IMPOSSIBLE CHOICES, UNHEARD VOICES

How Hunger and Conflict Repress Girls’ Rights in the Sahel

A Synthesis Report
CONTENTS

REPORT SUMMARY 3
INTRODUCTION 5
SETTING THE SCENE 7
   Regional overview 7
   About our research 9
KEY FINDINGS 10
   Impacts on the right to protection 10
   Impacts on the right to health 12
   Impacts on the right to education 15
   Impacts on the right to participation 17
KEY CONCLUSIONS 19
RECOMMENDATIONS 20
ENDNOTES 22

Front cover photo © Plan International / Issou Emmanuel Bationo.
“I’m happy to be working in the garden. I learned how to water and how to plant,” adolescent girl, Burkina Faso. A food security project incorporating school gardening clubs, run by Plan International, means schools can offer free meals to pupils and is incentivising families to send their children to school, knowing they will be fed.
REPORT SUMMARY

Under international law, all girls have an equal right with boys to develop to their full potential. The realisation of this right hinges on the realisation in turn of a set of interdependent rights, including their rights to protection, health, education, and participation in decisions that affect them. For girls to thrive and flourish, the rights have to be realised individually as well as holistically with one another.

Across the central Sahel, the right of girls to develop, equally or at all, is under profound threat.

A devastating array of factors combine with each other to impact on girls, as children in general and as adolescent females in particular, in ways that aggravate their vulnerability to, and risk of, the violation of any or all of their interdependent rights.

- Conflict drives food insecurity (through reduced crop production, economic disruption, and population displacement) and worsens climate impacts on the environment (for example, displacement puts strain on host communities’ scarce water resources).
- Climate shocks (drought, sporadic rainfall) impact on agricultural production and agriculture-based livelihoods, driving food insecurity as well as contributing to political instability.
- Food insecurity adds to the political instability that fuels conflict, while exacerbating climate impacts (for instance, through continued over-grazing by livestock).
- In the face of a host of crisis stressors, girls and their families are often forced to adopt coping strategies that may be extremely harmful (such as school dropout and being married off early).
- Negative coping strategies arise from, and are compounded by, pre-existing poverty, gender norms (for example, around girls’ education), and institutional or infrastructural fragilities (for instance, long distances to health centres to access contraception and avoid early pregnancy).

As a consequence of these factors, girls face major risks across four core rights-domains:

- **The right to protection**: Crisis-affected girls are at risk of all forms of violence against children, ranging from witnessing atrocities to rape, homicide, sexual exploitation and more. Few spaces are safe for them in the daily walk of life, and formal protective institutions are weak or absent.
- **The right to health**: Gender inequality impacts on how food is shared within families, putting food-insecure girls at increased risk of malnutrition and, if they are pregnant, of dying while giving birth. The health risks of early pregnancy are pronounced because girls are at an increased risk of sexual violence and marriage, and thus at an increased risk of unprotected sex. Drought- and conflict-related water scarcity presents challenges for menstrual health and hygiene.
● **The right to education:** Long-standing educational disparities, gender norms and practices, economic hardships, acute food insecurity, and armed attacks targeting schools, teachers and pupils, have had catastrophic effects on girls’ education.

● **The right to participation:** Traditionally, girls in the region have had very little say in decisions about work, education and marriage. Despite some indications to the contrary, this pattern appears not only to remain unchanged but to have been reinforced under the impact of crisis. Restrictions on children’s movement – and hence on their participation opportunities outside the home – were widely reported, but overwhelmingly affected girls rather than boys.

These findings are discussed in the sub-sections below, where we look more closely at the impacts of the crisis on each of the rights domains.
INTRODUCTION

Some 345 million people around the world are acutely food insecure or at high risk, an increase of 200 million since early 2020 and the outbreak of the COVID-19 pandemic.

This is according to the World Food Programme (WFP), which reported in 2023 that, of these numbers, 43.3 million across 51 countries are at serious risk of famine. Of them, in turn, almost 850,000 people face catastrophic conditions (that is, starvation) in seven countries, including Mali and Burkina Faso – two of the three countries which, along with Niger, constitute the central Sahel.

The world, said the WFP, is in the midst of the largest global food crisis in recent history.

The drivers of the crisis are diverse, and include the economic shocks of COVID-19 and war in Ukraine. Also key among them, however, are regional conflicts, poverty, and the impacts of climate change on natural resources, agriculture, livelihoods, and the availability and affordability of food – impacts which are felt the most keenly by the poorest, the most marginalised, and those living in fragile settings.

The complexities of these dynamics converge in the Sahel, a volatile region adjacent to the Sahara and made up of a belt of countries stretching from the coastline of West Africa to the Horn of Africa.

