























#### UGANDA

## **COUNTRY PROFILE**

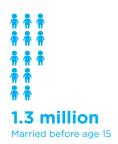
# Uganda is home to 5 million child brides. Of these, 1.3 million married before age 15.

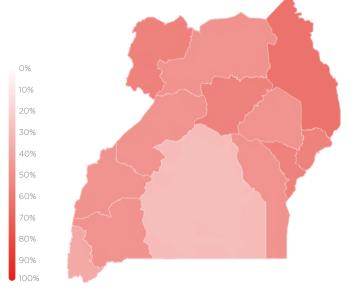
Source: UNICEF global databases, 2020. Demographic data are from United Nations, Department of Economic and Social Affairs, Population Division (2019). World Population Prospects 2019, Online Edition. Rev. 1.

Notes: For details on the calculation of girls and women married in childhood, see: United Nations Children's Fund, Child Marriage: Latest trends and future prospects, UNICEF, New York, 2018. Estimates refer to population year 2019. Values below 2 million are rounded to the nearest hundred thousand; those above 2 million are rounded to the nearest million.



## **5 million**Married before age 18





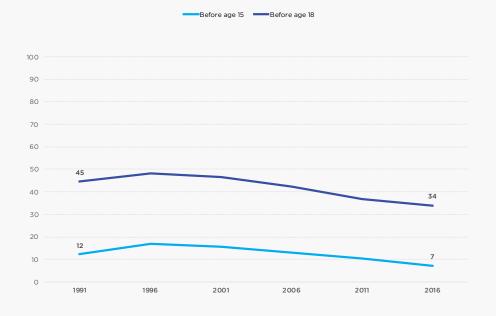
#### Percentage of women aged 20 to 24 years who were first married or in union before age 18

Note: This map is stylized and not to scale. It does not reflect a position by UNFPA or UNICEF on the legal status of any country or area or the delimitation of any frontiers. Source for child marriage prevalence data is the Uganda Demographic and Health Survey 2016.

#### Percentage of women aged 20 to 24 years who were first married or in union before age 15 and before age 18

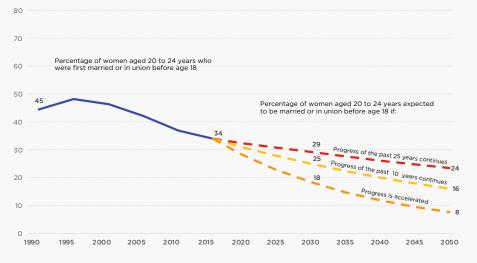
Source: Uganda Demographic and Health Survey 2016

Note: This trend analysis is based on the prevalence of child marriage across age cohorts, as measured in the latest available survey.



#### Projections of the prevalence of child marriage

Source: UNICEF analysis based on the Uganda Demographic and Health Survey 2016



# Message from UNFPA and UNICEF Uganda country representative



**Alain Sibenaler**UNFPA Uganda country representative

In Uganda, 8.9 million girls aged 10–19, especially those that live in the rural areas, and among the less educated and low income households are at risk of harmful practices, including child marriage and female genital mutilation.

Thirty four per cent of women aged 25—49 were married before the age of 18, according to the Uganda Demographic and Health Survey 2016.

Child marriage increases the risk of teenage pregnancy, which can have a profound effect on the health and lives of young women and contribute to high fertility rates.

Current evidence shows that 25 per cent of the 1.2 million pregnancies recorded in Uganda annually are from teenage mothers, with more than 300,000 pregnancies ending in unsafe abortions. While these statistics are gloom, only 1 in 5 (21 per cent) of girls aged 15—19 are currently using any modern contraceptive method, and the risks of maternal death are even higher among teenage mothers, about 28 per cent.

Child marriage violates the basic rights of girls and women. It is rooted in social and gender inequality and a desire to control women's bodies and lives.

We all know that child marriage harms and violates girls' and women's bodies, but it does not stop there, it denies them the ability to enjoy many other rights, e.g. the right to education which undermines their prospects for entering the paid labour force and gaining economic self-sufficiency; healthy relationships, the freedom to choose whom and when to marry, when to get pregnant and how many children to have; and to stay safe from sexually transmitted infections.

The Global Programme to End Child Marriage, supported by UNFPA and UNICEF, ensured the delivery of an integrated package of right-based services for girls and women; fostering an environment where society takes steps towards respecting and protecting the rights of girls and women. We begin to see a change in attitudes and practices that perpetuate inequality of girls and women.

In addition, UNFPA advocated for the Government of Uganda to fulfil their obligations to implement legislation and policies to eliminate child marriage, promote rights- and equity-based services. In the coming years, UNFPA will exert all its energies to supporting the government implement the 2019 Nairobi Summit (the International Conference on Population and Development) commitments: ensuring universal access to all family methods, operationalize the National Sexuality Education Framework and follow-up to the commitment to allocate 10 per cent of the maternal health budget towards adolescent reproductive health services.



**Doreen Mulenga**UNICEF Uganda country representative

Child marriage is a painful reality for far too many girls in Uganda. Driven by the scourge of family poverty and norms that favour boys over girls, child marriage renders girls less likely to complete their education and more likely to experience gender-based violence. Unfortunately, many of the girls who are most at risk for child marriage are often those who are hardest to reach.

