Humsathi: Empowering Girls to Become Their Own Advocates and Boys as Allies to End Early Child and Forced Marriage

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FINAL TECHNICAL REPORT

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List of Acronyms

AFS Adolescent Friendly Space

BHU Basic Health Units

CEAM Child and Early Age Marriage

CEFM Child, Early Age and Forced Marriage

CNIC Computerized National Identity Card

FGD Focus Group Discussion

IDI In-depth Interview

KAP Knowledge, Attitude and Practices

KP Khyber Pakhtunkhwa

LHV Lady Health Visitor

LHW Lady Health Worker

MFLO Muslim Family Laws Ordinance

NCSW National Commission on the Status of Women

SDG Sustainable Development Goal

SMS Sakhi Mein Sukki

WFS Women Friendly Space

EXECUTIVE SUMMARY

The project, *Humsathi: Empowering Girls to become their Own Advocates and Boys as Allies to End Early Child and Forced Marriage* set out to test the viability of a transformative model to reduce child, early age and forced marriages (CEFM) in one location of each of Pakistan's four provinces. Seeking to catalyse a sustainable community-owned rejection of child/early age marriages, the intervention study aimed to deepen understanding of what and who drives child marriages in order to address these and make girls their own advocates with allies for change. The nomenclature 'forced' was dropped, given difficulties in ascertaining whether marriages are forced given that parents/family eldersarrange all marriages. Focusingon child and early age marriages (CEAM)the project objectives were to (1) strengthen girls as their own advocates, (2) effectuate sustainable community-owned changes, and (3) promote a socio-cultural conducive environmentinter alia by providing adolescent girls and allies with opportunities to engage decision-makers. Due to end in October 2018, the project was extended for a year to ensure that the endline research covered all the sites and to allow sufficient time for data processing and analysis to feed into the final province-wise policy dialogues held in October 2019.

The interventions used to catalyse girls' agency were:

- 1. Providing girls Adolescent Friendly Spaces (AFS) to gather, gain new knowledge and skills, practice leadership and communication skills, while giving and receiving peer support;
- 2. Forming core groups of 15-member female youth cohorts in each district, facilitated by the AFS, as the core of project interventions;
- 3. Creating and harnessing energies of similar-aged male youth allies (also in 15-member cohorts) and amongst mothers, purposefully involving multiple persons from the same families, including fathers, in interventions.

A diagrammatic representation of the project's model of change is given at the end of the Executive Summary.

The model tested by the *Humsathi* project proved to be viable. By project end, the vast majority of project-enjoined girls (79.31 percent) had taken actions to stop CEAM, well over a quarter of the girls advocating a delay in their own marriages. In tandem, 85 percent of project-engaged mothers and 69 percent of the male youth acted to prevent specific instances of CEAM too. The **91 percent success rate** of such actions attests to community-owned changes. All participants advocated an end to CEAM by reaching out first to immediate friends and family, and then to wider groups of community people.

Girls exercised their new-found agency in domains other than CEAM, successfully expanding their mobility, educational opportunities, and access to health care, for example. Resetting community norms, they initiated peer learning circles in schools and participated in theatre performances, community and policy dialogues, as well as door-to-door drives for birth registration.

Key Research Insights

DRIVERS, MAINTAINERS, ENABLERS AND TRIGGERS OF CEAM

The project **unearthed a complex intermeshing of drivers** of CEAM, i.e. factors or conditions that directly perpetuate the practice. These we distinguished from **maintainers**: factors and actors that help keep the practice in place, as well as **enablers**, meaning factors and actors that may not proactively promote CEAM but allow such practices to continue; and **triggers**: the developments or conditions that precipitate CEAM.

A key finding is that the strongest driver of CEAM is not monetary poverty, so frequently cited in the literature and forwarded by parents. Instances in which CEAM had a direct causal link to poverty were exceptions. CEAM occurs in wealthy households as well as worse-off onesand, in at least one community, marrying girls off early was a symbol of affluence, showcasing the family could dispense with saving up for the marriage expenses. What emerged was what Amartya Sen calls the 'poverty of choice', in this context, a weaker ability of the poor to resist CEAM as they are more vulnerable to the imperatives of maintaining form or face in profoundly patriarchal societies through adherence to socio-cultural norms deeply embedded in the family and community – the real force behind CEAM. Parents are often under pressure from family and/or community members to marry daughters early because to keep a daughter at home post-menarche, when she is perceived to have attained maturity, is considered 'dishonourable'.

A new insight of the Humsathi study ignored in literature on CEAM/CEFM is howfamily elders use marriages toforge, cement or expand social capital within kinship or community. Since girls' contribution to the family welfare is discounted and they are prohibited from earning cash incomes, their value for family patriarchs, and reason for stringent control over their behaviour and sexuality, is the transactional value of arranging a marriage. This leads to a wide array of harmful cultural practices that help to driveCEAM.

Some elements elide from **maintainers to enablers** or the reverse, but it is useful to distinguish these as far as possible for conceptual clarity and in terms of future strategies. Thelaw for example, is both a maintainer and enabler: inadequate laws help maintain CEAM and poor implementation enables infractions. The principle **trigger of CEAM is puberty**.

CATALYSTS FOR CHANGE

Where research revealed the law to be of secondary importance in promoting CEAM, **knowledge of the law is nonetheless a crucialenabler of change**, along with knowledge of the negative health and associatedeconomic impacts of CEAM.

An unexpected finding is how pivotal reproductive health knowledge is for unlocking girls' agency, well beyond menstrual hygiene management.

The study **confirmed** that as the least empowered family and community members, **girls require strong reliable allies**. Including **mothers** in activities instilled empathy for daughters/young girls and resolve to prevent their suffering the consequences of CEAM. Crucially, project interventions broke down the wall of silence that stops girls from approaching their mothers on reproductive health as well as other matters, including their own marriages. The presence of **male youth allies**, often the girls' brothers or male cousins, joined forces with the girls and mothers to produce a **multiplicity of voices articulating the same anti-CEAM messageswith good effect** in the communities.

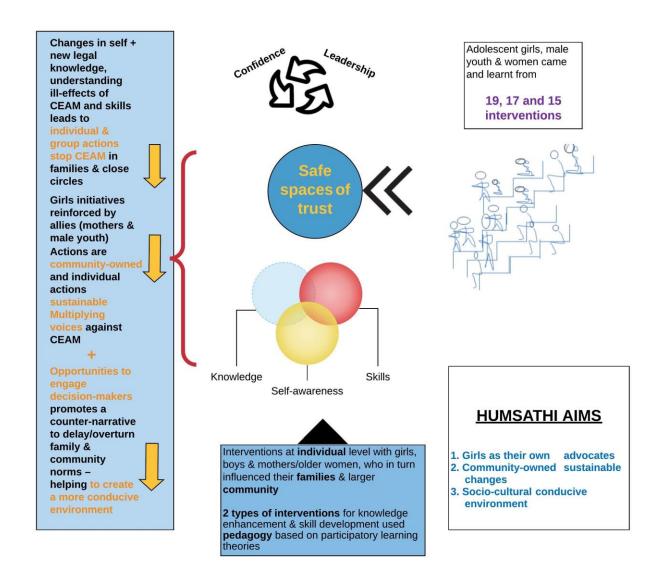
Finding a collective voice, essential for action and change, was made possible through the peer support of female and male youth cohorts as well as the mothers' groups. Ultimately, the linchpin of the model's success was the combination of the AFS for girls, female and male youth cohorts and mothers' groups. Without this combination it is unlikely that interventions would have translated into such bold impactful actions.

