ADDLESCENT GIRLS IN THE SAME

REPORT FOR PLAN INTERNATIONAL

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TABLE OF CONTENTS

| ACKN | IOWLEDGEMENTS | 1 |
|------|--|----------|
| Repo | ort authors | 1 |
| 1. | INTRODUCTION | 4 |
| 2. | SETTING THE SCENE | 5 |
| 2.1. | Overview of the SAHEL crisis context | 5 |
| | 2.1.1. Geographical overview of Burkina Faso | 6 |
| | 2.1.2. Geographical overview of Mali | 7 |
| | 2.1.3. Two key socio-ecological factors | 8 |
| | 2.1.4. Climate-conflict drivers | 8 |
| | 2.1.5. Human security | 9 |
| 3. | METHODOLOGY | 10 |
| 3.1. | COVID-19 pandemic | 12 |
| 3.2. | Research Methods | 13 |
| 3.3. | Conceptual Framework for research – AGiC 2.0 | 13 |
| | 3.3.1. Social and gender norms | 14 |
| 3.4. | Data collection | 15 |
| | 3.4.1. Quantitative Research | 17 |
| | 3.4.2. Qualitative Research | 17 |
| 3.5. | Data Analysis | 19 |
| | 3.5.1. Research ethics | 19 |
| | 3.5.2. Limitations of the data | 20 |
| 4. | ANALYSIS OF THE FINDINGS FROM BURKINA FASO AND MALI | 21 |
| 4.1. | Insecurity & Violence | 21 |
| | 4.1.1. Current challenges for adolescents living in conflict affected areas | 21 |
| | 4.1.2. Children have witnessed extreme violence from armed conflict | 23 |
| | 4.1.3. Restrictions on mobility | 24 |
| | 4.1.4. Risks of children being enlisted in armed groups | 24 |
| | 4.1.5. Trust in self-defence groups and the community to protect girls' safety 4.1.6. Insecurity & violence against girls | 25 26 |
| 4.2. | Education | 20 |
| 7.2. | 4.2.1. Restricted access to education and school | 28 |
| | 4.2.2. Adolescent girls are the first to drop out of school regardless of insecurity | 30 |
| | 4.2.3. Insecurity also restricts adolescent boys from completing their schooling | 31 |
| | 4.2.4. School drop-out implications for adolescent girls | 32 |
| 4.3. | Health | 33 |
| | 4.3.1. Early pregnancies | 34 |
| | 4.3.2. Unmet sexual and reproductive health needs | 34 |
| | 4.3.3. Female Genital Mutilation / Cutting | 36 |
| | 4.3.4. Menstruation management | 36 |
| | 4.3.5. Access to healthcare depends on location | 37 |

| 4.4. | Participation, voice & visibility | 39 |
|------|---|----|
| | 4.4.1. Restrictions on girls' freedoms | 39 |
| | 4.4.2. Norms around "appropriate behaviours" for adolescents | 40 |
| | 4.4.3. Norms around marriage | 41 |
| | 4.4.4. Laws versus norms around marriage | 42 |
| | 4.4.5. Decisions on marriage | 44 |
| 4.5. | Unmet basic needs | 46 |
| | 4.5.1. Water resources | 46 |
| | 4.5.2. Food insecurity | 47 |
| | 4.5.3. Selling and buying food | 49 |
| 4.6. | Work & Livelihoods | 50 |
| | 4.6.1. Lack of livelihood opportunities | 50 |
| | 4.6.2. Norms around unpaid and paid work for girls | 51 |
| | 4.6.3. Girls' aspirations | 52 |
| 5. | SOCIO-ECOLOGICAL FRAMEWORK – THE ENABLERS / CHANGEMAKERS & BARRIERS | 55 |
| 5.1. | Individual – The Adolescent Girl | 55 |
| 5.2. | Family & Peer Networks | 55 |
| 5.3. | Community | 56 |
| 5.4. | Society | 57 |
| 5.5. | Environment & Climate Change | 57 |
| 5.6. | Potential impact of COVID-19 | 58 |
| 6. | CONCLUSIONS – EMERGING RESILIENT PATHWAYS | 59 |
| 6.1. | The Adolescent Girls in Crisis Socio-Ecological Framework | 63 |
| 7. | RECOMMENDATIONS | 64 |
| APPE | ENDIX 1: REFERENCES | 66 |
| APPE | ENDIX 2: SELECTED QUOTES | 74 |
| | | |
| APPt | INDIX 3: ADOLESCENT GIRLS IN CRISIS SOCIO-ECONOMIC FRAMEWORK | 77 |

1. INTRODUCTION

"I'm sad because I was chased from my home by force by the terrorists." (GIRL IN 15-19 FOCUS GROUP, BOMBOROKUY, BURKINA FASO)

In 2019, the Resident and Humanitarian Coordinators for Burkina Faso, Mali and Niger warned the Sahel crisis was "reaching unprecedented levels".¹ The number of Internally Displaced People (IDPs) in Burkina Faso has risen exponentially in the past two years. By May 2020 it had reached a total of 848,329² while in Mali the country's displaced population is now over 239,000.³ People are facing repeated violent attacks by armed groups which have had a major impact on the delivery of basic services to communities, including education, health, water and shelter. The New Humanitarian⁴ speaks of "the Sahel in flames" as civilian fatalities in 2019 rose 7,000 percent in Burkina Faso and 300 percent in Mali compared to 2018. Government responses in the Sahel region, including movement restrictions are further impacting both humanitarian and development operations in the two countries.

In February 2020, the United Nations Office for the Coordination of Humanitarian Affairs (OCHA)⁵ presented stark figures in the border areas of Burkina Faso, Mali and Niger:

- 1.1 million IDPs, in addition to 110,000 refugees a four-fold increase in one year
- 3.7 million people face food insecurity
- 7.5 million people require urgent assistance

The statistics are alarming. However, they often do not provide the full picture or description of the people to whom they refer. If interventions are to be effective, it is necessary to understand the experiences, needs rights and interests of diverse social groups.

Adolescence is a crucial period in the transition from childhood to adulthood which can affect well-being across the life-cycle. During this time, the expectations, opportunities, risks and needs for boys, girls and sexual gender diverse children diverge considerably and present unique challenges that can be exacerbated in times of crisis.⁶ In the spirit of 'leave no one behind', it is of paramount concern that we determine how such protracted crises impact the lives of invisible groups such as adolescent girls.⁷

¹ UN Nations Office for the coordination of Humanitarian Affairs 'UN warns Sahel crisis is reaching unprecedented levels 8 May 2019, accessed at: https://reliefweb.int/sites/reliefweb.int/files/resources/Press%20Release%20 %20UN%20Sahel%20 %20UN%20WARNS%20SAHEL%20 CRISIS%20IS%20REACHING%20UNPRECEDENTED%20LEVELS%20%28002%29.pdf, accessed on 11 November 2019.

² UNCHR 2020 data for Burkina Faso. Available at: https://data2.unhcr.org/en/country/bfa (Accessed 19 May 2020

³ UNHCR 2020 Data for Mali. Available at: https://data2.unhcr.org/en/country/mli (Accessed 19 May 2020)

The New Humanitarian 31 May 2019 https://www.thenewhumanitarian.org/in-depth/sahel-flames-Burkina-Faso-Mali-Niger-militancy-conflict
 OCHA (2020) 'Burkina Faso, Mali and Western Niger: Humanitarian Snapshot'. 24th February 2020. Available at: https://reliefweb.int/sites/

⁵ OCHA (2020) Burkina Faso, Mali and Western Niger: Humanitarian Shapshot. 24th February 2020. Available at: <u>https://reliefweb.int/sites/</u> reliefweb.int/files/resources/20200217_bfa_mli_ner_humanitarian_snapshot_en.pdf

⁶ Plan International Australia 2018 'How investing in adolescent girls can change the world'

⁷ Plan International 2013 State of the World's Girls 2013, In Double Jeopardy: Adolescent Girls and Disasters, <u>https://plan-international.org/double-jeopardy-adolescent-girls-and-disasters</u>

2. SETTING THE SCENE

"The crisis complicates every situation for us." (GIRL IN 10-14 FOCUS GROUP, BANDIAGARA, MALI)

2.1. Overview of the SAHEL crisis context

The Sahel region encompasses five countries (Mauritania, Mali, Burkina Faso, Niger and Chad); with the crisis affecting all countries but to varying degrees of severity. The Sahel region presents a complex challenge including fragile states, poverty, refugees and migrants, transnational organised crime and armed jihadist rebellions.⁸ Despite the scale and seriousness of the crisis, challenges remain in agreeing priority areas for intervention. According to Bøås, the international community "fears a general meltdown of statehood" (ibid) and thus focuses narrowly on security. However, the local people may (also) prioritise development concerns in the face of worsening living conditions. For example, school buildings have been targeted by recent entries of insurgents, leading to their closure. UNICEF estimates that between April 2017 and December 2019, a six-fold increase in school closures occurred in the Central Sahel due to violence in the region and 3,300 schools were closed as of December 2019.⁹ There are now country-wide school closures due to the COVID-19 outbreak with over 8.4 million affected learners across the two countries.¹⁰ By February 2020, 1,100 schools were non-functional in Mali and by April, 2,500 school were closed in Burkina Faso because of insecurity.¹¹

The Food and Agriculture Organisation (FAO) of the United Nations (UN) warns that levels of food insecurity show a worsening trend because of increased population displacement arising from the deteriorating security situation in conflict areas and effects on vulnerable livelihoods¹² (see Figure 1). The World Food Programme (WFP)¹³ has described food insecurity levels in the Sahel region as "spiralling out of control" as concerns rise on the potential impact on humanitarian supply chains because of restrictions imposed in response to the COVID-19 pandemic. The UN warns across the Central Sahel, more than five million people face severe food insecurity.¹⁴ The European Commission estimates 2.8 million children under five to suffer from severe or acute malnutrition.¹⁵

⁸ Morten Bøås 2018 Rival Priorities in The Sahel – Finding the Balance Between Security and Development. The Nordic Africa Institute (Nordiska Afrikainstitutet) Policy Note no 3:2018, page 3.

⁹ UNICEF (2020) 'Crisis in the Central Sahel' Advocacy Brief. Available at: https://www.unicef.org/reports/central-sahel-advocacy-brief-2020#crisisoverview. Accessed 5 May 2020)

¹⁰ UNESCO 2020 'COVID 19 Impact on Education. Available at: https://en.unesco.org/covid19/educationresponse. (Accessed 5 May 2020)

¹¹ ACAPS (2020) 'Burkina Faso, Mali and Niger: Vulnerability to COVID-19 containment measures. 29th April 2020. Available at: https://www.acaps. org/country/burkina-faso/special-reports. (Accessed 05 May 2020)

¹² FAO 2020 Sahel (Burkina Faso, Chad, Mali, Mauritania, the Niger and Senegal) Regional overview – December 2019.

¹³ The Globe Post (2020) 'Sahel Humanitarian Crisis: 'Spiralling' Amid Virus: WFP'. 2nd April 2020. Available at: <u>https://theglobepost.com/2020/04/02/sahel-humanitarian-crisis-virus-wfp/</u>. (Accessed 5th May 2020).<u>https://theglobepost.com/2020/04/02/sahel-humanitarian-crisis-virus-wfp/</u>. (Accessed 5th May 2020).

¹⁴ UN News (2020) 'Burkina Faso crisis and COVID-19 concerns highlight pressure on Sahel food security'. 2nd April. Available at: <u>https://news.un.org/en/story/2020/04/1060942</u> https://news.un.org/en/story/2020/04/1060942 (Accessed 5 May 2020)

¹⁵ European Civil Protection and Humanitarian Aid Operations, Sahel Factsheet, 13th November 2019. Available at: <u>https://ec.europa.eu/echo/where/africa/sahel_en https://ec.europa.eu/echo/where/africa/sahel_en https://ec.europa.eu/echo/where/africa/sahel_en (Accessed 5 May 2020)</u>

Figure 1: Projected Food Insecurity and Malnutrition Situation IN THE SAHEL (June-August 2020) (FAO 2020)



2.1.1. Geographical overview of Burkina Faso

Burkina Faso is a landlocked country in Western Africa with a population of around 20.8 million.¹⁶ The median age is 17.6 years. Most of the population is from the Voltaic Mossi ethnic-cultural group, but there are many other cultural groups and languages. Over 60 languages are spoken although the official language is French. Burkina is a majority Muslim country. The country is ranked 182 of 188 countries on the Human Development Index.¹⁷

Figure 2: Map Of Burkina Faso¹⁸



¹⁶ World Population Review <u>http://worldpopulationreview.com/countries/burkina-faso-population/</u> 2020 figures.

18 https://www.britannica.com/place/Burkina-Faso

¹⁷ UNDP 'Human Development Data' 31 January 2019, accessed at http://hdr.undp.org/en/data, accessed on 05 May 2020.

Burkina Faso is a low-income Sahelian country with limited access to natural resources. It is heavily reliant on an agricultural economy with close to 80 percent of the population employed in the sector. The country remains vulnerable to climate shocks and stresses related to changes in rainfall and fluctuations in the prices of commodities on world markets.¹⁹

Burkina Faso ranks 136 of 167 on the Women, Peace, and Security Index, which ranks countries worldwide on women's equality, and reveals trends in women's wellbeing across 11 indicators, putting Burkina Faso in the lowest quartile of the rankings. Women's Mean Years of Schooling is ranked as one year,²⁰ making Burkina Faso (and Mali) the 'Worst in Group' for schooling compared to 44 other countries in the Sub-Saharan Africa Region in 2019. Burkina Faso also faces major challenges in its education and health sectors, with communicable diseases as the primary cause of morbidity and mortality²¹. In 2016, the Burkinabe government made healthcare free for pregnant women and children under five, which is hoped to have a major impact on the child mortality rate.²²

2.1.2. Geographical overview of Mali

Mali is also a landlocked country in Western Africa with a population of just under 20 million.²³ The median age is 16.3 years. The population is comprised of diverse ethnicities with around 40 different languages although the official language is French. Mali is a predominantly Muslim country. The country is ranked 184 of 188 countries on the Human Development Index²⁴.



Figure 3: Map of Mali²⁵

Mali has an undiversified economy that is vulnerable to raw material price fluctuations alongside climate change which poses major risks for the country's agricultural sector and food security.²⁶

¹⁹ World Bank ' The World Bank in Burkina Faso 04 May 2020, accessed at https://www.worldbank.org/en/country/burkinafaso/overview accessed at https://www.worldbank.org/en/country/burkinafaso/overview accessed at https://www.worldbank.org/en/country/burkinafaso/overview accessed on 5 May 2020.

²⁰ The Index measures the average number of years of education of women ages 25 and older. Source: UNESCO Institute for Statistics https://giwps.georgetown.edu/country/burkina-faso/

²¹ USAID 'Burkina Faso – Global Health' 27 August 2019, accessed at https://www.usaid.gov/burkina-faso/global-health, accessed on 04 November 2019.

²² Terre des Hommes 'Burkina Faso: free primary healthcare for children under 5'. Available at: <u>https://www.tdh.ch/en/news/burkina-faso-free-healthcare-children</u> (Accessed on 22 May 2020)

²³ World Population Review http://worldpopulationreview.com/countries/mali-population/ 2019 figures.

²⁴ UNDP 'Human Development Data' 31 January 2019, accessed at http://hdr.undp.org/en/data, accessed on 5 May 2020.

²⁵ https://www.britannica.com/place/Mali

²⁶ World Bank 'The World Bank in Mali' 18 October 2019, accessed at: https://www.worldbank.org/en/country/mali/overview Accessed 4 November 2019.

Mali's performance on the Women, Peace, and Security Index ranks it as 159 out of 167 which places it in the 10 lowest-ranked countries. Women's Mean Years of Schooling is one year (equal with Burkina Faso). Mali has one of the world's worst health indices including malnutrition and poor sexual and reproductive health. The government has recently announced free health care to pregnant women and children under five years and citizens over 70 years old in the hope of substantially improving health outcomes in the country.²⁷

This difficult context has been worsened by political instability. Mali has been dealing with a complex emergency with a United Nations Multidimensional Integrated Stabilisation Mission in Mali (MINMUSA). This was established in 2013 to support political processes and is tasked to carry out a number of peacekeeping and peacebuilding missions.

2.1.3. Two key socio-ecological factors

There are two significant socio-ecological factors at play: the climate/conflict drivers; and the prioritisation of militarised security over human security and these are discussed below.

2.1.4. Climate-conflict drivers

Although they were not directly researched in this study, environment and climate issues are fundamental components in understanding the challenges faced by communities in Burkina Faso and Mali. Climate change impacts are aggravating food and water insecurity in the region which in turn leads to increased conflict between communities in Mali. As a result of this conflict, the number of people living in poverty is increasing, public services are weakening and traditional means of survival are being disrupted.²⁸ It is also exacerbating long standing tensions between communities over water and land – particularly pastoralist farmers (Dogon) and nomadic herders (Fulani). The Sahel contains some of the poorest and most fragile states in the world and experiences some of the highest environmental degradation²⁹ and vulnerability to climate change^{30,31,32}. In 2019 Mali had an above average cereal output but food security still worsened significantly in the central and northern parts of the country as a result of the escalation of conflict.³³

In Burkina Faso, over nine million hectares of productive land has been degraded. This is estimated to expand by over 300,000 hectares per year.³⁴ Agriculture accounts for around 80 percent of employment and it is projected that 3.5 million people are already food insecure and this number continues to grow. According to FAO, Burkina Faso gathered an above average harvest in 2019, except in conflict zones where food security conditions have worsened significantly, particularly in the Sahel and Centre Nord regions.³⁵ Conflict and particularly its effects on increasing migration serves only to exacerbate an already severe situation.³⁶ Nigeria-based conflict researcher, Chitra Nagarajan points out³⁷ that climate change does not necessarily cause conflict but:

"Climate change is a threat multiplier in a context where the conditions and the drivers for conflict already exist"

Seeing climate change as a risk multiplier underscores the need for national governments and the development community to address the particular threat to work and livelihoods for the large population of youth by "expanding job opportunities and safety nets for young people involved in the agricultural and livestock sectors."³⁸ (8).

²⁷ The Lancet 'Mali announces far-reaching health reform,' 23 March 2019, accessed at <u>https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(19)30684-1/fulltext</u> accessed on 7 November 2019.

²⁸ ICRC 2019 Mali-Niger: Climate change and conflict make an explosive mix in the Sahel, News release, 22 JANUARY 2019 <u>https://www.icrc.org/en/</u> document/mali-niger-climate-change-and-conflict-make-explosive-mix-sahel

²⁹ UN News 2018 Building climate resilience and peace, go hand in hand for Africa's Sahel – UN forum, 13 November 2018 https://news.un.org/en/ story/2018/11/1025671

³⁰ Lyse Doucet 2019 The battle on the frontline of climate change in Mali, BBC News 22 January 2019 <u>https://www.bbc.co.uk/news/the-reporters-46921487</u>

³¹ USAID (various dates) Climatelinks MALI https://www.climatelinks.org/countries/mali

³² USAID (various dates) Climatelinks Burkina Faso https://www.climatelinks.org/countries/burkina-faso

³³ FAO 'Global Information and Early Warning System – Mali Country Brief – 3 April 2020. Available at: <u>http://www.fao.org/giews/countrybrief/country.jsp?code=MLI</u> (Accessed 21 May 2020)

³⁴ Reliefweb 2019 Burkina Faso: Climate change triggers rural exodus *By Issa Sikiti da Silva* <u>https://reliefweb.int/report/burkina-faso/burkina-faso-</u> climate-change-triggers-rural-exodus

³⁵ FAO 'Global Information and Early Warning System – Burkina Faso Country Brief – 3 April 2020. Available at: <u>http://www.fao.org/giews/</u> <u>countrybrief/country.jsp?code=BFA</u> (Accessed 21 May 2020)

³⁶ Reliefweb 2019 Burkina Faso: Climate change triggers rural exodus By Issa Sikiti da Silva <u>https://reliefweb.int/report/burkina-faso/burkina-faso-</u> climate-change-triggers-rural-exodus

³⁷ Joe Penney 2019 West Africa's Sahel region is especially vulnerable to climate change but also weak governance, Quartz Africa, October 1, 2019 https://qz.com/africa/1719442/west-africas-sahel-vulnerable-to-climate-change-bad-governance/

³⁸ Robert Muggah and José Luengo Cabrera 2019 The Sahel is engulfed by violence. Climate change, food insecurity and extremists are largely to blame, World Economic Forum Annual Meeting 23 Jan 2019 <u>https://www.weforum.org/agenda/2019/01/all-the-warning-signs-are-showing-in-thesahel-we-must-act-now/</u>

2.1.5. Human security

Typical uses of the term 'security' do not encompass the broader components of 'human security', which is "a broad and multi-faceted concept that includes freedom from violence and war, political repression, poverty and hunger, diseases, and environmental hazards".³⁹ This dichotomy is characterised as "more boots at the expense of development".⁴⁰ This broader focus is preferred in this context as it also includes linkages to statehood security that the international development community are focused on. While 'crisis' often suggests immediacy, the Sahel region is in the grip of 'protracted crises and conflicts, environmental disasters, persistent underdevelopment, epidemic and economic downturns which are all 'factors that endanger human security by undercutting prospects for peace, stability, sustainable development and people's dignity'.⁴¹

Furthermore, because available statistics are rarely disaggregated (either sufficiently or at all), it is often difficult to identify the situation of children and youth, and within that, adolescent girls in particular – who are the focus of this research. Some updates and situation analyses provide data on issues affecting girls' security,⁴² however, these are often at a theoretical level of analysis which do not convey the lived experiences of the girls themselves. Others examine issues affecting girls such as menstrual hygiene, child marriage and female genital cutting/mutilation.⁴³ But there is limited or no evidence on the factors causing adolescent girls' insecurity and what it would require to ensure positive change in addressing these issues.

³⁹ Niicolò Sartori and Daniele Fattibene 2019 Human Security and Climate Change. Vulnerabilities in The Sahel, EUROMESCO BRIEF No. 94, 1 March 2019 (page 1).

⁴⁰ Bøås ibid page 7.

⁴¹ Sartori and Fattibene 2019 (page 1).

⁴² Global Protection Cluster Analysis Burkina Faso, dated 16 May 2019

⁴³ UNICEF Burkina Faso, Programme Overview on Protection, undated.

3. METHODOLOGY

The foregoing discussion provides the context for the research undertaken by Plan International in partnership with the Centre for Gender and Disaster (CGD) at the Institute for Risk and Disaster Reduction (IRDR), University College London (UCL), and the United Nations Population Fund (UNFPA).

This study builds on considerable previous work in Bangladesh (Rohingya Crisis), South Sudan, the Lake Chad area and Lebanon, led by the Centre for Gender, Peace and Security at Monash University.⁴⁴ That research series explored the experiences of adolescent girls in protracted crises, where adolescent girls' identified the following key issues: security and violence (including lack of mobility); education; health; voice and participation. This study is a continuation of that work, with the CGD now partnering with Plan International to take the work forward by applying a modified version of the existing research design to Burkina Faso and Mali, where Plan International has been operating since 1976.

While the Sahel crisis affects more countries than those included in this study, Burkina Faso and Mali were chosen to underline the deterioration of the crisis and the risks to adolescent girls. Burkina Faso is a key geographical barrier in stopping the spread of violence into West African coastal countries (Togo, Benin, Ghana and the Ivory Coast). Furthermore, the worsening crisis in the Sahel currently lacks global attention, especially in relation to the effects on girls. By conducting research which focused on the voices of adolescent girls themselves, we can better understand how to respond to their unmet needs on the ground.

This research adopted and adapted the original Adolescent Girls in Crisis (AGiC) research and its five influences.⁴⁵ This methodology has five features (see Figure 4). First it uses a grounded theory approach, which draws on the voices and experiences of adolescent girls to establish the knowledge base. Second, it adopts a feminist methodology which positions the advancement of the rights and empowerment of girls as central to the research process. Third, it is adolescent centred in its efforts to amplify and legitimise the knowledge of young people. Fourth, the research adopts an intersectional approach that recognises diversity in the adolescent experience of crisis. In so doing, it identifies where experiences are consistent across adolescent girls, and where and why some experiences may vary. Finally, the earlier research adopts a rights-based approach with a focus on the rights of the child.

Figure 4: the five features of the AGiC methodology



The design of the present study developed the research framework used in previous studies to consider the critical issues highlighted by adolescent girls, adolescent boys, parents and other community members in the two new focus countries. The new AGiC 2.0 framework created for the research in Mali and Burkina Faso also added a socio-ecological framework to the methodology to structure the new focus on the enabling environment.