Phase I of the Global Programme has been working to change the conditions that have allowed child marriage to persist in Uganda. The programme has focused on empowering adolescents and caregivers as duty-bearers and rights-holders, while partnering with national and local governments, civil society organizations, and private-sector partners to build a scalable and sustainable cross-sectoral protection system.

The Global Programme has used community mobilization to engage parents and caretakers in addressing the social norms that drive both child marriage and low educational attainment for girls. The Go-Back-to-School campaign, for instance, increased the enrolment and re-enrolment of both child mothers and girls with disabilities, while providing training in parenting skills, family care practices, and life skills for adolescents.

At the systems level, the Global Programme has focused on implementing key policies and strategies in Uganda that were developed to create an enabling environment for the empowerment and protection of girls. Uganda's National Framework on Sexuality Education, the Multi-Sectoral Framework for Adolescent Girls, the Violence Against Children in School Strategy, the Reporting, Tracking, Referral and Response guidelines for crosssectoral case management, the National Strategy for Girls Education, and the Presidential Initiative on AIDS Strategy for Communication to Youth, are all being used to shape Uganda's nascent but growing protection system. Data analysis and evidence generation, meanwhile, have been used for policy dialogues and advocacy on the urgent need to invest more resources in the wellbeing of Uganda's adolescent girls to ensure greater access to education, healthcare, and employment opportunities.

We have far to go before we reach our goal of eliminating child marriage once and for all. But we are far from where we began. The Global Programme has been a spark for real change in communities across Uganda. For the many girls who are flourishing because of it, that spark has meant the world.

Country movement to accelerate action to end child marriage: Key moments and achievements of Phase I

In Phase I, the Global Programme in Uganda deepened partnership with the government to accelerate action to end child marriage and provided data and evidence with advocacy to promote policy change and legal reform at various levels.

Significant achievements in Uganda since the inception of the Global Programme include:

# 346,526 adolescent girls aged 10-19

have participated

in at least one programme intervention aimed at empowering them will skills and information to delay child marriage.

Among these,

#### 16,267 girls

have been supported to join and access loan facilities from savings and credit societies to enhance their economic opportunities.

A total of

61,293 parents

were engaged and equipped

with positive parenting skills and knowledge on adolescent development to address child marriage.

# 40,706 adolescent girls aged 10-19

have been supported

to enrol in and continue with their education in order to delay child marriage. Within the targeted programme areas, the enrolment of girls in primary schools has increased by



7.2 per cent compared to a 5.7 per cent increase among boys.

This has led to the gender parity index increase to 101.93 compared to 99.6 at baseline in 2015.

99.6

The percentage point difference in exam-pass rates (primary leaving examinations) between boys and girls in programme areas has decreased from

4.2 per cent in 2015 to 3.5 per cent in 2019.

# 560,182 individuals in the community

were engaged and regularly participated

in dialogues promoting gender equitable norms including delaying child marriage.

Over

#### 1.5 million people

in programme areas were also reached with media campaigns on the need to end child marriage.

7,894

parents, political and cultural/ traditional leaders and community members

have signed pledge cards and made public declarations as commitments to support initiatives aimed at ending child marriage in their communities.

# 219,904 adolescent girls aged 10-19

accessed health or protection services

including HIV testing, antenatal care, family planning as well as maternity services in the programme areas.

# 40 district local governments

have included child marriage in their District Development Plans, with

#### 15 districts

establishing dedicated budget lines for child protection issues including child marriage. Among the countries supported by the Global Programme,

#### **Uganda**

was the first to complete a mid-term

of their national strategy to end child marriage and teenage pregnancy, a review which was supported by the programme.



#### **Phase I Country Programme Strategies**

Phase I of the Global Programme in Uganda focused on leveraging and linking the programme to existing strategies, framework and guidelines which aimed at contributing to ending child marriage in the country. The main strategies and action plans related to ending child marriage in Uganda include the National Strategy to End Child Marriage and Teenage Pregnancy; the National Framework for Adolescent Girls in Uganda, the Multisectoral Communication for Development Strategy for Adolescent Girls; the Reporting, Tracking, Response and Referral and Parenting Guidelines; the Key Family Care Practices Toolkit; and the National Sexuality Education Framework, among others. All of these form an overarching framework within which implementation of initiatives aimed at ending child marriage is guided to achieve strategic results.

Uganda has the sixteenth highest prevalence of child marriage in the world, and tenth highest absolute number of child brides totalling to an estimated 4 million. Current statistics indicate that 34 per cent of women are married before the age of 18 and 7.3 per cent before the age of 15. The rate of teenage pregnancy among adolescent girls aged 15-19 years is 25 per cent (Uganda Demographic and Health Surveys 2011 and 2016). The Global Programme focused on dissemination of national strategies and action plans to catalyse country-wide information-sharing, community sensitization and consensus building around ending child marriage, and garnering support for countrywide implementation of the Global Programme. With the support of the programme, the National Strategy to End Child Marriage and other strategies were disseminated and implemented in 55 out of 120 districts with high child marriage prevalence levels in the country. During the reporting period, 40 out of 55 districts (including Abim, Adjumani, Agago, Amudat, Amuria, Amuru, Arua, Bukwo, Gulu, Iganga, Kaabong, Kamuli, Kapchorwa, Katakwi, Kitgum, Kotido, Lamwo, Moroto, Nakapiripirit, Napak, Bundibugyo, Buyende, Isingiro, Jinja, Kabale, Kagadi, Kakumiro, Kaliro, Kasese, Kibaale, Kween, Kyegegwa, Kyenjojo, Luuka, Mayuge, Namayingo, Ntungamo, Rubanda, Rubirizi and Wakiso) developed and implemented subcounty-level action plans.