Policy Influence

The extreme reluctance of communities to engage with officials on marriage matters led to a re-prioritising of the focus of youth advocacy in the project's second year to family decision-makers and community opinion-setters. Still, youth were supported to develop Charters of Demands, locally, then nationally across sites. These were shared in interactions with provincial and federal lawmakers, district-level duty-bearers and policy implementers, the national and provincial women's commissions, and civil society members. In 2018, the combined Charter was presented at a high-level national policy dialoguealongwith a policy brief developed by Shirkat Gah based on research findings with recommended actions. In the final round of provincial policy dialogues in 2019, a revised policy brief incorporating findings of the endline research was presented alongwith province-specific policy recommendations, as all critical matters are the remit of the provinces. The 2019 dialogues emphasised the importance of findings in the context of Pakistan meeting United Nations Sustainable Development Goal (SDG)target 5.3 that specifically includes ending child, early-age and forced marriages.

Furthermore, insights from the *Humsathi* initiative have been used to provide inputs on the Punjab Draft Reproductive Health Bill; beyond the project these will be used for similar bills under preparation in the other provinces.

Diagrammatic Representation of the Humsathi Project



THE RESEARCH PROBLEM

The impetus for the project was the need to address the stark reality of child, early-age and sometimes forced marriages in Pakistan. The multi-dimensional negative impact of child

marriages and girls' disempowerment and lack of voice in decision-making had emerged in previous Shirkat Gah studies. In particular a pilot study on the practice of child marriages, often under the legal age, showcased the extent to which girls lack a say in decisions about their own lives (Sarosh 2012); another brought to light the effect of restrictive gender norms on girls as young as seven (Shaheed et al. 2016), resulting in severe social and physical restrictions on girls, as well as the enforcement of gendered stereotypes and roles as also reflected in other studies (Mumtaz, Warraich and Imam 2012, Rajwani Hussain and Pachan 2016). The *Humsathi* intervention study sought to offer insights on how to prevent, build resilience for, and improve responses to CEAM across diverse socio-cultural settings in Pakistan's four provinces: Swat in Khyber Pakhtunkhwa (KP), Muzaffagarh in Punjab, Shahdadkot in Sindh and Jaffarabad in Balochistan. The term 'forced' was dropped, as it is difficult to ascertain what constitutes 'force' when family elders inevitably arrange marriages.

Starting in October 2015 and due to end in October 2018, the project was extended to October 2019 as the endline research could not cover the Balochistan site within the original time-line as people relocate over the exceedingly hot summers until mid-September. The extension allowed sufficient time for data processing and analysis to feed into the final province-wise policy dialogues held in October 2019.

The legal age for marriage in Pakistan in all but one province (Sindh) is 18 years for boys and 16 years for girls as prescribed in the 1961 Muslim Family Laws Ordinance (MFLO). In Sindh,the minimum legal age of marriage for girls was revised to 18 in 2014. Complicating matters, the MFLO was only extended to the project's Swat District site in KP province in early 2018, the project's final year. Previously, Swat was under a separate administrative dispensation¹ and had no minimum legal age of marriage for girls or boys, as was the case for the Hindu and Sikh minorities until recently. In 2012-13, the Pakistan Demographic and Health Survey indicated the median age at marriage for girls was 19.5 years², however Shirkat Gah's experience of working in poorly served and disadvantaged communities as well as its earlier study (Sarosh 2012)in some districts suggested that the age of marriage in rural areas is often below the legal age of 16 or 18. Because births, especially of girls, are often not registered, ascertaining age at the time of marriage presents a challenge, and marriage registrars rely on the frequently incorrect word of parents/family elders.

The specific objectives of the project were to:

¹ Provincially Administered Territory Act

²Pakistan Demographic and Health Survey (2017-18) places the median age at marriage for girls at 20.4 years.

³Following devolution due to the 18th Constitutional Amendment in 2010, provinces were empowered to formulate their own laws on certain issues including marriage. Thus far only Sindh has been successful in raising the legal age of marriage for girls to 18. In the Islamabad Capital Territory, the Senate passed a similar bill but this was rejected passed by the National Assembly. A bill in Balochistan has twice failed to be passed.

- 1. Strengthen girls as their own advocates with capacity for rights-seeking behaviour to resist CEFM, supported by women/other allies & safe spaces, new knowledge, skills and peer support;
- 2. Effectuate sustainable community-owned changes to advocate for policy reforms, ensure implementation of laws around CEFM, reduce harmful norms and address concepts of masculinity;
- 3. Promote a socio-cultural conducive environment: provide opportunities for adolescent girls and allies to engage decision-makers, mobilising public opinion through sensitised media and by deploying innovative and mass media campaigns.

At the end of the first year, the research problem was revisited with the Advisory Committee to construct two specific research questions and one sub-question, against which baseline findings were revisited (3rd 18-months interim report to IDRC). These were:

- 1. How can the community reduce and/or resist drivers of Child and Early Age Marriages (CEAM)?
- 2. How can the project effectively mobilise young people to successfully prevent CEAM?
 - a. What sources of power do youth have in the village clusters⁴in each district bring about transformative change for CEAM?

Additional questions identified in June 2017 with the Advisory Committee Meeting were:

- 1. What are youth's pathways to increased agency and self-expression?
- 2. What are the dominant narratives in favour of CEAM and the alternative narratives against CEAM in communities?
- 3. Are there patterns that emerge between families that are relatively better off, or are there any differences in patterns where girls are working and contributing to household income? (There were too few working women to ascertain the latter)
- 4. Who is propagating religious messages that promote CEAM and how, distinguishing community-held beliefs from religious messages?
- 5. Is there a difference between the actual age of marriage and the ideal age identified by community members, and if so why is this difference there?
- 6. Map inter-generational differences in trends in marriage; is there a difference and if so why? (Data was not sufficiently robust to make definitive statements in this regard)

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⁴ The project covered 10 village clusters in each selected district, a total of 40 clusters across 4 districts.

Evolving understanding

The project initially posited that poor knowledge about the law, or its weak implementation could be a factor driving CEAM. However, the project data made clearearly on that **rather than poor legal provisions**, the strongest drivers of CEAM are the norms inscribed in patriarchal sociocultural prescriptions enforced by family members and the wider community. These include strict gender roles that: posit that only boys/men are breadwinners who go outside the house to provide for the family while girls/women are tasked with reproductive work, child-rearing, and care-work; oblige girls and women to embody family honour; and traditions such as *watta-satta* (exchange marriages), *pait-likhi*(betrothals prior to at or soon after the birth of a child), *swara*(marriages as dispute settlements), etc.

