GreeneWorks
Social change for health & development

AMERICAN JEWISH WORLD SERVICE

# THE CENTRALITY OF SEXUALITY
## FOR UNDERSTANDING CHILD, EARLY AND FORCED MARRIAGE

*By Margaret E. Greene, Stephanie Perlson, Jacqueline Hart, and Margo Mullinax*

# CONTENTS

# 01

## INTRODUCTION

Poverty has been put forth as a leading reason for child, early and forced marriage (CEFM), but if CEFM is driven by poverty, why are boys not marrying as early as girls? The reason is that child, early, and forced marriage is an expression of gender inequality and the structures of patriarchy: unlike boys, adolescent girls face lives that are ruled by management of their sexuality.

Child, early and forced marriage is a global problem that violates girls' human rights, curtails their schooling, harms their health, and sharply constrains their futures.[1] Young wives' low status in their marital households often subjects them to long hours of intense labor, social isolation, greater risk of physical, sexual, and emotional violence, the risks attending early pregnancy, and little say over anything that affects them.[2]

As a consequence of the UN's Sustainable Development Goals (SDGs), adopted in 2015, and the global movement to end child marriage, child, early, and forced marriage has attracted increasing global attention. We can thus expect a growing stream of resources and global and national mandates to eradicate the practice. This presents a momentous opportunity to work to end child marriage and contribute to reducing gender inequality.

Child marriage is most prevalent in South Asia and sub-Saharan Africa, and in some parts of Latin America, the Caribbean, and the Middle East.[3] In South Asia, almost half of girls marry before age 18, and one in six before age 15. Various regions of Africa follow South Asia in prevalence, with around 40 percent of women aged 20 to 24 married in childhood. In the United States, quite a few states allow marriage before age 18, and allow exceptions to their age of consent, allowing girls to marry even younger, to be made by parents, judges, and in cases of pregnancy.[4] Worldwide, more than 700 million women alive today were married before their 18th birthdays, and about 250 million married before age 15.[5] Child marriage endangers girls' health. The

highest adolescent birth rates occur where child marriage is most common.[6] Of all births to adolescents, 95 percent take place in developing countries, and 90 percent of these births are to girls in union or marriage. Complications from pregnancy and childbirth combined are a leading cause of death for girls 15 to 19 in developing countries.[7] Child

# GIRLS' AND WOMEN'S LACK OF AUTONOMY REGARDING SEXUALITY IS A CORE ASPECT OF PATRIARCHY

marriage also puts girls at risk of HIV and sexually trans-mitted infections. Globally, young women account for well over half (from 60 to 72 percent in Sub-Saharan Africa) of the young people living with HIV and they bear a greater burden of STI, with the highest rates among 20 to 24-year-olds. Their developing reproductive and immune systems make them more susceptible to STIs and HIV, which older partners are more likely to transmit, especially if these partners reject condoms.[8]

Since adolescence would otherwise be a time for growth, learning, and identity formation, CEFM obliges girls to take up adult roles and responsibilities before they are physically, emotionally, and psychologically prepared. They may be socially isolated and face unwanted separation from family and friends. Many child brides experience the symptoms of child sexual abuse and post-traumatic stress, including hopelessness, helplessness, and depression.[9]

Child marriage also reduces girls' chances of leading economically productive lives.[10] Girls who marry typically leave school early, especially if they are poor, further constraining their opportunities.[11] By limiting girls' oppor-tunities and exposing them to health risks, child marriage makes it more difficult for girls and their future families to move out of poverty.[12] The children of young and poorly educated girls tend to be less healthy, to perform worse in school, and to have lower earnings as adults, contributing to the perpetuation of poverty from one generation to the next.

Girls' and women's lack of autonomy regarding sexuality is a core aspect of patriarchy. To improve girls' lives we must engage with sexuality. The reality, however, is that waves of development interventions aimed at gender inequality and girls and women's rights and empow-erment have largely remained silent on sexuality. Now, with the establishment of the SDGs, the world faces an important opportunity to broaden and intensify the ways in which the community of donors, policymakers, and practitioners engage in the struggle to end gender inequality.

The purpose of this paper is to provide a research-based argument for the critical importance of addressing sexuality if we are to overcome patriarchy and gender inequality, using the effort to end CEFM as an important example. This paper presents the research evidence for the multiple ways in which sexuality is central to norms and practices around CEFM, and provides programmatic examples of the ways in which addressing sexuality contributes to the greater empowerment of girls and to gender equality.

This paper reviews the history of the international devel-opment field's neglect of sexuality's central role in gender inequality and efforts to end it. It analyzes the field's intellectual legacy, the discomfort of its practitioners with sexuality-related matters, its focus on individuals and homogenous populations rather than on relationships, and its neglect of the interplay between gender inequality and the cultural meanings of sexuality. The paper reviews some of the (few) promising ways in which sexuality has been addressed in programming, and highlights the themes emerging from some successful experiences. And it closes by affirming the momentous opportunity presented by the Sustainable Development Goals to make sure that this iteration of global focus on the reduction of gender inequal-ity includes sexuality: a core aspect of patriarchy which has not, as yet, been adequately addressed.

# 02

## PATRIARCHY AND THE CONTROL OF FEMALE SEXUALITY

Patriarchy, by definition, entails the subjugation of girls and women.[13] It is manifested in gender inequality and the construction and control of female sexuality. To improve the lives of women and girls, advance gender equality, and end practices such as child, early, and forced marriage, we must grapple with the control of sexuality as a core mechanism/expression of gender inequality and patriarchy.

### WHAT IS SEXUALITY AND WHY DOES IT MATTER?

And what is sexuality? The World Health Organization has recognized its personal and communal aspects as well as its importance to being human in this description, stating,

> "...a central aspect of being human throughout life encompasses sex, gender identities and roles, sexual orientation, eroticism, pleasure, intimacy and reproduction. Sexuality is experienced and expressed in thoughts, fantasies, desires, beliefs, attitudes, values, behaviours, practices, roles and relationships. While sexuality can include all of these dimensions, not all of them are always experienced or expressed. Sexuality is influenced by the interaction of biological, psychological, social, economic, political, cultural, legal, historical, religious and spiritual factors."[14]

Sexuality and gender have been described by Carole Vance as "separate systems which are interwoven at many points."[15] Her analysis describes the ways in which, historically, anthropology – like other social sciences – avoided sexuality at the same time that it took it for granted as universally grounded in biology rather than culture. She credits feminist scholarship and its intense examination of gender with having a "revolutionary impact on notions of what is natural. Feminist efforts focused on a critical review of theories which used reproduction to link gender with sexuality, thereby explaining the inevitability and naturalness of women's subordination."[16]

Feminist scholars and activists on reproductive health and rights have brought to light several important insights: that sexuality must be understood apart from reproduction and women's gendered roles as wives and mothers; that the 'naturally gendered body' is in fact a highly socially-mediated product; and that sexuality is highly variable. As Gayle Rubin wrote of the sex/gender system, there exists "a systematic social apparatus which takes up females as raw materials and fashions domesticated women as products…[this is] the set of arrangements by which society transforms biological sexuality into products of human activity."[17] Sexuality and gender go together … but in ways that are subject to variability and change.

We know intuitively that sexuality and gender are different, but we need to think more about *how* they are different. Sexuality-related norms and identities are, of course, closely linked to gender norms.

> "It is difficult to dissociate gender identities from sexual identities, because if the former take us to an understanding of power and inequality, sexual identities are the nucleus that allows us to understand how, through control over the body, the mechanisms that constrain the practice of sexuality manifest and reproduce, or rupture themselves. While gender identities identify themselves with manhood and womanhood, sexual identities take us to how we think and live sexuality."[18]

## ADOLESCENT GIRLS

The lives of adolescent girls, in particular, are ruled by norms and expectations regarding the management of their sexuality. Anxiety about girls' sexuality impedes their access to schooling, friends, work, and public life. The honor of family and community often hinges on girls' ability to navigate adolescence without compromising their families' reputations (i.e., avoiding sexual activity before a socially sanctioned time and engaging in it only under prescribed conditions). At puberty, a girl enters a risky liminal state, as she is no longer a girl and is not yet safely married.  This new stage of risk prompts a series of actions that are focused on controlling her and therefore reducing the risk of familial shame.

The rationales given for placing such an enormous emphasis on girls' virginity include the views that girls are lustful or irresponsible; that boys are (and indeed they are socialized in this very way) at once untrustworthy and ready to take advantage of girls, and helpless in the face of their desires and therefore unaccountable for their actions; and the desire to control pregnancy outcomes. These rationales come together in different ways in different cultures and religious traditions.[19]

## THE ISSUES ARE UNIVERSAL

Although the discussion in this paper is illustrated largely by examples from low- and middle-income countries, the points raised are of relevance to most rich countries as well, to varying degrees. The Sustainable Development Goals (SDGs) are universal. Programs in the United States that focus on promoting abstinence only until marriage, for example, have reinforced the same patriarchal ideas that child marriage promotes in other settings: that virginity is of primary importance, especially for girls; that boys and men are to conquer girls and women; that marriage is inherently a good and safe place for girls to be; and that solidarity cannot be permitted between boys and girls because of sexual stereotypes: boys cannot be trusted, and girls are accountable for maintaining their virginity, even when the circumstances of their early sexual encounters reflect coercion.

Concern about adolescent pregnancy in the United States was couched in the need for girls to be productive citizens. Teenage pregnancy has been seen as having many sequelae, including the intergenerational transmission of poverty and dependency on the state, with the narrative characterized by a moralistic blaming of the girl and control her fertility and sexuality. An analysis from 2007 of decades of research and programs to reduce adolescent pregnancy recognizes that the field, blinded by a limited ideological position, may have gotten it wrong[20] – that people were poor before they had children as adolescents and they were poor afterward, and, contrary to popular belief, this poverty was not *caused* by their becoming pregnant as teenagers.

In India, one activist has described the phase in a girl's life between the onset of puberty and her marriage and move to the marital home (assuming patrilocality) as a time of "*mournful silence*," in which her agency and mobility are severely restricted.[21]  We hear nothing at this time about girls' preferences and desires for their lives. Ironically, even as they are held responsible for managing sex in a socially appropriate manner, girls are rarely provided with any of the information, knowledge, or skills that could help them express desire and negotiate safe, protected, and consensual sexual encounters.

In places with strongly patriarchal values, families, communities, *and institutions* tend to communicate that a girl's highest aspiration and sole capacity is as wife and mother—and that parents' most important obligation to a daughter and to the entire community is to arrange her marriage at an early age.[22] As a result of such long-standing social expectations, some parents have difficulty imagining futures for their daughters that extend beyond housework and childrearing. Poverty and the lack of opportunities that go with it reinforce families' perspective that the best option available for their daughters is marriage; marriage secures girls' futures. Surrounded by these restrictive cultural messages and limiting structures, many girls grow up believing they have no right to make choices about their lives and bodies. Indeed, many girls and young women are effectively denied the right to choose if, when, whom, and how they marry, and accept this as simply the way things must be.

Concerns about adolescent girls' physical safety and social behavior limit their opportunities to interact with peers and community members, to attend school, or to work for pay. With marriage prospects on the horizon, families may regard girls' secondary schooling without enthusiasm, questioning its worth in the long term and worrying about the risks – including sexual risks – to which it could expose girls.[23] Since girls are expected to marry early, their domestic roles are prioritized, often at the cost of their schoolwork. Girls' academic achievement may suffer as a consequence of this ambivalent commitment to school, and poor school performance often leads to dropping out, which is also associated with child marriage. Concern with the management of girls' sexual lives thus gives rise to the strategy of marrying them early to 'protect' them from unapproved sexual relationships, foreclosing, at the most crucial time, access to an education and the livelihood opportunities that can flow from it.

Beyond the family, other institutions also reinforce patriarchal control of sexuality; these include health services, education systems, and religious institutions.[24] As noted above, abstinence-only messages promoted in schools, healthcare centers, and places of worship communicate disapproval of sexual relations before and outside of marriage, and often fail to respond realistically to young people's sexuality. The abstinence-only approach negates the natural feelings of adolescents and young adults, limits their access to information about their sexual health and rights, and makes it clear that they cannot hope to get that information from family, school, clinic, or faith leaders.

Circumstances of conflict or uncertainty only exacerbate these concerns. For example, in camps set up for Muslim communities displaced by conflict in Uttar Pradesh, conservative religious leaders have suggested that it would be safer for girls to get married and live in their new husbands' homes than to remain within the camps, where they face a heightened risk of experiencing sexual violence.[25] Studies in Bangladesh and in Lebanon have found families in situations of disaster or conflict facing similar pressures to marry their daughters early.[26]

CEFM is an indicator of gender inequality and patriarchy. Where patriarchy is the most rigid, it restricts girls' sexuality through a variety of mechanisms: It mandates sexual purity in order to uphold family and community honor, placing this burden squarely on the shoulders of girls. It can promote violent punishment if girls dishonor the family. It requires the tight monitoring of girls' mobility. It structures the lower priority given to girls' education than to boys'. It puts pressure on the most economically disadvantaged families to view marrying their daughters early, while dowry is lower, as the only viable option. Moreover, marrying girls early is favored so that they are easier to teach to be submissive – sexually, socially, and economically – to their husbands and in-laws, and to remain focused on bearing children and taking up their domestic roles. Patriarchy operates through all of these controls of sexuality; effective action to end child, early, and forced marriage must take sexuality into account.[27]

## WHY IS SEXUALITY SO IMPORTANT NOW?

The Sustainable Development Goals and the global movement to end child marriage have focused increasing global attention on CEFM. As a consequence, more resources and global and national mandates to eradicate the practice can be expected. This presents a momentous opportunity to engage with child marriage as a lever for reducing gender inequality.

Debate has long raged regarding the causes of the unequal status of men and women, and the oppression of women by men, through systems and structures that grant men power and withhold it from women: what we commonly refer to as patriarchy. Virtually every major world culture and religion favors male decision-making power over the mobility, sexuality, and reproduction of their female sexual partners, sisters, and daughters.[28] Patriarchal values are sustained and "subsidized" by discriminatory practices that reinforce the

subordinate position of women. These values and practices are inimical to the construction of healthy societies.[29]

Girls' control over their bodies, their sexuality, and the trajectories of their lives—indeed, not infrequently, their very lives, their physical existence—are sacrificed in CEFM. Their experience within child marriage, a kind of erasure, "embodies" their subordination to men. In other words, their subordinate position in society is reflected in their physical experience of marriage, an institution that is rooted in patriarchy, and that has been an instrument of profound control over women's bodies and sexuality for countless generations. Sexuality must thus be recognized as central to CEFM and therefore to ending the practice (which, it must be noted, is but one of the many ways in which adolescent girls are contained and limited.)[30]

An analysis of sexual socialization among the Maasai, states, "In many societies, the female body is the focus of social control and this control is particularly exercised with respect to female fertility and sexuality."[31] Talle describes the active role Maasai males play in the cultural construction of female fertility, in "potentiating" that fertility through structured sexual play and penetration. Mothers and young men decide which girls aged 10 and older are ready for sexual play, for penetration, for circumcision and for marriage. "Female fertility, on which the continuity of the society hinges, must be molded and controlled. The human body, although naturally given, is always culturally constituted."[32] Her analysis suggests that the purpose of controlling female sexuality is powerfully directed toward controlling fertility, with female circumcision seen as a rite of maturity and independence in which girls' "doors" are opened.

