Creating an Enabling Environment for the Advancement of Women and Girls

A Briefing Paper to the United Nations Commission on the Status of Women at its 50th Session

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Prepared by World Vision
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All photos are taken by World Vision staff
In March 2006, the world will once again turn its attention to the status of women as the United Nations 50th Commission on the Status of Women meets in New York to evaluate the progress made and challenges encountered in the empowerment of women and girls.

World Vision strongly endorses the work of the Commission on the Status of Women. As an organisation partnering with other NGOs and governments around the world, we are dedicated to building societies where girls and boys, and women and men, enjoy equal status and are able to realise their full potentials, regardless of their gender, ethnicity or other diversities. This briefing paper to the 50th Commission on the Status of Women focuses on World Vision’s work to empower and advance the status of women and girls while assisting the entire community in realising its full potential. Our policy and goal is to build gender equity at local and at international levels through advocacy and through our grassroots level programmes with the marginalised.

The following reports and recommendations are from World Vision’s gender and development, relief, and advocacy experts in the Sudan, Uganda, Ethiopia, United Kingdom, Guatemala, Sri Lanka, Indonesia, India, and the former states of the Soviet Union. They focus on the challenges and promising practices for the advancement of women and girls in the areas of education, health, work, and those trapped in situations of violence.

Education is key to the advancement of girls and women. World Vision is involved in bringing education to the communities we work with in 97 countries. The reports from the Sudan, Ethiopia and India capture the socio-economic challenges girls and women face due to the lack of education and detail how World Vision is addressing this need.

The report from the post-communist European countries explores the strengths and weaknesses of the communist’s efforts to empower women and areas where these weaknesses are being addressed. The report from Guatemala explores the stigma associated with HIV and AIDS and World Vision’s effort in working with communities to assist those suffering from the disease. The report from the 2004 tsunami affected areas of Sri Lanka and Indonesia documents women’s resilience in coping with the trauma of the disaster and their increased leadership in the communities’ recovery.

Globally World Vision joins with communities to ensure that neither violence, disability, nor other forms of discrimination will prevent women and girls from enjoying their rights.

As an organisation we join the world community in celebrating the advancing status of girls and women in parts of the world where progress has been made. However, World Vision also calls on the Commission on the Status of Women and the world community to continue its sustained moral and well-resourced support to women and girls in areas of the world where they continue to face indescribable discrimination and injustice.

As a relief, development, and advocacy organisation focused on the wellbeing of children and their communities, World Vision recognises that gender equity is critical to alleviating poverty and building civil and just societies. Our hope is that communities and governments worldwide will increase their understanding and recognise the value and the rights of all - male and female, so that all people may experience life in all its fullness.

Yours Sincerely,

Fatuma Hashi
Director, Gender and Development, World Vision
World Vision welcomes the 2006 Commission on the Status of Women’s focus on the enhanced participation of women in development. We share the goal of creating an enabling environment for achieving gender equality and for the advancement of women by addressing education, health, work, and violence. World Vision works in nearly 100 nations to advance all people, with the conscious intention of empowering women and girls through that process. Concrete actions must be taken in response to women and girls’ physical, spiritual, and psychosocial needs, ensuring that all people are fully included and can actively design and participate in development policies and practices, regardless of age, gender, disability, health status, ethnicity, or other characteristics.  

To achieve these outcomes World Vision recognises men and boys must be an integral part of the solution and that women and girls must participate in decision-making at every level: within the family, community, and society.

Education

The Millennium Development Goal of eliminating gender disparity in primary and secondary education is recognised by the UN and development community as essential to women’s participation in development and the eradication of poverty. High illiteracy rates among women, especially at the community level, prevent them from equal participation in development. Girl child education and school attendance trails behind boys’ in nearly every developing nation. More must be done to influence parents and encourage girls to continue their education. Early marriage is a harmful practice that affects girls’ psychosocial and physical health, their future children’s development, and usually causes them to drop out of school. There is a great need to educate men and boys on the harms of early marriage and to involve community and religious leaders, as well as government officials, to ensure women and girls’ rights, and the enforcement of marriage and family laws.

World Vision recommends:

1. Remove all restrictions to educating girls and women, including school fees, discriminatory attitudes, and lack of safety and transportation.
2. Increase funding for school buildings, girls’ toilets, female teachers, teacher training, transportation, and parental cash incentives, to ensure accessible and quality primary and secondary education.
3. Pursue public education and awareness programmes that promote opportunities available for girls (including disabled girls) in learning and careers and the benefits of education, empowering parents and combating the attitude that girls are not worth educating.
4. Include discussions of child protection, domestic violence, and gender roles and equality in all school curricula, and build the capacity of teachers to counteract gender discrimination.
5. Promote programs that address the negative effects associated with issues of dowry and early marriage, and train teachers in appropriate responses to protect girls from early marriage.

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1 This definition of ‘inclusive development’ is taken from the International Disability and Development Consortium (IDDC), of which World Vision is a member.
6. Address the educational rights of teenage mothers through providing non-formal education opportunities, including literacy, parenting and vocational training.

Health

Poor health and inadequate health care prevent women and their children from participating in development. The AIDS pandemic continues to destroy the lives of women and girls across the world and undermine the development of their communities and societies. Young women are the fastest growing newly infected group because of their lack of social power. World Vision considers the elimination of harmful gender roles and the empowerment of women and girls essential elements in the fight to stop the spread of AIDS, and Invests considerable resources and expertise in this fight in the most affected countries.

World Vision recommends:

7. Raise public awareness of the special health and nutritional needs of adolescent girls, women of childbearing age, elderly, and disabled women.
8. Governments must increase their budgetary allocation to improve health standards for women, ensuring the adequate and regular supply of medicine, materials and personnel trained in the needs of normally and differently abled women, at all health care centres and hospitals of all levels.
9. Facilitate the social, political, and economic empowerment of women so they are in a stronger position to negotiate with partners and protect themselves from HIV.
10. Work through schools, faith-based organisations, and community institutions to ensure access to sound health information; sensitise men and women to the rights and responsibilities of each; and combat the stigma, denial, and discrimination surrounding women and men, girls and boys affected by HIV and AIDS.
11. Work with community leaders, parents, and men to end harmful practices – both traditional and recent – such as early marriage, female genital mutilation, and wife inheritance, which increase gender-based vulnerability to HIV infection and cause other damage to women.
12. Make additional support available for research and distribution of female-controlled HIV prevention methods.

Work

Full access to the workforce and recognition of women’s contribution are essential to women’s participation in development and the alleviation of poverty. Governments should ensure the exercise of equal economic rights for women and the removal of discriminatory practices. Such actions will aid women’s effective involvement in power structures and decision-making positions.