It becameincreasingly evidentthat the project's objective of sustainable community changes would be more effectively met by tackling socio-cultural drivers of CEAM. Combined with evident reluctance of community members to approach formal state officials and institutions on any family matter, thisled to a refocusing from state to social decision-makers as the main persons for young advocates to engage with for delaying CEAM. Priority was placed on family elders, in particular parents, as primary decision-makers. The project activities endeavoured to include community decision-makers and opinion setters in order to gain their support or reduce opposition as well as enhance their understanding of CEAM. Major policy influencing events were rescheduled towards the end of the project and led by Shirkat Gah.

The project did provide participants with legal knowledge and know-how to catalyse change, however. Women and girls used new legal knowledge to oppose marriages under the permitted legal age, particularly in Sindh, where the legal age of marriage for girls is 18 years.

The project incorporated the lessons of interventions and actions taken by the youth. For example, girls' initiative to start peer-learning circles in schools around reproductive healthled to a systematic engagement with schools as a potential venue for changing attitudes and community influence. Similarly the use by youth of video clips around CEAM and gender such as the UNICEF series *Meena ki Kahani* (the Story of Meena) brought to light the importance of infotainment as a tool for youth that allowed them to posit the problem without directly confronting their elders, while harnessing 'authoritative voices' in videos as in 'I'm not saying this but see what others are saying'. The project therefore provided them such tools.

Finally, the Humsathi intervention research gained critical insights and benefitted from the presence of another Shirkat Gah project: **the reproductive health- focused** *Sakhi Mein Suki* (SMS) **project, running in parallel** in the same sites with the same people. The medical camps helped build community trust; knowledge of the female reproductive system unlocked girls' agency to an unexpected degree; and the engagement with health practitioners opened another avenue for community influencing and multiplying voices for ending CEAM.

SYNTHESIS OF RESEARCH RESULTS &DEVELOPMENT OUTCOMES

Key Research Findings

DRIVERS, MAINTAINERS, ENABLERS & TRIGGERS OF CEAM

The *Humsathi* project unearthed a **complex intermeshing ofdrivers** of CEAM, i.e. factors or conditions that directly perpetuate the practice. We also distinguished **maintainers**: factors and actors that help keep the practice in place, as well as **enablers**, meaning factors and actors that may not proactively promote CEAM but allow such practices to continue; and **triggers**, i.e. developments or conditions that precipitate CEAM.

It is worth noting that although CEAM is commonly seen and addressed as a girls' problem, boys too suffer from early, sometimes underage, marriages, albeit more in terms of economic and social impact rather than physical consequences. While this could not be explored in this research, the issue deserves further study and inclusion in mitigating strategies.

Drivers: A key finding is that the strongest driver of CEAM is not monetary poverty, so frequently cited in literature (Tristam 2019, Naveed and Butt 2015, Edilberto, and Sylvia Wong2012, Mumtaz and Imam 2012, Nour2009⁵). *Humsathi*'s baseline and information emerging in other intervention activities, such as monthly meeting around the subject, found very few instances in which CEAM has a direct causal link to poverty - too few to establish a pattern that would confirm this as a main driver. Indeed, in one community, baseline research revealed that marrying girls off early was a symbol of affluence, showcasing the family had no need to save up for the marriage. There was also evidence that CEAM occurs in wealthy households as well, contradicting the idea that poverty per se drives the practice. Poverty was, however, commonly forwarded as a reason. Upon probing, this emerged as a poverty of choice (Sen 1999). Although some people complained about girls' expenses, such as clothing and cosmetics, the poverty of choice related to a weaker ability of the poor to resist the real drivers of CEAM: the imperatives of maintaining form or face in profoundly patriarchal societies through adherence to sociocultural norms deeply embedded in the family and community. The concept of girls being a moral and financial bojh (burden) was the chief reason cited for CEAM due to poverty. Parents are often under pressure from family or community members to marry daughters early (Qureshi

⁵ See also

https://www.google.com/search?q=causes+of+child+marriage&sa=X&rlz=1C1CHBD_enPK797PK797&biw=907&bih=644&tbm=isch&source=iu&ictx=1&fir=Tb3olvh_N9RrNM%253A%252CvebCg15nKi8KLM%252C_&vet=1&usg=Al4_-kSFTylm0Pl3hqdjVmuiNP853dZXhw&ved=2ahUKEwjAm-uyhtXkAhWx34UKHTMxClYQ9QEwAHoECAQQAw#imgrc=Tb3olvh_N9RrNM:and https://www.girlsnotbrides.org/about-child-marriage/

and Shaikh 2007) because to keep a daughter at home, especially post-menarche when she is perceived to have attained maturity, is considered 'dishonourable'. In this, poorer households face significantly greater pressure from both family and community, and fear the consequences of breaking rules – taunts and stigmatisation – more. There was some indication that education changes attitudes and opens options for defying normative rules 'because such people can ignore what other people say'.

Amongst other things, patriarchal gender norms promote a **narrative of girls being mere** 'transients' in their natal homes who 'rightfully' belong to their future marital families. In tandem, Pakistan's particular patriarchal norms stigmatise women's gainful employment. Discounting all the female work of household maintenance, nurturing/care economy, reproduction and contributions as unpaid family labour, girls come to be considered to be unproductive household members by their own family members. As a result, while sons are valued as future breadwinners and the means for continuing the patriarchal lineage, investing in girls is seen as wasteful, benefitting only another (read marital) family. Hence, girls are denied education and access to health care.

Patriarchal control is exercised through the **imposition of notions of family honour** – a stand-in for controlling female sexuality. From a young age, female bodies are policed through control of mobility, dress, and behaviour to avoid any possibility of tarnishing their reputation and hence marriage possibilities. Control becomes a silencing of girls' voices. Daughters come to be perceived to be a moral and economic burden, one which parents are eager to divest themselves of as soon as possible.

None of this is particularly new. A more interesting insight to emerge from *Humsathi* is the manner in which family elders use marriages to further their social capital – a phenomenon that undergirds CEAM. Since girls' contribution to the family welfare is discounted and they are prohibited from earning cash incomes, their entire value for the family – and the reason for such stringent control over their behaviour and sexuality – isconcentrated in the transactional value of arranging a marriage that forges, cements or expands social capital within kinship or community. This leads to a wide array of commonplace harmful cultural practices and traditions that help to drive CEAM. Exchange marriages or watta-satta (wherein two persons of one family marry two persons from another family), betrothals at birth or prior to birth (pait-likhi), settling feuds or debts by giving away girls in swara are common practices.

Social capital raised through marriages is especially important in societies where the state-citizen relationship is relatively weak and citizens rely on social networks to negotiate life. Consequently, such arrangements are near impossible to break off, because doing so would rupture family and community ties leading to a loss of social capital. The dynamics coming to light in case studies are incredibly complex. In one *watta-satta* case, a girl's paternal aunt (*phuppi*) had refused to marry her daughter to the girl's maternal uncle as arranged. In retaliation, the girl's mother cancelled her

daughter's marriage with the *phuppi's* son. The aunt stopped visiting their house and told her brother, the girl's father, that to punish his wife for interfering in her brother's marriage, he should "marry your daughter to my son instead." The father was willing to appease his sister, but his wife and daughter, both involved in the *Humsathi* project, refused. In another case, parents who married their daughter without consulting the maternal grandfather had to pay him a 'fine' of 250,000 rupees (roughly USD2000) because this was to have been his prerogative. Significantly, no groom had yet been decided upon, it was a matter of who holds power, and illustrating complexity, in this case it was a *maternal* not paternal grandfather who claimed power over the transaction. Socially, breaking off a family-arranged marriage also becomes a matter of risking family 'honour' conferred by the community. The role of marriage in social capital is an aspect that is rarely, if ever, considered in strategies to eliminate CEAM, and requires more investigation.