Here, a combination of protracted conflict, climate change, acute food insecurity, and deep poverty is expected, among other things, to heighten levels of forced displacement in 2023. In 2022, more than 2.9 million refugees and internally placed people (IDPs) were recorded already across the central Sahel, while in 2021, 78% of refugees and asylum seekers in the region at large were women and children.

As these statistics indicate, major humanitarian emergencies affect everyone, yet women and children, especially the poorest, bear disproportionate risks to their survival, well-being and human rights. Even so, among children themselves, girls – specifically adolescent girls – face dire challenges that apply to them in particular due to their age, gender and marginalised place in society.

These are precisely the challenges that we highlight in this report, which synthesises key findings and conclusions from recent and ongoing research conducted by Plan International in the Sahel and greater sub-Saharan Africa.

In the report, the spotlight is on girls’ rights in the central Sahel, with the focus primarily on Mali and Burkina Faso. These conflict-affected and acutely food-insecure countries are among the poorest in the world; moreover, they are experiencing record-level droughts in a region where temperatures are rising 1.5 times faster than the global average.
In this explosive mix of factors, vicious choices are forced on girls – and choices forced by circumstances and/or by others are not choices at all.

On the one hand, girls are in situations where, to avoid violence and survive, their rights to health, education, and more are sacrificed. On the other, to avoid starvation and eat, ever-scarcer resources are directed more and more to getting food, with other needs having to become less and less of a priority – until, at an extreme point, the need to eat is all that matters. In the process, girls are in danger of losing what is critical if they are to escape this trap: their agency to act in their best interests.

No real choices, no real agency, no real lives. The challenge before the world community is to turn this around by empowering the girls of the Sahel – and all other girls in the grip of the global food crisis – with something different and tailored to support their needs: real choices, real agency, and real lives.
SETTING THE SCENE

REGIONAL OVERVIEW

The crisis in the central as well as wider Sahel is long-standing, complex in its drivers – and worsening in its effects. It is costing thousands of lives and having a major impact on people’s access to basic necessities, including education, health services, shelter, food and water.\(^8\)

The crisis is generally understood to have emerged in 2011, when – amid already brittle conditions – an outbreak of violence in Northern Mali began to spread across the region.\(^9\) In the mid-2010s, the situation deteriorated further, rising to a peak in 2018 and 2019 with an upsurge of armed conflict.\(^10\)

Today, the crisis continues to be fuelled by, among other things, intercommunal tensions, population displacement, rising global food prices, acute food insecurity, fragile state institutions, and climate-change impacts on a desertifying landscape vulnerable to extreme weather events.

Various statistics give an indication of the scale of the crisis.

CONFLICT

- The 2023 ACLED Conflict Severity Index classifies the conflict in Mali as **extremely severe**, in Burkina Faso as **highly severe**, and in Niger as **moderately severe**.\(^11\) The basis of the Index is that the more complex a conflict, the more severe it is. A complex conflict has high fatalities, violence targeting civilians, wide territorial diffusion, and multiple non-state armed groups.\(^12\)

- According to ACLED data, violence in the central Sahel claimed 39,926 lives between 2011 and April 2023.\(^13\) Of these documented fatalities, 26,962 (68%) have occurred since 2020.\(^14\)

- Between 2018 and April 2023, the region witnessed 11,896 ACLED-recorded political violence events (battles, explosions/remote violence, and violence against civilians).\(^15\) (See Table 1).

- The same period saw more than 2,500 incidents of looting or property destruction, including the seizure of livestock kept for food or sale (Mali: 685; Niger: 638; Burkina Faso: 1,243).\(^16\)

- In early 2023, there were about 2.78 million IDPs in the region: about 371,000 in Niger (April 2023);\(^17\) 412,387 in Mali (December 2022);\(^18\) and 1,999,127 in Burkina Faso (February 2023).\(^19\)

- In Burkina Faso, the number of IDPs in February 2023 was 260% more than it was in February 2020 (765,517).\(^20\) In 2023, 25% (490,233) were girls up to the age of 14 years. (See Table 2).

