The International Federation of Red Cross and Red Crescent Societies (IFRC) is the world’s largest volunteer-based humanitarian network. With our 192-member National Red Cross and Red Crescent Societies worldwide, we are in every community reaching 160.7 million people annually through long-term services and development programmes, as well as 110 million people through disaster response and early recovery programmes. We act before, during and after disasters and health emergencies to meet the needs and improve the lives of vulnerable people. We do so with impartiality as to nationality, ethnicity, gender, religious beliefs, class and political opinions.

Guided by Strategy 2030—our collective plan of action to tackle the major humanitarian and development challenges of this decade—we are committed to saving lives and changing minds.

Our strength lies in our volunteer network, our community-based expertise and our independence and neutrality. We work to improve humanitarian standards, as partners in development, and in response to disasters. We persuade decision-makers to act at all times in the interests of vulnerable people. The result: we enable healthy and safe communities, reduce vulnerabilities, strengthen resilience and foster a culture of peace around the world.
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Terminology</td>
<td>4</td>
</tr>
<tr>
<td>Getting started: this guide</td>
<td>7</td>
</tr>
<tr>
<td>Background on Red Cross and Red Crescent action against child marriage</td>
<td>9</td>
</tr>
<tr>
<td>Child marriage overview</td>
<td>10</td>
</tr>
<tr>
<td>Theory of change</td>
<td>16</td>
</tr>
<tr>
<td>Assessment and design</td>
<td>22</td>
</tr>
<tr>
<td>Advocacy</td>
<td>26</td>
</tr>
<tr>
<td>Child safeguarding</td>
<td>31</td>
</tr>
<tr>
<td>Referrals</td>
<td>32</td>
</tr>
<tr>
<td>Volunteers</td>
<td>35</td>
</tr>
<tr>
<td>Partnerships and key resources</td>
<td>37</td>
</tr>
</tbody>
</table>
Terminology

Best Interests of the child broadly describes the well-being of a child. Such well-being is determined by a variety of individual circumstances (such as their gender, age, level of maturity and experiences) and other factors (such as the presence or absence of parents, quality of the relationships between the child and their family/caregiver, and other risks or capacities).

There are three aspects to the Best Interests concept. They are:
1) A child's basic right: Children have a right to have their Best Interests assessed and taken as a primary consideration;
2) A legal principle: If a legal provision is open to more than one interpretation, the interpretation which most effectively serves the child's Best Interests should be chosen; and
3) A rule of procedure: Whenever a decision will affect a child, a group of children or children in general, the decision-making process must (a) evaluate the possible impact of the decision on the child(ren) concerned and (b) show that the right of children to have their Best Interests assessed and taken as a primary consideration has been explicitly taken into account.¹

Child is a human being below the age of 18 years.²³

Child abuse refers to a deliberate act with actual or potential negative impacts upon the child's safety, well-being, dignity and development. It is an intentional act that takes place in the context of a relationship of responsibility, trust or power.⁴

• Emotional or psychological abuse is when a caregiver acts or behaves in ways that have an adverse effect on the emotional health and development of a child. Such acts include restricting a child's movements, denigration, ridicule, threats and intimidation, discrimination, rejection, and other nonphysical forms of hostile treatment that deny the child an appropriate and supportive environment in which to thrive. They are acts that may result in psychological and social deficits in the growth of a child;
• Physical abuse is a caregiver's use of physical force to cause actual or possible physical injury or suffering; and
• Sexual abuse is when a caregiver involves a child in sexual activity. This includes when the child does not fully comprehend, is unable to give informed consent to, or for which the child is not developmentally prepared, or else that violates the laws or social taboos of society.

Child exploitation refers to when an individual in a position of power and/or trust takes or attempts to take advantage of a child for their own personal benefit, advantage, gratification or profit. This personal benefit may take different forms: physical, sexual, financial, material, social, military or political. Exploitation may involve remuneration in cash or in kind (such as social status, political power, documentation, freedom of movement, or access to opportunities, goods or services) to the child or to (a) third person(s).⁵

Child exploitation may be divided into three categories, namely:

1) **Economic exploitation** includes slavery and slave-like practices, servitude, bonded or indentured labour;

2) **Harmful or hazardous labour** is work that, by virtue of the child's age or the nature of the work, is prejudicial to any aspects of the child's welfare, among other things the child's health or their physical, mental, spiritual, moral or social development. This includes the use of children in the illicit production and trafficking of narcotic drugs and psychotropic substances, and children's association with armed forces and armed groups;

3) **Sexual exploitation** includes child prostitution, the trafficking or sale of children for sexual purposes (including forced marriage), child pornography and grooming for sexual purposes—including online.\(^6\)

**Child marriage** is a marriage of a girl or boy before the age of 18 and refers to both formal marriages or informal unions in which one or both parties are under 18 years.\(^7\) Child marriage is sometimes called early marriage. It is a human rights violation for children to be married.

**Child protection** is the prevention of and response to abuse, neglect, exploitation and violence against children.\(^8\)

**Child safeguarding** is the broad obligation of an organization and its personnel to ensure that the design and delivery of programmes and organizational operations do not expose children to adverse impacts—including the risk of abuse and exploitation—and that any concerns about children's safety within the communities where they work are appropriately reported.\(^9\)

**Disaster** refers to a serious disruption of the functioning of a community that exceeds its capacity to cope using its own resources. There are many potential causes of such disruption, including natural and technological hazards, industrial accidents, mass movements of populations, and infectious and contagious diseases, as well as various factors that influence the exposure and vulnerability of communities.\(^10\)

**Forced marriages** are marriages in which one or both parties have not personally expressed their full and free consent to the union. A child marriage is considered to be a form of forced marriage, given that one or both parties have not expressed full, free and informed consent.\(^11\)

**Gender** refers to an aspect of people's socially determined identity that relates to masculinity and femininity—it is not binary. Gender roles vary significantly between cultures and can change over time (including over the course of an individual's lifetime). Social and structural expectations to gender strongly influence people's social role, power, rights and access to resources.\(^12\)

**Gender norms** are a subset of social norms that relate specifically to gender differences. They are informal, deeply entrenched and widely-held beliefs about gender roles, power relations, and standards or expectations that govern human behaviours and practices in a particular social context and at a particular time. Gender norms sustain a hierarchy of power and privilege that typically favours what is considered male or masculine over that which is female or feminine, reinforcing a systemic inequality that undermines the rights of women and girls and restricts opportunity for women, men, and gender minorities to express their authentic selves.\(^13\)

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\(^13\) UNICEF. (2020). Technical Note on Gender Norms.
Harmful practices are a violation of human rights that put women's and adolescents' sexual and reproductive health and rights at great risk. A variety of harmful practices exist, including female genital mutilation (FGM), and child and forced marriage. Harmful practices constitute discrimination against women and girls. They place women's and girls' sexual and reproductive health at serious risk.¹⁴

Honour killing is where a supposed offender against family “honour” is killed to restore the “honour” claimed to have been lost through her behaviour. While “honour” killing is the most extreme form of honour-based violence, other responses—such as forcing marriage or other forms of violence—may also be expressed.¹⁵

Sexual and gender-based violence refers to categories that include, but are not limited to, sexual violence, intimate partner violence, trafficking, forced/early marriage, sexual harassment, forced prostitution, femicide, female genital mutilation, sexual exploitation and abuse, and denial of resources, opportunities and services.¹⁶

Sexual and reproductive health and rights encompass efforts to eliminate preventable maternal and neonatal mortality and morbidity; to ensure quality sexual and reproductive health services, including contraceptive services; and to address sexually transmitted infections (STIs) and cervical cancer, violence against women and girls, and sexual and reproductive health needs of adolescents.¹⁷

Survivor-centred approach creates a supportive environment in which the survivor's rights and wishes are respected, their safety is ensured, and they are treated with dignity and respect. A survivor-centred approach is based on the following guiding principles:¹⁸

- **Safety:** The safety and security of the survivor and her/his children is the primary consideration;
- **Confidentiality:** Survivors have the right to choose to whom they will or will not tell their story, and information should only be shared with the informed consent of the survivor;
- **Respect:** All actions taken should be guided by respect for the choices, wishes, rights and dignity of the survivor. The role of helpers is to facilitate recovery and provide resources to aid the survivor; and
- **Non-discrimination:** Survivors should receive equal and fair treatment regardless of their age, gender, race, religion, nationality, ethnicity, sexual orientation or any other characteristic.