Religious actors can drive the practice of CEAM.Religious clerics reportedly use Friday sermons to extol the virtue of marrying girls at the earliest (and children more generally)to fulfil a religious obligation. In some areas, missionaries and local clerics reportedly conduct door-to-door visits to both ascertain which families had unmarried post-menarche daughters and tell men that it is wrong to keep their daughters at home. Frequently, when men gather in and around their mosques, those with unmarried daughters are singled and asked why their daughters are still at home.

Maintainers & enablers: Some elements elide from maintainers to enablers or the reverse, but it is useful to distinguish these as far as possible for conceptual clarity and in terms of future strategies.

The **law is both a maintainer and enabler.** Inadequate laws help maintain CEAM. In Pakistan, Sindh is the only province that recently passed a law setting the minimum age of marriage for Muslim girls at 18 years, at par with boys. This enables the use of a national identity card, issued at 18 years, to verify age at marriage even in the absence of a birth certificate - something not possible in the other provinces where the legal age of marriage for girls is 16 years. The absence of a specified minimum legal age allows CEAM to be practiced at any age, as was the case in the Swat district until 2018 in the very last year of the *Humsathi* project field activities (2018) and the case for Hindus and Sikhs until recently.

Cultural beliefs purporting to be religious dictates holding sway in the communities are crucial drivers of CEAM. A common belief that emerged in different districts was that if a girl attains menarche, it is *haram*, that is religiously forbidden to eatany food she cooks; or that parents cannot perform religious pilgrimages without first marrying off their daughters. Other menstruation-related beliefs included that, come Judgment Day, every menstrual cycle a post-menarche girl spends in her natal home will be counted as a murder by her parents; or that parents will have to drink menstrual blood. There was no evidence linking these beliefs to any religious instruction or actors in any of the project sites, yet they are widely held by community members to be religious gospel.

There are a variety of **enablers**. On the state, or supply side, poorly informed and untrained marriage registrars **lack legal knowledge** and perform marriage ceremonies and register marriages without asking for proof of age through legal documents, relying instead on the word of parents or community elders. On the **demand side**, communities have little understanding of the importance of birth registration; and the births of many children, especially girls, remain unregistered.

In addition, some clerics were found to be promoting the idea of *shara'i nikah*, that is, where a cleric solemnises a marriage, but there is no marriage contract. Legally 'irregular' such marriagesare socially accepted and common. Religious sanctification of CEAM enables the practice to continue and simultaneously makes it difficult to oppose, particularly when such sanctification is forwarded by religious clerics, who uninformed community members consider to be authorities.

Triggers: The basic trigger for CEAM is puberty. Theonset of menarche is seen as a sign of sexual maturity; parents fear that girls will engage in 'immoral' sexual activity, which can range from simply talking to boys on the phone to fears the girl will 'run off' with a boy bringing disgrace to the family. Some supportive mothers hide menarche from their husbands for as long as possible, to protect their daughters from getting married too early. In parallel, parents associate substance abuse in boys with the onset of puberty, and curbing sexual misconduct in them becomes a driver of early marriage for boys.

Only exceptionally did sudden adverse circumstances –such as the death of the earning male member or the primary household woman – trigger early marriages.

Project Impact: patterns and catalysts of change

After three years, the endline research evaluating impact found notable changes in the communities. This includes girls and women finding their voice to oppose CEAM, but also on other matters. Thanks to girls and their allies claiming rights, taking individual and collective actions to prevent CEAM, have changed family dynamics and led to shifts in societal norms, including an upward revision of what the ideal age of marriage for girls and boys should be. The impact of *Humsathi* intervention activities under the three main project objectives are detailed below.

Objective 1: Strengthen girls as their own advocates with capacity for rights-seeking behaviour to resist CEFM, supported by women/other allies & safe spaces, new knowledge, skills and peer support

All project-enjoined girls had transformed into empowered advocates for self and others, often taking leadership in actions by the third year. This stands in sharp contrast to the baseline research when girls across all districts were unable to even articulate their problems, especially regarding CEAM, lacked the ability to contextualise these in the socio-cultural environment they inhabited and reported an absence of voice in their homes and exclusion from decision-making

regarding their own lives. Marking emerging leadership well beyond the scope of CEAM, girls, by project end, girls had found their voice for asserting their rights and demanding more gender-equal treatmentwithin their homes, particularly in the treatment of male and female siblings. Girls were able to secure greater rights: from delaying CEAM and furthering education, partly as a way to postpone CEAM, to far greater mobility in everyday life, being taken to the doctor when needed and enjoying far greater mobility. Also, the discussions in endline focus group discussions (FGD) demonstrated considerable articulation skills and a critical understanding of norms and traditions in their communities and families. Without exception, all girls in the youth cohorts have shared their learning with schoolmates and, especially but not exclusively female, relatives - both regarding reproductive health and the harmful impact of CEAM particularly on female health.

Strikingly, as youth became increasingly aware and self-confident, girls emerged as their own advocates for CEAM- the principle objective of the project. At first a slow trickle and then an increasing stream of girls felt sufficiently empowered to take actions to **stop incidents of CEAM**. By the end of the project, an impressive majority (79 percent) haddirectly intervened to stop CEAM in their families and friends, more than a quarter (28 percent) of the girls demanding that their own marriages be delayed. Girls successfully delayed their own marriages in all sites except Jaffarabad where less than a quarter were successful (this was attributed to being dismissed as too young.) Those who did try to prevent CEAM explained this was because no such case had come to their notice. A few girls even succeeded in rejectingthe groom selected by their elders. Education emerged as a pathway to expanded choices. Commonly, the girls had the foresight to involve allies such as family members, AFS staff, or cohort members. Attempts were not always successful, but girls persisted in their endeavours. Showing amazing courage, girls acting to prevent CEAM were **not deterred by rebukes** from family and communitythat, in a couple of cases, included being slapped by male relatives. Of their own accord, some started informal peer learning circles in schools to share information the female reproductive system. Their ability to bring on board their teachers and principals attests to their leadership skills.

Transformation was facilitated by a number of factors. A **safe spaces for girls** to receive information and discuss issues that they were unable to talk about elsewhere, in particular regarding reproductive health matters, the **AFS were crucial**, as was the mentoring and facilitation of the AFS Coordinators. In case studies and in FGDs, girls and women attributed their ability to speak up against early marriages to the AFS sessions.

Equally important is that the interventions were designed with a human rights based gender-quality perspective. CEAM was discussed within the broader issues and not addressed in isolation. Capacity was built to expand knowledge on gender, the negative health consequences of CEAM and the law governing marriage. This was followed by leadership skills training: analysing situations, communication, negotiation and advocacy.

The presence of a parallel project (*Sakhi Mein Suki*) by Shirkat Gah running in the same sites with the same people, that had started a little earlier and was focused on promoting reproductive health, laid a strong foundation for *Humsathi*.

