Background

Child marriage is a human rights violation. Globally, one in every five girls is married, or in union, before reaching age 18. Namibia conducted a formative study on child marriage in the Kunene, Omusati, Kavango West, Ohangwena and Zambezi regions. The aim of the study is to understand the magnitude and dynamics of child marriage in order to inform the development and implementation of evidence-based prevention and response interventions. The study was conducted through in-depth interviews with key informants, literature review and secondary data analysis and focus group discussions with adolescent girls aged 10-17 and boys and men aged 15-39.

Recommendations

• Undertake law reform and dissemination to ensure comprehensive and consistency implementation to prevent and response to child marriage.
• Conduct community mobilization with a focus on social norms and change
• Empower married children, divorced or separated children with asset building, employability skills, economic empowerment adolescent friendly health services
• Enhance education of children
• Enhance adolescent and Youth Sexual Reproductive Health
• Address gender based violence and harmful practices
• Improve and expand economic incentives to address poverty
• Conduct research on specific child marriage issues

Key Findings

• Prevalence rate: 18.4% for women and 4.1% for men in Kavango West the highest (25-40%) followed by Zambezi and Kunene at 17-24%
• Age at first sex: 12-17 is 42% (adolescent girls)
• Commencement of puberty was marked as the end of childhood and viewed as the beginning of eligibility for marriage and child bearing.
• Most common forms of unions are traditional marriages and cohabitation.
• Study indicate a strong link between child marriage, limited decision making and access to sexual and reproductive health services including HIV and AIDS
• Drivers: Poverty, Customary and religion beliefs, Early sexual debut and teenage pregnancy, Alcohol abuse, lack of education opportunities.
• Consequences: Poor educational attainment and unemployment, Poor Health Outcomes including sexual and reproductive health ills, Gender based violence especially intimate violence against the girl child including sexual, physical, verbal abuse by their husbands who are often much older.
• Protective measure against child marriage: Exposed to information regarding their rights, SRHR; availability of protective services; boarding schools and churches.
1. That Cabinet take note of the Child Marriage Study Report and approve the planned launch of the Child Marriage Study Report to sensitize the Namibian public on Child Marriage; and

2. That Cabinet approve the following recommendations and direct all implementing Offices/Ministries/Agencies to incorporate the recommendations in their respective Strategic/Annual Plans in order to realize full:

2.1 Law Reform and Dissemination

2.1.1 Strengthen consistent implementation and improve the operation of available legislation, such as the Combating of Rape Act, the Married Persons Act and the Convention on the Elimination of all Forms of Discrimination Against Women;

2.1.2 Enforce enacted legislation such as the Child Care Protection Act, 2015 (Act No. 3 of 2015);

2.1.3 Refine the legal and policy framework to align conflicting instruments such as the Namibian Constitution, Customary Law and the Statutory Law;

2.1.4 Develop and gazette a national policy and strategy on Elimination of all Forms of Discrimination Against Women;

2.1.5 Orient law enforcement officers, judicial members and their families and encourage the development of support networks.

2.1.6 Increase public awareness of child marriage related laws and services; and

2.1.7 Improve coordination of efforts by protective services such as Kavango West, Zambezi and Kunene;

2.2 Community Mobilization

2.2.1 Conduct periodic country-wide campaigns aimed at raising awareness of child marriage and its devastating consequences.

2.2.2 Integration of community mobilization, education and outreach into already existing programs run by line ministries, such as the Ministries of Health and Social Services: Gender Equality, Poverty Eradication and Social Welfare; Sport, Youth and National Service; Education, Arts and Culture, as well as Civil Society Organizations;

2.2.3 Engage traditional leaders, political leaders, social figures, churches, faith-based organizations and the media in preventative initiatives; and

2.2.4 Establish community level teams to spearhead preventative programs at community level.

2.2.5 Empowerment of married children, divorced or separated children and their families;

2.2.6 Facilitate safe spaces for the provision of education, health and socio-economic services and information to young mothers and cohabitants.