- In April 2023, the region had 405,223 refugees and asylum seekers (Burkina Faso: 36,274; Mali: 64,864; Niger: 304,085).\(^21\)
### Table 1: Political violence events in the central Sahel (2018–April 2023)

<table>
<thead>
<tr>
<th>Country</th>
<th>2018</th>
<th>2019</th>
<th>2020</th>
<th>2021</th>
<th>2022</th>
<th>To April 2023</th>
<th>Subtotal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Burkina Faso</td>
<td>224</td>
<td>619</td>
<td>656</td>
<td>1,324</td>
<td>1,641</td>
<td>578</td>
<td>5,042</td>
</tr>
<tr>
<td>Mali</td>
<td>578</td>
<td>588</td>
<td>997</td>
<td>1,013</td>
<td>1,342</td>
<td>491</td>
<td>5,009</td>
</tr>
<tr>
<td>Niger</td>
<td>110</td>
<td>265</td>
<td>421</td>
<td>325</td>
<td>565</td>
<td>159</td>
<td>1,845</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>912</strong></td>
<td><strong>1,472</strong></td>
<td><strong>2,074</strong></td>
<td><strong>2,662</strong></td>
<td><strong>3,548</strong></td>
<td><strong>1,228</strong></td>
<td><strong>11,896</strong></td>
</tr>
</tbody>
</table>

### Table 2: Number of internally displaced persons in Burkina Faso (February 2020 & February 2023)

<table>
<thead>
<tr>
<th>Date</th>
<th>0-14 years</th>
<th>15-64 years</th>
<th>65+ years</th>
<th>Totals</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Female</td>
<td>Male</td>
<td>Female</td>
<td>Male</td>
</tr>
<tr>
<td>February 2020</td>
<td>179,201</td>
<td>189,992</td>
<td>200,388</td>
<td>180,205</td>
</tr>
<tr>
<td>February 2023</td>
<td>490,233</td>
<td>506,699</td>
<td>536,554</td>
<td>413,681</td>
</tr>
</tbody>
</table>

### FOOD INSECURITY

- The annual Global Report on Food Crises (GRFC) recognises 5 phases of acute food insecurity: 1 (none/minimal); 2 (stressed); 3 (crisis); 4 (emergency); and 5 (catastrophe/famine).

- The 2023 GRFC shows that in 2022 some **9.71 million** people were in Phase 3 (crisis) or above. (See Table 3). The highest proportions were in Burkina Faso (3.46 million). The GRFC notes that this was “well above the 2.87 million people during the same period in 2021”.

- In October–December 2022, about **1,800 people** in Burkina Faso entered Phase 5.

### Table 3: Acute food insecurity in the central Sahel (2022)

<table>
<thead>
<tr>
<th>Country</th>
<th>Nos. (millions)</th>
<th>% population</th>
<th>Nos. (millions)</th>
<th>% population</th>
<th>Nos. (millions)</th>
<th>% population</th>
<th>Totals (millions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Niger</td>
<td>13.5</td>
<td>54%</td>
<td>15.4</td>
<td>71%</td>
<td>12.5</td>
<td>59%</td>
<td>41.40</td>
</tr>
<tr>
<td>Mali</td>
<td>7.31</td>
<td>29%</td>
<td>4.41</td>
<td>20%</td>
<td>5.33</td>
<td>25%</td>
<td>17.05</td>
</tr>
<tr>
<td>Burkina Faso</td>
<td>3.98</td>
<td>16%</td>
<td>1.68</td>
<td>8%</td>
<td>2.83</td>
<td>13%</td>
<td>8.49</td>
</tr>
<tr>
<td>Phase 4</td>
<td>0.43</td>
<td>2%</td>
<td>0.16</td>
<td>1%</td>
<td>0.63</td>
<td>3%</td>
<td>1.22</td>
</tr>
</tbody>
</table>
CLIMATE CHANGE

- Globally, the Sahel is one of three hotspots highly susceptible to extreme ecological threats.\(^2^9\)
- Niger and Mail are in the top 10 of countries in the world most vulnerable to climate change.\(^3^0\)
- In 2021, Mali experienced its most severe lack of rain in five years.\(^3^1\) The country that year ‘lost 90,000 hectares of yield … due to drought, impacting the livelihood of more than 3 million Malians. This resulted in a 10.5% decrease in cereal production across the country.’\(^3^2\)
- In Burkina Faso, ‘80-90% of the population is engaged in small-scale agriculture, on which they rely heavily for their livelihoods and food security’.\(^3^3\)

ABOUT OUR RESEARCH

Two recent research publications by Plan International engage with the central Sahel.

