 0.05).

55 Avdeenko, A., & Frölich, M., Improving Adolescent Lives in Pakistan (2015-2019): An Impact Evaluation, 2022.

56 See for example: Clark, C. J., Jashinksy, K., Renz, E., et al., 'Qualitative endline results of the tipping point project to prevent child, early and forced marriage in Nepal,' Global Public Health, 18(1), 2023; Bennett, C., It's Her Turn: Short-term and mid-term impact evaluation of Her Turn programming, People in Need, 2017.

57 Clark, C. J., Jashinksy, K., Renz, E., et al., 'Qualitative endline results of the tipping point project to prevent child, early and forced marriage in Nepal,' Global Public Health, 18(1), 2023.

58 See for example: Sengupta et al. (2020), Clark et al. (2023), Bennett C. (2017), UNICEF Afghanistan (2021), Raghunathan et al. (2011).

59 Raghunathan N., et al., Can media campaigns change attitudes and spark actions to reduce early child marriage? Impact evaluation of breakthrough's early marriage campaign in Jharkhand and Bihar states of India, 3IE Grantee Final Report, New Delhi, 2011.

60 Bennett, C., It's Her Turn: Short-term and mid-term impact evaluation of Her Turn programming, People in Need, 2017, 24.

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