In addition, the Global Programme focused on strengthening local capacities and building alliances and partnerships with Girls Not Brides and White Ribbons, among others, whose membership spans over 120 civil society organizations each, to contribute to outcomes aimed at ending child marriage. The partnerships also aimed to build and strengthen the capacity of the social protection workforce, police and para social workers to identify, refer and link adolescents at risk of marriage to available services in the communities. They also report and follow-up cases in the communities.

Phase I also focused on data generation, analysis and use. For evidence-based advocacy, policy frameworks and dialogues were sustained with government and parliamentarians, including technical support to strengthen existing laws, at national and district levels.

Strategies employed in Phase I to achieve the objectives of the Global Programme include empowerment and capacity-building of right holders (adolescent girls and boys) and duty-bearers (parents and caregivers, and implementing partners), training of relevant stakeholders at different levels, provision of livelihood skills and access to sexual and reproductive health services, referral to other services and sustained evidence-based advocacy and community engagement and dialogues, strengthening partnerships, knowledge management and evidence generation. This contributed to positive changes in institutional performance, beliefs, behaviours and practices influencing child marriage, and, ultimately, led to a change in the status of adolescents' girls and boys, which demonstrates direct links to the outcome and impact results of the Global Programme.

During the reporting period, UNFPA and UNICEF shifted towards a more systematic approach to preventing and responding to child marriage through engaging with national and local level government, as well as civil society and private sector partners, to build a scalable and sustainable cross-sectoral protection system.



# OUR REACH: EMPOWERING ADOLESCENT GIRLS WITH SKILLS AND INFORMATION

#### In 2019:



**135,690** adolescent girls aged 10-19

in programme areas actively participated in at least one targeted intervention

#### Since 2016:



346,526

adolescent girls aged 10-19

in programme areas have actively participated in at least one targeted intervention

#### Results from 2016–2019 programme implementation

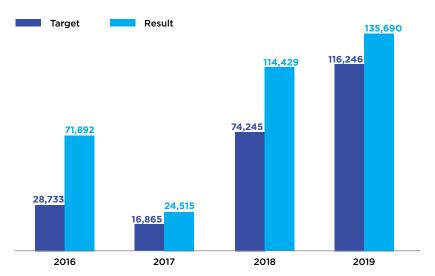
The Global Programme, using some of the 5,984 peer educators and mentors trained, leveraged this initiative to reach adolescent girls directly with life-skills education in some of the newly established safe spaces and school clubs. The empowerment and livelihood programme for adolescents (ELA) model was an integrated approach to health care, encompassing a reproductive health programme for girls (10–19 years) including sessions on livelihoods and economic empowerment.

A total of 346,526 adolescent girls (aged 10-19) in 40 out of 55 districts with a high prevalence of child marriage, participated in various empowerment interventions, including life-skills training and financial literacy training, which enhanced their capacity to express their opinions, as well as engage duty-bearers and decision makers. This approach created economic opportunities and empowerment for girls, including support for 16,267 girls to join and access loan facilities from savings and credit societies, which enhanced their economic opportunities and enabled them to pay school fees.

Adolescent-friendly tools, such as the Animated Menstrual Hygiene Management Tool, among others, were developed to ensure access to age-appropriate information. The ELA clubs provided girls with life skills (assertiveness, self-esteem, self-awareness, critical and creative thinking) necessary for managing sexuality-related challenges. Data analysis during the 2017 annual reporting period showed evidence of gender transformation taking place within the programme. The proportion of ELA graduates aged 15–19 years in the targeted areas who have control over their earnings was 80 per cent, compared to the Demographic and Health Survey 2011 national average of 74.6 per cent for the same age group.

The mid-term evaluation of the National Strategy to End Child Marriage and Teenage Pregnancy revealed that a significant majority of adolescents feel confident that they can refuse sex if they do not desire it (92.6 per cent). Similarly, 90.9 per cent said they feel confident that they will be able to marry when they want and at the right time.

Number of adolescent girls (aged 10-19) in programme areas actively participating in at least one targeted intervention



#### Challenges

The patriarchal nature of the Ugandan society, gender stereotypes and deeply rooted social norms influencing child marriage persist, especially in rural communities, impeding acceptance of well-meaning interventions for adolescent girls at risk of and/ or affected by child marriage. An example is the negative perceptions by teachers on involvement of boys in menstrual hygiene management training, which deprives adolescent boys of the opportunity to learn about and understand the development needs of adolescent girls and how to support them, thus perpetuating gender stereotypes. Many families in districts such as Napak and Moroto shifted and resettled in hard-to-reach areas without basic social services such as schools and health facilities, making it difficult to reach them and sustain programme interventions for adolescent girls.

#### Lessons learned

Life skills and sexual and reproductive health skills are insufficient to delay marriage if not complemented by livelihood opportunities and incentives for schooling. Addressing poverty and providing economic opportunities for women and girls is critical in ending child marriage. Empowerment of adolescents, leveraging partnerships and linking adolescents to livelihood programmes such as Girls Empowering Girls and Skilling Uganda, among others, will be strengthened and prioritized in Phase II.