Working with children means being engaged in an activity with a child where the contact would reasonably be expected as a normal part of the activity and the contact is not incidental to the activity. Working includes volunteering or other unpaid work.¹⁹

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¹⁵ Honour-Based Violence Awareness Network. (No date). Frequently Asked Questions about Honour Based Violence (HBV) and Honour Killings.
http://hbv-awareness.com/faq/#eleven
¹⁶ IFRC. (2020). Gender and Diversity Policy.
Getting started: this guide

Purpose

This technical guide can be used by the IFRC and National Societies when designing and delivering programming to prevent or respond to child marriage, either in humanitarian settings or in longer-term development settings. This technical guide can support IFRC and National Societies to implement effective actions against child marriage as part of their broader PGI or other initiatives.

Since child marriage prevention and response necessitate cross-cutting interventions, this technical guide can help integrate child marriage prevention or response into the programming of sectors as:

• health, including sexual and reproductive health and rights (SRHR), and nutrition;
• sexual and gender-based violence (SGBV);
• mental health and psychosocial support (MHPSS);
• water, sanitation and hygiene promotion (WASH);
• livelihoods;
• cash;
• community engagement and accountability (CEA); and
• education.

This technical guide can also assist in developing protection, gender or inclusion (PGI) programming focused specifically on child marriage prevention or response.

Target audience

The information in this technical guide is relevant for managers responsible for programming related to child marriage prevention or response. This includes staff working on sexual and gender-based violence (SGBV) prevention and response, as child marriage is a form of SGBV and can be identified as an SGBV priority to address in a given context. This guide is also useful for volunteers who are delivering programming to communities. Prior training on protection, gender and inclusion (PGI), particularly on child protection and SGBV, is necessary for staff and volunteers working on child marriage prevention or response.

What this guide does and does not include

<table>
<thead>
<tr>
<th>This technical guide DOES include:</th>
<th>This technical guide DOES NOT include:</th>
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</thead>
<tbody>
<tr>
<td>• Information on key aspects to include for assessments, design, training, implementation, and monitoring and evaluation of child marriage prevention and response programming</td>
<td>• Detailed community-based tools for delivering programming for the prevention of or response to child marriage</td>
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<tr>
<td>• This guide provides technical guidance</td>
<td>• A training curriculum</td>
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<td>• A strategy or framework for National Societies to address child marriage or other PGI issues</td>
</tr>
</tbody>
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When to use this guide

This technical guide can assist National Societies in various settings. In particular, it can assist in development, disaster response and disaster recovery situations. It can also be applied in various locations such as urban, rural, displacement camps, informal settlements, or host or migrant communities.

How to use this guide and tools

This technical guide is structured around several sections that each provide guidance for specific issues.

National Societies can choose which information is most useful for them for their own projects and the part of the project cycle they are currently in.
Background on Red Cross and Red Crescent action against child marriage

Child marriage is a global problem that intersects with protection, health, gender, psychosocial, livelihoods and education sectors. Therefore, it is essential that National Societies address the problem through a comprehensive approach.

Frameworks related to child marriage

IFRC and National Society action to address child marriage is grounded in several internal frameworks, specifically:

- The 2015 Movement Resolution on Sexual and Gender-Based Violence (SGBV) Joint Action on Prevention and Response encompasses all forms of SGBV, including child marriage.
- The IFRC Plan and Budget 2021–2025 includes targets for:
  - Providing contextually-appropriate sexual, reproductive, maternal, neonatal and child health services;
  - Preventing and responding to SGBV in disasters and other emergencies, as outlined in the 32nd International Red Cross and Red Crescent Movement Resolution (32IC/15/R3). The Secretariat will provide advanced technical support for National Societies to implement specialized programmes preventing and responding to violence, discrimination and exclusion, such as sexual and gender-based violence, child abuse or neglect, exploitation, or trafficking in persons; and
  - Enhancing localized and participatory child protection programming.
- The IFRC Framework on Protection, Gender and Inclusion (2021–2025) also specifically notes child marriage as an area for global action.

IFRC and Girls Not Brides

In 2019 the IFRC joined Girls Not Brides, an international network of over 1,000 agencies working to end child marriage.

See the IFRC Case Study Report on National Society Actions to Address Child Marriage to learn more about action being taken.

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22 https://www.girlsnotbrides.org/
Child marriage overview

Global agenda for ending child marriage

United Nations Sustainable Development Goal (SDG) 5.3 calls for the elimination of all harmful practices such as child, early and forced marriages, and female genital mutilation. Globally there has been a decline in child marriages by fifteen per cent, from one in four down to one in five. But the current trend will not be enough to meet SDG 5.3 on ending child marriage by 2030.23

Failing to address child marriage 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.

Global background on child marriage and the high risk to girls

Child marriage is a human rights violation, a form of gender-based discrimination, a harmful practice, and a form of sexual and gender-based violence. States are required to take steps to prevent and eliminate child marriage.24

Both boys and girls are impacted by child marriage. 765 million people alive today were married as children.25 Of those, an estimated 115 million are boys and men.26

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.27 This is equivalent to 1 in 5 girls being married as children compared to 1 in 30 boys.28 This is a decrease from a decade ago when the rates were 1 in 4.29 Although these gains are uneven across countries and regions. COVID-19 has threatened to erase the progress and increase significantly the total numbers of children being married.30

The dramatic differences between girls and boys being married reflect social values and norms that hold girls in low esteem, denying them the agency to chart their own course in life.31 This exemplifies how gender inequality is a root cause of child marriage.

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There are many negative consequences as a result when girls are married. This is because they are not physically or emotionally ready to become wives or mothers. Consequences include:32

- Becoming isolated, having limited freedom, and feeling disempowered;
- Being deprived of their fundamental rights to health, education and safety;
- Increased risks of experiencing dangerous complications in pregnancy and childbirth;
- Contracting HIV/AIDS;
- Suffering domestic violence; and
- Living in poverty due to their limited access to education and economic opportunities.

Countries with the highest maternal and child mortality rates are the same countries where child marriage is prevalent. In fact, a 10 per cent reduction in child marriage could be associated with a 70 per cent reduction in a country’s maternal mortality rate.33

The main drivers of child marriage

The main drivers of child marriage can be seen through the categories of structural drivers, social and cultural drivers, and context.