- **Adolescent Girls in Crisis: Voices from the Sahel** (2020),\(^3^4\) along with its underlying technical report,\(^3^5\) explores how girls in two age brackets of lower and upper adolescence (10–14 and 15–19 years old, respectively) understand the unique impact that the crisis has had on them.\(^3^6\)
- **Beyond Hunger: The Gendered Impacts of the Global Hunger Crisis** (2023)\(^3^7\) is based on Rapid Gender Analyses (RGAs) conducted in eight countries identified\(^3^8\) as ‘hunger hotspots’: Kenya, Ethiopia, Somalia, South Sudan, and Haiti, as well as Mali, Burkina Faso and Niger.\(^3^9\)
- **Limitations**: Security risks affected data collection. Deficits in the regional and local systematic collection of disaggregated data restricted the availability and/or utility of secondary data.\(^4^0\) Our project in 2020 preceded the widespread outbreak of COVID-19,\(^4^1\) while the RGAs for our report in 2023 by nature preclude rigorous isolation of the impacts of the pandemic per se.
- **Ethical considerations**: In all cases, data were collected in accordance with ethical principles.\(^4^2\)

This report draws on findings from these research undertakings – as well as on our work in progress on climate change and girls’ rights in the Sahel – in order to foreground the combined impact that conflict, climate change, and food insecurity have, in their social, cultural and economic context, on the rights of girls to develop to their full potential.
KEY FINDINGS

IMPACTS ON THE RIGHT TO PROTECTION

Children everywhere have the right to protection from violence. For many of those in the central Sahel, however, exposure to heightened levels of violence in all legally recognised forms has become a fact of life – in the home, community, and beyond – under the impact of a complex, protracted crisis.

In the case of one of those forms, physical violence due to armed conflict, boys as well as girls, along with parents, indicated that children live in fear of harm and feel traumatised because they have seen it inflicted on others. A related, if less-reported, concern was enlistment into non-state armed groups as combatants or service providers, whether through abduction or as a way to deal with poverty.

For all our child respondents, civil insecurity was a primary challenge in life, and one which was not mitigated in its harmful mental effects by some, or any, availability of psychosocial support.

Our research finds, though, that while boys and girls both face protection risks in the Sahel crisis, girls are burdened with further risks that apply to them in particular. Notably, there are strong indications that gender-based violence (GBV) has risen in its incidence and likelihood of occurring.

- In Burkina Faso, a majority of boys and men in focus groups said that physical violence against girls had increased since the onset of the crisis.
- While data is scarce, notable proportions of respondents observed an increase in rape, intimate partner violence (IPV), female genital mutilation/cutting, sexual harassment, and child, early and forced marriage.

In our analysis, these and other findings may be understood as follows:

- Girls have long been vulnerable to GBV in a poor region where social norms entrench gender inequality and institutions are fragile. For example, law enforcement and judiciaries have been weak, with most rape cases going unreported and being handled informally.
- However, as the newer stressors of conflict, hunger and drought interact with, and aggravate, these older factors, the process generates a multitude of ripple-effect protection risks for girls across a range of contexts – thus escalating their overall risk of GBV.
- The result for crisis-affected girls is that almost all spaces become unsafe – homes, schools, community and inter-community areas, and migratory situations (IDP camps, distant towns).
As our findings suggest, the combination of crisis stressors and pre-existing poverty and gender norms has been felt at the household level, where stress is rising. Families contend with the threat of raids by armed groups; they also face food insecurity and related issues of poverty, such as unemployment and substance abuse by men frustrated by inability to fulfill their patriarchal roles as breadwinners.

- In Burkina Faso, nearly half of all respondents felt unsafe in the home and 11% reported having been hit in the past month by their father or brother.
- In Mali and Burkina Faso, increases were noted in IPV against girls in marriages or unions, including increases in beatings and deprivation of food. In Mali, most respondents reported an increase in IPV linked to difficulties in accessing food.
- Beyond the home, movement within and between communities may be dangerous.

- Girls in Gourma-Rharous, Mali, said that, due to the presence of combatants, they were afraid to leave their homes to buy and sell food, collect firewood, or visit parents in nearby villages. Similarly, in Mali and Burkina Faso, 45% and 34% of girls, respectively, said that they work to earn money but that the crisis compromises their ability to trade and earn.
- Reports about the hazards in particular of collecting firewood, or water, were common in our research throughout the Sahel, and have also been documented elsewhere.
- These reports illustrate how the crisis interacts with pre-existing factors and makes life more dangerous than ever before.
- Girls have always been at risk of physical and sexual violence outside the home when carrying out their gender-assigned water- and firewood-collection duties. Due to conflict, destruction of water pumps, drought, and ecological deterioration, they now often have to walk much further to collect water or forage for wood. As a result, they are at heightened risk of violence by men in general or by armed groups that abuse, rape and/or kill civilians, including girls.

Girls are put in a position where one need has to be traded off against another. For example, to survive, a girl stays (relatively) safe at home rather than running the risk of being harmed when fetching water or going to the market (or school or a clinic) – but then she faces the risk of losing out on sustenance and her livelihood (and education and health).