44 The previous AGiC studies are available here: https://plan-international.org/publications/adolescent-girls-crisis.

45 Plan / Monash, 2018. Adolescent Girls in crisis: experiences of risk and resilience across three humanitarian settings; Plan International (No Date) CONDUCTING RESEARCH WITH ADOLESCENT GIRLS IN PROTRACTED CRISES by Hannah Jay and Katrina Lee-Koo for Plan International. An analysis of the **enabling factors for change** was added to the framework, which assessed the key components of a disaster-resilient community (taking disaster as an umbrella term for shocks and disturbances of various kinds). In this broader context, we include the concept of 'resilience' as a potentially more positive and active interpretation of people's lives in protracted crises. People in general, and adolescent girls in particular, are not just passive in the face of such challenges. However, we aimed to uncover exactly what this means for adolescent girls in our two country contexts. We do not include an extensive discussion of the resilience concept here, but it is useful to identify some important aspects. The '3-D Resilience Framework' (Figure 5) presents three different capacities from which resilience emerges and which together lead to different outcomes:⁴⁶

Figure 5: The 3D resilience framework

| stability | flexibility | change |
|-------------------------------|--------------------------|-----------------------------|
| ABSORPTIVE COPING Capacity | ADAPTIVE Capacity | TRANSFORMATIVE Capacity |
| (persistence) | (incremental adjustment) | (transformational responses |

Béné et al point to the prominent aspect of the framework which is that 'resilience emerges as the result not of one but all of these three capacities: absorptive, adaptive and transformative capacities, each of them leading to different outcomes: persistence, incremental adjustment, or transformational responses.'

Absorptive capacity is the capacity to absorb and cope with known shocks and stress, to reduce the immediate impact on people's lives, livelihoods and basic needs.⁴⁷ For the research in Burkina Faso and Mali, we explored how our participants in general, and adolescent girls in particular, coped with the turmoil caused by protracted crises and how they try to establish or maintain stability in their lives.

Adaptive capacity is the capacity to make intentional, incremental adjustments in anticipation of or in response to change, to adjust and create more flexibility in the future. Here we explored the adaptation capacity of adolescent girls in their changed or changing location.

Transformative capacity is concerned with issues of power and the capacity to make intentional changes to stop or reduce the causes of risk, vulnerability, poverty, and inequality.⁴⁸ Here we explored the perceptions of all social groups regarding who has the power to enable and create social change, and in particular who can effect change related to the key issues raised by adolescent girls in particular.

"Transformation requires engagement with issues of power at two levels (Kapoor, 2007⁴⁹): changes in the social structures that influence decision-making (in units that could include households, communities, businesses, government departments, non-governmental organisations) and changes in individual values, capabilities and choices. Many of the transformational changes therefore depend on altering existing power relations (e.g. gender dynamics), which involves recognising the social and political processes that both undermine and constrain resilience."⁵⁰

Plan International would add an additional component, 'Anticipatory Capacity' which refers to the ability of social systems to anticipate and reduce the impact of climate variability and other extremes through preparedness and planning. Anticipatory capacity is seen in proactive action before a foreseen event to avoid upheaval, either by avoiding or reducing exposure or by minimising vulnerability to specific hazards. This capacity is particularly valuable.

50 Gray et al 2015 page 38.

⁴⁶ Christophe Béné, Rachel Godfrey Wood, Andrew Newsham and Mark Davies 2012 Resilience: New Utopia or New Tyranny? Reflection about the Potentials and Limits of the Concept of Resilience in Relation to Vulnerability Reduction Programmes, IDS WORKING PAPER, Volume 2012 Number 405, CSP WORKING PAPER Number 006.

^{47 3-}D definitions adapted from OXFAM 2017 Absorb, Adapt, Transform: Resilience capacities <u>https://policy-practice.oxfam.org.uk/publications/absorb-adapt-transform-resilience-capacities-620178;</u>

⁴⁸ Aditya V. Bahadur, Katie Peters, Emily Wilkinson, Florence Pichon, Kirsty Gray and Thomas Tanner 2015 THE 3AS: TRACKING RESILIENCE ACROSS BRACED, BRACED Working Paper, ODI <u>https://www.odi.org/sites/odi.org.uk/files/odi-assets/publications-opinion-files/9812.pdf</u>.

⁴⁹ Kapoor, R 2007 Introduction: Transforming self and society: Plural paths to human emancipation, Futures. 39(5), pp.475–486.

The following research questions informed the research:

- What are the socio-political factors in the Sahel crisis that most impact the insecurity of adolescent girls?
- How do adolescent girls (10-14 and 15-19 years) experience insecurity related to the crisis in the Sahel? How has their environment (related to the crisis) impacted their experiences of education, violence and protection, freedom of movement, access to food and other basic needs like sexual health and reproductive rights (SRHR) and mental health services?
- How do adolescent girls define and experience the life stage that they are in how do they feel about the changes that they go through from biological to behavioural changes, and how do they perceive the crisis impacting the changes they undergo?
- How do adolescent girls describe how positive change needs to happen in their context and what positive enablers of change would allow them to feel secure?
- Taking the environment of the Sahel into account, what are the proposed solutions that national, community, international and humanitarian actors see as required to address the insecurity of adolescent girls based on their knowledge and understanding of the crisis? And does this coincide with what the girls' recommendations are?

3.1. COVID-19 Pandemic

While the data collection for this study took place before the widespread outbreak of COVID-19, it is important to underline the potential the virus has to exacerbate the already pressing issues in the Sahel.⁵¹ Lessons from the Ebola outbreak 2014-2015 demonstrated that school closures and other measures to limit interaction had damaging long term effects on children and particularly girls.⁵² While COVID-19 numbers are still relatively low in Burkina Faso and Mali and testing is limited, both the virus and the government response pose a number of risks to already vulnerable populations:

- armed groups could take advantage of the containment measures to escalate violence and there is a risk
 of religious extremism growing;
- women are particularly vulnerable to losing employment;
- the health systems are likely to be quickly overwhelmed and unable to address COVID-19 nor other health problems;
- the lack of access to education means that more children will be vulnerable to food insecurity, losing
 access to school meals distributed by governmental and humanitarian organisations (as was the case
 during the Ebola outbreak)⁵³;
- school closures can expose children to increased risks of direct violence and exposure to intimate partner violence in the household;
- the economic impact could lead to families deciding not to send their children back to school once they re-open;⁵⁴ this is especially true for girls at secondary levels whose education has been disrupted.⁵⁵

There is a dearth of evidence on the situation of adolescent girls in this conflict context – before and during the COVID-19 pandemic outbreak, which means adolescent girls' unique needs are unseen and unmet. What does all this mean for adolescent girls, their peers, their families and their communities? What impact is the crisis having on the lives of adolescent girls specifically? What would adolescent girls themselves have to say about the situation and their experiences of living through protracted crises? The following study provides insights into girls' lives and how they cope with challenges; lessons from their accounts become even more crucial in the current pandemic to better understand their situation.

⁵¹ John Hopkins University (2020) Coronavirus Resource Centre. (Accessed 05 May 2020)

⁵² Plan International (2020) 'Living Under Lockdown: Girls and COVID-19'. Available at: <u>https://plan-international.org/publications/living-under-lockdown</u>. (Accessed 21 May 2020)

⁵³ Ibid.

⁵⁴ ACAPS (2020) 'Burkina Faso, Mali and Niger: Vulnerability to COVID-19 containment measures. 29th April 2020. Available at: https://www.acaps.org/country/burkina-faso/special-reports. (Accessed 05 May 2020)

⁵⁵ Guyatt, T 'Millions of Girls are out of school – But Data shows that Gender Alone is not the main culprit' UNESCO Blog, March 15, 2019, http://uis.unesco.org/en/blog/millions-girls-are-out-school-data-show-gender-alone-not-main-culprit.

3.2. Research Methods

The research was conducted in two phases.

The **first phase** was a consolidation of existing knowledge about the crisis in the Sahel through a desk study. This included identifying the issues affecting the insecurity of adolescent girls more generally, as well those specifically affected by the Sahel crisis. Additionally, it included the second (draft) version of the AGiC research framework (Figure 6), which sought to focus on solutions for adolescent girls in protracted crises. These combined components were then drawn together in the development of the research design and tools for Phase 2 of this study in consultation with Plan International including its country teams in Burkina Faso and Mali.

The **second phase** of the study consisted of quantitative and qualitative research with adolescent girls within two age brackets (aged 10 -14 and 15-19), The purpose of this was to further analyse the intersection of age and gender in the experiences of adolescents. It sought to build on the earlier research in the new contexts and explore new areas raised by them. It sought ideas from the adolescents themselves on how to enable necessary changes that they identify.

3.3. Conceptual Framework for Research – AGiC 2.0

The stimulus for this research lies in both the continuing relevance of the key issues emerging from earlier projects in the AGiC series and the considerable challenges facing the Sahel region. In this section, we discuss the conceptualisation of the current research in Burkina Faso and Mali and present a graphical representation (Figure 6) of its initial core assumptions; in particular, the consideration of the adolescent girl's socio-ecological context and the exploration of those who are the potential enablers of social change. This framework re-appears at the end of the report (<u>p.77</u>) when we present the revised version based on the research evidence.

The AGiC Draft Framework 2.0 which structured the research in Mali and Burkina Faso

THE ENABLING ENVIRONMENT

AGIC 1.0 looked to understand the unique impact crises have on adolescent girls; how they experience and navigate insecurity; their specific and unique needs; and the opportunities that exist to support girls in crisis situations. In this latest research we aimed to dig deeper into the possibilities for change. These lie in the enabling environment which 'reflects a set of interrelated conditions: legal, political, social, and cultural'⁵⁶ and acknowledges the importance of wider institutional, policy and socio-economic factors in supporting community-level resilience.⁵⁷ Research into the enabling environment in other contexts of risk suggests the following key factors are relevant in this context for promoting positive change:

- Appropriate policy, planning, prioritisation and political commitment. Here, the principal components of an enabling environment are identified as: political consensus on the importance of the issue of adolescent girls' security, wellbeing and empowerment; making the issue a policy priority at all levels of government; a national policy, strategy and implementation plan for addressing the problem; and locallevel understanding and support.
- 2 Effective legal and regulatory systems, including: relevant and enabling legislation, regulations, etc., at national and local levels; defined jurisdictions and responsibilities for the issue; mechanisms for compliance and enforcement at all levels; and guarantees of relevant rights (e.g. to be listened to and consulted). People need to be aware of their rights and the legal obligations of government and other stakeholders to provide protection; and governments and other stakeholders need to be committed to upholding and respecting those rights.
- 3 Good governance. A supportive political, administrative and financial environment where institutional mandates and responsibilities are clearly defined; inter-institutional or co-ordinating mechanisms exist, with clearly designated responsibilities; and adequate human, technical, material and financial resources to meet institutional roles and responsibilities.
- 4 National and local governments are committed to information sharing (transparency) and dialogue with communities relating to the issues. Primary, secondary and tertiary education courses provide relevant education through the curriculum and extra-curricular activities; and appropriate education and training programmes for planners and field practitioners are designed and implemented.

57 John Twigg 2009 Characteristics of a Disaster-Resilient Community, A GUIDANCE NOTE, Version 2, November 2009, Interagency Group

⁵⁶ Joar Svanemyr, Avni Amin, Omar J. Robles, and Margaret E. Greene 2015 Creating an Enabling Environment for Adolescent Sexual and Reproductive Health: A Framework and Promising Approaches, Journal of Adolescent Health 56 (2015) S7eS14, P S8.

These key factors are predicated on the existence of the rule of law and linked to democratic and rightsbased dispensations. These may be compromised or non-existent in conflict settings. Even where there exist strong and effective authoritative legal and regulatory systems, they are still required to be steeped in democracy and adherent to a rights-based approach to effectively enable transformative change.

In exploring the level of support across these factors, we carried out Key Informant Interviews (KIIs) with relevant persons in both countries. We aimed to include key persons in education, health and other essential services in local authorities, international non-governmental organisations (INGOs) or national NGOs implementing relevant programmes, local NGOs/Community Support Organisations, community leaders and parents/quardians. However, the particular KIIs depended on the situation on the ground in these conflict locations where violence erupts regularly and the presence of institutional structures (state and non-state) are often compromised. Hearing from parents and guardians and local community leaders was equally important in exploring possibilities for enabling change.

3.3.1. Social and Gender Norms

We have strong evidence that gender norms harm both women's and men's health⁵⁸ but that women's and girls' vulnerability to violence is deeply rooted in the greater power and value that societies afford men and boys in access to material, symbolic, and relational resources, compared with women. To be born a girl in a patriarchal society is a fundamental risk factor for various types of gender-based violence.⁵⁹

Therefore, we aimed to explore these social and gender norms and the extent to which they are fixed or open to transformation with our various key informants. To have any hope of change, it is important to apply systematic, sustained programming across the adolescent girl's social ecology (defined as interacting social, institutional, cultural, and political contexts of people's lives to transform gender-power inequalities).60 We need to reinforce and extend the 'Five Influences'⁶¹ of the AGiC position so that we:

- Work across the ecological model;
- Use an intersectional, gender-power analysis;
- Encourage sustained, multisector, coordinated efforts;
- Adopt theory- and evidence-informed approaches;
- · Support programming that encourages personal and collective critical thought;
- Reinforce aspirational programming that inspires individual and collective activism.⁶²

We explored the enabling environments through the use of an initial ecological model (see Figure 6 below) which was designed to structure and guide the research design and provide a lens for identifying the social and structural drivers of change or inertia for adolescent girls in protracted crises. While we began with just the key issue domains raised by previous cohorts of adolescent girls in AGiC research (Security & Violence; Education; Health; and Participation, Voice and Visibility), we also left room to discover new issues which might be as, or more, significant in the Burkina Faso and Mali contexts.

Thus, the direction the AGiC research as a whole is taking is towards identifying the pathways to a long-term commitment to change. The Human Rights Center and Save the Children recommend that:

'effective norm-change interventions ... must be long-term (more than two years), should involve a broad range of influential actors in a given community, and should be developed and driven by community members themselves.' 63

While some norms may be more entrenched than others, the notion that a long-term commitment is desirable is a good starting point for the AGiC research. In addition, we would argue for the modification that, in its next iteration, AGiC should be developed and driven by adolescent girls themselves; informed by their ideas and delivering support where needed to build their capacity to participate.

⁵⁸ Barker G, Ricardo C, Nascimento M. Engaging men and boys in changing gender-based inequity in health: evidence from programme interventions. Geneva: WHO; 2007. P. 29

⁵⁹ Lori Michau, Jessica Horn, Amy Bank, Mallika Dutt, Cathy Zimmerman 2015 Violence against women and girls 4. Prevention of violence against women and girls: lessons from practice, Lancet 2015; 385: 1672-84, P. 1674.

⁶⁰ Lori Michau, Jessica Horn, Amy Bank, Mallika Dutt, Cathy Zimmerman 2015 Violence against women and girls 4. Prevention of violence against women and girls: lessons from practice, Lancet 2015; 385: 1672-84, P. 1672.

⁶¹ Plan / Monash, 2018. Adolescent Girls in crisis: experiences of risk and resilience across three humanitarian settings; Plan International (No Date) CONDUCTING RESEARCH WITH ADOLESCENT GIRLS IN PROTRACTED CRISES by Hannah Jay and Katrina Lee-Koo for Plan International. 62 Ibid page 1673

⁶³ Freccero, Julie and Audrey Whiting 2018 TOWARD AN END TO CHILD MARRIAGE: Lessons from Research and Practice in Development and Humanitarian Sectors. SAVE THE CHILDREN AND BEYOND, The Human Rights Center at the University of California, Berkeley, School of Law and Save the Children



The initial draft framework aimed to understand the influences in adolescent girls' lives (their family, their peers) and to understand, from their perspective, who had a role and also the power to enable change in any of the issues they identified. We also asked the same questions of parents and guardians, community leaders and officials. This research was exploratory in terms of the appropriateness of such questions and the extent to which enlightening responses would be gained in difficult circumstances. We found the structure to be productive and informative but limited by constraints on time and on safety.

The final framework (see below in Conclusions) was developed after analysis of all the new data.

3.4. Data Collection

This report uses data collected in February 2020 in eight sites across Mali and Burkina Faso (see Table 1). The sites of Bandiagara and Bankass are located in the Mopti region of Mali. Diré and Gourma Rharous are located in the Timbuktu region of Mali. Timbuktu was chosen for this research because it is a region that has experienced lots of population movements due to increased violence. This insecurity has led to a lack of access to water, healthcare, food and protection for civilians. Likewise, Mopti has experienced numerous security incidents and has a number of Internally Displaced Persons (IDPs), which in May 2019 had reached almost 50,000.⁶⁵ Plan International also has Emergency Offices in Mopti and Timbuktu, which meant that we could have effective oversight of data collectors and participants' safety and could conduct any referrals as needed.

⁶⁴ This framework has been adapted from: Plan International 2018 Adolescent Girls in crisis: experiences of risk and resilience across three humanitarian settings, Report for Plan International by Hannah Jay and Katrina Lee-Koo from Monash University's Gender, Peace and Security Centre; Plan International (No Date) Conducting Research with Adolescent Girls in Protracted Crises, Report for Plan International Australia by Hannah Jay and Katrina Lee-Koo from Monash University's Gender, Peace and Security Centre; Health Communication Capacity Collaborative, Copyright 2018 I Johns Hopkins University <u>https://sbccimplementationkits.org/lessons/analysis-of-the-situation/</u>. And influenced by: Bronfenbrenner U, Morris PA: The bio-ecological model of human development. In: Lerner RM, Damon W, editors. The Handbook of child psychology, Vol 1: Theoretical models of human development, 6th ed., pp.793-828. Hoboken, NJ: Wiley; 2006; GAGE Consortium July 2017 Gender and Adolescence: Why understanding adolescent capabilities, change strategies and contexts matters, Gender and Adolescence: Global Evidence (GAGE) <u>www.gage.odi.org.uk</u>.

⁶⁵ ReliefWeb 'Mopti: Over 50,000 people displaced amid inter-communal violence' 14 June 2019. Available at: <u>https://reliefweb.int/report/mali/mopti-over-50000-people-displaced-amid-inter-communal-violence</u>. (Accessed 21 May 2020)

Figure 7: Map of Mali



The sites of Tougan and Bomborokuy are located in the Boucle du Mouhoun region of Burkina Faso and Kongoussi and Pissila are located in the Centre Nord region. The Centre Nord region was chosen as it is one of regions most affected by the insecurity, and the number of IDPs is the highest in the country. Boucle du Mouhoun has been newly affected by the security crisis, with the number of IDPs in the region rapidly growing at the time of choosing appropriate research sites. Centre Nord and Boucle du Mouhoun are project areas for Plan International so like Mali they could also support data collectors as needed.

Figure 8: Map of Burkina Faso



Plan International country offices employed data collectors for these sites. They all received a week-long training ahead of data collection commencing. The training covered child and youth safeguarding, including codes of conduct and referral processes; the importance of confidentiality and privacy; how to listen to children and young people nonjudgementally on sensitive issues; and training on the research tools and the participatory action research methodology.

In Mali, data collection was managed by Plan International country teams, and in Burkina Faso it was managed by Plan International country teams and UNFPA. Due to security reasons, it was not always possible to have an all-female research team for conducting the girls and women's focus group discussions (FGDs) and interviews. However, in both countries 50 percent of the data collectors were female and 50 percent male. It was decided that female researchers led the discussions in girls' and women's FGDs and KIIs, and male researchers in the boys' and men's FGDs and KIIs.⁶⁶ Where this was not possible, a mixed team was used, and female data collectors led on the facilitation while their male counterpart took notes.

⁶⁶ This is in line with SADDD guidelines and Core Humanitarian Standards (CHS)

In Mali, participants were mobilised by Plan International staff with the support of local authorities; briefings were held with advisors, local women and youth leaders (boys and girls) to help mobilise participants across the different villages prior to the arrival of data collectors. For the KIIs, community leaders and local authority KIIs were identified with the support of the latter according to their understanding of the topics and were then introduced to the data collectors to conduct the interviews. Key informants from NGOs were contacted by Plan staff and the head of each organisation was asked to identify the best agent according to the topics covered in the interview. In Burkina Faso, supervisors mobilised participants and scheduled appointment times before data collectors arrived and the participants were selected.

During data collection and analysis, adolescent girls and boys were divided into two age brackets: 10-14 and 15-19 years. The purpose of this was to further analyse the intersection of age and gender in the experience of adolescents and crisis. No participants were personally identifiable. Names were not used. All data was anonymised prior to sending to Plan International Global Hub and University College London (UCL) for analysis and reporting.

3.4.1. Quantitative Research

Data collection adopted a mixed methods approach, including a quantitative survey with adolescent girls collected face to face. Quantitative data collection was employed to allow a degree of generalisation and comparison across research sites and with the previous AGiC 1.0 research studies. Surveys were conducted across the two countries with a total of 378 respondents, including 251 in Mali and 128 in Burkina Faso.⁶⁷ The findings of this survey are reflected in the quantitative data presented in this report. Topics discussed are in Table 1.

3.4.2. Qualitative Research

A total of 72 single sex focus group discussions (FGDs) of six to 12 participants were conducted with adolescent girls and boys. Mali conducted FGDs with a total of 126 girls (64 aged 10-14 and 62 aged 15-19) and with a total of 48 boys. Burkina Faso conducted FGDs with a total of 286 girls (131 aged 10-14 and 155 aged 15-19) and with a total of 100 boys. A further 17 single sex FGDs were conducted with parents and guardians. Burkina Faso had FGDs with a total of 84 parents/guardians and Mali with a total of 67. The purpose of these discussions was to provide greater contextual depth, allow open-ended questions and answers, and have free-flowing discussions. The FGDs used a participatory action research methodology with collaborative exercises designed to get the girls and boys to get comfortable speaking on different topics. The FGD allowed consensus building around certain issues but also highlighted the different views and experience between the girls and boys.

Although this study is aimed at adolescent girls, the inclusion of adolescent boys served to:

- · Cross-reference responses with those given by girls;
- Explore social norms in relation to girls and boys in the various sites;
- · Examine attitudes and behaviours of adolescent boys towards adolescent girls;
- Determine any differences between girls' and boys' experiences; as well as;
- Extend the inclusive, community approach to data collection.

A total of 67 key informant interviews (KIIs) were conducted with adolescent girls, community leaders, local authorities, community-based organisations (CBOs) and non-governmental organisations (NGOs). Mali held interviews with 48 girls (19 aged 10-14 and 29 aged 15-19) and 15 with adults in the community. Burkina Faso held interviews with 43 girls (25 aged 10-14 and 18 aged 15-19) and 17 with adults in the community. These produced contextual depth and allowed for follow up questions where respondents could speak freely.

⁶⁷ The team in Burkina Faso opted to do more qualitative research and less surveys – seeing this as an opportunity to conduct interviews and focus group discussion in comparison to surveys which they conduct more regularly. They also wanted to use the opportunity to contextualise information directly from the adolescent girls and ask more open-ended questions.

| Site | Girls 10-14 | Girls 15-19 | Boys 10-14 | Boys 15-19 | Parents & Guardians ⁶⁸ | CBO/ NGO | Community Leader | Local Authority |
|-------------------|--------------------------------------|--------------------------------------|---------------|---------------|--------------------------------------|-------------|---------------------|--------------------|
| MALI | | | | | | | | |
| Bandiagara | KII (3) FGD (2) Survey (32) | KII (2) FGD (2) Survey (32) | FGD (2) | FGD (1) | FGD (2) | KII (1) | KII (1) | KII (2) |
| Bankass | KII (2) FGD (3) Survey (35) | KII (3) FGD (2) Survey (28) | FGD (1) | FGD (2) | FGD (2) | KII (1) | KII (1) | KII (2) |
| Diré | KII (3) FGD (3) Survey (34) | KII (2) FGD (2) Survey (29) | FGD (2) | FGD (1) | FGD (2) | KII (1) | KII (1) | KII (1) |
| Gourma Rharous | KII (2) FGD (2) Survey (25) | KII (2) FGD (2) Survey (38) | FGD (1) | FGD (2) | FGD (2) | KII (1) | KII (1) | KII (2) |
| BURKINA FASO | | | | | | | | |
| Pissila | KII (2) FGD (2) Survey (14) | KII (2) FGD (4) Survey (18) | FGD (1) | FGD (1) | FGD (2) | KII (1) | KII (1) | KII (1) |
| Kongoussi | KII (2) FGD (4) Survey (12) | KII (2) FGD (4) Survey (19) | FGD (1) | FGD (2) | FGD (2) | KII (4) | KII (2) | KII (1) |
| Tougan | KII (2) FGD (5) Survey (7) | FGD (4) | FGD (1) | FGD (2) | FGD (2) | KII (1) | KII (1) | KII (1) |
| Bomborokuy | KII (2) FGD (4) Survey (15) | FGD (4) | FGD (1) | FGD (2) | FGD (3) | KII (2) | KII (1) | KII (1) |
| Total | KII (18) FGD (25) Survey (174) | KII (17) FGD (24) Survey (207) | FGD (10) | FGD (13) | FGD (17) | KII (12) | KII (9) | KII (11) |

Table 1: Number of Surveys, Key Informant Interviews and Focus Group Discussions by Location

68 Female and male parents and guardians were split into different groups to encourage women to speak openly on issues.

Table 2: Sample Questions. Section breakdown of the different tools



The KIIs and FGDs used open ended questions to capture the perceptions, attitudes and experiences of adolescent girls and boys and also the complexity and changing realities of their lives. Questions sought to encourage responses regarding their experiences and those of their peer group on topics including education, health, experience of violence, household and family experiences and economic and food security. Girls were encouraged to speak openly and freely about their fears and hopes for the present and on what changes they would like to see, and which power holders could make change happen. The KIIs with other actors and the FGDs with parents and guardians aimed to further contextualise the information from the adolescents. Adults were asked about their knowledge of the experiences of adolescent girls and asked to describe their attitudes towards girls' education and roles in the household. This data provided important context on social norms in the community and attitudes towards the views and needs of adolescent girls.