#### Shifts in Phase II

Phase II of the Global Programme will focus on strengthening the protection system to ensure a comprehensive approach to the participation of adolescent girls in programmes targeting them and to promote ownership, sustainability and achievement of better outcomes for adolescent girls.

The use of various platforms will be supported to mobilize and engage out-of-school adolescent girls and boys on key issues around gender. An integrated and costed national communication for development strategy will be disseminated and implemented, incorporating an adolescent multimedia campaign and youth advocacy strategy. There will be training for inschool and out-of-school adolescent girls and boys (in development and humanitarian contexts) on life skills and youth empowerment and linkages and referral to adolescent-friendly services.

Participation of adolescent girls and boys will be facilitated in relevant national and international fora, including South-South cooperation/learning events. Sexual and reproductive health and rights will be integrated into the proven, at-scale ELA programme, and UNFPA will continue to implement the ELA clubs through financial literacy, peer mentorship, adolescent health promoters and girls' clubs. Linkages to health service access will also be strengthened for the participants. One-hundred ELA clubs of 30 people each will be supported in Phase II, with at least 10 clubs in refugee-hosting districts.



# EMPOWERING GIRLS THROUGH EDUCATION SUPPORT

In 2019:



23,108

adolescent girls

in programme areas supported to enroll and/ or remain in primary, lower secondary or nonformal education

#### Since 2016:



40,706

#### adolescent girls

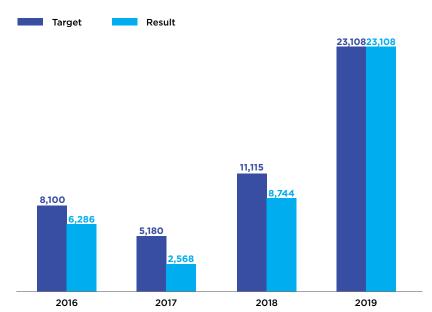
in programme areas supported to access and remain in primary or lower secondary school or non-formal education

# Results from 2016–2019 programme implementation

The development of education sector policies and strategies contributed to improved access to quality education for all girls, ensuring a safe and supportive learning environment, empowerment of learners with life skills and finalization of the school health and national sexuality education framework. The 'Go Back to School' campaigns at community level, and involvement in ELA platforms, also contributed to an increase in enrolment and re-enrolment at both primary and lower secondary school levels, with a focus on out-of-school adolescent girls, child mothers and girls with disabilities.

As a result of the interventions, 40,706 adolescent girls were supported to enrol, re-enrol and/or remain in school. Anecdotal evidence indicated a high incidence of child marriage in both refugee-hosting communities and refugee settlements as girls are seen as economic assets from which families can gain wealth in the form of 'bride price' paid upon marriage. Among those benefitting from the programme were 8,744 girls who had dropped out of school but were reintegrated back to school, and 24,602 adolescent girls in refugee-hosting districts and in refugee settlements in the Global Programme districts who were able to access accelerated learning programmes, livelihood and life-skills programmes. 31,350 parents and caregivers signed pledges of commitment to provide support for their adolescents' charges to complete school, specifically by providing for scholastic and other needs and protecting their girls from child marriage and all other forms of violence.

Number of adolescent girls in programme areas supported to access and remain in primary or lower secondary school or nonformal education



#### Challenges

There are increasing numbers of child mothers and teenage pregnancies in some communities, which can limit girls' participation in programmes designed for them such as livelihood and empowerment programmes and opportunities. The distance between some schools and communities results in many children leaving school early (lunch time) to be able to return home early.

This is worsened by poor, or lack of, food in schools, hence affecting the ability of adolescent girls to effectively participate in school programmes designed for in-school girls. Other challenges include continued hostility between host communities and refugee settlements, which result in poor learning and school dropout, leading adolescent girls to consider marriage as the next option.



#### Lessons learned

The 'Go Back To School' campaign has the potential to achieve outcomes for adolescent girls if the programme approach is boosted with a comprehensive package that addresses underlying factors that keep adolescent girls out of school in the first place. In many cases, this will include parents' inability to provide basic requirements and materials needed by the adolescent girls while at school, such as scholastic materials, sanitary pads and food.

#### Shifts in Phase II

The programme will focus on strengthening partnerships to leverage support, commitments and capacity at all levels to create a protective environment for adolescent girls. Formal (primary and secondary) and non-formal schools are supported to provide quality, gender-responsive education for adolescent girls, including comprehensive sexuality education.

Access to formal and non-formal education for adolescent girls will be supported, including community outreach on 'Go To School', 'Back To School' and 'Stay In School' campaigns; and safe school and violence-free school initiatives for adolescent girls, including menstruation hygiene management and life-skills training.

Roll-out of the school-based comprehensive sexuality education framework will be supported in selected primary and secondary schools, and vocational and tertiary institutions in the supported districts. This includes supporting the development of comprehensive sexuality education implementation guidelines and learning materials, engagement with and orienting district education stakeholders and disseminating comprehensive sexuality education to learners through school clubs, and mentorship with girls in upper primary and lower secondary school.