The preoccupation with female sexuality is equally present in the global north, where mass media abounds with images of sexualized girls and women; where campus rape—until very recently—has been invisible, ignored, and seen as the survivor's fault, and still goes largely unpunished; and where access to access safe abortions remains contested.[33] Women are sexually objectified in U.S. culture in many different ways—and also experience other forms of oppression based on race/ethnicity, economic status, religion, etc.—which has a profound negative impact on them, leading to poor self-worth, anxiety, and depression.[34]

"Culture is thus one of the key components for the analysis of patriarchy as structure and practice of domination, i.e.,

through culture the gender hierarchies are legitimized and controlled."[35] Even in relations among women, and even in circumstances where women are relatively powerful, patriarchal control mechanisms intrude, making them think, feel and act in ways that reflect their hierarchically subordinated position and replicate the system of domination.

The constraints on girls' and women's sexuality are fundamentally an issue of social justice; such constraints violate girls' and women's human rights.[36] Girls' low status reflects the subordination of girls and women as well as the anxieties reported by families and communities regarding the proper management of their sexuality. The seriousness accorded to girls' sexual "purity" is evidenced by what happens when this norm is violated, or feared to have been violated: honor killings, gender-based violence, and increasing rates of girls'/ young women's suicide.[37] "Rape culture … lives anywhere that has a 'traditional' vision of women's sexuality."[38]

Sexuality is logically connected to child marriage and is key to understanding the practice. Female sexuality is exalted, commodified, and demonized in patriarchal systems. Under the "imposition of patriarchal morality,"[39] a girl's virginity is viewed as a precious asset requiring management by men; her sexuality is commodified, as evidenced by the value placed on girls' sexual purity until marriage, and its importance to the familial honor associated with child marriage and dowry exchange; and her sexuality is reviled and feared, as demonstrated by the control exerted through practices such as female genital mutilation, which is meant in large part to diminish and regulate women's sexual drive.[40] "Women's sexuality, historically, has been appropriated as a tool of men's power … a sign in the masculinist system of communication, a commodity in the system of exchange."[41] Thus, in order to end child marriage and the (sexual) restrictions placed on young women and girls to safeguard their virginity, it is necessary to challenge the norms and attitudes around (female) sexuality that contribute to the subordination of girls and women, put them in danger, and severely restrict the fulfillment of their fundamental human rights.

# 03

# SEXUALITY IS CENTRAL TO SHAPING MARRIAGE: SOCIAL SCIENCE EVIDENCE

Expressions of sexuality are socially constructed by beliefs about the nature of humanity, gender roles, and relationships:[42] beliefs about how men and women should interact with each other, including the acceptability of heterosexual versus same-sex relationships; about the conditions surrounding reproduction and sex and control over one's body; and about what constitutes a family, and when and with whom sexual inter-actions should take place; among other condi-tionalities. At the same time that the expression of sexuality is very culturally specific, efforts to control female fertility are nearly universal and are inextricably linked to control of people's sexual behavior, which (early) marriage achieves.[43]

A recent discussion of sexuality among global gender and health experts reflected unanimous recognition that prescribed gender norms dictate the ways in which sexuality is exercised, and that sexuality is relational.[44] In contexts in which tradi-tional gender norms are strictly enforced, individ-uals' ability to express their sexuality is also tightly regulated, and marriage practices are likely to reflect these controls. Early marriage is a means of prevent-ing girls' sexual activity and pregnancy outside of marriage, which are seen by many as catastrophic behavior by a girl and the worst affliction her family could experience: "The control of women's sexuality (and the code of honor as one derivative of this) has been seen as a means of controlling marriage and thus controlling access to property."[45] Given the customs of bride price and dowry, in which a girl's—not a boy's—virginity represents her value in this marital transaction, the link between controlled female sexuality and CEFM is clear.

The terms and conditions of marriage are determined by expectations about sexuality. The qualities of manhood and womanhood, as Lagarde (1997) argues, "are interwoven with sexuality... [and] historically and culturally constructed."[46] A few examples from the social science literature demonstrate the *centrality of sexuality to our work on child marriage.*

What evidence do we have about the influence of the ways in which culture influences girls' and

boys' sexuality? An excellent example is a comparative study of the Netherlands and the United States that describes how adolescent sexuality is framed and addressed and the practical implications of this framing for the lives of young people.[47] In the Netherlands, far greater openness between children and their parents about sex and relationships is associated with later sexual debut and better health (lower rates of sexually transmitted infections, adolescent pregnancy and abortion), while the comparative prudishness of the United States is associated with the highest rates of all of the above in the developed world. This restrictive approach to adolescent sexuality is evident at the family and at the level of government, where efforts to combat teenage pregnancy in the United States have been driven by concern with health and wellbeing, and also with the promotion of a productive citizenry and prevention of the inter-generational transmission of poverty and dependence on the state.[48] The Dutch approach to positive adolescent sexuality is far from any of these rationales, instead emphasizing public health, pleasure, personal responsibility and mutuality.

A study in a village in Sudan of the conditions contributing to CEFM found that the great majority of women were married as children.[49] The community favored such early marriages so that girls could maximize the number of children they would have during their lives. Additionally, according to these villagers, it is a "way to ensure that a wife is protected or placed firmly under male control; that she is obedient to her husband ... and that the children she bears are legitimate"; it also protects her from "forbidden" sexual activities. Their husbands forbade contraceptives out of a belief that it is a woman's responsibility to give birth to children, as well as that contraceptive use decreases wives' sexual satisfaction.[50]

The proper management of sexuality is central to respectability. For young women in Tanzania, sexual respectability (maintained by not overtly initiating sexual encounters, not agreeing to sex too quickly, and not being known to have had sexual partners) is extremely important.[51] This is reminiscent of *The Rules: Time-tested Secrets for Capturing the Heart of Mr. Right,* a self-help book published in the United States in 1995, which said that, if a woman wanted to attract and keep a man, she should allow him to be the pursuer.[52] The argument was that men enjoy being the aggressors and are more likely to desire women who are "hard to get." For young men, by contrast, greater sexual activity enhances reputation; the prestige of sexual experience is intertwined with their masculine identity.

Given that young women's access to schooling, employment, physical mobility, and peer contact are restricted out of fear for their sexual purity, addressing community concerns about sexuality is critical to preventing the great value placed on girls' virginity from costing them their education, health, physical freedom, livelihood, and friendships. Such constraints—and in

## PARENTS PERCEIVE A CONFLICT BETWEEN KNOWLEDGE AND THE REQUISITE SUBMISSIVENESS

some cases the benefits women reaped from their removal—have been well documented for decades: for example, in Italy, women were sharply discouraged in the 1980s from factory employment because factories were seen as places where women's chastity would be at risk;[53] in Bangladesh in the 1990s, employment in the garment sector allowed young women the opportunity to postpone marriage and increased their influence in the family;[54] in Cambodia in the early 2000s, young rural women experienced unprecedented economic opportunities and exposure to as they began working in the garment factories there.[55]

In many settings, explicit discussion of sex is viewed as obscene. This is the case in Viet Nam and in Tanzania,[56] where talking about sex and sexuality is viewed as "impolite, immoral, and taboo."[57] Relatedly, parents in Pakistan are often unwilling to discuss matters of sex and the realities of married life and childbearing with their daughters—even at the time of her marriage—as they would not be doing a daughter any favors by increasing her knowledge of sex.[58] There, parental concern with the innocence of their daughters, and indeed the *need* for her innocence in such a system if she is to be safe and marriageable, leads parents to perceive a conflict between knowledge and the requisite submissiveness: the important thing is for a daughter to be quiet and obedient, not to question, and to grow to womanhood to bring honor to her parents.

What is formulated as submissiveness in Pakistan is consonant with the 'harmony' called for in sexual relationships in Viet Nam, where, in the "context of the need to maintain harmony in the family," women are required to be sexually passive.[59] Harmony is identified as a key quality of a "cultured" family in the social mobilization campaigns in Viet Nam. Traditional Vietnamese believe men, who are viewed as having strong sexual desires, should be the initiators in sexual contact, and are reluctant to communicate openly about sex and sexuality. Women should not refuse sex too much lest men become suspicious, which disrupts family harmony.

Because social contact between the sexes is viewed as leading inevitably to sexual activity in many settings, it is very difficult for young people to form non-sexual heterosexual friendships. Research from Tanzania,[60] and from Nepal and Bangladesh,[61] finds a widespread perception that non-sexual relationships between girls and boys are impossible, and confirms the implications of that belief for girls' freedom to interact with boys at school or in the community. Indeed, in their exploration of the impact of gender dynamics on age of marriage in India, Desai and Andrist note that families view early marriage as a means of preventing such platonic contact, which can result in girls being labeled as promiscuous—hence the universal preoccupation with maintaining "the value of a daughter in the marriage market," since the slightest suggestion that the bride may not be a virgin diminishes her appeal to potential parents-in-law.[62]

In many contexts, initiation rites of boys and girls help to inculcate norms of feminine and masculine sexuality, which then pervade (married) life. In their study of initiation rites and the construction of gender identities in Mozambique, Osorio and Macuacua (2014) found that girls and boys learn from a young age the gender-based roles expected of them and how sexuality is related to these roles: "ritual teachings about sex and sexuality shape (through conventions, codes, and protocols) hegemonic masculinities and femininities."[63] During the initiations, elder members of the community teach girls and young women what is expected of them sexually, to be good wives, and boys and young men, in turn, learn what they should expect from their wives. These expectations, if not met—especially after paying bride price—are often used to justify intimate partner violence.

> Women learn that their "value" and their "power" is only concentrated in their body and in the use they should make of it ... being a woman means to learn to accept the sexual-

ization of power in gender relations, i.e., to contain and limit the practice of female sexuality to strategies of manipulation on the one hand, and to their submission on the other hand, i.e., what is taught as their strength is in fact a brutal manifestation of the policing of her body.[64]

They note that in female informants' descriptions, their experience of pleasure during sexual intercourse was not as "a subject of rights, but as a result of an occasional reality (in which the man defines the rules of the sexual game), which cannot be claimed as a right."[65] Rather than a shared and respectful experience of pleasure, sex is functions as a proof of male virility and control over a woman's body.

The patriarchal power imbalance that has historically shaped female-male interactions in marriage has also pervaded sexual relations. One sexology study notes that in the 20th century, "Since sexual disharmony was seen as the root cause of all marital discord, it was possible to deflect criticisms of marriage as an institution and to side-step questions of the power relations between the sexes."[66] Multiple sexologists promoted "scientific" notions they claimed were founded in nature, such as that women's enjoyment of sex came from the exercise of male power over them and their submission to men. These sexologists acknowledged that women had sexual feelings and could experience pleasure, but only on male terms.

> Female sexuality was defined and controlled in such a way as to destroy any potential autonomy and to harness it in the service of men ... A woman's sexual instinct could only be awakened by, and satisfied by, a man, thus rendering women sexually dependent on men at precisely that point in history when they were beginning to achieve a significant degree of political and economic independence.[67]

Denial of female *sexual* autonomy parallels the denial of female autonomy in the private and especially the public sphere. Throughout history, objections to women making decisions on their own behalf has led to measures to impede women's access to their rights and independence. Heterosexual marriage has historically been, and widely continues to be, an institution that typically relegates women to narrowly defined roles as wife and mother. Thus, in many contexts, when adolescent girls are married, their sexuality is controlled and their human rights are denied. Child marriage saddles them with the double subordination of being a *child in a relationship with an adult* and of being female in a relationship with a male, eliminating girls' ability to exercise autonomy.

# 04

# THE NEGLECT OF SEXUALITY IN INTERNATIONAL DEVELOPMENT

This paper focuses on child marriage as a means of regulating adolescent sexuality and marriage in general, and as a product of intergenerational conflict and anxiety over adolescent sexuality, and systemic patriarchal preoccupation with controlling women. The inevitability of marriage in most settings in the world makes it especially important to address the conditions under which it takes place.

Adolescent sexual activity—the conditions under which it occurs, its timing, and its consequences—is the object of adult concern around the world. In many settings, parents avoid discussing sexuality with their children in the hopes that ignorance will help keep them from having sex before marriage and becoming inappropriately familiar with the realities of sex. In others, boys' mobility and sexual activity may be encouraged and supported as an important part of manhood and they may even be encouraged to initiate sex with older women or sex workers. In still others, as we have argued here, the early marriage of girls is an important strategy for regulating adolescent

sexual activity. Parents and communities find it difficult to discuss sexual matters with adolescents; this lack of communication is matched by silence on the topic of sexuality in international development discourse. The sexuality of young people therefore poses a "problem" for adults.

The sexuality and fertility of adult women likewise poses a "problem" for patriarchy. In an effort to address these "problems," women are controlled through marriage and gendered limitations on their mobility, access to resources, and other dimensions of their lives—regulations and limitations which pose significant problems for women throughout their lives.

The perception and management of sexuality are fundamental to the determination of girls' and women's place in the world, particularly as drivers of child, early, and forced marriage. Policies and programs are trying to address sexuality in modern society, "an actively contested political and symbolic terrain in which groups struggle to implement programs and alter sexual

arrangements and ideologies."[68] Yet the development field is currently ill-equipped to integrate sexuality into its work, for five major reasons, each of which is discussed below.

## A. ADDRESSING SEXUALITY CHALLENGES SOCIETAL POWER STRUCTURES

Sexuality is related to many fundamental aspects of identity and social position, and beliefs about it inform deeply held values and interests, all of which are shaken when one questions the management of sexuality. Looking critically at the framing of sexuality and sexual activity by the state is critical. The links between sexuality and women's treatment under the law have been explored by lawyers and feminist theorists.[69] In 2016, the United Nations issued a groundbreaking report on the gendered aspects of torture and its connections with women's sexuality;[70] the author of the report, Juan E. Mendez, observed that, in some countries, women and girls risk particularly harsh punishment for what are considered to be "moral crimes", i.e., actions and behavior deemed to be indecent or sexually transgressive. The report highlights that torture and other abusive or degrading forms of punishment take place not only in prisons and public locations but in private settings, including in homes. This includes the confiscation of passports, withholding of access to family or money, and terrorizing or beating women for the any reason at all. The report makes the point that although the state is not generally responsible for perpetrating this abuse in private, it *is* responsible for failing to address this abuse.