3.5. Data Analysis

Following data collection, the data collectors transcribed all the interviews and sent them to the research team at Plan International for translation into English. Data analysis was undertaken by a team based at UCL. All transcripts were read by two researchers with one specifically focusing on the French transcripts to ensure consistency and deal with any inaccuracies. Segments of text and information from the transcripts were extracted and compiled against each main theme from the AGiC Framework 2.0 (Insecurity & Violence, Education, Health, Voice & Participation). Where parts of a transcript did not relate to these themes but to other ones, new themes were suggested, and the data was compiled under them. Several iterations of the analysis allowed researchers to fine tune these new themes – namely Work & livelihoods, Basic needs and Social norms. At first, the data was compiled per country, keeping each context separate to better assess whether similar or different issues emerged. The analysis then merged findings from each country together to highlight issues consistent across contexts. When findings differed per country, then the analysis underlined these differences.

Primary data from the qualitative interview transcripts, was triangulated with quantitative data analysis from the survey. The resulting 'picture' was again triangulated with secondary data gathered during the literature review undertaken prior to the fieldwork. Secondary data allowed researchers to confirm trends over time or trends over a wider geographical scale. Any divergence between other studies and data from this research were also noted in the analysis to reflect issues that did or did not emerge.

3.5.1. Research ethics

Plan International sought external peer-reviewed ethical approval on the tools and methodology used in Burkina Faso and Mali prior to data collection taking place. Local risk assessments were also conducted with the security and safeguarding teams in the two countries and risks were monitored throughout the data collection period. Interviews and FGDs were conducted out of earshot so girls could talk freely but always within a distance that they and the data collector could be seen by other community members and data collectors. Data was collected in groups of two for the safety of data collectors. There was a strong emphasis on using female data collectors to conduct girls' FGDs and KIIs to provide a sense of empathy and understanding. Data collectors were attentive to issues that may trigger distress or discomfort, and the tools were designed to avoid asking sensitive questions.

Prior to starting data collection all data collectors were trained on Plan International's Safeguarding Policy and were required to sign and agree to work under the policy. Principles of confidentiality, anonymity and informed consent were applied for both girls and boys. Parents or guardians were asked for consent for the participation of under-18 girls and boys , and they themselves were also asked for assent. This research was fully compliant with Plan International's Global Policy on Child and Youth Safeguarding. Country safeguarding and security teams were available throughout the data collection process, with referral mechanisms and processes in place for anyone requiring follow-up. This also ensured that any child protection concerns that arose could be dealt with in a sensitive, timely and appropriate manner. The relevant ethical protocols for Plan International and UCL were followed (Approved Project ID/Title: 10547/002: Girls in Crisis: Sahel). In both Burkina Faso and Mali, ethics protocols were submitted to the National Ethics Committee which were validated, and the related ethics certificate received.

3.5.2. Limitations of the data

Due to security risks in both countries, sites were selected to avoid exposing data collectors to high levels of insecurity and risk of attack. This meant that accessing respondents, particularly the most marginalised adolescent girls, was challenging in some research sites. Efforts were made to include a diverse cross-section of adolescent girls including married girls, displaced girls, young mothers and girls with disabilities. However, this was not always possible and so the research may not fully capture the experiences of the most marginalised or at-risk girls. In relation to child and early forced marriage, the Burkina Faso data collectors pointed out that, in their context, married girls were difficult to access as once girls are married, they participate in activities with other married women. This does not mean that they are prevented from participating in activities with girls their age but it could explain the low incidence of married girls in the Burkina Faso respondents.

Due to security reasons, it was not always possible to have an all-female research team for conducting the girls' and women's FGDs and interviews. Sometimes a mixed team was used, and female data collectors led on the facilitation while their male counterpart took notes. Due to cultural reasons, this could have led to some bias where female participants felt less comfortable in opening up to with males present about sensitive topics such as those related to sexual and reproductive health.

Transcripts in Mali were not as detailed as in Burkina Faso and data collectors tended to summarise what was being said and not use follow up prompts to tease out more details. This means that some responses could be interpreted in different ways. Data collectors in Mali were also from the same region as the data collection sites were located in, which helped build trust with communities and meant that data collectors spoke the local languages, but this may have led to bias. Some field researchers explained that certain questions could be perceived as very intrusive and they did not feel comfortable (or did not feel they had the right) to probe further on some topics deemed 'sensitive' or taboos such as girls' menstruation. Researchers also raised issues around respondents' fatigue due to the length of the interviews and/or the lack of availability or interest of participants, particularly women who often mentioned that they did not have time to participate in the research. In Mali, some researchers felt that since they did not bring any 'services' or assistance to the local community, people quickly lost interest in the study and some group discussions were cut short due to the lack of responses. Some interviews were also curtailed due to the security alerts.

All data collection tools were designed in English then translated into French. Data collection was conducted in the different local languages for each site and transcripts translated back into French and English before analysis. This process can lead to both questions and answers losing some nuance and meaning. To mitigate this risk, one of the UCL research team who is a native French speaker, conducted the qualitative analysis using the French transcripts. Some further checks were carried out to clarify uncertainties in both English and French transcripts and the quantitative data. She also spoke directly with data collectors to better understand the data collection context in which they worked.

4. ANALYSIS OF THE FINDINGS FROM BURKINA FASO AND MALI

This report is informed by the key issues identified in earlier AGiC research, defined by adolescent girls themselves. Adolescent girls were at the centre of both the earlier research and the research reported on here. There is little evidence of the experiences of adolescents in general, but even less that focuses on adolescent girls in conflict settings, scarcely any in their own voices. We place the voices of adolescent girls in their socio-ecological context (see below) by also speaking with adolescent boys, parents and guardians and others from the communities in which the girls live.

In addition to the key themes that emerged previously (Security & Violence; Education; Health; and Participation, Voice and Visibility);⁶⁹ we include two new themes which emerged strongly in the research in Burkina Faso and Mali: Work & Livelihood; and Unmet Basic Needs. Alongside these we include two cross-cutting influences; the role of powerful Social and Gender Norms, which inform all aspects of the research. This context, although not studied directly, emerged in various exchanges with girls and their families and communities, and through the literature review. Migration and population movement were not a direct core focus in the empirical work (the research locations were challenging in many ways and we decided to keep all enquiry methods to manageable levels which limited the possibility of an expansive study). However, related issues surfaced in the research and so, despite not having significant empirical evidence on these last two categories, we felt it was important to flag them for further exploration in any follow up studies.

However, as will become clear below, these domains are all closely interlinked and not siloed categories. What emerges is a set of inter-connected risks, faced by girls in times of emergency, with violence running like a thread through their experiences: undermining their human rights and security.⁷⁰ Some of our participants were IDPs or migrants and we discuss the implications for the community of fluctuations in population and dynamics during the discussion. Our research was undertaken just ahead of the global COVID-19 crisis and so we did not have questions which directly addressed the pandemic.

We conclude this section with a discussion of those who are regarded as the Enablers and Changemakers; and then the Pathways and Barriers to Change ($\underline{p.55}$)

4.1. Insecurity & Violence

"I'm sad because I was chased from my home by force by the terrorists" (GIRL IN 15-19 FOCUS GROUP, LOCATION, BURKINA FASO)

Violence inflicted on children can result from two distinct sources: from conflicts and perpetrated by combatants; and within the home and the community, often embedded in social norms. When people are targeted because of their gender, this relates to Gender-Based Violence (GBV) and can be inflicted by armed groups, or by community and family members. In this research, children overwhelmingly raised issues related to insecurity due to armed conflicts. Cases of GBV were also reported when respondents were probed on abuse inflicted on themselves or other adolescent girls and boys.

4.1.1. Current challenges for adolescents living in conflict affected areas

Since 2018, the security situation in Burkina Faso has deteriorated – attributed to the increase in terrorist attacks, the rise of non-state armed groups and inter-community conflicts across the country. A state of emergency exists in seven out of 13 regions including in the Boucle du Mouhoun, Centre East, North and Sahel Regions.⁷¹ Burkina Faso is one of the countries in the Sahel region most affected by the 2019 upsurge of violence.

⁶⁹ It is worth noting that these are not the only issues that the adolescent girls in previous studies outlined as important to them but the overarching ones that were dominant in all studies. For more detailed findings, the individual reports can be found at: <u>https://plan-international.org/publications/</u> adolescent-girls-crisis

⁷⁰ Plan / Monash, 2018. Adolescent Girls in crisis: experiences of risk and resilience across three humanitarian settings.

⁷¹ ACAPS 'Conflict and displacement in Mali, Niger and Burkina Faso. Briefing Note. 22 March 2019. Available at: <u>https://www.acaps.org/sites/acaps/files/products/files/20190322_acaps_regional_briefing_note_mali_niger_burkina_faso.pdf</u> (Accessed 6 May 2020)

In Mali, the crisis started with the Tuareg⁷² in 2012, when Movement National de Liberation de l'Azawad (MNLA) in northern Mali declared independence for that region.⁷³ Other armed non-state actors⁷⁴ took advantage of the unrest across the north to further undermine security in the region. There is also a longstanding conflict over land and water resources between communities. In Mopti, conflict between the Dogon pastoralist farmers and Fulani nomadic herders has intensified during 2018 into attacks on civilian communities by so-called 'self-defence' militias. According to data from the end of March 2020, the IDP population of Mali stands at about 239,484 due to insecurity resulting from the resurgence of violence in the regions of Mopti, Ségou, Timbuktu, Gao, Menaka, Sikasso and the border strip between Mali and Burkina Faso.⁷⁵ The lack of security in Burkina Faso also means there are over 82,000 refugee returnees to Mali. Both IDPs and returnees face constraints in their access to aid.

Adolescent girls in conflict locations have spoken of the constant presence of armed men which is a source of great fear due to the high levels of violence perpetrated by these men. Even without the protracted crises that come to dominate their growing up, girls' everyday lives lack security and are shaped by GBV. The Adolescent Girls in Crisis studies in the Lake Chad Basin and South Sudan, reveal that girls who were interviewed live in fear and are concerned not only about the constant presence of armed men, but about GBV within families, including child, early and forced marriage. 2 Previous studies stressed that exposure to violence is generally high among young women aged 15-19, suggesting that violence often starts early on in women's intimate partner relationships.^{76, 77}

The African Women's Development Fund (AWDF)⁷⁸ provides a wider context for these findings. AWDF noted many commonalities in the violence experienced by women and girls (see Figure 9). These include the various actors who have a monopoly over violence which AWDF argue is state-sanctioned, upheld by social norms and enabled by the physical power they wield armed with guns, financial resources and state machinery. These are the perpetrators of violence against women and girls in all its forms (personal, social, economic, political). AWDF puts states and patriarchs together alongside vigilante groups as perpetrators of sexual and gender-based violence (SGBV) and GBV. In a gender-blind everyday world, all are complicit in the continuation of GBV which puts girls' health, education and well-being at risk.

FIGURE 9: Perpetrators of violence against women



Source: The African Women's Development Fund (AWDF)

There are approximately 500 million adolescent girls living in countries affected by conflict and displacement⁷⁹ but the silencing or rendering invisible of adolescent girls is just another manifestation of the violence they face daily.

⁷² The Tuaregs are nomadic pastoralists.

^{73 &#}x27;Tuareg rebellion sparks crisis in Mali' Aljazeera. 18 February 2020. Available at: https://www.aljazeera.com/news/

africa/2012/02/20122188513342701.html (Accessed 22 May 2020)

⁷⁴ Groups include MACINA Liberation Front, Jama'a Nusrat ul-Islam and Dan Nan Ambassagou

⁷⁵ UNCHR Operational Portal, 31 march 2020. Available at: https://data2.unhcr.org/en/situations/malisituation (Accessed on 6 May 2020)

⁷⁶ WHO 2013 Global and regional estimates of violence against women: prevalence and health effects of intimate partner violence and nonpartner sexual violence. Geneva: WHO. P.16.

⁷⁷ WHO 2013 Global and regional estimates of violence against women: prevalence and health effects of intimate partner violence and nonpartner sexual violence. Geneva: WHO. P.16.

⁷⁸ AWDF 2016 Gender and Security in Africa: FEMINIST PERSPECTIVES ON GOVERNANCE, PEACE AND SECURITY, Primer 2, 2016, African Women's Development Fund (AWDF), page 2 <u>http://awdf.org/wp-content/uploads/Primer-Two-Gender-Security-in-Africa.pdf</u>.

⁷⁹ Women's Refugee Commission, 2014.

4.1.2. Children have witnessed extreme violence from armed conflict

While the focus of this research is on adolescent girls, in both countries, girls and boys reported insecurity as one of the biggest challenges in their lives. While GBV is common, many children face ongoing insecurity and live in fear. The findings regarding the pervasiveness and brutality of violence in the lives of children cannot be ignored.

Numerous accounts from parents in both countries stressed that children are traumatised by the physical violence they witnessed and afraid of what could happen to them. In Burkina Faso, one community leader in Tougan, explained: "The killings, the injuries in front of the children especially in the Toeni area traumatised them, they were very afraid because these children had never experienced this before." Fears for their own safety were expressed by both girls and boys, especially among the displaced communities. In Tougan, adolescent boys aged 15-19 associated experiences of violence with the way they defined who an adolescent is, while in Pissila, other boys stressed that they find it hard to sleep:

"A teenager is afraid to see an adult person die in front of him. A teenager is afraid of dying very early without having money"

(BOY IN 15-19 FOCUS GROUP, TOUGAN, BURKINA FASO)

"At night, we discuss among ourselves and then we go home to sleep. In reality, we don't manage to sleep. Our ears are focused on outside noises in case there is a problem so that you can escape." (BOY IN 15-19 FOCUS GROUP. PISSILA. BURKINA FASO)

In Tougan, displaced girls have been separated from their parents (the latter stayed behind or went back to their village) and that affects every aspect of their lives and explains why they are afraid. One 19-year-old said:

"I'm afraid at night. Not during the day. I'm scared because at night there's a lot of things you can't see because there are jihadists there. I'm scared if I go out, he might run into me and then kill me". (GIRL, 19, TOUGAN, BURKINA FASO)

Since the beginning of the crisis, people have lost their health. Some have fled and the mind is no longer at peace"

(GIRL, 15-19, PISSILA, BURKINA FASO)

Another displaced girl in Tougan (14) explains that she is afraid to go back to her village to visit her parents. What happened to displaced children can also scare those from the hosting communities who mix with them at school, as confirmed by a group of mothers in Tougan. Their account suggests that adults live in fear too:

"Often, there are children who tell us "mummy, we have friends who came here because they were chased with their parents out of the village, it really touches us". This situation really scares our children." "We didn't feel safe but today the fear has increased even if someone is on a bike with a bag it scares us because there has been too much attack towards us. [...] The curfew which was established from 19h is really good, it's for our security, it's good but is it a solution? If the curfew ends it will be another fear for us and that is our worry."

(MOTHERS, TOUGAN, BURKINA FASO)

In Mali, accounts from girls and boys in every village stressed that insecurity has become a major issue resulting in the closure of schools. In Gourma-Rharous, teachers are continuously threatened by jihadists and so they have not resumed their activities. Accounts show how much schools and teachers have been targeted by the attacks. The following account also suggests that some adolescent girls associated terrorists with certain ethnic groups which reveals how some local discourse might polarise the conflict along ethnic and/or religious lines:

"Armed groups have burned everything down. They have almost burned one of our teachers alive, because he opposed the destruction and because he is a Christian. The [armed groups] said they will beat anyone they see in the school yard".

(GIRL IN 15-19 FOCUS GROUP, GOURMA RHAROUS, MALI)

The fear of attacks means some girls are even scared to voice what they want. When asked if they need any training or support, one adolescent in Gourma- Rharous answered that "even for that, we are afraid".

4.1.3. Restrictions on mobility

In Mali, accounts emphasise that everyone's mobility outside of the community is restricted due to attacks. In Gourma-Rharous, adolescent girls (10-14) explained that they want to go to the market, collect firewood or visit their parents in the neighbouring village but they are too afraid: "we often hear gunshots. This is what has woken [us] up this morning for example". Even the FGD with this group had to stop because of a security incident. In Diré, young women (18-19) stressed that "we don't have the right to wander between villages like before" and no circulation is allowed between certain hours at night. In Gourma-Rharous, one girl (18) said that people are afraid of being attacked or kidnapped. Another girl said "I am scared I might get kidnapped". And another: "I am afraid someone could appear from nowhere and hurt me". A man working at a local town hall said: "everybody is afraid to go out at night, especially girls. Boys are more courageous and take risks". However, boys' accounts in Gourma Rharous, also stressed that they are afraid:

"Terrorists prevent us from playing and going freely in town. We are afraid they [will] kill us, kidnap us and beat us."

(BOY IN 10-14 FOCUS GROUP, GOURMA RHAROUS, MALI)

4.1.4. Risks of children being enlisted in armed groups

The risk of boys joining or being forced to join armed groups was mentioned in accounts from Mali, and more explicitly referred to by parents and adolescent boys in Burkina Faso.

"Children tell us things that before they didn't say, often they ask why the teacher says not to follow strangers in cars or motorcycles. We advise them to take the teacher's advice seriously and to follow it because today if someone stops you from getting on a motorcycle, if the person leaves with you, we won't see you anymore. [...] If you follow these people, they will kill you and we will never see you again." (MOTHERS, TOUGAN, BURKINA FASO).

The risk of villagers joining the armed groups was confirmed in a discussion with older displaced adolescent boys in Pissila:

It is because of jihadists that the insecurity worsens. Also, our people don't stop joining them". "Someone can hate others, he leaves and joins the terrorists. Others can hate the village chief, if they have arguments with the chief, they leave and join the jihadists to come back and kill the chief for instance."

(BOY IN 15-19 FOCUS GROUP, PISSILA, BURKINA FASO)

In Gourma Rharous, one respondent from the local authority stated "Boys can be exposed to kidnapping". Parents also stressed that the only way out of poverty is for the state, justice and the rule of law to return: "Poverty and the lack of employment are tempting adolescents to join the armed groups". In Burkina Faso and Mali, data is still very limited in relation to child recruitment, but the evidence suggests girls are also at risk of being recruited into armed groups but in smaller numbers than boys.^{80,81}

⁸⁰ Sub-Cluster Child Protection, Mali Results (2019) reports in their programmes 289 children associated with the armed groups received alternative care, 19 girls, 270 boys and 287 children formerly associated with armed groups received support for socio-economic reintegration, 23 girls, 264 boys.

⁸¹ Burkina Faso Protection Crisis Advocacy Brief – Child Protection (2020). Available at: <u>https://reliefweb.int/sites/reliefweb.int/files/resources/cp_aor_note_de_plaidoyer_en_0.pdf</u> (Accessed 20 May 2020)

4.1.5. Trust in self-defence groups and the community to protect girls' safety

Facing the risk of terrorist attacks, some local groups or militias were viewed and recognised by children as protectors, who could defend them against attackers. This was particularly the case in Mali, among Dogons (highly respected local hunters) communities in Bandiagara, where girls expressed feeling safe because so-called 'self-defence groups' or Donsos protect them. Among girls surveyed in Mali, 30 percent emphasised the importance of self-defence militias to take care of their security within their community (See Figure 10).

"What I can say is that before, we were secure but now it's the self-defence forces that provide our security."

(MALE PARENT/GUARDIAN, MALI)



Figure 10: Number of girls surveyed reporting who decides about their safety in their community (n=256)

In Burkina Faso, surveyed girls did not identify these armed groups as actors protecting their safety. However, some women and older adolescents who have been displaced stressed the importance of armed forces to protect them during interviews. Some women in Burkina Faso called them "koglwéogo" (meaning guarding or preserving the bush) but the donsos are also involved in the fight against terrorism in regions such as the Boucle du Mouhoun. Some adolescent boys (15-19) in Diré, Mali, emphasised the issue of social conflicts, whereby villagers do not get on with each other, as the main driver of insecurity.

The reliance on self-defence groups in Mali is indicative of the broken rule of law and security system. Hence, the police were rarely mentioned by girls in Mali when they are asked what they would do in case someone caused them harm. In contrast, many more girls from Burkina Faso who participated in the survey did consider the police as important actors to guarantee their safety in their community. However, in both countries, the state representatives and community leaders and organisations were considered as the main decision-makers with regards to ensuring peoples' and girls' security. In both countries, fathers, too were viewed as having a significant role in ensuring girls' safety in the community, but especially at home (see Figure 11).).



Figure 11: Number of girls reporting who decides about their safety at home (n=381)

4.1.6. Insecurity & violence against girls

In both countries most girls surveyed responded that they feel insecure in their community. In Burkina Faso, almost half the girls interviewed (41.4%) from all ages and locations, stated that they do not feel safe at home either (see Table 3). Interviews and group discussions conducted with girls suggest that fears of being attacked by terrorist groups were the main cause of feeling insecure in both the community and at home.

"No I am not safe, there is always fear, day and night. Even at home in our household. [Researcher: Why are you not safe?] Because of what we have gone through in our village, because of the crisis." (GIRL, 18, DISPLACED, KONGOUSSI, BURKINA FASO)

This does not necessarily rule out GBV and intimate partner violence as sources of insecurity. However, cases of abuse against girls perpetrated by family or community members were reported in fewer numbers than the percentage of girls who felt insecure, and they were only mentioned when probed during interviews with older adolescents and adults.

Table 3: Percentage of girls (10-19) who reported concerns of insecurity and acts of violence in Mali and Burkina Faso (n=381)

| | Feeling unsafe when being outside | Feeling unsafe within the home | Having been hit or beaten in the past month | Having experienced unwanted sexual gestures in the past month | Having been shouted at or insulted in the past month |
|---------------------|---|--------------------------------------|---|--|---|
| Burkina Faso | 69.5% | 41.4% | 10.94% | 6.25% | 21.09% |
| (Boucle du Mouhoun) | 60.9% | 29.6% | 15.6% | 1.6% | 32.8% |
| (Centre Nord) | 78.1% | 53.1% | 6.25% | 10.9% | 9.3% |
| Mali | 79.05% | 17% | 9.09% | 8.3% | 15.02% |
| (Mopti) | 68.75% | 20.31% | 3.13% | 7.81% | 9.38% |
| (Timbuktu) | 89.6% | 13.6% | 15.2% | 8.8% | 20.8% |

In terms of cases of abuse not linked to the armed conflict and attacks, 9.09 percent of respondents in Mali reported having been hit or beaten in the past month, always at home by their father and/or brother for girls living in Mopti. Many more girls reported physical violence in Timbuktu with cases happening on the street where it is less clear who the perpetrators were. The majority of perpetrators remain members of their own household or relatives and people they know. 8.3 percent of girls in Mali reported sexual harassment perpetrated by their husband, or male relatives at home, or adolescent boys while being on the streets and 15.02 percent of girls reported incidents where someone had shouted or insulted them loudly or aggressively in the past month, mainly by one or both of their parents or their brother.

In Burkina Faso, the percentages of girls reporting cases of violence are more or less the same or higher. Eleven percent declared having been hit or beaten, and this happened mostly at home in host communities and in the displacement camps. Perpetrators were other adolescent girls (at the water pump for instance) and often their mother. Cases of corporal punishment by teachers were reported too. Unwanted sexual gestures (reported by 6.25 percent of girls) were perpetrated by adolescent boys, when going to fetch water. Aggressive behaviour and insults were much more common and were reported by 21 percent of girls. Perpetrators are primarily family members, from siblings to parents, grandparents, husband, parents in law, as well as neighbours and other adolescents.

One account suggests the risk of sexual exploitation. When asked if she knew any girls or boys who had been exploited to have sexual intercourse in exchange for something one displaced girl in Tougan (15) responded that: "There are others who do that. You don't like him but since you need money you follow him like that. Overall, accounts or stories about GBV cases mentioned in interviews in Mali relate to risks of sexual violence against girls, and physical violence inflicted on girls by family members. The former was primarily discussed in Diré where one case was cited multiple times by young adolescent girls but also in Gourma Rharous, Bankass and Bandiagra where key informants among adults mentioned that girls are raped, or victims of GBV when they travel, not detailing who the perpetrators are. Cases of physical violence were mostly reported by interviewees in Gourma Rharous and included risks of kidnapping and murders against people in general. Physical violence perpetrated against girls by their family members was only mentioned twice in Diré and once in Bandiagra, where one key informant stated that "physical violence is perpetrated by husbands, but unmarried girls may also be victims of such violence".

