Empowering Women and Girls: An Integrative Literature Review

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The purpose of this study is to support achieving the United Nations Agenda 2030 Sustainable Development Goal (SDG) 5.3 by increasing the awareness of child, early and forced marriages or unions (CEFMU), specifically in crisis and conflict. The objectives of this study are to reveal the enablers and barriers for CEFMU in conflict and crisis contexts, and to provide recommendations for promoting change in CEFMU in crisis and conflict settings, and empowering women and girls. The research questions of this study are: - What are the barriers for CEFMU in crisis and conflict settings? - What are the facilitators for CEFMU in crisis and conflict settings? - How well is the intersectional approach in CEFMU contributing to increasing the impact and empowering women and girls in crisis and conflict settings?

Child, early, and forced marriages or unions (CEFMU) is defined as a "formal or informal union, in which one or both parties are under the age of 18. Forced marriage is a marriage in which one or both spouses do not give full and free consent, regardless of age. Early unions are informal unions in which a girl or boy lives with a partner as if married before the age of 18". CEFMU is a form of sexual and gender-based violence (SGBV). It also creates conditions for other forms of SGBV to occur, such as intimate partner violence, rape, or trafficking.

UN Women, the partner for whom this literature review is conducted, coordinates, and promotes the UN system in advancing gender equality, and in all deliberations and agreements linked to the UN Agenda 2030 and Sustainable Development Goals (SDG). The UN SDG Goal 5.3 calls for the elimination of all harmful practices such as child, early and forced marriages and unions (CEFMU) and female genital mutilation (FGM). CEFMU is most common in sub-Saharan Africa, a region where progress has been modest, followed by South Asia, which has achieved greater declines. The intersecting crises of COVID-19, climate change, and rising economic and political insecurity have also slowed the progress significantly, and in many areas especially in fragile states the situation has deteriorated and begun to reverse affecting the most vulnerable populations. In crises or conflict settings CEFMU increases and has a disproportionate impact on women and girls.

The study uses an integrative literature review (ILR) as the method in seeking answers to the research questions. The ILR was conducted by doing a structured search in the electronic EBSCO and ProQuest databases as well as a manual search. The data search was conducted in October - November 2022. Forty-two articles were reviewed and 12 articles with varying designs were included in the study.

Four core facilitators of CEFMU were identified in the studies, which vary and interact across contexts. Poverty and insecurity or fear of SGBV are shown as core drivers that trigger lack of agency or opportunity, and loss of social and community networks. The four barriers to CEFMU identified from the studies were education, economic or employment opportunities, the increase in leadership role and agency, and multilayered, intersectional programming. These facilitators and barriers further reflect government, community, household, and individual level factors. Applying a systematic intersectional lens in addition to a gender lens leads to a better local, national, and global response and management of CEFMU. This also helps to identify hidden structural barriers and supports an understanding of how the individual experiences of girls and women differ, even within an already marginalized group.

Keywords: Sustainable development goal (SDG), child, early and forced marriage or union (CEFMU), sexual and gender-based violence (SGBV), gender equality, intersectionality

Contents

1 Introduction

"All human beings are born free and equal in dignity and rights, without distinction of any kind." states Article 1 of the Universal Declaration of Human Rights (UDHR) as proclaimed by the United Nations General Assembly in 1948. This statement is the foundation of international human rights law. The UDHR affirms that human rights are for everyone, without exception, and requires governments to take actions to protect human rights of all beings. Therefore, the application of international human rights law is guided by the fundamental principles of universality, equality, and non-discrimination. Article 3 of the UDHR further declares "Everyone has the right to life, liberty and security of person" (UNGA 1948).

The core humanitarian rights principles are indorsed through international human rights covenants and treaties, such as the International Covenant on Civil and Political Rights (UNGA 1966), the Convention on the Rights of the Child (UNGA 1989), the Declaration on the Elimination of Violence against Women (UNGA 1993), the Convention on the Elimination of All Forms of Discrimination Against Women (UNGA 1981) and the Istanbul Convention on preventing and combating violence against women and domestic violence. (COE 2014.) States are obliged to respect, protect, and fulfil the human rights of all persons within their jurisdiction (UNGA 1948). The Sphere Humanitarian Charter builds on the Code of Conduct of the International Red Cross and Red Crescent Movement and NGOs in Disaster Relief. Humanitarian organizations have signed the Code of Conduct recognizing the humanitarian imperative and providing humanitarian assistance wherever needed, guided by the principles of humanity, impartiality, independence, and neutrality. (Sphere 2018; ICRC 1994.)

The terms gender-based violence (GBV) and sexual and gender-based violence (SGBV) are often used interchangeably, but while all forms of sexual violence are generally acts of GBV, not all forms of GBV are sexual. GBV and SGBV are pervasive and horrendous public health and human rights concerns. They violate international human rights law, humanitarian law and principles of gender equality. (IASC 2015, 5.) It is vital to bear in mind that GBV and SGBV are happening everywhere. In crises or conflict settings, many factors can intensify SGBV-related risks and all humanitarian actors have an ethical imperative to prevent, mitigate and respond to SGBV.

Early, child and forced marriage or union (CEFMU) is defined as any formal or informal union where one or both parties are under 18 years. It is a human rights violation, a form of gender-based discrimination, a harmful practice, and a form of SGBV. (UNFPA 2022.) The prevalence of child marriage worldwide is significantly higher among girls. The total number of girls and

women alive today that were married as children is 650 million. This is equivalent to 1 in 5 girls being married as children compared to 1 in 30 boys. There are an estimated 12 million girls who are married in childhood every year. (UNFPA & UNICEF 2017.)

CEFMU is the burning question in humanitarian rights, equality, and equity at a global level. Research and education on the subject can improve the lives of women, girls, and boys, reduce suffering, and reduce maternal and child mortality rates. Countries with the highest maternal and child mortality rates are the same countries where child marriage is prevalent. In fact, a 10% reduction in child marriage could be associated with a 70% reduction in a country's maternal mortality rate (IFRC 2019). Child marriage is often exacerbated by humanitarian crises. It is used as a negative coping mechanism to respond to food and economic insecurity, as well as a "safety" measure against increased security risks caused by conflicts, especially SGBV.

UN Women, the partner for whom this literature review is conducted, coordinates, and promotes the UN system in advancing gender equality, and in all deliberations and agreements linked to the UN Agenda 2030 and Sustainable Development Goals (SDG). The SDG 5 aims to "achieve gender equality and empower all women and girls". UNICEF is the UN custodian agency for monitoring progress towards reaching the SDG Target 5.3: Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation. (UN n.d.b; UN 2022.)

The topic of the thesis is culturally sensitive, and this is one main reason that accurate information and data is often difficult to acquire. Humanitarian crises can involve a variety of situations, such as conflict and post-conflict, displacement, epidemics/pandemics, famine, environmental emergencies, and the aftermath of natural disasters. Research shows that nine out of the ten countries with the highest CEFMU rates are considered either fragile or extremely fragile states and seven out of twenty-one countries with the highest CEFMU rates face some of the biggest humanitarian crisis. In such situations, CEFMU increases with a disproportionate impact on girls. (GNB 2018.) The global nature of the COVID-19 pandemic has left no country unaffected, and most governments responded with strategies aimed at controlling the spread of the virus by measures of lockdown or other less restrictive social distancing measures. These COVID-19 mitigation strategies have contributed to a surge in SGBV globally, indicating that the measures meant to keep populations safe have often had the opposite effect for women and girls. (UN Women 2020a.) In extremely fragile states such as Afghanistan, Myanmar or Ukraine the subsequent crises and war have had horrifying impacts on the safety of women and girls. Access to accurate information from a crisis or conflict area can be very challenging. However, the needs are great, and it is crucial to report on this topic, so that there is a possibility of change.

The goal of this thesis is to support achieving the UN SDG 5 by increasing the awareness of CEFMU, specifically in crisis and conflict settings. The objectives of this study are to reveal the enablers and barriers for CEFMU in conflict and crisis contexts, and to provide recommendations for promoting change in CEFMU in crisis and conflict settings, and empowering women and girls. Applying an intersectional lens helps to identify hidden structural barriers and supports an understanding of how the individual experiences of girls and women differ, even within an already marginalized group. Women and girls vulnerable to CEFMU typically fall within the lowest categories in wealth, castes, and classes. They also lack educational opportunities and literacy, belong to minority ethnic and racial groups, live in marginalized rural or urban slums, are disabled, and/or live in areas affected by armed conflict or natural disasters. Additionally, the issues related to sexual orientation, gender identity and expression, and sex characteristics (SOGIESC) when tackling CEFMU have been largely disregarded in the design of CEFMU projects and programming. (OHCHR 2019, 5-11; GNB 2018.)

2   Background

Child, early and forced marriages or unions (CEFMU) are a form of sexual and gender-based violence (SGBV). The concepts and legal framework for SGBV, including child, early and forced marriages or unions in stable, development settings are described in the background section of this thesis. CEFMU rates increase during crises and conflict because the circumstances that drive CEFMU are intensified by increased insecurity and disruption of normal systems and structures. The integrative literature review aims to add important evidence and information on CEFMU in crisis and conflict settings.

2.1   Sexual and gender-based violence

Gender is defined as a social construct based on the "roles, behaviours, activities, and attributes assigned to women and men, and to girls and boys". The gender of a person is based on a personal identification of being a man, a woman, or neither of these two, rather than on their biological sex. A person's gender identity may or may not be aligned with the sex assigned to them at birth. (OHRHC 2019, 5-7.)

Gender-based violence (GBV) is an umbrella term for "any harmful act that is perpetrated against a person's will and that is based on socially constructed (i.e., gender) differences between males and females. It includes acts that inflict physical, sexual, mental, or economic harm or suffering, threats of such acts, coercion, manipulation, and other deprivations of liberty. These acts can occur in public or in private." (IASC 2015, 5.) GBV can be committed by family, friends, members of the community or unknown attackers. It may be perpetrated

or condoned by the State, non-State actors, or institutions. (UNHCR 2021a, 5-6.) GBV is a human rights violation and results from gender inequality and the abuse of power. GBV affects primarily women and girls, but also men and boys, and persons whose sexual orientation, gender identity, gender expression and/or sex characteristics place them outside sociocultural normative categories (SOGIESC) such as lesbian, gay, bisexual, trans and intersex (LGBTI+) people. (UNHCR 2021b; OHCHR 2019, 5-11.) Although women and girls are the primary victims, all genders are affected. It is vital not to use GBV and violence against women and girls (VAWG) interchangeably. (UN Women 2020; UNHCR 2021a, 5-8.)

Gender-based discrimination refers to "any distinction, exclusion or restriction" made based on a person's gender with the effect or purpose of limiting, altering, or nullifying the recognition, enjoyment, or exercise of that person's human rights. Both GBV and discrimination are prohibited under international law, particularly based on the right of equality and non-discrimination. (UNHCR 2021a, 5-8.) According to the UDHR Article 2: "Everyone is entitled to all the rights and freedoms set forth in this Declaration, without distinction of any kind, such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth, or other status." Article 7 states: "All are equal before the law and are entitled without any discrimination to equal protection of the law. All are entitled to equal protection against any discrimination in violation of this Declaration and against any incitement to such discrimination." (UNGA 1948.) The framework of international law includes international humanitarian law (IHL) and human rights law which prohibit all forms of sexual violence and against anyone. Also, included is international criminal law which then provides the possibility for prosecution.

Forms of GBV include domestic violence, intimate partner violence (IPV), child, early or forced marriage and union (CEFMU), female genital mutilation (FGM) and honour crimes. Online abuse is a more recent form of GBV. Sexual violence involves acts such as rape, sexual slavery, trafficking, forced prostitution, forced pregnancy, or forced sterilisation. The terms GBV and sexual and gender-based violence (SGBV) are often used inter-changeably, but many organizations such as the UNHCR and IFRC have deliberately used SGBV to emphasis the criminal character and disruptive consequences of sexual violence for victims/survivors and their families, as not all forms of GBV are criminal acts in national laws and policies. Sexual exploitation and abuse (SEA) by humanitarian workers are also severe forms of SGBV. When SGBV is conflict-related and executed by elements affiliated with a state or non-state armed group, including terrorist organizations, it is referred to as conflict-related sexual violence (CRSV). (UNHCR 2020a, 3-8; IFRC 2018, 10-12.) SGBV is highly stigmatized, which leads to under-reporting of cases, especially in states that have high levels of gender inequality (Rockowitz et al. 2021, 2-3).

The UNHCR policy (2020) on the prevention of, risk mitigation, and response to gender-based violence continues to address six key priorities, that were first introduced in the UNHCR Strategy 2011-2016. These are protecting children of concern against SGBV, addressing the sale and exchange of sex as a coping mechanism in situations of displacement, engaging men and boys, providing safe environments and safe access to domestic energy and natural resources, protecting LGBTI+ persons against SGBV, and protecting persons with disabilities against SGBV. Other areas, which require specific attention are programming for adolescent girls and older women, livelihoods programming for those at-risk and survivors, in addition to safe shelters and access to justice. (UNHCR 2020b).

The Inter-Agency Standing Committee (IASC), Sphere, and other humanitarian working groups have established important guidelines for GBV in emergencies. The IASC GBV guidelines (2015) have been a key development to support multi-sector approaches to SGBV risk mitigation. A significant development in the sector has been the collaboration of UNHCR, UNFPA, UNICEF and Non-Governmental Organizations (NGOs) International Rescue Committee (IRC) and International Medical Corps (IMC) in the development of the Gender-Based Violence Information Management System (GBVIMS), a shared system which allows different service providers to collect effectively and safely, store, analyse and share data related to the reported incidents of SGBV. Due to the sensitive nature of GBV data and concerns by many frontline GBV actors in how GBV data is used, the information-sharing between key stakeholders has been very limited. GBV co-ordination and multi-sectoral response has also been challenging. Furthermore, the data on GBV has not been standardized across GBV service providers. As a solution GBVIMS now provides a classification tool for six types of GBV to be used for standardized data collection. (GBVIMS 2021.)

2.1.1 Sexual and gender-based violence in crisis and conflict

In humanitarian emergencies, social behaviour norms are often undermined, and traditional social systems broken down amid the chaos. Several factors can cause increased risk of SGBV including extreme poverty, lack of access to food and water, minority status and disrupted family and community support systems. (IFRC 2019.) According to UNICEF (2021b) the amount of population displaced by crisis and conflict, and who are at risk of SGBV continues to grow worldwide. However, due to stigmatization of SGBV, it is often under-reported and up-to-date data collection systems are lacking. Thus, examining global SGBV rates in humanitarian crisis contexts is not possible. (Rockowitz et al. 2021, 2-3.) Vulnerable groups, especially women and children, may be separated from their families and community, making them more susceptible to abuse and exploitation due to gender, age, and reliance on others for help and safety. According to Rockowitz et al. (2021, 5) during humanitarian crises

approximately half of GBV survivors are children. Therefore, addressing SGBV is a main concern in humanitarian crises, because of the potentially life-threatening consequences, in particular the use of rape as a weapon of war. The effects on both the physical and psychological health of the victim as well as their family are devastating. Women and girls may experience severe physical injuries, unwanted pregnancies and exposure to HIV or other sexually transmitted infections. Depression, anxiety, post-traumatic stress disorder (PTSD), the limited ability to complete daily tasks, and suicidal thoughts are also common. (UNICEF 2021b.; IFRC 2019.) It is increasingly recognized that populations affected by conflict, or a natural disaster may experience different forms of SGBV both during the crisis and possible displacement as well as during and following their possible return. It is crucial in refugee camp settings to implement actions in order to prevent and mitigate SGBV to reduce vulnerabilities. Prevention refers to initiatives to stop SGBV from first occurring, for instance working with communities, more specifically with men and boys in order to promote practices that contribute to gender equality. On the other hand, mitigation refers to diminishing the risk of exposure to SGBV, for example ensuring that sufficient lighting and security patrols are in place from the onset of a camp setting. (IASC 2015, 5-9.)

According to the UNHCR report in many countries, forcibly displaced women and girls have been particularly, with more incidents of SGBV and SEA (UNHCR 2020a). Intimate partner violence (IPV), physical and/or sexual, is increasingly recognized as a critical concern in humanitarian contexts as well as at a global level with the COVID-19 pandemic crisis and unprecedented lockdown causing increased domestic violence, limiting social safety nets and mobility, and preventing access to information and services (UN Women 2021; COE 2021). CEFMU is huge concern as evidence demonstrates heightened risks for forcibly displaced adolescent girls. UNICEF estimates that, over the next decade, ten million additional child marriages may occur as a result of the COVID-19 pandemic (UNICEF 2021a).

Because of its immediate and potentially life-threatening health consequences, coupled with the possibility of preventing these consequences through medical care, addressing sexual violence is a priority in humanitarian settings. SGBV prevention, risk mitigation and response are at the core of the UNHCR protection mandate. The principle of "Do no Harm" is a key ethical principle and obligation that serves as a guideline in any humanitarian, human rights, or accountability interventions. The principle is of crucial importance for any activities that address SGBV and imposes the necessity to sensibly assess complex gender dynamics with-in societies and communities, particularly not to further expose victims of sexual violence or their families to stigma or harmful societal repercussions. (UNHCR 2020a, 6-8.)

2.1.2   Sexual and gender-based violence prevention in crises and conflict

At least every fifth woman and girl who are facing a humanitarian crisis have experienced SGBV. In crises the structural violence is highlighted, and for example, CEFMU increases during long lasting crises (Rockowitz et al. 2021, 5). Through sexual health services victims of violence can be identified and be helped. This kind of services is also a way to bring safety to women and girls who are afraid that they could end up being victims of SGBV. (UN Women 2021; UNICEF 2021b.) The Inter-Agency Standing Committee SGBV Guidelines (IASC 2015) are an essential tool for humanitarian actors and communities affected by armed conflict, natural disasters, and other humanitarian emergencies. The goal is that humanitarian programming in all emergencies is designed and implemented in a manner that substantially reduces the risk, promotes resilience, and supports lasting solutions to the problem of SGBV. (IASC 2015.)