## SOCIAL AND BEHAVIOURAI CHANGE OMMUNICATION O INFLUENCE OCIAL AND GENDER NORMS

#### In 2019:



55,568

#### individuals

in programme areas regularly participated in dialogues promoting gender-equitable norms including delaying child marriage



within programmes were reached with media campaigns to end child marriage

#### Since 2016:



560,182

#### individuals

in programme areas have regularly participated in dialogues promoting gender-equitable norms including delaying child marriage

#### Results from 2016-2019 programme implementation

A total of 560,182 people (men, women, boys and girls) was reached through sustained community dialogues in 39 districts. Of these, 61,293 was parents engaged in and equipped with positive parenting skills and knowledge on adolescent development.

In addition, the 'Adolescent Voices' media campaign provided an opportunity for adolescent participation in ending child marriage programmes through voicing of their dreams and concerns. In total, 1,485,744 people participated in media campaigns to promote gender-equitable norms including delaying child marriage.

At local government and community levels, child marriage is gradually being recognized as a human rights violation that impedes development of adolescent girls, and steps are being taken to address this violation by developing and amending existing ordinances and integrating 'end child marriage' initiatives into district local government development plans. The inter-religious council committed to support programmes to end child marriage and unanimously issued a communiqué denouncing the practice during Phase I.

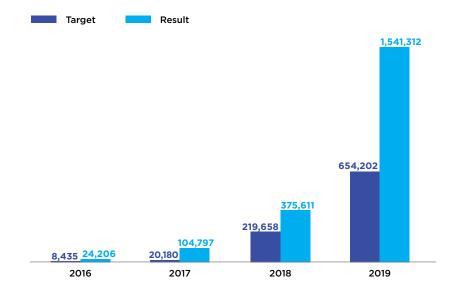
In communities where child marriage is a norm and would never be reported as violence, communities are increasingly reporting and foiling marriages involving children, and publicly declaring their support to initiatives aimed at ending the practice and at keeping their girls in school. For example, during 2019, a total of 269 cases of child marriage were reported by community members through calls to the Child Helpline compared to 362 cases in the previous two years, with an additional 400 cases recorded in the national gender-based violence database. In addition, 7,894 parents, political and cultural/traditional leaders and community members signed pledge cards and made public declarations as a commitment to support initiatives aimed at ending child marriage in their communities, to sending and keeping their adolescent girls in school and providing necessary materials and menstrual hygiene supplies for their adolescent girls.

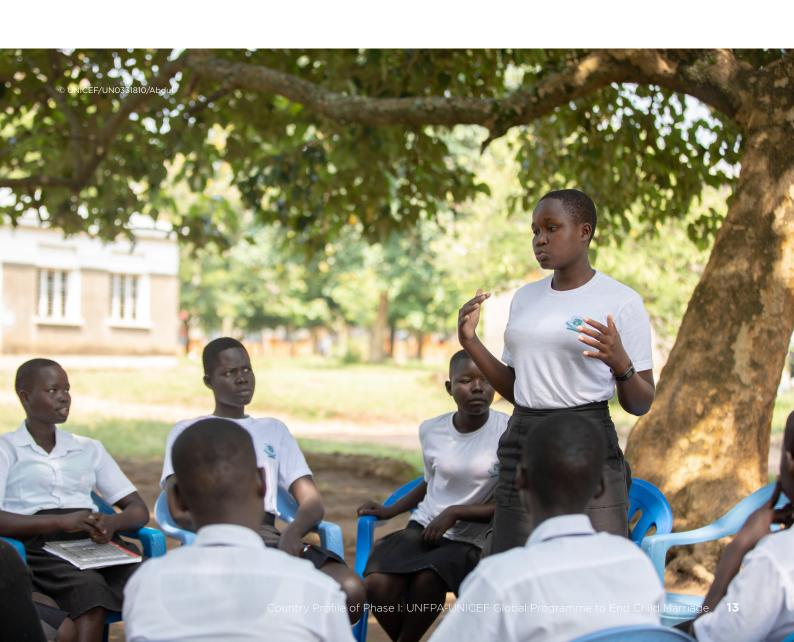
The media in Uganda would not normally find child marriage newsworthy; however, increasingly, it is receiving the limelight that it deserves. This signifies a change in attitudes and practices of different categories of people, including the media, religious, cultural and traditional leaders, political leaders and communities, with over 16,000 mentions of child marriage on radio, TV, social and print media in a single year. Child marriage has also become a standing agenda item for discussion in child protection coordination mechanisms in 40 districts.

#### Challenges

The social norms and expectations that drive child marriage are deeprooted and it takes time to change these. Misconceptions of sexual and reproductive health and rights and comprehensive sexuality education have resulted in fear that such programmes will promote and increase promiscuity, empower and make females rebellious and increase women's decision-making over their sexuality. If not well managed, such fears can affect programme outcomes.

Number of individuals in programme areas who regularly participate in dialogues and/or were reached by media campaigns promoting gender-equitable norms including delaying child marriage





#### Lessons learned

Boys and men have key and positive roles to play in ending negative social norms and cultural practices that perpetuate child marriages and teenage pregnancies. As most communities in the districts of operation are patriarchal, men and boys are key decision makers within homes and at community level. Therefore, to change the status quo and end child marriage, boys and men must be involved at all stages of programming to ensure quality outcomes for adolescent girls.