In Burkina Faso, GBV was only mentioned four times in the FGD and KIIs, by representatives of local authorities. One respondent, in Bomborokuy cited two examples:

"he saw a woman better than his wife. So at night, the guy started hitting his wife to get her out of the house and the other one would come"

[He] made an agreement with the girl's parents, and they gave him three girls to go to work in Bobo and the girls didn't want to leave, they took the girls by force.

(LOCAL AUTHORITY, BOMBOROKUY, BUKINA FASO)

In Kongoussi, another representative of local authorities mentioned a case of brutal physical violence and murder (although it may not have been gender motivated), while another one suggested that GBV cases were common:

"Yes. Two years ago, there was a young girl peanut vendor beheaded by the lake and her body thrown in" (LOCAL AUTHORITY, KONGOUSSI, BURKINA FASO)

Yes, there are plenty of cases of violence and abuse, plenty around early marriages. There is often physical harm too. And, with the arrival of the displaced persons, there is often parental neglect of children. These are all forms of violence that we encounter here, and it has grown worse with the security situation.

(LOCAL AUTHORITY, KONGOUSSI, BURKINA FASO)

In Gourma Rharous (Mali), one respondent from the local authority summarised that "GBV cases are unlikely to be reported because of fear or intimidation [...]". As in other studies on the topic of violence against women, there is gap between what is being reported and what the situation is actually like for women and adolescent girls. Girls' disproportionate vulnerability to 'everyday GBV', including forced marriage, marital rape, physical and sexual violence or sexual exploitation is increasingly well documented. But the lack of reporting is related to social norms that perpetuate stigma, and a lack of survivor-centric reporting

and responses by the legal system and the police. To tackle the prevalence of abuse, countries that have ratified the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) – that is all countries in the world except Sudan, Iran, Somalia and the United States – have adopted national policies to protect the rights of women and girls. Both Mali and Burkina Faso have adopted several policies to support protection against violence, sometimes targeting adolescents (e.g. *Stratégie Nationale de promotion et de protection de la jeune fille 2017-2026* in Burkina Faso; *Stratégie Nationale Holistique pour Mettre fin aux Violences Basées sur le Genre au Mali 2019- 2030*). However, despite the legislative framework, the prevalence of discriminatory gender norms continues to impede the rights of girls and women across the Sahel region⁸².

At national levels, statistics on GBV from UN Women^{83,84} suggests that women are significantly exposed to abuse:

- Lifetime physical and/or sexually intimate partner violence affects 35.5 percent of women in Mali and 12% in Burkina Faso;
- Physical and/or sexually intimate partner violence has affected 26.9 percent of women in Mali and 9 percent in Burkina Faso in the last 12 months.

However, in situations of crisis like the ones affecting large areas of Mali and Burkina Faso, humanitarian reports tend to highlight the risks of increased GBV affecting girls (e.g. Global Protection Cluster, 2019). One rapid needs assessment conducted in August 2019 by Plan International's team in the Mopti region, Mali, reveals that 63 percent of people interviewed reported cases of physical violence (although it is not clear if they witnessed such cases or if they were themselves victims); 71 percent reported sexual violence and 70 percent reported cases of threat based on their gender (Plan International, 2019).⁸⁵ The assessment does not clarify the social identities of respondents in terms of their gender and age, showing the lack of, and importance of collecting gender, age and disability disaggregated data.

There is a dearth of reliable data partly in relation to abuse against women and girls. Information is further impeded by a range of factors including taboos surrounding sexual violence and intimate partner violence; fear of retaliation against survivors or their family members if they denounce the perpetrator; lack of access to community support and justice; and lack of knowledge of children's and women's rights.

4.2. Education

"The crisis has reached Gombélé. They say they're going to burn down the schools. So, they brought me to Bomborokuy."

(GIRL IN 15-19 FOCUS GROUP, BOMBOROKUY, BURKINA FASO)

4.2.1. Restricted access to education and school

Disparities in school entry are an important indicator of gender-related barriers to education: fewer girls than boys were enrolled in primary school between 2008 and 2014 in both Mali and Burkina Faso, showing the lack of progress in terms of parity in school enrolment (Psaki et al. 2017). In Mali, the literacy rate for women is only 24.6 percent (33.56% among the general population)⁸⁶.

Among the participants of this study, approximately a third of girls in Mali (Mopti) and Burkina never attended school or attended less than one year (See Table 4). In Timbuktu (Mali), almost half of the girls never went to school or attended for less than one year.

⁸² UN women Beijing +25 country reports, Burkina Faso: https://www.unwomen.org/-/media/headquarters/attachments/sections/csw/64/nationalreviews/burkina_faso.pdf?la=en&vs=2349; Mali: https://www.unwomen.org/-/media/headquarters/attachments/sections/csw/64/national-reviews/ mali.pdf?la=en&vs=2345; Chad : Le Masson et al. 2018. Violence against women and girls and resilience: links, impacts and perspectives from the Chadian context

⁸³ UN Women. Global Database on Violence against Women – Mali. Available at: <u>https://evaw-global-database.unwomen.org/fr/countries/africa/mali</u> (Accessed 22 May 2020)

⁸⁴ UN Women. Global Database on Violence against Women – Burkina Faso. Available at: <u>https://evaw-global-database.unwomen.org/fr/countries/</u> <u>africa/burkina-faso?typeofmeasure=ca6a25da95f14e6194a68b1e45e99420</u> (Accessed 22 May 2020)

⁸⁵ Plan International, 2019. Rapid needs assessment report. Mopti Region. August 2019.

⁸⁶ https://en.unesco.org/countries/mali?language=en

Table 4: Percentage of girls surveyed who have completed years of schooling (n=:381)

| | Mali (Mopti) | Mali (Timbuktu) | Burkina Faso (Boucle du Mouhoun) | Burkina Faso (Centre Nord) |
|---|-----------------|--------------------|--|-------------------------------|
| Never attended school or less than 1 year | 20.31% | 45.6% | 17.2% | 45.3% |
| 1 -3 years | 4.69% | 16.8% | 10.9% | 20.3% |
| 4-6 years | 33.59% | 19.2% | 34.3% | 9.4% |
| 7 or more years | 40.63% | 6.4% | 36.% | 25% |

The security crisis in the Sahel has made school attendance more challenging for thousands of pupils. According to a report by Save the Children,⁸⁷ 37 percent of the attacks perpetrated in the Sahelian part of Burkina Faso and the Mouhoun region in 2018 targeted education infrastructure. Recent attacks in 2019 and resultant internal displacement in eastern Burkina Faso have further led to the destruction and closure of primary schools. Humanitarian practitioners warned that the limited number of spaces in schools, the lack of qualified teachers and lack of school equipment will restrict education access for thousands of children.⁸⁸ This situation exacerbates the existing barriers to access education as children drop out of school to support their parents by finding livelihoods, undertaking domestic chores or to be married off early.⁸⁹ Such barriers include:

- · Schools are damaged, destroyed or inaccessible;
- Preferential treatment for boys to complete education;
- · Inability to pay school fees or buy school materials;
- GBV going to and from school (and at school and in the home);
- Lack of teachers, especially female teachers;
- Burden of domestic chores particularly for girls;
- Poor quality gendered school curriculum and learning materials;
- Low investment and/or lack of appropriate sanitation facilities at schools which excludes girls when menstruating⁹⁰.

All these barriers were confirmed by children and their parents in Mali and Burkina Faso. Schools have been one of the primary targets of terrorist attacks in both countries. In Diré and Gourma Rharous, Mali, armed groups burned down city halls and destroyed schools. As a result, teachers have asked to be transferred to other parts of the country and many schools remain closed. In Gourma Rharous, a young adolescent girl (10-14) stressed "I am afraid to go to school and that people attack us in the school yard". In Bandiagara, although children still go to school, the insecurity affects their regular attendance. One girl explained that there was an explosion on the way to school and she wants the road to be made secure so she can get to school safely. In Bankass, a 15-year-old girl explained that she used to go to the madrassa (koranic school) but gave up because she was afraid that she would be beaten up.

The destruction of school buildings, violence inflicted on teachers and the resulting closure of hundreds of schools have aggravated the challenges adolescents confront in accessing and sustaining their education. In Burkina Faso, all the schools in Toueni and parts of Gomoboro and Tougan, have closed down. Girls' accounts stress the difficulties in accessing a safe and adequate learning environment including the lack of teachers, overcrowded classes, insecurity in travelling to school, and the lack of lighting at home to do homework. These challenges were particularly highlighted by displaced adolescents and their parents in Tougan:

"The problem at the moment is the curfew from 7pm which prevents students from going to work at night at school or at the health centre or under the streetlamps. Before, if you went to a health centre at night you could see the students who work there, because there are students who are in the outskirts of the city without electricity or torches, those are really penalised with the curfew."

(MOTHER, TOUGAN, BURKINA FASO)

⁸⁷ Save the Children, 2019. Faire de l'éducation en Situation d'urgence Une Priorité Au Burkina Faso.

⁸⁸ Groupe Sectoriel Protection, 2019. Rapport de la mission conjointe d'évaluation rapide du groupe sectoriel protection a Sebba, le 24 juillet 2019. Région du Sahel, Province du Yagha.

⁸⁹ Save the Children, 2019. Faire de l'éducation en Situation d'urgence Une Priorité Au Burkina Faso

⁹⁰ UNESCO (2014) 'Puberty, education and menstrual hygiene management'. Available at: https://unesdoc.unesco.org/ark:/48223/pf0000226792 (Accessed 20 May 2020)

Lack of finances was a significant concern for displaced adolescent girls and boys in places like Tougan or Pissila because without money, they could not go to school anymore. According to a community leader in Tougan, school fees also seems to differ between local residents and displaced people:

"Education services are affected; schools are closed so there is a strong migration of students from the surrounding villages to Tougan to continue school. Those whose parents were able to pay the fees go to school anyway. [...] They [displaced children] are not at the same level with those in the host zone, so the school fees are also different, which is a concern for some parents."

(COMMUNITY LEADER, TOUGAN, BURKINA FASO)

Reduced access to schooling seemed even more detrimental for displaced girls because they have to be taken care of by a hosting family as explained by a Mayor:

"We notice.... boys who got together to live in a house and continue to go to school. Others have found a rented place. But it is not so straightforward for girls, because girls who live by themselves are exposed. So, there are parents who prefer that their daughters stay [back in the village] rather than letting her expose herself."

(MAYOR, BURKINA FASO)

In Mali, some girls explained that they still attend Madrassas in Diré and in Gourma Rharous. Madrassas have not been affected by attacks and continue to function, but they are not present in all villages. These schools have provided an increasingly attractive alternative to the mainstream public schools since the latter have struggled over the past decade with issues of class size, over-crowding, and limited quality⁹¹. Madrassas use Arabic as the language of instruction and follow a mixed secular and religious curriculum. The majority also charge school fees so they do not necessarily provide education to the poorest community members. The class size tends to be lower in Madrassas than in public schools and girls and boys are often segregated in lessons while pupils are more likely to be taught by a male teacher. In previous studies, madrassa had 35-42 percent female pupil enrolment, although rural areas usually had more boys than girls⁹².

4.2.2. Adolescent girls are the first to drop out of school regardless of insecurity

In Diré, Mali, many girls point out two main changes to their lives since the conflict: before they were 'young' (and implicitly did not have their periods) and secondly they used to go to school but many no longer do. Some mentioned that the main reason is that the schools have been destroyed (in Gourma-Rharous), but they also said that they are married and had stopped their schooling for this reason. One 14-year-old girl in Diré, explains that husbands do not accept their wives going to school and women are expected to stay at home.

"Society's view is that a girl's place is in looking after the home" GIRL IN 15-19 FOCUS GROUP, DIRÉ, MALI

Except a few, adolescent girls from Bandiagara aged 15 or above did not go to school either. KIIs with adolescents and a community leader from Diré confirmed that girls aged 16 and over tend to be married off and have to give up school because it is customary. One girl from Gourma-Rharous explained that girls are often "given in marriage when they are 13 or 14".

Across the study sites, girls considered the ideal age for them to marry was younger than that of boys, particularly in Timbuktu, Mali in contrast to the views of girls from Mopti. In Timbuktu, only 17 percent of girls who took part in the survey thought that the ideal age for marriage is 18 and above[See Table 5].

⁹¹ Boyle, N. H. (2014) 'Between Secular Public Schools and Qur'anic Private Schools: The Growing Educational Presence of Malian Medersasa' The review of Faith and International Affairs. Vol 12 Issue 2: 16-26

⁹² Ibid

Table 5: Ideal age for marriage as considered by adolescent girls surveyed in Mali and Burkina Faso

| | What is the ideal age for a girl/woman to get married? | What is the ideal age for a boy/man to get married? | |
|---------------------|--|---|---------|
| Mali | 25 | 30 | Average |
| (MOPLI) | 18 | 25 | Median |
| Mali | 15 | 20 | Average |
| (Thibuktu) | 15 | 20 | Median |
| Burkina Faso | 19 | 22 | Average |
| (Boucle du Mouhoun) | 18 | 21 | Median |
| Burkina Faso | 18 | 22 | Average |
| (Centre Nord) | 18 | 20 | Median |

Similar accounts emerge from Burkina Faso. One 15-year-old displaced adolescent girl in Tougan explained that some of her friends stopped going to school because they fell pregnant: "I had two girlfriends, they got pregnant and quit school, they are now at their husbands' house." When probed what happens to boys if they made a girl pregnant, she laughed and responded, "No he can continue the lessons, the girl can stop the lessons." When asked if people encourage girls to go to school, she explained: "Sure, one encourages but without reducing domestic chores..."

While education is generally valued by parents and widely encouraged, norms around girls' roles take precedence over their education as soon as they reach puberty, and this affects their access to education regardless of the security context.

Girls' accounts were mixed between those who stressed that this situation results from traditions – for instance, a girl in Diré explained that it is customary for girls to stop their schooling as soon as they are married – and those who stressed that these traditions are a negative imposition such as "Girls have to give up school". In Gourma-Rharous, a 14-year-old, explained that "people here don't like that we go to school. They give us in marriage at the earliest age". In Diré, a 19-year-old, says that this is a situation imposed by parents. A minority of accounts suggest that girls might have agency over what happens after they are married, such as a CSO representative in Diré, who said that "Girls abandon schooling when they get married" as if they have a choice.

To explain the reasons why girls drop out of school once they get married, accounts from both children and adults were also mixed. In Mali, most respondents pointed out the role of traditions and only a few interviewees gave explicit answers. One girl in Gourma-Rharous explicitly said that "it is to prevent debauchery", in other words, girls are married off to limit their relations with boys and therefore to mitigate the risk of early pregnancies. This was highlighted more in accounts from Burkina Faso, where parents and local leaders stressed the risk for adolescent girls in mixing with boys at school and the potential for unwanted pregnancies. When asked whether all girls complete schooling, one girl (15-19) in Pissila said "they don't finish. Some get pregnant and leave school".

There are 'pull' and 'push' factors at play. While traditions, gender norms around marriage and resulting pregnancies all pull girls out of school, push factors linked to limited livelihoods play a role too. In Mali, a 17-year-old in Gourma-Rharous, explained that girls are taken out of school to get married or to work as maids. According to a local CSO representative in Bandiagara, girls usually stop their schooling before secondary school to find work. In Bankass, marriage was not the main and most immediate reason given by girls to explain why older adolescents stop going to school. They also drop out to leave their village, find work as domestic workers in bigger centres in Bankass or in Bamako, earn a wage and that way both contribute to their family income and to the cost of their future marriage (*trousseau*).

4.2.3. Insecurity also restricts adolescent boys from completing their schooling

Boys, particularly those who have been displaced, also face challenges in maintaining their education because their schools have been destroyed (Diré, Madiakoyé), or because they go and work in the fields or emigrate to look for livelihood opportunities and help their parents (Diré & Gourma-Rharous). In Gourma-Rharous, a 14-year-old girl states that the community actually doesn't like boys going to school either, "they must go and look for incomes to help parents and save some to have a family". The norms that children, and particularly boys, are supposed to help with providing financial means to their parents were prevalent, particularly among displaced adolescent boys in Pissila, Burkina Faso. This might be exacerbated by the fact they do not go to school anymore nor have access to paid work. When asked what they would like to do if they could choose, the majority said to go back to school, to get a job, so that they could help their parents:

"if we still went to school, we could become teachers or members of the security forces or professors. The government would be proud of us and we would be too. We would look after our mothers and our fathers". **(BOY IN 15-19 FOCUS GROUP, BURKINA FASO)**

In Pissila, an older adolescent boy's account shows the contradiction children face: "If they [NGOs, the government] opened more schools, that's great. But if we don't have jobs, it will be difficult to pay for school fees. But if they help us with both, that would be even better".

In terms of attending primary school, regardless of the current crisis, accounts from parents and community representatives did not initially suggest that there is a preference to educate boys over girls. Neither did accounts state that boys would be given priority if parents only had means to send one of their children to school. When probed whether people encourage girls to go to school, one community leader in Tougan, Burkina Faso, explained that: "It used to be boys, but nowadays girls are encouraged to go to school more than boys because when they finish school and get a job, they support their parents more than boys."

Primary education of both boys and girls was valued in all sites, and when children dropped out of primary school, the main reasons given included the closure of schools, the insecurity or the lack of resources to pay for school fees. In some cases, education was encouraged by NGOs through incentives such as providing children with a meal. This could partly explain why many parents and leaders valued sending children to school: appreciating the health co-benefits. One girl (14) in Gourma-Rharous explained that people encourage children, including girls, to go to school because then they can eat at the canteen. The incentive of free meals was also confirmed by a village chief in Gourma-Rharous

This picture changes when it comes to secondary school and older adolescent girls.

Many girls in Diré thought that their community viewed boy's schooling and education as more important than girl's. Some boys were even said to go and study in Timbuktu or Gourma-Rharous if their parents have enough financial means. In Bankass, one 15-year-old girl thought that "community members consider boys to be the future of the village". In Bandiagara, one 13- year old mentioned that parents want girls to "marry on time" but "everybody encourages their sons to go to school". With gender norms dictating that girls must marry soon after they start menstruating, parents may have less incentive to invest in their daughters' education. This also depends on parent's own education as suggested by one young adolescent girl in Bandiagara:

"Here, girls are encouraged by everyone to go to school because many parents have been in big cities which made them aware of girls' schooling. Boy's schooling has always been encouraged by community members because they are considered as the family heirs."

4.2.4. School drop-out implications for adolescent girls

The majority of adolescent girls express a passion for study and a disappointment that their current situation, often combined with pre-existing discrimination, prevents them from attending school or gaining access to vocational training, which is exacerbated by the current insecurity. Fear of violence keeps them at home, as does family poverty, but in times of conflict and instability there are often no schools or training centres for them to go to; they are too far away, or they have missed so much education that they struggle to catch up. This was also reported in the previous study on Adolescent Girls in Crisis⁹³.

In general, girls and adolescents have dropped out of school, it is very difficult to return. Lack of access to quality education (including secondary education) and discrimination leave girls without access to resources, opportunities and skills to become economically independent. This in turn, especially when combined with economic shocks experienced by families in times of crisis, can result in families being forced to adopt negative coping strategies such as sending a daughter to an early or forced marriage. This may can place adolescent girls at heightened risk of being forced out of school and subject to violence, child early and forced marriage (CEFM)⁹⁴, abuse and exploitation.

⁹³ Plan / Monash, 2018. Adolescent Girls in Crisis: experiences of risk and resilience across three humanitarian settings, Page 3.

⁹⁴ CEFM – child early and forced marriage, appears in various parts of the report. Rather than discussing it in one section only, we decided to present the cross-cutting effects of CEFM in the different areas of girls' lives.

The scale of out of school girls is considerable: in conflict affected countries, girls are 2.5 times more likely to be out of school⁹⁵ and there are an estimated 39 million out-of-school children and adolescents living in conflict and disaster-affected countries⁹⁶ who face risks of violence and harassment⁹⁷ both outside and inside school despite legal frameworks designed to protect their access to education (see Box 1).

BOX 1. LEGAL FRAMEWORKS TO PROTECT CHILDREN'S EDUCATION

Both Burkina Faso and Mali have ratified 15 out of 18 human rights treaties in the UN Committee on the Rights of the Child, including the Optional protocol on the involvement of children in armed conflict, which aims to protect children from recruitment and use in hostilities. This protocol was signed by Mali in 2000 and Burkina Faso in 2001.

Every country in the world has ratified the Geneva Convention, and additional protocols I and II that state civilians must be spared the worst effects of conflicts. Protocol I deals with the protection of victims in international armed conflicts, and Protocol II with non-international conflicts, such as civil wars. While the protocols do not specifically mention 'schools', they do clearly state that objects indispensable to the survival of communities must not be destroyed.

The African Charter on Human and People's Rights has been ratified by all African Union member states, and state parties are required to submit every report on legislative or other measures taken to action the rights and freedoms in the charters. Article 17 states:

- Everyone has the right to education.
- It is the duty of the state to educate people about their rights.

The Children's Charter:

- Requires that states provide free and compulsory basic education and take steps towards providing free secondary education for all.
- The right to education comprises the right to primary, secondary and post-secondary education, the right to a choice of schools, and the principle of free and compulsory education for all.

The African Commission on Human and People's rights has stressed the importance of educating women, children, internally displaced people and victims of armed conflict. It has also said that the closure of universities and secondary schools for several years constitutes a violation of the African Charter.

In 2017, Burkina Faso also endorsed the Safe Schools Declaration, which Mali endorsed in 2018, and this contains a range of commitments to concrete actions that governments can take to protect education during times of conflict.

4.3. Health

"It's too dangerous, you can't go to the hospital if you don't have transportation." (GIRL IN 15-19 FOCUS GROUP, TOUGAN, BURKINA FASO)

Adolescent girls living in crisis-affected areas lack proper nutrition, have little or no access to information about SRHR, and, particularly in the area of mental health, have extremely restricted access to health services all of which has a long-term damaging impact on their lives.⁹⁸ A girl may lack knowledge about her body, ways to maintain her health, and available health services, as well as lacking the power or resources to access them.⁹⁹ Adolescent girls growing up and/or temporarily living in a conflict-affected country often face an increased risk of early unprotected sexual activity – as a result of either consensual sex, sexual exploitation and/or GBV.

⁹⁵ UNESCO 2015 EFA Global Monitoring Report https://unesdoc.unesco.org/ark:/48223/pf0000233557.

⁹⁶ Their world, 39 million girls are at risk: are humanitarian responses doing enough? <u>https://theirworld.org/resources/detail/briefing-39-million-girls-at-risk</u>.

⁹⁷ International Rescue Committee, 2014. Are We Listening? Acting on Our Commitments to Women and girls Affected by the Syrian Conflict. http://gbvresponders.org/wp-content/uploads/2014/10/WPE-Syria-Report_AreWeListening.pdf.

⁹⁸ Plan / Monash, 2018. Adolescent Girls in crisis: experiences of risk and resilience across three humanitarian settings, Page 3

⁹⁹ International Rescue Committee, 2014. Are We Listening? Acting on Our Commitments to Women and girls Affected by the Syrian Conflict. <u>http://gbvresponders.org/wp-content/uploads/2014/10/WPE-Syria-Report_AreWeListening.pdf</u>

4.3.1. Early pregnancies

Child, early and forced marriage is known to increase the likelihood of early pregnancy, which can lead to increased health risks. Girls aged 10-14 are five times more likely to die in pregnancy or childbirth than women aged 20-24.¹⁰⁰ Death during childbirth is the second biggest cause of death worldwide for girls aged 15-19, and at least 2,800 women die in childbirth each year in Burkina Faso.¹⁰¹ Other health risks related to early pregnancy include life-threatening and life-changing physical injuries, such as obstetric fistula. This is common in girls not physically mature enough to give birth, where prolonged obstructed labour ruptures the wall between the bladder and the birth canal creating a tear which causes incontinence. Fistula can also leave women and girls vulnerable to infections and other illnesses and generates enormous social stigma and rejection from communities. Girls who have experienced female genital mutilation or cutting (FGM/C), which is common in both countries, are also likely to experience a prolonged and obstructed labour which can increase their risk of obstetric fistula.¹⁰²

In Mali, the main health problems mentioned in KIIs and FGDs include, malaria, 'complicated pregnancies', early pregnancies, mother and child malnutrition and resulting child mortality, drug consumption (for boys), and miscarriages (due to the crisis). In Gourma-Rharous, one representative of a local authority considered that girls among the Tamasheq and Arab communities are more exposed to CEFM, and risks linked to early pregnancies. He also stated that girls often suffer from fistulas and this has increased since the crisis.

In Burkina Faso, the main health issues mentioned in KIIs and FGDs include HIV/AIDS, malaria, malnutrition and headaches and stomach aches. However, issues around access to health such as a lack of medicines at hospitals or clinics or staff shortages were more commonly mentioned.

4.3.2. Unmet sexual and reproductive health needs

To talk about sexuality and sexual and reproductive health (SRH) seemed difficult for many respondents, some of whom chose not to respond to questions related to this topic. A group of mothers in Tougan explained the difficulties in advising some girls.