<table>
<thead>
<tr>
<th>Structural Drivers</th>
<th>Social and Cultural Drivers</th>
<th>Context</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of economic opportunities</td>
<td>Harmful gender norms</td>
<td>Disasters</td>
</tr>
<tr>
<td>Lack of protective legal/policy frameworks</td>
<td>Dowry and bride price practices</td>
<td>Development</td>
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<tr>
<td>Poverty</td>
<td>Family honour</td>
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<tr>
<td>Lack of access to/availability of basic services such as schools, health, social protection</td>
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In humanitarian contexts: the basics

Humanitarian crises can involve a variety of situations, such as conflict and post-conflict, displacement, epidemics, famine, environmental emergencies and the aftermath of natural disasters.34 Reports and data on the prevalence of child, early and forced marriage in humanitarian settings remain limited. However, the breakdown of family, social and legal networks; real or perceived risks of sexual violence and the consequent “damage to family honour”; and economic strains are all factors that underpin families’ decisions to marry girls at an early age. Fear of sexual violence against women and girls has been 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.35 This emerging data highlights that child marriage in humanitarian 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—such as lack of access to formal and non-formal education, and lack of access to safe and dignified employment opportunities.36

Research shows that 9 out of the 10 countries with the highest child marriage rates are considered either fragile or extremely fragile states, and 7 out of 21 countries with the highest child marriage rates face some of the biggest humanitarian crises. In such situations, child marriage increase with a disproportionate impact on girls.

**Climate change and child marriage**

Emerging evidence suggests climate change is leading to increased risk of child marriage. For example, climate change is exacerbating drivers of child marriage, such as poverty. The increases in droughts and floods directly impact families' livelihood and economic vulnerability. Being displaced due to climate change disaster is affecting families' access to services such as schools: families often face difficulties registering their children in schools and dropping out of school drastically increases the likelihood of marriage, especially for girls.

**Pandemics and child marriage**

Similar to other emergencies, public health emergencies also exacerbate risks of child marriage 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 child marriage.

Specifically, public health emergencies like COVID-19 can increase child marriage both in the acute and recovery phases. Challenges include the loss of household income, higher risk of violence in the household and lack of access to schooling. According to the UN, COVID-19 will disrupt planned efforts to end child marriage and cause wide-reaching economic consequences. The UN estimates that Covid-19 will result in an additional 13 million child marriages taking place that otherwise would not have occurred between 2020 and 2030.

**Livelihoods and child marriage**

Child marriage is often driven by financial stress. Families facing economic hardships such as job loss may feel they have no choice but to marry daughters off as soon as possible to reduce the number of people in the household to feed. Some may believe their daughter may be better off with a family with greater financial resources or stability. Dowry and bride price practices sometimes mean that families in financial crisis have a monetary incentive for arranging a marriage.

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Education and child marriage

Child marriage has a substantial impact on girls' education with a number of significant and long-lasting consequences, such as:

- Dropping out of school and subsequently missing out on opportunities to develop life skills and social networks;
- Reduced employability and lifetime earnings; and
- Intergenerational effects on the educational attainment, life prospects and health of their children.

In some countries every additional year of secondary school for girls may reduce their likelihood of being married as a child by five percentage points or more. In some regions, for instance, girls married at or before 12 years old are 12 percentage points less likely to complete school than those who married at 18 or older. Even larger effects are seen on early childbirth, depending on how much it takes place outside of marriage in a particular country. It is estimated that child marriage contributes, on average, to a loss in earnings of about nine per cent for the women who married as girls. This translates into a loss of about one per cent in earnings for the entire labor force (when factoring in all working men and women), which was valued at $26 billion in the 15 countries reviewed.

Mapping: National Societies and enhancing access to education

Keeping girls in school is one of the best ways to delay marriage. A review by the IFRC found that 76 National Societies have contributed to enabling or enhancing access to education over the past two decades. This has been through the (re)construction or renovation of education facilities (43 NS) or of water and sanitation facilities in or near education facilities (27 NS); the distribution of education supplies (52 NS) or of meals and food in education facilities (25 NS); education-related cash programming (40 NS); safe transportation services from, to or around education facilities (12 NS); and the tracing of education-related documents (5 NS).

WASH and child marriage

In order to keep girls in school, it is important to have girl-friendly and safe schools that provide clean, private toilet facilities. The evidence shows that supplying girls with sanitary pads leads them to feel better about themselves, less anxious about others knowing they are menstruating, and more confident about participating in school. Interventions that promote menstrual hygiene have been shown to make girls feel more comfortable about going out in public during their periods.

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Case study: Lesotho Red Cross

The Lesotho Red Cross Society project “Water, Sanitation and Hygiene Promotion Interventions for Rural Communities in Lesotho” aimed to deliver sustainable access to water and sanitation as well as improved hygienic practices. By bringing water supply closer to homes, it was expected girls would have less distance to travel, reducing the times where they were alone and therefore vulnerable to abduction. Supporting households to build latrines within their yards would also enable girls to use latrines in secure places.

The project also used advocacy campaigns to promote gender rights and raise awareness of child abduction and child marriage. Through WASH clubs, established by the project in schools, teachers raised awareness with students and parents about the risks of child marriage and encouraged students to remain in education. Similar discussions took place at women’s gatherings, initially facilitated by the project team, and continued through the WASH committees and hygiene groups established in the target communities.

Health and nutrition and child marriage

There are many negative health consequences for girls who are married as children. For instance, child marriage is associated with negative consequences for the nutrition of child mothers and their children. Specifically, children of adolescent mothers are more likely to have low birth weight and have poor nutritional status when they are born and throughout their childhood. Moreover, pregnant adolescent girls face greater micronutrient deficiencies, putting them and their children at risk of health complications.50

Although the direct impact of child marriage on maternal mortality ratios is not fully clear, there is sufficient evidence to demonstrate that child marriage increases the risk of children dying before the age of five years, and there are higher national rates of stunting among children born to child mothers.51 In addition, there is substantial evidence that child marriage is associated with a high incidence of STIs, including HIV, among girls.52

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Mental health and psychosocial support (MHPSS) and child marriage

Child marriage is associated with reduced mental health and well-being, particularly for women who marry at a very young age.53 A study in Niger and Ethiopia found that being forced into marriage (often to a stranger) and the burden of marital responsibilities—most notably their partner’s sexual demands, childbearing, and child-rearing—led to significant emotional distress and depression.54

Sexual violence and early pregnancy among girls married as children have lasting effects on girls’ mental health. For example, women who were child brides have been shown to be three times more likely to develop an antisocial personality disorder than those who married as adults.55

SGBV and child marriage

Child marriage is a form of SGBV. It also creates conditions for other forms of SGBV to occur. In particular, Girls Not Brides56 summarizes, from other existing research:

• Girls who marry before 18 are more likely to face violence from an intimate partner throughout their life. The greater the age difference with their husbands, the more likely they are to experience violence;
• Globally, girls who marry before the age of 15 are almost 50% more likely to have experienced physical or sexual violence from a partner as compared to girls who married after 18;
• Child brides are also more likely to believe that a man is justified in beating his wife. Globally, 44% of girls aged 15–19 think a husband or partner is justified in hitting or beating his wife or partner; and
• Child brides are more likely to describe their first sexual experience as forced. Due to the age difference and the power dynamics, they often struggle to assert their wishes to their husbands or to negotiate safe and consensual sex.

Case study: Nepal Red Cross

The Nepal Red Cross Society in partnership with UNFPA is implementing a project against child marriage. The project targets adolescent girls ages 10–19 and their parents, primarily focusing on: formation of adolescent girls’ circles in every local ward and conducting weekly meetings; establishing girl-friendly information corners in schools; delivering social and financial skills training sessions to members of the adolescent girls’ circles; and providing scholarships to adolescent girls to enroll and remain in formal and non-formal education, including the transition from primary to secondary education.

In addition to working with girls, families too are a focus. For example, the Red Cross has created and facilitates parent support groups to encourage dialogue on gender-equitable norms, including delaying child marriage. Also, mass awareness campaigns are delivered through professional drama groups and through door-to-door dialogues that involve adolescent girls and students from local schools.

Theory of change

Overview of the theory of change

A theory of change that outlines how our actions will have an impact is essential for any project aiming to prevent or respond to child marriage.