World Vision recommends:

13. Create programmes and raise awareness among men and women to acknowledge and alleviate the burdens of women’s triple role in their home, workplace, and community, and promote women’s equal participation in decision-making.
14. Enhance the social support system to enable women to work outside of the home by providing free/subsidised and good quality day-care centres for infants and elders.
15. Governmental and international agencies, NGOs, employers, and trade unions must ensure equal rights and equal pay for all women.
16. Uphold women's property rights and create programs to prevent widespread migration of women and girls from rural areas toward urban centres, where they are exploited as labour providers.
17. Women in leadership must be encouraged to build their capacity, confidence, assertiveness, and leadership skills while increasing the number of female staff who serve as role models. At the same time, men must be made aware of the shared benefits of gender equality, enabling them to relate to and work positively with empowered women.

**Violence**

World Vision calls special attention to the urgent issue of gender-based violence. Violence against women is a violation of human rights that prevents women from participating in development through the deterioration of all aspects of health, precluding access to education, and restricting women from the ability to work securely. Physical, psychological and sexual violence persist as problems that plague every community. Domestic violence is an especially insidious and often hidden form that is tolerated and ignored by governments and law enforcement because it is assumed to be a private matter. Because of their vulnerability and invisibility, disabled women and girls are most likely to face sexual abuse. Armed conflict exposes all people to violence, maiming and death, yet women and girls are put in particular danger of sexual violence because of their gender. Changing the way people think is central to addressing gender-based violence and World Vision acknowledges that policies and laws will have little effect unless there is community understanding and support.

*World Vision recommends:*

18. Provide proper procedures, communication strategies, materials, and expertise to investigate rape and other sexual assault cases, and to detect and report cases of violence against women without undermining the security of those who report such cases.

19. Actively address the issue of gender-based violence, and provide funding and advocacy for creating and maintaining statutory laws that will provide a recourse under the law for women and girls.

20. Political, religious, and community leaders, men’s groups, and media should play a vital role in encouraging citizens to speak out, accept their responsibilities and take positive steps to prevent domestic violence in their neighbourhoods and society.

21. Governments in conflict and disaster situations must meet women and girls’ right to protection, determine feasible mechanisms and enforcement measures, and implement polices to address violations.

22. The international community must support responsive gender-based disarmament, demobilisation and reintegration (DDR) programmes, with separate facilities for women and girls.

23. Develop a comprehensive approach to child trafficking and commercial sexual exploitation that addresses the core elements of the ‘3 Ps’: prevention, protection, and prosecution.

After many decades of working towards women’s empowerment, following through on promises and plans at the local, national, regional, and global levels remains a significant obstacle to the advancement of women. It is a challenge to hold governments accountable and put power behind ambitious documents. Many of the treaties and agreements signed by the states become rather symbolic expressions that, in practice, are translated to neither real improvements of position nor change in the status of women. Therefore, World Vision calls all member states to take seriously their previous commitments to women and girls and foster the conditions that build equal relations and accountability between men and women. To do so, World Vision urges governments to put mechanisms in place to enforce the implementation of their own commitments. Furthermore, World Vision suggests partnership with social institutions such as churches, council of elders, community leaders and other sources of influence to remove barriers that prevent women from full participation.
Empowerment Through Gender-responsive Relief

Jan Butter, Communications Manager, World Vision Sri Lanka

After a major humanitarian disaster, women and girls are often left additionally vulnerable by gender-based discrimination in relief programming. Unfortunately, gender mainstreaming during a relief response continues to be a challenge and men frequently dominate the relief culture at critical stages of operation.

After the 2004 Indian Ocean tsunami, a high percentage of women survivors were initially excluded from planning relief projects, because of the patriarchal culture in many of the affected communities. By mid 2005, NGO reports and women’s rights conferences announced, “affected women continue to be marginalised, discriminated and excluded from the process of rebuilding on all levels: the family, the community and the nation.”

“Gender blind” practices can easily translate into harmful biases in the field. In post-tsunami countries such as Indonesia, India and Sri Lanka, such biases threatened to compound the risks that women often face after large-scale humanitarian disasters. These risks include:

- Trafficking and sexual abuse in temporary shelters
- Increased domestic violence linked to alcohol and drug abuse
- Increased incidents of early marriage
- Denial of land or property after the death of a husband or male relative
- Little privacy in internally displaced persons (IDP) camps making changing clothes, washing, and breastfeeding a humiliating experience
- Essential items for women, such as properly fitting underwear and sanitary items, are overlooked by those delivering relief supplies

Recognising women’s needs and the unique opportunity for empowerment, relief agencies are now increasingly engaged in gender-responsive programming. NGOs including World Vision have responded to the disaster by ensuring that relief responses are gender sensitive. World Vision’s response incorporated health education, rights awareness, cash-for-work projects equally available to men or women, and ensured property deeds went to either both spouses or women, depending on the cultural context. The Indian Government has since recognized that women should receive deeds to new properties to protect their future interests.

In World Vision’s Child Friendly Spaces and Children’s Societies, created as places for children to learn and play safely in the wake of the tsunami, girls had equal chances to be selected by their peers and rise to become leaders and spokespeople. A year later, it appears that such gender-focused and awareness raising programs have not only helped reduce post-disaster risks for women and girls, but have also given many a new confidence to face the future.

Sarala Emmanuel of the Suriya Women’s Development Centre noticed the seeds of this change as early as March 2005: “One of the most important outcomes of the tsunami has been the creation of small, but significant spaces for women to articulate their opinions.” With the new skills and training women have

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received they are able to stand on their own feet and are considering employment that was not possible before. Research in Sri Lanka discovered that women were starting to feel included in the decision-making process. “Though this has not been in anyway an unchallenged phenomenon,” Emmanuel said, “it is definitely a positive step.”

Patricio Cuevas-Parra, World Vision’s Humanitarian Protection, Peace building and Advocacy Manager, said that gender-focused programming had made a significant impact on Muslim women in Indonesia: “In the months after the tsunami, you would find few women in training or community meetings. Most people, including community leaders and local NGO workers, said integrating women in these activities was a waste of time and money because they could not influence their own communities. They added that NGOs could not change the local culture of the male-dominated society. Some months later there has been noticeable change. Women are participating actively in different stages of the humanitarian response. In workshops there are equal numbers of men and women. In communities, women are taking active roles and in many cases they are the first to express their opinions and discuss the problems that they face.”

In light of such encouraging developments in tsunami-affected countries, World Vision makes the following recommendations for relief efforts following a major humanitarian emergency.