"Social Action [Ministry of Social Action] organizes these kinds of exchanges with the girls. If you manage to talk to them [girls] you can advise them, then it is ok, but there are others if you want to talk to them they will say 'haaa mummy you tire us out, don't talk to us about these kinds of things'. [...] if God help you to set up boundaries with your daughter it's really good. But there are other parents who are so serious that the daughter is afraid to confide in them, which is a shame, it's not good for these parents."

(MOTHER, TOUGAN, BURKINA FASO)

Accounts from girls in Burkina Faso stressed that their main point of contact for SHR related topics were nurses and the Ministry of Social Action. A 15-year-old in Tougan explained that as far as sexual relations are concerned, it is easier to speak about it with health practitioners:

"I don't know everything, but you have to try to understand so as not to get into trouble. We can talk about it with the mother, but it's better to go to the hospital to find out, then you'll be able to express yourself well. [...] there are also others who are ashamed to ask, to ask questions about how things are going, but if you don't ask you can't know."

(GIRL IN 15-19 FOCUS GROUP TOUGAN, BURKINA FASO)

In Bandiagara, a 17-year-old explained that she has difficulties in getting information about sex because she feels ashamed to bring up the subject. She also suggested that parents' awareness must be raised "so that they allow us to ask questions about our health, especially about sexual health". A 19-year-old in Tougan explained that the teacher sometimes talks about it at school, but at the hospital one can find more information.

¹⁰⁰ Neal S et al. 2010 'White Ribbon Alliance Atlas of Birth' White Ribbon Alliance, GHP3 (University of Southampton) and Impact (University of Aberdeen). London.

¹⁰¹ UNFPA. 2015, Girlhood, not motherhood: Preventing adolescent pregnancy, p. 10. <u>www.unfpa.org/sites/default/files/pubpdf/Girlhood_not_motherhood_final_web.pdf</u>

¹⁰² World Health Organisation – Health Risk of Female Genital Mutilation (FGM). Available at: <u>https://www.who.int/sexual-and-reproductive-health/</u> <u>health-risks-of-female-genital-mutilation</u>. (Accessed 28 May 2020)

In Diré and Gourma-Rharous, Mali, most adolescent girls were not comfortable answering questions about sexuality and reproductive health, but there were exceptions:

""Young women enter sexuality for the first time out of curiosity or because of love for boys without having information. Others do ask. Regarding contraception, we ask advice to NGOs, nurses or community volunteers".

(GIRL, 15-19 FOCUS GROUP, GOURMA RHAROUS, MALI)

Another account from Burkina Faso, from an 18-year-old displaced girl in Kougoussi, suggests that some girls start to be sexually active before they are married.

"Many girls 'know men' before they get married, others wait to get married first" (GIRL, 18, KONGOUSSI, BURKINA FASO)

Technology might also be a means to access information about unspoken topics such as sexuality. Many accounts suggested that adolescent boys and girls have access to smartphones and/or TV. In Pissila, displaced adolescent boys explained that they watch movies and the news on their, or someone's phone. In Diré, Mali, all adolescents, mentioned watching TV in the evening. This could enable some teenagers accessing health-related information. However, there are also risks associated with accessing information on sexual health from technology, particularly the Internet, without adequate sexual education and awareness of potential risks of internet access. In Burkina Faso, one IDP in Tougan openly discussed the different contraceptives she was aware of "there are contraceptive methods such as the injection, the pill for not getting pregnant. We can get this information on TV. As far as sex is concerned, there are also videos or the boyfriend himself can teach you". One 17-year-old in Rharous explained that she discovered sexual intercourse and contraception through information provided by her elder siblings, friends and through smartphones. Community volunteers were also mentioned as a source of information about SRH.

In Mali, 4.2 percent of interviewed girls in Mopti reported having ever been pregnant, and only 5.2 percent of girls reported using contraception (not specifying which one) (See Table 6). Percentages are much higher in Timbuktu, where 20 percent of girls had ever been pregnant, and 12 percent were using some form of contraception, again not specifying which one. In Burkina Faso, only 16 percent of girls in Boucle du Mouhoun and 4.7 percent in Centre Nord region said they use contraception (hormonal implant, contraceptive pill or injections). Overall, in Burkina Faso, four girls reported having ever been pregnant but only one of them said she was or had been married.

Use of any contraceptionEver been pregnantMali (Mopti)3.91%3.13%Mali (Timbuktu)12%20%Burkina Faso (Boucle du Mouhoun)1.6%3.1%Burkina Faso (Centre Nord)4.7%3.1%

Table 6: Girls' Use of Contraception (N=381)

The difference between the relatively higher contraceptive prevalence rate in Timbuktu compared to the other sites might be explained by the fact that only a minority of girls surveyed in Mopti were married (less than 8%) and almost none of the girls surveyed in Burkina Faso, except one, were married. In contrast, 34 percent of respondents in Timbuktu confirmed being married and most girls who said they use a contraceptive were in fact married.

To put these figures into perspective and understand better the situation for married adolescent girls and women, the contraceptive prevalence rate for women aged 15-49 is 30.1 percent in Burkina Faso and 15.1 percent in Mali (PRB, 2018).¹⁰³ In Burkina Faso, adolescents aged 15-19 and who are married or in a union were also characterised by a very low use of modern contraception (11% based on the District Health

¹⁰³ https://www.prb.org/fpdata/#section_2
System (DHS) from 2015¹⁰⁴) while the contraceptive prevalence rate was 7.8 times higher for unmarried adolescents. Adolescents in Burkina Faso, particularly girls, face structural and financial barriers in accessing health care information, contraceptives, including emergency contraception.¹⁰⁵

However, the high costs and lack of availability of contraceptives also prevent their use, or regular use, leading to unwanted and sometimes high-risk pregnancies. Emergency contraception can cost between 3,000-4,000 CFA (US\$6-7). The government has halved the price of contraceptive products, with some being subsidised by up to 80 percent with the help of international and regional agencies. During Burkina Faso's annual "free contraception week" organised by the government and UNFPA, women and girls are offered free contraceptives through NGOs and local health centres. One health centre in Kaya reported that demand during that week was five times higher than average.¹⁰⁶ This is of course only available for one week in the year but the large take up suggests there is an unmet demand. However, there is no evidence to support or refute this as few girls were prepared to discuss the matter.

4.3.3. Female Genital Mutilation / Cutting

Regarding risks of FGM/C, none of the interviewees raised this topic as an issue or even acknowledged it (and it was not introduced by field researchers). Yet, Mali has one of the world's highest rates of FGM/C: 89 percent of Malian women between the ages of 15 and 49 have suffered FGM/C, and more than 80 percent of them experienced the procedure before their fifth birthday.¹⁰⁷ In Burkina Faso, 76 percent of girls and women have been cut, but only 9 percent favour the continuation of FGM/C.¹⁰⁸ The high prevalence rate of this practice has important implications for adolescent girls' health because it can cause severe bleeding, problems urinating, infections, as well as complications in childbirth and increased risk of newborn deaths¹⁰⁹.

The prevalence of FGM/C varies dramatically between ethnic groups and even among members of the same ethnic group, depending on the country in which they live. The fact that FGM/C was not mentioned may be due to the ethnicity of interviewees if the ethnic group they belong to does not practice it, or it may not be considered an act of violence or a negative act for a girl, especially where it is performed on young girls and seen as an accepted part of growing up. But it might also be due to the risk of being seen to violate the law because the practice is illegal. There are high prevalence rates in both countries. In Burkina Faso, fines can be levied, not only against practitioners of FGM/C, but also against anyone who knows that the procedure has been performed and fails to report it.¹¹⁰ Recent data on FGM/C prosecutions is scarce but between 1997 and 2005; 94 individuals were sentenced compared to the period 2005 to 2009, when 686 individuals were convicted (40 practitioners and 646 parents) and sentences ranged from three months (with parole) to five years.¹¹¹ In 2015 the government adopted a new law Concerning the Prevention, Punishment and Reparations of Violence against Women and Victims Care. In Mali, there is currently no national legislation that specifically criminalises and punishes the practice of FGM/C. There has been attempts to ban FGM/C (most recently in 2017), a draft law to address GBV (including FGM/C) was put forward but it is yet to be passed.¹¹²

4.3.4. Menstruation management

Girls manage their periods by relying on a combination of sanitary towels and pieces of cloth that they wash. Access to and use of sanitary towels depends largely on girls' financial resources and many displaced girls flagged that they can no longer afford to use them.

¹⁰⁴ Hounton, S., Barros, A. J., Amouzou, A., Shiferaw, S., Maïga, A., Akinyemi, A., ... Koroma, D. (2015). Patterns and trends of contraceptive use among sexually active adolescents in Burkina Faso, Ethiopia, and Nigeria: evidence from cross-sectional studies. Global health action, 8, 29737. doi:10.3402/gha. v8.29737

¹⁰⁵ Ministère de la Santé. 2016. Plan National d'Accélération de Planification Familiale du Burkina Faso 2017-2020 <u>http://ec2-54-210-230-186.</u> <u>compute-1.amazonaws.com/wp-content/uploads/2017/11/Burkina-Faso-CIP-2017.pdf;</u> (Amnesty International, 2016)

¹⁰⁶ Amnesty International 2016 Coerced And Denied Forced Marriages And Barriers To Contraception In Burkina Faso https://www.amnesty.ca/sites/ amnesty/files/4718_Burkina_Faso_Report_web.pdf

¹⁰⁷ UNHCR 2013 UNHCR's Dialogues with Refugee Women. Progress Report on Implementation of Recommendations

¹⁰⁸ Ibid

¹⁰⁹ WHO, 2020. Female genital mutilation. FactSheet. https://www.who.int/news-room/fact-sheets/detail/female-genital-mutilation

¹¹⁰ Brazier, C. 2006. 'Wives and Daughters', New Internationalist, issue 389, 2006, pp. 10-13. https://newint.org/features/2006/05/01/women/_

¹¹¹ UNFPA (2011) 'Burkina Faso has a strong law against FGM/C, but winning hearts and minds remains crucial', accessed at http://unfpa.org/sites/default/files/resource-pdf/burkinafaso.pdf

^{112 28} Too Many and Thomas Reuters Foundation (2018) 'Mali: The Law and FGM'. Available at: <u>https://www.28toomany.org/static/media/uploads/</u> Law%20Reports/mali_law_report_v1_(september_2018).pdf. (Accessed 28 May 2020)

"When I was at home, I had the protections I needed. But now, I don't have any. [Why?] Because I don't have money to buy them."

(GIRL, 14, DISPLACED IN KONGOUSSI, BURKINA FASO)

Those who use pieces of cloth wash them, while those who use sanitary products dispose of them in latrines (e.g. Gourma-Rharous). However, displaced girls in Kongoussi explained that they wrap their sanitary products in plastic bags and dispose of them in the bush because there are no latrines.

To access information about menstruation, girls in Burkina Faso relied on their mothers while some also mentioned having been informed at school. In Mali, many girls explained that they learn about menstruation from their girlfriends and/or from elder sisters. In both countries, adolescent girls shared examples of norms dictating what they cannot or should not do while they have their periods and these norms haven't changed during the crisis. The restrictions that girls mentioned exist during menstruation include the forbiddance to pray, touch the Qu'ran, go to the mosque, bathe, go to the river, cook, approach men (and have sexual intercourse) or even talk to them. The norms related to these restrictions are so embedded that at least three girls felt uncomfortable speaking about menstruation at all (in Gourma-Rharous and in Bankass), and one 13-year-old in Bandiagara did not even know what menstruation was. In Bandiagara, a 17-year-old explained that she takes care to hide when she has her period, especially at school; only mothers know and sometimes close friends. In Bankass one girl (15-19) admitted that "often we are ashamed".

In Burkina Faso, one girl explained in detail how she understands the linkages between her menses and the risk of falling pregnant, although she also mentioned wanting to receive more information:

"They say that if you have your period you should not have sex or you can get pregnant. After your period you can, but you must use a protection..."

(GIRL IN 15-19 FOCUS GROUP, TOUGAN, BURKINA FASO)

Her account also suggests that the little knowledge that some girls have seems to be misleading or misunderstood, suggesting the need for better access to SRH related information for adolescents. In Tougan, a 19-year-old explained that if other girls find out that one has her period, they consider her to be dirty and blame her for not looking after herself properly. "[I]must not go to the fields to work as I could affect the harvest. Overall, the majority of girls were shy to discuss the topic of menstruation, particularly in Mali.

A UNICEF study (2016) conducted in the North and East regions of Burkina Faso highlights that girls who menstruate experience isolation, reduced mobility, food restrictions, stigma and exclusion from school. Accounts in the study reveal that pain and fear of bloodstains prevent girls' active participation in class, which is compounded by inadequate water and sanitation facilities. Although many girls in our study did raise issues related to accessing water (see section on Unmet Basic Needs), they did not voice a causation between lack of water and difficulties in managing their periods which may also be due to taboos around menstruation.

The UNICEF study points out that challenges with menstrual hygiene management have a detrimental impact on school attendance. Only 46.15 percent of the visited latrines were operational, resulting in a ratio of 121 pupils to one latrine. However, even where toilets are available in schools, many factors prevent their use for menstrual hygiene management: lack of segregation between girls' and boys' facilities; lack of clean water supply; lack of light; lack of or defective doors or interior locks; and absence of facilities for drainage or waste disposal / waste bins for appropriate disposal of sanitary towels. This results in a lack of security and guaranteed privacy for girls. Various social taboos, supported by religious and cultural beliefs, reinforce gender inequalities and therefore harm girls' dignity, education and ultimately their health.

4.3.5. Access to healthcare depends on location

Other barriers to access contraception and broader health services include the cost of transport to the nearest health facility, especially for those in rural areas where distances are further, roads are worse, and there is no public transport system. Insecurity and the risk of attacks when travelling further restrict people's and particularly girls' use of safe transport to reach health centres. In Burkina Faso, the proportion of people living over 10km from a health facility is less than one percent in the Central region but rises to 28 percent in the more rural Central North region, and over 47 percent in the Sahel region¹¹³. In February 2020, in Burkina

¹¹³ Amnesty International 2016 Coerced And Denied Forced Marriages And Barriers To Contraception In Burkina Faso https://www.amnesty.ca/sites/ amnesty/files/4718_Burkina_Faso_Report_web.pdf

Faso, Mali, and Western Niger over 241 health centres were closed or non-operational due to conflict, with 121 of these are in Burkina Faso.¹¹⁴

In this survey, 85.5 percent of adolescent girls interviewed in Mali reported the existence of a health service in their community and 80.5 percent declared being able to access it. In Burkina Faso, almost every girl surveyed, except a few displaced girls, reported the existence of a health service in their community but 67.2 percent used this service. This discrepancy may be due to the costs of receiving healthcare (see below) but also the lack of need rather than a problem with access.

Table 7: Girls' knowledge of and use of health services

| | Knowledge of any health services in the community | |
|--------------|---|--------|
| Mali | 87.35% | 81.82% |
| Burkina Faso | 97.7% | 67.2% |

The majority of accounts from girls in Mali suggest that when they need healthcare, there is a health centre they can go to. The main issues highlighted are the absence of ambulances in case of emergencies and the high cost of healthcare and medicines. Challenges largely depended on the respondents' location. Girls in Diré described going to the community health centre but most reported a lack of medicines. In Bankass, a 19-year-old woman explained that she can access medicines if she has some money to pay for health expenses. One community volunteer in Gourma-Rharous confirmed that it is difficult to consult a doctor and get a prescription. A local authority representative in Bandiagara also explained that girls can access healthcare if they can pay. In Gourma-Rharous, in contrast, most girls said they could access the community health centre easily. Some essential medicines are free, according to a representative of the local city hall. There is also a GBV focal point in the community health centre. The setting up of more health centres enables people to be closer to them and reduces the need for transport. In villages around Bankass, the system seems different: people can get a consultation pass from the local NGO before going to see a doctor which means their appointment is free of charge. But the NGO is 10 kms away from some villages, so many respondents from these villages stressed that it takes time to access healthcare. Some people mentioned buying medicines or traditional medicines in the market because they were cheaper and easier to access. One girl in Bandiagara explained that her father sometimes goes in the forest to collect leaves to treat her.

Accounts do not suggest that access to healthcare (or lack of) worsens due to insecurity issues, except in one case in Bandiagara, where a 17-year-old girl explained that it is difficult to access healthcare because nurses are afraid to come to the villages due to security concerns.

In Burkina Faso, the Ministry of Social Action in Tougan was mentioned by the majority of respondents – adolescents, parents and local authorities – as the primary authority providing information about health and social support. According to a local authority key informant, residents also report any violence incidents to the Ministry of Social Action: "We often don't know about cases of abuse because people don't come to us [...] they often go to Social Action". While the existence and functioning of a health centre is not an issue in Tougan, accounts regarding the cost of prescriptions and medicines suggest that people face difficulties in using the health centre. According to a community leader and local authorities in Tougan, health care used to be free but now people need money to access treatment and medicines. The cost of getting a prescription often acts as a disincentive for adolescents to consult a doctor.

For IDPs, healthcare is impeded by the lack of access to water, as explained by a mother in Pissila:

"They [NGOs] have come to show us how to take care of children...But, in the evening there is no water and he doesn't wash, , they dug two wells but they didn't find water. If you go to the fountain in the morning you spend the whole day there and in the evening you earn only one jerrycan how you will do to take care of your child in this way."

(MOTHER, PISSILA, BURKINA FASO)

This difficulty was confirmed by adolescent boys in Pissila:

¹¹⁴ OCHA (2020) 'Burkina Faso, Mali & Western Niger: Humanitarian Snapshot. Available at: <u>https://reliefweb.int/sites/reliefweb.int/files/</u> resources/20200217 bfa_mli_ner_humanitarian_snapshot_en.pdf (Accessed 22 May 2020)

"It is not simple to access water. We can't shower everyday [...] You can even go 3 days without showering. Three days without showering oneself can cause diseases..." (BOY IN 15-19 FOCUS GROUP, PISSILA, BURKINA FASO)

4.4. Participation, voice & visibility

"Frankly speaking we don't have the chance to participate in decisions regarding our education. It's our parents who make the final decisions, it's them who decide if we are to go to school, they decide everything relating to our education."

(GIRL IN 10-14 FOCUS GROUP, BANDIAGARA, MALI).

4.4.1. Restrictions on girls' freedoms

Discriminatory social norms operate in the everyday lives of adolescent girls and this means there is typically less freedom of movement for them. The conflict context represents a heightening of the risk of violence. The previous Adolescent Girls in Crisis studies have shown their mobility is largely shaped by attitudes of (understandably) protective parents and by increased domestic chores which confine them to the home and severely limit their opportunities. Adolescent girls in the previous locations studied:

- · Are prevented or limited from attending school;
- · Have few opportunities to make friends and play freely;
- · Have limited control over if, when or who to marry;
- · Are unable to pursue livelihood opportunities that might give them a measure of independence; and
- · Cannot contact health services.

Adolescent girls also face restrictions on their mobility outside of their home. This is generally due to gender norms related to appropriate roles in which girls are expected to perform household chores that confine them to their household. In some families, it is also to 'protect' them and avoid relations with boys or young men. In emergency settings, the imperative for girls to stay at home is compounded both by parents' worrying about their daughter's safety and becoming over protective, and by girls themselves being afraid.¹¹⁵ Girls and young women have been brought up to believe that the honour of the family rests on their sexual behaviour, and they must behave accordingly.¹¹⁶

Plan International <u>UK's qualitative longitudinal study, Real Choices, Real Lives</u> is following the lives of 120 girls across nine countries in three continents from their births in 2006 to their 18th birthdays in 2024. Looking at how gender, poverty and age interact with the social norms that shape girls' lives, preliminary findings suggest that social influences, especially in the household and community, are crucial in forming or breaking gendered social expectations. Female role models are essential, with visible women leaders influencing not just the aspirations of girls, but also parents' views on what is 'acceptable' and possible for girls.¹¹⁷

Social norms – – the (implicit) set of behavioural rules imposed on a social group – are shaped by the values, attitudes and behaviour patterns which society views as 'masculine' and 'feminine.' The concept of gender, and how people's gender identities are constructed, is key to understanding how norms often underpin the gender discrimination faced by adolescent girls. Hereinafter referred to as gender norms, these norms that restrict girls' capabilities are held in place by complicit acceptance of practices and behaviours.¹¹⁸

116 Morgan, J (2016). Family honour and shattered dreams: Girl brides in Mali, Niger and Senegal. Dakar: Plan WARO.

¹¹⁵ Plan / Monash, 2018. Adolescent Girls in crisis: experiences of risk and resilience across three humanitarian settings.

¹¹⁷ Loveday, L. & Rivett, J. 2019. Real choices, real lives: Girls challenging the gender rules Benin, Togo, and Uganda https://plan-uk.org/file/plan-uk-real-choices-real-lives-report-2019pdf/download?token=1XZdZ07F

¹¹⁸ Harper, C., Jones, N., Ghimire, A., Marcus, R., & Bantebya, G. K. (Eds.). 2018. Empowering adolescent girls in developing countries: gender justice and norm change. Routledge: London.

Much of the way adult women and girls experience gender discrimination is similar. However, girls generally have even less power and voice than adult women; they have bodies that are less able to cope with reproduction, and brains that are still developing and thus with potential to learn new norms or imbibe old ones. Girls also have different role expectations from adult women – both the roles expected of them (specific domestic duties, for example) and those they aspire to (such as being educated). Girls also implicitly carry a reproductive value, the 'ownership' of which is not yet decided until they enter marriage. (Harper et al. 2018)

Moreover, repercussions from the transgression of gender norms reflect a power imbalance between men and women, girls and boys, in which girls and women tend to come off worse. But gender norms can also prove negative for boys and men who (are compelled to) conform to them – or choose not to (for example, their mental health may be negatively affected and they may be put at greater physical danger from masculine risk-taking expectations).¹¹⁹

4.4.2. Norms around "appropriate behaviours" for adolescents

Some girls, particularly younger ones who still go to school, considered that they are valued most when they study well.

I study at school to obtain good grades so that my parents will be happy; I follow the teachers, I learn my lessons, I don't play anymore to have good grades.

DISPLACED GIRL, 14, TOUGAN, BURKINA FASO

However, what behaviour is deemed appropriate is based on gender lines and marital status. In Gourma-Rharous, a 14-year-old explains that "some people admire me, others don't due to the fact that I am not married". According to a community leader in Diré, once girls are married "they become calm and respectful". A 17-year-old, considered that people like her "because she respects her parents, she loves them, she helps them and obeys them". A younger adolescent of 13-years-old, in Bandiagara also considered that people admired her because she "respects the elders, [she] likes to work and go to school. Interestingly, the consequence of such norms on girls' behaviour including their shyness, is not necessarily valued:

"Girls are timid, one must awaken their mind and motivate them. They only take decision with difficulty, they always stand behind decisions taken by their parents but boys react".

(VILLAGE CHIEF, GOURMA-RHAROUS, MALI)

The perceived transgression of obedience, particularly when it is associated with what many parents considered "promiscuity with boys", is unanimously condemned by parents, who see this as a major cause of pregnancies outside of marriage. For instance, a father in Tougan pointed out the mixing of adolescent girls and boys at school, which, according to him, leads to the pregnancy of girls. Some accounts from men in communities pointed to their reluctance to accept the changes that were happening to traditional social norms, particularly in the behaviour of adolescent girls. A village chief in Gourma-Rharous, Mali, explained that he is against change:

"Girls here tend to become modern, they look like girls from big cities. I am pessimistic, I am against change. Often, they are not respectful at all. To put girls into safety, one must be rigorous, advise them and monitor."

(VILLAGE CHIEF, GOURMA-RHAROUS, MALI)

¹¹⁹ See Sarah Bradshaw, Maureen Fordham 2013 Women, girls and disasters – A Review for DFID <u>http://www.gsdrc.org/document-library/women-girls-and-disasters-a-review-for-dfid/</u> and Bradshaw S and Fordham M 2014 "Double Disaster: Disaster through a Gender Lens" in Collins, Jones, Manyena and Jayawickrama Hazards, Risks and, Disasters in Society Amsterdam: Elsevier pp 233-251

"Why young girls can no longer do what young girls could do before? But today she does not listen. They say these are things of the past and now there are school [...]. Young girls if they could listen it's better. Before when you spoke once, they accept".