Another feature of child marriage is the exploitation of the girl whose unpaid labor belongs entirely to her husband and in-laws.[71] The Special Rapporteur on contemporary forms of slavery's report on servile marriage documents that a girl's sexual service to her husband is but one of the many forms of labor she is expected to provide, with little control over the products of her labors, even including, in some places, her children.[72] Furthermore, men's participation in the paid labor force is predicated upon and subsidized by women's unpaid labor; this underwriting of male economic productivity by female unpaid labor—and women's resultant time-poverty— is well-documented in the economic literature. Diane Elson's "Three Rs" framework has been especially influential in its emphasis on making the invisible visible: *Recognize* (unpaid work), *Reduce* (the burden), and *Redistribute* (the burden more fairly between women and men).[73]

## B. DISCOMFORT WITH THE TOPIC OF SEXUALITY

Understanding the emerging sexuality of adolescents—both girls' and boys'[74]—is critical to understanding and addressing complex cultural beliefs that perpetuate child, early, and forced marriage. Yet the values and emotions around sexuality, especially adolescent sexuality, mean that many health and development experts are uncomfortable discussing it. The topic often remains the taboo "elephant in the room"[75] during conversations about how to address child, early, and forced marriage.

While overwhelming evidence exists that sexuality is deeply relevant to our work with adolescent girls, particularly when it comes to child marriage, people literally lack the vocabulary to discuss it in neutral terms: many people working on these topics describe the inability of most people they encounter to refer to genitalia without resorting to crude slang. This makes it very difficult to have a reasonable, respectful, and factually accurate conversation about anything related to sexuality.

Sexuality and sexual rights are key to the achievement of international development goals, but the tension that can arise around discussions of sexual rights and sexuality means that it is crucial to proceed with caution in our efforts to advance people's human right to sexual self-determination. Because sex tends to be viewed as a private matter not open for discussion, or at least described (sometimes opportunistically) as reflecting cultural values and therefore off limits, international human rights agreements are often met with resistance when they touch upon sexual roles and rights.[76] This resistance is dictated by moral codes "that are neither dependent on nor responsive to science or democratic process ... health and development are not prioritized above adherence to cultural or religious beliefs."[77] This can be because girls' and women's roles and sexuality uphold patriarchy, though in some cases, it is also because community/social harmony is prioritized over individual rights.

## C. POOR THEORIZATION OF SEXUALITY IN DEVELOPMENT; WE ARE NOT EVEN FULLY AGREED ON THE DEFINITION OF SEXUALITY

The international development field is very weakly theorized. The framing of sexuality differs depending on the context,

Two teenagers in Fatahillah Square, Kota, Jakarta (Old Town area), Indonesia.© 2013 Sarah V. Harlan/JHU·CCP, Courtesy of Photoshare

Despite some shared sense of what sexuality is in theory, people think of divergent things when they use the term in practice.[79] Some use the term "sexuality" to refer to an experience that belongs to an individual; others use it to reference societal norms about sex, something that determines social roles; it is often used to refer to the state of being sexually active; it may be invoked when talking about a person's ability to make choices about their body, particularly without state interference; it can be used in reference to the programmatic dimension, comprehensive sexuality education and services. In much of the international development field, sexuality is treated as a health issue rather than as an important frame for thinking about child marriage or something that conditions individual, family, and community decisions.[80] For many, sexuality may be associated with something positive, e.g., the aspiration to sexual pleasure. At the same time, it is often seen as implicitly negative, e.g., as something that must be managed (particularly girls' sexuality). Finally, it is sometimes used as a synonym for sexual rights, which include the right to make decisions independently and with access to resources, and the right to choose one's sexual partners freely.

With such conceptual variety, it is little wonder that the international development field has not reached a consensus on how to address sexuality. However, whatever the definition, there is some agreement as to the diverse elements that must be contained within this single concept.[81] Culturally-defined gender roles, for example, are a central aspect of a person's life and deserve their own separate category. This domain is precisely the focus of this analysis of the role of sexuality in determining the lives and prospects of adolescent girls.

The development field, with all of its insights and limitations, rests on an uneven intellectual legacy with regard to the topic of sexuality. [82] Ruth Dixon-Mueller's insightful

even among progressive activists. Where adolescent girls are concerned, for example, they are protagonists and autonomous decision-makers in the context of sexual and reproductive rights; but they are subordinated, voiceless victims in the context of child, early, and forced marriage. First, we have a definitional problem: what do we mean by sexuality? As noted previously, the World Health Organization has defined sexuality as

> ...a central aspect of being human throughout life [which] encompasses sex, gender identities and roles, sexual orientation, eroticism, pleasure, intimacy and reproduction. Sexuality is experienced and expressed in thoughts, fantasies, desires, beliefs, attitudes, values, behaviors, practices, roles and relationships. While sexuality can include all of these dimensions, not all of them are always experienced or expressed. Sexuality is influenced by the interaction of biological, psychological, social, economic, political, cultural, legal, historical, religious and spiritual factors.[78]

This definition encompasses a wide range of domains, including the social and behavioral domains that are of greatest interest to this paper, in the context of child, early, and forced marriage.

article on the sexuality connection in reproductive health highlights the motivations for touching on sexuality in this work.[83] She argues that the three main rationales for addressing sexuality have informed three specific approaches: the rationale for looking at sexuality in connection with contraceptive use has been to "identify factors that would promote contraceptive acceptance and use-effectiveness in order to achieve more rapid fertility decline."[84] The rationale for looking at sexuality in the context of adolescent sexual activity and non-marital pregnancy has been "to reduce out-of-wedlock pregnancies resulting in abortion or childbirth among adolescent girls, primarily through sex education and more responsive reproductive health services." And the rationale for looking at sexuality in the context of sexually transmitted infections has been "to identify risk factors in the spread of STDs and to understand better how to prevent, diagnose, and treat such infections." Given the underlying policy focus of each of these areas in which sexuality has been addressed, it is not surprising that the conceptual framing of sexuality has not been better suited to serve gender equality, and development more broadly.

The international development field, the umbrella under which child, early, and forced marriage has gained attention, has previously tried to address sexuality, but with mixed results. The Sustainable Development Goals now present a powerful opportunity for making progress.

## D. WE FAIL TO TAKE A RELATIONAL APPROACH TO TALKING ABOUT SEXUALITY AND (CHILD) MARRIAGE

In development work, in general, programs tend to focus on individuals or on specific populations rather than take a relational approach, even when such an approach is warranted, and development discourse tends to focus on individual beneficiaries rather than treat them as located in a web of relationships and hierarchies.[85] The relational aspects of marriage are hard to avoid, though the sexual and reproductive health field has done its best.[86],[87]

> Sexuality, after all, exists and is experienced not only within the individual, but in relationships: relationships with partners, with children, with parents and with fellow community members. It will be in striking a balance between rights and obligations, be- tween caring for self and caring for others, that we will strike the balance and develop sexual rights that benefit health, well-being, and quality of life of entire communities, and move nations forward toward achieving the *Millennium Development Goals.*[88]

Male-female sexual relationships, and all of the gendered roles associated with sexuality, call for working with everyone, but men are typically absent from conversations about sexual and reproductive health. Excluding men also excludes the opportunity to understand the market dimensions of marriage, i.e., the experiences of women and their families, and men and their families, as on different sides of the supply and demand equation. This, in spite of the fact that "household and interfamilial relations are a central locus of women's disempowerment in a way that is not true for other disadvantaged groups. This means that efforts at empowering women must be especially cognizant of the household-level implications of broader policy action …. It can be argued that while empowerment, in general, requires institutional transformation, women's empowerment requires systematic transformation not just of any institutions, but specifically of those supporting patriarchal structures."[89] And marriage is one such institution that forms the backbone of patriarchy.

It is vital that we recognize that patriarchal constructions of masculine and feminine sexuality have negative and oppressive effects on *men's* lives as well as on women's,[90] as they contribute to upholding structural inequalities.[91] A dominant, risk-taking sexuality that does not permit desire or input on the part of women not only disempowers women and reinforces an often-disrespectful narrative about them, it restricts men from expressing their sexuality in ways that do not conform to macho ideals.  This has multiple negative consequences: it not only impedes individual human fulfillment, it increases the exposure of men and women alike to sexually transmitted infections, and contributes to poor mental health, violence, and unwanted sex and pregnancy, among other ills.[92] A powerful journalistic study of female genital mutilation/cutting (FGM/C) demonstrates the impact of the practice on men as well as women, its harmful consequences for couples' sexual and intimate lives.[93] Indeed, it is important to consider the ways in which these practices actually subjugate *everyone* in a community to the male leaders at the top of its structural hierarchy. If men and women, and couples more generally, had allegiances and attachments to each

other as built and solidified through sexual intimacy, how might that undermine the patriarchal power structures of a community and society?

## E. THE INTERNATIONAL DEVELOPMENT FIELD HAS TENDED TO TAKE AN INSTRUMENTAL APPROACH TO SEXUALITY AND REPRODUCTION

International development has taken an instrumental approach to sexuality and reproduction, framing its focus on health, economic and demographic impacts rather than on the social and political meaning of sexual relationships. Its

*Economic framing.* Adolescent pregnancy and childbearing in the United States, for example, has been of concern primarily for its economic impact on the welfare state. There has been a strong mandate in the field to explain, to governments and policymakers, the cost implications of failing to address adolescent access to contraception or child marriage, and the savings that could be reaped by intervening in these phenomena.[96] Little consideration has been given to girls' experience of sexual relationships and those relationships' political content, the coercion girls face, and their lack of alternatives, among other areas of neglect.[97]

*Demographic framing.* Many policies and much research have described and argued for paying attention to the long-term demographic impact of adolescent pregnancy and childbear-

## IF MEN AND WOMEN, AND COUPLES MORE GENERALLY, HAD ALLEGIANCES AND ATTACHMENTS TO EACH OTHER AS BUILT AND SOLIDIFIED THROUGH SEXUAL INTIMACY, HOW MIGHT THAT UNDERMINE THE PATRIARCHAL POWER STRUCTURES OF A COMMUNITY AND SOCIETY?

focus on reproduction has emphasized the achievement of health, economic, and policy goals. This framing has limited its ability to consider sexuality and to understand the values and meanings of sexual behavior.

*Health framing.* While international development actors engage with issues that involve sexuality in different ways at the policy and programmatic levels, sexuality itself remains an area of silence; when it is addressed, it is typically within a public health/medical frame of which the central concern is maternal and child health outcomes. And where research and interventions do address sexuality, it is often with "a biomedical approach [that] tends to be an account of acts rather than an exploration of the meanings behind these and the reasons for women's behavior."[94] While there are notable exceptions of researchers who take a holistic approach to sexual health and wellbeing, they are in the minority and their work is often focused on the United States.[95]

ing.[98] This is indeed an important rationale, but in the focus on fertility and contraceptive prevalence—both measured exclusively from data on women—the sexual context of pregnancy and childbearing is completely sidestepped.

*Girls' empowerment framing.* The empowerment of girls is the stated objective of many development interventions. However, empowerment programs have implicit and explicit rules that girls are expected to abide by in order to participate, like being on time, being courteous, and avoid the risk behaviors the program is designed to help prevent. In one example, orphaned adolescent girls in Botswana enacted their "empowerment" in ways that followed, were constrained by, or violated the moral codes from Northern donors, local HIV-orphan organizations, and their communities.[99] As one organization worked to prevent girls from seeking out "sugar daddies" by giving the girls gifts, many girls began to use these resources in their efforts to attract wealthier boyfriends, "aggressively pursuing age-unequal relationships using the very tools the NGO

provided to fight them." When girls exercise their newfound empowerment by acting on their sexual agency, they may violate everyone's rules (the rules of their families, communities, development agencies, and donors).

Adolescent girls' sexuality is a source of much anxiety to their families and their communities, and is also faced with apprehension and resistance by their nations and even the global development community.[100] International development discourse seldom takes this anxiety into account. And while development programs intend to reduce gender inequality and empower girls, they intervene in practices such as CEFM without adequately addressing this anxiety.

As a result of some of the factors described in this paper, efforts to address CEFM can act both against and with patriarchy in intervening in the lives of adolescent girls, their families, and their communities. Programs and policies often render girls' sexuality invisible and/or problematic. For example, while one important risk for girls who marry as children is early childbearing, typical CEFM programming includes neither comprehensive sexual education programming nor access to contraception. In addition, recent research has shown that a delay in marriage does not postpone the first pregnancy to the same extent; while young women may postpone marriage itself, they often hasten to have a child once they are married.[101] By ignoring the sexuality of young girls, we overlook effective ways to help girls and women manage their sexual relationships, and fail to give them the tools to avoid unplanned pregnancies and other poor sexual and reproductive health outcomes. Similarly, we fail to acknowledge the agency of adolescent girls who express the desire to marry or have children before the age of 18; we always know better, making it difficult for us to appreciate the choices they make in response to the conditions of their lives.[102]

Community fears of sexual violence against girls are often framed as the need to monitor girls' sexuality, rather than to prevent the violence they face.[103] To address sexuality effectively, we must understand the community boundaries that define acceptable behavior and view only certain spaces as safe for girls. There is often a disjuncture between what international actors and local communities consider to be "safe" spaces for girls: communities that practice child marriage view the marital home as the safe space, from the point of view of protecting familial honor and shame, because their daughter is no longer at risk of sexual violence that would dishonor the family. International development actors, at least implicitly, assume a benevolent natal home and a risky marital home, making delaying marriage and sexual activity the important goal. Yet there is increasing evidence of high rates of child sexual abuse and other forms of violence, including honor killing, within the natal home.[104] The current disjuncture between the patriarchal and international development narratives, on the one hand, and the realities of girls' lives, on the other, must be addressed to amend the system and to put structures and supports in place that help girls to lead healthy, productive lives.

To improve the lives of adolescent girls and prevent CEFM, programs must address the root causes of CEFM within girls' families and communities, and provide adolescent girls with the skills to make decisions about their lives, particularly with regard to their sexuality, childbearing, and partner choice. This will make it possible for girls to pursue their goals, protect their sexual and reproductive health and rights, and seek egalitarian and respectful partners—and for their communities to understand the benefits of and support these choices.

# 05

## PROGRAMS THAT ADDRESS SEXUALITY

Addressing sexuality can give rise to fresh ways of approaching interventions to end child marriage and mitigate the negative impact of it on the lives of already-married girls. Incorporating a positive sexuality lens in child marriage prevention and mitigation efforts gets at the root causes (patriarchy, gender inequality) that put adolescent girls at risk of child marriage and its harmful consequences.

Programs are needed in a number of areas to address the connections between sexuality and the practice of child marriage. Some ideas are emerging from related programs, though there are few working precisely at this intersection. at this intersection. The CEFM Sexuality Program Working Group, a group of individuals in diverse civil society organizations who share an interest in programs that address gender inequality, sexuality and CEFM, has been working on a review of the evidence on programs that address sexuality and work to end child marriage.[105] The approaches discussed here are good examples

that can guide attempts to address sexuality more systematically when working to improve the lives of adolescent girls. The programs described here and some additional strong examples appear in Table 1.