IFRC is a member of Girls Not Brides, a global network of over 1,000 agencies that work to address child marriage. As such, IFRC has adopted the Girls Not Brides theory of change for projects relating to child marriage. This theory of change is used by agencies around the world as the basic framework to start their planning and can also be used by National Societies in this way.

Adapting the theory of change to meet National Society realities

National Societies can use the theory of change to help them develop a structured approach to their action against child marriage. They can choose what parts are most useful for them and adapt the theory of change as needed.

Girls Not Brides integrated the collective expertise of more than 150 member organizations, partners and other experts to develop a collective theory of change which maps out the critical strategies to address child marriage and to support married girls.

Catalysing strategy: the overarching approach for how change will happen in the long-term

- Ending child marriage will require long-term, sustainable efforts.
- Change will ultimately take place within communities, but has to be supported and catalysed by collective efforts at national, regional and international levels.
- Adequate resources must be made available to support effective implementation of strategies.
- All those working to address child marriage should evaluate programmes, share promising practices, and coordinate their efforts to achieve maximum scale and impact.
- Recognising that child marriage does not take place in a vacuum, efforts to end child marriage should not be isolated from broader development efforts and should play an integral part in achieving development goals around the world.

Strategies and outcomes: the four overarching, mutually-reinforcing approaches to addressing child marriage and to supporting married girls

1) Empower girls

Strategy: For girls to refuse marriage, they have to understand and “own” their rights, and be able to support their own life plans. A wide range of programmes should invest in girls, their participation and their well-being.

Outcomes
- Girls are increasingly aware of their rights.
- Girls have the opportunity to develop solidarity with one another through peer groups and collective action.
- Alternative economic and social roles for girls and women exist and are valued.
- Married and unmarried girls have increased access to health, education, economic and legal support.
Case study: Australia Red Cross: “Free to Choose, Empowered to Respond” project

This project shifts the focus from what makes people susceptible to forced marriage, to what keeps people safe, healthy, and able to prevent or escape a forced marriage—a form of family violence. Empowerment events co-designed with bicultural workers will facilitate meaningful, positive collaboration with communities that self-identify as being affected. Together we strengthen locally-developed positive prevention strategies through increased opportunities to develop social capital; build self-confidence; foster stronger, more respectful relationships; and increase capacity to access appropriate support.

2) Mobilize families and communities

Strategy: Pressure to marry young usually comes from girls’ families and communities and the broader cultural attitudes that influence these groups’ attitudes and behaviour. Work together to address these deep-rooted values and traditions by engaging families, communities, young people and the media to change attitudes and behaviours related to child marriage.

Outcomes
- Families, communities and young people are increasingly aware of both the harmful impact of child marriage and the alternatives available.
- Families, communities and young people value alternatives to child marriage.
- Families and communities prefer not to marry girls as children.
- Men prefer not to marry girls who are still children.
- Use of media to inform and support norm change to end child marriage is increased.
Case study: Malawi Red Cross

The Malawi Red Cross mobilizes families and children against child marriage through a comprehensive set of activities. These include focusing on education through bringing parents, children and influential people in the communities (teachers, local leaders, etc.) together to discuss the dangers of child marriage, and highlighting the different roles that parents and local networks and agencies can take to collectively prevent child marriage. In addition, girls who have experienced child marriage advise other girls on the disadvantages of getting married at an early age, and girls are linked with positive role models: educated, working women who have delayed marriage and pregnancies until adulthood. 1,500 girls and boys with barriers to accessing school are also supported to attend school.

The Red Cross also works with local authorities to improve cultural bylaws that promote child marriage and are harmful to children. To complement this, the Red Cross also supports children and their families to take perpetrators to court.

3) Provide services

Strategy: There are many structural barriers that can push girls into child marriage and prevent them from accessing support once they are married. Provide services across sectors that reinforce one another and are tailored to the specific needs of girls at risk of marriage and specific needs of married girls.

Outcomes

- Girls have increased access to safe, quality formal and non-formal education.
- Adolescent girls, both married and unmarried, have increased access to health services.
- Health and education services establish protocols on identifying the warning signs and addressing the risks of child marriage.
- Girls’ economic security is improved.
- Programmes increase their commitment to prevent and mitigate risk of child marriage.
Case study: Australia Red Cross: the Support for Trafficked People Programme

This government-funded programme delivered nationally by the Australian Red Cross provides assistance to survivors of human trafficking, slavery and slavery-like practices, including forced marriage. The programme aims to assist clients in meeting their safety, security, health and well-being needs, and to develop options for life after they leave the Support Programme. Some of the services include but are not limited to: short-term case management support, access to suitable accommodation, medical treatment, counselling and referrals to legal and migration advice, skills development training and English-language classes, as well as longer-term support for those who choose to participate in a criminal justice process. The programme also offers intensive support for up to 200 days to clients who are in, or at risk of, a forced marriage—often young women and girls with complex needs who may not wish to take part in an investigation or criminal justice process against those who are forcing them to marry.

4) Establish and implement laws and policies

Strategy: Governments should demonstrate their commitment to end child marriage by developing strong laws and policies, and putting the money and institutions in place to enforce them.

Outcomes
- National laws reflect international and regional human rights standards.
- Robust legal frameworks set 18 as the minimum legal age for marriage and protect girls’ and women’s rights.
- Governments develop policies with adequate resourcing across Ministries to increase educational, economic and social opportunities for married and unmarried girls.
- Civil registration systems for birth and marriage are strengthened.
- National/regional/community institutions have increased accountability and increased monitoring.
Case study: Senegal Red Cross

The Senegalese Red Cross is working against child marriage through strengthening implementation of laws. Specifically, the Red Cross trains paralegal volunteers who work in local communities to detect, sensitize and refer children and families affected by child marriage to structures called “rights shops.” A rights shop is run by a magistrate-judge responsible for bringing justice closer to local communities.

When a case of child marriage is detected in the community, the paralegal volunteer approaches the family of the girl to engage in a dialogue, advocacy and awareness-raising on children's rights. If that fails, the volunteer directs the child to the rights shop, which informs her of her rights using legal processes to protect her. Girls are also then provided vocational training and education support.

Results: changes needed in the behaviour of individual girls, families, communities, and others

• Girls at risk of child marriage participate more in decisions that affect them, including regarding marriage.
• Girls at risk of child marriage benefit from improved educational and economic opportunities as alternatives to child marriage.
• Girls are better able to avoid early pregnancy and to refuse unwanted sex.
• Married girls are better protected from violence, exploitation or abuse.
• Married girls increasingly access and use services and supports of all kinds.
• Married girls increasingly access divorce, annulment and child custody.
• Community, traditional and religious leaders take greater action to end child marriage and realize the rights of girls.
• Community, traditional and religious leaders increasingly support alternative roles for girls beyond marriage.
• Men and boys increasingly take action to end child marriage.
• Families engage less in exchange of dowry and bride price.
• Service providers take greater action to prevent child marriage and support the needs of married girls.
• Law enforcement officials increase implementation and enforcement of legal frameworks to prevent child marriage and protect married girls.
• Law enforcement officials increase use of civil registration systems for birth and marriage.

Impact: the long-term change we want to achieve

✓ Girls can decide if, when, and whom to marry.
✓ Married girls lead healthy, empowered lives.
**Problem statement**

Every year approximately 15 million girls are married as children across countries, cultures, religions, and ethnicities. Child marriage is rooted in gender inequality and in the low value accorded to girls, and is exacerbated by poverty, insecurity and conflict. It denies girls their rights, choice and participation, and undermines numerous development priorities, hindering progress towards a more equal, healthy and prosperous world.