The purpose of the IASC (2015) guidelines is to assist across all sectors of humanitarian response, through all stages and by all stakeholders in planning, implementing, coordinating, and monitoring essential actions for the prevention and mitigation of SGBV across all sectors. Humanitarian aid programs must systematically share the information about the consequences of SGBV and about the fact that through different services it is possible to receive proper care and shelter. Sexual and reproductive healthcare (SRH) is an essential part of basic health care. (Elnakib, Hunersen, Metzler, Bekele & Robinson 2021, 11-12.) At the same time when humanitarian actions are planned to begin, it is essential to provide support as soon as possible to local governments and non-governmental organizations (NGOs) to build universal health coverage which in one part would be the provision of high-quality SHR services. A public health approach is collaborative because its essential part is to collaborate with each other and learn from other sectors and disciplines. This kind of collaboration is essential when building a sustained and intersectoral response. Public health approaches focus on underlying causes and risk factors and service-based approaches focus on victims of violence with seeking diverse ways to reduce their vulnerability and mitigate the impact of violence in their lives. (IASC 2015; UNICEF 2022a.)

Corresponding with to the UN cluster approach addressing SGBV and focusing on recognizing systemic exposure of women and girls to SGBV in crises, while helping to make sure that there is support available for all survivors of SGBV is at the core of UNICEF cross-sectoral program commitments that are overarching and apply across all program areas (UNICEF 2022a). With coordination between governments, civil society and UN partners, UNICEF responds in emergencies to protect the rights of children and provides survivors of SGBV clinical health services, psychosocial support, dignity kits and safe places where they can access care and protection. Safe places offer the possibility to participate in activities for empowerment and gaining access to information about the risks, rights and needs of women and girls. In many crises, safe places are the only way women and girls have access to relevant and possibly

lifesaving information. (Rockowitz et al. 2021, 2.) UNICEF coordinates also WASH (water, sanitation, and health) and nutrition programmes and these programs help women and girls to participate in different forms of community planning which mitigate the risk of SGBV (UNICEF 2022a).

The COVID-19 pandemic is a public health crisis that has unfortunately undermined efforts to end SGBV by reducing prevention and protection efforts, social services, and care and by increasing the incidence of violence. As a result, the pandemic is expected to cause a one-third reduction in progress towards ending SGBV by 2030. There has been an urgent need for governments to include SGBV prevention and mitigation strategies into their COVID-19 emergency management and recovery planning, as well as national crisis policies. (The Council of Europe COE 2021.)

2.2   Child, early, and forced marriages or unions

Child, early, and forced marriages or unions (CEFMU) is defined as a "formal or informal union, in which one or both parties are under the age of 18. Forced marriage is a marriage in which one or both spouses do not give full and free consent, regardless of age. Early unions are informal unions in which a girl or boy lives with a partner as if married before the age of 18". The acronyms CEFMU or CEFM are often used to encompass all these practices. (UNFPA 2022). CEFMU is a form of sexual and gender-based violence (SGBV). It also creates conditions for other forms of SGBV to occur. (UNHCR 2020a, 3-8; IFRC 2018, 10-12.)

Millions of girls are forced into CEFMU for economic and cultural reasons irrespective of international and national legislation, conventions, or policies. CEFMU correlates with multiple negative consequences. CEFMU deprives girls of their childhood, forcing them to take on the responsibilities of adult womanhood too early. It limits their futures, often denying the opportunity for education. And it harms their health, putting them at heightened risk of adolescent pregnancy and its accompanying complication to maternal and child health, as well as of domestic violence. (GNB 2022.) Due to spousal age gaps that characterize CEFMU, girls' autonomy and bargaining power in the marital home are diminished, and risk of intimate partner violence (IPV) is high (Elnakib et al. 2021,10-12). CEFMU has also intergenerational effects, with critical consequences for child development and health. The causes of CEFMU are deeply embedded gender inequalities and harmful cultural and religious gender norms that devalue and restrict women and girls. These discriminatory gender norms prioritize girls as wives, mothers and household caretakers that do not need investing in educational or employment opportunities. These norms also normalize and provide opportunities for wider SGBV and discrimination. It is therefore critical to raise awareness among communities that CEFMU has extensive negative consequences for development and

that allowing girls to have an education and training can in fact add value to their society as well as their personal and family lives. (UNFPA 2022; GNB 2022.)

UN Women coordinates and promotes the UN system in advancing gender equality, and in all deliberations and agreements linked to the UN Agenda 2030 and SDGs (UN Women 2021b). UNICEF is the UN custodian agency for monitoring progress towards reaching the SDG Target 5.3: Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation. According to UNICEF statistics the global burden of CEFMU has shifted from South Asia to sub-Saharan Africa. Latin America and the Caribbean is the only region of the world where there is no evidence of progress, with levels of CEFMU as high as they were 25 years ago. (UNICEF 2022b).

During the past decade, the proportion of young women globally, who were married as children decreased by 15%, and 25 million CEFMUs have been prevented. Currently the highest levels of CEFMU are in West and Central Africa, where 37% of young women were married before age 18. Lower levels of CEFMU are found in Eastern and Southern Africa (32%), South Asia (28%), and Latin America and Caribbean (21%). South Asia remains home to the largest total number of child brides, with more than 40% of the global burden. This is due both to its large population as well as the legacy of how common CEFMU was in the past, specifically in India. However, as is seen from the statistics, the global burden of CEFMU is shifting to sub-Saharan Africa. In sub-Saharan Africa, levels of CEFMU have declined at a modest rate to the current 35% and the combination of population growth, crises (climate change, COVID-19, Ebola) and conflict threaten to result in an ever-higher number of CEFMU in sub-Saharan Africa during the coming years. (UN Women 2021b; UNICEF 2022b.)

2.2.1 Key drivers of child, early, and forced marriages or unions

The lack of or weakness of protective legal or policy frameworks against CEFMU is a major driver of CEFMU. The core elements of legislation related to child marriage are the minimum age of marriage, and free individual and informed consent. (UNICEF 2022b.) Globally most states have implemented national laws of minimal age to marriage but lack a comprehensive legislative approach to CEFMU. The UNFPA-UNICEF Global Programme to End Child Marriage works with many partners to advocate and support practical, rights- and evidence-based actions to end child marriage and promote gender equality and the empowerment of adolescent girls. According to the Global Programme governments must have clear and consistent legislation that establishes 18 years as the minimum legal age of marriage acknowledged under any marriage law of the state including religious and civil laws and traditions. (UNFPA-UNICEF 2019.) Adequate safeguards must also be in place to ensure that parental or judicial consent, or other exceptions are not used to force girls into marriage. The criminalization of CEFMU alone is insufficient when introduced without adequate

complementary measures and support programmes and may instead contribute to the marginalization and loss of livelihood for the families affected and have the unintended effect of increasing the practice of informal unions or unregistered marriages. (UNFPA-UNICEF 2019.)

Poverty is one of the key drivers of CEFMU, specifically for uneducated girls in rural communities. CEFMU may be viewed as a means of securing the girls' future, or she may be deemed as an economic burden or even a commodity. The poorest and least-educated girls face double threat and are most at risk of CEFMU. (Najjarnejad & Bromfield 2022, 3-5.) Therefore, CEFMU programming and interventions for financial stability and economic empowerment should be targeted to families and children most at risk. (GNB 2022; Najjarnejad & Bromfield 2022, 7-8.) The COVID-19 pandemic has added urgency to the pledge to "leaving no one behind ", as stated in the Agenda 2030 for Sustainable Development. (UN 2022.) The global consequences of the COVID-19 pandemic are expected to reverse decades of progress on gender equality, have a significant impact on the programs and implementation of interventions to against CEFMU reducing their efficacy and reach, and cause extensive economic detriment. This will likely have a large impact on poverty levels in fragile and extremely fragile states, where CEFMU is most prevalent. Collectively, these factors are projected to result in an additional total 13 million child marriages taking place that otherwise would not have occurred between 2020 and 2030. (UNCHR 2022; UNFPA 2020; UNICEF 2022b.)

Another major cause of CEFMU are norms, structures and attitudes towards gender equality that are created by social systems in different contexts (GNB 2022; Asi, Bebasari, Hardy, Lokot, Meagher, Ogbe, Parray, Sharma, Standley & Vahedi 2022, 13-15). However, norms related to social hierarchy and patriarchy are very similar across contexts, nations, and geographical regions. Social hierarchy norms impact who has the decision-making power based on intersectional identity indicators, for example, age, gender, race, religion, sexual orientation, class, and caste. Social hierarchy also defines to what level individuals and groups must comply with existing norms and the consequences they face for differing from them. Gender norms that benefit male or masculine attributes are supported by patriarchy which undermines the rights of women and girls and restricts their opportunities in various ways, including the power over their bodies and sexuality. (GNB 2022; UNICEF 2022b; UN Women 2020b.) Addressing religious views towards CEFMU is also necessary given the obvious prominence of religious traditions as a driver of child marriage in many contexts. Working with religious leaders may be one crucial way to curb the practice, especially since religious ceremonies are widespread and religious leaders play a central role in officiating marriages. (Najjarnejad & Bromfield 2022, 4-5.) The main drivers of CEFMU are presented in Figure 1 and may be grouped into structural, social and cultural, and context related drivers. CEFMU in crises and conflict contexts are discussed further in the results of the ILR.

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Drivers of Child, early and forced marriages or unions
├── Structural
│   ├── Lack of or weak protective legal or policy frameworks
│   ├── Lack of economic opportunities
│   ├── Poverty
│   └── Lack of access to or availability of basic services (education, health, social protection)
├── Social and cultural
│   ├── Harmful gender norms
│   ├── Dowry or bride price
│   └── Family honour
└── Context
    ├── Development
    ├── Conflict
    └── Crises
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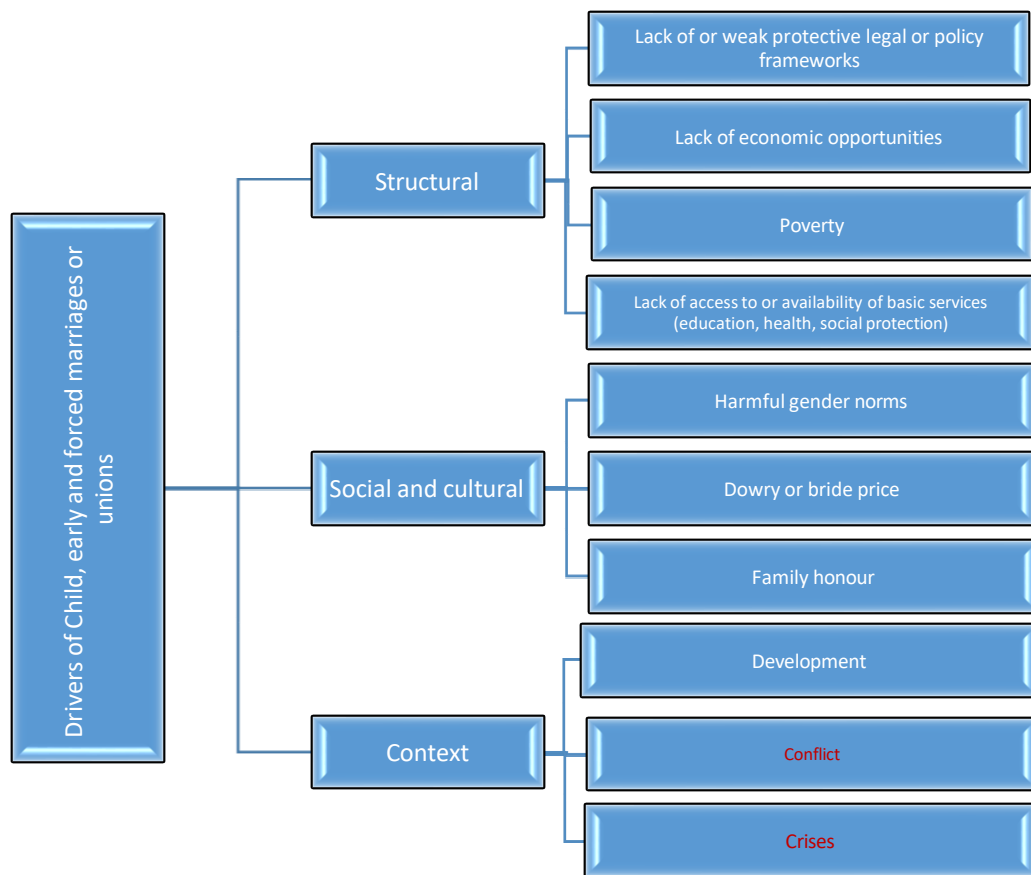
Figure 1: Drivers of child, early and forced marriages or unions

Programs and interventions aimed at ending CEFMU have historically avoided engaging with the topic of sexuality as it is generally viewed as a taboo in many cultures. Nevertheless, one of the fundamental drivers of CEFMU is the traditional societies' fear of and aim to control women's and girls' sexuality. Adolescent and unmarried girls and women often have limited access to health services, specifically sexual and reproductive health (SHR) services and information, because health system policies demand spousal or parental consent. (El Ayoubi, Abdulrahim & Sieverding 2021.) Therefore, it is essential that all efforts to address CEFMU and improve women's and girls' rights and should acknowledge the aspect of societal control of women's and girls' sexuality. Providing safe and accessible SRH information and services to all girls, especially unmarried adolescent girls is essential. Adolescent girl-friendly services should be provided across health, education and other key institutions supporting girls' bodily autonomy and choices. (GNB 2022; UN Women 2020b.)

2.2.2   Child, early, and forced marriages or unions in crises and conflicts

In June 2017, the United Nations Human Rights Council adopted the resolution recognizing the need to address CEFMU in humanitarian contexts. The Human Rights Council Resolution on Child Marriage in Humanitarian Settings (2017) recognizes CEFMU as a violation of human rights and calls for "strengthened efforts to prevent and eliminate this harmful practice and support married girls in humanitarian contexts". It urges states to ensure access to protection, health and education services for girls who have been forced to flee violence and persecution or who are unaccompanied or separated, including protection and response to the practice of CEFMU. The resolution includes situations of armed conflict and recognizes CEFMU as an "impediment not only to the economic, legal, health and social status of women and girls but also to the development of society as a whole". (UN Human Rights Council 2017.) This was a significant step in highlighting the issue of CEFMU in crisis and conflict settings on the agenda of governments, UN agencies, humanitarian actors and other actors.

CEFMU rates increase significantly during crises and conflict, and in humanitarian settings when the circumstances that drive CEFMU are intensified by increased insecurity and disruption of normal systems and structures. In the past CEFMU programming has not been a priority in a humanitarian response, but increased awareness has led to the global understanding, that targeted interventions streamlined into humanitarian response mechanisms are essential to tackling CEFMU. (GNB 2021; IFRC 2019.) Humanitarian crises can involve a variety of circumstances, such as conflict and post-conflict, displacement, epidemics or pandemics, famine, environmental emergencies, and the aftermath of natural disasters. Reports and data on the prevalence of CEFMU in humanitarian settings remain quite limited, but the main causes are related to increased violence and protection concerns, economic insecurity, and poverty. (UNGA 2019, 2-5.)

CEFMU in crisis and conflict settings is a negative coping mechanism used by families and communities to address their fear for the safety of their daughters and the lack of available options for girls to pursue their childhood safely, but also due to economic insecurity, poverty and lack of income opportunities caused by the crisis, that increase the pressure on families to marry off their girls in the hope that the husband and his family will provide for them. (GNB 2020; Mazurana, Marshak & Spears 2019.) Child marriage is often a financial transaction, the girl is seen as a commodity, and the decision is often based on short-term economic reasons. (UNGA 2019, 4-5.)
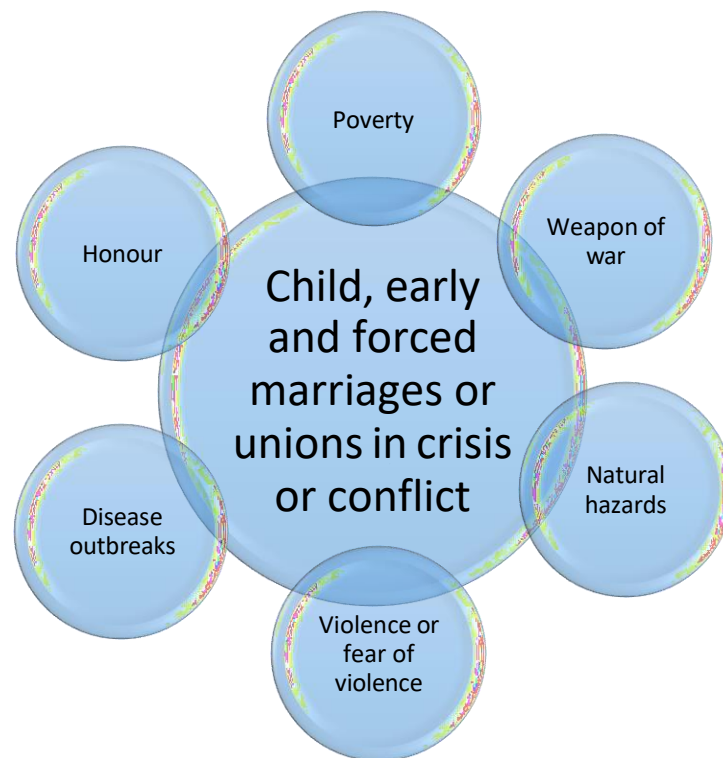
Figure 2: Causes of child, early and forced marriages or unions in crisis and conflict settings (UNGA 2019, 2-5)

Natural hazards caused by the worsening climate change increase the risk of CEFMU due to the consequences on economies and social structures. Countries with high vulnerability to climate "shocks" often also have high rates of CEFMU. CEFMU can also be an indirect consequence of disease outbreaks as the COVID-19 crisis or Ebola outbreaks have demonstrated. (GNB 2021; Asi et al. 2022, 13-15.) Like other emergencies, public health emergencies also exacerbate risks of CEFMU as a negative coping mechanism. In addition to the direct health impacts of increased mortality and pressure on health services, epidemics and pandemics often disproportionately impact women and girls and adversely impact on CEFMU. Specifically, public health emergencies like COVID-19 can increase CEFMU both in the acute and recovery phases because of school closures, reduced family incomes and increased risks of early pregnancy caused by limited medical services, including SRH services and information. (GNB 2020; UNCHR 2022; UNICEF 2022b.) In contexts where marriage is an economic transaction or a strategy to improve capital accumulation (e.g., dowry or bride price systems), more climate crises result in increases in families' economic hardship and may increase the use of child marriage as a negative coping strategy. These increased economic hardships are believed to lead to higher rates of child marriage, as well as a driving down of the age of child brides, as found in research in countries such as Bangladesh, India, Mozambique and Nepal (GNB 2020; Mazurana et al. 2019.)