The dilemma is all the worse when severe food insecurity is factored in: stay confined but risk starving, or go to the market to buy food (or sell goods to earn the means for food), but risk injury or death.

In situations like these, where access to nutrition and livelihoods is limited due to civil disruption, girls and their families are at risk of adopting extreme negative coping strategies. This includes sexual exploitation, family separation, and taking...
on the worst forms of child labour. These strategies put girls at even further risk of sexual violence and rape.

Another widely reported coping strategy, one that predominantly affects girls, is child marriage.

- This harmful practice was already commonplace before the crisis, but respondents in Mali and Niger said it has increased in the context of the crisis. In Mali, school closures – due to armed conflict – were noted as a factor exacerbating rates of child marriage.
- Girls are married off for dowry or to reduce the number of mouths to feed in a family. This is also regarded as a way to protect girls from, among others, pregnancy outside of marriage and to shield them from increased violence due to conflict.

Risks to girls’ protection are amplified by internal displacement of people fleeing conflict. In addition, labour migration to procure food or escape drought has become a common occurrence.

- Key informants reported that drought-affected people are moving to urban areas where they are often forced to live in the street. This increases girls’ exposure to the risk of trafficking as well as sexual abuse and violence.
- In Niger, large numbers of men have migrated to find work and left girls and women with no means of coping in their absence. In some areas, both parents have migrated, creating child-headed households where girls care for the family and have to be the breadwinners.
- Children are at great risk of being separated from parents, in turn creating a risk of neglect, violence and abuse. In a survey of internally displaced girls in Mali, 41% of them reported family separation, while 68% indicated that they lack access to employment – a factor that heightens the risk of child sexual exploitation.
- In Burkina Faso, it was reported that internally displaced girls are more vulnerable than others to GBV owing to their higher levels of poverty, greater challenges in accessing food, water and firewood, and inadequate shelter, lighting, and toilet facilities in displacement sites – all of which exposes these girls to a high risk of abuse.

IMPACTS ON THE RIGHT TO HEALTH

In the central Sahel, the nexus of conflict, hunger and climate shocks affects everyone’s physical and mental health, but it impacts on girls with disproportionate severity in two areas linked to their age, gender and marginalisation: their nutrition and their sexual and reproductive health and rights (SRHR).

RESTRICTED ACCESS TO NUTRITION

In deprived communities, where malnutrition is a chronic problem, the struggle to stay healthy is never easy. It is much harder in times of crisis, as in the Sahel, and harder still for particular groups. For instance, households headed by women, children, and people with disabilities were identified as being particularly
excluded from access to available food resources. Where these households were also IDP households, they were the most food-insecure of all.

Inequality of access is evident not only between households but within them, and it is at the household level that its gendered dimension comes most clearly to the fore.

In response to food insecurity driven by conflict and climate shocks, families adopt the coping strategy of rationing food – they eat fewer meals, smaller portions, and less expensive or nutritious food. The strategy intersects with pre-existing gender norms, which are seen to be reinforced under pressure, and results in girls eating less, last and least nutritiously. This is likely to have adverse short- and long-term consequences for them as well as future generations.

- In Niger, it was reported that girls and women are typically last to eat in the household; in Mali and Niger, they were found to get less food than boys and men in the same household.
- When boys and young men were asked about their views on this, a mixed picture emerged. It suggests that while gender-discriminatory attitudes around food access are not universal, they tend to harden under increased adversity.
  - In Burkina Faso, about a third agreed that boys and men should always or sometimes be prioritised for meals, but a majority agreed they should never be prioritised.
  - In Niger, the proportion who think boys and men should be prioritised in this way had increased since the onset of the crisis. Food-related gender discrimination was also more evident in conflict-affected areas.
- For girls, eating less, last and least nutritiously is likely to further erode their health, long-term mental and physical development, and resilience in coping with challenges.
- Where girls are pregnant, this also aggravates their risk of miscarriage and maternal mortality. 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.
- Adolescent mothers in turn pass on the intergenerational effects of malnutrition, giving birth to low-weight babies who grow into malnourished teenagers and, if and when they too become pregnant, repeat this cycle.

RESTRICTED ACCESS TO SRHR SERVICES

Conflict and food insecurity in the central Sahel make it all the more necessary that girls living in poverty access age- and gender-responsive SRHR services, including information, supplies such as contraceptives and menstrual health products, and adequate healthcare facilities.
In a state of pervasive unsafety, the risks of physical and sexual violence and exploitation, including child marriage, are amplified, and, with them, those of sexually transmitted infections, poor menstrual health, and unintended or unwanted pregnancies, with all their life-changing repercussions.