Discomfort about adolescent sexuality except within marriage leads people to either deny it or to perceive it as a problem; they fear that sexuality education will lead children and adolescents to think about sex before they are ready for it. As one WHO researcher has stated of sexuality education, "As a result, policymakers are reticent, school heads and teachers are uncomfortable, and community groups are opposed to it. These mutually aggravating factors have paralyzed action in many countries. Yet a small number of countries are successfully navigating these obstacles. They have strategically chosen issues to address. They have framed them carefully. They have built community support. And they have dealt with backlash when it arose, as it does almost universally."[106]

## A. ENGAGING GIRLS

### EMPOWERING GIRLS TO MOVE FROM THE PERSONAL TO THE POLITICAL

As highlighted above, sexuality is an embodied experience. Where patriarchy prevails, girls are taught in many different ways that they are inferior to boys and must suppress what they want from life to uphold what their families, husbands, and communities expect of them. When girls learn about themselves, their abilities, and their rights—and that it is not "natural" that they be subordinate to boys—their sense of self-worth and desire for agency in their lives increases. Their families and communities must also learn this. Strengthening the parent-child bond and communication; providing comprehensive sexuality education that includes girls' right to bodily integrity, sexual pleasure, and access to SRH services; and promoting gender equitable, non-violent relations between girls and boys are some of the ways of creating an environment that empowers girls and in which the contributing factors to child marriage cannot thrive. Safe spaces for girls allow them to build social support networks and have discussions of sexuality, increasing their social connection and providing them with the tools to be more assertive and make their own choices. Many organizations are working with girls to enable them to change the circumstances that lead to child marriage. A few, outlined here, exemplify how giving girls voice and agency, and increasing their social connection, improves their self-perception and their ability to exercise their rights.

Rutgers WPF launched the *Awareness to Action* (A2A) program in two districts of Pakistan to improve the reproductive health of girls and young women. The program engaged with religious leaders in Sindh province and eventually incorporated messages from the Koran into its curriculum. Importantly, the program trained girls as leaders, or *kirans* – using IEC, educational stories and peer education, and instruction in dealing with opposing arguments—to mobilize communities and take part in advocacy campaigns, raising awareness of child marriage, teen pregnancy, girls' education, and reproductive and maternal health. While sharing these messages on child marriage and health, the girls learned and their confidence increased.[107]

Also in Pakistan, the organization Aahung, recognizing that it might antagonize local communities and violate cultural mores to speak directly about premarital sex and contra-



*An empowered couple in India who opted for family planning measures after an early marriage work together on a sewing project.*
*© 2016 Arvind Jodha/UNFPA, Courtesy of Photoshare*

ception, decided instead to focus on related problems that community members themselves had identified, including child marriage and gender-based violence.[108]

CREA's *It's My Body* program, implemented in eight rural districts in India, aims to empower women and girls with information to make decisions about their bodies, health, and lives, and to promote SRHR from a feminist perspective to increase their bodily autonomy.[109] *It's My Body* uses sports as the entry point for girls aged 12 to 16 to access public spaces, learn more about and become comfortable with their bodies, receive SRHR and human rights information, learn to exercise more assertiveness and control over their bodies and lives, understand the meaning of consent, and increase their self-esteem and mental/physical well-being. They also learn teamwork, leadership, and decision-making skills, and help them to demand access to SRHR information and services. Community engagement with parents of the participating girls, health-care workers, teachers, and other local leaders also takes place, to increase support for girls' participation.

The program also coaches girls on how to handle any tension that may arise in their families due to their increased assertiveness.

It is important, in empowering young people and supporting their voices, to improve their mental health and build their confidence. A significant factor in some adolescents' poor mental health is the feeling that they are alone/isolated in what they are experiencing—this points to the importance of safe spaces and peer-group interaction. Their low confidence and lack of a positive peer group with which to discuss their concerns undermines their decision-making. The mind and the body cannot be separated,[110] as we see from the global data analysis, which shows us that the number-one cause of girls' mortality is now suicide.[111] An example of a program that has successfully increased young people's self-confidence, including in their ability to protect their SRHR, is *The World Starts With Me*.[112]

## PROMOTE GIRLS' VOICE AND AGENCY IN THESE DECISIONS

A recent synthesis analyzed four promising girl-focused programs—*Ishraq*, *SoFEA*, *PRACHAR*, and *TESFA*—each of which worked to empower girls, and engaged in processes to change attitudes and practices supportive of child marriage.[113,114] The authors defined girls' empowerment as the expansion of girls' current and future ability to make and act on strategic life choices. The social, political, and economic factors that influence girls' lives, from the household to the national levels, require approaches such as educating and mobilizing communities to change harmful gender norms and giving girls access to SRHR information and services. All of these elements must be in place for girls to be able to make their own decisions. The four program case studies indicated that girls' improved abilities followed three related pathways:

> **1.** *Self-transformation* through enhanced knowledge and skills, access to social support, increased self-awareness and self-efficacy, and enhanced aspirations
> **2.** *Enhanced education and economic opportunities and alternatives*, which enhance girls' skills, ability to negotiate, confidence, aspirations, self-sufficiency, decision-making, and control over resources
> **3.** *Increased influence over others and over key decisions*, through increased mobility and visibility, change how girls are seen; they learn to express their opinions and ideas to others; they have greater individual agency, and greater collective

agency by joining together, and they enhance their roles in decision-making and communication within marriage.

Girls who are able to express themselves will be better able to advocate for themselves and make their own decisions, which will translate into reduced external control over their lives and fewer child marriages.

In research by Jewkes and Morrell (2012), young women in South Africa exercised agency in the context of a gendered power imbalance, challenging patriarchy and sexual control, in ways that may prevent gender-based violence. Some of the young women interviewed in this study were already on the cusp of exercising agency and exerting more assertiveness regarding partner selection and relationship characteristics. The research highlighted the need to reinforce girls' capacities through supporting girls' development of an empowered identity:

Rather than focusing on admonishing the taking of risk and instrumental pursuits in relationships, sexual health promotion programs may be more successful if they provide space for young women to discuss their sexual desires and hopes for emotional and relational fulfillment. Whilst education needs to address the politics of gender power, women need to be supported and brought to a tangible understanding of the possibilities and potential for them to assert control in sexual and relationship domains of their lives.[115]

In what the authors called "a modern girl identity," reflecting a desire to be modern and "in control of their lives," young women did not accept violence or controlling behavior and expected respect from their partners, though they did not significantly challenge prescribed gender norms.

## PROVIDING COMPREHENSIVE SEXUALITY EDUCATION FOR GIRLS AND BOYS

Children and adolescents crave information about their changing bodies, relationships, and lives. Adolescents need the knowledge, skills, and agency to protect their health, to realize their potential, and to enter fulfilling, caring relationships. Studies from the United States, India, and several Sub-Saharan African countries, among others, find that adolescents turn to health care providers, teachers, their parents, and other trusted adults for this information.[116] Research shows that children and adolescents with access to non-judgmental comprehensive sexuality education delay the onset of inter-

course and are less likely to engage in behaviors that could put their health at risk.[117] Indeed, it is telling that the areas in the United States with the highest prevalence of STIs are generally the same places where comprehensive sexuality education is least available.[118] Equally important is that those teaching comprehensive sexuality education be trained and use quality,

# SOME BOYS HELD NON-TRADITIONAL (MORE EGALITARIAN) GENDER BELIEFS.

age-appropriate curricula, and that they have reflected upon their own thoughts and feelings on the subject so that they are able and willing to engage in open dialogue with young people on topics related to sexuality. Sex needs to be made normal.[119]

While support for comprehensive sexuality education in schools is generally weaker in more conservative settings, numerous programs are taking on the challenge of introducing it these contexts, quite effectively.[120] One such program is Rutgers WPF's *The World Starts with Me* (WSWM).[121] An interactive SRHR curriculum that has been adapted and implemented in ten countries across Asia and Africa, it aims to educate in- and out-of-school young people in making decisions about their sexuality, sexual and reproductive health, and plans for the future. It teaches them that sexuality and love are natural aspects of human development, helps them to analyze their personal values and understand their sexual, emotional, and physical development so they can make informed decisions, and helps them to understand the ways in which relationships impact decision-making. After these lessons, young people learn about preventing and coping with sexual health problems. At the end of the program, students demonstrate what they learned for their peers, parents, and community. An evaluation found that WSWM significantly improved several sexual and reproductive health outcomes and increased intention to delay sexual intercourse, knowledge of pregnancy prevention, and confidence in ability to use condoms in the future.[122]  The intervention group also scored significantly higher than the comparison group on anticipated self-efficacy to manage or prevent unwanted sex.

The state of Mississippi in the southern United States has the second highest teen birth rate in the United States. *Mississippi First* advocates for comprehensive sexuality education in schools throughout the state. About three-quarters of Mississippi parents support this.[123] (Eighty percent of parents in the United States want their children to receive sexuality education from trained educators in school or other educational settings, so that they receive accurate information to supplement what they learn at home.[124]) They are currently implementing the *Creating Healthy and Responsible Teens* (CHART) program to increase the resources, tools, and technical assistance available to interested school districts across Mississippi.[125] CHART addresses healthy relationships and gender-based stereotypes, sexual double standards, adolescent development, parent-child communication (with sexuality-education homework assignments to complete or discuss with a parent/adult), and healthy life skills including goal-setting, decision-making, communication, and self-management.

## B. ENGAGING BOYS

Developed in Nepal, Save the Children's *Choices* curriculum works with children aged 10 to 14 to explore alternative views of masculinity and femininity and challenge stereotyped gender attitudes and roles.[126] Although it does not explicitly address sexuality, it works to build respect between boys and girls in the longer term. Ages 10 to 14 offer a crucial window of intervention in which children are more likely to be influenced by new knowledge and skills, allowing them to challenge harmful gender and social norms. The curriculum was piloted in child clubs in a district in Nepal, where trained facilitators implemented developmentally-appropriate participatory activities, such as taking photos that show gender inequalities, and exploring and discussing the gender inequalities in their community—and the feelings associated with them. Statistically significant results showed that the program was effective at encouraging more gender-equitable attitudes and behaviors among participating boys and girls. For example, after the intervention, fewer participants agreed that it was acceptable for a man to beat his wife if she disagreed with him, and more participants felt that daughters should have the same opportunities as boys to go to school or work outside the home. Parents of participants reported their sons discussing equality for their sisters.[127]

These are views that support the rights of girls and have the potential to reduce the restrictions they face.

Topics related to sexuality and male-female relationships are taboo in many settings out of fear that acknowledging them will somehow encourage inappropriate behavior and bring shame to families and communities. In fact, however, a review of comprehensive sexuality education program evaluations indicated that *programs that incorporate content on gender and power were five times more effective in lowering the rates if STIs and unintended pregnancy than those that do not.*[128] This suggests that if patriarchal notions are critiqued in ways that support gender equality, girls and boys will learn to interact in ways that lead to more egalitarian sexual relationships. Several programs offer ways to build more respectful relations between girls and boys.

EngenderHealth's *Gender Matters* project (GenM), for example, was implemented in Austin, Texas, the U.S. state with the third-highest adolescent pregnancy rate. In the GenM project, boys and girls aged 14 to 16, in mixed-sex workshops led by facilitators, learned how to communicate assertively; how to make decisions for themselves about if and when to have sex; and how to prevent violence, disease, and pregnancy in their relationships.[129] They discussed harmful gender stereotypes and their negative impact on health outcomes, and how positive messages about gender can promote healthy behaviors. During this dialogue, participants discussed a shared vision for gender-equitable relations and the behavior changes necessary to achieve them. Preliminary results showed that female participants highlighted the contradictions of gendered social expectations, particularly related to sexual decision-making and feeling empowered to make their own choices about sex. Male participants recognized the power of traditional notions of masculinity and the connection between these notions and poor sexual and reproductive health outcomes; evaluated their relationship behavior given what they had learned about masculinity; applied the new, more equitable gender norms to their relationships; and discovered that some boys held non-traditional (more egalitarian) gender beliefs.

## C. ENGAGING OLDER GENERATIONS

### TEACHING PARENTS HOW TO TALK ABOUT SEXUAL RELATIONSHIPS AND SEXUALITY

It is essential to work with parents to build their capacity to talk about sexuality and prepare their children for their sexual lives. Mutually respectful relationships between parents and children, between peers, and between sexual partners help to counteract the ways in which patriarchy, with its emphasis on the economic and transactional aspects of marriage and sexuality, *undermines* solidarity and intimacy. We tend to focus on the challenges of working with girls and boys on this. But, in a way, the problem belongs to adults. Youth are curious and search for answers; they are not inherently nervous or apprehensive about sex—they learn such anxiety from societal secrecy and irrational shame around the subject.

Adolescents are especially curious about this stage of life and have questions for which they seek answers. While peers may be sources of information, parents also have a strong influence on their children's sexual and reproductive health knowledge and the choices they make, so it is critical that they are empowered to provide accurate information. Depending on the setting, parents may be gatekeepers of sexual and reproductive health information for their adolescent children, whether by not discussing topics related to sex or by controlling their children's interactions outside of the home and choosing their partners. It is well-documented that children, adolescents, and youth are better able to protect their sexual and reproductive health and rights when they are appropriately informed and able to ask questions, can exercise agency, and have access to sexual and reproductive health services and products.[130] Although research shows that the connection between parents and children is a protective factor against risky and unhealthy decisions,[131] parent-child communication is often weak, particularly in communities with more hierarchical relationships between adults and children.[132] The fear-based reasons parents marry their daughters early, i.e., to prevent sex, pregnancy or family dishonor before marriage, could be addressed if parents and children engaged in more healthy, open, and informative communication about sexual and reproductive health and rights, and gender and sexuality-related dynamics and expectations.