**Vision**

A world without child marriage where girls and women enjoy equal status with boys and men and are able to achieve their full potential in all aspects of their lives.
Assessment and design

An assessment is the first step in a National Society determining what role it can take to prevent or respond to child marriage. In particular, an assessment can be used:

• To identify or better understand the problem of child marriage in the local setting;
• To identify or better understand potential and priority groups of audiences; and
• To inform the design of your project activities and plans.57

The level of detail for an assessment depends on several factors like local capacity; whether it is a development setting, disaster setting or recovery setting; how accessible information and local services are; and what other pressures are present. The minimum should be a rapid assessment.

Case study: Egypt

The Egyptian Red Crescent began its work to address child marriage through an assessment that covered children aged 13 to 17, their parents, school teachers, school principals, social workers, and community leaders from 15 schools and 162 households.

The assessment found that most parents believe it is completely wrong to get married before the age of 18. A significant minority, however, believed that child marriage depends on the situation of the boy or girl. Parents also emphasized the importance of education, saying that 20 years of age or above is a better time for marriage because girls will by then have completed studies and be responsible enough to take care of a household. Other parents were happy for their girls to become “engaged” while still in primary school, waiting until they are older than 18 years to proceed with the marriage.

After the assessment, 75 volunteers participated in three days of training on Community Based Health and First Aid (CBHFA), Psychosocial Support and SGBV. They then began implementation of a comprehensive project in the target communities.

The following guidance is adapted from the Child Protection Working Group’s *Child Protection Rapid Assessment Toolkit.*

These are the actions National Societies can take to assess the local needs and capacities and to determine what actions they can take to contribute against child marriage.

**Conduct a desk review**

Collect and analyse information about existing child protection, SGBV, and child marriage risks through secondary data review. Refer to the *IASC GBV Guidelines* for details on the types of information needed. The review should also include a review of household economic status and girls’ engagement in social networks, including their access to protection services.

**Identify key stakeholders**

Key stakeholders for any activities to address child marriage include:

- **women, men, girls boys**
- **SGBV-specialized actors**
- **service providers: health, education, livelihood**
- **community group, women-led organizations**
- **traditional, religious and community leaders**

**Coordinate and link up with other multi-sectorial assessment processes**

The key points are:
- Use existing coordination mechanisms rather than creating new ones that do the same thing;
- Coordinate with the protection cluster, child protection sub-cluster, GBV sub-cluster, mental health and psychosocial sub-cluster, and/or education cluster or working group. Also, it is important to work with sexual health and reproductive rights (RHR) agencies and experts; and
- Agree on a context-specific “what we need to know” (WWNK): *WWNK* is key information about the situation of children and existing capacities. This information is vital in informing immediate programming priorities. Deciding on context-specific WWNK is the foundation of an assessment.

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Ethical considerations for undertaking a rapid assessment

An ethical approach to rapid assessments requires:

• A commitment to follow-up action, as necessary;
• Identifying and finding ways to support community coping mechanisms that do not violate basic rights of, or harm, children;
• Considering potential negative effects of the assessment exercise (such as creating fear, or stigmatizing a person or group through attracting unnecessary attention to them);
• Not raising false expectations by being honest with communities about the objectives of the assessment before and during the assessment; and
• An analysed desk review.

Sensitive information

It is your responsibility to ensure the confidentiality of the information you have been entrusted with. Confidentiality means the restrictive management of sensitive information (e.g., names, incidents, locations, details, etc.) that has been collected before, during and after child marriage assessments. Sensitive information must be protected and shared only with those people (service providers, family, etc.) who need the information for the Best Interest of the child. Shared information should be stripped of any details of the source, unless required to ensure appropriate action—in this case, written consent from the source is needed.

Informed consent is an integral part of any assessment activity that involves direct acquisition of information from people, regardless of their age. Informed consent is the voluntary agreement of an individual who has the capacity to give consent, and who exercises free power of choice.

Responding to urgent situations

An ethical approach to assessment also requires a commitment to respond to urgent situations. This means responding appropriately when a child's life and/or well-being are in immediate danger.

Sensitive questions

Sensitive questions should only be asked by well-trained interviewers. If assessors do not have a strong background or adequate training in child protection, these questions should not be asked. It is important to speak with local people or those with an in-depth knowledge of the protection situation in the country or context so that:

• You know whether and to what degree flagged issues may be sensitive or politicized;
• You can decide whether these issues should be included, based on the known capacity of the assessors; and
• You can adapt the tools to ensure that appropriate terminology and language are used in assessing these sensitive issues.

Form an assessment team

It is important that the team has technical oversight and administrative support. The initial activity checklist of the assessment team may include:

• Developing a time-bound assessment plan that clearly assigns responsibility to different members;
• Deciding on the overall geographic scope of the assessment;
• Determining logistical and human resource needs;
• Costing the operation and identifying funds and in-kind contributions;
• Analyzing risks and developing contingency plans;
• Forming a smaller technical group to develop the sampling, adapt the tool, and undertake the analysis and interpretation of the results;
Agreeing on how the data collection process will be supervised and supported; and
Agreeing on the modalities of sharing the results with others.

Other tasks of the project task force may include:
• Outreach to mobilize the participation of key protection, gender or disaster response actors;
• Contingency planning, including monitoring of the humanitarian situation and revising plans as necessary;
• Time management of the assessment process;
• Linking and coordinating with other assessment processes;
• Ensuring logistical arrangements and support; and
• Developing a plan for efficient use of the results by all relevant actors.

Focus group discussions (FGDs)

FGDs require a high level of expertise plus significant amounts of time for analysis of the information they produce. If experienced staff and volunteers are available, FGDs may be used as a complementary source of data. But it is crucial that it is done in ways that do no harm.

Direct interviews with children are discouraged for a rapid assessment, unless highly-skilled assessors are available. If assessors experienced in dealing responsibly with children are available, adolescents of 15 to 17 years of age could be interviewed as key informants. For younger children, other methodologies might be more appropriate.

Do no harm

When conducting an assessment or taking any actions against child marriage, individuals might want to stop a marriage, but doing so could bring harmful unintended consequences to the child, family and other actors. The best response in this situation is to:
• Understand the child’s situation and what they want to happen;
• Assess and plan for safety;
• Provide information and support; and
• Connect the child to people and services that will be supportive and useful.

The safety and Best Interests of the child need to be prioritized. If a child is facing an immediate safety concern, connect them with services that can provide short-term protection and potentially lead to a longer-term protective option.

In addition:
• Ensure at least 50% of personnel involved in the project are female;
• Require all staff and volunteers involved in the project be trained on child protection and SGBV core concepts and safe referrals, PSEA and child safeguarding;
• Ensure staff and volunteers have the latest SGBV and child protection referral pathways available so they can safely refer according to agreed standards.
• At a minimum, staff and volunteers should have accessed the online briefing on SGBV safe referrals: volunteeringredcross.org/en/events-and-training-menu-sokoni

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Advocacy

Advocacy is an essential supportive element that should be built into any project against child marriage from the start. This is much more effective than advocacy being an afterthought—something added on when you think you need it.

Advocacy is one action that some National Societies might choose to include in their actions against child marriage. When advocacy is included, it is important to take a structured approach based on Red Cross and Red Crescent experience.

The following steps are adapted from IFRC’s Disaster Risk Reduction: A Global Advocacy Tool.60

Step 1: Identify advocacy issues related to child marriage

The assessment for the project should provide information on the key advocacy issues related to child marriage, in the locations where the project is being implemented.

Step 2: Understand the issues and collect evidence

Good advocacy is based on strong information, so it is important that you thoroughly understand the issue you plan to advocate on. This involves asking questions such as:

- What is the problem, and how big is it?
- What are the root causes?
- What will happen if nothing is done? and
- What is it precisely that we need to change?

Once you have researched the issue, you can start to organize the information into messages that help you communicate clearly.