- Obstetric fistula, for instance, is common in adolescents not yet physically mature enough to give birth, and associated with female genital mutilation/cutting. Officially outlawed, this customary practice remains extremely prevalent in Burkina Faso and nearly universal in Mali.

- Our fieldwork in Gourma-Rharous, Mali, finds evidence of a correlation between the onset of armed conflict and an observed increase in obstetric fistula in girls in an area where child marriage is common; this may point to an increase too in child marriage accompanied by unprotected sex.

- Obstetric fistula is a complication in which prolonged obstructed labour ruptures the wall between the bladder and birth canal, leading to incontinence, infections and other illnesses, and enormous social stigmatisation and rejection by communities. This is likely to impact in turn on girls’ participation in education.

Effective SRHR services would help to mitigate these risks, but, more fundamentally, they are enablers of bodily autonomy, which is a precondition for gender equality. For example, empowering girls by fulfilling their sexual and reproductive health needs and rights can increase resilience to food insecurity by enabling them to plan and space their pregnancies according to preferences and resources.

However, girls’ use of SRHR services, contraception in particular, is low. In Mopti, Mali, only 3.9% of respondents (largely all unmarried) reported using contraception, whether modern or traditional, with a small number having been pregnant (3.13%); the picture was similar among girls (all unmarried) in Burkina Faso. The exception was in Timbuktu, Mali, where 34% were married. Their contraceptive use was higher, though, at 12%, not hugely so. Of the group as a whole, 1 in 5 of them had been pregnant.

The findings indicate that where girls are more likely to be sexually active, they are highly likely to be having unprotected sex.

One of the factors at work is that access to contraception often hinges on access to health centres. This is especially difficult for girls in rural areas, where distances to centres are longer, roads are worse, and there is no public transport. Insecurity and the risk of armed attacks when travelling also restrict the ability to reach health centres. In 2020, in Burkina Faso, Mali, and Western Niger, more than 241 health centres were closed or non-operational due to conflict, with 121 of them in Burkina Faso.

Access to SRHR services does depend on one’s location, though: the majority of our respondents said they knew of and were able to use health services in their communities. But the fact that, on the one hand, many could access these
facilities and yet, on the other, there was low use of contraception, highlights the role played by barriers other than infrastructural and conflict-related ones.

During interviews, girls were reluctant to discuss such issues, an indication in itself of cultural and social barriers around SRHR. Those who were willing to do so revealed that they have little access to SRHR information. They also referred to economic barriers posed by the limited affordability of transport and medicine costs. In this regard, we found that the cost of contraceptives is high. We found, too, that, in wider society, it is possible that – despite the influence of social norms – a large demand for contraception exists among girls and women but is being blocked by cost constraints.

Similar issues apply to menstrual health and hygiene. Girls manage their periods using sanitary towels and pieces of cloth, which they wash. Access to sanitary towels depends largely on girls’ financial resources, and many displaced girls said they could no longer afford to use them.

As for the washing of cloth pieces, water shortages – due to the destruction of pumps during attacks or added pressure on already climate-threatened natural water resources as a result of displacement of people – make it hard for girls to maintain menstrual hygiene in a safe, private and dignified way. In turn (as with the stigma around obstetric fistula), this too is likely to impair access to education.

**IMPACTS ON THE RIGHT TO EDUCATION**

Civil insecurity, food insecurity, and climate insecurity in the central Sahel have had a major impact on the right to education for thousands of boys and girls alike.

- Schools have been destroyed or closed in conflict-affected areas. They have been one of the primary targets of attacks in Mali, Niger and Burkina Faso, and many remain closed.
- In Burkina Faso, 118 pre-schools (affecting 8,099 learners, including 4,189 girls), 68 primary schools (affecting 12,795 learners, including 6,345 girls) and 704 post-primary and secondary schools (affecting 154,622 learners, including 77,055 girls) were closed as of 30 April 2023.
- In Mali, 1,726 schools were closed, and 517,800 children out of school at the end of 2022.
- Teachers have moved out of the hardest-hit areas, leaving a shortage of educators.
- The risk of violence at school and on the way to it deters many children from attending.
- School attendance has also declined as food-insecure households take steps to supplement their income. Amidst rising poverty, many find the cost of schooling unaffordable.

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

GIRL IN 15–19 FOCUS GROUP, GOURMA RHAROUS, MALI
● Hunger due to food insecurity impairs children’s ability to learn, as do trauma and anxiety due to exposure to conflict. This not only leads to deficits in academic skills, but also affects the acquisition of life skills that could build resilience in dealing with the challenges of the crisis.\textsuperscript{105} School meals programmes are found to be effective both in mitigating hunger and sustaining school attendance.\textsuperscript{106}

Against a backdrop of pre-existing gender disparities, these factors impact on girls more severely than boys – because in the face of pressure, girls’ education tends to be the first to be deprioritised.