### BUILDING SOLIDARITY BETWEEN CHILDREN AND ADULTS

Because strong age hierarchies inhibit adolescents' choices, it is necessary to build intergenerational communication and solidarity, allay family concerns, and create an environment in which adolescents can safely express their opinions and desires and be understood. Programs need to encourage intergenerational communication so that girls can express their

# Table 1. Programs addressing sexuality and influencing child marriage

| PROGRAM TYPE, NAME AND SOURCE | APPROACH |
|---|---|
| **ENGAGING GIRLS** | |
| *Empowering girls to move from the personal to the political* | |
| Awareness to Action, Rutgers WPF Pakistan http://www.rutgerswpfpak.org/a2a.html | Engaging with religious leaders and training girl leaders for raising awareness |
| Aahung http://aahung.org/projects | Providing life skills education in schools, communications materials for young people, teachers, caregivers and community stakeholders training for youth advocates, teachers and healthcare providers |
| International Centre for Reproductive Health and Sexual Rights (INCRESE) http://www.increse.org/ | Promoting sexual and reproductive rights through comprehensive sexuality education, services and support networks; mobilizing girls to demand their rights; creating forums where officials and leaders can engage with parents and teachers |
| It's My Body http://www.creaworld.org/sites/default/files/IMB%20Note.pdf | Empowering girls through sports and information to access public spaces and make decisions about their bodies, health and lives |
| Girls' Power Initiative http://www.gpi.com.ng/ | Gender transformative program working at different levels of the ecological model and the media. |
| YP Foundation http://www.theypfoundation.org/ | Using peer education to grow cohorts of young feminist, who develop and lead social change initiatives; using peer education and youth led advocacy for comprehensive sexuality education using a feminist positive sexuality framework |
| Sarathi Development Foundation ttp://www.sarathidevfo.org/index.aspx | Empowering adolescent girls by increasing their awareness on education, gender and sexuality, lifeskills, reproductive health and violence prevention |
| Feminist Approach to Technology (FAT) http://www.fat-net.org | Young Women's Leadership Program builds feminist leadership by giving technology skills to young women, and helping them understand – and demand - their rights. |
| *Promoting girls' voice and agency in these decisions* | |
| Ishraq https://www.popcouncil.org/research/ishraq-bringing-marginal-ized-rural-girls-into-safe-learning-spaces-in-rural | Bringing marginalized rural girls into safe learning spaces in rural Upper Egypt |
| Social and Financial Empowerment of Adolescents SoFEA http://www.comminit.com/global/content/bracs-social-and-financial-empowerment-adolescents-sofea | Empowering adolescent girls, aged 11-21, both socially and financially in order to make them more confident and independent so that they can lead dignified lives |
| Promoting Change in Reproductive Behavior PRACHAR http://www.pathfinder.org/publications/prachar-advancing-young-peoples-sexual-reproductive-health-rights-india/ | Improving the sexual and reproductive health status of adolescents and young couples in the state of Bihar in northern India |
| Toward Improved Economic and Social/ Reproductive Outcomes for Adolescent Girls (TESFA) http://www.care.org/sites/default/files/documents/TESFA%20Final%20Evaluation.pdf | Improving the lives of married adolescent girls in Amhara, Ethiopia |
| Peace Foundation Pakistan http://www.safeabortionwomensright.org/peace-foundation-pakistan/ | Promoting gender equality in sexual and reproductive related issues, promoting sexual awareness and motivation for safer and equally enjoyable sex; working with police, religious leaders, young married couples, families, health services providers, community leaders, policy makers, civil society organizations; engaging explicitly with material from the Qur'an. |
| Sadbhavana Trust https://badaltifiza.wordpress.com/ | Working with Muslim girls from slums in Lucknow, the program leads girls on an experiential journey of empowerment through workshops on under-standing patriarchy through an analysis of the lived stories of participants. New media skills allow the girls to represent their stories and raise issues of concern. |
| **ENGAGING BOYS** | |
| Save the Children's CHOICES https://www.k4health.org/sites/default/files/2009_savethechildren_choices.pdf | Exploring alternative views of masculinity and femininity and challenging stereotyped gender roles with children |
| Gender Matters (GenM) https://www.engenderhealth.org/our-work/major-projects/gender-matters.php | Discussing harmful gender stereotypes and their negative impact on health outcomes and positive messages about gender can promote healthy behaviors |
| YP Foundation http://www.theypfoundation.org | The 'Mardon Wali Baat' programme creates youth-led dialogues and actions to question patriarchal notions, norms of masculinity, and gender-based violence. It works on these issues with young men and boys in contexts where violence rooted in asserting the hegemonic position of men is normalized. |
| Centre for Health and Social Justice (CHSJ) http://www.chsj.org/ | Working in rural communities in India, their approach centers on delib-eration and engaging in collective and individual reflection on what men consider a gender-just society and creation of a manifesto for action. |

| PROGRAM TYPE, NAME AND SOURCE | APPROACH |
|---|---|
| **ENGAGING OLDER GENERATIONS** | |
| *Teaching parents how to talk about sexual relationships and sexuality.* | |
| CDC https://www.cdc.gov/healthyyouth/protective/pdf/talking_teens.pdf | Providing guidance to parents for talking with their teens about sex |
| Tostan's Community Empowerment Program http://www.tostan.org/community-empowerment-program | Strengthening relationships between teachers, parents and grandparents through dialogue |
| *Building solidarity between children, and parents and other adults* | |
| Save the Children – VOICES http://www.savethechildren.org/atf/cf/%7B9def2ebe-10ae-432c-9bd0-df91d2eba74a%7D/VOICES%20GUIDE.PDF | Using young people's words to cultivate parental support for their concerns |
| CARE – Tipping Point https://caretippingpoint.org/innovation/ | Promoting dialogue between children and parents, engaging community members, mobilizing young people and bringing together a diverse set of activities at all levels |
| The Grandmother Project. http://www.grandmotherproject.org/wp-content/uploads/GMP_DHF_Eng_Final_webGMP-Publications.pdf | Building on grandmothers' status to influence community, promoting dialogue about community problems and increasing family involvement in supporting children's education |
| *Providing comprehensive sexuality education for girls and boys so they ask difficult questions and talk about the challenges that face them.* | |
| The World Starts with Me, Rutgers WPF. https://www.rutgers.international/sites/rutgersorg/files/PDF/2014_FactsheetWSWM%20Eng_FINAL.pdf | Educating in- and out-of-school young people to make decisions about their sexuality, SRH, and plans for the future |
| Creating Healthy and Responsible Teens http://teenhealthms.org/programs/chart/ | Increasing the resources, tools and technical assistance for comprehensive sexuality education in schools |
| Youth Harvest Foundation Ghana http://www.yhfg.org/ | Providing comprehensive sexuality education to adolescents; youth body rights advocacy project; Friendship, Love and Sexual Health (FLASH) program |
| **ENGAGING COMMUNITIES** | |
| *Supporting communities to recognize and manage the power of sexuality rather than fearing it.* | |
| Ethiopian Orthodox Church's Development Bible. http://ethiopia.unfpa.org/news/developmental-bible-project-manual-reviewed | Using the Ethiopian Orthodox church's teachings and reach to convey health and development messages |
| Sonke Gender Justice in South Africa workshop with South African Council of Churches http://genderjustice.org.za/publication/faith-and-sexual-pleasure/ | Discussing the place and politics of sexual pleasure within communities of faith |
| TICAH Trust for Indigenous Culture and Health Kenya http://ticahealth.org/ | Promoting a holistic approach to empowerment and sexuality education, creating safe spaces for open communication; balancing respecting community and religious leaders and breaking taboos on sexuality; "Aunty Jane" hotline |
| *Challenging specific aspects of honor* | |
| MOVISIE https://www.movisie.com/sites/www.movisie.com/files/files/Publications/Toolkit%20against%20violence%5B1%5D.pdf | Supporting organizations working against honor related violence, forced marriage and abandonment |
| Family Honour Project http://www.mrcssi.com/local-service-providers-and-community-members-join-mrcssi-in-honour-related-violence-prevention-workshop/ | Promoting honorable ways to address family conflict |

needs and wants to the trusted adults in their lives, and gain a better understanding of the lives of already-married women and what they need.[133] The persistence of child marriage relies on parents, relatives, the community, and religious/traditional

## WITH THE APPROVAL OF SHI'A AUTHORITIES, THEY IDENTIFIED ENGAGEMENT AS THE CULTURALLY APPROPRIATE MOMENT AT WHICH TO SPEAK ABOUT SEXUAL AND REPRODUCTIVE ANATOMY AND SEXUAL PLEASURE

leaders choosing this path for their children and upholding the practice. Because the perspectives of these adults typically conflict with adolescents' own aspirations in changing times, channels of communication need to be opened up between adults and children.

Save the Children's *Voices* project engaged very young adolescents and their parents to increase  support for gender equality, with very positive results.[134] CARE's Tipping Point project promotes dialogue between adolescents and parents, to increase communication and trust along with support for gender equality.[135] *Increased communication on these topics and mutual understanding between parents and children*, as well as teachers and the community, can build stronger, more open and more supportive intergenerational relationships. Such dialogue may help parents to be less fearful about what might befall their adolescent children so that they do not see child marriage as the only means of protecting their increasingly independent daughters; help them to recognize that their daughters have the tools to protect themselves; and, perhaps, help them to support their girls' aspirations. Many organizations offer "conversation starters" for parents to help them speak from a place of sexual and reproductive health knowledge and build closer bonds with their children.[136]

In some settings, older relatives with higher status within the family and community can act either as mediators between girls at risk of child marriage and their parents, or as facilitators of more open dialogue as marriage arrangements proceed. A study in Morocco found that adolescent girls, their families, and community members alike emphasized the significant influence older relatives and schools had in intervening when girls were being forced into marriage.[137] Intergenerational, communal conversations on the injustices being inflicted upon girls and women can help community members to reflect on harmful practices and learn to recognize and respect girls' and women's rights.

The GrandMother Project (GMP) in several West African countries uses local models for change to improve the health and well-being of women and children, and to expand educational opportunities for children, particularly girls.[138] GMP uses grandmothers' respected status as elders to engage them in building consensus and positively influencing community and school practices to better the lives of women and girls in areas such as CEFM, early pregnancy, Maternal Child and Neonatal Health , reproductive health, and FGM/C. This is accomplished through intergenerational dialogues and dialogues between women and men. The project encourages relationships between older women in the community and adolescent girls to promote dialogue about community problems and uphold the positive values of both traditional and modern cultures. The grandmothers support the girls as they grapple with issues related to sexuality, love, and pregnancy, among other aspects of coming of age as women. GMP also uses dialogue to strengthen relationships between teachers and parents and grandparents, and increases family involvement in supporting children's educational opportunities. Tostan's Community Empowerment Program model has used this approach throughout West Africa to promote the idea of keeping girls in school, and ending FGM/C and child marriage, among other community-initiated improvements.[139]

## D. ENGAGING COMMUNITIES

Regarding the social construction of sexuality: Physically identical sexual acts may have varying social

significance and subjective meaning depending on how they are defined and understood in different cultures and historical periods .... Cultures provide widely different categories, schema, and labels for framing sexual and affective experiences. These constructions not only influence individual subjectivity and behavior, but they also organize and give meaning to collective sexual experience through, for example, the impact of sexual identities, definitions, ideologies, and regulations.[140]

It is therefore essential to work with a variety of people in a community and cultural group, including those who reinforce and prescribe what is appropriate behavior for others.

Addressing sexuality often obliges one to challenge societal power structures. Efforts to incorporate sexuality, whether into CEFM or other programming, need to be gender transformative.[141] When gender and power inequalities are diminished in the context of addressing sexuality and sexual health and rights, women and girls as well as men and boys will be better positioned to manage this important part of their lives in the context of mutually respectful relationships.

## SUPPORT COMMUNITIES TO RECOGNIZE AND MANAGE THE POWER OF SEXUALITY RATHER THAN FEAR IT

We are arguing here that a healthy approach to sexuality focuses on its positive dimensions rather than on managing the anxieties of those who wish it would go away. Religious leaders can be strong allies in promoting more egalitarian and positive understandings of sex, female sexuality, and gender roles, weakening the underlying forces that contribute to child, early, and forced marriage. Muslim clerics in the Middle East historically had quite a different relationship with sexuality than is presently the case. As Shereen El-Feki's book *Sex and the Citadel* documents in detail, they did not shy away from recognizing this important and powerful aspect of personhood, and indeed offered guidance on the benefits of recognizing and cultivating its power in the context of marriage.[142]

In the Iran of the 1990s and early 2000s, the government worked hard to promote the health of the population and to ensure contraceptive availability where it was wanted. With the approval of Shi'a authorities, they identified engagement as the culturally appropriate moment at which to speak about sexual and reproductive anatomy, sexual

pleasure, contraceptive use, etcetera.[143] They recruited all young engaged couples into classes on these topics, some sex segregated, others with men and women together, but they did not shy away from talking about sexual relationships and pleasure at this culturally sanctioned moment.

The Ethiopian Orthodox Church's Development Bible was produced in collaboration with UNFPA and the Population Council. In many remote rural Ethiopian communities, churches and mosques are the only institutions with which people have regular contact. With that in mind, the patriarch of the Ethiopian Orthodox Church decreed the writing of the Development Bible to take advantage of the church's reach to convey health and development messages to its congregants via trained priests.[144] An initial evaluation showed positive effects on the knowledge and commitment of the priests to share the messages with their communities.[145]

Sonke Gender Justice in South Africa partnered with the South African Council of Churches Youth Forum, in 2014, to organize a workshop for young faith leaders from across the country to discuss the politics of sexual pleasure within communities of faith.[146] Through a nationwide application process asking the public to submit personal essays on why sexual pleasure is important to them, Sonke selected participants from different sexual orientations and faiths, including African Traditional Religions, Christianity, and Islam, to join this workshop. They discussed topics such as "Understanding the dynamics of childhood gender conditioning," "What is love?," "Sexual pleasure and faith," "Making sex normal," and gender stereotypes and their negative consequences. Participants felt free to be open with very personal and sensitive experiences related to sex, sexuality, and sexual pleasure, and to discuss how they interact with others in their faith communities on these issues; they challenged their own preconceived notions and learned from each other in the process.

To support community dialogue, it is necessary to develop a respectful and informed shared vocabulary. Our language about sex-related topics is often inadequate, stereotyped, or vulgar. Conversations with program implementers from Pakistan and India, among other places, have indicated that the terms used for genitals in South Asia and elsewhere are often derogatory slang terms.[147] Thus, in many settings, a huge amount of work is needed to address the "language problems" that get in the way of non-judgmental, productive

conversations about sex. This requires building the program implementation capacity of local partners who know the community and its culture.[148]

## CHALLENGING SPECIFIC ASPECTS OF HONOR

Examples of programs that address specific aspects of honor are necessary to our arguments because honor lies at the nexus of the *meaning* accorded to sexuality, and the interests that are actually served by child, early, and forced marriage (hint: they're not the girls').

To summarize this section on interventions to address sexuality: many pathways exist for framing sexuality *positively*, even in the most conservative of settings. These pathways can contribute to the diminution of the contributing factors to child marriage, including the fears that lead to control of adolescent girls' sexuality, and some aspects of gender inequality. Efforts to increase intergenerational communication, build mutual respect between boys and girls, empower girls, address honor, and understand and manage sexuality rather than fear it can and will help create the personal and social conditions that will lead to the end of child marriage.

## Programs that attempt to address honor

Education programs to reduce the acceptability of honor-related violence hold promise, but there are not many of them.