(FATHER, TOUGAN, BURKINA FASO)

A 27-year-old man added that women used to respect their parents and when their husband left to look for financially rewarding livelihoods, they would wait respectfully (and not cheat on him) but "nowadays, [when] you have to leave, you can advise her at home but when she goes out it's the behaviour of the others that she follows and she brings home, at this time you can't correct her any more". Another man also noted that "in our societies, a girl was not allowed to go to school, only boys went to school, but nowadays, they are free to do what they want about school. The health side also the access to the health centre, hospitals ..., the family planning in a way it is to keep them out of pregnancies but [it] has opened the way to their delinquency". Such accounts from men stress how much girls' behaviour is shaped by gender norms that aim to control girls' SRHR. They also point out the reluctance of some men, of various ages, to see adolescent girls' transgressing such norms. Some men also observed that adolescents' girls have less freedom compared to boys:

"Specifically, girls need confidence, reassurance and, above all, education in order to move forward. [...] boys are freer in their actions and decisions. This is not the case with girls." (COMMUNITY LEADER, TOUGAN, BURKINA FASO)

Women's accounts in some sites also suggest that some mothers judge the behaviour of girls (and boys) based on what clothes are worn by adolescents and their tendency to go out in the evening. For instance, in Burkina Faso, a group of mothers explained how the curfew in Tougan has affected girls: "I think that some of them are 'focused' again because they used to wear extravagant clothes to go and do something other than study so I think it's good. For the ones who know what they want to do and were going out to study, it (the situation) is a shame but it's very good for those who were wandering about at night. (Laughing) "The curfew is good for teenage girls who go out because there are some who were doing other things than studying at night which is not well seen because they are under no supervision". They mentioned similar expectations about boys' behaviours: "curfew is good for teenagers who wore weird pants to go out at night to go for a walk but since curfew is over, coming back in the late hours is all over. So this is a big change for me." In Mali, according to a CSO member in Diré, norms have become stricter for girls: they cannot go out without covering their hair and a non-married couple cannot be seen in the streets.

4.4.3. Norms around marriage

Girls' attendance at school is directly linked to the prevalence of CEFM in the Sahel. CEFM is still very much the norm in both countries and is driven by the risks for girls to become pregnant out of wedlock. In Burkina Faso, a community leader in Tougan summarises this:

"For a girl to get married in our region, she must be at least 15 years old, but those who marry before or at 15 years old are afraid that [...] she will get pregnant and the boy will refuse to acknowledge the pregnancy. Parents would be frowned upon in the community which is why they marry at this age. It is very difficult for us to see a girl who is 18 years old and still at her parents' house. [...] it depends on the girl's body shape because at 15 years old she is often small and does not have a woman's curves, so others look at her and say to themselves that after the marriage, she will not be able to cook and many other things in the home."

(COMMUNITY LEADER, TOUGAN, BURKINA FASO)

Similar accounts from key informants in Mali suggests that parents are in favour of early marriage, especially mothers in order to avoid unwanted pregnancies (according to a community volunteer and a local authority in Gourma-Rharous). A village chief in Gourma-Rharous, said that it is actually "fathers who are afraid of 'undesirable' behaviours from their daughters that could lead to unwanted pregnancies. And mothers want to have girls close to help them with household chores".

On the one hand, marriage brings 'dignity', respect from the community (as highlighted by some girls who thought that they are not valued yet because they are not married) and sometimes protection from harassment. Parents' attitudes and behaviours appeared much more influenced by the social structures in their community. The risk for their daughter of falling pregnant out of wedlock is seen as increasing with the schooling of girls, and this risk trumps the risk of by-passing the law. Hence, early marriage is also seen as a protection mechanism by parents. Another study in Mali reveals that parents and girls believe marriage can protect them from harassment by boys and men, and from gossip by the community members if older adolescents are not married yet.¹²⁰

On the other hand, adolescent girls who are married move into their in-laws' household and do not necessarily benefit from a louder voice. They are expected to take on all or most of the domestic work previously carried out by their mother-in-law. In polygamous marriages, other wives might also offload some of their work onto them.¹²¹ Women who married as children are also at increased risk of physical and/or sexual violence.¹²² A baseline survey of adolescents in selected areas of two regions in Mali (Sikasso and Segou) as part of an evaluation of interventions to delay marriage, reveals that 98.8 percent of girls agreed or strongly agreed that a woman should always obey her husband and 93.9 percent agreed or strongly agreed that a woman should tolerate violence to keep her family together.¹²³

The commodification of girls and women is entrenched in tradition where, in Mali, the husband's family gifts the bride's family with substantial material and financial resources as dowry. Part of the money is retained by the girl's father and part is for the creation of the girl's *trousseau* even though the girl herself may have worked (as a maid or street-seller in a city, or abroad) to buy many items. On arrival at her new in-laws' house, it is expected that up to half the *trousseau* is gifted to her husband's family members and friends.¹²⁴ However, this is not the case in Burkina Faso where the dowry is much more symbolic.

4.4.4. Laws versus norms around marriage

As in other parts of sub-Saharan Africa, there is a tension between what the law says and what local social norms dictate.

Burkina Faso and Mali's legal systems are based on the French civil law system and customary law.^{125,126} The constitution of Burkina Faso was established in 1991 and Mali 1992, Both countries have constitutions that do not explicitly prohibit violence against women and girls. Discrimination of all kinds is prohibited (Article 1 – Burkina Faso (1991), Article 2- Mali (1992)),^{127,128} alongside 'inhuman and cruel, degrading and humiliating treatment and physical and moral torture' (Article 2- Burkina Faso and Article 3 – Mali). Burkina Faso's constitution explicitly mentions children, while Mali's does not.¹²⁹ Article 23 in Burkina Faso's constitution promotes 'the rights of the child' and the free consent of marriage for both men and women. Mali's constitution is more ambiguous in relation to marriage, stating the 'freedom of unions is guaranteed. Unions must perform their activities without constraining or limiting aside from those activities provided by law'.¹³⁰

Regarding commitments under international and legal treaties, both countries have taken responsibility to protect girls, demonstrated by numerous international commitments. Both Burkina Faso and Mali ratified the Convention on the Rights of the Child in 1990.¹³¹ Mali also acceded to the Convention on the Elimination of All Forms of Discrimination Against Women in 1985 and Burkina Faso 1987.¹³² In 1981, Mali also ratified the African Charter on Human and Peoples Rights on the Rights of Women in Africa (Maputo Protocol) with Burkina Faso following in 1984.¹³³

128 Mali: Constitution, 5 January 1992, accessed at https://www.ilo.org/dyn/natlex/docs/ELECTRONIC/51253/90474/F902734967/MLI51253.pdf, accessed 21 November 2019.

132 United Nations Treaty Collection 'Convention on the Elimination of All Forms of Discrimination against Women' 18 December 1979, accessed at https://treaties.un.org/Pages/ViewDetails.aspx?src=TREATY&mtdsg_no=IV-8&chapter=4&clang=_en, accessed on 21 November 2019.
133 Africa Union 'List of countries which have signed, ratified, acceded to the African Charter and Peoples Rights' 15 June 2017, accessed at

<u>https://au.int/sites/default/files/treaties/36390-sl-african_charter_on_human_and_peoples_rights_2.pdf</u>, accessed at 2019.

¹²⁰ Morgan, J (2016). Family honour and shattered dreams: Girl brides in Mali, Niger and Senegal. Dakar: Plan WARO

¹²¹ Morgan, J (2016). Family honour and shattered dreams: Girl brides in Mali, Niger and Senegal. Dakar: Plan WARO

¹²² International Journal of Epidemiology, volume 46, Issue 2, 12 October 2016:662-675

¹²³ Melnikas AJ, Saul G, Singh S, Mkandawire J, Gueye M, Diarra A, Amin S. 2019. "More than Brides Alliance: Midline Evaluation Report." New York: Population Council

¹²⁴ Morgan 2016 ibid

^{125 28} Too Many 'Mali: The Law and FGM', 2018, accessed at https://www.28toomany.org/static/media/uploads/Law%20Reports/mali_law_report_v1_ (september_2018).pdf, accessed on 21 November 2019.

^{126 28} Too Many 'Burkina Faso: The Law and FGM', 2018, accessed at <u>https://www.28toomany.org/static/media/uploads/Law%20Reports/burkina_faso_law_report_v1_(september_2018).pdf.</u>, accessed 21 November 2019.

¹²⁷ Burkina Faso: Constitution, 11 June 2012, accessed at: https://www.refworld.org/docid/3ae6b4d920.html, accessed 21 November 2019.

¹²⁹ Ibid.

¹³⁰ Ibid

¹³¹ United Nations Treaty Collection 'Convention on the Rights of the Child' 20 November 1989, accessed at https://treaties.un.org/Pages/ViewDetails.aspx?src=IND&mtdsg_no=IV-11&chapter=4&lang=en, accessed on 21 November 2019.

Burkina Faso's legal framework (Code des Personnes et da la Famille 1989), states the minimum age of marriage for girls is 17 years and for boys it is 20, however, girls can marry as young as 15 and boys at 18 if authorised by civil courts.¹³⁴ The government has adopted a National Strategy for the Prevention of Child Marriage (2016-2025) and an accompanying action plan but implementing the government's pledge is yet to be passed legally.¹³⁵ Also, the prohibition on forced marriage only applies to a legally recognised marriage. Yet, the majority of CEFMs are conducted through religious or traditional ceremonies which are not registered legally and where girls do not even have to be present. There is no official mechanism for those conducting such marriages to check the ages and consent of the parties which means that women and girls who are coerced into a religious or traditional marriage are excluded from the protection of the law.¹³⁶

Mali has one the highest rates of CEFM rates in the world: 50 percent of women aged 20 to 24 years were first married or in a union before age 18 and 18 percent before the age of 15.¹³⁷ Under the Code of Persons and Family 2011, the minimum age of marriage is 16 years for girls and 18 years for boys and in certain cases, marriage can be authorised from 15 years with a judge's permission and parental consent.¹³⁸ Likewise, Mali's commitments to ending CEFM have not necessarily translated into the legal sphere. Mali also has one of the highest birth rates, with an average of 6.1 children per woman.¹³⁹ Child marriage is more common among rural populations (25% women 20–24 married before 15 and 65.7% by 18) compared with urban populations (25.8% women 20–24 married before 15 and 43.6% in urban areas). Polygamy, a common practice in Mali with 37 percent of women reporting being in polygamous unions,¹⁴⁰ is also more common in rural areas (38%) than in urban areas (22%). Girls in Mali who are married before 18 are more likely to be in polygamous unions than those who are married after age 18.¹⁴¹

Laws might not be known by villagers and are even less likely to be enforced. Local authorities who do know the law, are caught between the state legislation and the local social norms. A mayor in Burkina Faso affirmed that the average age of marriage is 18 years old, while a local authority representative in Bandiagara, Mali, declared that girls are married over the age of 20. In Bankass, Mali, a village chief declared that girls marry at 18 (not before), yet this study shows that many girls are married before that age. In Timbuktu, only three out of 43 girls who declared being married, were 18 or more at the time of their marriage. The average age of the remaining respondents when they got married was 15 years old. In Mopti, only 10 girls out of 128 respondents declared being married. Although they did not state how old they were when they got married, three of them were below 18.

Similar comparisons are not possible with Burkina Faso, because all survey respondents, except one, were not married. One local leader in Burkina Faso emphasised:

"Social action raises awareness that 18 is the right age for marriage. [But] Parents do not want girls to reach 18 at home for fear of coming up with problems: for example, unwanted or fatherless pregnancies."

(COMMUNITY LEADER IN TOUGAN, BURKINA FASO)

While gender inequality is a driver of child marriage, often in times of crisis families may be forced to consider child marriage as a strategy to cope with economic hardship and/or to shield girls from increased violence.¹⁴² Drivers are frequently compounded by limited access to quality education and employment opportunities and reinforced by entrenched social norms. CEFM locks girls into poverty and exclusion, creates barriers to education, and increases health-related risks and likelihood of GBV.¹⁴³

¹³⁴ Burkino Faso: Code des personnes et de la famille [Burkina Faso], November 1989, available at: https://www.refworld.org/docid/3ae6b4da27.html, accessed 13 November 2019

¹³⁵ Girls Not Brides Child Marriage Around the World – Burkina Faso, 2018, available at: <u>https://www.girlsnotbrides.org/child-marriage/</u> <u>burkinafaso/#:~:targetText=52%25%20of%20girls%20in%20Burkina,are%20in%20Sahel%20and%20Est.</u>, accessed 12 November 2019

¹³⁶ Amnesty International, 2016 Burkina Faso: Forced and early marriage puts thousands of girls at risk, 26 April 2016 <u>https://www.amnesty.org/en/latest/news/2016/04/burkina-Faso-forced-and-early-marriage-puts-thousands-of-cirls-at-risk/</u>

¹³⁷ UNICEF 2019. Child Marriage Data. https://data.unicef.org/topic/child-protection/child-marriage/

¹³⁸ Canada: Immigration and Refugee Board of Canada, Mali : Forced marriage, including the prevalence of forced marriage, related legislation, state protection, support services and the ability of women to refuse a forced marriage 15 July 2016, available at: <u>https://www.refworld.org/</u> <u>docid/57a18aed4.html</u>, accessed 13 November 2019.

¹³⁹ Melnikas AJ, Saul G, Singh S, Mkandawire J, Gueye M, Diarra A, Amin S. 2019. "More than Brides Alliance: Midline Evaluation Report." New York: Population Council

¹⁴⁰ Institut National de la Statistique (INSTAT) and ICF. 2019. 2018 Mali Demographic and Health Survey Key Findings. Rockville, Maryland, USA. INSTAT and ICF <u>https://dhsprogram.com/pubs/pdf/SR261/SR261.E.pdf</u>

¹⁴¹ Fenn, N.S., J. Edmeades, H. Lantos, and O. Onovo. 2015. Child Marriage, Adolescent Pregnancy and Family Formation in West and Central Africa. Washington, DC: ICRW.

¹⁴² Girls Not Brides, 2016, Child Marriage in Humanitarian Crises. <u>https://www.girlsnotbrides.org/wp-content/uploads/2016/05/Child-marriage-and-humanitarian-crises-June-2016.pdf</u>

¹⁴³ Plan International (no date) Protecting the most vulnerable children in emergencies: The case for adolescent girls <u>https://plan-uk.org/file/protecting-</u> <u>the-most-vulnerable-children-in-emergencies-the-case-for-adolescent-girls/download?token=vnWLXQV2</u>

In Burkina Faso, Amnesty International¹⁴⁴ examined how women and girls still lack adequate protection from forced and early marriages. The report highlights that violence, threats of violence or other types of coercion were used against them to subject them to forced or early marriage. There were threats of beating or banishing other family members from the family home, if they did not accept the marriage, or pressure brought to bear on them through money or goods being offered to their families. Traditional practices such as 'Pog-lenga' ('woman gift' or 'additional' or 'bonus woman') is practiced by some Mossi and Bissa ethnic group and extends the commodifying of women to other family members; it allows for a new bride to bring a niece to her husband's family as an additional gift.. However, these issues were not reported in this present research.

4.4.5. Decisions on marriage

The agency of girls over their marriage is not clear. In Mali, all the girls living in Mopti region who were married reported that their father (or their mother in the case of one girl) decided whether or not they should marry, while only four girls out of 43 of those living in Timbuktu region declared that they decided themselves when to marry. One was 14 years old and the others where 17 and above.

In Gourma-Rharous, two girls (15-19) expressed concerns about marriage:

"I am not married yet, I am afraid to fall pregnant and of bad omens".

"I am afraid that my parents will give my hand to a man whom I don't like and the risks associated to that".

In Diré, one 14-year-old girl explained that she was married, and that her father decided; she did not have a say. She called it a 'parental wedding', and still lives with her parents.

Quantitative data from Burkina Faso does not enable a comparison on the decision-making power of girls over their marriage, as the large majority of girls participating in the survey were unmarried. However, when asked who will decide about their future marriage, 21 percent responded that their father will decide, another 21 percent said that they would solely decide, and almost half of girls said that they would decide or have a say, alongside their parents or grandparents. Two displaced girls in Kongoussi suggest that their agency is limited:

It is possible to do what you want, but often, you can't do what you want, first of all because you don't belong to yourself.

(GIRL, 14, DISPLACED IN KOUGOUSSI, BURKINA FASO)

"Parents take the decisions, I cannot take any decisions". (GIRL, 18, DISPLACED IN KOUGOUSSI, BURKINA FASO)

Contrary to the majority of adolescent girls' accounts, a community leader in Tougan, Burkina Faso, insisted that both girls and boys have a say in their marriage, although this varies among ethnic groups. He explained:

"The boy informs his parents, who send a delegation to ask for the girl's hand in marriage. With us Samos, when a boy wants our daughter, the day the boy comes to see the girl, we keep him and he calls his parents to inform them of the situation. Then, the girl's parents ask their in-laws to make sacrifices before giving the ok for the marriage, in any way they want. [Question: Are girls or women involved in decisions about their marriage? Who has the final say?] Yes, they have a say. Currently there are no forced marriages, if you do it and you are caught they lock you up so the okay comes from them."

(COMMUNITY LEADER, TOUGAN, BURKINA FASO)

A representative of an international NGO in Tougan also considered that girls are free to decide: "I think the girls are pretty free now. The ones I've seen get married, it's by pure consent."

One 19-year-old woman did explain that she negotiated her own marriage with her husband. She said she got married "to stop wandering and to stay a home with my husband and my children". Another 18-year-old displaced girl in Kongoussi also highlighted that girls might have their own ideas of what they want for their marriage and their peers play a major influencing role:

¹⁴⁴ Amnesty International, 2016 Burkina Faso: Forced and early marriage puts thousands of girls at risk, 26 April 2016 <u>https://www.amnesty.org/en/</u> latest/news/2016/04/burkina-faso-forced-and-early-marriage-puts-thousands-of-girls-at-risk/.

"Not all problems should be shared with our mothers. [Researcher: which problems should be hidden from mothers?] For instance, if you want to elope, you can confide in your sister-in-law, parents may be against the marriage, and if you care about the guy and want to marry him, you can ask support from your sister-in-law. You inform her, and she will pass the information along to your parents'

(GIRL, 18, KONGOUSSI, BURKINA FASO)

While these accounts suggest that not all marriages are forced and that some girls have, or perceive they have, agency over decisions related to their union, this situation contrasts with Mali where only eight girls out of 253 survey participants said they would be the one deciding who and when to marry.

Accounts from young women (18-19) in Diré, Mali stressed that "Authorities must think about the future of these girls who want to study". This poses the question whether adolescent girls and women still consider it is possible to study even if they are married? Some adolescent girls indicated that the two could be compatible, but their husband must give his permission. However, they also highlighted that authority figures consider that women's place is at home, to get ready to be married and a girl's role is to take care of the household. One 15-year-old girl in Bankass also stressed that parents must be informed about the importance of letting girls go to school and finish their studies.

"We are in Africa, generally a girl can give her opinion but the decision is taken by men, she does not have a sav."

(MAYOR, BURKINA FASO)

In Mali, older adolescent girls from Bandiagara raised early marriage as an issue and their mother as someone who could help, but they indicated feeling they cannot convince her. Lack of voice is not just a challenge for adolescents, it is also the case for women (Bandiagara) who described not being in a position to change things, in relation to issues such as lack of healthcare or insecurity. However, they said they could talk to their husband so that he raises the challenges they face and take relevant decisions.

In the majority of cases discussed during interviews fathers take decisions although mothers were mentioned sometimes as sharing decision power with their husbands. Some girls explained that their mother was the one who takes final decisions in the cases where the father had passed away.



Figure 12: Decision-making in Mali as reported by adolescent girls (n=253)



Figure 13: Decision-making in Burkina Faso as reported by adolescent girls (n=128)

4.5. Unmet basic needs

[What would help you to stay healthy?] "Latrines, kitchen utensils, a water pump to get drinking water and food".

(GIRL, 18, DISPLACED IN KOUGOUSSI, BURKINA FASO)

In contexts already characterised by poverty and chronic malnutrition, armed conflicts and attacks that continue to strike central Mali and the North-West of Burkina Faso have had devastating impacts on peoples' access to basic services such as water and food and their livelihoods.

4.5.1. Water resources

In Mali, the lack of access to drinking water was stressed by the majority of girls interviewed in Bandiagara, Diré and particularly Gourma Rharous. Following violent attacks, girls explained that they no longer have access to drinking water as the main pump is broken. A 14-year-old further explained that only one hand pump is working, and "it is very difficult because one must wait a whole day to get water". A group of parents also explained that due to the lack of drinking water, girls now have to fetch water from the rivers. Another girl explained that they drink water from the river or well; "to fetch water is very tiring, especially when the river runs dry". Older girls explained that the repairing of water drills would really help:

"we all know each other, but to get water at the pump, it is every man for himself and God for us all." (GIRL IN 15-19 FOCUS GROUP, BANDIAGARA, MALI)

In Burkina Faso, the displacement of people has added pressure on already limited natural water resources which has affected both host and displaced communities. Accessing drinking water was particularly highlighted as a challenge by displaced interviewees. In Pissila, women who have been displaced expressed their gratitude for the support they received from host communities but water access remained their main concern. Adolescent boys in Pissila flagged that water is now a paid commodity, as is firewood, which is a major change from the situation in their village of origin:

"Back in the village we showered whenever we wanted. We used firewood as we wanted: But here one must buy water; one must buy firewood. One must buy everything." (BOY IN 15-19 FOCUS GROUP, PISSILA, BURKINA FASO)

In Tougan, the added pressure on water sources seems to trigger tensions between host and displaced peoples. Displaced girls living in Tougan explained that they struggle to access water in the host community as they get shouted at or beaten at the well. In Bomborokuy, fathers' and adolescent boys' accounts stressed problems linked to the presence of 'foreigners' which has increased demand for basic services including access to clean water, sanitation, healthcare and education.

"Before we were not many, but now there are many of us in the village. Strangers have also joined us. There are many of us now, there is not enough water in our wells. We can't find much, much water anymore."

(BOY IN 15-19 FOCUS GROUP, BOMBOROKUY, BURKINA FASO)

4.5.2. Food insecurity

Food insecurity was not an issue reported in all villages in Mali and Burkina Faso but was usually more prevalent in displaced communities. However, it is worth noting that data collection took place in February outside the lean season in both countries. In Burkina Faso it is July and August and in Mali it is end of May to August.

In Mali, in localities where it was a problem, adolescents and parents mentioned different strategies, including going to relatives or neighbours, or cooking la bouillie (porridge from millet). In Dire, men seem to eat first, because 'it is customary'. A community leader in Diré adds that in times of crisis, adults do not change their eating habits and that is a problem. In contrast, food insecurity was not reported in Gourma-Rharous and all family members seem to eat at the same time. In Bandiagara, a girl explained that girls eat with their mother and boys eat with their father. In Gourma-Rharous, a respondent working for the local authority explained that there is an early warning system to monitor food prices and also a system to monitor complaints related to food distribution to improve transparency.

In Burkina Faso, food issues were mentioned most frequently in Kongoussi in the Centre Nord region – where respondents referred to "food problems", "food issues" or "hunger" frequently. In both regions in Boucle du Mouhoun it was raised; in Bomborokuy by older girls in the 15-19 group and in the parents' focus groups and in Tougan in the boys and girls focus groups. It was mentioned least in Pissila (where it was mentioned in two groups).

In regions where food issues were a problem, coping mechanisms were reducing the number of meals e.g. from three to two, or reducing the size of meals. All respondents mentioned that food was shared equally among family members when there were food shortages.

In Tougan, Burkina Faso, boys and girls who have been displaced mentioned issues with the lack of money and having experienced hunger. One 14-year-old explained that she eats twice a day and eats little in case there is not enough food to go around. Another 15-year-old girl, explained that her elder brother who works as a nurse, leaves her some money so she buys her own food but only eats once a day: "often because the money my big brother leaves me here runs out I am afraid to call him and tell him, thinking he will say I wasted the money, so I remain hungry."

"Here we do not earn good money to eat well." (GIRL,10-14, LOCATION, BURKINA FASO)



Figure 14: Food Insecurity: Percentage Of Girls Reporting Feeling Hungry Or Worrying About Not Having Enough Food To Eat In The Past 4 Weeks In Burkina Faso (N=128)

Figure 15: Food Insecurity: Percentage Of Girls Reporting Feeling Hungry Or Worrying About Not Having Enough Food To Eat In The Past 4 Weeks In Mali (N=251)



In Burkina Faso, malnutrition of children under-five was commonly reported. A community leader in Tougan explained how the community anticipate periods when stocks of food are lower:

"The community after the harvest tries to estimate how much food can be reached for consumption and based on this there are donations they make but they focus more on the less well-off and women with small children, those with children under 5 years old. For the sharing it is the Social Action that takes care of it."

(COMMUNITY LEADER, BURKINA FASO)

Since the new law in 2016, healthcare for pregnant women and children under five is free. But this benefit does not seem to trickle down to the community level. A Mayor explained for instance that the budget of his municipality dedicated to healthcare for malnourished children remains at a low level:

"When I go around, I use my own means, with flour, sugar, to help these children". [...] The state often transfers funding for health but it is used for to buy medicines, gas, and other consumables that we provide to health services."

(MAYOR, BURKINA FASO)

4.5.3. Selling and buying food

The risk of attacks and resulting insecurity disrupt the normal functioning of local markets. This had negative consequences for the productive activities of residents, particularly women and adolescent girls who sell food in the market. The impacts of the insecurity on their activities was stressed as a major issue for adolescent girls in Gourma-Rharous, in Mali. One of them explained:

"Our weekly market is on Sundays. But when there are attacks, nobody comes to us. We must wait for the situation to calm down. But until then, how do we survive?"