An IFRC study on SGBV and disasters in South-East Asia

A 2018 IFRC study on SGBV and disasters in Indonesia, Laos PDR, and the Philippines61 found:

- In Laos PDR, 47 per cent of respondents reported that women and girls felt distressed by the rise in child marriage after the disaster;
- In the Philippines, 30 per cent of respondents reported women and girls felt distressed by the rise in child marriage after the disaster;
- In Indonesia, 18 per cent of respondents reported that women and girls felt distressed by the rise in child marriage after the disaster.

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Step 3: Identify your targets

When it comes to knowing whom to involve in advocacy, and how, there are no hard and fast rules. It is always important to start by mapping the stakeholders—in other words, the people, groups, organizations or systems that are affected by the issue, or that affect it.

A good way to identify appropriate stakeholders is to start by asking questions such as:

- Are there people affected whose voice is not heard? If so, what must we do to include them, or to convince them to participate?
- Who are the representatives of those affected?
- Who is responsible for providing services related to this issue?
- Who is likely to mobilize for, and against, our proposals?
- Who can make the advocacy effort more effective through participating, or less effective through not participating or through outright opposition? and
- Who can contribute financial and technical resources to our advocacy activities?

Who is with you? Who is against you? Not everyone will be on your side. If they were, there would be no need for advocacy in the first place. So, the next step is to identify who is a potential ally, and who is not. Those who stand with you are most likely to be found among organizations and individuals who advocate on similar issues around child marriage. You may be able to make use of existing alliances.

However, choose your partnerships and alliances with care. Your National Society will already have credibility, which makes you a useful ally. So, you will certainly add value to your partners—but will they add value to your efforts? What are they hoping to gain from the alliance? The bottom line is always this: the hallmark of the Red Cross Red Crescent must always be principled humanitarian action based on a neutral, impartial and independent approach. So, your advocacy activities must in no way compromise the Fundamental Principles—and nor should your alliances with partners. Having gathered your allies, consider those stakeholders who oppose your stance or resist the approach you are promoting. Get to know them, and make sure that they are well informed of the details of your proposals. Then, look for common ground on which you can build bridges.

Once you have identified the stakeholders, you need to ask who can bring about the changes you are advocating for. In other words, who has the power? The answer to that question will reveal your target audience.

Your target audience will be comprised of two groups:

- **The primary audience**: decision-makers who have the authority to bring about change directly. They may include government ministers, agencies and departments, senior figures in national or local administrations, members of parliament, donors and their governments.
- **The secondary audience**: those who can influence the decisions of the primary one. They include the media, community members and leaders, teachers, multilateral organizations, NGOs, research institutes, professional bodies, any source you know which advises or informs decision-makers.

Whoever your audience is made up of, make sure you understand their perspectives and priorities, look at the issue from their point of view, and consider what might encourage them to support you. In other words, what is in it for them?
**Case study: Norway**

The Norwegian Red Cross Helpline programme encompasses a wide range of activities including a helpline; conducting advocacy, raising awareness and delivering actions aimed at prevention; and supporting persons who have been married as children. The helpline provides information and guidance to young people subjected to honour-related violence, child marriage, forced marriage, and negative social control. The helpline staff can be reached by phone, chat, e-mail or in person. It also assists and facilitates children and young people to establish contact with the public authorities and the public support system.

The Norwegian Red Cross also advocates with politicians to change Norwegian law and regulations to better protect children from child marriage and forced marriage. It does this in a variety of ways, including direct conversations and participating in seminars, forums and meetings where representatives from government authorities are present. In addition, it contributes to research on honour-related violence. The Norwegian Red Cross experience has been acknowledged in different national action plans related to honour-related violence, child and forced marriages.

**Step 4: Clarify your vision**

By this stage in the process you will have identified the issue and your target audience. The next step is to ensure that your vision is clearly defined, and to identify precisely what must be accomplished along the way if you are to realize that vision. This means formulating goals and objectives. The goal is your wider vision for long-term change, while the objectives are the specific outcomes that need to be completed in order to bring that change about. Before you put together your advocacy strategy, you need answers to the following questions:

- Whom will you ask to do things?
- What will you ask them to do?
- Which specific goals will you want them to achieve?
- When must these goals be completed?

The advocacy that you would then undertake needs to have SMART objectives. In other words, objectives that are specific, measurable, achievable, realistic and time bound. This is a golden rule of any advocacy strategy that directly supports programme activity.
Disaster laws and policies

The IFRC We Need To Do Better report examines and sets specific, practical recommendations for governments to enhance their laws and regulations to protect children in disasters.

In disasters, as protection systems come under strain, stress in the family increases, and the inequalities and power imbalances of everyday life are laid bare and made more acute, children are at risk of many harms, including child marriage.

The report outlines the actions governments can take. This includes improving specific content in their laws and regulations such as those relating to meeting children's Best Interests, being gender responsive, and drawing on the Minimum Standards for Child Protection in Humanitarian Action. The report also underscores ways that governments can apply coordinated, multi-level and iterative approaches to implementing domestic laws to better protect children.

Step 5: Tailor the message for the target audience

Once the message and audience have been identified, you need to think about how to convey that message. Most importantly, you need to keep it clear and straightforward but make it powerful. Your message needs to explain what you are proposing, why it is worth doing, and how it will improve the situation you are concerned about. It must inform, persuade and motivate your audience to act.

This step is all about finding out about the people, adapting the language accordingly and deciding how to introduce what you want to do, by tailoring the message to the circumstances.

Step 6: Deliver your message

Once the message and audience have been identified, you need to think about how to convey that message. It is important to remember that people are bombarded with messages competing for their attention—from government information about forthcoming elections to marketing campaigns selling soap. Your message will be easy to forget or ignore unless it captures the hearts and minds in your target audience. So, be creative. Try to attract people's attention through innovative approaches—perhaps through humour, aesthetics, or by using surprising tools to illustrate key concepts.

Some of the most brilliant and effective advocacy ever conducted by the Red Cross Red Crescent has been in art exhibitions and music events where our Fundamental Principles have been communicated through cultural expression. National Society public awareness and education programmes excel in the use of performing arts. Drama, puppet shows, song and dance have long been changing minds and saving lives by captivating audiences on every continent, and there is a growing interest in video and other digital forms of communications. If you are considering options, draw on the know-how and experience that already exists within your National Society. Media relations remain a key component of any public advocacy programme, and media can exert influence both on the primary audience and within at-risk communities.

Two approaches that can have a particular impact are: hard data and personal stories. Data on the rates, causes and consequences of child marriage can underline the problem using statistics, and these can then be used towards evidence-based advocacy. The use of case studies—that meet ethical standards and do not place children or families in any harm—can help humanize the problem and show the real-life impact from a personal perspective, including the lifelong effect of child marriage in someone's life.
Case study: South Sudan

In Terekeka county and in two rural areas of Juba (Kwarjik and Nyaying Payams), South Sudan Red Cross in partnership with the Netherlands Red Cross works with the Ministry of Health, the Ministry of Gender, Child and Social Welfare and the Ministry of Interior to prevent and respond to SGBV. As the project has been implemented, a high presence of child marriage with a high level of school drop-out of girls as well as cases of domestic violence and rape related to refusal of marriage proposals have been observed.

More trust has been built in local institutions: some cases of women, youth and teachers going to report child marriage cases to local justice or police have been reported. Local service providers are more aware of the issues related to child marriage and are now willing to support the South Sudan Red Cross in combating the problem.

Step 7: Monitor and evaluate

Monitoring and evaluation can help tell how close you are to meeting your goals and objectives. It can reveal what worked well, what did not work so well, how things could be improved, and what is needed for that improvement to take place. It is also an effective learning tool. Analyzing the strengths and weaknesses of advocacy efforts helps identify and correct errors, and highlights good practice.