#### Shifts in Phase II

Phase II will focus on addressing underlying unequal power relations, harmful gender norms and structural inequalities through strengthening formal (national and subnational level) and non-formal (public community spaces and gatekeepers including religious/faith leaders, teachers, school management committees, health workers and community development workers, and cultural/traditional leaders) structures to transform the concept of masculinity and patriarchy and address gender norms.

The focus will also be on strengthening communitybased protection structures (para social workers and local council one [lowest administrative level] secretaries for children) for regular engagement, awareness-raising and dialogue with parents through home visits to families most at risk and through supporting training of 'model parents' and other groups, including relevant religious and cultural groups, on positive parenting skills and key family care practices including cascading training and mentoring to other parents.

Dissemination and implementation of the Ministry of Health Sexual and Reproductive Health and Rights Male Involvement Strategy and the Ministry of Gender, Labour and Social Development Gender-Based Violence Male Involvement strategy will be supported in target districts. The combination of empowering women and engaging men is vital in addressing specific vulnerabilities that are catalysts of gender-based violence.

Mobilization and engagement will be supported with men's and boys' groups (Father's Union, Boy and Girl Scouts) on intergenerational dialogues, consultations on gender equity and social norms change around harmful practices with a focus on child marriage.



# STRENGTHENING SYSTEMS

In 2019:



**2**,314

#### service delivery points

in programme areas implement guidelines for adolescent girlfriendly health and protection services



non-formal, primary or secondary schools

implement interventions to improve the quality of education for adolescent girls



219,904

adolescent girls

in programme areas have utilized health or protection services

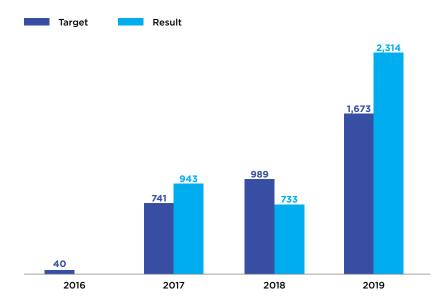
#### Results from 2016–2019 programme implementation

Promotion of health forums, and linkages and referral between services contributed to improved access and delivery of services to adolescent girls, while support to the justice sector enhanced access to justice for adolescent girls who are victims or survivors of gender-based violence. In total, 219,904 girls aged 10-19 years were provided with health or protection services, including HIV testing, antenatal care and family planning as well as maternity services in the programme areas. Special court sessions brought together actors from the social development and health sectors to ensure access to justice for survivors of gender-based violence and other harmful practices including child marriage in a human rights, child-friendly and survivor-centred approach. Perpetrators were held accountable and this contributed to addressing impunity. Health service providers enhanced their knowledge and skills on the delivery of adolescent-friendly health services, which resulted in improved health-seeking behaviour among adolescent girls.

On the other hand, adolescent girls also acquired skills to demand and access available services within their communities, leading to an increase in the uptake of health services. Strengthening of health and protection systems resulted in 3,990 service delivery points in programme areas implementing guidelines for adolescent girlfriendly services.

The child helpline provided access to protection services with linkages and referral to other services such as justice, health, education and social protection.

Number of service delivery points in programme areas implementing guidelines for adolescent girl-friendly health and protection services



#### Since 2016:



**3**,990

# service delivery points

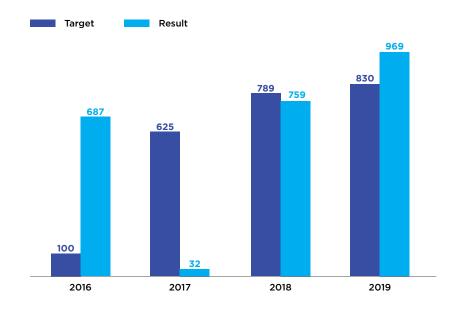
in programme areas implement guidelines for adolescent girlfriendly health and protection services



**⊿2,447** 

non-formal, primary or secondary schools

implement interventions to improve the quality of education for adolescent girls Number of non-formal/primary/secondary schools implementing interventions to improve the quality of education for adolescent girls



Within the programme areas, the enrolment of girls in primary schools has increased by 7.2 per cent, compared to a 5.7 per cent increase among boys. This has led the gender parity index to increase to 101.93 compared to 99.6 at baseline in 2015. Through the programme, the percentage point difference in exampass rates (primary leaving examinations [PLE]) between boys and girls in programme areas decreased from 4.2 per cent in 2015 to 3.5 per cent in 2019. In 2019, 87 per cent of girls in programme areas passed the PLE compared to 82 per cent who passed the PLE in 2015.

The quality of education for adolescent girls was improved in 2,447 primary and secondary schools through training and mentoring of the school leadership team (headteachers, deputy headteachers, school management committees and representatives of parents-teacher associations) on child-friendly schools, parental involvement in education and creation of a safe learning environment. The dissemination and implementation of the reporting, tracking, referral and response guidelines on violence against children in schools contributed to effective reporting and referral of cases of violence against

children in schools. The establishment of school clubs and digital platforms equipped students with life skills. Key policy frameworks (such as the National Gender in Education Strategy, Education Response Plan for Refugees and Host Populations, revised Basic Required Minimum Standard for Child-Friendly Schools, National Inclusive Education Policy for Children with Disabilities and the Child-to-Child Hand-book) were developed and operationalized. These documents provided strategic direction and improvement in the quality of education in both formal and informal settings. Advocacy for an enabling school environment for adolescent boys and girls through water, sanitation and hygiene programmes and the construction of 24 latrine blocks with 5 stances each (120 stances each) in 19 primary schools benefitted 8,500 pupils, contributing to adolescent girls staying longer in school in a conducive environment that promotes learning and quality outcomes.