A crucialthough unforeseen factor was how the demystification of their reproductive system unlocked girls' agency for multiple purposes including CEAM. A turning point was an Apron Exercise under the *Sakhi Mein Sukhi* (SMS) project, explicating the female reproductive system. Knowledge broke through the socially instilled sense of shame in speaking about their own bodies, rendering this a taboo subject. Seemingly, understanding how one's body functions creates a stronger sense of one's own identity – a comfort with oneself—enabling girls to assert themselves and stand up for their own rights, as well as the rights of other girls and women. Increased self-confidence resulted in greater agency for expressing demands, making decisions, and taking action. Inspired by the Apron Exercise, a few girls initiated informal peer learning circles around reproductive health in their schools, for which, displaying unquestionable leadership skills, they obtained permission from teachers and administration. New knowledge and leadership skills enabled girls to showcase the harmful impact of CEAM particularly on female health - general, physical, and emotional.

Self-confidence was bolstered by providing youth opportunities to exercise voice and leadership, starting in monthly meetings and culminated in public speaking in a National Policy Dialogue with senators, chairs of women's commissions and other policy-makers from both the elected and executive branches as well as the follow up district dialogues.

A vital element in girls' transformation has beenbreaking the wall of silence blocking communication between daughters and mothers. The baseline research had underscored the extent to which mothers silencedaughters and exclude them from decision-making, including about their marriages. Scolded if they broached reproductive health, education, and marriage matters girls were scared to speak to their mothers and would keep silent or share concerns with peers or sisters, who had no ability to resolve matters. In the endline research, girls from all sites iterated that *Humsathi* interventions (and the SMS project) enabled them to overcome this fear. They now reach out to their mothers and other family members for support. Indeed, mothers emerged as key allies for their daughters in terms of CEAM as well as other matters. No longer excluded from discussions amongst older women, girls are able to discuss their problems with their mothers, and find solutions together - change that feeds into Objective 2.

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⁶ Developed by the Chetna Organisation in India, an eight-flap cloth apron depicting the female reproductive system is worn by the facilitator to stimulate discussion and enable girls and women to closely examine each flap and learn to recognise different parts such as the ovaries on their own. The exercise is generally met with enthusiasm especially amongst women and girls, who otherwise have little access to information about their reproductive system.

Objective 2: Effectuate sustainable community-owned changes to advocate for policy reforms, ensure implementation of laws around CEFM, reduce harmful norms and address concepts of masculinity

Note: This objective was modified over the course of project. Although advocacy for policy reforms was informed by the community-owned changes, community members did not lead this process. Additionally, while the project did change harmful gender and CEAM-related norms, no particular activities focused on overturning concepts of masculinity.

Supported by mothers and some brothers, girls' new assertivenesshas led to a marked change in family dynamics and relations. If the greatest change has been the reshaping of mother-daughter relationships, girls assert that relationships have also improved with brothers and fathers. Improved communication is evident in the case studies of change (Annex 6). In contrast to the baseline FGDs in which girls in all sites expressed their fear of speaking to, or in front of, their fathers, older brothers, and uncles to varying degrees, the endline FGDs evidence girls approaching fathers and brothers for support, or speaking up on matters related to their marriage or education.

Sustainable community-owned changes are due to the mobilisation of allies. Mothers engaged in the *Humsathi* project have been transformed and better able to support their daughters. In one FGD, a participant remarked that, "Just as you show a blind person the way forward, Shirkat Gah has shown us the right pathway." Mothers' enhanced knowledge base has enabled them to expand their circle of influence amongst other community women. Sharing their learnings with friends, mothers inspired other women to become involved in sessions. Having older women champion their cause is important, as a girl in one case study, jokingly said, 'My mother is known in the community for creating noise over social issues anyway, so everyone listens to her'.

The **involvement of male youth** created a **multiplier effect amongst men** as the male youth cohorts spread key messages to their peers and potential allies. By the end of the second year, male youth were taking their own initiatives for ending CEAM and on other issues. For example, one male youth took action to overcome inter-religious barriers and disaffection.

A major change relates to the **increased mobility of 'centre girls'** as those attending the AFS are referred to in their communities. The AFS gave girls and their mothers alike an opportunity to get out of their homes— a major change in gender norms. Overcoming the initial objections, by the second year, girls were coming to the AFS unescorted and without male supervision, no longer needing to seek permission for each activity. This led to the girls enjoying far greater mobility in their lives as a whole. In the endline FGDs women not engaged in the project described how, compared to earlier when girls and women could not even leave their homes, **girls now go to markets and to schools alone and unchaperoned, visit neighbours or friends. Project-enjoined girls** are also **resetting gender norms**. Many have broken normative rules by acting in plays on CEAM and carrying out door-to-to-campaigns for birth registration; some have even taken those attempting to harass them in the streets and reprimanding policy-makers for staring at

them (this latter led to a complaint being registered with the concerned AFS Coordinator). Changing patterns of gender norms is helping to promote a socio-cultural environment conducive to overturning CEAM.

Objective 3: Promote a socio-cultural conducive environment: provide opportunities for adolescent girls and allies to engage decision-makers, mobilising public opinion through sensitised media and by deploying innovative and mass media campaigns.

Creating a socio-cultural conducive environment for overturning the practice of CEAM requires changes in both the community normative framework and policy framework.

Community Normative Framework

The focus for the project was to alter the community framework and this is where most changes have been recorded. The changes in and actions undertaken by all project-engaged girls, male youth and mothers have started reshaping the normative framework, at least within their own circles, using a variety of methods. Key messages around CEAM have been conveyed to others in the community, starting with friends, relatives and neighbours, but also in schools, on social media and even in beauty salons. Female and male youth cohorts have held infotainment events to good effect: using video-clips and performing skits on CEAM for their communitiessome for the very first time, to generate discussions. (Youth in Muzaffargarh and Jaffarabad created their own theatre scripts.) The door-to-door birth registration drives undertaken by all the youth cohorts gave an opportunity to engage with a wider set of people in their neighbourhoods.

Endline data showed encouraging shifts from the baseline in terms of **people's notions of ideal ages of marriage for girls and boys**. The change is most noticeable amongst older men who, earlier, were most inclined to prefer early-age marriages for girls especially in Swat and Shahdadkot where 11-14 years was said to be ideal for girls (one man in Jaffarabad even said 8 years). By the end of the project, the lowest age for girls was 16 years in all FGDs including women and men not directly engaged in the *Humsathi* interventions. For boys, the lowest appropriate ages in the baseline had been forwarded by fathers and boys in Shahdadkot: 15-16 and 17-18 years respectively. By the endline, men in Shadadkot cited 18-22 as the ideal age while the male youth viewed 18-24 years as ideal. For girls, the ideal age identified in the endline is 18-20 years, while a significant number gave even older ages as appropriate. Only a handful said 16, which may be linked to knowing the legal age of marriage is 16 years for girls in all provinces except in Sindh. It must be said however, that the opinions of women not associated with the project were similar and therefore this change cannot be attributed solely to the project.