**World Vision Recommends:**

1. Begin all relief responses with an assessment of the different needs of men and women, boys and girls.
2. Employ Gender and Development Officers at national and local levels at the beginning and for the duration of the relief and rehabilitation response, so as to ensure girls and women’s rights are protected and needs are not neglected in the organised chaos of relief work.
3. Governments, law enforcement agencies, and NGOs must prioritise women and girls’ safety and ensure the protection of women and girls from sexual and physical abuse.
4. Ensure women are given a central role in planning and implementing all recovery and rebuilding efforts through government and community representation.
5. Build shelters that take into account the cultural and practical needs of women, when housing is affected or destroyed.
6. Provide separate and culturally appropriate washing and toilet facilities within internally displaced persons (IDPs) temporary shelter camps.
7. Guarantee equal opportunities and pay for men and women with cash-for-work programmes.
8. Provide mental health programmes and trained staff that are prepared to deal with the individual, unique, and specific needs and concerns of women and men, girls and boys.

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4 From ‘Sri Lankan women’s small but significant gains in the post-tsunami reconstruction process’ an article by Sarala Emmanuel on the Asia Pacific Forum on Women, Law and Development website.

www.apwld.org/tsunami_reconstruction.htm
After 20 Years of War and Terror, Women and Girls Want Education Most

Carrie Vandewint, Peacebuilding & Advocacy Officer, World Vision Southern Sudan

Lack of education is the single greatest hindrance to the participation of girls and women in the process of development in Southern Sudan. The women of South Sudan are some of the strongest, bravest, most determined individuals in the world, given the challenges they face daily. Yet they persevere. Still, the statistics on women are stark and illustrate their marginalisation within one of the poorest societies in the world.

Armed conflict has had a disproportionately negative impact on South-Sudanese women. The number of female-headed households and widows has increased due to conflict, and the majority of refugees and displaced are women. They also have high maternal mortality rates (more than 1 in 9) and illiteracy rates.\(^5\) According to UNICEF, only 1% of women in South Sudan finish primary school, and 88% are illiterate, with higher rates among Internally Displaced Persons (IDP) who have access to even fewer services due to their displacement and precarious social situation. Primary school enrolment for girls stands at a mere 20% and only 500 girls finish primary school each year from among the eight million people who live in South Sudan.

The reasons for women’s second-class status in South Sudan are complex and interwoven, but the most fundamental are underdevelopment and traditions that essentially reduce the value of women to that of objects and assets. In many communities they are traded as commodities, forced into early marriage, inherited when widowed, and valued by the number of cows they fetch at marriage. The two decades of conflict between the south and the north of the country have isolated the region from the rest of the world marginalizing women and making them subservient to traditions and patriarchy. The girls and women of the society are often treated as property without their own aspirations and will.

Yet they persevere. One is immediately struck by their fortitude and courage when talking to women in rural South Sudan. After over 20 years of running from bombs, being raped, abducted, abused and sold into slavery, forced to serve in the military, watching husbands and sons leave them to fight and die in battle and struggling alone to meet their daily needs, these women want peace, education, and change for themselves and their children.

They are not timid in voicing their aspirations. At nearly every community meeting women of all ages plead for opportunities to go to school and send their children to school. Even though virtually cut off from modern society, they clearly understand that education is the key to moving forward from their lives of struggle and loss. Women know that they need education to get jobs and participate in civil society. Many also realize that education can liberate and change traditional attitudes towards their role in society.

Hundreds of thousands of displaced Sudanese have begun to return to South Sudan amid the historic signing of the Comprehensive Peace Settlement for the Sudan. However, many, including UN Secretary General Kofi Anan, continue to remind the world community that not enough has been done by the world community to bring true peace to the Sudan.

\(^5\) http://www.fmreview.org/text/FMR/24/25.doc
Some of the returnees flooding back to the South are from camps in neighbouring countries, while others from a wide variety of locations within the country. In southern Sudan World Vision is applying a community-based, culturally appropriate approach to rehabilitate the returnees and exploring ways to send children, especially girls, to school.

Yet they persevere. At a community meeting in one of the more traditional areas of south Sudan where World Vision works, children and youth shared their priorities and hopes for their community. At one point Mary, a 13-year-old, described how the boys in her village walked long distances to a neighbouring school. Fears of rape or getting involved with boys prevented Mary’s parents from letting her go to the neighbouring school. She pleaded for a school in her village so that she could learn and have opportunities. She said she was afraid that if she didn’t go to school, her father and brothers would marry her off soon. Mary’s story is repeated in the lives of hundreds of thousands of young girls in South Sudan for whom a basic education, freedom, and choice are distant dreams.

World Vision Recommends:

1. Increase international assistance for peacekeeping in the Sudan to ensure a sustainable peace.
2. Review and adapt local, national and international communities’ strategies and policies on gender and development for the Sudan in light of acute gender and development related needs in the country.
3. Increase funding for school building, girls’ toilets, female teachers, transportation, teacher’s training, and capacity-building for the new South Sudan Ministry of Education.
4. Advocate for implementation of all the provisions of the new Constitution of South Sudan, which contains an article on the “Rights of Women” enshrining the equality to women and requiring 25% of all positions in the government be held by women.
5. Actively address the issue of gender-based violence, protect girls and women returning to the Sudan, and provide funding and advocacy for creating and maintaining statutory laws that will provide a recourse under the law for women and girls to protect them from the violations of their rights, especially the right to freedom from sexual abuse.
6. Support awareness-raising and empowerment campaigns at the grassroots levels in South Sudan, empowering indigenous groups to positively change attitudes and behaviours towards girls and women, support girl’s education and ensure the rights of women and children.
7. Educate men and women on shared gender roles that allow familial and social equity leading to households and societies where both genders have equal opportunities and access to resources and decision making.
Sound Gender Understanding Needed in Post-Communist Countries
Albana Dino, Program Quality Specialist, World Vision Regional Office, Middle East/Eastern Europe

Past Expectations

Post-communist European countries experienced a process of empowerment of women during the communist period, which intended to harness the unused potential of women to contribute to the development of a new communist society. This cultural change gave women opportunities to access education, work outside of the house or traditional gender roles, have better access to health services, and legislated protection of women’s rights. While the cultural shift expanded options for women, it lacked a strong foundation and had numerous shortcomings that were never identified and addressed.

The process of emancipation during the communist period targeted women while men were forced to contribute to the process of emancipation by relinquishing a number of duties and privileges. The changes were imposed from the “top down” and the men were not prepared, nor included in the change process. In some cases women were supported to take leadership positions based on their communist party affiliations rather than merit, creating a negative impression that women are undeserving and incapable. Subordinates who questioned the ability of the women in power risked being accused of opposing the process of the emancipation of women or communism itself.

Women faced a number of challenges during the process of emancipation. Many families suffered as the new roles of equality required at work were not reflected at home. For many women emancipation turned out to be additional work as women had full time jobs outside the home and full responsibilities at home. Women, initially enthusiastic about the changes, lost their trust in the process. They quietly suffered with the workload and responsibilities as well as with the attitudes of their husbands and family members at home. Older women educated the young girls with the fatalist idea that women are born to suffer and there is nothing to do but accept one’s destiny. Young children observed the dynamics at home and naturally adopted their parents’ behaviour and attitudes in the absence of any education at home or at school on the importance of gender equity.