Monitoring should look at progress to achieve goals and targets and measure changes at several levels: community knowledge attitudes practices, change in legislation, change in girls’ access to services and how they feel empowered, etc. Monitoring should also be as participatory as possible, through constant consultation with communities, families, girls so that corrective measures can be taken during the implementation phase of the programme.
Child safeguarding

Each National Society working to prevent and/or respond to child marriage should have a Child Safeguarding Policy and child-safe procedures. Child safeguarding is everybody’s responsibility, including in emergencies. It is unacceptable for any Movement person—volunteers, staff, consultants, contractors, or anyone representing the Movement—to harm a child, whether in person or online.

Like all humanitarian agencies, National Societies are expected to follow the Minimum Standards for Child Protection in Humanitarian Action in order to protect children from all forms of violence, abuse and exploitation in our operations.

If your National Society has a Child Safeguarding or Child Protection Policy, it should be applied throughout all activities relating to child marriage. If your National Society does not have a Child Safeguarding or Child Protection Policy, you can work from the IFRC Child Protection Policy.

Minimum actions

It is essential that National Societies follow the core areas of child safeguarding:
1) Have a Child Safeguarding Policy, including referral and reporting procedures in place, and implement it;
2) Ensure all personnel are trained on child safeguarding;
3) Ensure no personnel marry a child, anyone under 18 years old, regardless of the national legislation or local customs; and
4) Recruit, screen, and employ personnel using child-safe practices.

The IFRC Child Safeguarding Policy and support tools can be found at: media.ifrc.org/ifrc/document/child-safeguarding
Referrals

Internal within National Societies

Whom can I contact if I have concerns about a child’s safety?

- If you know or suspect any child is at immediate risk of violence, abuse or exploitation, please contact appropriate local authorities and follow local procedures.
- If you are concerned any personnel of the Red Cross or Red Crescent has harmed a child, contact SafeCall, an independent and confidential service used by the IFRC.
  Phone +44 207 696 5952 | E-mail ifrc@safecall.co.uk | Online www.safecall.co.uk; OR
- Report concerns to the IFRC Office of Internal Audit and Investigations (OIAI):
  report.concerns@ifrc.org. The OIAI internal investigation team manages investigations.

Community-level62

A safe referral is the process of directing a person who has come to the Red Cross Red Crescent to another trusted service provider because they require help that is beyond the expertise or scope of work of the Red Cross Red Crescent.

A referral can be made to a variety of services—for example, health, psychosocial activities, protection services, nutrition, education, shelter, material or financial assistance, physical rehabilitation, community centres and/or a social service agency.

When a child’s needs are beyond Red Cross Red Crescent mandate as well as organizational and personal capacities for providing quality service, children need to be referred to an organization able to assist the child and her family with their needs.

A safe referral must comply with the following five principles

1. Do no harm
   - Don't take any actions which could harm the psychological condition, safety or rights of the child, her family, or yourself;
   - Don't promise anything that you cannot keep; and
   - Keep an updated list of trusted and relevant service providers.

2. Access
   - Refrain from making referrals in which the payment for the service is not covered; and
   - Ensure services are safe to access for the child and her family.

3. Dignity and respect
   - Clearly explain the referral procedure and its implications to those involved.

4. Non-discrimination
   - Provide equal and fair services to any child in need without discrimination.

5. Confidentiality
   - Share only the necessary and relevant information with others involved in providing assistance and support.

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62 This section is adapted from: Danish Red Cross. (2019). How to Make Safe Referrals: A Pocket Guide.
Eight steps to a safe referral

Step 1: Identify the problem: what does the child need?
Where a child is at risk of any form of violence or where a child’s legal rights are being violated, it is essential for Red Cross and Red Crescent personnel to report the situation and to help the child access support.

Where appropriate and possible, include the child’s caregiver in the following conversation.

<table>
<thead>
<tr>
<th>Do</th>
<th>Do Not</th>
</tr>
</thead>
<tbody>
<tr>
<td>If translation is needed, ask the child to choose someone they feel comfortable with translating.</td>
<td>Assume you know what the child wants or needs.</td>
</tr>
<tr>
<td>Ask the child if they feel comfortable talking to you in your current location. Find a safe place where nobody can overhear the conversation. For example, stay in sight of others but out of hearing, or if in a close location, ensure two Red Cross or Red Crescent personnel are present and ideally of the same gender as the child.</td>
<td>Pressure the child into sharing more information beyond what they feel comfortable with. Very specific details are not important to your role in listening and providing information on available services.</td>
</tr>
<tr>
<td>Provide a listening ear, free of judgement.</td>
<td>Discriminate for any reason including age, marital status, disability, religion, ethnicity, class, sexual orientation, or gender identity.</td>
</tr>
<tr>
<td>Make sure you understand the child’s needs by repeating back to them what you understand they have said.</td>
<td>Make promises you can’t keep or exaggerate your abilities for helping.</td>
</tr>
<tr>
<td>Stay calm (do not overreact).</td>
<td></td>
</tr>
<tr>
<td>Explain that the need described is beyond your expertise or the scope of the service provided by Red Cross Red Crescent, but that you will contact other organizations.</td>
<td></td>
</tr>
<tr>
<td>Take immediate action and ensure the child is safe.</td>
<td></td>
</tr>
</tbody>
</table>

Step 2: Identify which organization or agency can meet the beneficiary’s need
Identify other service providers that may be able to assist the child and/or the caregiver with their needs:
- Prepare the list of service providers prior to the encounter with the child. If not possible, this step must be done ad hoc by researching relevant organizations or state services for the specific case.
- Don’t skip procedures securing alignment with the principles of a safe referral because of time constraints.

See IFRC’s Quality Assurance Checklist for PGI Referrals, Section 3.2; and

Step 3: Contact the service provider to confirm eligibility.
Contact other service providers in advance to learn about their services and eligibility criteria, unless the specific type of referral is commonly done with the specific service provider. Requested information should include what the service provider’s referral protocol entails and whether they will be able to assist the child.

Step 4: Explain the referral to the child and/or caregivers
Provide information about available services, and explain the referral to the child and/or caregivers:
- Provide updated information and explain which services are provided;
- Explain where the service provider is located;
- Explain how the child and/or caregiver can get to the service provider and receive services; and
- Explain why you are recommending the referral.
Step 5: Document consent
Parental/caregiver consent should be obtained when it is a child being supported.

Step 6: Make the referral
- Use the referral form agreed on with the service provider.
- If there is no agreement on official forms or national procedures which must be complied with, it is recommended to fill out the inter-agency referral form in triplicate (one copy for the referring agency, one copy for the child involved/caregiver, and one copy for the receiving agency).
- Provide the receiving agency's contact information to the child's caregivers, if present, and accompany them to the receiving agency if needed. Referrals can also be made over the phone (if in an emergency), via e-mail or through an app or a database.

Step 7: Follow up with the child, caregivers, and receiving agency
Follow up with the child, caregiver, and the receiving agency to ensure that the referral was successful and to exchange information, where the child's consent allows for this.

Areas for follow up include: Did the child and/or caregivers receive the needed services? What is the outcome? Is the child and/or the caregiver satisfied with the referral process, and the services received? Is the child safe, and is the child feeling safe?

Step 8: Securely store information and keep confidentiality
- All referral forms and case files should be stored in secure (locked) cabinets.
- Never discuss cases in public.
- You should refrain from taking confidential documents outside of your office.
- You should never leave referral forms opened without supervision (e.g., on your computer or table).