• MOVISIE: The main goal of the project is to increase attention and support for the work of grass roots organizations and non-governmental organizations (NGOs) against harmful traditional practices like honor related violence, forced marriage, and abandonment.  https://www.movisie.com/sites/www.movisie.com/files/files/Publications/Toolkit%20against%20violence%5B1%5D.pdf
• Muslim Resource Center for Social Support and Integration: "In collaboration with this model, the creative and innovative members of the workshop worked together to better define 'honor'-related violence and come up with ways that our cultural, faith, and service-based communities can prevent this violence before escalation, and also redefine the concept of 'honor' to exclude violent behavior in families. Throughout the workshop, attendees broke into groups to come up with ideas on how to: change people's mentality toward violence, make strong partnerships with community organizations, and even how to market and advertise a campaign against 'honor'-related violence.  This workshop was part of MRCSSI's *Family Honor Project*, which is an ongoing program that seeks to provide families with honorable alternatives to addressing family conflict." http://www.mrcssi.com/local-service-providers-and-community-members-join-mrcssi-in-honour-related-violence-prevention-workshop/
• The AHA Foundation: A service provider and advocacy organization, worth mentioning as their work addresses honor-related violence. http://www.theahafoundation.org/honor-violence/ http://www.theahafoundation.org/online-training/honor-violence-and-forced-marriage/

# Child marriage and the law

Laws often have unexpected consequences for girls and should be formulated and established with caution. Age-of-consent (to sex) laws in Uganda commodify girls' sexuality and reinforce patriarchy. The appropriation and commodification of girls' and women's sexuality and reproduction by fathers, families, and husbands is exemplified by the exchange of bride price or dowry. As possessions of men which are in need of protection, women and their reproductive capacities need to be tightly controlled, which is accomplished through controlling their sexual behavior. This sense of ownership of girls' sexuality, and the false protection of girls via honor, is illustrated by the unintended consequences of Uganda's age-of-consent laws, as Parikh (2012) discusses in her ethnographic analysis of several legal cases.

A 1990 amendment called the Defilement Law made it illegal for men to engage in sexual intercourse with a female under the age of 18 (it had been 14). The law's aim was to address the lack of sexual protection for young women by deterring and punishing 'sugar daddies' for having sexual relationships with teenage girls; such relationships had resulted in social and health inequalities, such as significantly higher HIV rates among girls than their male peers, a high rate of pregnancies, and child marriages. Awareness and use of the law, including reported defilement cases, increased, but the intended targets—older and more financially-stable men—evaded the law, while young men, often in consensual sexual unions but less well-off, were punished. Parikh asserts that the law was more to protect male privilege and men's—particularly fathers'—honor than young women's health or rights. "Male policy makers and the general public initially saw the law as too radical, primarily because it challenged the historical (and therefore 'natural') gender social order that granted sexual privilege to men." (p. 1777) After the public and media outcry that the defilement campaign was a war against men and their rights rather than a law to protect girls, advocates shaped their campaign to be more in line with global children's rights by defining teenage girls as children, which received more support and was less controversial.

Though the law's intention was to protect girls, the way it was employed "bolstered patriarchal control over the female body while simultaneously protecting parental (mainly fathers') rights over the daughter's sexuality. Defilement became a state-backed intervention that allowed fathers to claim traditional economic compensation for unauthorized access to their daughters." (p. 1781) Despite the agency taken away from girls by society in general, and by the families exploiting this law, Parikh found that young women received more blame than did the men, for using their sexuality for material gain. Girls attempting to make their own choices—outside of paternal authority—were chastised. These restrictions faced by girls led families to choose CEFM for their daughters, to protect their daughters' commodified sexuality and reproduction. Eliminating CEFM and its contributing social and economic factors requires addressing sexuality, since it is sexuality, along with gender inequality, that shapes families' perceptions of the advantage to marrying daughters early.

In India, the Child Marriage Law, which establishes a minimum age at marriage, is being used by parents and communities as a tool to criminalize adolescent and norm-breaking sexual behavior, such as same-sex partnerships and relationships of choice.

*Parikh, S. (2012). "They arrested me for loving a schoolgirl": Ethnography, HIV, and a feminist assessment of the age of consent law as a gender-based structural intervention in Uganda. 74, 1774-1782: 1777, 1781.*
*Partners in Law and Development. 2010. Rights in Intimate Relationships. New Delhi: PLD.*

# 06

## RECOMMENDATIONS

As we have seen, cultural expectations about sexuality profoundly limit the lives of young girls. Since its expression is an important dimension of culture, sexuality is associated with deeply held values and emotions. Attitudes toward sexuality can determine girls' opportunities, or lack thereof, as well as their perceived success or failure in various areas of their lives. This is especially true in settings where the terms and conditions of marriage and childbearing are central to how girls and women are viewed, and to how they see themselves. But because understandings of sexuality are central to people's worldview, changing the way sexuality is understood, discussed, and managed is particularly challenging.

Despite the challenges, consensus is building on the need to address sexuality in order to end child marriage. What can we recommend about how to address sexuality, gender, and power in our work to end child marriage? How do we develop, implement, and measure effective girl- and youth-centered policies and programs that address issues of gender and sexuality?

**A FEW PRINCIPLES ARISE AGAIN AND AGAIN IN THE EXPERIENCES OF SUCCESSFUL PROGRAMS:**

• First, gender norms and expectations about sexuality are closely intertwined. Cultural expectations regarding sexuality reflect and reinforce a set of gendered ideas about masculinity, femininity, power, adulthood, and so on. These expectations pervade and influence almost every aspect of our lives as human beings, including the education we receive, any training we benefit from, the plans we make for work, and our social status. Sexuality is a fundamental component of who we are. It is therefore important to understand the ways in which it contributes to *all* aspects of our lives.

• Second, even as we identify the control of girls' sexuality as a problem demanding a solution, we must take into account the participation of many others in the system of values and practices that exert this control.

As a cultural construct, sexuality, like gender, requires a systemic, synchronized approach:[149] Parents need to find ways to talk about sexuality and related topics with their children. Boys and men need to develop the skills to engage in their sexual relationships with more egalitarian and mutualistic attitudes. Educators and community members need to broaden their perspectives on what girls are capable of and the spaces they may appropriately occupy. And the list goes on.

• Third, community-based organizations are often best situated to address sexuality, as they tend to be more closely involved in communities and to know and engage with local leaders. It is some of these organizations that are doing the most interesting work described in the previous section. Thus an important recommendation is to support the work of grassroots organizations that are implementing these groundbreaking programs, and others like them.

Beyond these general principles, a number of specific strategies stand out as good practices or logical responses to the challenges posed by child, early, and forced marriage.

***Empower girls, recognizing that one pathway to change is via the elevation of their voices.*** Create opportunities for girls to advocate for themselves with their families and with community decision-makers, and for their voices to be included in broader advocacy efforts.[150] Time and again, the impact of their empowerment extends well beyond their own lives to the lives of other girls, to their communities, and to policy-makers.

***Build mutual respect and positive relationships between boys and girls.*** Girls and boys miss out on greater friendships and freedoms when they are not permitted to interact informally with one another. Their friendships are suppressed by stereotypes and the fears of the adults around them, and these adults need reassurance that this alternative model can work without putting their girls at risk. Girls' and boys' platonic connections can be strengthened by raising their critical consciousness and appealing to their sense of social justice.

***Build intergenerational communication and support.*** Resistance to talking about sexuality in communities and to comprehensive sexuality education in schools comes in large part from parents who dislike the content or don't want someone else having these discussions with their children. What a shame this is, given that most parents, often lacking both

the knowledge and ease required, do not themselves take up the challenge of discussing sex and relationships with their children. This gap represents an enormous opportunity; by learning and strengthening their parenting skills, parents can build solidarity and closeness with the next generation.

***Promote community dialogue about sexuality.*** Although the challenges posed by child marriage affect everyone in the community, there is rarely an opportunity to have a community-level discussion of school safety, for example, and how anxieties about it reflect assumptions about boys' lack of self-restraint and contribute to the view that girls must be married early to keep them safe. These are the kinds of conversations that can lead to shifts in norms around appropriate roles and activities for girls and address their lack of alternatives to marriage. As with parents and children, there are opportunities to develop solidarity between girls and boys that can contribute to keeping everyone safe, supported and healthy.

***Help legislators and policymakers take sexuality into account in policies.*** Policymakers are as uncomfortable as anyone with anything related to sexuality, which often leads them to reject its inclusion in policy documents. Sidestepping sexuality is tempting, but must be resisted in the interests of a complete understanding of gender inequality and child, early, and forced marriage and the drag these place on development.[151] (One of the reasons the term "child marriage" has gained so much currency is that by referring to *children* involved in this practice, one avoids talking about adolescents and their complicated sexuality.) Key steps toward a policy focus on sexuality include the promotion of comprehensive sexuality education and the reconciliation of patchworks of inconsistent policies regulating sexuality. It is important to recognize the limits of the law: the criminalization of forced marriage may be necessary, but it would not be appropriate to jail adolescents for this offense, and it seldom does girls any good to have their parents in jail. The United Kingdom has done some very creative thinking about this, keeping girls outside of criminal proceedings but still using the courts to fight child marriage.[152]

***Build up research in this area.*** Donors and researchers must continue to build the evidence to support more open national discussions of sexuality.[153] Whether people are willing and able to discuss sexuality or not, it has a profound effect on health, development, and wellbeing. It is essential for social scientists, not only clinicians, to engage with the social construction of

sexuality and its ripples throughout the rest of people's lives. As others have articulated, quantitative data and biomedically-focused research "increase the tendency to count acts rather than explore meaning ... This danger is heightened by the respect accorded medicine and science and the wide-spread public belief that science contains no values."[154] What do data about age at marriage or number of children tell us about communication and intimacy in sexual relationships, about decision-making with regard to participation in sex, or about whether an individual feels entitled to experience sexual pleasure, a universal human birthright that is nonetheless almost universally absent from our research on marriage, and even from research on sexual and reproductive health. [155]

## CONCLUSION

Since sexuality is culturally constructed, it is subject to historical and cultural forces; it means different things across different populations, and it is subject to change.[156] We will be unable to put an end to the practice of child marriage if we fail to see and address the central role of sexuality in limiting girls' prospects. Yet we have failed to draw out the values and expectations associated with sexuality as a key focus of our efforts to end child, early and forced marriage.

As others have pointed out, "early and child marriage doesn't just *lead to* a set of restricted choices; it reflects and reinforces a set of restricted choices that *already exist.*"[157] When programs and research focus solely on delaying marriage until 18 without working to change restrictive gender norms and the expectations about sexuality associated with them, they leave untouched girls' lack of choice regarding their partners and future plans. If we take a more ambitious view of the challenge, one in line with the holistic World Health Organization's definition of sexuality, we will be led to more creative responses to the problem of child, early and forced marriage.[158] □

# ENDNOTES

1       UNFPA. 2012. *Marrying Too Young*. New York: UNFPA: 11; Greene, ME. 2014. *Ending Child Marriage in A Generation: What Research Will It Take*? New York: Ford Foundation.

2       Garcia Moreno C., H.A. Jansen, M. Ellsberg, L. Heise, and C. Watts. 2005. *WHO Multi country Study on Women's Health and Domestic Violence against Women*. Washington, DC:  PATH, WHO.

3       UNFPA. 2012. Marrying Too Young. New York: UNFPA: 11.

4       McClendon, D. and Sandstrom, A. (November 1 2016). *Child marriage is rare in the U.S., though this varies by state*. Pew Research Center, Fact-Tank: News in the Numbers [website]. Retrieved from http://www.pewresearch.org/fact-tank/2016/11/01/child-marriage-is-rare-in-the-u-s-though-this-varies-by-state/.

5       UNICEF. 2014. *Ending Child Marriage: Progress and prospects*. New York: UNICEF: 2.

6       UNFPA. 2012. *Marrying Too Young*. New York: UNFPA: 11.

7       World Health Organization. 2013. Women's health, Fact sheet N°334. Retrieved from http://www.who.int/mediacentre/factsheets/fs334/en/.

8       Morris, J. and Rushwan, H. 2015. "Adolescent sexual and reproductive health: The global challenges." *International Journal of Gynecology and Obstetrics*, 131: S40–S42.

9       ICRW. 2006. *Child Marriage Fact Sheets: Child Marriage and Domestic Violence*. Retrieved from http://www.icrw.org/wp-content/uploads/2016/10/Child-Marriage-Toolkit.pdf; ICRW. 2005. *Too Young to Wed: Education & Action Toward Ending Child Marriage*. Retrieved from http://www.icrw.org/wp-content/uploads/2016/10/Too-Young-to-Wed-Education-and-Action-Toward-Ending-Child-Marriage.pdf.

10      UNFPA. 2012. *Marrying Too Young*. New York: UNFPA.

11      UNESCO. 2015. *Education For All Global Monitoring Report*. Paris: UNESCO.

12      CARE. 2015. *Vows of Poverty*. Atlanta: CARE.

13      Stith, J. 2015. "Child Brides to the Patriarchy: Unveiling the Appropriation of the Missing Girl Child." *Journal of Feminist Studies in Religion*, 31(1): 83-102; Mohl, A. 2015. "Monotheism: Its Influence on Patriarchy and Misogyny." *The Journal of Psychohistory*, 43(1): 2-20; Franiuk, R., & Shain, A. 2011. "Beyond Christianity: The Status of Women and Rape Myths." *Sex Roles*, 65: 783-791.

14      WHO. 2006. *Defining sexual health: report of a technical consultation on sexual health*, 28–31 January 2002, Geneva. Geneva: World Health Organization.

15      Vance, Carole S. 1991. "Anthropology Rediscovers Sexuality: A Theoretical Comment." *Soc Sci Med*, 33(8): 875-884. (p. 876).

16      Vance, Carole S. 1991: 876.

17      Rubin, Gayle. 1975. "The Traffic in Women: Notes on the Political Economy of Sex." In, *Toward an Anthropology of Women*, Reiter R, ed. New York: Monthly Review Press: pp. 158-159.

18      Osorio, C., and E. Macuacua. 2014. Rites of Initiation in the Current Context: Adjustments, Ruptures and Confrontations Constructing Gender Identities. WLSA Mozambique. Maputo: Ciedima, Lda: pp. 309-10.

19      See statements on sexuality by Office of the Higher Commissioner for Human Rights (available here), and General comment No. 22 (2016) on the right to sexual and reproductive health (article 12 of the International Covenant on Economic, Social and Cultural Rights) (available here).

20      Furstenberg, Frank F. 2007. *Destinies of the Disadvantaged: The Politics of Teen Childbearing*. New York: Russell Sage Foundation.

21      Quote from AJWS India grantee, girl empowerment activist and expert.

22      UNFPA. 2012. *Marrying Too Young*. New York: UNFPA; AJWS. 2015. *What's Missing in the Fight Against Early and Child Marriage: Insights from India*. New York: AJWS.

23      AJWS. 2015. *What's Missing in the Fight Against Early and Child Marriage: Insights from India*. New York: AJWS.

24      Culp-Ressler, T. (March 17, 2013.) "Kindergartners Shouldn't Be Taught Sex Ed'- And Other Myths Endangering America's Youth". Think Progress. Retrieved from https://thinkprogress.org/kindergartners-shouldnt-be-taught-sex-ed-and-other-myths-endangering-america-s-youth-cfc363983305#.24dwkywqt.