The ongoing UNFPA-UNICEF Global Programme to Accelerate Action to End Child Marriage was launched in 2016 in 12 of the most high-prevalence or high-burden countries: Bangladesh, Burkina Faso, Ethiopia, Ghana, India, Mozambique, Nepal, Niger, Sierra Leone, Uganda, Yemen and Zambia. (UNFPA-UNICEF 2019.) The aim is to promote the rights of adolescent girls to avert marriage and pregnancy, empower girls to make decisions on their own futures, and strengthens the services that allow them to do so. The Global programme also focuses on the underlying conditions that sustain child marriage, advocating for laws and policies that protect girls' rights and collecting important data on the topic to increase awareness and also to provide support in crises or conflict. (UNFPA & UNICEF 2019, 23.)

Figure 3: Key stakeholders in child, early and forced marriage or union prevention and response (UNFPA & UNICEF 2019)

Eliminating CEFMU in crises and conflict settings requires a holistic and integrated approach and coordinated, multisectoral action between all stakeholders. The key stakeholders are described in Figure 3. The holistic approach should include education, child protection, protection against SGBV, sexual and reproductive health and rights (SRHR), and economic empowerment, already at the very beginning of crises and throughout the crisis response, transition, and recovery phases. This is because the drivers and consequences of CEFMU are both multifaceted, and deeply rooted in gender inequality. Also, understanding the social

norms related to CEFMU in a specific region or community is an essential part of designing interventions to shift those norms and to help end CEFMU. Norms related to gender have typically developed over many years influenced by different contexts, culture, tradition, and religion, so change often takes time. (UNGA 2019, 14-15; GNB 2020.)

2.2.3   Intersectionality in child, early and forced marriage or union prevention

The term "intersectionality" was created by lawyer Kimberlé Crenshaw already in 1989 as a lens for understanding how different forms of inequality often work together and exacerbate each other. Intersectionality is a way of understanding that many different social categories interconnect in the lives of women and girls. (UN Women 2022, 8-10.) Intersectionality in the context of gender inequality refers to a person included in several other demographic categories that increases their exposure to inequalities of various kinds. For example, gender inequality can intersect with other inequalities such as age, race, ethnicity, caste, disability, and sexual orientation to further marginalize certain groups of girls and women and further increase their vulnerability. Different forms of inequality often function together to exacerbate injustice and to exclude, oppress, and discriminate against certain groups. Intersectionality is a useful a tool used for analysis, advocacy, policy and programming development, because it challenges intersecting forms of discrimination and power relations. It also works across time and space, recognizing that identities and experiences are dynamic and changing, requiring us to trace problems back to their origins to find the underlying structural and systemic oppressions. (GNB 2022; UN Women 2022, 8-9.)

CEFMU programs and interventions should respond to different types of inequality so that they can meet the needs of the different women and girls placed in this kind of situations. Different types of exclusion intersect, and the most disadvantaged adolescent girls experience multiple forms of marginalization, discrimination, and oppression. (GNB 2022.) In national preparedness plans and response to crises i.e., COVID-19 response, the failure to recognize the intersectional overlapping categories (such as gender, ethnic group, and disability) may lead to failure to safeguard the rights and health of girls and women, because they are often included in two or more categories with potential exacerbated impacts. This kind of planning leads to the erosion of long-term global gender transformation efforts. (Asi et al. 2022, 13-15.) Applying a systematic intersectional lens in addition to a gender lens leads to a better local, national, and global response and management. This also helps to identify hidden structural barriers and supports an understanding of how the individual experiences of girls and women differ, even within an already marginalized group. Interventions must work at all levels to support the people and systems around the target beneficiaries, including families, peers, communities, service providers and government officials. This is of particular importance for CEFMU prevention and elimination because of its multiple and interlinked root-causes. (GNB 2022; UN Women 2022, 8-10.)

2.2.4 Human rights framework

Human rights are universal. This means they apply equally to men and women, girls, and boys. States are obliged to respect, protect, and fulfil the human rights of all persons within their jurisdiction (UNGA 1948). However, these rights are violated in numerous ways globally every day. Gender equality and women's rights are key elements in the Universal Declaration of Human Rights (UDHR). UDHR Article 16 states that: "a) Men and women of full age have the right to marry and find a family. They are entitled to equal rights as to marriage and at its dissolution. b) Marriage shall be entered into only with free and full consent of intending parties." (UNGA 1948). The UN human rights mechanisms have acknowledged that fundamental human rights obligations, which include also economic, social, and cultural rights, continue to apply in humanitarian settings (UNGA 2019,2).

Protecting women's and children's rights are further outlined in international and regional documents, such as the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) and the Convention on the Rights of the Child (CRC) (UNGA 1981; UNGA 1989.) Applying the CEDAW and CRC together in a holistic approach and combining their strengths to frame laws, policies, and social action, may provide for a powerful instrument in preventing CEFMU. CEDAW and CRC strengthen each other in terms of protection related to harmful practices. CEDAW article 5 calls for states: "To abolish traditions and practices that are discriminatory to women and girls and to modify social and cultural practices based on the notion of female inferiority." (UNGA 1981.) Similarly, CRC Article 24 prescribes that all children have: "The right to health and health services and to be protected from harmful traditional practices." (UNGA 1989.)

CEDAW examines human rights through a gender lens. It recognizes the differing needs of women and girls at various stages and ages of their lives and patterns of discrimination that affect them. CEDAW defines the right of women to be free from all forms of discrimination and sets out core principles to protect this right. It also establishes an agenda for national action to end discrimination and provides the basis for achieving equality between men and women by affirming women's equal access to education, health and employment. CEDAW is the only human rights treaty that acknowledges the reproductive rights of women. (UNGA 1981, art 4.) CEDAW is the more specific of the two conventions on the issue of child marriage. Article 16 (1) prescribes: "a) The same right to enter into marriage and b) the same right to freely choose a spouse and to enter into marriage only with their free and full consent. Article 16 (2) states: "The betrothal and the marriage of a child shall have no legal effect, and all necessary action including legislation, shall be taken to specify a minimum age for marriage." (UNGA 1981.) Thus, both the UDHR and the CEDAW state that marriage must be entered into only with the 'free and full' consent of both parties.

Human rights specific to children under 18 years of age are outlined in the CRC (UNGA 1989.). The four core principles of the CRC are non-discrimination, the best interests of the child, the right to life, survival and development, and respect for the views of the child. CRC Article 19 states that a child has: "The right to protection from all forms of physical or mental violence, injury or abuse, maltreatment or exploitation, including sexual abuse." Article 34 further specifies: "The right to protection from all forms of sexual exploitation and sexual abuse." One of the most important features of the CRC is the protection it offers girls. The CRC is the only major human rights instrument currently in force that consistently uses both male and female pronouns, making it clear that the rights apply equally to girls and boys. (UNGA 1989.)

Other international agreements related to CEFMU are the Convention on Consent to Marriage, Minimum Age for Marriage and Registration of Marriages, the African Charter on the Rights and Welfare of the Child, the Protocol to the African Charter on Human and People's Rights on the Rights of Women in Africa, and the UN General Assembly resolution on Trafficking in women and girls. (UNICEF 2022b.) The framework of international law includes international humanitarian law (IHL) and human rights law which prohibit all forms of sexual violence and against anyone. Also, included is international criminal law which then provides the possibility for prosecution.

2.2.5   Sustainable Development Goal 5

The UN Agenda 2030 for Sustainable Development was adopted in September 2015. The 17 SDGs are the core of the Agenda 2030 and focus on the three interconnected elements of sustainable development which are economic growth, social inclusion and environmental protection and are a core feature of. The 17 SDGs contain 169 targets, and the targets further include indicators. The SDGs offer a practical and effective pathway to address the causes of violent conflict, human rights abuses, climate change and environmental degradation globally with the aim of leaving no one behind. The Agenda 2030 demands action to reach 'Good health and well-being for all', underlining the aim for health equity. (UN n.d.d.) The SDG 5 as described in detail in appendix 1 aims to "achieve gender equality and empower all women and girls" (UN n.d.b; UN 2022).

The SDG target 5.3 aims to eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation. The indicators for the target are: 1) Proportion of women aged 20-24 years who were married or in a union before age 15 and before age 18, 2) Proportion of girls and women aged 15-49 years who have undergone female genital mutilation/cutting, by age. (UN n.d.b.) It is important to acknowledge that the 17 SDGs are interconnected. Therefore, progress on SDG target 5.3 is dependent on progress in other areas, especially education, employment, and poverty reduction. To end CEFMU by 2030, it is estimated that progress should be 17 times faster than in the last decade. Failing to address

CEFMU not only hinders the achievement of SDG 5 on gender equality, but also SDG 3 on good health and well-being, SDG 10 on reducing inequalities, and SDG 16 on peace, justice and strong institutions. (UN 2022; UN Women 2021; GNB 2020.)

3   Study goal, objectives, and research question

The goal of this thesis is to support achieving the UN SDG 5 by increasing the awareness of CEFMU, specifically in crisis and conflict settings.

The objectives of this study are to reveal the enablers and barriers for CEFMU in conflict and crisis contexts, and to provide possible recommendations for promoting change in CEMFU and empowering women and girls.

The research questions are:

- What are the barriers for CEFMU in crisis and conflict settings?

- What are the facilitators for CEFMU in crisis and conflict settings?

- How well is the intersectional approach in CEFMU programming contributing to increasing the impact and empowering women and girls in crisis and conflict settings?

4   Methods

4.1   Study setting

This thesis is based on the collaboration with UN Women Finland to provide further knowledge and informing on the progress of empowering girls and women in crisis and conflict settings in prevention and ending of CEFMU in accordance with the SDG 5.3. UN Women is the UN entity dedicated to coordinating and promoting gender equality and the empowerment of women. It was established in 2010 and works for the elimination of discrimination against women and girls, empowerment of women, and achievement of equality between women and men as partners and beneficiaries of development, human rights, humanitarian action and peace and security. UN Women strives to position gender equality as fundamental to the SDGs. This involves working with local governments, justice, police, and health sectors as well as civil society and grassroots women's organizations. UN Women also develops research and policy advice, provides training and technical support, and produces gender-responsive guidelines and recommendations. (UN Women 2021a & b.)

The international agreements that guide the work of UN Women are the UN Women Strategic Plan 2022-2025, the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), the Beijing Declaration and Platform for Action (PFA), the UN Security Council resolution 1325 on women, peace and security as well as the UN Agenda 2030. (UN Women 2021a & b.)

CEFMU is rooted in gender inequality and in the low value given to girls, and is exacerbated by poverty, insecurity, crises, and conflict. CEFMU in crises and conflict is under-studied and under-reported, and there is an urgent need for evidence-based research in different contexts. Conducting research on CEFMU (and other forms of SGBV) in conflict and humanitarian settings is extremely challenging and researchers must abide by strict ethical guidelines. The safety of the interviewees, interviewers, research team, and the community, must be a priority, which may prove difficult for conducting research in fragile contexts. Collecting data on CEFMU and SGBV (such as prevalence data) without being able to provide adequate support services, which are often limited or not accessible in conflict and humanitarian settings, would violate internationally recognized ethical guidelines. (Punjwani 2015; WHO 2022.) As CEFMU and SGBV is under-reported worldwide, humanitarian actors should assume that it is occurring and treat it as a serious and life-threatening problem regardless of the presence or absence of concrete evidence. The subject of the thesis is based on the personal interest of the author as a midwife, humanitarian aid worker and feminist. Working with women and girls in areas affected by crisis or conflict has strengthened my mission to strive towards gender equality and empowering women and girls.

4.2   Integrative literature review

The choice of integrative literature review (ILR) as a method for this thesis was made due to its effectiveness in acquiring a broad view of the problem, the possibility to analytically examine and summarize past research, and further to draw conclusions from the previous studies, as well as in identifying gaps in research. As CEFMU is a sensitive topic it may often be difficult to obtain accurate information on the phenomena. By conducting an ILR, the gaps in the current research on CEFMU in crisis and conflict settings may be identified, possible future research needs defined, a theoretical and conceptual framework described, and recommendations for future measures presented. According to Whittemore & Knalf (2005) a good quality ILR may reveal new facts and consequently be used in real life by changing policies or evidence-based practices. The ILR method allows for the combining of different research methodologies and the inclusion of diverse data sources in the thesis to create a more holistic understanding of the researched phenomenon. The ILR allows for the inclusion of both primary research studies, along with other documents (including discussion papers and policy documents.) (Whittemore & Knafl 2005, 546-547.) The author found that ILR proved to be a good method to understand the phenomenon of CEFMU, define concepts, and

specifically, to review previous research on CEFMU in the context of crises and conflicts, and combine the data found. The results of the ILR cover the integrity of the topic researched and present discovered suggestions for current practice and for future research and interventions. (Whittemore & Knafl 2005, 552.)

The five-stage model by Whittemore and Knafl (2005) conducting an ILR was used in this thesis (Figure 4). The ILR consists of problem formulation, literature search, evaluation of data, data analysis and interpretation and presentation of results. (Whittemore & Knafl 2005, 547-549.)

Figure 4: The 5 stages of an integrative literature review (Whittemore and Knafl 2005)

The problem formulation of the thesis began with the elaboration of conceptual and operational descriptions and clear definitions of the thesis topic and purpose. According to Russel (2005) identifying the target and accessible population are the two key steps in the literature search stage. The target population refers to the individual or groups the reviewer plans to represent in the integrative review. Results could be generalized to this population. (Whittemore & Knafl 2005, 547-549; Russel 2005.) The target population for this study was identified as women and girls impacted by CEFMU. The accessible population includes all published articles and reports of the topic. Selected databases, years of publication, and subject headings are examples of accessible population inclusion criteria. (Russel 2005.)

The author aimed to conduct the literature search using a logical and systematic search strategy to obtain the most suitable information. The search terms were defined by focusing on the goal, objectives, and research questions of the thesis. The PICO model (Table 1) was also used for further clarification of the problem and purpose as well as create structure the for the thesis (Jensen 2021).

According to Whittemore Knalf (2005), to improve validity of the study the data collection should include adequate sampling, and all the decisions related to the sampling need to be justified and clearly documented in the method section of the ILR. Data collection should involve several strategies and different available methods should be used to obtain information for the review. (Whittemore & Knafl 2005, 548-549; Russel 2005.) The author began the data collection by defining inclusion and exclusion criteria and the reasoning for

including the chosen criteria. Specific information, such as keywords and databases, were discussed with the information analyst from the Laurea UAS library, and the sources presented in a research table summary of the articles included in the study (Appendix 2).

P Population and problem	Women and girls affected by child, early, and forced marriages or unions
I Intervention	Sustainable Development Goal 5.3: Aim to eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation
C Comparison and Context	Crisis and conflict
O Outcomes	1) Raising awareness on child, early and forced marriages or unions. 2) Recommendations for achieving Sustainable Development Goal 5.3 in crisis and conflict settings

Table 1: PICO model

The data evaluation phase of this ILR consisted of critical and objective evaluation of the data results and reliability of the findings. Finally, the ILR is presented in the IMRD structure, in other words, introduction, methods, results, and discussion sections. The PRISMA guidelines (PRISMA 2021) for reporting have been used as a tool to support transparent research reporting and a flowchart as shown in figure 5 was created to showcase the data search process transparently for the reader to follow. The conclusions of the ILR are presented in the discussion section. (Whittemore & Knafl 2005, 552.)

4.3   Inclusion and exclusion criteria

The inclusion and exclusion criteria were defined before conducting the data search to facilitate collecting the accurate data needed for the research. The criteria are described in table 3. The publishing date was limited to research publications from 2015 to 2022. This is mainly because the Inter-Agency Standing Committee Gender-based violence guidelines were published in 2015 and have been a key development to support multi-sector approaches to SGBV, including CEFMU, risk mitigation and prevention in crises and conflict settings. The accepted and included data were peer reviewed, academic research articles. Research

articles written in English and accessible from Laurea University of Applied Sciences library services were included.

Category	Inclusion criteria	Exclusion criteria
Publishing date	2015- 2022	Before 2015
Study methods	Peer reviewed original, academic research articles Full text available	Studies other than research articles
Language	English	Other languages
Access	Accessible from Laurea – University of Applied Sciences library services	Paid online journals
Results	Literature related to the research questions	Literature not related to research questions

Table 2: Inclusion and exclusion criteria

4.4 Data collection

The electronic databases included in the data collection were EBSCO and ProQuest. All the results of database searches were saved to the open-source reference management software Zotero. The selection process of articles included scanning of titles and abstracts and further evaluation of full texts of the relevant articles. After titles and abstracts were read and selected for inclusion, full texts were obtained for possible relevant literature. Full texts were then read and selected based on the inclusion and exclusion criteria. The search and selection process are reflected in figure 5. The reference lists of the selected articles were also reviewed. Additionally, after discussing with the information analyst, a manual search was conducted in the UNICEF, UN Women, Girls not Brides and IFRC data portals according to the same search terms and focusing also on intersectionality, as after test searches there were no relevant hits in the database searches. However, in the final data selection process, reading through the full text of the articles retrieved from the database search, (n=3) research papers were found that included the intersectionality lens to their studies.