#### Challenges

Implementation of policy frameworks and establishment of structures to roll out interventions and update services both in formal and non-formal schools can be slow because of the length of time students spend in schools. Some pupils and adolescent students come to school late because they walk long distances every day to and from school, while others leave school early because of hunger to go back home for food, hence having little or no time for planned school club activities. In non-formal education, planned activities for out-of-school adolescents compete for time with household chores and other community events, leaving limited time for meaningful engagement and interaction.

#### Lessons learned

The training of adolescent boys with girls has increased male involvement and commitment to support adolescent girls. The inclusion of topics such as family planning, financial management, drug abuse, human rights and sports, which were identified by men as of interest to them, will further enhance male involvement.

#### Shifts in Phase II

Phase II of the Global Programme will focus on supporting government at different levels to provide quality, gender-responsive education for adolescent girls, including comprehensive sexuality education, with emphasis on implementation of policy frameworks and strengthening existing structures and protection systems. Evidence-informed interventions including implementation of activities that take into account the peculiarities of adolescent girls and boys and their local context, will be developed and implemented.

Access to formal and non-formal education for adolescent girls will be supported, including through community outreach on 'Go To School', 'Back To School' and 'Stay In School' campaigns, and safe school and violence-free school initiatives for adolescent girls, including menstruation hygiene management and life-skills training.



## STRENGTHENING LEGISLATIVE AND POLICY FRAMEWORKS



The country
has a national
strategy and
costed national
action plan on
ending child
marriage



# Results from 2016–2019 programme implementation

Robust national laws and policy frameworks that align with international standards were developed and implemented. The review of the Children's Act (2016) set the minimum legal age of marriage at 18 with no exceptions.

The development of the child policy and the multisectoral framework for adolescent girls outlines nine key outcome areas (HIV/AIDS; teenage pregnancy and maternal health; violence against children; alcohol and substance abuse; education enrolment and retention; education achievement; child marriage; child participation; economic empowerment) and a comprehensive communication for development (C4D) strategy for adolescent girls' empowerment, contributing to multisectoral accountability for protecting and promoting the rights of adolescent girls. The C4D strategy provides guidance on application of C4D approaches across multiple levels (individual, family, community, institutional and policy) to increase knowledge, change social norms and attitudes, increase skills, empower and change behaviors, to get positive outcomes for adolescent girls as well as to increase access to social services and support.

Subsequently, 40 district local governments have included child marriage in their District Development Plans, with 15 having budget lines for child protection issues including child marriage.

In 2019, the programme contributed to the process of drafting a Child Policy and conducting its Regulatory Impact Assessment. The draft Child Policy provides a framework for coordinated multisectoral efforts at national and subnational levels towards the realization of all children's rights to survival, development, protection and participation.

#### Challenges

Challenges include limited dissemination of existing laws and policies, weak implementation, limited knowledge and ignorance of the provisions of laws and policies on child marriage by some duty-bearers and the wider public. There is no provision in the penal code and customary marriage law prohibiting or penalizing child marriage, thereby creating inconsistencies in the interpretation and implementation of legal provisions and policies on child marriage.

"

Look at the Marriage and Divorce Act 1906, when you look at the current trends, and how people are living... Such old laws need to be looked into and necessary amendments made. Then the other one is the Marriage Act itself, 1904. It does not clearly bring out the issue of consent. So as an Authority we call upon the Government to review any existing old laws so that they are commensurate with contemporary international legislations on the protection of the child especially the UNCRC [United Nations Convention on the Rights of the Child] provisions.

Executive Director, National Children Authority

#### Lessons learned

Wide dissemination and popularization of laws and policies, engagement and involvement of all relevant stakeholders across sectors at all levels of government, including formal and non-formal structures, enables universal interpretation and implementation of the same.

#### Shifts in Phase II

Capacity-building and technical support will be provided to the government to enact, enforce and uphold laws and policies, in line with international human rights standards, aimed at preventing child marriage and protecting those at risk of marriage and addressing the needs of those already affected.

There will be continued dissemination of the laws to the different actors and the wider public, including engagement with religious and cultural institutions.