The successful initiative of adolescent girls in Swat of starting informalpeer learning circles in their schools, led to the *Humsathi* project proactively engaging with private and public sector girls' and boys' schools in the third year, extending the circle of influence and influencers.

Sessions were held on CEAM, gender inequality and sexual harassment with the full support of teachers and principals who initially audited the sessions. Teachers have committed to informally continuing these sessions despite possible challenges in securing time in the schedule.

One co-educational school, run as a public-private partnership, instituted a sexual harassment committee following the school sessions, headed by a young woman who had attended other *Humsathi* sessions. The committee and management immediately took action to stop the harassment of a girl who found the courage to speak up after the *Humsathi* sessions. The successful rolling out of sexual harassment sessions in schools led to the project to introducethesein communities as well. In at least one recorded instance, this led to mothers reprimanding a young man who was harassing girls walking to school. This attests to the more conducive atmosphere as girls said they previously did not dare speak of this for fear of being removed from school.

In parallel, *Humsathi* engaged health department personnel –the Lady Health Visitors (LHVs) and Lady Health Workers (LHWs) involved in the SMS project: The former are operate from Basic Health Units (BHU); the latter are tasked with community outreach. The involvement of the latter was particularly useful. Although not specifically mandated to engage unmarried girls, following the *Humsathi* and SMS sessions, LHWs were motivated to do so and committed to continuing to share reproductive health information with girls as well as their mothers in the future. Though far fewer in numbers, the LHVs too advocateddelayingthe age of marriage with women coming to the BHUs, informing them about the ills of CEAM. The engagement of health and educational professionals expanded the circle of actorshelping to overturn CEAM.

In 2018, the last year of field activities, initiatives undertaken by youth in the last three months were entirely run by them, without project assistance which bodes well for sustainability beyond the project life-cycle. Still, the **big question in terms of sustainability** is whether the momentum for change can continue in the absence of the AFS, the AFS Coordinators and Male Focal Persons, who have all been recognised by participants as a crucial source of support.

Policy Influencing

The project engaged government officials in a limited number of policy dialogues at the district, provincial, and national level. For these, Charters of Demands were developed by female and male youth in their own groups and then collated into a National Charter across project sites at the *Humsathi* Youth Convention (26th–28th June, 2018).

The National Youth Charter (Annex 7) was presented topolicy-makers at a National Policy Dialogue in July 2018. Co-hosted by the National Commission on the Status of Women (NCSW) the event was attended by senators, the heads of the NCSW and two functional Provincial Commissions on the Status of Women, high level functionaries of the Departments of Health,

Population and Youth Affairs of the four provinces as well as experts and civil society organisations. The *Humsathi* project findings were also shared, initiating a conversation on how change is possible and way forward on the issue of CEAM. A policy brief developed by Shirkat Gah based on research findings with recommended actions was shared. The Dialogue gave youth a unique platform to engage with senior policymakers and experts, share success stories, and present their Charter of Demands.

Demands includedmaking 18 the minimum age of marriage for girls across Pakistan for all communities (to ensure religious minorities were covered); a stronger enforcement of existing legislation on marriages; promoting girls' education,making birth certificates mandatory for enrolment and ensuring safe affordable public transport; access to equal opportunities for girls and boys; community awareness programmes and specific measures for religious minorities. A specific request by the youth cohorts was for provincial governments to implement interventions similar to the *Humsathi* activities as part of a large-scale government programme. This request was repeated at the final round of provincial policy dialogues in 2019.

The provincial policy dialoguesemphasised the importance of findings in the context of Pakistan's initiatives to meet SDG target 5.3 that specifically includes ending child, early-age and forced marriages. A revised policy brief incorporating endline research findings was presented along with province-specific policy recommendations, as all critical matters are the remit of the provinces. In Punjab, the general view was that a multi-sectoral approach is needed and the Punjab SDG Unit was asked to coordinate efforts. Additionally, members of the provincial assembly in attendance informed the gathering that a Resolution moved by three women members was successfully passed in the Assembly making it mandatory for marriage registrars to ensure both the bride and groom have valid computerised national identity cards (CNICs). (This would still require amendments in existing laws.) In Balochistan the dialogue became an opportunity for lawmakers and other stakeholders to strategise on how best promote the twice tabled but rejected Bill to increase the legal age of marriage for girls to 18 years. In Sindh, the Provincial Commission on the Status of Women requested Shirkat Gah to co-host similar sessions in all districts of the province to promote awareness of 18 being the minimum age of marriage. In KP, members of the provincial assembly attending the meeting informed the gathering that a draft Bill to introduce an amendment in the Child Marriage Restraint Act (CMRA) has been developed that also proposes making it mandatory for marriage registrars to ensure both the bride and groom have validCNICs. Additionally, there was general consensus among parliamentarians and policy-implementers that there was a need to take measures to keep girls in schools. To that end, efforts have been escalated as the provincial parliament has tabled a new budget, allocating 70% of the total budget for schools towards the creation of girls' schools -- two out of every three schools will be for girls and pick and drop will provided to young girls where there are issues of access and mobility.

During the project activities, interviews with health practitioners and teachers/principals in the project sites highlighted their important role as allies in the community for young girls and boys. To that end, the **LHWs recommended**that spreading awareness among unmarried girls should be added to their mandate to provide them better access and support in the community for spreading awareness around reproductive health and the negative health impact of CEAM with female youth during their sessions with married women— something they are currently undertaking on a voluntary basis. A mandated activity would help to allay community members' generalsuspicion of LHWs talking to unmarried girls on matters of reproductive health. The disapproval of young girls sitting with older women poses a major hindrance for the LHWs and their work.

Beyond the project parametres, insights from the *Humsathi* initiative have already been used to provide inputs on the Punjab Draft Reproductive Health Bill. They will also inform inputs for similar bills under preparation in the other provinces. Best practises and successes from the *Humsathi* model were also shared with the Pakistani government and civil society delegation and international donors at the recent ICPD+25 Nairobi Summit. Findings will also inform Shirkat Gah interventions in the follow up meeting announced by the federal State Minister for Health. Finally, Shirkat Gah has been shortlisted by UNFPA Pakistan for collaboration and UNFPA has expressed a keen interest in taking forward and/or replicating the *Humsathi* initiative.

METHODOLOGY

The research and intervention sites for *Humsathi* were chosen across Pakistan's four provinces bearing in mind often significant inter-provincial differences. Moreover, all laws and policies relating to marriages are a remit of the provinces so that lessons for policy influencing have to be province-specific. One district was selected in each province: district Qambar Shahdadkot in Sindh, Jaffarabad in Balochistan, Muzzafargarh in Punjab, and Swat in KP. Districts were selected on the basis of Shirkat Gah's prior presence in the areas through its Women Friendly Spaces (WFS). Hence, the Shirkat Gah (SG) team was familiar with local socio-politics, and local communities were aware of SG's work in the region. Under *Humsathi*, the WFS doubled as AFS for girls, and became the base for meetings, trainings and events with female youth cohorts. No designated space was allocated for boys/male youth as their greater mobility allowed greater flexibility in arranging activities at different locations. A female AFS Coordinator and male Focal Person were hired in each location from amongst the community.