The selected search strategy was chosen to retrieve articles that address various aspects and challenges related to CEFMU in crises and conflict contexts. The author performed database

test searches and acquired guidance from the information specialist on how to set up keywords and on usage of different databases already in April 2021, and again in October 2022. The initial database searches were performed during October 2022 - November 2022. The search terms used were chosen in accordance with the criteria presented in table 2.

The search began from the EBSCO database and the search was targeted to "Academic journals" with the limiters "Published between 2015-2022", "English", "Peer-Reviewed", "Full Text". The EBSCO database search was done using the search sentence: (child marriage or forced marriage or early marriage) AND (humanitarian crisis or natural disaster or refugee or armed conflict) AND (prevention or intervention).

The second database search was done with ProQuest database in November 2022 targeting search to "Anywhere" in text and adding limiters "Published between 2015-2022", "Scholarly Journals", "English", "Peer-reviewed". The used ProQuest search sentence ("child marriage" OR "early marriage" OR "forced marriage") AND ("humanitarian crisis" OR "natural disaster" OR "conflict" OR "refugee") AND (prevention OR intervention).

At the beginning of the search records were identified from the EBSCO and ProQuest databases the duplicates were mostly automatically removed, and after screening 5 duplicates (EBSCO=2, ProQuest=3) were found and removed manually, resulting to the final identified records (n=42). The first screening was done by excluding research studies by title (n=20). The author was cautious to include all hits that could possibly be related to CEFMU in crisis or conflict contexts, even though it wasn't stated clearly in the title. The second screening of the data was done by reading the abstracts and including all research records that indicated to relevant information in full text. Records were removed based on abstract (n=5) because of not being relevant to the topic (n=2), wrong settings or population (n=2), and research method (n=1). In the last screening full text (n=15) were read and assessed for inclusion and quality. After full text was read, articles were excluded according to the inclusion and exclusion criteria (n=3); publishing date (n=1), literature review (n=2). The final included studies (n=12) were concluded after reflecting on the inclusion and exclusion criteria and research questions and considered evidence based and scientifically qualified. Included articles are presented in the research table (Appendix 2).
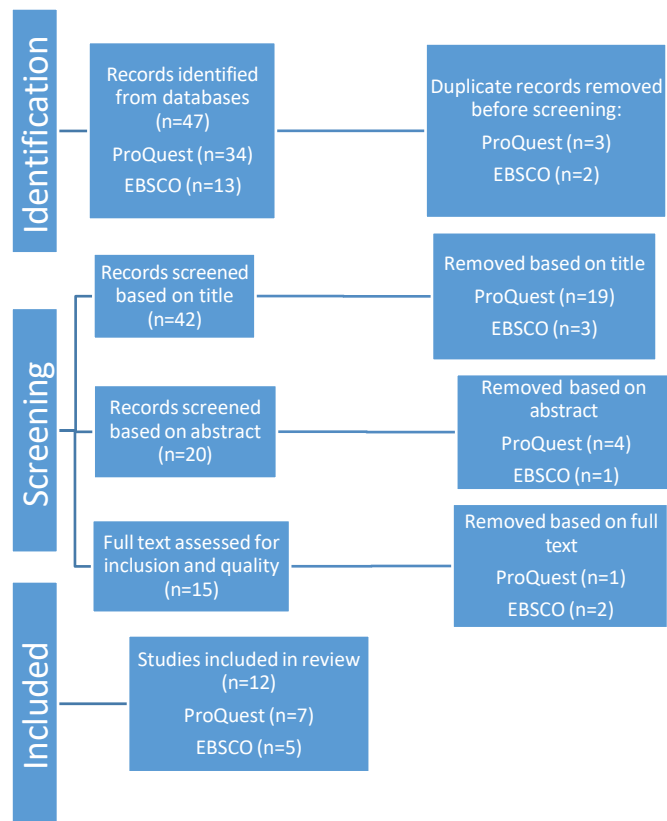
Figure 5: PRISMA, data search and selection process (PRISMA 2021)

4.5   Quality assessment

The quality assessment of the ILR may be challenging due to both the number and types of primary sources used. An effective and valuable quality assessment of the ILR usually requires finding the balance between a broad enough quality criterion and possibly utilizing multiple specific quality evaluation tools. In the assessment of an ILR with a broad sampling frame including both theoretical and empirical primary sources the focus should be on representativeness, authenticity, informational value, and methodological quality of the primary sources. (Whittemore & Knafl 2005, 547-550.)

This literature review used only articles published in reputable scientific journals as they have already undergone rigorous quality evaluation prior to publication and can therefore be considered as reliable source for research material. The Quality Assessment with Diverse Studies (QuADS) critical appraisal tool developed by Harrison, Jones, Gardner & Lawton (2021) was chosen to assess the rigor of the research papers extracted in view of demonstrating good reliability and which allows researchers to appraise heterogenous studies in the literature review. The QuADS tool is developed for use in literature reviews that include multi-method or mixed-methods research. According to Harrison et al. (2021)

recognizing that the underlying assumptions of quantitative and qualitative research are significantly different, a tool to appraise methodological quality, evidence quality and/or quality of reporting mixed- or multi-methods research is valuable in enabling researchers to consider the transparency and reporting of key elements of these approaches. Furthermore, a tool that is relevant to mixed- and multi-method approaches is significant in the recognition of the value of these methodologies in health systems and services research. A single tool that can be used to evaluate methodological quality, evidence quality, and quality of reporting across a body of diverse evidence facilitates in reflecting on the extent to which there is apparent transparency and congruency in the research purpose and its reporting and the implications for the quality of evidence. (Harrison et al. 2021.)

Reliability and validity are the standards against which the adequacy and accuracy of measurement procedures are evaluated in scientific research. The reliability of the research study describes the consistency of measurement of a concept of interest. Validity entails the scope to which a measure adequately represents the core construct that it is supposed to measure. To define and demonstrate reliability of the study, it is necessary to depict the connection between the search data and the results of the study. The analysis process should be described with adequate detail and by utilizing tables and appendices to elaborate and present these connections. (Elo & Kyngäs 2008, 112; Bhattacherjee 2012, 55-58.)

The author critically evaluated the data according to the QuADS checklist (Appendix 3). The scores are applied on a four-point scale to enable to distinguish the degree that the criteria are met. The resulting data from the QuADS tool provided the author the opportunity to consider the reporting of information across the body of work related to each criterion. According to Harrison et al. (2021) criteria are not weighted as such, but some may be considered by the researcher to be particularly important to their research field and these findings can be discussed narratively when writing up findings regarding the study quality assessment.

Through reviewing scores for each single criterion across the body of work rather than the overall scores, researchers are advised to discuss the quality assessment findings narratively and consider areas in which reporting is comprehensive or less so and why this may be. (Harrison et al. 2021.) The author counted the scores and the percentage of the studies and acquired scores from 79-95%, with the mean of 88%. The included research studies for the research were overall of good quality. Specific emphasis on higher quality research studies compared to lower quality research studies were not given in the analysis phase of the study.

4.6 Data analysis

According to Whittemore and Knalf (2005) conducting a rigorous data analysis and describing this process with sufficient detail is required to explain the trustworthiness of the study. A systematic analytic method should be implemented to the data analysis phase of an ILR to

ensure unbiased and in-depth interpretation of primary sources. The purpose of the data analysis is to organize, classify, search for similarities and differences, and to summarize selected studies results. To achieve this the compiled data needs to be coded, categorized, and summarized providing synthesis of the evidence. The method of analysis depends on the choice of the verification method chosen. It is also the objective to write and interpret the results so that they form a complete understanding. The material selected for the literature review should be described and the quality of the source material evaluated. (Whittemore & Knafl 2005, 548-550; Russell 2005, 5.)

The data analysis of the thesis included the data extraction and synthesis. Data including the reference, aim, method as well as findings relevant to the topic of each paper were extracted by the author from the research papers using a data extraction tool in alignment with the research questions. The results of the literature research were compared with the research questions. The data analysis methodology described in Whittemore & Knafl (2005) was used, this included data reduction, data display, data comparison, conclusion drawing and verification phases. In the data reduction phase, the individual research articles (n=12) were reduced to a single page with similar data extracted from each individual source. These were divided into subgroups based on the topic (facilitators, barriers and intersectional approach), setting (crises or conflict) and level (individual, household, community and government). This was followed by coding of the data acquired from the primary data sources, as well as organizing the data using a matrix as shown in figures 5 and 6, and tables for more clarity. (Appendix 2) In the data display phase, the extracted data was recorded and presented to allow comparison between primary data sources to identify themes, relationships, and patterns. Finally, the conclusion drawing, and verification phase included the elaboration of the data divided into subgroups, connecting and generalizing descriptions of patterns and relationships, identifying commonalities and differences and constructing conclusions. In the final phase of the data analysis general conclusions and synthesis were written integrating all the data from the subgroups and explaining the findings of the review. (Whittemore & Knafl 2005, 550-551.)

The extracted results were critically analyzed and connected on the basis of the aligning topics and settings and compiled in the enhanced coding phase into four categories addressing connecting aspects of 1) facilitators, or 2) barriers to CEFMU in crises or conflict settings. These are described in detail in figures 6 and 7. The resulted categories were compared with the original extracted data from the included studies to verify the results and the data analysis processes. The connections between the individual included studies and the results are presented in detail in Appendix 2.

5   Results

5.1   Description of the studies included

The studies (n=12) from the databases include qualitative, quantitative, and mixed methods studies. These are described in more detail in the research table in Appendix 1. The included studies were published between year 2015-2022. Most of the studies are published in year 2022 (n=4) and 2021 (n=5). The others were published in year 2020 (n=1), 2019 (n=1) and 2017 (n=1). The studies are published from a range of different countries comprising from Bangladesh (n=4), Myanmar (n=4), Kenya (n=4), Ethiopia (n=3), Uganda (n=3) Zambia (n=3), Lebanon (n=2), Senegal (n=2). The following countries were also included (n=1): Cameroon, Colombia, Djibouti, Jordan, Afghanistan, Liberia, Pakistan, Sudan, Turkey, Brazil, Burundi, CAR, Chad, India, Iran, Iraq, Israel, Libya, Mali, Mexico, Niger, Nigeria, Philippines, Russia, Saudi Arabia, Somalia, South Sudan, Syria, Ukraine, Venezuela, Yemen, Zimbabwe, and USA.

Publication year	Number of studies (n=12)
2022	4
2021	5
2020	1
2019	1
2017	1

Table 3: Included studies by publication year

5.2   Facilitators of child, early, and forced marriages in crises and conflict

The author identified four core facilitators of CEFMU, which vary and interact across contexts. Poverty and insecurity or fear of SGBV are shown as core drivers that trigger lack of agency or opportunity, and loss of social or community networks. (Figure 6) These facilitators further reflect individual, household, community, and government level factors.
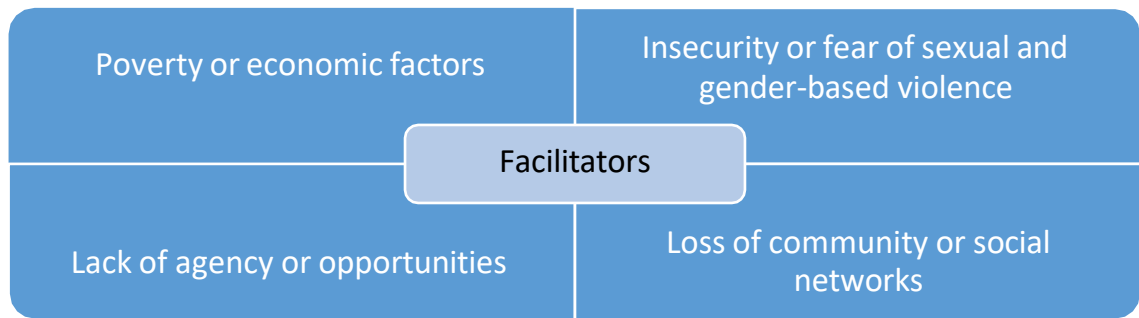
Poverty or economic factors	Insecurity or fear of sexual and gender-based violence
Lack of agency or opportunities	Loss of community or social networks

Facilitators

Figure 6: Facilitators for child, early and forced marriages or unions in crises and conflict

5.2.1 Poverty and economic factors

CEFMU is used an economic strategy and negative coping mechanism to reduce the financial burden on families of caring for or educating daughters, especially in communities with limited opportunities for female labor force participation due to economic insecurity, poverty and lack of income opportunities caused by crisis, that increase the pressure on families to marry off their girls in the hope that the husband and his family will provide for them. (Najjarnejad & Bromfield 2022, 3-5.) In locations where the family itself is confined to camps or legally unable to work, pressure to find other ways to access resources and opportunities is increased and marrying their girls may be a way for family members to open up resources and opportunities (Mazurana et al. 2019). In a study on CEFMU among Somali refugees in Ethiopia, Elnakib et al. (2021, 10) found there to be a strong association between the female sex of the head of household and CEFMU in refugee camp settings. Female headed households may have fewer income earners and therefore tend to be more vulnerable to impoverishment and benefit from shifting the financial burden of their daughters onto a male suitor. (Elnakib et al. 2021,10-11.) At the individual level being poor and female cause a double threat for CEFMU (Najjarnejad & Bromfield 2022, 3).

The COVID-19 pandemic has exacerbated the risk of CEFMU due to increased economic vulnerability. Households are forced to engage in any form of income generating activity for survival, increasing the risk of CEFMU for the girls in the household. Girls with limited freedom of movement, limited or no possibilities to go to school or contribute to household livelihoods are seen as a burden on the family. (Esho et al. 2022, 11-12.) Additionally, climate crisis (i.e., drought, tsunami, floods, earthquakes) combined with conflict and displacement result in increased water and food insecurity and economic hardship for families and may increase CEFMU as a negative coping strategy (Mazurana et al. 2019; Melnikas, Ainul, Ehsan, Haque & Amin 2020.) This leads to a

continuous cycle of poverty because displaced people and refugees are chronically poor due to the effects of crises and or conflict (Najjarnejad & Bromfield 2022, 5).

In some contexts, refugee camps may encourage CEFMU as food rations are distributed by households and marriage entails the creation of new households (Melnikas et al. 2020, 10). For Rohingya refugees the costs of CEFMU are actually lower in the camps, because in Myanmar many authorities had to be paid. The Myanmar regulation of marriage included bribes, fines, and fees, which prevented CEFMU for the Rohingya in Myanmar (Melnikas et al. 2020, 8-11.) In their research Guglielmi, Mitu & Seager (2021, 1241) discovered that most girls (11-15 yrs.) had been married in the camps (not Myanmar) due to lower costs.

Daughters may be seen as generators of wealth, i.e., in Afghanistan the groom pays father of bride in exchange for marrying her. The Mahr (reward or gift) is used, and the husband pays the bride's family money or other valuable possessions. (Najjarnejad & Bromfield 2022, 3.) Thus, girls are perceived a commodity. The dowry system includes the transfer of wealth from the bride's family to the groom's family (El Ayoubi et al. 2021, 985-986). These financial transactions are often a key element of decisions about the timing of marriage and if crises or conflict result in increases in families' economic hardship and may increase the use of child marriage as a negative coping strategy. The increased economic hardships are believed to lead to higher rates of child marriage, as well as a driving down of the age of child brides. (Melnikas et al. 2020.) In a study on CEFMU among Somali refugees in Ethiopia, Elnakib et al. (2021) found there to be a strong association between the female sex of the head of household and CEFMU in refugee camp settings. Female headed households may have fewer income earners and therefore tend to be more vulnerable to impoverishment and benefit from shifting the financial burden of their daughters onto a male suitor. (Elnakib et al. 2021,10-11.)

Girls may choose to marry when their parents are unable to provide for them at home, or to support them in continuing in school. However, adolescent girls' expectations of "life would be better in marriage" are often unrealistic and in reality, the girl's life continues in poverty, gendered responsibilities, intimate partner violence (IPV) and early pregnancy. (El Ayoubi et al. 2021, 994-995.)

5.2.2   Insecurity and fear or sexual and gender-based violence

CEFMU may be a strategy used by parents to protect their families and daughters from perceived threats, such as concerns about family honor, girls' virginity, sexual assault, or pregnancy that occurs outside of marriage. The fear of increased violence in crises or conflict contexts, specifically SGBV against women and girls is a key concern and a main reason for families to leave their homes and seek refuge elsewhere, and an incentive to marry off their daughters at a young age in the belief that marriage will protect them. (Mazurana et al. 2019;

Najjarnejad & Bromfield 2022, 3-5.) CEFMU in conflict situations is mainly driven by violence, fear, and insecurity, which are inevitable consequences of armed conflicts (Singh et al. 2022, 3-5). In many cultures and religions chastity is a virtue and premarital sex a disgrace. CEFMU is perceived as a protective strategy to ensure security, family honour and fertility (Melnikas et al. 2020, 10.) In the context of refugee camps or displacement, the high safety concerns and high crime rates combined with low police supervision or security systems established by communities or governments in the camps are main reasons insecurity and fear of SGBV and drivers of CEFMU. (Mazurana et al. 2019.)