25    Siddiqui, F.A. (2013, Dec 25). "Underage girls marry in Muzaffarnagar riot camps for protection, money." *Hindustan Times*.  Retrieved from: http://www.hindustantimes.com/specials/coverage/yearender2013/best-of-ht/underage-girls-marry-in-muzaffarnagar-riot-camps-for-protection-money/sp-article10-1158812.aspx; Tripathi, A. (2013, Dec 14). "Muzaffarnagar riots: Three months on, women worse off."  *The Times of India*. Retrieved from: http://timesofindia.indiatimes.com/india/Muzaffarnagar-riots-Three-months-on-women-worse-off/articleshow/27325181.cms; Kok, F., and Swain, M. (2015, 20 April). *Countrywide response urgently required to address chronic internal displacement*. Internal Displacement Monitoring Centre. Retrieved from: http://www.internal-displacement.org/south-and-south-east-asia/india/2015/countrywide-response-urgently-required-to-address-chronic-internal-displacement

26    Human Rights Watch. 2015. *Marry Before Your House is Swept Away: Child Marriage in Bangladesh*. New York: Human Rights Watch; Women's Refugee Commission. 2016. *A Girl No More: The Changing Norms of Child Marriage in Conflict*. New York: Women's Refugee Commission; CARE International UK. 2015. *TO PROTECT HER HONOUR: Child marriage in emergencies – the fatal confusion between protecting girls and sexual violence*. CARE International UK: London. http://insights.careinternational.org.uk/media/k2/attachments/CARE_Child-marriage-in-emergencies_2015.pdf

27    Runeborg, A.  and Anderson, C. 2010. *Sexual Rights for All*. SIDA.

28    Mohl, A. 2015. "Monotheism: Its Influence on Patriarchy and Misogyny." *The Journal of Psychohistory*, 43(1): 2-20; Franiuk, R., & Shain, A. 2011. "Beyond Christianity: The Status of Women and Rape Myths." *Sex Roles*, 65: 783-791; Sanjakdar, F. 2011. Living West, Facing East: The (De) Construction of Muslim Youth Sexual Identities. In *Cultural Constructions of Sexuality and Gender* (Vol. 364, pp. 105-130). Peter Lang AG.

29    Mohl, A. 2015. "Monotheism: Its Influence on Patriarchy and Misogyny." *The Journal of Psychohistory*, 43 (1): 2-20: 15.

30    Runeborg, A.  and Anderson, C. 2010. *Sexual Rights for All*. SIDA.

31    Talle, Aud. 1994. "The Making of Female Fertility: Anthropological Perspectives on a Bodily Issue." *Acta Obstet Gynecol Scand*, 73: 280-283.

32    Talle, Aud. 1994. "The Making of Female Fertility: Anthropological Perspectives on a Bodily Issue." *Acta Obstet Gynecol Scand*, 73: 280-283: 283.

33    Culp-Ressler, T. (February 10, 2014.) "'5 Ways Our Society Unfairly Punishes Women For Their Sexuality". *Think Progress*. [website]. Retrieved from https://thinkprogress.org/5-ways-our-society-unfairly-punishes-women-for-their-sexuality-17d64276f393#.57gkuyv8o.

34    Szymanski et al. 2011. "Sexual Objectification of Women: Advances to Theory and Research." *The Counseling Psychologist*, 39(1): 6–38.

35    Osorio, C., and E. Macuacua. 2014. *Rites of Initiation in the Current Context: Adjustments, Ruptures and Confrontations Constructing Gender Identities*. WLSA Mozambique. Maputo: Ciedima, Lda: pp. 309-10: 65.

36    Nussbaum, M. C. 1999. *Sex and social justice*. Oxford: Oxford University Press.

37    Carter, Jimmy. 2015. "Patriarchy and violence against women and girls." *The Lancet*. 385(9978): e40-e41; Franiuk & Shain, 2011; Patton, George C et al. 2009. "Global patterns of mortality in young people: a systematic analysis of population health data." *The Lancet*. 374(9693): 881–892.

38    Graff, E.J. (January 4, 2013). "Purity Culture Is Rape Culture." *The American Prospect*. [website]. Retrieved from http://prospect.org/article/purity-culture-rape-culture.

39    Mohl, A. 2015. "Monotheism: Its Influence on Patriarchy and Misogyny." *The Journal of Psychohistory*, 43(1): 2-20.

40    Parikh, S. 2012. "They arrested me for loving a schoolgirl": Ethnography, HIV, and a feminist assessment of the age of consent law as a gender-based structural intervention in Uganda. *Social Science and Medicine*, 74: 1774-1782; Sanjakdar, 2011; Nirantar Trust. (2015). *Early and Child Marriage in India: A Landscape Analysis*. New Delhi, India.

41    Castelli, E. 1986. "Virginity and Its Meaning for Women's Sexuality in Early Christianity." *Journal of Feminist Studies*, 2 (1): 61-88. (p. 86).

42    Maticka-Tyndale, E., & Smylie, L. 2008. "Sexual Rights: Striking a Balance." *International Journal of Sexual Health*, 20 (1-2): 7-24.

43    Caplan, P. (1987). *The Cultural Construction of Sexuality*. (P. Caplan, Ed.) London & New York: Tavistock Publications. p. 24.

44    American Jewish World Service. 2016. *Report of Expert Working Meeting on Sexuality and Child, Early and Forced Marriage*. New York: AJWS.

45    Caplan. 1987: p. 168.

46    Osorio, C., and E. Macuacua. 2014. *Rites of Initiation in the Current Context: Adjustments, Ruptures and Confrontations Constructing Gender Identities*. WLSA Mozambique. Maputo: Ciedima, Lda: pp. 309-10.

47    Schalet, A.T. 2011. *Not Under My Roof: Parents, Teens, and The Culture of Sex*. Chicago: University of Chicago Press.

48    Frank Furstenberg. 2007. *Destinies of the Disadvantaged: The Politics of Teen Childbearing*. New York: Russell Sage Foundation.

49    Izeldeen, M. 2014. "Early marriage as a strategy for economic survival: A case study of "Alfath" area in Omdurman/Sudan." *The Ahfad Journal*, 31 (1): 33-45.

50    Izeldeen. 2014: p. 39.

51    Wight, D., Plummer, M., Mshana, G., Wamoyi, J., Shigongo, Z., & Ross, D. 2006." Contradictory sexual norms and expectations for young people in rural Northern Tanzania." *Social Science & Medicine*, 62: 987-997.

52    Fein, Ellen and Sherrie Schneider. (1995). *The Rules: Time-tested Secrets for Capturing the Heart of Mr. Right*, New York: Warner Books.

53    Goddard, V. 1987. Honour and shame: the control of women's sexuality and group identity in Naples. In Caplan, P. (Ed.), *The Cultural Construction of Sexuality* (pages 166-192). London & New York: Tavistock Publications.

54    Sajeda Amin, Ian Diamond, Ruchira T. Naved, and Margaret Newby. 1998. "Transition to Adulthood of Female Garment-factory Workers in Bangladesh." *Studies in Family Planning*.
1998; 29(2): 185–200.

55    Webber G, Edwards N, Graham ID, Amaratunga C, Keane V, Socheat R. 2010. Life in the big city: the multiple vulnerabilities of migrant Cambodian garment factory workers to HIV. *Women's Stud. Int*. Forum 33:159–69

56    Wight, et al. 2006.

57    Ha Song, V. 2008. "The harmony of family and the silence of women: sexual attitudes and practices among rural married women in northern Viet Nam." *Culture, Health & Sexuality*, 10: S163-S176. (p. S164.)

58    Hamid, S., Johansson, E., & Rubenson, B. 2011. "'Good parents' strive to raise 'innocent daughters'." *Culture, Health & Sexuality*, 13(7): 841-851.

59    Ha Song. 2008.

60    Wight, et al. 2006.

61    CARE. 2016. *The Cultural Context of Child Marriage in Nepal and Bangladesh: Findings from CARE's Tipping Point Project Community Participatory Analysis Research Report*. Atlanta: CARE.

62    Desai, S., & Andrist, L. 2010. "Gender Scripts and Age at Marriage in India." *Demography*, 47(3): 667-687. (p. 671).

63    Osorio, C., & Macuacua, E. 2014. *Rites of Initiation in the Current Context: Adjustments, Ruptures and Confrontations Constructing Gender Identities*. WLSA Mozambique. Maputo: Ciedima, Lda: 342.

64    Osorio and Macuacua. 2014: 88.

65    Osorio and Macuacua. 2014: 47, 359.

66    Jackson, M. (1987). 'Facts of life' or the eroticization of women's oppression? Sexology and the social contruction of heterosexuality. In Caplan, P. (Ed.), *The Cultural Construction of Sexuality* (pages 166-192). London & New York: Tavistock Publications: 60.

67    Jackson, M. as in Caplan, P. 1987. *The Cultural Construction of Sexuality*. London: Tavistock Publications: 70.

68    Vance, Carole S. 1975: 877.

69    For a feminist discussion of sexual crimes, see Donat, PL, & d'Emilio, J. 1997. A feminist redefinition of rape and sexual assault: Historical foundations and change. *Journal of Social Issues*, 48(1): 9-22.

70    Human Rights Council. 2016. *Report of the Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment*. New York: United Nations Human Rights Council, Thirty-first session, 5 January.

71     Stoebenau, K., Warner, A., Edmeades, J.D., Sexton, M. 2015. "*Girls are like leaves on the wind": How gender expectations impact girls' education - A closer look from West Nile, Uganda*. Washington: International Center for Research on Women.

72    Shahinian, Gulnara. 2010. *Thematic Report on Servile Marriage: Report of the Special Rapporteur on contemporary forms of slavery, including its causes and consequences*. New York: United Nations General Assembly, 10 July.

73    Elson, Diane. 2000. "Progress of the World's Women 2000", UNIFEM Biennial Report, United Nations Development Fund for Women, New York.

74    World Health Organization. 2006. *Sexual and reproductive health*.

75    Greene, M. 2014. *Ending Child Marriage in a Generation: What Research Is Needed*? New York: Ford Foundation.

76    Greene, M.; Rao, A.; Perlson, S. 2015. *Human Rights and the Cultural and Religious Defense of Child Marriage: Finding Middle Ground*. Washington, DC: GreeneWorks.

77    Maticka-Tyndale & Smylie. 2008: p. 8.

78    World Health Organization. 2006.

79    At a workshop held on this topic at the Member Meeting of Girls Not Brides, these diverse ideas were offered up as definitions for the concept of 'sexuality.'

80    Higgins, Jenny A. and Jennifer S. Hirsch. 2007. "The Pleasure Deficit: Revising the 'Sexuality Connection' in Reproductive Health. *Perspectives of Sexual and Reproductive Health*, 39(4): 240-247.

81    To promote the integration of sexuality and gender into CARE's reproductive health programming some years ago, the ISOFI project developed with ICRW defined five key domains of sexuality: sensuality, intimacy, sexual identity, sexual health and reproduction, and sexual power over others.

82    Jolly, S. 2006. Not So Strange Bedfellows: Sexuality and international development. *Development*, 49(1): pp. 77–80.

83    Dixon-Mueller, Ruth. 1993. "The Sexuality Connection in Reproductive Health." *Studies in Family Planning*, 24(5): 269-282.

84    Dixon-Mueller, Ruth. 1993: p. 270; p. 272.

85    World Bank. 2015. *World Development Report 2015: Mind, Society, and Behavior*. Washington, DC: World Bank. doi: 10.1596/978-1-4648-0342-0.; "Development should, therefore, be perceived as a multidimensional process involving the reorganization and reorientation of entire economic and social systems. In addition to improvements in incomes and output, it typically involves radical changes in institutional, social, and administrative structures as well as in popular attitudes and, in many cases, even customs and beliefs."  http://internationalrelations.org/international-development/

86    It has also amazingly done little to address sexuality.

87    Greene, M. and Biddlecom, A. 2000. "Absent and Problematic Men: Demographic Accounts of Male Reproductive Roles." *Population and Development Review*, 26(1): 81-115.

88    Maticka-Tyndale & Smylie. 2008: p. 19.

89    Malhotra and Schuler. 2005. "Women's Empowerment as a Variable in International Development." *Measuring Empowerment: Cross-Disciplinary Perspectives*. Deepa Narayan, editor. Washington, DC: The World Bank.

90    Barker, G. 2005. *Dying to be Men: Youth, Masculinity and Social Exclusion*. London and New York: Routledge.

91    Hill, Shirley A. 2012. Families: A Social Class Perspective. Lawrence, KS: University of Kansas, SAGE Publications. Retreived at http://www.sagepub.com/sites/default/files/upm-binaries/41374_1.pdf.  pp. 7-8, 10, 13.

92    Greene, Margaret E. and Andrew Levack. 2010. *Synchronizing Gender Strategies: A Cooperative Model for Gender Transformation*. Washington, DC: Population Reference Bureau for the Interagency Gender Working Group of USAID.

93    El-Defrawi, MH, Lotfy, G, Dandash, KF, Refaat, AH, & Eyada, M. 2001. "Female genital mutilation and its psychosexual impact." Journal of Sex & Marital Therapy, 27(5): 465-473.

94    Ha Song. 2008: p. S165.

95    Shanti Parikh, cited elsewhere in this paper, is one. Other thinkers include John Santelli, Jenny Higgins, Jennifer Hirsch, Deborah Tilman, Dennis Fortenberry and others.  See e.g., Higgins, Jenny A. and Jennifer S. Hirsch. "The Pleasure Deficit: Revisiting the "Sexuality Connection" in Reproductive Health." 2007. *Perspectives on Sexual and Reproductive Health* 39(4): 240-247; or Frances M. Costa, Richard Jessor, John E. Donovan & J. Dennis Fortenberry (2010) Early Initiation of Sexual Intercourse: The Influence of Psychosocial Unconventionality, *Journal of Research on Adolescence*, 5(1): 93-121.

96    Greene, Margaret E. and Thomas W. Merrick. 2015. *A Business Case for Investing in Research on Adolescent Access to and Use of Contraception*. Washington, DC: Alliance for Reproductive, Maternal, and Newborn Health; ICRW & WB *Economic Impact of Child Marriage study*.

97    Geronimus, Arline T., and Sanders Korenman. 1993. "Maternal Youth or Family Background? On the Health Disadvantages of Infants with Teenage Mothers." *American Journal of Epidemiology*, 137(2): 213-25; Geronimus, Arline T. 1997. "Teenage Childbearing and Personal Responsibility." *Political Science Quarterly*, 112(3): 405-430.

98    World Bank. 2005. *Poverty Reduction: Does Reproductive Health Matter*? Washington, DC: The International Bank for Reconstruction and Development / The World Bank.

99    Dahl, B. 2015. "Sexy Orphans and Sugar Daddies: The Sexual and Moral Politics of Aid for AIDS in Botswana." *St Comp Int Dev*, 50: 519.

100   The public health and medical frame acts primarily on maternal and child health outcomes of central concern.

101   MacQuarrie, Kerry L.D. 2016. *Marriage and Fertility Dynamics: The Influence of Marriage Age on the Timing of First Birth and Birth Spacing*. DHS Analytical Studies No. 56. Rockville, Maryland, USA: ICF International.