# STRENGTHENING DATA AND EVIDENCE

# Results from 2016–2019 programme implementation

The evidence generated from numerous studies has informed development of frameworks, guidelines and strategies that guide implementation of programmes aimed at protecting adolescents against violence, including child marriage. For example, the analysis of the 2014 census on the status of young people in Uganda provided data on child marriage and teenage pregnancy and key factors associated with those two vices. The data informed a policy brief on Uganda's young people entitled 'Young People: The One investment the country cannot afford to ignore', which brought attention to the urgent need to invest in Uganda's adolescent girls to enable them to access education, health care and employment opportunities. Data and evidence generated from other studies and surveys contributed to development and implementation of Uganda's first urban social protection programme entitled 'Girls Empowering Girls', targeting 1,500 adolescent girls in Kampala (with scalability potential across districts in Uganda), to ensure that they transition safely into adulthood, receive education and are empowered to achieve their goals

- Phase I of the Global Programme supported among others the studies and surveys listed below to generate data and evidence on what works and what does not work to address child marriage.
- Mid-term evaluation of the National Strategy to
   End Child Marriage and Teenage Pregnancy (2019).
- National survey on violence against children (2018).
- Six policy briefs on budget from the National Budget framework (2019/2020).
- Packaging of UNFPA policy briefs Evidencebased engagement with the Uganda parliament, the National Planning Authority and the Ministry of Finance on resource allocation (2016-2017).
- Design and programming on Generation for Generation policy dialogues on child marriage (2017).
- Knowledge, attitudes and practice study on the key family care practices (2019).

The mid-term evaluation of the National Strategy to End Child Marriage sought to assess the extent to which the national strategy targets were achieved and document what works or does not work including emerging issues within the precincts of ending child marriage and teenage pregnancy in Uganda. This generated robust evidence for engagement with key stakeholders, policy dialogue and re-strategizing, redesigning, planning and implementation of a national end child marriage and teenage pregnancy programme.





#### The issues highlighted include:

- Regional complexities such as trafficking children for marriage and cross-border dynamics in areas where female genital mutilation is prevalent and in humanitarian settings.
- The changing face of child marriage, in that child marriage perpetrators (parents) marry adolescent girls off but on the condition that the husbands take them and keep them in school. Instead parents reduce the 'bride price' and consider school fees to be part of the dowry.
- Changing cultural norms and practices, e.g., child marriages are celebrated during cultural events like 'circumcision dances'.
- Children on the margins, e.g. those with disabilities and in humanitarian settings, are seldom reached with protection programmes as they are hidden from public spaces in the community.
- The low visibility of local government structures. Findings show that non-governmental organizations and child protection committees are the most preferred structures for reporting cases of abuse. There was little mention of community development officers and probation and social welfare officers, whose mandate it is to handle such cases. This speaks to the need to further strengthen the government protection system structures, a strategy to be adopted for Phase II.

Evidence generated on implementation of government guidelines on school re-entry and retention for girls who have given birth, has recognized the positive impact of the end child marriage programme. There has been a similar impact from joint supervision between line ministries (the Ministries for Health, Education as well as Gender, Labour and Social Development) and grass-roots mobilization in some districts, leading to increased awareness and galvanized movement against child marriage and teenage pregnancy.

Mapping of generated data and evidence is necessary for prioritizing programme interventions for adolescent girls including out-of-school girls and girls in refugee settlements who are at risk of child marriage, linking them to life skills and government empowerment programmes such as the Youth Livelihood Programme. This approach ensures access to services for adolescent girls most at risk, thereby contributing to protecting them from child marriage.

## COMMUNICATIONS TO END CHILD MARRIAGE

#### **Stories and videos**

- From shattered dreams to championing the rights of girls
- In Uganda, surviving rape and child marriage one plait at a time
- Magic hair dressing skill gives Lena hope after rape and marriage
- 14-year-old rescued from early marriage, finds hope in education: Faida's story
- Child marriage affects boys too: Asiku's story

## IMPLEMENTING PARTNERS

NAME OF IMPLEMENTING PARTNER	TYPE OF PARTNER	PARTNER FOCUS AREA
World Vision	International NGO	Children's rights, youth rights, women's rights
Trail Blazers Mentoring Foundation	Local NGO	Children's rights, youth rights, women's rights
Justice, Law and Order Sector Actors	Government body	
Ministry of Health	Government body	
Ministry of Education and Sports	Government body	
Ministry of Gender, Labour ad Social Development	Government body	

## PROGRAMME IMPLEMENTATION AREAS

GEOGRAPHIC AREA	Output 1.1: Life-skills and economic support	Output 1.2: Education support	Output 2.1: Social and behavioural change	Output 3.1: Quality health and protection services	Output 3.2: Quality education
Abim	-			-	
Adjumani	•	•	•	•	-
Amudat	•	•	•	-	-
Arua	•	•	•	-	-
Iganga	•	•	•	•	-
Kaabong	•	•		•	-
Kamuli	•	•	•	•	-
Kapchorwa	•	•	•	•	-
Kasese	•	•	•		
Kitgum	•	•	•		
Kotido	•	•		•	•
Moroto	•	•		•	•
Mubende	•	•		•	•
Nakapiripirit	•	•	•	•	•
Napak	•	•	•	•	•
Yumbe	•	•	•	•	•
Bududa	•	•			
Busenyi				•	•
Butaleja	•	•			
Gulu	•	•		•	-
Kampala	•	•		•	-
Katakwi	•	-			

Lamwo		
Lamwo		
Lira	•	•
Mbale		•
Amuria	•	•
Amuru	•	•
Isingiro		•
Kagadi		•
Kakumiro	•	•
Kibaale	•	•
Kiryandongo	•	•
Koboko	•	•
Namayingo	•	•
Ntungamo	•	
Moyo	•	•
Pader	•	•
Wakiso	•	
Masaka		•
Mayuge		
Mukono		•
Nabweru	•	•
Sironko	•	•
Soroti	•	•
Kiboga	•	•
Kyenjojo	•	
Nabilatuk	•	•