In communities where patriarchal gender norms are dominant, and girls' virginity highly valued, families and communities may support CEFMU not only as the legitimate context of sexual activity for girls, but as protection against potential disgrace if girls evade those norms (Mazurana et al. 2019.) Religious beliefs and practices may also encourage CEFMU to protect girls from premarital sex and ensure religious norms and expectations around virginity and purity are maintained (Najjarnejad & Bromfield 2022, 5). The eldest daughter must get married as soon as menstruation starts, so younger daughters are married in the same way earlier to save reputation of family, prevent "sins" and control adolescent's sexuality (Melnikas 2020, 10). There is a huge amount of shame connected with a woman or girl losing her virginity outside of marriage, thus families may marry off their daughters to protect their "honour". Honour has complex meaning in the many communities but is associated with the girl being a virgin and ensuring that she can marry. (Elnakib et al. 2021, 10; Singh, Goli & Singh 2022, 2-3.) Also, the religious practice of "purdah" bans girls from going outside their homes unaccompanied when reaching puberty (Guglielmi et al. 2021, 124). Post conflict the marriage of girls to older men or men working for the military may be utilized by her family in the effort to save the girl from being kidnapped or trafficked, and to ensure protection of the family (Singh et al. 2022, 4-6).

The lack of monitoring mechanisms and reduced efforts in programs supporting victims of SGBV due to the COVID-19 pandemic, closure of schools & rescue centers for victims (i.e., safe spaces) have also contributed to the increase in CEFMU (Esho et al. 2022, 5-7). In many crises, safe places are the only way women and girls have access to relevant and possibly lifesaving information (Rockowitz et al. 2021, 2-3).

5.2.3 Lack of agency and opportunities

Girls and their families may see marriage as the only viable pathway in crises and conflict settings where opportunities for continued schooling, labor force participation, or other valued roles are limited. Girls who are not enrolled in school have no viable alternatives. On the other hand, when girls are married, they are less likely to finish school. (Elknaib et al. 2021, 8-9.) Inequitable gender norms and gendered societal, economic, security, religious,

psychological factors of families during and because of crisis or conflict contribute to a cycle of unintended pregnancy, school dropout, and child marriage, particularly for girls living in poverty resulting from crises, conflicts or displacement. This has negative effects not only on the girl as an individual, but on her family, the community and on society as a whole. (Petroni, Steinhaus, Stevanovic Fenn, Stoebenau & Gregowski 2017, 787-790.)

Research from refugee camps demonstrate that here are very few opportunities to develop capabilities and limited opportunities for school or employment in refugee camps for (Rohingya) girls (Melnikas et al. 2020, 10; Elknaib et al. 2021, 8-9). According to Guglielmi et al. (2021) only 3% of Rohingya girls engaged in any education and 5% had engaged in paid work in the past 12 months. Conservative cultural and religious norms and attitudes in camps, such as "purdah", that bans girls from going outside their homes unaccompanied when reaching puberty also diminish opportunities for girls. (Guglielmi et al. 2021, 1241.) Post-conflict or disaster educational spaces and infrastructure may be destroyed, education for displaced populations taught in a foreign language, and the long, unsafe distances to school may prevent girls from accessing education (Singh et al. 2022, 3-4).

Adolescent girls in conflict or displacement settings fail to access school based sexual and reproductive health (SRH) programs, which restricts their acquisition of systematic SRH information and the use of this information to make informed choices that affect their lives. Because refugee girls drop out of school at a young age, they are deprived of learning about basic biological aspects of menstruation and leads to the lack of understanding of the relationship between sex and pregnancy. Also, many cultural norms dictate that it is inappropriate to give SHR information to unmarried girls. Additionally, parents may lack of sufficient knowledge about sexual and reproductive health. (El Ayoubi et al. 2021, 983-990.) This lack of information and agency leads to adolescent girls' expectations of marriage, that "life would be better in marriage". Girls may then choose to marry when their parents are unable to support them in continuing in school. Girls who are married to older partners as children are at significantly higher risk of IPV and domestic violence because of their age, lack of independent resources and social isolation (El Ayoubi et al. 2021, 994-995.) Increased gender and power inequality in marriages decreases the girl's ability to voice concern and decreases her ability to make decisions about use of contraceptives and how often to have sex. Subsequently, girls are unable to plan for gaps between pregnancies, with considerable adverse effects on their own health and the survival and health chances of their children. (Rockowitz et al. 2021.)

5.2.4   Loss of community or social networks

In crises or conflict settings, communities and social networks break down and access to protection systems are lost or weakened. Displacement or loss of homes and community

networks can further increase the risks of CEFMU. The faulty or disrupted legal provisions mostly leave girls with unregistered spouses or marriages with lesser safety nets and legal protection. (Singh et al. 2022, 3-5.) Loss or separation from parents may force girls to CEFMU as a negative coping mechanism and the lack of available options for girls to pursue their childhood safely. Najjarnejad & Bromfield (2022, 5) found that particularly non-parent guardians believed marriage could provide protection and a support system for children. Also, girls may enter informal unions with older men in the hope of reuniting with family members who have already migrated to neighboring countries. CEFMU with large spousal age may lead to large power differences and increase the girl's vulnerability to abuse, intimate partner violence, domestic violence and social isolation. (Elnakib et al. 2021, 10-11.) Increased levels of displacement lead to an increase in CEFMU both in conflict settings and in the countries of destination of refugee populations. Girls and women are at particular risk of sexual violence and trafficking, including forced prostitution and slavery, and CEFMU can be used as a cover for this. (Mazurana et al. 2019.) Post-conflict the marriage of girls to older men or men working for military may be utilized in the hope to save girl from being kidnapped or trafficked (Singh et al. 2022, 4-6).

Disruption of family and friend networks may limit the access to information on puberty and menstruation leading to increased risk of early sexual experiences, early marriage and pregnancy (El Ayoubi et al. 2021, 990). The lack of understanding of the relationship between sex and pregnancy, misconceptions about menstruation, sex, pregnancy, and contraception, as well as safe places for access to information about the risks, rights and needs of women and girls lead to increased fear and negative experiences (El Ayoubi et al. 2021, 990-992; Rockowitz et al. 2021, 2-3). There is also pressing need to address gaps in knowledge and practices around contraceptives among married adolescent girls. Studies in different contexts indicate that married adolescent girls rarely use contraception and are thus unable to exercise reproductive control. (Elnakib et al. 2021, 10.)

Conservative cultural, religious, and social norms, attitudes and traditions may cause adolescent girls to be isolated when reaching puberty. In refugee camps, the religious tradition of "purdah" bans girls from going outside their homes unaccompanied when reaching puberty and thus restricting their communication with social networks. The loss of friendships affects all older adolescent girls, regardless of their marital status, due to age restrictions on mobility. (Guglielmi et al. 2021, 1241.) The lack of mother daughter communication is also an important risk factor for CEFMU. Due to conservative norms mothers' focus on informing of religious rituals and social aspects of puberty and marriage, not physiological or psychological concerns. Obviously, mothers usually themselves lack sufficient knowledge about SHR, and are embarrassed to discuss these aspects, because of social and cultural norms of silence. (El Ayoubi et al. 2021, 985-994.)

5.3   Barriers to child, early or forced marriages in crises or conflict

The four barriers to CEFMU identified from the studies are education, economic and employment opportunities, the increase in leadership role and agency, and multilayered, intersectional programming (Figure 7). These barriers further reflect government, community, household, and individual level factors.

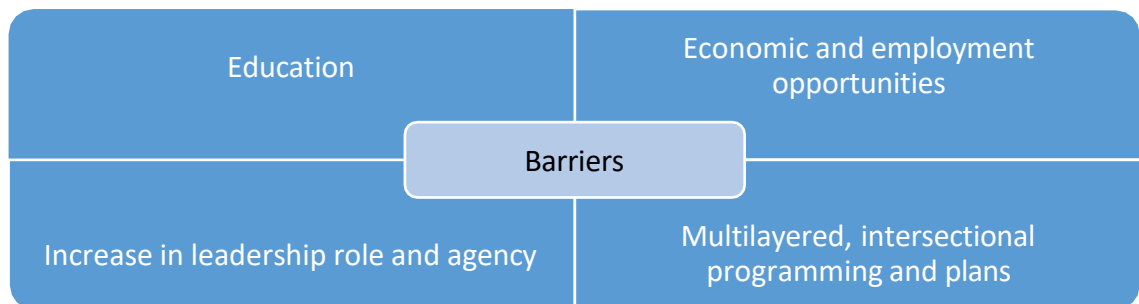| Education	Economic and employment opportunities
Barriers	
Increase in leadership role and agency	Multilayered, intersectional programming and plans

Figure 7: Barriers for child, early and forced marriages or unions in crises and conflict

5.3.1   Education

The evidence from the research shows that remaining in school is highly proactive in terms of CEFMU. Access to schooling has the potential to delay or prevent CEFMU for girls, in part because school enrollment is considered incompatible with marriage and childbearing in many settings, even when education opportunities are available. In crisis and conflict contexts access to schooling is disrupted and girls are disadvantaged at all stages of education, and many girls never have the possibility to return to education. Girls and their families may see marriage as the only viable pathway where opportunities for continued schooling, labor force participation, or other valued roles are limited. Girls who are not enrolled in school have no viable alternatives. (Elnakib et al. 2021, 8-9; Najjarnejad & Bromfield 2022, 5-6.) Providing access to education, including sexual and reproductive health and rights education, is one of the most important factors leading to empowerment of girls. School teachers should also be equipped with the skills and materials to facilitate also SRH learning. (El Ayoubi et al. 2021, 984; Esho et al. 2022, 11-12.)

Educating girls, boys, households, and communities in refugee camps about dangers of CEFMU is important (Najjarnejad & Bromfield 2022, 5-6). Also, working with religious leaders, such as Majhi's in Rohingya camps, to sensitized towards the negative effects of CEFMU and that

education for girls is a viable alternative to marriage that improves their wellbeing and development trajectories (Guglielmi et al. 2021, 1246). Refugee camp policies and programs that promote access to education and support girls to stay in school could lead to meaningful declines in CEFMU in refugee camps settings (Elnakib et al. 2021, 10). Also, governmental level policies in full inclusion of refugee children in formal schooling is critical (El Ayoubi et al. 2021, 996).

Safety concerns often hinder possibilities of attending school post-conflict or crises, so improving the safety of girls in rural and refugee-populated areas, en-route to schools, especially evenings should be considered (Najjarnejad & Bromfield 2022, 7). In areas where it is not possible to attend school due to long distances and/or safety concerns outreach education to adolescent girls (unmarried and married) may be considered, as well as programs on gender norms for families and community leaders provide possibilities to prevent CEFMU. (Guglielmi et al. 2021, 1246.) In many fragile states, such as Kenya, school closure due to COVID-19-pandemic demonstrated the importance of schools and educational programs that serve as safe havens protecting girls against harmful traditional practices. Adolescent girls' absence from school, coupled with the lack of alternative safe spaces or shelters, has been associated with increased vulnerability to SGBV and CEFMU. This was seen already during the Ebola crisis when the closure of schools was associated with increased sexual violence against girls and boys, child pregnancies, and child marriage. (Rockowitz et al. 2021, 2-4.) Likewise, research among Syrian refugees in Lebanon confirms findings that disruption to education occurring in the aftermath of conflict increased girls' confinement and thus exacerbated their vulnerability to CEFMU. These findings indicate that camp policies and programs which promote access to education and which support girls to stay in school could lead to meaningful declines in child marriage in refugee populations. (El Ayoubi et al. 2021, 995-998.)

In Ethiopia where Somalian refugees have lived for many years and vulnerability is less heightened, the increased access to schooling and better sensitization of families to dangers of CEFMU seems to be leading to a shift in marriage practices (Elnakib et al. 2021, 8-9). The involvement of local influencers, community and religious leaders, and community social and health care workers have been seen as key to reinforce behavior change communication messaging in communities to provide access to knowledge based on scientific facts (Esho et al. 2022, 11-12; Najjarnejad & Bromfield 2022, 5-6).

Conceptions of childhood and adolescence are shifting to reflect changing norms and behavior, and many studies show that girls themselves want alternatives to marriage. Petroni et al. (2017) found that in a study from Kenya, Uganda, Zambia and Senegal, adolescent girls indicated a strong interest in remaining or returning to school and obtaining the possibility for future employment. However, the desires of girls are in stark contrast with the realities of

CEFMU in these fragile states. In Senegal increasing educational attainment for girls as well as youth-friendly reproductive health services reduced the rates of CEFMU. (Petroni et al. 2017, 785-787.)

The costs of investing in education for girls are often too high for families, who may then prioritize education for boys. In several studies cash transfers, specifically cash-transfers conditional on school attendance, for education are described as a promising intervention, that operate by increasing girls' human capital and alleviating the economic burden of families. (Esho et al. 2022, 11-12; Najjarnejad & Bromfield 2022, 7-8.) Additionally, access to free primary and secondary schooling, financial support for transportation and school supplies, as well as access to hygiene supplies are mentioned as barriers to CEFMU (Elnakib et al. 2021, 8-9; Petroni et al. 2017, 787). Some studies discuss the evidence, that married girls are often more isolated and face greater barriers to services. Thus, their specific needs should be prioritized in programming and divorced girls must be supported to return to school, prioritized as recipients of cash programming, and informed through targeted outreach about programming and services available. (Guglielmi et al. 2021, 1246; Makino, Ngo, Psaki, Amin & Austrian 2021, 543.)

5.3.2   Economic or employment opportunities

Most of the studies from crises and conflict contexts indicate that in married and unmarried girls' experiences the possibilities to accessing income-generating opportunities and training are low. Lack of labor market opportunities for women, especially those requiring academic skills, may thus reinforce marriage as the only viable pathway for girls and their families. This requires targeting girls and families that are most vulnerable and likely to resort to harmful practices with interventions such as cash transfers, food vouchers and safe and accessible online and mobile platforms. (Esho et al. 2022, 11-12.) Financial and economic empowerment of women and girls with cash transfer programming have been found to be a promising intervention for girls to continue both continue their education, but also provide access to skills-building activities for improved agency and empowerment. (Najjarnejad & Bromfield 2022, 7-8; Makino et al. 2021, 539-543.)

In their study Guglielmi et al. (2021, 1241) discovered that in refugee camp settings unmarried Rohingya girls were significantly more likely than married girls to report benefitting from programs that provided employment for youth or economic skills building (9% vs 5%). The study highlights the difficulties faced by married girls, their marital status and childcare demands translating into missed vocational training opportunities provided to 'adolescents', including sewing, tailoring and life skills classes, while equally missing out on opportunities provided to 'women' of an older age band, such as volunteering for a variety of camp structures and participating in cash-for-work schemes.

In one study the Syrian refugee's inability for consanguinity in marriage arrangements and expenses combined with living for a longer time in refugee setting with some stability, may have suggested a decline in rates of CEFMU (Najjarnejad & Bromfield 2022, 7-8).

5.3.3 Increase in leadership role and agency

Many studies reveal that girls themselves want alternatives to child marriage (Petroni et al. 2017, 787). Delaying the age of marriage is important from a rights perspective to enable girls to develop, socially, emotionally, and physically as well as enabling them to complete their education before transitioning to adulthood, so they can make informed choices about who and when to marry and when and if to have children. There is also the need to sensitize parents on the importance of marital choice for girls and empower girls to assert their preferences. (Elnakib et al. 2021, 10; Esho et. al. 2022, 11-12.)

The importance of the role of partnering with local women's groups and feminist activists who have knowledge of context and important role in communities to empower girls, strengthen their leadership role and agency and provide life-skills information is recognized in crises and conflict contexts (Asi et al. 2022, 12-15; Najjarnejad & Bromfield 2022, 7-8; Makino et al. 2021, 539-543.) The role of social networks for information is also vital, i.e., sexual, and reproductive health and rights information from friends, media and internet (El Ayoubi et al. 2021, 985).

Targeting community and religious leaders (Majhi camp coordinators) to sensitize communities towards girls' protection, wellbeing and development possibilities, and social norm interventions, i.e., messaging on the harmful effects and illegality of CEFMU were discovered to be effective in improving the agency of girls in refugee camps. (Guglielmi et al. 2021, 1246.) Additionally, involving local influencers or community and religious leaders and community health care workers-to reinforce behavior change communication messaging was found to be successful (Esho et al. 2022, 11-12).

5.3.4 Multilayered intersectional programming and plans

According to many of the research studies, gender aspects have not been mainstreamed into policies or planning but have been siloed into areas that specifically affect women and girls, such as reproductive health and gender-based violence (Esho et al. 2022, 11-12; Asi et al. 2022). A study by Asi et al. (2022) from 13 states reveals that in total 20 % of all (Covid-19) plans were classified as gender-blind, 57% were gender sensitive and 23% gender specific. The study also highlights the failure to recognize the intersectional overlapping categories in programming and (Covid-19) plans. These are all listed as separate groups such as disability, age, and religion. Many plans acknowledge that the pandemic would have impacts on SGBV, however not all the plans identified strategies to address SGBV. Strategies that were

identified included referral pathways for reporting (Djibouti), developing mass communication messages (Uganda, Sudan), and developing targeted prevention messaging for men (Bangladesh).

Programming and plans to address CEFMU and improve women's and girls' rights and should acknowledge the aspect of societal control of women's and girls' sexuality. Providing safe and accessible SRH information and services to all girls, especially unmarried adolescent girls is essential. (El Ayoubi et al. 2021, 990.) Adolescent girl-friendly services should be provided across health, education and other key institutions supporting girls' bodily autonomy and choices. There is also pressing need to address gaps in knowledge and practices around contraceptives among married adolescent girls. Studies in different contexts indicate that married adolescent girls rarely use contraception and are unable to exercise reproductive control. Thus, CEFMU programming and intervention should be planned as multilayered interventions targeting girls (unmarried and married), boys, families, community leaders and health systems to improve also contraceptive uptake and better pregnancy care. (Elnakib et al. 2021, 10; Makino et al. 2021, 539.)