(GIRL IN 15-19 FOCUS GROUP GOURMA RHAROUS, MALI)

Displaced women and girls in particular, can no longer resume the activities they used to perform in their village of origin to provide food and income to their household. In Pissila, Burkina Faso, displaced women explained how they used to engage in many different activities, both productive and reproductive, including animal husbandry, farming, or stockpiling and reselling food items when prices increased. The displacement has put an end to their livelihoods for two reasons. Firstly, they left their animals behind when they fled their village, or the animals they brought with them wandered back to the village of origin. Secondly, some sold their main assets such as their livestock to get cash for short-term needs. The small amount of cash they received as aid was used for managing urgent healthcare related expenditures due to contracting an illness (e.g. malaria) or coping with an accident, instead of investing into buying new animals.

"When we fled to come here my husband got sick. We treated him in vain. We had to go to the hospital. The children were in school but because of his illness and death the children did not go back to school. The animals we had were sold to treat him. »

"When we were at home we used to trade and we used to farm so if a child gets sick you can sell two chickens so you can take him to the dispensary to get him healthy but here we do not have all that anymore. One of my children got sick here, because I had nothing, I watched the child suffer and I could not do anything."

(DISPLACED WOMEN, PISSILA, BURKINA FASO)

Some NGOs support IDPs, especially to access healthcare, but it seems that not all women were aware of this option.

A needs assessment conducted by Plan International in 2019, identified several risks for the wellbeing of internally displaced children, particularly those separated from their parents including: the exploitation of children under 14 years old as labour force in goldmines; the sexual exploitation of girls; forced marriage; and trauma caused by the extreme violence that children witnessed (Ibid).

4.6. Work & Livelihoods

"I want to become someone important and help my family and my community. I would like to be a doctor." (GIRL IN 15-19 FOCUS GROUP, BANKASS, MALI).

4.6.1. Lack of livelihood opportunities

A frequent theme raised by girls and community members more broadly was a lack of livelihood opportunities. This was particularly flagged by displaced participants:

"We are here, it doesn't suit us, because when I was in my village, I was going to school, my father and my mother were selling pieces of land. But since we are here, we don't have any activities any more, except we sit down all day long"

(GIRL, 18, DISPLACED IN KONGOUSSI, BURKINA FASO)

A group of fathers in Bomborokuy, Burkina Faso, explained their concerns about the lack of resources and the chain of negative consequences due to adolescent unemployment, which leads many boys to become "delinquents" and "leads to pregnancies out of wedlock". In Tougan, a 46-year-old man in a group discussion also considered that adolescent boys face unemployment because of their own behaviour: "the thing that stopped is determination and the will to work, before, the young boys accepted to work hard for their bread but young people of today,[...] they wait for somebody to come and say "do that" and take [income] to guarantee his needs today. But he doesn't think of tomorrow, he doesn't think of saving up in order to achieve something tomorrow".

The lack of livelihood prospects was also a recurrent issue flagged by adolescent boys and parents. In Tougan, women explained how the insecurity has made access to livelihoods even harder for adolescents:

"It's difficult for the teenagers because some of them used to go to the village markets because here there is not enough work. [...] So, they are obliged to go out, and yet with the insecurity they can no longer do their trade in the villages."

(MOTHER, TOUGAN, BURKINA FASO)

When asked what could be done to support girls in Gourma-Rharous, a 14-year-old answered: "to help us sell things. We have nothing to do and girls here are saving up to prepare for their marriage". An 18-year-old said she would like some support to open her own hair salon.

One consequence of the lack of livelihoods is the migration of adolescents, including girls. Mali has experienced increased rural–urban migration in part as a result of climate change and environmental degradation, although 70 percent of the population still live in rural areas.¹⁴⁵ Previous studies have suggested that the risk that young people migrate permanently encourages parents to marry off their children early, even if sons might not have adequate means of supporting a wife and a family. Early marriage of both boys and girls could therefore be a mechanism to keep the family together in the village of origin¹⁴⁶. However, more research needs to explore this suggestion and studies in other parts of the Sahel have shown that even married men tend to migrate, sometimes permanently, to secure better livelihoods and/or to remarry elsewhere¹⁴⁷.

Following attacks in Yirgou (region Centre North), in Burkina Faso in January 2019, a needs assessment among IDPs revealed that adolescents are not visible or present among them; it is inferred that they might have fled to escape violence and/or they might have gone to gold mines to find livelihoods.¹⁴⁸ In this research, a mayor in Burkina Faso, indicated "there is a migration of girls and boys. We must work to solve this issue otherwise if girls emigrate to big cities there won't be life and boys will leave too." Some accounts from girls confirmed that older boys leave the village to go and work in gold mines.

The lack of youth employment is also identified by Plan International as a factor in youth radicalisation. In Mali, the recruitment of children by armed groups doubled between 2018 and 2019 with an estimated 377,000 children in need of protection assistance. More information is needed on radicalisation risks and how these might affect boys and girls differentially.¹⁴⁹

4.6.2. Norms around unpaid and paid work for girls

The majority of girls, including displaced girls, described contributing to their household by doing the household chores (fetching water, sweeping, doing the laundry, cooking, gardening, cleaning and fetching firewood). They all pointed out that these activities are assigned to them while boys are not expected to do them, and this division is seen as normal and was the same before the crisis.

¹⁴⁵ Melnikas et al 2019 ibid

¹⁴⁶ Morgan 2016 ibid

¹⁴⁷ Le Masson et al. 2018.

¹⁴⁸ Rapport de mission 2019. Mission d'évaluation conjointe sur l'assistance humanitaire d'urgence pour les personnes déplacées internes suite aux évènements de Yirgou. CONASUR / UN.

¹⁴⁹ Plan International, 2019. Rapid needs assessment report. Mopti Region. August 2019.





However, household chores or caring responsibilities are not the only activities that girls perform. Almost half of the girls in Mali (44.8%), and over a third of girls in Burkina Faso (34.4%) who took part in the survey declared working to earn some money. Many adolescents aged 14 or above who were interviewed also explained they earn money (either to support their parents and/or to save) by doing 'small' income earning activities including braiding hair, cooking pastries or dishes like facouhoye to sell in the market, selling vegetables or spices cultivated by their mothers or working as maids in bigger urban centres. Even young girls such as one 13-year-old girl in Bandiagara mentioned that when there is not enough food, she works at rich households to earn an income. In Gourma Rharous, one girl (14) works as a maid for an Arab household to help her family with income and to save some money for herself. Even displaced girls rely on their own ability to work as explained by one 14-year-old in Tougan who said that during the school holiday, girls go to bigger cities to work as maids. With the money they earn, they pay their school fees or give their income to their parents.

A displaced 15-year-old in Tougan observed a difference between girls' roles and boys':

"Well here I find that girls work better than boys at home and at school, it's not the same thing. At home, the girls do the dishes, clean, cook, I can say that the girls do everything in the house.

Question: What about the boys?

"It depends on the mother, if he is afraid of the mother he will go to work, if not...".

Girls' accounts stressed both their unpaid and paid contribution to help their family, and they felt proud of it, or at least felt like they were doing their duty. In contrast, accounts from others suggest a lack of value of girl's household work. One village chief in Gourma-Rharous for instance said:

"Girls between 10 and 19 do almost nothing except household chores. Boys go to school, they farm and engage in small jobs."

(VILLAGE CHIEF, GOURMA RHAROUS, MALI)

Some community leaders also do not seem aware of the realities of girls' activities. In Tougan for instance, where all the older adolescents interviewed mentioned going to work in cities as maids during the school holidays, one community leader explained that girls:

"if they are not at school they are at home, [...] they help with the work at home, in our community no girl leaves to look for livelihoods, they often trade alone or with someone to be paid to meet some of their needs and during the period of field work they ask to come and help the family in the fields. In contrast, boys leave the village after harvests and go to Ouagadougou or to Mali." (COMMUNITY LEADER, TOUGAN, BURKINA FASO)

When describing their daily activities, boys' accounts include going to school, and working activities (building bricks, working in the fields, cutting wood, fetching animals) but also many more terms like 'games, playing, napping, sport, walks, chats, etc." compared to girls' accounts. Adolescent boys from Pissila do not go to school and do not have income generating activities, so they explained that they spent most of their time playing. Some of them mentioned helping their mother fetching water and collecting firewood. Girls' accounts of their daily activities are much more focused on school and household chores, feeding animals, selling products, and some leisure time in the afternoon to nap and in the evening to watch TV or chat to friends. As one Mayor in Burkina Faso put it:

"the difference is that here, boys do not have the culture to do household chores like girls whereas girls work in the fields AND do the household work". (MAYOR, BURKINA FASO)

According to a community leader in Tougan, adolescent boys "when they get older they want money at all costs to buy a motorcycle and get married".

4.6.3. Girls' aspirations

The desire to work in order to help their family and their community (even their country) was voiced by the majority of children, both boys and girls of all age.

"I want to finish my studies, to become a big boss and have cars and a phone." (GIRL,10-14 BANDIAGARA, MALI)

"I want to study to be a person with a big responsibility to take care of my village." (GIRL,10-14, BANDIAGARA, MALI)

One girl in Bandiagara wanted to "become an entrepreneur woman to help my community", while two 15-year-old girls in Bankass would like to be doctors, "to help our community". One 14-year-old IDP in Tougan, said she wants to become a police officer to fight against men who attack villages.

Figure 17: percentage of girls aged 10-19 years old expressing what they would like to do in the future in Mali (N=253)



Figure 18: Percentage of girls aged 10-19 years old expressing what they would like to do in the future in Burkina Faso (N=128)



The majority of girls in both Mali and Burkina Faso declared that they want to be shopkeepers and have their own business. Successful vendors and businesswomen who earn a lot of money in the market, especially during fairs, were often pointed out as role models. They also wanted to become doctors, teachers and nurses or midwifes, decision-makers and work with NGOs (See Figures 17 and 18). In Mali, many girls saw themselves reaching positions of power: 11 girls interviewed said they wanted to become mayors, members of parliament, or ministers of education or health to 'better serve their community'.

Yet all of those living in Diré, Mali, for instance are not allowed to go to school anymore or cannot go because of the risk of attacks. In Gourma-Rharous three girls (two 14-year-olds and one 18-year-old) explained that they want to study to become a doctor but none of them go to school because it has been destroyed and closed down. One 18-year-old stated that the biggest challenge in her life is not being able to study. More girls in Mali declared wanting to get married, live with their husband and have children, than in Burkina Faso. Only a minority of accounts from interviews suggest that girls aspire to becoming a good housewife. In Burkina Faso, some girls also expressed wanting a job (any job) in order to be useful, to help their family and community, while others also declared wanting to join the army, become a soldier and defend their village.

Previous research has shown that providing girls with an extra year of schooling increases their wages by 10-20 percent¹⁵⁰ and women with more years of schooling have better maternal health, fewer and healthier children and greater economic opportunities.¹⁵¹

 150 UNICEF 2011 'UNICEF says education for women and girls a lifeline to development' News note <u>https://www.unicef.org/media/media_58417.htm</u>
151 DFID 2011 A new strategic vision for girls and women: stopping poverty before it starts <u>https://www.gov.uk/government/uploads/system/uploads/</u> attachment_data/file/67582/strategic-vision-girls-women.pdf

5. SOCIO-ECOLOGICAL FRAMEWORK – THE ENABLERS / CHANGEMAKERS & BARRIERS

The following discussion returns to the socio-ecological framework which is based on the previous AGiC framework and has been adapted for this research. The socio-ecological context in which any consideration of adolescent girls must be placed. Adolescent girls do not (and cannot) act alone and a relational analysis must be at the core of interventions to redress inequalities.

At each level – individual, household, community and societal –we found some aspects of girls' lives that act either as a driver of, or barrier to, change. These aspects can be linked to girls' particular geographical location (e.g. living at walking distance from a community health centre) or their own family circumstances (e.g. some girls have been displaced and separated from their parents) which means that drivers of change are first and foremost context-specific. In addition, we analyse below a number of findings that were recurrent across the study sites to summarise the enablers and barriers for change.

In exploring the role of enabling environments to either create or block change – change as identified by adolescent girls, their male peers, families, communities and others – we aim to examine/find the sources of potential transformative change in contexts of enormous turmoil, disruption and violence.

5.1. Individual – The Adolescent Girl

- Self-Efficacy/Confidence¹⁵²
- Personal Aspiration
- Knowledge & Skills
- Beliefs & Values
- Perceived Norms & Risks

In general, we found limited **self-efficacy** in the adolescent girls who participated but, perhaps paradoxically, we found they nevertheless held a strong **sense of self**. They had ambitious and optimistic **aspirations** for themselves (to be doctors, teachers, entrepreneurs) even in the face of major challenges. The exercise of control over events was often perceived to be embodied in others (fathers, elite members of the community, the government, God) and this arguably indicates a failure in the enabling environment.

The girls (and many boys and adults) expressed strong interest in schooling and frequently identified this as a major issue. The girls often also expressed enjoyment of school ("I love school") which made the shortcomings and limitations (few and sometimes poor teachers; school closures; security issues making travel to school risky) even harder for them to bear. They were well aware that the development of their **knowledge and skills** through school, offered a pathway to future **work and livelihood** opportunities, among other less tangible values such as enjoying acquiring knowledge.

There was evidence of critical awareness by some girls that they face gender discrimination, while also demonstrating their strong adherence to many of the **beliefs and values**, and **social and gender norms** that influenced them.

The context of **insecurity and violence** affected girls' lives in every sphere – from limiting their ability to attend school and develop their knowledge and skills, to their ability to make money to feed themselves and their families and to prepare their *trousseaux*.

5.2. Family & Peer Networks

- · Family Influence/Support
- Peer Influence/Support
- Communication
- Social Support

¹⁵² Self-efficacy or self-confidence refer to the belief in one's ability to influence events that effect one's life and one's ability to exercise control over the way these events are experienced. See Bandura, A. (1994). Self-efficacy. John Wiley & Sons.

The **family** is the most immediate influence and support for adolescent girls. The father is considered a protective figure while mothers are mentioned as girls' main source of comfort and confidence. Hence, girls who were displaced and separated from their parents particularly flagged how much they missed their family. However, girls mentioned different family members as significant in different contexts. For example, for issues regarding personal health including menstruation it was generally **mothers or sisters** who took the lead. In fact, for menstruation, the mother may be the only family member to know she is menstruating as there is a strong taboo around discussing it.

Not surprisingly, **fathers** were the main decision makers – sometimes together with mothers but in general they were seen as the lead household decision maker and main protector of their safety. This was linked closely to expectations embedded in **socio-cultural and gender norms** which were not questioned in the interview settings. Adults generally professed it was parents who made decisions about marriage and many referred to the ability of girls themselves to have a say in this decision. However, the fathers generally had the final say and this appeared to be an unquestioned acceptance of **socio-cultural and gender norms**.

Brothers were often identified as protectors (in Burkina Faso), and boys were seen as the heirs to the family and representatives of the future. Elder sisters often acted as sources of information particularly regarding menstruation.

A number of girls had been displaced from their primary homes and families and were staying with **extended family** members such as **uncles and aunts** who became the primary caregivers in contexts of insecurity and escaped from **violence**.

Of particular interest in the findings was the role of **grandmothers** in Mali as sources of comfort and support, often through their role as storyteller in the evenings. Grandmothers were important for both girls and boys in that respect.

Generally, **communication** appeared one-way and girls expressed the belief that they could not influence, convince or persuade their parents to their own way of thinking. However, they were very open to receiving **training** or support to do so.

While a number of typical traits of adolescence were identified (curiosity about reproductive health and sexuality, dreams for the future, interest in relationships, interest in having phones and having fun) what was not prominent in the interviews was a sense of rebelliousness and challenging of dominant social and gender norms. This might suggest that their socio-ecological context acts as a powerful barrier to changes but girls could also be navigating gender norms by slowly adopting new behaviours (socialising with other friends, going to urban centres to work) without acting rebelliously or being seen as transgressing norms.¹⁵³

NGOs were seen as major providers of social **support** and were suggested as likely **enablers** of change.

5.3. Community

- Leadership
- Access to Information
- Social Capital

Girls pointed to the **leadership** roles of various community leaders as potential means of power to effect change. Village chiefs, youth and women's association leaders, mayors, the government and NGOs were prominent in lists of suggestions. Some girls also named themselves as having the power to change things for the better or saw themselves reaching positions of power: in Mali, 11 girls who took part in the survey stated they wanted to become mayors, members of parliament, or ministers of education or health to 'better serve their community'.

Access to information was provided by expected community leaders (teachers, village chiefs) and family members in gendered ways (e.g. mothers or older sisters for personal health). Most girls reported being able to access information at health centres (particularly around SRH) while some girls mentioned getting information on sexuality from their phones.

Access to **social capital** was often limited by the security situation, especially where schools were closed and curfews were in place as girls were limited in their opportunities to connect with others. Interestingly, mayors were often cited in Mali as the main figure of power and source of support for girls to access healthcare or education.

¹⁵³ For a theoretical insight into this strategy see: Kandiyoti, D. 1988 Bargaining with Patriarchy. Gender and Society, 2(3), 274-290.

Girls did not name or point to their community leaders or, more generally, men in their community as people who could constrain their wellbeing and development. But the reluctance expressed by men themselves to accept the changes that are happening to traditional social norms, particularly in the behaviours of adolescent girls, acts as a barrier for norm change and girls' empowerment.

5.4. Society

- Governance & Leadership
- · Policies & Regulations
- Resources & Services
- Media & Technology
- Socio-Cultural & Gender Norms

Resources and services have been seriously impacted in the ongoing **security** situation. We examined **education** and **health** as the two areas which had proved significant in earlier studies but we also learned of impacts on sustaining **basic needs** and on **work and livelihoods**, which drive migrations of both adolescent boys and girls.

Access to **technology** was mentioned in both countries as means for adolescent girls to obtain information about topics deemed sensitive or too taboo, such as sexuality. This suggests that even in remote areas, TV and radio programmes, news and the media more generally, can have an influence on girls.

The AGiC approach is firmly based in the understanding that **socio-cultural** and particularly **gender norms** are a fundamental influence on the life opportunities of adolescent girls. The disadvantage, discrimination and exclusion faced by adolescent girls (around the world) are not a natural corollary of their biology but are socially constructed and given legitimacy by dominant socio-cultural and gender norms in diverse locations. While there are relative differences which must be highlighted and responded to, there are substantive issues which are common. In both countries, significant gaps remain between the protective **policies and legal frameworks** and their implementation on the ground. In Burkina Faso, gender discrimination (while illegal) remains common in health, employment, education, property and family rights, especially in rural areas.¹⁵⁴ In Mali, equal rights are provided for in the constitution, but the law does not provide the same legal status for women and men. It discriminates against women in matters of marriage, divorce and inheritance, where women are legally required to obey their husbands.¹⁵⁵ Traditional customs sometimes undermine the rights of women to own property. There are also no specific laws prohibiting spousal rape or domestic violence or sexual harassment, even though the latter is a common practice in schools.¹⁵⁶

5.5. Environment & Climate Change

Girls who took part in this study live in the Sahelian belt which is highly exposed to climate change impacts including increased temperatures, recurrent droughts and flooding events. However, climate-related issues where not investigated in the survey and in interviews, nor were they raised by participants. Other studies on this topic in Mali and Burkina Faso explore climate change and disaster risks as additional factors, which combined with armed conflicts, together lead to a range of long-term impacts (chronic food insecurity, water scarcity, poverty); all reinforcing the constraining **gender norms** which lead to dropping out of school, early marriage or migrations. Other studies in Northern Mali have shown that male and female traditional roles and activities are evolving faster under recurrent drought and migration: women are increasingly undertaking activities 'normally' assigned to men, but without acquiring automatically the same rights.¹⁵⁷

¹⁵⁴ Dhillon, Jina 2017, 'Supplementary information on Burkina Faso scheduled for review by the CEDAW Committee during its 68th session in October 2017, accessed at https://tbinternet.ohchr.org/Treaties/CEDAW/Shared%20Documents/BFA/INT_CEDAW_NGO_BFA_29096_E.pdf, accessed on 02 December 2019.

¹⁵⁵ Freedom House 2019, 'Freedom in the World – Mali report', accessed at https://freedomhouse.org/report/freedom-world/2019/mali, accessed on 02 December 2019.

¹⁵⁶ Ibid.

¹⁵⁷ Houria Djoudi et Maria Brockhaus. 2011. "Is adaptation to climate change gender neutral? Lessons from communities dependent on livestock and forests in northern Mali". International Forestry Review Vol.13(2): 123-135.

5.6. Potential impact of COVID-19

The COVID-19 related pandemic had reached the Sahel by the time this report was being written. In response to COVID-19, Mali and Burkina Faso adopted containment measures which included limiting gatherings and enforcing movement restrictions but both countries had not implemented a full lockdown. Based on other studies beginning to document the impacts of the global crisis in different contexts, and based on accounts from practitioners in the field in the West African region, the following potential challenges and their impacts on adolescent girls can be raised.^{158,159}

BOX 2: COVID-19: Reports from the field

Further risks of violence: The impact of containment measures risk aggravating the humanitarian situation, with sections of the population unable to generate income a sense of desperation and frustration could grow which has potential to further destabilise the region. There is also a risk that armed groups will take advantage of containment measures.

Increasing protection concerns: Containment measures may further limit humanitarian access to IDPs and refugees in Burkina Faso and Mali. Burkina Faso faces moderate access constraints, but insecurity is limiting access to IDP sites. In Mali, the announced results of the legislative elections (1st week of May) have led to uprisings, further hampering access in the North and centre of the country.

Increase GBV and violence against children: The likelihood that women, girls and boys in abusive relationships will be exposed to violence is dramatically increased, as family members spend more time in close contact and families cope with additional stress and potential economic or job losses. Current conditions increase the risk to women, girls and boys who likely have less contact with family and friends that provide support and protection from violence. Perpetrators of abuse may use restrictions due to COVID-19 to exercise power and control over their partners to further reduce access to services, help and psychosocial support from both formal and informal networks.

Further threats to food security: COVID-19 containment measures are expected to affect livelihood conditions and aggravate the food insecurity and nutrition situation in both countries. Regional and international organisations have warned of the combined effect of the coronavirus pandemic and its response, the lean season and protracted conflicts, on food insecurity. In Burkina Faso, food insecurity is increasing with most affected regions including Sahel, North, centre North, East and Boucle du Mouhoun with closure of markets and rising prices. Markets located far from the major urban centres register the highest levels of price volatility especially during the period of Ramadan. The government has set up measures to control the prices and opened shops to sell at social price.

Young girls engaged in income generating activities have witnessed a drop in their income due to the curfew, movement restrictions put in place by governments. This has led to a loss of purchasing power for women. The disruption of livelihoods and ability to earn a living, including for women (many of whom are informal wage workers), is likely to decrease access to basic needs and services, increase stress on families, with the potential to exacerbate violence and the risks of sexual exploitation for adolescent girls.

Access to education: Both Burkina Faso and Mali announced temporary nationwide school closures. Children out of school are at a higher risk of violence, exploitation and abuse. The economic impact of COVID-19 may lead to families deciding not to send children back to school after re-opening. Girls will be particularly vulnerable to child marriage and overall, are more at risk of dropping out of school.

Access to healthcare: Across the region adolescent girls and boys no longer have access to even minimum sexual and reproductive health (SRH) services; the same is true for other health services such as treatment for malaria and other conditions. On the one hand, the medical staff is busy in the fight against COVID-19 and, on the other hand, patients' fear being infected by COVID-19 following their attendance at health facilities. This includes full suspension or poor access to SRH services for sexually transmitted infections (STIs), HIV, contraception, and safe abortion.

In the more remote contexts targeted in this research, it is not clear how health services have been affected and what it means for adolescent girls who already struggle to find the financial means to access healthcare.

¹⁵⁸ Plan International (2020) West and Central Africa Situational Report. 7th May 2020

¹⁵⁹ ACAPS (2020) 'Burkina Faso, Mali and Niger: Vulnerability to COVID-19 containment measures. Thematic Report – April 2020. Available at: bracedhttps://www.acaps.org/sites/acaps/files/products/files/20200429 acaps vulnerabilities to covid-19 containment measures in burkina faso_mali_and_niger.pdf (Accessed 23 May 2020)

6. CONCLUSIONS – EMERGING RESILIENT PATHWAYS

This study aimed to address five main research questions related to adolescent girls' wellbeing in crisis. While the above analysis has been presented under discrete subheadings, it is clear that, when discussing girls within their socio-ecological context, all issues raised are closely interlinked, as presented in the last section. This strongly suggests that the humanitarian responses should be coordinated and integrated programming is essential. However, coordination is often one of the chief failings in any crisis context and thus it remains a major challenge going forward. In humanitarian responses which involve large numbers of national and international actors, "...coordination and collaboration among them are often limited at best."¹⁶⁰ Complex and protracted emergencies, particularly armed conflicts, compared to natural hazards, present significant challenges, as they tend "to be more politically charged and can generate tensions among the diverse actors in the humanitarian response."¹⁶¹ The current crisis in Mali (as well as Somalia and Syria) is an example where "organisations may prioritise neutrality and impartiality by actively avoiding association with other actors."¹⁶² With this major caveat in mind, we attempt to synthesise below some answers to the research questions.