What to do when referral is not possible
It may sometimes be better not to make a referral if the services are not compliant with the principles of a safe referral. In some situations, referral pathways may not be available. Check if adequate services can be found in the wider region and if community supports are available.

Provide calm and comfort with psychological first aid (PFA) (“Look, Listen, Link”).

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**Psychological first aid with children**

The IFRC Psychosocial Support Reference Centre training tool on Psychological First Aid with Children aims to enable participants to:

- Know more about children's reactions to distress;
- Know what psychological first aid for children is, and what it is not;
- Understand the three action principles of “Look, Listen, Link” in relation to children;
- Have practised providing PFA to a child and caregiver in distress;
- Have considered complex reactions and situations; and
- Be aware of the importance of self-care when helping others.
Volunteers

The role of volunteers

Volunteers are at the very heart of all programming by Red Cross and Red Crescent National Societies. In terms of programming to prevent or respond to child marriage, volunteers may be part of:

- Assisting with local assessments to identify needs, capacities, and priority directions;
- Coordinating with local stakeholders to help facilitate meaningful community involvement in co-designing programming;
- Identifying local referrals, assessing the capacity and quality of local referrals, compiling referrals, and sharing those with other volunteers;
- Delivering education sessions to communities;
- Providing support on specific areas they are trained on such as WASH, livelihoods, health, etc.; and
- Supporting monitoring through collecting regular feedback from women, girls, men and boys on child marriage prevention or response programming, and their evolving needs and challenges.

Selecting volunteers

Selection of volunteers should be based on an understanding of local context and what is most appropriate for the specific community you are working with.

In some places it may be appropriate for females to discuss child marriage with other women and girls, and for male volunteers to discuss with men and boys. In other places it might be different.

It is important to ask and listen to community members themselves—especially members from diverse backgrounds—for guidance on what is locally appropriate. Do not rely only on National Society staff who may come from another city, area or background.

Considerations for selecting volunteers for activities to prevent or respond to child marriage are:

- **Sex of volunteers:** It is important to include both female and male volunteers in activities to address child marriage. Females and males may need to be consulted separately, with female volunteers discussing with women and girls, and male volunteers dialoguing with men and boys. Depending on the context, after initial dialogue women and men may be able to be mixed and have a discussion together around child marriage.

- **Culture and language:** An understanding of local culture and language is essential for meaningful and accurate consultations, exchange of information, gathering feedback and developing approaches against child marriage.

- **Age:** Adolescent girls might find it easier to discuss and to be more open about child marriage when talking to adult female volunteers, rather than volunteers who are their peers. Older women and men may find it challenging, or even embarrassing or inappropriate, to discuss personal or intimate matters with younger volunteers.

- **Trusted sources of information:** When selecting volunteers, it is essential to understand what sources of information local communities, and people of different genders, ages, and backgrounds, trust. For instance, women and girls may trust information coming from their mothers, aunts, teachers or local health workers, rather than from agencies or government departments. Men might trust information coming from community or religious leaders, or health workers, or from other men in positions of authority. Knowing who is trusted is critical for effectively addressing cultural taboos, myths, and misinformation around child marriage.
• **Existing volunteers**: Where National Societies have existing local volunteers for topics such as protection, gender and inclusion, education, psychosocial support, community health, or livelihoods and cash, they can be activated—where possible and appropriate—for addressing marriage. Existing volunteers would already be trained on Red Cross and Red Crescent Fundamental Principles and working with communities.

• **Partnering with local leaders**: Where available, local teachers, parents' groups, religious leaders, and local influencers can be utilized to engage with women and girls and men and boys.

**Training volunteers**

Child marriage is a sensitive and often taboo topic.

Having well-trained, knowledgeable, and confident female and male volunteers reflecting different ages and backgrounds is essential.

Training volunteers on child marriage prevention and response is complicated and requires enough time, expert facilitators and appropriate tools. Child marriage can be incorporated into broader trainings on sexual and gender-based violence or child protection, but it is best done as a specific and "stand-alone" training.

All volunteers involved in activities related to child marriage prevention and response should have:

• An understanding of:
  • what child marriage is;
  • how it is a child rights violation;
  • the drivers of child marriage, including unequal power and gender relations;
  • the negative health, psychosocial, educational, and economic consequences on girls, boys, and families over a lifetime;
  • effective approaches to prevent or respond to child marriage; and
  • knowledge on what local referral services are available and how to access them.

• Skills to approach child marriage in constructive and locally-appropriate ways that engage communities in solutions;

• Education on the National Society’s or IFRC’s Child Safeguarding Policy;

• The confidence and capacity to speak professionally to communities about child marriage prevention and response; and

• A firm personal commitment against child marriage in their own lives.
Partnerships and key resources

Partners

In order to make an impact against child marriage, it is advantageous for National Societies to work with appropriate local agencies that also work against child marriage. This can include local NGOs working on SGBV, child protection and other related problems.

National Societies can also reach out to Girls Not Brides, if it has a local or regional office, and also its local partners. See: www.girlsnotbrides.org/about-girls-not-brides/our-members

The IFRC and UNICEF have a Letter of Agreement to work closer together on problems relating to children, including child protection. See: media.ifrc.org/ifrc/document/unicef-ifrc-sign-new-agreement. As such, collaborating at a local level with UNICEF can be explored to find ways to build on each agency’s strengths and capacities.

In emergencies, the CP Area of Responsibility Helpdesk and the GBV Area of Responsibility Helpdesk can be accessed for information and guidance. See: www.cpaor.net/HelpDesk and gbvaor.net/sites/default/files/2019-11/GBV%20AoR%20Helpdesk%20Flyer.pdf

Peer support approaches

Wherever possible, National Societies may choose to explore opportunities to organize peer support with other National Societies, especially those in nearby locations and/or those taking similar approaches, to share learning and experiences around prevention of and response to child marriage.

Key resources

Girls Not Brides website, with a library of tools. www.girlsnotbrides.org


IFRC

National Societies can contact their local or regional IFRC protection, gender and inclusion (PGI) focal point for technical support and to identify ways to engage with other partners or National Societies. Health workers, rather than from agencies or government departments. Men might trust information coming from community or religious leaders, or health workers, or from other men in positions of authority. Knowing who is trusted is critical for effectively addressing cultural taboos, myths, and misinformation around child marriage.
THE FUNDAMENTAL PRINCIPLES
OF THE INTERNATIONAL RED CROSS
AND RED CRESCENT MOVEMENT

**Humanity**
The International Red Cross and Red Crescent Movement, born of a desire to bring assistance without discrimination to the wounded on the battlefield, endeavours, in its international and national capacity, to prevent and alleviate human suffering wherever it may be found. Its purpose is to protect life and health and to ensure respect for the human being. It promotes mutual understanding, friendship, cooperation and lasting peace amongst all peoples.

**Impartiality**
It makes no discrimination as to nationality, race, religious beliefs, class or political opinions. It endeavours to relieve the suffering of individuals, being guided solely by their needs, and to give priority to the most urgent cases of distress.

**Neutrality**
In order to enjoy the confidence of all, the Movement may not take sides in hostilities or engage at any time in controversies of a political, racial, religious or ideological nature.

**Independence**
The Movement is independent. The National Societies, while auxiliaries in the humanitarian services of their governments and subject to the laws of their respective countries, must always maintain their autonomy so that they may be able at all times to act in accordance with the principles of the Movement.

**Voluntary service**
It is a voluntary relief movement not prompted in any manner by desire for gain.

**Unity**
There can be only one Red Cross or Red Crescent Society in any one country. It must be open to all. It must carry on its humanitarian work throughout its territory.

**Universality**
The International Red Cross and Red Crescent Movement, in which all societies have equal status and share equal responsibilities and duties in helping each other, is worldwide.
The vision of the IFRC is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.