In national preparedness plans and response to crises i.e., COVID-19 response, the failure to recognize the intersectional overlapping categories (such as gender, ethnic group, and disability) may lead to failure to safeguard the rights and health of girls and women, because they are often included in two or more categories with potential exacerbated impacts. This kind of planning leads to the erosion of long-term global gender transformation efforts. (Asi et al. 2022, 13-15.) Utilizing a systematic intersectional approach, in addition to a gender lens leads to a better local, national, and global response and management. Only few states have included intersectionality in their preparedness planning. The Uganda Covid-19 plan includes "age, gender, and diversity and understanding the impact of intersection personal characteristics on people's experiences are necessary for effective response" (Asi et al. 2022, 11-12.)

In contexts where vulnerability is less heightened than in the immediate aftermath of displacement, such as the protracted nature of the displacement of Somali refugees in Ethiopia or Syrian refugees in Lebanon, there may be a decline in the rates of CEFMU. Many international and national organizations offer intensive social and health services in refugee camps, increased access to schooling among girls, and better sensitization of families and communities to the dangers of CEFMU have contributed to a shift in marriage practices. (Najjarnejad & Bromfield 2022, 2-8; Elnakib et al. 2021, 8-10.)

6   Discussion

People affected by crises and conflicts have very different experiences, and the results of the ILR show that emergencies exacerbate existing gender inequalities. The main facilitators and barriers to CEFMU as described in figure 8 are nevertheless persistent in all crises and conflict contexts. The incidence of violence, specifically sexual and gender-based violence, including CEFMU often increase during and post crises or conflict. The effects of crises and conflict on girls and women can vary based on their geographical location, economic status, social or community ties, and position as an internally displaced person or refugee. The most vulnerable populations, usually girls from poor families in rural areas, face the highest risks. (Najjarnejad & Bromfield 2022, 3-5.) The trends, drivers, and push and pull factors of CEFMU may vary greatly based on context, the moment of time within a conflict or crisis, and how communities and individual families are coping with insecurity and shocks. Therefore, lessons learned from one context may not apply to another context. Even during the same conflict or crisis, depending on the time the needs may be totally different, i.e., during armed conflict and displacement resulting from the conflict. The studies from conflict areas reveal, that the main drivers of CEFMU in conflict situations are violence, fear, and insecurity, which are inevitable consequences of armed conflicts. (Singh et al. 2022, 3-5.) In the context of refugee camps or displacement, the high safety concerns and high crime rates combined with low police supervision or security systems established by communities or governments in the camps are main reasons insecurity and fear of SGBV and drivers of CEFMU (Mazurana et al. 2019).

While gender inequality is the root of CEFMU, the real or perceived threat of violence, specifically sexual violence, fear, and insecurity heightened with economic crisis or poverty are the key drivers for child marriages in crises and conflict situations. Displacement or loss of homes and community networks can further increase the risks and the practice. The faulty or disrupted legal provisions mostly leave girls and women with unregistered spouses or marriages with lesser safety nets and legal protections. Though parents believe to negotiate CEFMU for their daughters' safety and security, it is likely to leave the girl even more susceptible to vulnerability, violence, and isolation. The fear of violence, specifically SGBV against women and girls was found to be a major concern and a reason for families to leave their homes and seek refuge elsewhere, and an incentive to marry off their daughters at a young age in the belief that marriage will protect them. (IFRC 2019; Mazurana et al. 2019.)

In many cultures and religions chastity is a virtue and premarital sex a disgrace. In crises or conflict contexts, the girls' social networks break down and they lose access to protection systems. Girls may also enter informal unions with older men in the hope of reuniting with family members who have already migrated to neighboring countries. Increased levels of displacement have led to an increase in CEFMU both in conflict settings and in the countries

of destination of refugee populations. Girls and women are at particular risk of sexual violence and trafficking, including forced prostitution and slavery, and CEFMU can be used as a cover for this. (GNB 2020; Mazurana et al. 2019.)
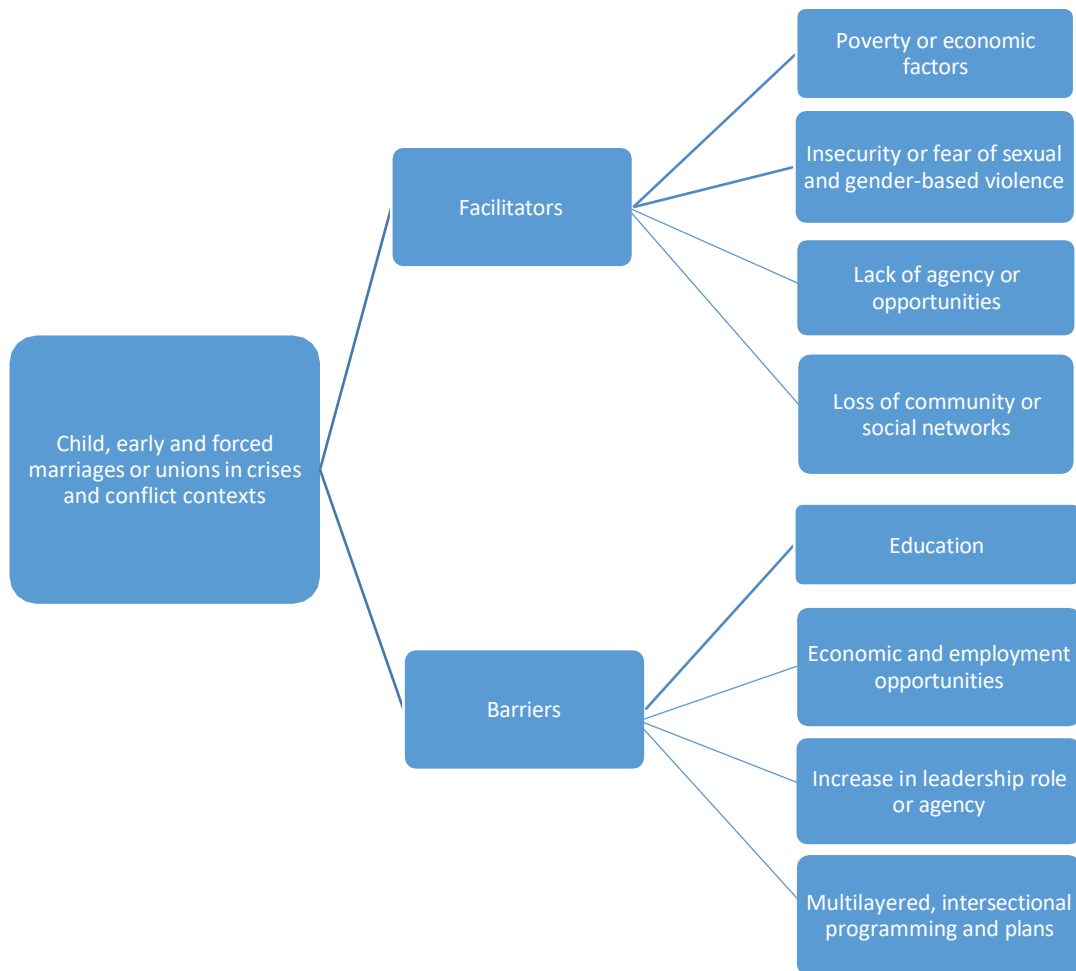

Figure 8: Child, Early and forced marriages or unions in conflict or crises

Addressing and preventing CEFMU in crises and situations of armed conflict requires that all stakeholders increase their attention, knowledge, appropriate and evidence-based protection measures, and resources in a coordinated fashion instead of single sector, siloed interventions (Asi et al. 2022, 13-15). This cannot be done effectively without increase in evidence to inform practice. CEFMU in crises and conflict settings is an under-studied phenomenon and requires increased research efforts for sustained outcomes. The Gender-Based Violence Information Management System (GBVIMS) is an important tool created for standardized data collection and analysis, in order to share critical information between

stakeholders globally. This creates possibilities for better co-ordination, and implementation of sustained efforts against SGBV into existing plans and programming in various sectors. (GBVIMS 2021.) It is important to ensure that interventions are universal, multi-sectoral and diverse in nature and design. This is because the drivers and consequences of CEFMU even in stable contexts are both multifaceted, and deeply rooted in gender inequality. There is a need to engage women and girls in decision-making, as well as conflict-affected and refugee and internally displaced population (IDP) communities for more inclusive response strategies. Their full and meaningful participation from the early stages or the crises through to the monitoring and evaluating of efforts may ensure that interventions benefit the most vulnerable populations, specifically adolescent girls. The approach should include education, child protection, protection against SGBV, sexual and reproductive health and rights (SRHR), and economic empowerment, already at the very beginning of crises and throughout the crisis response, transition, and recovery phases. (Asi et al. 2022, 13-15.) The UNFPA-UNICEF Global Programme to Accelerate Action to End Child Marriage contains a multisectoral approach to providing crucial information, data and evidence, for humanitarian response interventions to include prevention of CEFMU into interventions on the ground. These include safe spaces, education programming, and adolescent-responsive sexual and reproductive health and protection services. The Global Programme provides support also to the post-crisis transition. (UNFPA & UNICEF 2019, 23.)

Including protection and gender aspects to all sectors or humanitarian programming and response is essential and the coordination with other relevant sectors and clusters, such as water, sanitation, and hygiene (WASH), protection, shelter, and settlements, to mainstream CEFMU are required for sustained mitigation and response. Different guidelines and standards have already been developed for this purpose. The Inter-Agency Standing Committee Guidelines (2015) for Integrating Gender-Based Violence Interventions in Humanitarian Action aim to reduce risks, promote resilience, and aid recovery. The International Federation of Red Cross (IFRC) has addressed gaps in humanitarian response during emergencies with a protection, gender, and inclusion approach (PGI). The Minimum standards for protection, gender, and inclusion in emergencies (2018) highlight that emergencies worsen the existing inequalities. Factors such as a person`s sex, gender identity, age, physical ability and disability and race affect the vulnerabilities and how they may be affected, both during and after emergencies and how people respond and recover. The core aim of these standards is to provide dignity, access, participation, and safety for all people affected by disasters and crises offering practical guidance in all sectors in reflection to gender, age, disability, and other diversity factors. Applying a systematic intersectional lens in addition to the gender lens leads to a better local, national, and global response and management. This also helps to identify hidden structural barriers and supports an understanding of how the individual

experiences of girls and women differ, even within an already marginalized group. (UN Women 2022, 8-10.)

Engaging with households and communities to change social norms and behaviors is also important, because in crisis, existing negative social norms and behaviors are often exacerbated or altered. Social norms both derive from and are specific to particular social contexts, so understanding the norms related to CEFMU in a specific region or community is an essential part of designing interventions to shift those norms and to help end CEFMU. (Asi et al. 2022, 13-15.) Norms related to gender have typically developed over many years, influenced by different contexts, culture, tradition, and religion, so change often takes time, so they cannot be expected to change overnight (Mazurana et al. 2019). Interventions that aim to shift social norms work best over longer periods of time, and with ideas delivered repeatedly in different settings and in different formats. While individual beliefs, values, behaviors, and actions may change in the short-term, ensuring the sustainability and breadth of such shifts requires long-term planning and action. It is important in designing interventions to see which combination of issues are the most important to address in that specific context. Also, understanding the social norms related to CEFMU in a specific region or community is an essential part of designing interventions to shift those norms and to help end CEFMU. (Singh et al. 2022, 3-5.)

At the household level, mothers are important entry points in the provision of accurate and timely information about puberty, menstruation, sex and marriage, and pregnancy and contraception. Efforts to enhancing the competence of mothers to challenge social norms are important, because they are in a key position in communicating with unmarried adolescent girls about sexual and reproductive health and rights. Their role in providing information about the physical and cultural aspects of puberty and marriage but to also address the emotional, cognitive, and intimate facets of transitioning into adulthood. (El Ayoubi et al. 2021, 985-994.) In a context of displacement or refugee camps, where girls' risk of CEFMU is high, withholding SRH information deprives them of the ability to make informed choices that affect their health and well-being throughout the life course. Expanding choice is an important factor in girls' empowerment, with education promoted as a human capital resource that enables the enactment of these choices. Girls' education, especially at the secondary level, is the most consistent protective factor against CEFMU. Providing access to education, including sexual and reproductive health and rights education, is one of the most important factors leading to empowerment of girls. (UN Women 2022, 8-10.)

6.1   Ethical and legal considerations

In this thesis an ethical review statement from a human sciences ethics committee was not needed, even though the subject is sensitive, because the research is based on an ILR. The Finnish National Board on Research Integrity (TENK), and its protocol for responsible conduct of research is acknowledged throughout the research process. The research is done in a careful, accurate, reliable, and open manner. The research data is stored, presented, and evaluated according to the practice of scientific research. (TENK 2019.) The ILR was conducted and reported transparently. The principles of good research practices by All European Academies (ALLEA) are acknowledged in thesis. The presented principles are reliability, honesty, respect, and accountability. (ALLEA 2017.) No personal information was processed in the thesis, and there are no conflicts of interest.

This thesis process has not received any funding and it does not have any significant linkages. I am aware that my thesis is a public document and will be checked with plagiarism identification system as part of the approval process.

6.2   Limitations

CEFMU in development settings is beginning to have increased attention and research due to the UN Agenda 2030, as well as extensive efforts by different global organizations and states. However, most aspects of CEFMU in crises and conflict settings are significantly under-studied. Reports and data on the prevalence of CEFMU in humanitarian settings remain limited and there is a lack of a rigorous body of evidence, comparative research, and research that studies changes over time and in different contexts. The importance of context- and time-specific in addition to gender and age-disaggregated information from areas where children and their families are affected by crises, armed conflict and the subsequent displacement or refugee settings has been recognized. Both the prevalence and incidence of CEFMU at country, regional and subregional levels, and among communities need focus and how changes in a range of factors may significantly affect a family's, girl's, or boy's decision to reject or accept CEFMU. The gender-based violence management system (GBVIMS) has been created as a classification tool for six core types of GBV, including early and forced marriages, to be used for standardized data collection to better inform policies and programming efforts. (GBVIMS 2021.)

The used integrative literature search methodology (Whittemore & Knalf 2005) creation was challenging due to the limited evidence-based studies available. The inclusion of studies with different methodologies may possibly result in bias. The inexperience of the author in the methodology of ILR possibly hindered the ability to evaluate the included studies and especially the methodological aspects and quality, thus the rigorous use of a comprehensive critical appraisal tool QuADS was necessary (Harrison et al. 2021.) The authors knowledge and

expertise in humanitarian settings proved to be a strength in understanding crises and conflict settings and recognizing the chaos that these inflict on the populations affected.

7 Conclusions

1. Achieving gender equality and the empowerment of women and girls by 2030, the specific circumstances of women and girls in crises, conflict, and post-crises or - conflict contexts must be specifically addressed. The UN SDG 5 aims to end violence and discrimination, including harmful practices such as CEFMU, against women and girls, but also to provide them with equal access to education, health care, economic opportunity, political participation, and gender equality. UN Women is a key actor in coordinating and advancing gender equality in all deliberations and agreements linked to the UN Agenda 2030 and SDGs.

2. Acknowledging the multidimensional nature of empowerment in pressured and unstable environments, and empowering and strengthening women's and girls' voices and agency in crises and conflict contexts through education, economic and employment opportunities, the increase in leadership role and agency, and multilayered, intersectional programming are crucial for change in CEFMU.

3. Recognizing that empowerment is an active process and learning from girls' and women's experiences is essential. The voices of girls and women must be heard to understand what works to empower them and they should be given the opportunity to transform their lives and become agents of their own empowerment. Although human rights are universal, there is no one-size-fits-all approach. Individual needs differ and context matters, and an intersectional approach supports and improves inclusivity.

8 Recommendations

The thesis provides the following recommendations for promoting change and empowering women and girls against CEFMU.

1. Ensuring girls stay in school to gain skills and knowledge and have more earning power and access to economic opportunities later in life. Education not only delays marriage and pregnancy but is a fundamental human right which improves sexual and reproductive health outcomes not only for the girl herself but also for any future children.

   - Identify risks faced by adolescent girls from the early stages of a crisis and include their needs in assessments and planning.

- Identify girls at risk of dropping out of school and promote access to education for unmarried and married girls.
- Identify measures to ensure also the poorest girls can continue their education.
- Re-start education as soon as possible after the acute phase of a crisis or conflict.

2. Increasing access to health services, especially sexual and reproductive health, for adolescent girls, both married and unmarried. Improving adolescent girls' health, keeping them safe, and giving them critical skills and a say in their own lives, will guide them on a path to healthy, productive adulthood.

- Expand informed choice of girls and women. To be able to refuse marriage, they must understand and 'own' their rights and be able to support their own life plans.
- Establish protocols in health and education services in identifying warning signs and addressing the risks of child marriage.
- Give girls control over the timing and number of children they bear to improve their reproductive health, reduce unintended pregnancies, and delay childbearing.

3. Understanding that all girls experience gender inequality differently, depending on how their gender intersects with other factors such as disability, sexual orientation, class, age, ethnicity, and caste.

- The intersectional approach helps to highlight the connections between girls' social identities beyond their gender and the multilayered nature of risk and exclusion. It demonstrates how factors that shape and influence social identities operate at different levels, including at global (e.g., climate change), structural (e.g., laws and policies, provision of services), community and family (e.g., poverty and income, rurality), and individual levels.
- For sustained mitigation and response including gender, protection and inclusion aspects to all sectors or humanitarian programming and response is essential and the coordination with other relevant sectors and clusters, such as WASH, protection, shelter and settlements, to mainstream CEFMU are required.
- Guidelines and standards developed for this purpose include the Inter-Agency Standing Committee Guidelines (2015) for integrating gender-based violence interventions in humanitarian action aim to reduce risks, promote resilience,

and aid recovery. The International Federation of Red Cross (2018) minimum standards for protection, gender and inclusion addressed gaps in humanitarian response during emergencies with a protection, gender, and inclusion approach (PGI).

4. Strengthening global programs investing in girls, their participation, and their well-being to increase their agency and possibilities for leadership.