Present Realities

With the fall of communism, many women lost their jobs and the majority of women today work within the home, supported by their husbands who are increasingly seen as the breadwinners. The economic situation has reduced women’s independence making it difficult to have equality and joint decision-making. Men not only are the ones to provide for the family but they are also eager to exercise the power they feel they lost during the communist period. They tend to make all the decisions in the family and often prevent their wives from participating in community life. Women are left with few economic means or the ability to speak up to protect their rights. If they do, they may threaten the existence of their family and also risk the future shelter and security of their children. Many women are still reluctant to challenge the status quo when they recall the struggles of the communist era.

As a result of the recent turbulent cultural, political and economic history of the post-communist states, there is resistance (expressed or not) to the concept of gender equality. Both men and women have sour memories of the past, which affect their attitudes and actions in the family, community and society as a
whole. The interventions in the past 15 years of transition from communism to democracy tended to focus more on addressing women's rights rather than clearly communicating the goal and benefits of right relations between men and women.

**It is clear from the past that no gender equity can be reached:**

a) if the focus is only on women’s empowerment and men are left out
b) if changes are imposed on men and women
c) if interventions do not consider history and tradition
d) if both parties do not understand the concept of “right relations between men and women” and are not encouraged to discuss how families and society would look if such relations were established.

There is a significant role for local and international NGOs and government agencies to play in helping to transform post-communist societies.

**World Vision Recommends:**

1. NGOs and government agencies must base their programmes on sound knowledge of gender issues to be effective in promoting and enabling gender equity. NGOs and government agencies should spend more time carrying out context analysis to understand current situations better. Documentation is also of crucial importance.
   - Develop projects and programmes with the participation of those (men and women) affected by the situation. This will make projects more realistic and interventions less threatening.
   - Focus programmes and attention to address the root causes of inequity and less on the consequences. Addressing consequences is not sustainable nor does it remove the barriers to equity.
   - It is good practice to include promotion of gender equity in each project intervention (water, infrastructure, education, health) as the implementation of such projects can provide the best opportunities to discuss gender roles in a non-threatening way. This calls for increased gender capacities of staff working in the non-profit sector and government agencies.
   - Stand-alone projects on gender should primarily focus on advocacy and policy change, lest they sound artificial and bring back bad memories of the past.

2. Focus on developing programs to support families to increase their income and improve the living conditions of their children. Gender roles cannot be equal until men and women have viable options for earning a living wage.

3. Micro-finance programs and economic initiatives must be sensitive to the impact on family dynamics and create awareness of the benefits of shared responsibility and participation of men and women in decision making about investment, business development, and household spending.
Women and Disability - The Challenge of Triple Discrimination

Hitomi Honda, Disability Advisor, World Vision International and Philippa Lei, Child Rights Poverty Advisor, World Vision UK

According to the World Bank, there are 300 million disabled women and girls in the world, who comprise 10% of women’s population worldwide. Over, 240 million of them live in developing countries, 80% of whom have no livelihood making them “dependent on others for their existence.” Though disabled women and girls face similar discrimination and human rights abuses as other women and girls, their social isolation, exclusion and dependency, increases the extent of their abuse. Where poverty and disability are jointly manifest, they reinforce each other, leading to increased vulnerability and exclusion.

Females with disabilities in the developing world suffer a ‘triple discrimination.’ The marginalisation of being female, living in poverty and perceived impairment, is sometimes compounded further by discrimination due to race and ethnicity. While women strive for equality with men, disabled women “struggle to be recognised first as human beings and secondly as females.”

Included are two examples of the triple discrimination faced by disabled females in developing countries where they are denied education and are sexually abused. This paper recommends actions for both national governments and the international community to address issues relating to disabled females.

Julia (12) an Armenian girl lives in a temporary one-room house with her parents and a younger sister. Julia can’t read nor write. Her two semi-paralysed fingers on the right hand have kept her from ever attending school.

“I don’t know why I didn’t go to school,” said Julia. The local school refused to admit her while her parents feared that she might be teased. During the day she is left alone to do household chores. She makes the beds, does the dishes, sweeps the floor, cleans the walls, irons clothes, polishes the furniture, cleans the yard and then collects water from a neighbouring house. With no watch, Julia then guesses the time in order to receive her lunch at a soup kitchen at 1:30 pm.

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6 The terms “disabled women” and “women with impairments” are used differently in this article. While impairments apply to physiological function, disability is a result of socially constructed barriers at attitudinal, environmental and/or institutional levels placed upon women with impairments.


Education

In 2000, 189 United Nations Member States pledged to achieve *universal* primary education and gender equity in education by 2015 under Millennium Development Goals (MDG) 2 and 3. However, these targets will not be met unless the concerted effort includes children with disabilities, particularly girls.

The World Health Organisation estimates that a meagre 2% of all the disabled children in the developing world receive an education. Though no gender breakdown of this figure is available, UNESCO estimates that the overall literacy rate for persons with disabilities worldwide is 3% and 1% for disabled women and girls. The British Department for International Development’s paper titled, *Disability, Poverty and Development* states that, “boys with disabilities attend school more frequently than girls with disabilities.” Consequently, it can be concluded that the combination of poverty and discrimination based on disability and gender results in low school attendance and literacy rates among females with disabilities.

Articles 28 and 29 of the Convention on the Rights of the Child (CRC), clearly outline the right of *each child* to education, Article 23 spells out the specific responsibility of the State to “ensure that the disabled child has effective access to and receives education…in a manner conducive to the child’s achieving the fullest possible social integration and individual development.” Therefore, denying children education on the grounds of poverty, disability or gender, or a combination of all three contravenes the CRC and is a violation of human rights.

Sexual Abuse

Because of their vulnerability, disabled women are more likely to face sexual abuse. Although there is evidence that women and men with disabilities are more likely to be abused, women with disabilities are typically at a higher risk than disabled men for both sexual and physical abuse, just as they are in the non-disabled population. In a study by Action Aid Uganda, 23% of disabled female respondents had been coerced into sex, compared with 10% of disabled male respondents12.

Jane, a young Kosovan woman with cerebral palsy, who has difficulty communicating and moving her body, was kept in a room next to her family’s house all her life, to which only they had access. A local disabled people’s organisation learned of her existence when she gave birth to a baby. When the organisation’s representatives visited the family, they refused to divulge information and the baby was given away to a distant relative. Jane still languishes in the same room and her abuser’s identity is still kept secret. In a male dominated culture, where women are suppressed the rights of disabled and non-disabled women curtailed.