Baseline data

Following a district mapping of health and legal services, the 2016 baseline research conducted FGDs with four different groups in each site: unmarried girls, unmarried boys, married women, and married men. Youth was engaged separately to ensure that adolescents/unmarried girls and boys were able to talk freely unrestricted by the presence of their elders. A total of 260 people were engaged aged 12 to 60+ years. This was complemented by 29 in-depth interviews (IDIs) with practicing gynecologists in public and private healthcare facilities, government officials in the Union Council administration, police officials, marriage registrars and *nikkakhwans* (those who may solemnise marriages but are not authorised to register them).

The Shirkat Gah team conducted FGDs and IDIs with the support of AFS Coordinators and Male Focal Persons. The questionnaires, based on the Knowledge, Attitudes, and Practices (KAP) survey model, focused on gauging socio-cultural beliefs, practices, attitudes regarding female health and marriage, and knowledge of laws regarding legal age of marriage as well as redressal mechanisms. FGDs in addition elicited views of the ideal as well as normative age of marriage for girls and boys, and whether groups knew of any instances of child marriages and attempts to delay these.

Data collection during the project and adjustment of activities

Data was also gathered in the course of interventions. As the project progressed, interventions and the regular monthly meetings were designed/or adjusted according to the results of previous interventions, analysis and discussions. For example, after girls in Swat initiated informal peer-learning circles in school around reproductive health, *Humsathi* pro-actively sought

out schools ready to run sessions on CEAM and gender. When Shahdadkot schools requested sessions on sexual harassment⁷, this was introduced as part of community activities as well. Similarly, when youth cohort members used cartoon videos on CEAM shared by the project, to initiate discussions with parents or peers, the *Humsathi* project collected other useful videos (e.g. on gender and sexual harassment) to provide youth a tool to use in communities and schools.

An important sourceof both data and course correctionwere the monthly meetings of female and male youth cohorts, initially focused on capacity building sessions and trust building. After a year of trainings on reproductive health, legal provisions and gender, leadership training was added to build skills for self-expression, communication, negotiation and advocacy. Meetings were interspersed with events such as theatre performances, video showings, and open mics for girls, etc. as a means of reaching the wider population and providing youth, especially girls, an opportunity to practice their leadership skills. Mothers' groups soon joined the girls' cohorts for training events.

By the third year, youth were encouraged to undertake their own activities for ending CEAM, such as theatre performances, and running community discussions, as well as campaigns around other issues such as registering births (the lack of birth registration of girls is an enabler of CEAM). In the last four months, monthly meetings concentrated on discussions around research topics not fully covered, such as whether poverty was a driver, or the role of religious elements, as well as future plans of the groups.

Over the course of 2018, some **25 case studies**, eliciting further information regarding successful and unsuccessful attempts by project participants to delay CEAM were completed. These brought to light the complex dynamics of different kinds of actions taken to stop CEAM, including actions by girls to delay their own marriages and or delay that of others, actions led by mothers or brother.

Project Extension and Endline Research

The project was due to close in October 2018. A **no-cost extension was granted by IDRC**in order to ensure the endline research could be conducted in all four sites, as residents in the Balochistan site relocate during the exceedingly hot summers, returning only in mid-September.

In October 2018, the team conducted **endline research** to understand and determine patterns of change that had occurred since *Humsathi* started. An important aspect was confirming and deepening understanding about the intra-family power dynamics that drive CEAM. The endline research also evaluated the model, gauging the effectiveness of a) having a safe space for girls, b) creating peer support through the youth and mothers' cohorts, and c) working with families to create allies for girls within their own families. **The success and impact of the AFS model, along**

⁷This was in the wake of a horrendous case of a seven-year old being sexually assaulted and murdered that shook the entire nation (<u>2018</u> <u>Zainab case in Kasur, Punjab</u>)

with all project interventions, was measured both quantitatively through a mini-survey, and qualitatively through FGDs with various groups and interviews as well as in-sights from case studies.

FGDswere carried out with eight categories of people in each site to capture changes in KAP, perceived changes in the past three years (project duration) and reasons for this. The FGD categories were: unmarried girls, unmarried boys, women involved in the project, older women not engaged in the project, fathers, older men not involved in the project, teachers and principals⁸ of schools where SG sessions were replicated, health practitioners including LHWs and midwives. These categories also reflect the concentric circles of possible influence of the project in terms of engagements and interventions: the immediate circle of project-engaged girls, the second circle of boys/male youth cohorts and mothers' groups, and the wider third circle comprising fathers/older men and the general populace.

A limited quantitative survey elicited data using a 5-point scale to assess the usefulness of each major intervention, perceived changes in terms of self and environment. SG teams administered the survey with 166 people attending the FGDs of female and male youth cohorts, and group of mothers/older women. The survey quantified the number of actions taken by respondents to stop CEAM and how many were successful, identifying, too, principle allies and opponents and the relationship with those being supported in actions.

In depth interviews were carried out with the ASF coordinators and Male Focal Persons tasked with carrying out the work in the field, mentoring and providing advice to the cohorts.

Group interviews were rolled out with schoolteachers and health workers, groups who had not been foreseen as part of the project initially but became involved through interventions. The preference for group interviews was to provide schoolteachers and health workers an opportunity to network and explore ways of institutionalising the initiatives. There was also a time and resource constraint in conducting individual interviews. A sample of teachers and principals were invited from all public and private schools in which the project had introduced awareness sessions. Interviews were held separately with staff from girls' and boys' schools. In terms of health practitioners, a sample of LHWs of the Departments of Health were interviewed who had voluntarily taken on the task of spreading awareness around reproductive health with female youth, beyond their mandate. A total of 46school staff and 25 health practitioners were interviewed. From the **research and policy influencing** perspective, the main purpose was to identify what convinced these groups to take up the issue of CEAM and related matters in their institution/work.

⁸Both male and female school staff was interviewed in all districts except in Muzaffargarh, where no activities were carried out with school staff

Data management & analysis framework

Several sessionswere conducted to ensure shared understanding of the overall objective of the research and purpose of each tool amongst the SG research team. All data was collected and processed manually by the field team in the first instance and subsequently by a senior research team. Where permission was granted, interviews and FGDs were recorded.

The principle frameworkfor analysing all data (See Annex 1 for the sources) was the *Humsathi* intervention transformation model to identify what factors influence the outcome. The model can be summarised as follows: For girls to be their own advocates and delay marriages requires interventions that build their self-awareness and leadership skills, expands their knowledge base and increases their social capital by mobilising allies. Allies and girls' voices will combine to effectuate community-owned changes. Such changes and the amplification of voices and actors promoting awareness about and advocating against CEAM will help create a more socio-cultural environment conducive to change. The findings of the study will inform appropriate policy asks.

Data from all tools were triangulated. Qualitative analysis explored the context in which change occurs, factors promoting or impeding such changes and what participants and respondents think is required to counter factors driving CEAM and to break the established pattern. The quantitative survey added further details about perceptions of changes having occurred and the benefits of specific *Humsathi* interventions; it also provided vital information regarding the number of CEAM participants tried to delay, the actors involved (supporters and opponents) and the outcomes. Case studies were examined individually and then compared for lessons emerging. Interviews provided lessons on the project and shed light on possible institutionalisation. All findings were incorporated in the final policy dialogues.