● Fewer girls than boys were enrolled in primary school in 2008–2014 in Mali and Burkina Faso.\textsuperscript{107} In Mali, the literacy rate for women is 24.6\% (33.56\% in the general population).\textsuperscript{108}

● Among respondents, a third of girls in Mali (Mopti) and Burkina Faso never attended school or attended for less than one year. In Timbuktu (Mali), this was true for nearly half of them.\textsuperscript{109}

● Entrenched gender norms translate into preferential treatment of boys to complete school. In focus groups with boys and young men in Burkina Faso, almost half of them thought girls’ education should be put on hold for some or all of the time due to the crisis.\textsuperscript{110}

● The belief is that, once a girl reaches puberty, her place is in the home as wife and caregiver. Her value to the family is based largely on her dowry rather than her education.\textsuperscript{111}

● In Niger, child marriage and early pregnancy were noted as factors in girls dropping out of school.\textsuperscript{112}

● Food insecurity has pressured parents to marry off their girls or keep them at home to meet the growing domestic care burden when parents leave to find work or food.\textsuperscript{113}

● When girls marry and/or become pregnant – a risk that has increased during the crisis – most of them drop out of school.\textsuperscript{114}

● Fear of violence and abuse on the way to and at school compels higher levels of protection of girls by parents, who keep them at home. Girls themselves are afraid to leave home due to security concerns associated with school attendance.

● School itself usually offers girls a degree of protection, but in the absence of the safety of the school environment, they are further exposed to violence in and around their communities.

● Loss of access to education also undermines children’s long-term well-being and prospects. For girls, dropping out of school increases their exposure to child marriage and other harms.

“People here don’t like that we go to school. They give us in marriage at the earliest age.

GIRL, 14, GOURMA RHRAROUS, MALI
**IMPACTS ON THE RIGHT TO PARTICIPATION**

Children have the right to participate in decisions that affect them. By extension, this means they have the right to be empowered with the voice, visibility and capacity to be active role-players in shaping actions that advance their survival, protection, development, and ability to engage with society.

In the case of girls in the central Sahel, the crisis in the region intersects with various coping strategies and gender norms to undercut their gateways to exercising this agency. Our research focused on two coping strategies – restrictions on freedom of movement and resort to child marriage. Both of them steer girls towards lifetimes of socially approved domestic subservience in spite of their aspirations to become, for instance, entrepreneurs (54% of choices), teachers (35%) or doctors (27%).

In regard to **mobility restrictions**, these were widely reported as well as widely attributed to insecurity in public spaces. For example, in Mali, 86% of girls indicated that fear of violence (felt by themselves or by parents) was the leading cause of limitations on their freedom of movement. The influence of social norms was also evident. While in some contexts it was noted that boys face protection risks too and may be limited in freedom of movement, the limitations overwhelmingly affect girls.

As the Adolescent Girls in Crisis studies show, during emergencies girls are more strictly supervised than ever. Protective parents, a heightened fear of violence and increased domestic chores combine with security measures, such as curfews, to confine girls to the home.

In the Sahel crisis, this restricted mobility affects all aspects of their lives. It makes girls less visible to communities and decisions about their lives are made largely without them, limiting opportunities for them to access services such as health and education and engage in economic activity that would give them some independence.

The same applies to **child marriage**. As noted, it has reportedly increased in incidence, as it is seen as a way to shield girls from violence and/or alleviate economic hardships including food insecurity. Here, the influence of social norms is particularly evident. Resorting to this coping strategy is made easier by the fact that child marriage has long been prevalent and socially accepted; moreover, as respondents suggested, it is valued as an institution that upholds notions about what a girl’s proper station in life should be.

- Mali had one of the highest rates of child marriage in the world in 2019: 50% of women aged 20–24 years were first married or in a union before age 18 and 18% before age 15.
According to a community leader, once girls are married ‘they become calm and respectful’. 

For girls themselves, entering marriage is a life-altering experience, one with well-documented harms that our research corroborates: it locks girls into poverty and exclusion, creates barriers to education, and increases health-related risks and the likelihood of GBV. Crucially, they have little say in decisions about marriage – and once they are locked into the situation, the marriage that began with their having limited agency then worsens their prospects of exercising it in the future.

While some accounts suggest that not all marriages are forced, this stands in contrast to the situation in Mali, where only eight girls out of 253 survey respondents (3.16%) said they would be the one deciding who and when to marry.