In parts of Africa, where having sex with a virgin is believed to cure HIV and AIDS, females with disabilities are targeted for rape because they are presumed to be asexual and thus virgins. The increased vulnerability of disabled females to sexual abuse increases their vulnerability to HIV and AIDS.

According to the UNAIDS report, *AIDS Epidemic Update 2004*, the number of people living with HIV at the end of 2004 was estimated to be between 35 and 44 million. According to the report, sub-Saharan Africa region, though just over 10% of the world’s population, is “home to more than 60% of all people living with HIV - some 25.8 million.”13 Those most severely affected by HIV and AIDS are those living

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in poverty. Of these, women, children and people with disabilities are the most vulnerable. There is little empirical data on the number of disabled people who are HIV-positive or affected by AIDS. Much of the information and research is based on anecdotal evidence and case studies. It is generally thought that people with disabilities are more vulnerable to HIV and AIDS than people without disability and, among these, women and girls are the most vulnerable.

**World Vision Recommends:**

1. The UN Member States must push for a strong position for women with disabilities in the new UN *Comprehensive and Integral International Convention on the Protection of the Rights and Dignity of Persons with Disabilities*. The document must address gender issues while addressing the issues of disabilities. Traditionally disabled people are seen as a homogenous group. Disabled women and men argue that this is one of the main reasons why disabled women have been more isolated, underprivileged, invisible, and ignored, than disabled men and non-disabled women.

2. All international and local initiatives carried out in the name of “development” must be inclusive. As such, they must be carried out respecting all human rights, acknowledge diversity, commit to the eradication of poverty, and ensure all people are fully included and can actively participate in development policies and practices, regardless of age, gender, disability, health status, ethnicity or other characteristic.

3. Poverty Reduction Strategies must actively address the needs and rights of disabled women and girls.

4. Address the educational rights of disabled girls and educate to remove societal restrictions on their education while making dedicating resources to meet their special needs.

5. Pursue public education and awareness programmes that promote the benefits of education and opportunities available for disabled girls to develop careers.

6. Address protection against sexual abuse of disabled women and girls. Raise awareness and provide funding for the investigation of abuse and the creation and maintenance of statutory laws.

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16 This definition of ‘inclusive development’ is taken from the International Disability and Development Consortium (IDDC), of which World Vision is a member.
In 2004, the world saw 32-armed conflicts in Africa, Asia, Europe, Latin America and the Middle East, impacting millions of children. Over the last decade, sexual violence has increasingly become a weapon of war. In armed conflicts children are sometimes forcefully recruited or abducted by rebel groups or armed forces and drafted as porters, spies, cooks, messengers and fighters. According to a recent Save the Children report, globally 120,000 of the 300,000 children abducted are girls.

The Experience of Girls in Northern Uganda

The armed conflict in northern Uganda between the Lord’s Resistance Army (LRA) and the Government of Uganda (GoU) has been raging for nearly 20 years. Over 1.6 million people have been left homeless and over 80% of the region’s population live in make shift camps.

About 53% of the total population in internally displaced persons (IDP) camps in northern Uganda are children. Adolescent girls, and women are particularly vulnerable to sexual abuse within these camps where traditional systems of social protection no longer exist. In these camps sex can become the only commodity which women and girls can secure their survival and their families'.

Girls in northern Uganda also risk sexual abuse during the “night commutes.” The fear of abduction by the LRA sends thousands of children from the camps and rural areas nightly fleeing from their homes and travelling miles on foot to towns and city centres. They sleep collectively in bus stations, churches, storefronts and on the street. Up to 50,000 “night commuters” make this journey every night and return home at dawn to escape abduction. For girls, this is especially perilous as it makes them vulnerable to harassment and rape during travel and while sleeping on the streets.

UNICEF estimates 30,000 children have been abducted in Uganda, many of whom are girls. They usually also do the jobs done by the boys but are also handed out as wives of LRA commanders. They are sexually violated and kept in sexual bondage.

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17 The majority of this article is an edited version of World Vision (2004) Pawns of Politics: children, conflict and peace in northern Uganda
19 Recent estimates put the figure at approximately 300,000. Coalition to Stop the Use of Child Soldiers website, http://www.child-soldiers.org
20 Save the Children (2005) Forgotten Casualties of War: Girls in Armed Conflict, Save the Children UK.
Sara was abducted by the Lord’s Resistance Army in 1993. She went to the Sudan, which was more peaceful. However, there was no food and she had to rely on Sudanese charity. At 11 she was given to a man to be his future wife. She underwent military training and was given a gun. While in the LRA Sara participated in raids and was attacked by Sudanese soldiers. There was a time when she ate wild leaves for survival. In 1995 Sara conceived a child with her “husband.” She spent her maternity leave at the camp for people with disabilities where her gun was taken. She now has two children.

In northern Uganda, fear of AIDS among LRA commanders has led to the release of girls, instead of re-assignment as a “wife” to another commander after the first dies. If these girls make it back to their village from the bush, they are sometimes rejected and abandoned by their families. Those who return with babies are a security risk to the relatives who would willingly accept them, as they may live in constant fear of the rebel commander coming for “his wife”, and “finishing them off.” For others, family bitterness exists because of forced atrocities committed by the children under the LRA directives, perceived “defilement,” and intense poverty. As a result, some of the girls fall back on sex for survival, engaging in high-risk behaviours spreading HIV.

**Recommendations: Response to Sexual Abuse of Girls in Conflict and Post-Conflict Situations:**

The security and protection needs of girls and the challenges of returning women and girls associated with armed groups to their communities remain largely unaddressed. As a patriarchal society, emphasis tends to be placed on the male child over the female, thus there are more rehabilitation programs targeting former child soldiers, which in fact only really focus on the ‘boy child.’ Girls returning with children born of sexual bondage are perceived by the villagers as married to the fathers of their children, yet these child mothers suffer from the psychological torture of rearing children conceived by their tormentor and they often have no means to provide for themselves and their children. Their chances of marrying are slim and therefore programs that enable them to achieve economic independence must be put in place, lest they be further sexually exploited. Life skills and income generating programmes that accommodate for mothers’ and their children’s needs should be integrated into gender based disarmament, demobilization, and reintegration (DDR) programmes.

The example from northern Uganda, points to the importance of addressing these needs in depth. More specifically, it highlights the oft-neglected fact that responsive gender-based protection and disarmament, demobilisation, and reintegration (DDR) programmes must be an integral part of all responses to children affected by war.

**World Vision Recommends:**

1. National governments in conflict situations must ensure that women and girls’ rights to protection are met and take responsibility for their protection no matter what tactics the opposition uses. This can be done by working closely with UNICEF, the national army, and local...
community structures of protection, such as Local Council structures, peer leaders, police and parents.