The major challenge in data collection was that there were shifts in the composition of the Youth cohorts, especially amongst males who dropped out due to starting employment or relocating for further studies. This means that there is a variation in FGDs participants in the endline and the baseline.

PROJECT OUTPUTS

Over the course of the project, Humsathi has produced a series of divergent information educational and communication products. Research findings and intervention outcomes from all sources have been translated into diverse formats for different purposes/audiences. Some originally planned products were dropped or revised in the light of needs identified in the field over the course of the project. For example, the Flip-chart booklet relating key stories from the field with questions to kick off discussions was merged with the Urdu booklet of fictionalised stories based on case studies of resisting CEAM. Furthermore, pictures from all project activities were also dropped as a final project output as a majority of the participants were reluctant to show their faces and wished to maintain anonymity when asked for permission. One of the reasons for this was that while these girls and women had agency now, in terms of having a voice and mobility, they had not told male members of the family about their involvement with Shirkat Gah and its activities. The final list of products is as follows:

The final list of products is as follows:

Academic Research

- Chapter for IDRC book: *Unlocking Girls' Agency: Lessons from the Humsathi Interventional Study in Pakistan*
- Endline Report
- Baseline Report (revised)

Policy Influencing

- Policy Briefs
 - National Policy Brief detailing on-ground realities with respect to the practice of CEAM, key insights and how change has occurred, presented at the high level National Policy Dialogue 2018
 - o Policy Brief 2019 revised and shortened incorporating endline research findings
 - o Four (4 x) province-specific policy asks
 - Policy Brief on best practices for the ICPD Nairobi Summit to highlight the Humsathi model
 - News coverage of provincial policy dialogues:
 Quetta: https://www.bexpress.com.pk/2019/10/speakers-calls-for-urgent-action-to-end-child-marriage-in-balochistan/

Lahore: https://www.dawn.com/news/1510343,

https://www.thenews.com.pk/print/539890-child-marriage-restraint-bill-tabled,

https://tribune.com.pk/story/2077661/1-seminar-child-marriages-held/

Swat: https://www.dawn.com/news/1506722
Sindh: https://www.dawn.com/news/1511461

3. Youth Charters of Demands

- a. Four (4 x) district-specific Youth Charters of Demands presented to provincial Commissions on Women and District officials (Urdu and English)
- b. National Youth Charter of Demands (presented at the National Policy Dialogue and in District Dialogues (Urdu and English)

Towards Community Change

- 4. Theatre script on CEAM used and adapted by youth cohorts;(Urdu)
- 5. Set of flex banners with key information about CEAM;(Urdu)
- 6. Set of infographics on CEAM(English and Urdu)
- 7. Booklet on birth registration (Urdu)
- 8. Handbook on advocacy and lobbying (Urdu)

Products for General Use

9. Audio-visual material

- a. Short videos of seven adolescent girls and two boys) on CEAM which can be used with diverse audiences, such as in schools, community gatherings, and families
- b. Video of adolescents preparing and presenting Charter of Demands to senators, chairpersons of women's commissions and senior bureaucrats of all four provinces and media at High Level National Policy Dialogue (2018)
- c. Video documentary of the *Humsathi* projecthttps://www.youtube.com/watch?v=Ycv8ld9z2Ak&feature=youtu.be

10. Articles for the press

- a. One article in national Dawn Newspaper by Ghausia Rashid Salam (Research Associate), https://www.dawn.com/news/1471545/child-marriage
- b. Two articles in local Sindhi newspaper Daily Jeejal by ShanulKhoso (Female focal person Shahdadkot, Sindh)
- 11. Booklet in Urdu using case studies of resisting CEAM in fictionalised stories to make these more inviting to people

PROBLEMS AND CHALLENGES

In the course of the *Humsathi* research, the team faced a number of challenges while trying to implement project interventions on the ground. Key amongst these were:

It took almost a year to ensure that girls (and boys) had the self-confidence to start directly addressing issues of CEAM. At the beginning of the project, girls were unable to articulate their issues, especially CEAM; some were reluctant to even speak up. This was overcome through the regular monthly meetings of the cohorts. Subsequent to building trust, self-confidence was boosted through leadership capacity building.

Initially, the AFS was an object of distrust amongst community members in all project sites to varying degrees. Significantly, and underlining the policing of teenage girls' activities, this distrust was evident despite the fact that these 'centres' had previously been operating as Women Friendly Spacesfor years and had successfully managed to overcome initial community trepidations regarding such a women's space. Initially, women and girls were stopped from going to the AFS and activities were 'spied upon' by male relatives – some going as far as to insist their wives keep their mobile phones on so they could listen into the conversations. Girls and women had to defend their continued participation in activities and trainings. The negative perception was overcome thanks to the persistent efforts of the AFS Coordinators, themselves community women, who would go door-to-door to invite women and girls to the AFS. In the endline research, women who had not been a sustained part of project activities related how, when they started attending some activity at the AFS, relatives discouraged them because the AFS was affiliated with an NGO and NGOs were considered to be a negative influence⁹. Some in the community objected to activities conducted at the AFS such as those teaching girls about their reproductive health, and the negative impact of CEAM on girls' reproductive health. These were seen as a corrupting influence on girls.

While mistrust was dispelled amongst families participating directly in the project, some people in the wider community continued to mistrust the AFS throughout the project's life-cycle. Even three years into the project, in one location girls returning from the Youth Convention and National Policy Dialogue in the federal capital confronted some snide remarks by community men on how the girls had 'earned money' on their trip by 'going with other men'. However, by that time, the girls had gained so much self-confidence that they were quick to speak up in their defence, dismissing such comments.

As key decision-makers, fathers/older menwere included in initial activities seeking to elicit community supportand deflect potential opposition to project interventions. While they

⁹FGD with Female General Populace, Jaffarabad. 2018.

participated in the wider community activities of *Humsathi*, it was not possible to create a fathers' group. In the end this was perhaps less critical than could be expected as mothers became the interlocutors with fathers –improving internal family gender dynamics. The AFS Coordinators and Male Focal Persons in particular, have suggested that in future it would be beneficial to systematically include men as well. However, the challenge lies in finding a suitable time outside work and other commitments to bring them together – as noted boys too dropped out of the cohorts when they started gainful employment or relocated to pursue their education.

One of the major challenges identified during the *Humsathi* research and subsequent policyinfluencingactivities was the lack of state ownership and political will. While it is clear that to end child marriages in Pakistan, multi-sectoral partnerships play a vital role, such as the ministries of health, education, youth and law,especially given the huge scale of the problem, it is almost impossible to gather all relevant policy implementers on the same platform to formulate a comprehensive strategy. This issue was raised during the national and provincial policy dialogues, and all stakeholders agreed that a multi-sectoral approach was a pre-requisite for effective change. This is a huge problem as there is no one state department mandated to ensure and monitor relevant departments are fulfilling their role to ensure and protect the rights of girls, women as well as boys.

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- Annex 3: Infographics in Urdu and English.
- Annex 4: Policy brief and recommendations from National Policy Dialogue
- Annex 5: Policy brief and recommendations (4 provinces) from Provincial Policy Dialogues
- Annex 6: Case studies of change
- Annex 7: National Youth Charter of Demands