- Provide girls with the chance to connect, network, and support each other as well as having access to formal support services.
- Create safe spaces for girls as part of a comprehensive package of support, including life-skills education, and access to training opportunities.
- Better programming requires early, gender-sensitive assessments, that should be informed by mapping and participatory consultations with girls, including married girls.
- The UN Resolution 1325 on Women, Peace and Security (UN Security Council 2000) may be used to strengthen the role of women and girls and ensure women and girls are fully included in the prevention and resolution of conflicts, humanitarian response and post-conflict reconstruction.

5. Addressing harmful social norms and attitudes on gender equality and the harmful effects of CEFMU.

- Community leaders, including religious and traditional leaders, with influence over adolescent girls' lives should also be engaged to ensure their support.
- Whole families, communities, girls, boys, and men should be involved in conversations about the harmful effects of child marriage.
- Community healthcare workers, local women's groups and feminist activists, and local champions role in reinforcing behavior change communication messaging on the harmful consequences of CEFMU.

6. Strengthening local capacities and focusing on local ownership in emergencies for an improved and sustained response. All interventions should be executed thorough understanding the root causes and vulnerabilities to CEFMU in the affected communities in the specific context.

- Creating and implementing a strong legislative framework in all states, which sets a minimum age of marriage as 18, with free and informed consent regardless of gender, and ensures that national law takes precedence over customary or religious law.
- Supporting local actors by collective efforts at national, regional, and international levels.

- Adequate resources should be made available to support the effective implementation of robust strategies.

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ACRONYMS

CEDAW Convention on the Elimination of All Forms of Discrimination Against Women

CEFMU Child, early, and forced marriages and unions

CRC Convention on the Rights of the Child

CRPD Convention on the Rights of Persons with Disabilities

CRSV Conflict related sexual violence

GBV Gender-based violence

GBVIMS Gender-Based Violence Information Management System

GNB Girls Not Brides

IASC Inter-Agency Standing Committee

ICRC International Committee of the Red Cross

IFRC International Federation of the Red Cross

IHL International humanitarian law

IMC The International Medical corps

IOM International Organization for Migration

IPV Intimate partner violence

IRC The International Rescue Committee

LGBTI+ Lesbian, gay, bisexual, transgender, transsexual, intersexual and any other individuals whose sexual and/or gender identity differs from the cis-heterosexual

NGO Non-governmental organization

OHCHR Office of the United Nations High Commissioner for Human Rights

PFA Beijing Declaration and Platform for Action

SEA Sexual exploitation and abuse

SDGs Sustainable Development Goals

SRH Sexual and reproductive health

SGBV Sexual and gender-based violence

SOGIESC Sexual orientation, gender identity and expression and sex characteristics

UN United Nations

UDHR Universal Declaration of Human Rights

UNFPA United Nations Population Fund

UNHCR United Nations High Commissioner for Refugees

UNICEF United Nations International Children's Emergency Fund

VAWG Violence Against Women and Girls

WASH Water sanitation and hygiene

Figures

Tables

Appendices

Appendix 1: UN Sustainable Goal 5

Target 5.1: End all forms of discrimination against all women and girls everywhere	Indicator 5.1.1: Whether or not legal frameworks are in place to promote, enforce and monitor equality and non-discrimination on the basis of sex
Target 5.2: Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation	Indicator 5.2.1: Proportion of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner in the previous 12 months, by form of violence and by age Indicator 5.2.2: Proportion of women and girls aged 15 years and older subjected to sexual violence by persons other than an intimate partner in the previous 12 months, by age and place of occurrence
Target 5.3: Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation	Indicator 5.3.1: Proportion of women aged 20-24 years who were married or in a union before age 15 and before age 18 Indicator 5.3.2: Proportion of girls and women aged 15-49 years who have undergone female genital mutilation/cutting, by age
Target 5.4: Recognize and value unpaid care and domestic work through the provision of public services, infrastructure and social protection policies and the promotion of shared responsibility within the household and the family as nationally appropriate	Indicator 5.4.1: Proportion of time spent on unpaid domestic and care work, by sex, age and location
Target 5.5: Ensure women's full and effective participation and equal opportunities for leadership at all levels of decision-making in political, economic and public life	Indicator 5.5.1: Proportion of seats held by women in (a) national parliaments and (b) local governments Indicator 5.5.2: Proportion of women in managerial positions

Target 5.6: Ensure universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences	Indicator 5.6.1: Proportion of women aged 15-49 years who make their own informed decisions regarding sexual relations, contraceptive use and reproductive health care Indicator 5.6.2: Number of countries with laws and regulations that guarantee full and equal access to women and men aged 15 years and older to sexual and reproductive health care, information and education
Target 5.a: Undertake reforms to give women equal rights to economic resources, as well as access to ownership and control over land and other forms of property, financial services, inheritance and natural resources, in accordance with national laws	Indicator 5.a.1: (a) Proportion of total agricultural population with ownership or secure rights over agricultural land, by sex; and (b) share of women among owners or rights-bearers of agricultural land, by type of tenure Indicator 5.a.2: Proportion of countries where the legal framework (including customary law) guarantees women's equal rights to land ownership and/or control
Target 5.b: Enhance the use of enabling technology, in particular information and communications technology, to promote the empowerment of women	Indicator 5.b.1: Proportion of individuals who own a mobile telephone, by sex
Target 5.c: Adopt and strengthen sound policies and enforceable legislation for the promotion of gender equality and the empowerment of all women and girls at all levels	Indicator 5.c.1: Proportion of countries with systems to track and make public allocations for gender equality and women's empowerment

Appendix 2: Research table of studies included in the literature review

Reference	Country	Purpose and aim of the study	Design and study sample	Data and methods	Results	Quality assessment
Esho et al. 2022 The perceived effects of COVID-19 pandemic on female genital mutilation/cutting and child or forced marriages in Kenya, Uganda, Ethiopia and Senegal	Kenya, Uganda, Ethiopia, Senegal	To explore the perceived effects of COVID-19 pandemic on female genital mutilation/cutting and child or forced marriages in Kenya, Uganda, Ethiopia and Senegal	Observational study. A cross-sectional study design with a mixed methods approach. Data collection on participants' perceptions on the effects of COVID-19 on FGM/C and CFM (October-December 2020)	Household surveys targeting women and men aged 15–49 years in Kenya (n=312), Uganda (n=278), Ethiopia (n=251), and Senegal (n=208) Thirty-eight key informant interviews with programme implementers and policy makers were carried out in Kenya (n=17), Uganda (n=9), Ethiopia (n=8), and Senegal (n=4).	In Kenya, the COVID-19 pandemic has contributed to the increase in both FGM/C and CFM cases. Minimal increase of FGM/C cases was reported in Uganda and a significant increase in CFM cases. In Ethiopia, the COVID-19 pandemic had a limited perceived effect on changes in FGM/C and CFM. In Senegal, there were minimal perceived effects of COVID-19 on the number of FGM/C and CFM cases. The pandemic negatively affected implementation of interventions by the justice and legal system, the health system, and civil societies. The importance of schools and educational programmes that serve as safe havens protecting girls against harmful traditional practices such as	95%

					FGM/C and CFM	
Asi et al.2022 Assessing gender responsiveness of COVID-19 response plans for populations in conflict-affected humanitarian emergencies.	13 states globally	Analysis of the extent to which gender consideratio ns have been integrated into pandemic plans.	Observational study. Analysis of (n=30) COVID-19 preparedness and/or response plans. (n=17) plans were published by the UN and/or other international organizations (n=13) published by national governments of the target countries	A multi-step selection process: 1) identifying and analyzing 30 plans from states affected by conflict & those hosting forcibly displaced refugees. 2) Using an adapted version of the WHO Gender Responsive Assessment Scale (WHO-GRAS)	Some countries do not have a unified pandemic response plan, or at least one that is publicly available Gaps in how gender issues are considered in pandemic response plans. In total, 20% (n=6) of all plans were classified as gender-blind, 57% (n=17) were gender-sensitive and 23% (n=7) were gender specific. The failure to recognize the intersectional overlapping categories in programming and (Covid-19) plans. These are listed as separate groups.	90%
Elnakib et al. 2021 Child marriage among Somali refugees in Ethiopia: a cross sectional survey of adolescent girls and adult women.	Ethiopia	To quantify the proportion of girls married under age 18 among Somali refugees in the Kobe camp.	A cross sectional survey, using multi-stage cluster-based sampling with probability proportional to size. A household survey conducted among (n=603) adult Somali refugee women residing in Kobe refugee camp	Randomly sampled households that have at least one female aged 15–49 and at least one adolescent female aged 10–19. Kaplan Meier graphs and Cox proportional hazard models used to identify risk factors associated with child marriage in this context.	Several variables were found to be significantly associated with hazard of child marriage including schooling, sex and employment status of head of household, as well as number of girls under age 18 in the childhood home. Adult women tended to incorrectly identify minimum legal age at marriage and preferred low marital age for boys and girls, particularly in households of child brides.	90%

		To investigate drivers and consequences of the practice for adolescent girls in this setting.	A household roster was created with information on (n=3319) household members, of whom (n=522) were adolescent girls aged 15–19. Of those, 14% were currently married (95% Confidence Interval [CI] 0.11–0.18), and 11% were ever married under age 18 (95% CI 8–15%).	Descriptive statistics used to describe marital age preferences among female adults and present measures of important sexual and reproductive health indicators among married adolescent girls	Among married adolescent girls, contraceptive use was very low (11%; 95% CI 4.94–22.40), and early childbearing was common (60%; 95% CI 45.56–72.89).	
Mazurana et al. 2019.

Child marriage in armed conflict | USA | To document and analyze what is known regarding girls, and boys, and child marriage during or as a result of armed conflict. | Mixed methods study including comprehensive review of academic and grey literature and in-depth interviews A total of (n=57) manuscripts discussing child marriage in situations of armed conflict.

A total of (n=17) in depth expert interviews | Interviews with experts from United Nations (UN) agencies, international agencies, international think tanks, independent university researchers, working on areas directly or closely related to child marriage in conflict | Eradicating and addressing child marriage in situations of armed conflict requires that stakeholders increase their attention, knowledge, appropriate and evidence-based protection measures, and resources in a coordinated fashion. This cannot be done effectively without evidence to inform practice.

Also requires the full and meaningful participation of the women and girls who are affected, from the early stages through the monitoring and evaluating of efforts. | 85% |

Melnikas. et al. 2020. Child marriage practices among the Rohingya in Bangladesh.	Banglades h	How displacemen t influenced marriage timing and practices among Rohingya in Bangladesh. How the presence of the Rohingya may influence marriage practices in the host community	Mixed methods study using in-depth interviews and focus group discussions In-depth interviews (n=48), focus group discussions (n=12) with Rohingya male and female adolescents and young adults (14-24 years), and program managers and service providers (n = 24) in Cox's Bazar	Mixed methods study using in-depth interviews and focus group discussions to understand the experience of living or working in the camps, preferences for timing of marriage, and marriage practices in Myanmar and in the camps. Interviews of Bangladeshis in the host community.	Child marriage is a strong cultural phenomenon among the Rohingya, primarily rooted in socio-cultural and religious beliefs around readiness for marriage. Although child marriage was practiced by the Rohingya in Myanmar, specific state law and oppression by military forces prevented many from marrying before age 18. Now this preference is more easily practiced in the camps in Bangladesh where the displaced Rohingya experience less marriage regulation. Host community participants perceive the presence of the Rohingya as encouraging both polygamy and child marriage in their communities, leading to tension among the host community.	95%
Guglielmi et al 2021. 'I Just Keep Quiet': Addressing the Challenges of Married Rohingya Girls and Creating Opportunities for Change	Banglades h	To understand adolescent, parental, and community perspectives on child marriage, the role of social norms on child marriage in displacemen	Mixed-methods study. A total of (n=92) married Rohingya adolescent females aged 11-18 and (n=169) unmarried adolescent females aged 15-18 in camps. Interactive qualitative interviews (IDIs) from (n=10) married Rohingya girls and (n=17)	Mixed-methods research in refugee camps in Ukhia and Teknaf Upazilas. Quantitative surveys and qualitative interviews (IDIs) with married and unmarried girls and their parents. Focus group discussions (FGDs) with parents of married and unmarried girls,	Married adolescent girls face increased gender-based violence (GBV) risks, including intimate partner violence (IPV), and greater mental distress. While norms are shifting for older Rohingya women, married girls are excluded from social participation or personal growth beyond the household	95%

			unmarried Rohingya girls (aged 15–19) IDIs with (n=12) parents of married and unmarried Rohingya adolescents. 12 focus group discussions (FGDs) with girls (n=61) and boys (n=40) engaged separately, and six FGDs with female (n=51) and male (n=48) parents and community members	boys, and community members		
t, and to evaluate diverse capability domains in the lives of displaced married girls						
Rockowitz et al. 2021 Patterns of sexual violence against adults and children during the COVID-19 pandemic in Kenya: a prospective cross-sectional study.	Kenya	To examine patterns of sexual violence against adults and children in Kenya during the COVID-19 pandemic to inform sexual violence prevention, protection, and response efforts	A quantitative prospective cross-sectional research design Final sample consisted of (n=224) survivors in the child group and (n=317) in the adult group. .	A quantitative prospective cross-sectional research design Data collected from March to August 2020	The participants in the final sample for the child group ranged in age from 8 months to 17 years (M=12.6, SD=3.9). 83% were girls and 93% were perpetrated against by men. For the adult group, participants ranged in age from 18 to 72 (M=27.1, SD=8.1) years, 92% were women and 96% were perpetrated against by men	79%

Najjarnejad &., Bromfield 2022. Professional stakeholders' perceptions of child marriage in Lebanon among Syrian refugees	Lebanon	To explore Lebanese professional stakeholders' perceptions of child marriage in Lebanon and identify potential gaps in services and interventions currently used to combat child marriage	Mixed methods study. (n=28) professional stakeholders' interviews, document analysis, and reflexive journaling	An interpretive description (ID) approach guided data collection and analysis, combining semi-structured interviews with purposively selected professional stakeholders document analysis, and reflexive journaling. Field notes were also used	Four significant themes related to the perceptions of causal pathways to child marriage in Lebanon were identified: 1) the financial burden of girls; 2) concerns around girls' safety, security, and protecting their honor (including protecting them from potential rape); 3) Syrian religious traditions, customs, and practices; and 4) the lack of awareness of the dangers and consequences of child marriage. Findings indicate that the interventions currently being used or proposed are not aligned with the professional stakeholders' perceptions of the causal pathways to child marriage	90%
El Ayoubi et al. 2021 Sexual and Reproductive Health Information and Experiences Among Syrian Refugee Adolescent Girls in Lebanon	Lebanon	The aim (a) to understand what information Syrian refugee adolescent girls in Lebanon receive about puberty and SRH. (b) to discern how this information	Qualitative descriptive study, semi-structured IDIs and FGDs (n=11) in-depth interviews with early-married adolescents, and (n=2) FGDs with mothers. (n=3) FGDs with unmarried adolescents (five to seven participants per FGD) 11- to 14-year-old girls (four to eight	Qualitative descriptive study, semi-structured IDIs and FGDs (a) 14- to 17-year-old unmarried Syrian adolescent girls; (b) 15- to 20-year-old married Syrian adolescents who married before age 18; and (c) mothers of 11- to 14-year-old Syrian adolescent girls.	Adolescent participants received inadequate SRH information shortly before or at the time of menarche and sexual initiation, resulting in experiences characterized by anxiety and fear. Study also revealed discordance between girls' views of mothers as a preferred source of information and mothers' reluctance to communicate with their daughters about SRH	90%

		shapes their experiences as they transition to adulthood; and (c) to identify the sources of the information received.	participants per FGD).			
Singh et al. 2022 Armed conflicts and girl child marriages	India	Provide global level empirical evidence of the association between 'conflict events and girl child marriage rates'	Quantitative study. A stacked time-series panel data was constructed for 217 countries and 6 time periods (217*6), resulting in a total of (n=1302) cases.	Macro-level econometric analysis of multi-country panel data from Uppsala Conflict Data Program, Demographic Health Surveys, Multiple Indicator Cluster Surveys and World Development Indicators for 217 countries for the period, 1989 to 2018	A consistent significant positive relationship between conflict events and girl child marriage rates. Results showed an increase of 0.03 to 0.08 percent points in girl child marriage rates for each battle-related death per thousand	87%
Makino et al. 2021 Heterogeneous Impacts of Interventions Aiming to Delay Girls' Marriage and Pregnancy Across Girls' Backgrounds and Social Contexts	Banglades h Zambia	To focus on different social contexts within Bangladesh and Zambia and investigate how literacy, poverty, and	Observational study, case-study. Data sets from two randomized controlled trials data (n=2) case studies utilizing data collected by Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents (BALIKA)	Data sets from two randomized controlled trials data, each set has at least two rounds of household surveys conducted by the Population Council in Bangladesh and Zambia. Within each respective country, to estimate the impacts of the interventions on marriage and pregnancy among adolescent girls using	In Bangladesh, providing academic skill training had a significant impact on discouraging child marriage in the villages where girls' paid-work participation rate was relatively high, whereas in low paid-work participation villages, providing gender-awareness skill training had an impact. In Zambia, providing empowerment intervention and safe spaces had a significant impact on delaying pregnancy especially for illiterate girls in the communities where premarital sex was relatively common.	79%

		community characteristics impact the effectiveness of interventions.	in Bangladesh and the Adolescent Girls Empowerment Program (AGEP) n Zambia. Investigating the combination of girl-, household-, and community-level characteristics to assess interventions that are most likely to be effective at delaying marriage and pregnancy	the analysis of covariance estimator by different social contexts based on community-level variables	Interventions are more effective for the most vulnerable girls, i.e., illiterate girls in social contexts where acceptable jobs for girls are unavailable or where premarital sex and sexual violence are more prevalent.	
Petroni et al. 2017. New Findings on Child Marriage in Sub-Saharan Africa	Kenya Senegal Uganda Zambia	To provide evidence and information about the causes and consequences of the child marriage in specific and diverse contexts and settings	Mixed methods study. Findings from (n=3) distinct research projects undertaken by ICRW researchers between 2013 and 2016 in 4 countries for which the evidence base regarding the drivers of child marriage is currently somewhat limited	Mixed methods study. In Kenya and Zambia; qualitative research, including (n=16) focus group discussions, (n=55) in-depth interviews, and (n=17) key informant interviews in rural and peri-urban sites. In Uganda; mixed-methods research to generate a better understanding of the role of adolescent pregnancy in persistent gender gaps in school attainment and dropout. In Senegal; in-depth qualitative study,	In all 4 countries inequitable gender norms and economic insecurity contribute to a cycle of unintended pregnancy, school dropout, and child marriage, particularly for girls living in poverty. The example of Senegal, which has experienced steep increases in the age of marriage over the past 2 decades, demonstrates that educating girls, providing women with economic opportunities, and providing access to sexual and reproductive health information and services can provide a path forward toward the goal of ending child marriage in a generation.	82%

				engaging with (n=79) participants, including young women, parents of either married or unmarried daughters, and men in urban Dakar and in Niakhar, a rural area in the Fatick region		