2. Laws protecting women’s rights must be upheld, even in times of war. Those in breach of the law should be brought to justice.

3. Provide separate facilities for the DDR processes for women and girls. Current programmes tend to be male-centred and militaristic, thus discriminating against the needs of girls caught up in conflict. Provision of culturally appropriate counselling for girls who have been victims of sexual exploitation should be a priority in such programmes.

4. National governments and local communities must work in unison to ensure the needs of women and girls and their children born from sexual exploitation and rape are met. This can be done through formal, gender-based DDR programmes or informal processes where girls have opted to ‘self-demobilise and reintegrate.’ Encourage community dialogue supporting the acceptance of children born of rape to counter commonly held stigma.

5. Communities must be involved in the DDR (expand acronym) process from the outset. Girls involved with armed forces, are often stigmatized, particularly because they have been sexually violated. Community sensitisation, awareness-raising, and acceptance are required in order for girls to undergo DDR and be successfully reintegrated and resettled back into their communities.

6. The international community must make good its existing financial commitments to support DDR programmes and ensure that sufficient funding is allocated to meet the specific needs of girls.

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Ibid.
Juana, a 36-year-old Maya woman from Guatemala, discovered that she and her youngest son were HIV-positive only after her husband died and the boy fell seriously ill. Ostracised by her neighbors, and even facing death threats, Juana has found it far harder to cope with the stigma of the virus than the dangers it poses to her health.

Juana, one of 15 children, looked for a cooking and cleaning job at the age of 14. “I didn’t know how to speak Spanish,” she explains, “because my dad would say that the only thing women were good for was to have children.” At 16, she took up with the father of her children and they had their first child when Juana was 18.

Five years later her husband started getting sick. “All the time he had a terrible cough,” she explains, “then the flu, then the runs (diarrhea). I never knew what he had, and he never told me.” When Juana was pregnant for the fifth time, he got very ill, and could not work anymore. Nuns took him away and 20 days later the doctor sent word that Juana’s husband was dead. “I kept on asking the doctor what killed him. ‘Pneumonia,’ he said, ‘Nothing else?’ I asked. ‘No,’ was all he said.”

Rural women like Juana have traditionally had scarce opportunities to attend school. Most women marry young, unskilled, illiterate, and without opportunities to access a better life. This lack of information about HIV and AIDS prevents rural and indigenous women from protecting themselves. The impact of poverty, illiteracy and a patriarchal culture means women have little control over their bodies to negotiate safe sex and contributes to the spread of AIDS. Many men practice unsafe sex putting their spouses and families at great risk. Women, as the majority of the world’s poor, are limited in their access to medical and social support. They are now infected at a faster rate than men, but there is still little information about the growing number of indigenous women infected with HIV in rural areas. Women like Juana who lose their partners to AIDS are often deprived of financial support and economic opportunities.

Juana was devastated after losing her husband. But her situation only worsened when her two-year-old son Luis became ill. The same nuns took him into their care but his condition did not improve. Luis was tested for AIDS and found positive. Only then did Juana learn the true reason for her husband’s death.

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27 A fictitious name.
28 Maya people comprise 39.2% of Guatemala’s Indigenous population; 68% of whom live in the rural areas (INE: Proyeccion Poblacional de acuerdo al XI censo nacional 2002)
29 35.95% of the indigenous population ages 5 to 19 years old were enrolled at school. 1,614,526 indigenous children did not attend school (XI censo nacional de poblacion 2002/2003). 32.31% of women are excluded from the school system in Guatemala.
30 In 2000, 153 maternal mortality for 100,000 births especially among indigenous women in the rural area.
31 The literacy rate among women is 65.4; men is 80.2 in 2002 (Guatemala: Una agenda para el desarrollo humano 2003, Informe de Desarrollo Humano).
32 34% of women do not know the symptoms of AIDS.
33 In 2003, 400 cases HIV women infected were registered compared to 200 cases on 2002 (Ministerio de Salud Publica y Asistencia Social: Departamento de Epidemiologia. 2004.)
Juana explains, “I didn’t know I was sick, and because I took up with another man after my husband died…they took my kids away and sent them to live in different homes. They took little Luis away too, and sent him to an institution. The judge didn’t think I could look after him with this disease.”

Juana suffered further pain and discrimination when a newspaper reporter, who promised to share her story without revealing her identity, betrayed her. She soon learned he had not kept his promise when people in her hometown told her things like, “You were in the newspaper, you and your son… You’ve come back here so we’ll all catch it and spread it around like a cold. Watch your step, because we’ll soak your house with gasoline.”

Discrimination against people living with HIV and AIDS threatens their human rights, but is sadly not uncommon. HIV-positive Women suffer psychological violence and harassment that jeopardises their survival and undermines efforts for prevention and care. World Vision Guatemala offers HIV and AIDS care and medical support and stresses education for men and women that includes sexual education and the ABC strategy for HIV prevention, (Abstain, Be faithful, use Condoms). World Vision works within Maya communities to dismantle the stigma surrounding those affected by AIDS.

World Vision Guatemala sees discrimination, gender inequality, and the lack of education opportunities for women as a social injustice that we are compelled to change. Women like Juana suffer compounded discrimination because of poverty, their gender, their HIV status, and ethnicity. World Vision Guatemala addresses gender inequity by providing education for girls, economic opportunities to women, better housing for families, especially for widowed or abandoned women, and by advocating for children’s rights, especially the girl child’s.

Juana misses the peaceful life she had with her husband. Her life is preserved by the medications World Vision provides, but she claims she no longer has a single happy moment because of her memories of the pain she lives in.

**World Vision Recommends:**

1. Those infected with HIV need to be treated with respect, integrity and compassion.
2. NGOs and governments should find creative effective ways to reach out to vulnerable populations such as indigenous, rural populations and young women and youth, not in school who are at great risk for infection and do not have the same opportunities to learn about HIV and AIDS and prevention.
3. Governments must increase their budgetary allocation to improve health standards for women, ensuring the adequate and regular supply of medicine, materials and personnel trained in the needs of normally and differently abled women, at all health care centres and hospitals of all levels.
4. Facilitate the social, political, and economic empowerment of women so they are in a stronger position to negotiate with partners and protect themselves from HIV and AIDS.
5. Work through schools, faith-based organisations, and community institutions to ensure access to sound health information; sensitise men and women to the rights and responsibilities of each; and

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34 Agudesa an economical partner of WV Guatemala has provided loans to 73% women for economic objectives.
combat the stigma, denial, and discrimination surrounding women and men, girls and boys affected by HIV and AIDS.


7. Governments, international agencies, NGOs, employers and trade unions must ensure equal rights and equal pay to women, especially indigenous and rural women. Quality health services, access to loans, technical and vocational education must be available.