102   Hallman, K., Peracca, S., Catino, J., & Ruiz, M. 2006. *Multiple Disadvantages of Mayan Females: The effects of gender, ethnicity, poverty, and residence on education in Guatemala*. New York: Population Council.

103    Kalra G, Bhugra D. 2013. "Sexual violence against women: Understanding cross-cultural intersections." *Indian J Psychiatry*, 55:244-9; Sanjakdar. 2011; Cihangir, S. 2013. "Gender specific honor codes and cultural change." *Group Processes & Intergroup Relations*, 16(3): 319–333; Thapar-Bjorkert, S. and Morgan, K. 2010. "But Sometimes I Think . . .They Put Themselves in the Situation": Exploring Blame and Responsibility in Interpersonal Violence." *Violence Against Women*, 16(1): 32–59; Anderson and Bissell. 2011. "Blame and fault attributions in sexual violence: are these distinct?" *Journal of Aggression, Conflict and Peace Research*, Vol. 3(4): 222-229; Koepke, S.; Eyssel, F. and Bohner, G. 2014. "'She Deserved It': Effects of Sexism Norms, Type of Violence, and Victim's Pre- Assault Behavior on Blame Attributions Toward Female Victims and Approval of the Aggressor's Behavior." *Violence Against Women*, Vol. 20(4): 446–464.

104    United Nations Children's Fund. 2014. *Hidden in Plain Sight: A statistical analysis of violence against children*. New York: UNICEF. p. 78.

105    Their paper, "Gender Transformative Programs That Include and Address Sexuality to End Child, Early and Forced Marriage: Successful and Innovative Approaches, Gaps and Opportunities," will be completed in late spring 2018 and will be available on the GreeneWorks and AJWS websites. Unfortunately, the analysis is not yet complete and we cannot include it here.

106    http://bbc.in/2gV2m41

107    Rutgers WPF. 2015. Annual Report 2014.  http://www.rutgerswpfpak.org/content/pdfs/IEC/RutgersWPF/AnnualReportRutgersWPF2014.pdf. See also http://www.bbc.co.uk/blogs/mediaactioninsight/entries/9cfd2c69-afb9-4b57-a27f-8d312fb271ba

108    http://www.bbc.co.uk/blogs/mediaactioninsight/entries/9cfd2c69-afb9-4b57-a27f-8d312fb271ba

109    http://www.creaworld.org/sites/default/files/IMB%20Note.pdf

110     http://www.health.gov.za/index.php/shortcodes/2015-03-29-10-42-47/2015-04-30-08-18-10/2015-04-30-08-25-54: 16.

111    Patton, George C et al. 2009. "Global patterns of mortality in young people: a systematic analysis of population health data." *The Lancet*. 374(9693): 881–892.

112    Rutgers WPF. 2013. *The World Starts With Me*.

113    Warner, A., Stoebenau, K., Glinski, AM. 2014. *More Power To Her: How Empowering Girls Can Help End Child Marriage*. Washington, DC: International Center for Research on Women. Retrieved from: http://www.icrw.org/sites/default/files/publications/More%20Power%20pages%20 Web.pdf.

114    From *More Power to Her*: Ishraq: Prepares girls in rural Upper Egypt for re-entry into formal schooling using group-based programming. Social and Financial Empowerment of Adolescents (SoFEA): Provides social and economic development opportunities for girls in Bangladesh using peer-led, group-based programming. PRACHAR: Provides group-based reproductive health training within a comprehensive behavior change program among adolescents and young couples in Bihar, India. Toward Improved Economic and Social/ Reproductive Outcomes for Adolescent Girls (TESFA): Promotes sexual and reproductive health and economic empowerment for married adolescent girls using group-based programming in Amhara, Ethiopia.

115    Jewkes, R. & Morrell, R. 2012. "Sexuality and the limits of agency among South African teenage women: Theorising femininities and their connections to HIV risk practises." *Social Science & Medicine*, 74:1729-1737. p. 1736.

116    Shtarkshall, R., Santelli, J. and Hirsch, J. 2007. "Sex Education and Sexual Socialization: Roles for Educators and Parents." *Perspectives on Sexual and Reproductive Health*, 39(2): 116-119; http://pdf.usaid.gov/pdf_docs/Pnadh412.pdf; Albert B. 2012. With one voice: *America's adults and teens sound off about teen pregnancy*. Washington, DC: The National Campaign to Prevent Teen and Unplanned Pregnancy. Retrieved February 11, 2014, from http://thenationalcampaign.org/ resource/one-voice-2012, as cited in http://www.cdc.gov/healthyyouth/protective/pdf/talking_teens. pdf; Khubchandani, J., J. Clark, & R. Kumar. 2014."Beyond Controversies: Sexuality Education for Adolescents in India. Journal of Family Medicine and Primary Care, 3(3); Bankole et al. 2007. "Sexual Behavior, Knowledge and Information Sources of Very Young Adolescents in Four Sub-Saharan African Countries." Afr J Reprod Health, 11(3): 28–43.

117    RFSU 2004, as cited in Save the Children Sweden Focus Africa HIV/AIDS Group and the Swedish Association for Sexuality Education. 2007. *Tell Me More! Children's Rights and Sexuality in the Context of HIV/AIDS in Africa*. Save the Children: Sweden; Khubchandani J, Clark J, Kumar R. 2014. "Beyond controversies: Sexuality education for adolescents in India." *J Fam Med Primary Care*, 3:175-9; Sahay S, Nirmalkar A, Sane S, Verma A, Reddy S, Mehendale S. 2013. "Correlates of sex initiation among school going adolescents in Pune, India." *Indian J Pediatr*, 80:814-20, as cited in Khubchandani, Clark, & Kumar, 2014.

118    Debbie Herbenick, 2013 Ted Talk: Making Sex Normal; Centers for Disease Control and Prevention. National Center for HIV/AIDS, Viral Hepatitis, STD and TB Prevention (NCHHSTP) Atlas. 2016. "STD Recommended Queries." Retrieved from http://www.cdc.gov/nchhstp/atlas/slides/ docs/std-rec-queries-2014-data.pdf.

119    https://www.youtube.com/watch?v=CE3tL9MMk3U as mentioned in Johnson, T. and Motsei, M. 2014. *Faith and Sexual Pleasure: Workshop Report*. Sonke and South African Council of Churches Youth Forum. Sonke Gender Justice: Cape Town.

120    More programs that address sexuality and child marriage within ASRHR can be found in Save the Children's ASRHR update guide from August 2014.

121    Rutgers WPF. 2013. *The World Starts With Me*.

122   Rijsdijk et al. 2011." The World Starts With Me: A multilevel evaluation of a comprehensive sex education programme targeting adolescents in Uganda." *BMC Public Health*, 11:334.

123   McKee et al. 2014. "What Do Parents in Mississippi Really Think About Sex Education in Schools? Results of a State-Level Survey." *Journal of Health Disparities Research and Practice*, 7(1), Special Issue, p. 97 – 119.

124   http://www.advocatesforyouth.org/component/content/158?task=view; Khubchandani J, Clark J, Kumar R. 2014. Beyond controversies: Sexuality education for adolescents in India. *J Fam Med Primary Care*, 3: 175-9.

125   http://teenhealthms.org/programs/chart/.

126   Lundgren et al. 2013. "Whose turn to do the dishes? Transforming gender attitudes and behaviors among very young adolescents in Nepal." *Gender & Development*, 21(1): 127-145.

127   Lundgren et al. 2013. "Whose turn to do the dishes? Transforming gender attitudes and behaviors among very young adolescents in Nepal." *Gender & Development*, 21(1): 127-145. (p. 141); Institute for Reproductive Health Georgetown University, 2013. T*ransforming gender norms among very young adolescents: An innovative intervention and evaluation in Nepal*. Retrieved from http://irh.org/wp-content/uploads/2013/04/CHOICES_8.5x11_web_0.pdf.

128   Haberland, N. 2015. "The Case for Addressing Gender and Power in Sexuality and HIV Education: A Comprehensive Review Of Evaluation Studies." *International Perspectives on Sexual and Reproductive Health*, 41(1): 31-42.  See also Haberland, N., & Rogow, D. 2015. "Sexuality education: emerging trends in evidence and practice." *Journal of adolescent health*, 56(1): S15-S21.

129   EngenderHealth. *Gender Matters (Gen.M)*. Accessed January 2016 at https://www.engenderhealth.org/our-work/major-projects/gender-matters.php; EngenderHealth. 2014. *Gender Matters Program Brief. New York: EngenderHealth*.

130   Save the Children Sweden Focus Africa HIV/AIDS Group and the Swedish Association for Sexuality Education. 2007. *Tell Me More! Children's Rights and Sexuality in the Context of HIV/AIDS in Africa*. Save the Children: Sweden.

131   Community Pathways to Improved Adolescent Sexual and Reproductive Health: A Conceptual Framework and Suggested Outcome Indicators. December 2007. Washington, DC and New York, NY: Inter-Agency Working Group (IAWG) on the Role of Community Involvement in ASRH; http://www.cdc.gov/healthyyouth/protective/index.htm; http://www.cdc.gov/healthyyouth/protective/pdf/talking_teens.pdf

132   https://www.crin.org/en/library/publications/discrimination-briefing-age-discrimination; http://www.childrenslegalcentre.com/userfiles/file/ippf_coram_senegal_report_eng_web.pdf; http://www.un.org/esa/socdev/unyin/documents/ch10.pdf; UNFPA 2014. State of the World's Population. New York: UNFPA.

133   AJWS. 2016; Intergenerational communication was also highlighted at the AWID Forum, where global gender and health practitioners discussed the centrality of sexuality to work with adolescent girls and ending child marriage. See the full report and related materials at http://greeneworks.com/letstalk.

134   VOICES: *Using testimonials to influence parents' support for very young adolescents' gender equality in Nepal*. Save the Children. 2014. Retrieved from http://www.savethechildren.org/atf/cf/%7B9def2ebe-10ae-432c-9bd0-df91d2eba74a%7D/VOICES%20GUIDE.PDF

135   CARE. 2016. *The Cultural Context of Child Marriage in Nepal and Bangladesh: Findings from CARE's Tipping Point Project Community Participatory Analysis Research Report. Atlanta*: CARE.

136   Advocates for Youth, Mississippi First

137   Sabbe, A. e. 2015. "Women's perspectives on marriage and rights in Morocco: risk factors for forced and early marriage in the Marrakech region." *Culture, Health & Sexuality*, 17(2): 135-149.

138   The Grandmother Project. http://www.grandmotherproject.org/?page_id=34; Musoko, A.S.; Scoppa, C.; Manoncourt, E., Aubel, J. 2012. *Girls and Grandmothers Hand-in-Hand: Dialogue between generations for community change*. Rome: The Grandmother Project. Retrieved at http://www.grandmotherproject.org/wp-content/uploads/GMP_DHF_Eng_Final_webGMP-Publications.pdf.

139   http://www.tostan.org/community-empowerment-program

140   Vance, Carole S. 1991. "Anthropology Rediscovers Sexuality: A Theoretical Comment." *Soc Sci Med*, 33(8): 875-884. (p. 876).

141   American Jewish World Service. 2016. *Expert Working Meeting on Sexuality and Child, Early and Forced Marriage*. New York: AJWS.

142   El Feki, S. 2014. *Sex and the citadel: Intimate life in a changing Arab world*. New York: Random House.

143   Greene, ME, Z Rasekh, and K-A Amen. 2002. *In This Generation: Sexual and Reproductive Health Policies for a Youthful World*. Washington, DC: Population Action International.

144   http://www.huffingtonpost.com/john- converse-townsend/the-development-bible-a-newer-testament_b_954586.html

145    T-A Mekbib, S Bekele, A Kassie G Kassa. 2012. Evaluation of the Developmental Bible: A program to integrate HIV and other reproductive health information in the teachings of the Ethiopian Orthodox Tewahido Church, *Ethiopian E-Journal for Innovation Research and Foresight*, 4(2): 58-72.

146    Johnson, T., and Motsei, M. 2015. *Faith and Sexual Pleasure: Workshop Report*. South African Council of Churches Youth Forum and Sonke Gender Justice: Johannesburg, South Africa.

147    Personal communication, Qadeer Baig, Rutgers WPF, Pakistan; Abhijit Das, Center for Health and Social Justice, India.

148    American Jewish World Service. 2016.

149    Greene, ME and Andrew Levack. 2010. *Synchronizing Gender Strategies: A Cooperative Model for Improving Reproductive Health and Transforming Gender Relations*. Washington, DC: PRB/ USAID Interagency Gender Working Group.

150    American Jewish World Service. 2016. *Expert Working Meeting on Sexuality and Child, Early and Forced Marriage*. New York: AJWS.

151    American Jewish World Service. 2016. *Expert Working Meeting on Sexuality and CEFM*, recommendations for advocates (p. 8).

152    UNWomen. http://www.endvawnow.org/en/articles/629-criminalization-of-forced-and-child-marriage.html.

153    American Jewish World Service. 2016. *Expert Working Meeting on Sexuality and CEFM*, recommendations for researchers (p. 8).

154    Vance, Carole S. 1991: 880.

155    Higgins, Jenny A. and Jennifer S. Hirsch. 2007. "The Pleasure Deficit: Revising the 'Sexuality Connection' in Reproductive Health. *Perspectives of Sexual and Reproductive Health*, 39(4): 240-247; For a powerful counter-narrative, learn about the work of *The Pleasure Project*, http://thepleasureproject.org/about-us/

156    Vance, Carole S. 1991: 880.

157    AJWS. 2015. *What's Missing in the Fight Against Early and Child Marriage: Insights from India*. New York: AJWS.

158    Warner, A., Stoebenau, K., Glinski, AM. 2014. More Power to Her: How Empowering Girls Can Help End Child Marriage. Washington, DC: International Center for Research on Women. Retrieved from: http://www.icrw.org/sites/default/files/publications/More%20Power%20pages%20Web.pdf.

About GreeneWorks: GreeneWorks works to integrate an understanding of social inequalities into research, programs and advocacy. Through the strategic application of anthropological, demographic, ecological, and public health research and methods we work to strengthen development efforts.

About American Jewish World Service: American Jewish World Service (AJWS) is the first and only Jewish organization dedicated solely to ending poverty and promoting human rights in the developing world. AJWS advances the health and rights of women, girls and LGBTI people; promotes recovery from conflict, disasters and oppression; and defends access to food, land and livelihoods. We pursue lasting change by supporting grassroots and global human rights organizations in Africa, Asia, Latin America and the Caribbean, and by mobilizing our community in the U.S. to advocate for global justice.

*Shital Waikar (center) teaches a sexual health session for women's rights group MASUM in the village of Mavadi in rural Maharashtra, India. By increasing young people's knowledge of sexuality, MASUM prepares them to make healthy decisions for themselves, whether they choose to marry or not.*

**AMERICAN JEWISH WORLD SERVICE**

45 West 36th Street
New York, NY 10018
www.ajws.org

**GreeneWorks**

3733 Warren Street, NW
Washington, DC 20016
USA
www.greeneworks.com