(1) WHAT ARE THE SOCIO-POLITICAL FACTORS IN THE SAHEL CRISIS THAT MOST IMPACT THE INSECURITY OF ADOLESCENT GIRLS?

The combined effects of increases in terrorist attacks, the rise of non-state armed groups and inter-community conflicts across both Mali and Burkina Faso lead to a range of long-term impacts (chronic food insecurity, water scarcity) in a context already characterised by high levels of poverty, which pose a major threat for the wellbeing of local populations. Both adolescent boys and girls reported having witnessed extreme violence and expressed living in fear of future attacks. This was particularly the case for adolescents who have been displaced and separated from their parents. Girls in Burkina Faso felt highly insecure both at home and outside due primarily to having experienced violent attacks in their village of origin.

"I am really pessimistic about girls' future because there are no authorities and the situation is worse". (GOURMA RHAROUS, MALI, A COMMUNITY VOLUNTEER)

W HOW DO ADOLESCENT GIRLS (IN TWO AGE GROUPS: AGED 10-14 AND 15-19) EXPERIENCE INSECURITY Related to the Crisis in the Sahel? How has their environment (related to the Crisis) impacted their experiences of education, violence and protection, freedom of movement, access to food and other basic needs like SRHR and mental health services?

Conflict has not impacted all regions in the same way, with some villages more affected than others. In Burkina Faso, the displacements of targeted populations have added pressure on already limited natural water resources which has affected both host and displaced communities. In Mali, violent attacks have led to the destruction of water pumps reducing communities' access to safe and clean water. In all affected sites however, the deterioration of water access was an issue particularly emphasised by girls, because fetching water is the primary domestic activity assigned to them. When boys were also assigned to perform this chore, they too raised challenges around accessing water (long queues, not enough water). Displaced adolescents also flagged the commodification of water and other natural resources which used to be free in their village of origin.

Lack of water has rendered daily hygiene practices more difficult and this was mostly flagged by displaced boys. Girls did not raise issues related to the lack of water to manage their menstruation.¹⁶³ The context of insecurity did not seem to change the existence and functioning of healthcare centres significantly in our research sites. However, it should be noted that in both countries, further north, health centres and hospitals

¹⁶⁰ Saavedra, L. and Knox-Clarke P. (2015). Working together in the field for effective humanitarian response. ALNAP Working Paper. London: ALNAP/ ODI <u>https://www.alnap.org/system/files/content/resource/files/main/alnap-30-am-paper-working-together.pdf page 5</u>; IFRC (2015) Ready or not? Third progress report on the implementation of the Guidelines for the domestic facilitation and regulation of international disaster relief and initial recovery assistance <u>https://www.ifrc.org/Global/Photos/Secretariat/201506/IDRL%20Progress%20Report%20(final).pdf</u> page 76.

¹⁶¹ Saavedra and Knox-Clarke (2015) page 22.

¹⁶² Saavedra and Knox-Clarke (2015) page 23.

¹⁶³ This is likely to be because they were shy to bring up menstruation.

have been destroyed or closed and doctors and health workers have fled.¹⁶⁴ Burkina Faso has 121 health centres closed or non-operational due to conflict.¹⁶⁵ The main challenge raised at our research sites was the cost of health services combined with the loss of livelihoods for displaced people which together restricted their options to benefit from adequate care. Women dedicated cash they received towards assistance for emergency health expenditures although healthcare is available (for free) by humanitarian actors for IDPs.

Schools have been one of the primary targets of terrorist attacks in both Mali and Burkina Faso. Girls' accounts stressed the difficulties in accessing a safe and adequate learning environment including the school closures, lack of teachers, overcrowded classes, lack of safety on roads to get to school, and the lack of lighting at home to study (sometimes relying on street lights which increase security risks, sometimes not having any light if curfews are enforced). These challenges were particularly highlighted by displaced adolescents and their parents.

Adolescent girls face further risks of **gender-based violence**, not necessarily linked to the conflict, but because their gender and age placed them in pre-determined roles of obedience. While in Mali, the survey showed small percentages of girls reporting acts of physical and sexual abuse (all perpetrated by family members), the interviews highlighted that violence against girls does exist and is known even by young adolescents. In Burkina Faso, the survey revealed a higher percentage of verbal abuse against girls perpetrated by family and community members. However, feelings of fear and insecurity expressed by girls, particularly in Burkina Faso, was largely due to violent attacks by terrorist groups, not fear of domestic violence.

(13) HOW DO GIRLS AGED BETWEEN 10-19 YEARS DEFINE AND EXPERIENCE THE LIFE STAGE THAT THEY ARE IN — HOW DO THEY FEEL ABOUT THE CHANGES THAT THEY GO THROUGH FROM BIOLOGICAL CHANGES TO BEHAVIOURAL CHANGES AND HOW DO THEY VIEW THE CRISIS IMPACTING THE CHANGES THEY GO THROUGH?

Many accounts from girls, particularly in Mali pointed out that they see themselves as having grown up and experienced many changes since the crisis started. Among the main changes is the fact many of them do not attend school anymore – either because the schools have been destroyed, or because they lack financial means to pay school fees, and/or because they are married, and therefore, have stopped their schooling. Once married, girls become women, regardless of their age.

Menstruation was a distinctly taboo topic, with many girls not feeling comfortable answering any questions around this subject. For those who did speak about it, periods are often associated with feelings of shame and impurity, expressed by others or by girls themselves. Sexuality was even less discussed but the minority of older adolescents who did speak about it seemed comfortable to share their own sexual experience and seemed knowledgeable of some of the contraceptive options they could access. Some accounts also suggested that girls in Burkina Faso become sexually active before their marriage, which brings a nuanced picture over the agency of older adolescent girls. **Community health centres**, as well as access to **mobile phones** in some sites, played a determinant role in providing information to girls about their SRH needs.

There was evidence of critical awareness by a minority of girls that they are discriminated against on account of gender along with a strong adherence to many of the beliefs and values, and social and gender norms that influenced them. In many of the quantitative results (e.g. who decides about girls' safety in the community or home; decision-making in general), it is clear that girls are often at the bottom of hierarchies which underlines that they lack a voice and opportunities to participate in decisions which affect their lives.

UB HOW DO ADOLESCENT GIRLS AND BOYS DESCRIBE HOW POSITIVE CHANGE NEEDS TO HAPPEN IN THEIR CONTEXT AND WHAT POSITIVE ENABLERS OF CHANGE WOULD ALLOW ADOLESCENT GIRLS TO FEEL SECURE?

Education and access to school were overwhelmingly considered by girls as the main enablers of change for their lives. Education was not so much an end in itself, but a means for them to achieve their ambitions. The majority of girls aspired to occupy positions of power and positions where they could care for others and even protect them (e.g. to become a doctor, nurse, teacher, leader). These aspirations remained even for adolescents who dropped out of school, which suggests that girls do not necessarily agree with the social norm that they should stop going to school when they marry. It seems that for them, being married can be compatible with getting an education but that decision remains in the hand of their fathers and their

¹⁶⁴ ACAPS (2020) 'Burkina Faso, Mali and Niger: Vulnerability to COVID-19 containment measures. Thematic Report – April 2020. Available at: https://www.acaps.org/sites/acaps/files/products/files/20200429 acaps vulnerabilities to covid-19 containment measures in burkina faso mali_and_niger.pdf (Accessed 23 May 2020)

¹⁶⁵ Ibid.

husbands. Some girls suggested that raising the awareness of parents would definitely help girls pursue their education. This pathway for change was confirmed by girls whose parents had received an education (often those living in more urbanised areas) and who were more encouraging. However, the current insecurity situation further hinders efforts to support access to schooling.

(D) TAKING THE SAHELIAN ENVIRONMENT INTO ACCOUNT, WHAT ARE THE PROPOSED SOLUTIONS THAT NATIONAL, COMMUNITY, INTERNATIONAL AND HUMANITARIAN ACTORS SEE AS REQUIRED TO ADDRESS ISSUES OF THE INSECURITY OF ADOLESCENT GIRLS BASED ON THEIR KNOWLEDGE AND UNDERSTANDING OF THE CRISIS? AND DOES THIS INTERACT WITH WHAT THE GIRLS' RECOMMENDATIONS ARE?

The majority of respondents – adolescent girls and boys, parents, NGO workers and community leaders, all stressed that the lack of security is the first challenge to tackle. Girls in Mali expressed a strong desire to see security forces come back so that they could go back to school. For those already married or those who never went to school in the first place, bringing peace back would allow markets to function again and more mobility between regions, which would help secure their livelihoods. Adolescent boys also considered that insecurity has generated all the other problems including the closure of schools which leads to young people being unemployed.

Solutions advanced by all categories of respondents converge on the same objective: **building peace**. And this, according to respondents, could be achieved through different but complementary ways: reinforcing the presence of the state through strengthening local administrations and local police; relying on the army or self-defence militias; building social cohesion between ethnic groups; and providing more secure livelihoods.

"if security is maintained, they will not be any jihadists. NGOs and doctors will be free to sensitise girls and this will enable girls to stay healthy".

(ADOLESCENT GIRL, 17, IN GOURMA RHAROUS, MALI)

"I hope the state returns, with basic services; peace and social cohesion, so that they can change girls' future positively. There needs first to be peace and stability in order to better provide services like school, health and protection for girls".

(REPRESENTATIVE OF A LOCAL AUTHORITY, MALI)

Although we have focused on the harsh realities of insecurity for adolescent girls in protracted crises of the Sahel, the context for our analyses and recommendations also recognises the need to understand present and future resilience at the individual, family and community scales. We identify examples of the presence or lack of resilience capacities in three forms: absorptive capacity, adaptive capacity and transformative capacity (as outlined in the methodology section). Earlier research set out the characteristics of a disaster-resilient community,¹⁶⁶ strongly emphasising the role of participation but it was not aimed at the situation of adolescent girls. We aim here to begin identifying some of the complexities of constraints and enabling mechanisms as seen through the eyes of the girls themselves. Selected characteristics of a resilient system are presented in Table 8 to begin outlining what this might mean in a protracted crisis context rather than that of the more usual acute, sudden-onset natural disaster.

166 Twigg, John 2009 Characteristics of a Disaster-Resilient Community, A GUIDANCE NOTE, Version 2.

| Characteristics | AGiC context |
|---|---|
| A high level of diversity in groups performing different functions in an ecosystem; in the availability of economic opportunities; in the voices included in a resilience-building policy process; in partnerships within a community; in the natural resources on which communities may rely; and in planning, response and recovery activities. | Decision-making processes at household and community levels are highly unequal, dominated by one gender above the other. The inclusion of voices of women, and of adolescent girls should be seen positively as an aid to increasing resilience for all. |
| Effective governance and institutions which may enhance community cohesion. These should be decentralised, flexible and in touch with local realities; should facilitate system wide learning; and perform other specialised functions. | In the Sahel crisis context, this is a characteristic which was absent (in Mali) or severely affected (in Burkina Faso). It is a key enabler (or disabler) of change, especially for adolescent girls whose personal power is limited. Specialised functions which might serve the needs of adolescent girls may well be a casualty of shrinking governance and institutional effectiveness in a protracted crisis context. |
| There is community involvement and the appropriation of local knowledge in any resilience- building projects; communities enjoy ownership of resources; communities have a voice in relevant policy processes. | Resilience is closely associated with community functions, coherence and effectiveness. Community health centres played a pivotal role of offering support and information particularly regarding girls' SRH needs. These may be impacted by protracted crisis and inter- and intra-community conflict. Local women or mother's associations played a determinant role in voicing demands for addressing girls' and women's needs (as opposed to outsider organisations claiming rights on behalf of girls, which could be seen as an imposition). |
| A high degree of social and economic equity exists in systems; resilience programmes consider issues of justice and equity when distributing risks within communities. | Justice and equity are at the heart of the AGiC programme. For adolescent girls to realise their rights and enjoy equal opportunities, their access to education must be ensured even after they reach puberty. |
| The importance of social values and structures is acknowledged because association between individuals can have a positive impact on cooperation in a community which may lead to more equal access to resources and greater resilience. | If social values and norms are oppressive or discriminatory towards adolescent girls, then their resilience will be compromised. |
| Continual and effective learning is important. This may take the form of iterative policy/institutional processes, organisational learning, reflective practice, adaptive management and may merge with the concept of adaptive capacity. | This characteristic recognises that policies and the institutions which create or implement them are not static but dynamic and open to change. Often, community leaders are seen, and act, as guarantors of social norms. The lack of reflective learning on their behalf is a disabler of change. |

167 This table includes selected characteristics derived from Bahadur et al. 2010 and relevant to the research context.

6.1. The Adolescent Girls in Crisis Socio-Ecological Framework

We have now combined the key issues, the socio-ecological context and the resilient pathways to create the Adolescent Girls in Crisis Socio-Ecological Framework (see Figure 19).



Figure 19: The Adolescent Girls in Crisis Socio-Ecological Framework

(Enlarged version in Appendix 3)

There are many possible pathways to resilience but the framework identifies the most salient to emerge from the research. The **empowerment** of girls is often recommended and sometimes claimed but it is a complex endeavour to identify the most effective way to achieve it. While education is often highlighted for school-aged girls, the adolescent girls in the study often raised issues and aspirations around **work and livelihood**. How these each feature in adolescent girls' lives and how their costs and benefits can be balanced and ensured, and by whom, in crisis contexts is a topic that should be emphasised more in development initiatives. In pursuing this one issue, it becomes clear that all identified issues are closely implicated in its enabling (or disabling) environment. Without the satisfaction of **basic needs**, including **security**, freedom from **violence**, it is not possible to achieve the goals that girls have identified for themselves. Maintaining **health** and receiving quality **education** are prerequisites for enabling the attainment of a **livelihood** which puts food on the table or a rewarding **career**. Yet, without the opportunity to **participate** in decision making, to have one's **voice** heard and one's **presence** acknowledged by right, many of the above are at risk. And so, we come back to the **empowerment of adolescent girls** in ways that ensures their security and gives them respect. This is not just a reward for the girls themselves but brings benefits to the whole community.

'Above all my main wish is that this security crisis comes to an end very soon and in the future I want to become a woman entrepreneur so I can help my community.'

(GIRL IN 15-19 FOCUS GROUP, BANDIAGARA, MALI)

7. RECOMMENDATIONS

This study was commissioned by Plan International and is intended to be used by the Country Offices in Burkina Faso and Mali as well as the regional team in West and Central Africa aligned with their Sahel strategy. The findings can also inform the Plan Global Hub advocacy and communications teams, the Disaster Risk Management policy team, and National Offices for advocacy and programming purposes to highlight and driving forward the issues facing adolescent girls in the Sahel and raise funds to action the solutions identified in the research.

Insecurity remains the main challenge: The research clearly demonstrates that interventions will not lead to sustained changes in adolescent girls' lives if the security context remains so volatile. Therefore:

- All parties must immediately ensure adherence to international humanitarian law and in particular governments of Sahel must honor commitments to UN Security Council resolutions, especially Resolution 1325 on Women, Peace and Security and Resolution 2467 on Sexual Violence in Conflict.
- The international community urgently needs to focus efforts on peacebuilding in the Sahel region. This should be in conjunction with state-building that fosters democracy, human rights, good governance and rule of law. Once the over-arching legal and policy frameworks are in place, governments and donors need to focus on ensuring effective service provision and addressing immediate needs on communities, families and children especially adolescent girls.
- Governments in the Sahel, when undertaking reforms to the security sector need to address more than just militarised security. Engagement in the Sahel must look at human security in a holistic sense.

Target the delivery of basic services and the primary needs of adolescent girls:

- Governments and civil society need to support the sustainable reconstruction of affected areas, given that food and water resources are often under strain due to the arrival of displaced populations in host communities. In addition, supporting the livelihoods of host communities is crucial as most IDPs depend greatly on community support systems.
- Government and the humanitarian sector must recognise the importance of high- quality mental health and psychosocial support services to help girls and boys cope. Measures to create supportive environments and reduce levels of distress are crucial to prevent the children's damaging impacts of adverse events from developing into more severe and chronic mental health and psychosocial conditions.
- The international humanitarian community needs to support the promotion of access to health services, as it is limited in many areas of both countries, and child-friendly SRH services for girls are inadequate.
- INGOs and NGOs should work with health centres, where they exist, or with local authorities to establish health services. Health centres are a focal point for both practical medical and social support as well as information about SRH in particular. The humanitarian community needs to ensure their continuity and, if necessary, supply additional funding.
- Governments must take concrete measures to prevent and prepare for attacks on educational facilities, students, and teachers. This includes sustained commitment to the domestication and implementation of the Safe Schools Declaration. It is essential that these efforts recognise and address the gender-related dimensions of attacks on education and ensure that girls are able to participate in decision-making concerning measures to prevent attacks on schools.
- Donors must prioritise funding for girls' education in the Sahel. This includes targeting funding at measures to address gender related barriers to education. Investment in gender responsive education in emergencies remains critical in areas where schools remain closed or unusable. Following school closures, it is important that interventions related to education in emergencies link to and provide a bridge into longer term education, particularly for girls, who face gender related barriers to remaining in education.
- Governments and their partners must ensure Education Sector Plans are gender responsive, in line with commitments made through the <u>G7 Gender at the Center Initiative</u>. Throughout the education planning cycle governments and partners must integrate gender considerations into Joint Sector Reviews and other education sector analysis and planning processes. The aim should be to address the systemic barriers that prevent girls, particularly those who are displaced and living in extreme poverty, from accessing and completing 12 years of quality education.

Harmful social and gender norms continue to stifle adolescent girls' freedoms. While adolescent girls have a strong sense of community and desire to uphold the belief and values of their communities, they are also acutely aware that they are discriminated against on account of gender:

- The donor community must ensure that longer term investment is focused on the Sahel region especially long-term efforts to shift gender norms in relation to critical issues affecting adolescent girls, including GBV and CEFM, and that must complement efforts and associated funding streams to address immediate humanitarian needs.
- To break the cycle of CEFM, NGOs and CSOs need to strengthen awareness raising on the links between CEFM, adolescent sexuality and early pregnancy and how harmful social norms perpetuate these.
- Community mobilisation needs to be embedded in all approaches to address harmful social norms and this should include engaging boys and men in the process and supporting female intergenerational dialogue.
- Local communities should also be capacitated to encourage families and community leaders to allow girls to attend school and access vocational training in order to complete their studies and pursue incomegenerating activities.
- CSOs and INGOs must ensure any activities aimed at addressing inequalities faced by adolescent girls targets, supports and includes both boys and girls, to avoid potential backlash from parents and adolescent boys.¹⁶⁸
- Those in positions of authority at all levels must listen to and work with adolescent girls to exercise their agency, and make their voices heard.

Understanding the vulnerability of countries and communities in the Sahel to shocks and stresses is critical for an appropriate response to the humanitarian crisis:

- Governments must recognise the multiple risks girls face and take a holistic view of these to support in strengthening their resilience.
- Government and CSOs must recognise and resource resilience strengthening at community, local government, and national level to ensure service continuity and reduce negative coping strategies that predominantly affect girls. Continued access to quality basic services despite shocks and stresses can help support girls' resilience and wellbeing. Investment must be made in resilience strategies at all levels such as systems strengthening, risk knowledge and education, early warning systems, economic and social safety nets, and protection of the natural environment, among others.
- Resilience must be recognised as a critical strategy in linking humanitarian and development work to ensure shocks and stresses do not erode development gains, trap people in cycles of poverty and reverse progress on gender equality.

¹⁶⁸ Including men and women who pose as 'blockers'

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APPENDIX 2: SELECTED QUOTES

| MALI | BURKINA FASO |
|---|---|
| Boys 10-14 | |
| Life has changed; Lack of education | Life has changed because we have moved around. |
| People can't go to other places | It is the village that has changed. It's no longer good. |
| Lack of teachers; Our security | The school is closed in our village that's why we came here. |
| Boys 15-19 | |
| The war has definitely changed our lives | The change that is there right now, because they are killing people right now. |
| It's the community conflict that has changed our lives | Before we were not many, but now there are many of us in the village. Strangers have also joined us. There are many of us now, there is not enough water in our wells. We can't find much, much water anymore. |
| We can't move around much anymore | We the young people there are many of us, but there is no work. |
| We're afraid of going to school because of security | Life has changed because the terrorists came to hunt us and the teachers fled to go somewhere else. |
| We can no longer go where we want to like we used to, often we're afraid to go to school because of the insecurity, there's a lack of food, and poverty | When we were in class, we were afraid that the jihadists would come and attack us. That's why we came here. |
| We no longer have our leisure places, like the football pitch. For education, we have a lack of teachers | Life has changed because they (the terrorists) came to chase us out of our homes and we came here to study. |
| | In Toéni we heard a lot of noise, but here in Tougan we are free. Because there aren't too many noises, like the sound of guns. |
| Girls 10-14 | |
| Too many deaths in some parts of Bankass | The school is closed in our village that's why we came here. |
| It's the crisis that has changed lives | Here we don't earn good money to eat well |

| MALI | BURKINA FASO |
|--|---|
| There is no longer safety | Life has changed because we can't play anymore |
| There is no health | It's the crisis that has changed lives |
| The schools have closed, shortage of teachers, poverty, famine; people have fled to another community | Here we don't earn food and then there's a water problem |
| Community conflicts | [The crisis] affected me, because the crisis has reached Gombélé. They say they're going to burn down the schools. So, they brought me to Bomborokuy |
| Girls 15-19 | |
| Everything has changed. The war has really changed our lives | I'm sad. Because I was chased from my home by force by the terrorists |
| The peace and quiet is gone; We are scared now | In the village our parents, my parents and my mother are next door but here they are not next door, that's why I'm not happy. |
| People can't go to the fields as they should and they can't play | In the village there we were happy; here we are not happy |
| Lack of teachers | The schools have closed, shortage of teachers, poverty, famine; people have fled to another community |
| We can't go where we want anymore | It's too dangerous, you can't go to the hospital if you don't have transportation |
| We have to stay here because of security; places aren't too safe | We are going to go out and then we are going to tell them about our difficulties so that they can help us. |
| Lack of transport to go to the health centre. We no longer have places for leisure or the football pitch | |
| Lack of security forces | |
| Parents/ Guardians-Males | |
| Yes, life has changed | From the time of our parents until now, we have never seen a village get up and come and sit down here. But five villages have stood up and come to sit here in Bomborokuy |
| What I can say is that before, we were secure but now it's the self-defence forces that provide our security | The water problem! And then the hospital's medicines, that's the biggest difficulty. And then the problem with the latrines |

| MALI | BURKINA FASO |
|---|--|
| Decrease in activities | A lot of children are here defecating on the tracks. Which they've never seen before. |
| Lack of teachers, medicines, food, security | All the schools are full. So that's also a difficulty for us. |
| The road is poor | From the time of our parents until now, we have never seen a village get up and come and sit down here. But five villages have stood up and come to sit here in Bomborokuy. |
| The children live in fear and trauma; it's the same for girls and boys | |
| Parents/ Guardians-Females | |
| Yes, life has changed; it's the insecurity that has changed our lives | Life has changed a lot. Trade has slowed down and there are disputes in our area. People are displaced as a result and it causes poverty too (Female Parent/ Guardian, Burkina) |
| Lack of food, teachers, medicine | This isn't an easy life, there's no health care or anything. Our parents never witnessed the things that are happening now (Female Parent/ Guardian, Burkina) |
| No fair | There's been a change here because some people have left their own village to come here |
| The teachers are afraid to come and teach the children, because they come from another town and the road is bad | Well, trade has slowed down, there's the war, there are lots of things, it's become a hard place to live in these days. Lots of strangers have arrived. Trade has really slowed down, which is why our children have turned to petty crime |

APPENDIX 3: Adolescent Girls in Crisis Socio-Economic Framework





Photo de couverture: Rokia, âgée de 14 ans, fait la vaisselle chez elle dans la région de Koulikoro, au Mali. ©Plan International Mise en page: Out of the Blue Creative Communication Solutions – www.outoftheblue.co.za

Nous n'avons pas pris de photos au cours de ces travaux de recherche.

À propos de Plan International

Plan International s'efforce de promouvoir les droits des enfants et l'égalité des filles partout dans le monde. Nous reconnaissons le pouvoir et le potentiel de chaque enfant. La pauvreté, la violence, l'exclusion et la discrimination entravent cependant ceux-ci. Et les filles sont les plus touchées. Plan International travaille aux côtés des enfants, des jeunes, des militants et des partenaires pour lutter contre les causes profondes de la discrimination à laquelle sont confrontés les filles et les enfants vulnérables. Nous soutenons les droits des enfants, de leur naissance jusqu'à l'âge adulte, et leur permettons de se préparer aux crises et à l'adversité et d'y faire face. Nous suscitons des changements dans la pratique et en politique, tant aux niveaux mondial et national que local en mettant à profit notre assise, notre expérience et nos connaissances. Depuis plus de 80 ans, l'organisation forge des partenariats solides en faveur des enfants ; elle est aujourd'hui présente dans plus de 75 pays.

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