8. Uphold women's property rights and create programs to prevent widespread migration of women and girls from rural areas toward urban centres, where they are exploited as labour providers.

9. Strengthen women's capacity to influence and act, and develop strategies to facilitate access to the legal ownership of lands by women in rural areas, while challenging ‘macho’ cultural patterns that currently deprive women of their property, or prevent women from having equal access to property.
Women constitute almost 50% of the human resource of India. However, their role in the community has been marginalised due to many reasons, but most importantly due to the lack of relevant, quality education. Education is key to empower and safeguard against the social evils of dowry, infanticide and foeticide. Education is key to removing women’s illiteracy, which can change their socio-economic status. Education is widely accepted as an essential tool for the attainment of development goals. Education leads to political consciousness – awareness of rights and duties among the people of a nation. The higher the level of a woman’s education the fewer children she is likely to have, and the later in life she will start having children, ensures her and her family a better chance for a healthy and happy future.

While education has been key to the development for the growing middle class in India, it is only in recent times that the focus has shifted to making education accessible to the poorest of the poor, especially girls. In communities living below the poverty line, women and girls are accorded the least priority with education. When parents make decisions about which child will attend school or stay at home to work, often it will be the girl who is denied an education.

Recent governments have shown political will and foresight in pursuing education as imperative for development by incorporating key issues into the “Common Minimum Programme” that guides their policies. The key areas addressed include the allocation of resources for education programmes for girls and women, involvement of women and children in policymaking, and ensuring protection of children’s rights, especially for those in crises such as child labourers and girl children.

Education is a major priority for World Vision India. The organisation focuses on the four “well-beings” of children and their communities: physical, intellectual, socio-economic, and moral. Education falls primarily under intellectual well-being and remains a key focus in over one hundred projects across the country. The salient features of the education programmes run by World Vision in India are:

1. **Ensuring enhanced access to education**
   - Material and financial assistance for education
   - Non Formal Education
   - Infrastructure (school buildings / toilets)
   - Coaching and career guidance
   - Preschools (preparatory)
   - Focus on differently abled children
   - Building community capacity to monitor

2. **Vocational and Life Skills Education**
   - Vocational education
   - Awareness education on health, hygiene, HIV and AIDS
   - Capacity building, especially in the area of citizen empowerment and awareness of rights
3. Response during disasters
   - Setting up camp schools
   - Centres for early childhood care and education (ECCE)
   - Child friendly spaces
   - Play grounds
   - Play materials
   - Coaching
   - Counselling

4. Children in Crises
   Non-formal and vocational education for:
   - Street children
   - Working children
   - Children in bondage
   - Children dropped out of school
   - Children orphaned and vulnerable due to HIV and AIDS
   - Children of sex workers

Changing societal perceptions of the rights and roles of women is a significant opportunity and a challenge to both the government and organisations working towards it. Some of the key challenges identified by World Vision include:
   - Keeping girls in school beyond the primary level
   - Protection of girl children through education and awareness
   - Engaging all stakeholders for ramping up the quality and impact of education
   - Alternative forms of education for children in difficult circumstances, such as child labour and street children

World Vision Recommends:

1. Focus on ensuring girls’ and women’s full and equal access to good quality education by complying with MGD Goals 2 and 3, eliminating all gender disparities in primary and secondary schools and removing hindrances to achieving gender equality in education by 2015.

2. Provide incentives, especially in rural areas, for girls to attend school, including transportation to the nearest middle and secondary schools, and parental cash incentives.

3. Include education and discussion on child protection, domestic violence, gender roles and equality in all school curricula. Build teachers’ capacity to address gender discrimination, and require all schools to form child protection committees.

4. Promote community programs that address the negative effects associated with issues of dowry and early marriage, and train teachers in appropriate responses to protect girls from early marriage.
According to international agreements,\textsuperscript{35} the legal minimum age for marriage is 18, but in reality many developing countries do not abide by them. Early marriage or child marriage refers to the marriage of either boys or girls under the age of 18, yet girls more often feel the negative consequences.

\textbf{Early marriage in Ethiopia}

Amongst the many harmful traditional practices that exist in Ethiopia, such as Female Genital Mutilation (FGM), rape, abduction, wife inheritance, and unattended births, there is a high prevalence of early marriage. Though early marriage is illegal in Ethiopia, it is a widely condoned practice by customary and religious practices, particularly in rural areas where marriages go unregistered and 85\% of the population live. Furthermore, marriages are a family affair in which the views of the family members take priority over those of the couple who are to be married. Parents’ choices override children’s, and men’s override women’s, and all usurp authority over the law.

In a nation of 74 million, on average, 57\% of Ethiopian girls are married before they turn 18, though in some regions it can be as high as 82\%.\textsuperscript{36} The practice occurs in more extreme forms in northern Ethiopia where girls as young as eight are married and others are pledged into a marriage at birth. Although this varies in prevalence, the practice is found in every region of Ethiopia.

In Ethiopia having a large family is associated with prestige and wealth; therefore, young girls are married early to maximise their child-bearing years. Most do not understand this practice is a violation of their human rights, which harms their health as it increases their vulnerability to HIV and AIDS, obstetric fistula, maternal mortality and morbidity and bearing unhealthy children.

\textbf{Additional Reasons for Early Marriage:}

\begin{enumerate}
\item \textbf{Poverty}

Poverty is a major factor underpinning early marriage in Ethiopia.\textsuperscript{37} A young girl may be regarded as an economic burden to her family; but the dowry her marriage brings is viewed as a way to alleviate their poverty.

\item \textbf{Protecting Girls}

In a society where virginity before marriage is prized, many Ethiopians believe early marriage is one way to ensure that girls will be safely “protected” from premarital sex and rape by being placed firmly under male control. In rural areas, pursuing secondary school education often means that girls must

\textsuperscript{35} 1948 Declaration of Human Rights.
\textsuperscript{36} Early marriage rates in Amhara, Tigray, Beshangule gumize, and Gambela regions are much higher than the national average at, 82\%, 78\%, 64\%, and 64\% respectively. National Committee in Traditional Practice in Ethiopia (1998): Baseline Survey on Harmful Tradition Practice in Ethiopia, Addis Ababa, 1997.
leave their homes to live in urban areas, far from their villages. Parents fear their children may be exposed to the temptation of premarital sex, so they force them to drop out of school and marry.

3. **Strengthen Relations Between Families**

When two mothers are pregnant the parents may promise each other their children in marriage, in order to strengthen the relationships between the two families. In Gojam, Ethiopia, parents betroth their children at birth, and the girl is sent to her future husband’s home around the age of eight to integrate into her marital family. In this case, the mother must protect her daughter-in-law from any premature advances by her son. Very often the only option for girls in situations of extreme marital stress is to run away.