Appendix 3: Quality assessment with diverse studies (QuADS)

References	1	2	3	4	5	6	7	8	9	10	11	12	13	Score	Score %
Esho et al. 2022	3	3	3	3	3	3	3	3	3	3	3	2	2	37/39	95%
Asi et al. 2022	3	3	3	3	3	2	2	3	2	2	3	3	3	35/39	90%
Elnakib et al. 2021	3	3	3	3	2	3	2	3	3	3	2	3	2	35/39	90%
Mazurana et al. 2019	3	3	3	2	2	2	3	3	2	3	2	2	3	33/39	85%
Melnikas et al. 2020	3	3	3	3	3	3	2	3	3	2	2	2	3	37/39	95%
Guglielmi et al. 2021	3	3	3	3	3	3	2	3	3	3	2	3	3	37/39	95%
Rockowitz et al. 2021	3	3	3	2	2	2	2	3	3	2	2	2	2	31/39	79%
Najjarnejad &. Bromfield 2022.	3	3	3	2	2	3	3	3	3	2	2	3	3	35/39	90%
El Ayoubi et al. 2021	3	3	3	3	3	3	2	3	2	2	2	3	3	35/39	90%
Singh et al. 2022	3	3	2	2	3	3	3	3	2	3	2	2	3	34/39	87%
Makino et al. 2021	3	3	3	3	2	3	2	3	3	2	2	2	3	31/39	79%
Petroni et al. 2017	3	3	3	2	3	2	2	3	3	2	2	2	2	32/39	82%

1. Theoretical or conceptual background to the research

2. Statement of research aim/s

3. Clear description of research setting and target population

4. The study design is appropriate to address the stated research aim/s

5. Appropriate sampling to address the research aim/s

6. Rationale for choice of data collection tool/s

7. The format and content of data collection tool is appropriate to address the stated research aim/s

8. Description of data collection procedure

9. Recruitment data provided

10. Justification for analytic method selected

11. The method of analysis was appropriate to answer the research aim/s

12. Evidence that the research stakeholders have been considered in research design or conduct

13. Strengths and limitations critically discussed

0 No mention at all / Criteria topic not addressed

1 General/limited reference or description of criteria topic is presented

2 Criteria topic is addressed but is lacking details, refinement or explicit discussion or more suitable alternative could have been used

3 Explicit and detailed description or discussion on criteria topic is presented and detailed justification for choice of analytic method and study design is provided

Appendix 4: Description of the data analysis processes

a) Facilitators for CEFMU in crises and conflict

Facilitators	Poverty	Insecurity/fear of SGBV	Lack of agency/opportunities	Loss of community/social networks
Individual level	The double threat for CEFMU: poor and female (Najjarnejad & Bromfield 2022, 3) Increased water and food insecurity combined with displacement and climate change (temperature, floods, erosion) lead to increased risk of CEFMU (Melnikas et al. 2020) COVID-19 as exuberated CEFMU due to economic vulnerability. Households are engaging in any form of income generating activity (Esho et al. 2022, 11-12) Daughters are seen as generators of wealth (i.e., Afghanistan: groom pays father of bride in exchange for marrying her) (Najjarnejad & Bromfield 2022, 3) Mena region: Mahr (reward/gift) is used and the husband pays the brides family money or other valuable possessions. Girls are perceived a commodity. (El Ayoubi et al. 2021, 985-986)	Fear of sexual violence the most significant motive to flee the country and engage CEFMU. (Najjarnejad & Bromfield 2022, 4) Eldest daughter has to get married as soon as menstruation starts, so younger daughters can be married in the same way earlier to save reputation of family and prevent" sins", control of adolescent's sexuality (Melnikas et al. 2020) Post conflict marriage to older men/men working for military to save girl from being kidnapped/trafficked (Singh et al. 2022, 4-6)	Girls who are not enrolled in school have no viable alternatives. Limited opportunities for employment in refugee camp setting (Elknaib et al. 2021, 8-9) Limited opportunities for school or employment in camps (Rohingya), camps encourage CEFMU as food rations are distributed by households and marriage entails the creation of new households (Melnikas et al. 2020, 10) Long distances to school, foreign language, (Singh et al. 2022, 4) Few opportunities for refugee girls to develop capabilities, Only 3% girls engaged in any education and 5% have engaged in paid work in past 12 months (Guglielmi et al. 2021, 1241) Adolescent girls in conflict/displacement do not have access to school based SHR programmes, also cultural norms dictate that it is inappropriate to give SHR	Disruption of family and friend networks to access information on puberty, menstruation leading to increased risk of early sexual experiences, early marriage and pregnancy (El Ayoubi et al. 2021, 990) CEFMU with large spousal age leading to large power differences and vulnerability to abuse and IPV/domestic violence (Elnakib et al. 2021, 10-11) The lack of understanding of the relationship between sex and pregnancy, misconceptions about menstruation, sex, pregnancy, contraception leading to fear and negative experiences (El Ayoubi et al. 2021, 990-992) Lack of safe places for access to information about the risks, rights and needs of women and girls. (Rockowitz et al. 2021, 2-3)

			information to unmarried girls. (El Ayobi et al. 2021, 983) Lack of understanding of the relationship between sex and pregnancy (El Auoubi et al. 2021, 990) Adolescent girls expectations of marriage, that life would be better. In reality gendered responsibilities, poverty, early pregnancy (El Ayoubi et al. 2021, 994-995)	
Household	CEFMU as coping mechanism for families (Najjarnejad & Bromfield 2022, 3-4) Climate crisis (drought, tsunami, floods, earthquakes) result in increased economic hardship for families and may increase cefmu as a negative coping strategy (Mazurana et al. 2019) Refugee camps encourage CEFMU as food rations are distributed by households and marriage entails the creation of new households (Melnikas et al. 2020, 10) Mena region: Mahr (reward/gift) is used and the husband pays the brides family money or other valuable possessions. Girls are perceived a commodity. (El Ayoubi et al. 2021, 985-986)	CEFMU as perceived protective strategy to ensure sexual security, family honour and fertility (Melnikas et al. 2020) Cultural/social beliefs in Africa and South Asia in chastity: premarital sex is a disgrace and stain to family's honour (Najjarnejad & Bromfield 2022, 5)	Parents lack of sufficient knowledge about sexual and reproductive health (El Ayoubi et al. 2021, 985) Cultural/social beliefs in Africa and South Asia in chastity: premarital sex is a disgrace and stain to family's honour (Najjarnejad & Bromfield 2022, 5) Gendered societal, economic, security, religious, psychological factors of families during and as a result of crisis/conflict (Mazurana et al. 2019)	Lack of mother daughter communication. Mother focus on religious rituals and social aspects of puberty and marriage, not physiological or psychological (El Ayoubi et al. 2021, 994) Parents lack of sufficient knowledge about SHR, embarrassment and social/cultural norms of silence (El Ayoubi et al. 2021, 985) Adult women more likely to identify boys as decision-makers in marriage compared to girls (Elnakib et al. 2021, 10) Non-parent guardians believe marriage could provide protection and a support system for children. (Najjarnejad & Bromfield 2022, 5)
Community	Displaced people and refugees are chronically poor affected by crises and or conflict (Najjarnejad & Bromfield 2022, 5)	Traditional cultural customs, control by religious leaders in rural areas (Najjarnejad & Bromfield 2022, 5)	Gendered societal, economic, security, religious, psychological factors of communities during and as a result of crisis/conflict (Mazurana et al. 2019)	Conservative cultural, religious norms and attitudes in camps to CEFMU, purdah that bans girls from going outside their homes unaccompanied when

				reaching puberty (Guglielmi et al. 2021, 1241)
	Costs of CEFMU lower in camps for Rohingya, because in Myanmar many authorities had to be paid (Myanmar regulation of marriage included bribes, fines, and fees) (Melnikas et al. 2020, 8-11) Most girls (11-14 yrs) married in the camps (not Myanmar) due to lower costs (Guglielmi et al. 2021, 1241)	Cultural/social beliefs in Africa, South Asia-> chastity, premarital sex is a disgrace and stain to family's honour (Najjarnejad & Bromfield 2022, 5) Conservative norms and attitudes in camps to CEFMU, main driver safety concerns (Guglielmi et al. 2021, 1241)	Rohingya: culture, religion, poverty, political vulnerability, and group norms (Melnikas et al. 2020) Conservative cultural, religious norms and attitudes in camps to CEFMU, purdah that bans girls from going outside their homes unaccompanied when reaching puberty (Guglielmi et al. 2021, 1241) Destroyed educational spaces and infrastructure, foreign language, long distances (Singh et al. 2022, 3-4)	
Government	Resources focused on covid and, reduction of funding for CEFMU interventions (Esho et al. 2022, 5-9) Refugee camps policies encourage CEFMU as food rations are distributed by households and marriage entails the creation of new households (Melnikas et al. 2020, 10) Gender discrimination, inadequate implementation of laws and camp policies so that refugees entirely dependent on humanitarian aid for survival (Guglielmi et al. 2021, 1241)	Lack of monitoring mechanisms & reduced efforts in programmes supporting victims of CEFMU closure of schools & rescue centers for victims (=safe spaces) (Esho et al. 2022, 5-7) In context of refugee camps or displacement: high crime rates, safety concerns high, low police supervision (Mazurana et al. 2019) Lack of safe places offer the possibility to participate in activities for empowerment and gaining access to information about the risks, rights and needs of women and girls. In many crises, safe places are the only way women and girls have access to relevant and possibly lifesaving information. (Rockowitz et al. 2021, 2-3)	Inequitable gender norms and economic insecurity contribute to a cycle of unintended pregnancy, school dropout, and child marriage, particularly for girls living in poverty (Petroni et al. 2017) The failure to recognize the intersectional overlapping categories in programming and (covid) plans. They are listed as separate groups i.e. disability, gender, ethnic group and do not recognize that individuals are often included in 2 or more of the categories with potential synergistic and exacerbated impacts) (Asi et al. 2022) National preparedness plans/response that devoid gender considerations may cause failure to safeguard the rights and health of girls and women, and erosion of long-term gender transformation efforts (such as the Women, peace and security agenda) (Asi et al. 2022, 13-15)	

			Laws limit the ability of Rohingya to officially register marriages and limit marriages between Rohingya and Bangladeshis (Melnikas et al. 2020)	

b) Barriers for CEFMU in crises and conflict

Barriers	Education	Economic/Employment opportunities	Increase in leadership role/agency	Multilayered, intersectional programming and plans
Individual	Provide access to education (SRH included) to empowerment of girls (Esho et al. 2022, 11-12) Educating refugees about dangers of CEFMU for culture change (Najjarnejad & Bromfield 2022, 5-6) Access to school-based SHR programmes (El Ayoubi et al. 2021, 983) In Ethiopia refugees have lived for many years and vulnerability is less heightened. The increased access to schooling + better sensitization of families to dangers of CEFMU-is leading shift in marriage practices (Elnakib et al. 2021, 8-9)	Financial and economic empowerment of women and girls with cash transfers (Najjarnejad & Bromfield 2022, 7-8)	Strengthen leadership role and agency of women and girls, expanding informed CHOICE. (Esho et. al. 2022, 11-12) SHR information from friends, media, internet (El Ayoubi et al. 2021, 985)	Financial and economic empowerment of women and girls with cash transfer programming (Najjarnejad & Bromfield 2022, 7-8) Programmes offering intensive social and health services in refugee camps (in Ethiopia) (Elnakib et al. 2021, 8-9) Improve quality of SRH programmes with adolescent girls in refugee settings and improve mothers basic knowledge of SRH and communication skills (El Ayoubi et al. 2021, 996) Ensure access by girls to both primary and secondary school to improve their health, economic, and relationship outcomes. Truly free secondary education, which may require cash transfers and support for transportation and essential school supplies, to overcome financial barriers to education. (Petroni et al. 2017, 788) Providing sanitary napkins, underwear, and clean and safe sanitary facilities can also help overcome barriers to girls' education after puberty. (Petroni et al. 2017, 788)

Household	To provide outreach education to adolescent girls (unmarried and married), programmes on gender norms for families, community leaders, skills-building to improve agency of girls (Guglielmi et al. 2021, 1246)	Target families that are most vulnerable and likely to resort to harmful practices with cash transfers, food voucher, safe and accessible online and mobile platforms (Esho et al. 2022, 11-12)	In Ethiopia refugees have lived for many years and vulnerability is less heightened. The increased access to schooling + better sensitization of families to dangers of CEFMU-is leading shift in marriage practices (Elnakib et al. 2021, 8-9)	Financial and economic empowerment of women and girls with cash transfer programming (Najjarnejad & Bromfield 2022, 7-8)
	Educating refugees about dangers of CEFMU for culture change (Najjarnejad & Bromfield 2022, 5-6)	The effects of climate change in reducing CEFMU rates due to ability to provide (funds) for a wedding (Elnakib et al. 2021, 11) Financial and economic empowerment of women and girls with cash transfer programming (Najjarnejad & Bromfield 2022, 7-8)	The need to sensitize parents on the importance of marital choice for girls and empower girls to assert their preferences (Elnakib et al. 2021, 10)	
Community	Involve local influencers /community/religious leaders and community health care workers-to reinforce behavior change communication messaging (Esho et al. 2022, 11-12) To provide outreach education to adolescent girls (unmarried and married), programmes on gender norms for families, community leaders, skills-building to improve agency of girls (Guglielmi et al. 2021, 1246) Social workers and religious leaders to provide access to knowledge and social behavior change based on	Target communities who are likely to resort to harmful practices with cash transfers, food voucher, safe and accessible online and mobile platforms (Esho et al. 2022, 11-12) In Syrian refugees inability for consanguinity in marriage arrangements and expenses and also living for a longer time in refugee setting (time and stability) may decline rates of CEFMU (Najjarnejad & Bromfield 2022, 7-8) Rohingya: culture, religion, poverty, political vulnerability,	Involve local influencers /community/religious leaders and community health care workers-to reinforce behavior change communication messaging (Esho et al. 2022, 11-12) Partnering with local women's groups and feminist activists who have knowledge of context and important role in communities. Include conflict affected/refugee/IDP communities with decision-making and response strategies (Asi et al. 2022, 12-15) To target community and religious leaders (Majhi camp coordinators) to sensitize towards girls' protection, wellbeing and	Include conflict affected/refugee/IDP communities with decision-making and response strategies (Asi et al. 2022, 12-15) Multilayered interventions targeting girls and boys, families, peers, community leaders, health system to improve contraceptive uptake and better pregnancy care. (Elnakib et al. 2021, 10-11)

	scientific facts (Najjarnejad & Bromfield 2022, 5-6), Teachers are equipped with the skills and materials to facilitate SRH learning (El Ayoubi et al. 2021, 984)	and group norms influencing CEFMU (Melnikas et al. 2020) Cost of marriage is less in the camps than Myanmar, most girls married in camp not Myanmar (ages 11-15) (Guglielmi et al. 2021, 1241)	development and social norm interventions (messaging on the harmful effects and illegality of CEFMU (Guglielmi et al. 2021, 1246)	
Government	To provide outreach education to adolescent girls (unmarried and married), programmes on gender norms for families, community leaders, skills-building to improve agency of girls (Guglielmi et al. 2021, 1246) Refugee camp policies and programs that promote access to education and support girls to stay in school could lead to meaningful declines in CEFMu in refugee camps settings (Elnakib et al. 2021, 10) Enforcement of child protection treaties/laws-in curbing the religious leader's control over marriage. and educating refugees about dangers of cefmu->culture change (Najjarnejad & Bromfield 2022, 5-6) Improve safety of girls in rural and refugee-populated areas (en-route to schools, especially evenings) (Najjarnejad & Bromfield 2022, 7)	Target communities who are likely to resort to harmful practices with cash transfers, food voucher, safe and accessible online and mobile platforms (Esho et al. 2022, 11-12)		Advocate for a minimum age of marriage law and criminalization of in all states (Asi et al. 2022, 13-15) Intersectionality in planning. Uganda covid plan includes" age, gender, and diversity and understanding the impact of intersecting personal characteristics on peoples experiences are necessary for effective response" (Asi et al. 2022) Target programming to negative consequences of married girls and multilayered interventions targeting girls and boys, families, peers, community leaders, health system to improve contraceptive uptake and better pregnancy care. (Elnakib et al. 2021, 10-11) To provide outreach education to adolescent girls (unmarried and married), programmes on gender norms for families, community leaders, skills-building to improve agency of girls (Guglielmi et al. 2021, 1246) Enforcement of child protection treaties/laws-in curbing the religious

			leaders' control over marriage. Najjarnejad & Bromfield 2022, 7)
	Full inclusion of refugee children in formal schooling, learn also about SRH (El Ayoubi et al. 2021, 996)			