2.2.7 Develop support networks for married children;

2.2.8 Integration of community mobilization, education and outreach into already existing programs run by line ministries, such as the Ministries of Health and Social Services: Gender Equality, Poverty Eradication and Social Welfare; Sport, Youth and National Service; Education, Arts and Culture, as well as Civil Society Organizations;

2.3 Empowerment of married children, divorced or separated children and their families

2.3.1 Enhance married girls' formal education, vocational skills programs; ensuring the school is a safe environment for learners, free from sexual harassment or sexual abuse by learners, teachers or other staff and involving the community at large in preventative measures against pregnancy; and

2.3.2 Develop support networks for married children;

2.3.3 Improve coordination of efforts by protective services through reporting of identified cases of child marriage or cohabitation;

2.3.4 Strengthen the implementation of the Education Sector Policy for the Prevention and Management of Learner Pregnancy by offering a consistent provision of information on sexual and reproductive health to both girls and boys; promoting life skills for adults; ensuring the school is a safe environment for children, free from sexual harassment or sexual abuse by learners, teachers or other staff and involving the community at large in preventative measures against pregnancy; and

2.3.5 Provide adolescent friendly health services to deal with sexual and reproductive health to both girls and boys; promoting life skills for adults; ensuring the school is a safe environment for children, free from sexual harassment or sexual abuse by learners, teachers or other staff and involving the community at large in preventative measures against pregnancy; and

2.3.6 Facilitate safe spaces for the provision of education, health and socio-economic services and information to young mothers and their families and encourage the development of support networks.

2.4 Enhanced Education of Children

2.4.1 Promote education and school completion in communities, particularly for the girl child;

2.4.2 Ensuring equal and equitable access to school for both boys and girls through scholarships, subsidies and establishment of schools that offer all grades in hard to reach areas; and

2.4.3 Meet the needs of school going girls, such as providing sanitary wear, to prevent drop outs.

2.5 Enhanced Adolescent and Youth Sexual Reproductive Health

2.5.1 Strengthen the implementation of the Education Sector Policy for the Prevention and Management of Learner Pregnancy by offering a consistent provision of information on sexual and reproductive health to both girls and boys; promoting life skills for adults; ensuring the school is a safe environment for children, free from sexual harassment or sexual abuse by learners, teachers or other staff and involving the community at large in preventative measures against pregnancy; and

2.5.2 Improve access to quality, adolescent- and youth-friendly health services, particularly for sexual and reproductive health.

2.6 Addressing Gender Based Violence (GBV) and Harmful Cultural Practices

2.6.1 Advocate for the abolishment of all harmful and discriminatory customary laws and practices which expose children, especially the girl child, to child marriage and violate their rights;

2.6.2 Promote alternative culturally grounded practices that do not violate rights and put children at risk;

2.6.3 Harmonise traditional laws with the legal and policy framework to align with various national and international human rights instruments;

2.6.4 Educate traditional and religious leaders to uphold the law and protect the rights of children;

2.6.5 Implement awareness raising campaigns aimed at educating communities on harmful cultural and traditional practices, the rights of children and laws to protect them;

2.6.6 Empower girls and women to challenge and reject harmful traditional practices by taking control and making their own choices regarding sexuality; and

2.6.7 Address GBV and sexual abuse.

2.7 Economic Incentives to Address Poverty

2.7.1 Increase food productivity, security and nutrition;

2.7.2 Strengthen establishment of food banks; and

2.7.3 Strengthen the provision of the social grant to poor and vulnerable persons including child state grants.

2.8 Conduct Research on Specific Child Marriage Issues

2.8.1 Explore the inclusion of cohabitation as part of a broader description of marriage demands and further investigation of cohabitation to determine its prevalence among children. In addition, a standard definition of cohabitation is needed for effective programing;

2.8.2 Review of system failures in responding to child marriage issues, such as statutory rape and teenage pregnancy should be reviewed to give a better understanding of the lack of reporting and lack of duty bearer response;

2.8.3 Traditional initiations such as Olufuko, and other harmful cultural practices that are part of customary law, should be studied further to establish their role, if any, in child marriages; and

2.8.4 Extensive research be conducted on other harmful cultural practices.