**Impacts of Early Marriage**

The negative impacts of early marriage are significant and far-reaching. As an abuse of human rights, child marriage curtails personal freedom, inhibits the development of a full sense of selfhood including education, damages psychosocial and emotional well-being, while threatening reproductive health.

**Increased Poverty:** Early marriage often leads to wife abandonment. When a woman is abandoned by her husband, she usually assumes sole responsibility for dependent children but is often unable to provide for them. Early marriage, therefore, contributes to the ”feminisation of poverty” and its impact on children. The children of young and illiterate mothers tend to face the same cycle of childhood deprivation, poverty and poor quality of life experienced by their mothers.

**No Decision Making Power:** The large age gap between young wives and older husbands contributes to women’s lack of power at the household and community levels. In Ethiopia, the mean age difference between spouses is 10.1 years when girls marry before age 15.

**Psychosocial Disadvantages:** Girls feel isolated in their imposed marriages because of their loss of mobility and confinement to the home. Many women are beaten and sent back home when they try to run away.

**Violence and Abandonment:** Prolonged domestic violence is often a driving force behind abandonment and divorce in these marriages. Early marriage and childlessness account for two-thirds of the divorces obtained within the first five years of marriage in Ethiopia. Some girls who leave or are abandoned by their husbands end up living on the streets, where they are often victims of sexual and physical abuse. Sixty per cent of female children on the street in Adama (formerly Nazareth or Nazaret), Ethiopia are children who left their husbands due to the trauma of early marriage.

**Poor Reproductive Health and Teen Pregnancy:** Very few child brides have knowledge or access to contraception nor is it considered acceptable, since childbearing soon after marriage is integral to a woman’s social status. Pregnancy-related complications are the leading cause of death for 15-19 year-

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38 Ethiopian Demographic and Health Survey, 2000.
40 Forum on Street Children in Ethiopia (2002). Sexual abuse and exploitation of child prostitutes in Addis Ababa
old girls in the developing world.\textsuperscript{41} In addition, girls in this age group have increased risks including premature labour, complications during delivery, delivering a baby with low birth-weight, and the death of their infant.

**Fistula:** Prolonged and obstructed labour can result in obstetric fistula. This condition leaves girls and women continually leaking urine and/or faeces and frequently leads to abandonment by their spouses, friends, family and community.\textsuperscript{42} The World Health Organisation estimates there are over two million obstetric fistula sufferers worldwide. About 9,000 new cases occur annually in Ethiopia. The majority of fistula victims are young girls who married during their school years and are first-time mothers.\textsuperscript{43}

**Exposed to HIV and AIDS:** In Ethiopia, child marriage significantly increases the risk of HIV infection as well as other sexually transmitted infections in women ages 15–24, who are nearly twice as likely than boys to be infected with HIV.\textsuperscript{44} About 94% of sexually active girls in Ethiopia are married and have limited ability to negotiate condom use even when they do not desire children.\textsuperscript{45} The region with the lowest average age of marriage in Ethiopia also has one of the highest HIV infection rates among pregnant women.

**Lack of Education:** Married girls who would like to continue their schooling are often prevented. Only three percent of the married Ethiopian girls aged 15–19 are in school, compared to 34% of unmarried girls of the same age.\textsuperscript{46} Some 80% of married girls in Ethiopia have received no education, and 81% cannot read.\textsuperscript{47} Many parents believe that investment in girls’ education is a waste since she is going to be married and work in another household. As a result, the majority of girls in Ethiopia are deprived of their basic right to education.

**World Vision Ethiopia’s Contribution to End Early Marriage**

World Vision Ethiopia (WVE) works in collaboration with the local government, schools, and the community as well as their influential religious and local leaders in order to prevent early marriage. World Vision focuses on all aspects of safe motherhood including: education on the harms of early marriage and other harmful practices, family planning, HIV and AIDS education, and pre and post-natal care. Since World Vision Ethiopia’s involvement in the training of 67 traditional birth attendants (TBA), 61% of the deliveries were attended by the trained TBAs in 2004, compared with 5.7% in 1998. Contraceptive access has improved and antenatal care has increased from 15% to 56% since 2002. Attitudes in relation to early marriage and early pregnancy have also changed. Girls are going to school and staying. According to community focus group participants, “early marriages never happen these days.”

World Vision’s ultimate goal is to see women and girls empowered and work within communities to bring them to a fuller understanding of women and girl’s rights and their value. When this happens girls will not be traded as commodities in marriage, but they will be allowed to continue school, have equal participation and rights, and child marriage will end.

\textsuperscript{41} Ethiopian Demographic and Health Survey, 2000. 
\textsuperscript{42} Population Council. (July, 2004). 
\textsuperscript{45} Sixty-four percent of married girls who do not wish to become pregnant are having unprotected sex, compared to only one percent of the unmarried sexually active girls. UNICEF calculations based on administrative and survey data, out-of-school girls (1995-2001). 
\textsuperscript{46} Ethiopian Demographic and Health Survey, 2000. 
Abay is 31 years old living in one of WVE’s Area Development Projects. She was married at the age of 10, before menarche. After months of living with her husband she started to menstruate but it soon stopped due to pregnancy. Abaya gave birth to a stillborn baby after seven days of labour at home. “I was unconscious a few moments immediately before I gave birth,” said Abaya recalling the traumatic event with sorrow. “When I regained consciousness I found myself continually wetting my clothing, which was latter identified by community health workers as an obstetric fistula.” Abaya lived with her illness for 19 years, disliked by the community and excluded from community gatherings like feasts, mournings, and wedding ceremonies because of urine leakage. Fortunately, Abaya received treatment for her fistula and instruction from community health workers. She has since become an active community educator.

World Vision Recommends:

1. Build the capacity of government and law enforcement bodies to enforce laws against early marriage and uphold international conventions and family code laws. Reporting systems and the involvement of local law enforcement must be streamlined in order for them to rapidly respond to violations of these laws.

2. Advocacy against child marriage should cite federal and district laws, legal consequences, precedent prosecution examples, and religious decrees in order to better inform the population. Educate men and boys on the economic, health, psychological and social problems associated with early marriage of both boys and girls.

3. All forms of gender-based violence, including rape and abduction, must be simultaneously addressed with men and women in the community, in order to protect girls and assuage parental fears that these violations might happen to their unmarried daughters.

4. Promote programs that address the negative effects of early marriage, including poverty, HIV and AIDS, fistula, and maternal and child health. The training of teachers in appropriate responses to protect girls from early marriage should be one component of these programs.

5. Collaborate with religious leaders and faith-based organizations at national and community levels in raising awareness of the harms of early marriage in order to create community-wide prohibition of early marriage.

6. Address the educational rights of teenage mothers through providing non-formal education opportunities, including literacy, parenting and vocational training.