Nevertheless, the crisis is shifting traditional gender roles. With the reported increase in male labour migration and child-headed households, along with an increase in diversification of income sources, girls who have assumed roles as household heads and found work in traditionally masculine fields have seen their decision-making powers increase at the household level.

This has not extended, though, to greater participation in community-level decision-making structures. In Mali, for example, more than half of survey respondents said that women remain absent from these structures, while a majority of key informants reported that the crisis has not changed decision-making responsibilities at the community level.

“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
KEY CONCLUSIONS

The extreme vulnerability of girls in the central Sahel is driven by multiple, intersecting factors – conflict, climate shocks, food insecurity, migration, discriminatory gender norms, and poor services and infrastructure, among others. As a result, they are at a high risk of violence, abuse, exploitation, educational and economic exclusion, restricted access to essential services, and adverse health outcomes including malnutrition.

This negatively impacts on their interdependent rights to develop to their full potential – and, crucially, it impacts on their agency. It disempowers them from making decisions and taking actions – such as completing schooling, accessing SRHR services, and engaging in work and trade – that are key to building their resilience and capacity to protect and secure their daughters’ and families’ futures.

Clearly, concerted peacebuilding is a prerequisite for progress. But in the absence of transformational reform, the region’s dynamics will not only leave the current generation of girls disempowered and at risk, but also fuel the intergenerational exclusion of the girls who are born in turn to them.

To enable girls to escape the devastating consequences of the security and humanitarian crisis in the Sahel, the clarion call is to challenge gender norms which discriminate against girls within the family and communities, and to hold duty-bearers to account to protect girls’ rights, to recognise their specific vulnerabilities, and to respond to these.

This can be achieved only if girls are meaningfully engaged, listened to and able to influence decisions around policies, budgets and programmes that impact their lives.
RECOMMENDATIONS

Integrated, multi-sectoral programming between humanitarian and development sectors and across education, nutrition, health and protection responses is vital to secure girls’ rights in times of crisis.

This requires that governments, donors, humanitarian actors, development agencies, and civil society partners do the following:

1. **Ensure implementation of, and accountability for, all humanitarian, gender-equality and child-rights commitments to the United Nations and African Union:**
   - End conflict through strengthened peacebuilding.
   - UN and AU agencies and governments must demand accountability for all those who target and attack schools, kill and maim students and teachers, and abduct girls, ensuring that all parties to conflict fulfil their obligations under international law. Governments must endorse and implement the Safe Schools Declaration and UN Security Council Resolution on Children and Armed Conflict to protect education in times of conflict.

2. **Governments, donors and crisis-affected countries must prioritise the needs of girls and ensure that gender equality is at the heart of sector plans, emergency response plans, budgets and policies, identifying and addressing gender disparities and their underlying factors from the early years and beyond, in order to transform harmful gender norms, stereotypes and practices that are often perpetuated in and through education, particularly in crisis contexts. For example:**
   - Recognising the current global hunger crisis and climate crisis and their disproportionate impact on girls and their education, sustainable investments must be made towards social safety nets, such as cash transfers and school meals, which have been proven to increase access, retention and learning outcomes of the most vulnerable girls within crises.
   - Invest in building the capacity of governments (national and local), community leaders, and NGOs to engage in gender- and age-responsive rights-based planning, programming, resourcing and monitoring.
   - Develop population-scale initiatives that emphasise the link between child marriage, early pregnancy and social norms, and which promote alternative coping mechanisms. These initiatives should use innovative means to ensure they are universal in reach, sustained across generations, and transformational in nature – for instance, thought their integration into the education curriculum and programmes directed at communities and families.
Prioritise gender and age sensitive responses to address the gendered impacts of hunger and crises, including funding specific programmes that address child protection, gender-based violence, girls’ access to education, child, early and forced marriage and unions, and sexual abuse and exploitation in food-insecure contexts. This also includes support for efforts to strengthen disaggregation of food security data by sex, age and disability. For example:

→ Develop schools as coordinating hubs that provide inclusive, transformational education for sustainable development. Through these hubs, multiple role-players deliver services to overcome barriers to educational access, to address protection, nutritional and health needs, and to support girls in participating in decision-making. Schools should provide access to a package of care that includes feeding programmes, SRHR services, psychosocial support, child protection services, and access to water and sanitation.

→ Integrate child protection, parental support and education, and health services into food distribution programmes.

→ Integrate parental and peer education on girls’ rights, harmful practices and alternative coping mechanisms into existing primary healthcare programmes.

Strengthen national child care and protection systems to make services and support available through, for example, schools, as well as direct service delivery points. This requires that systems in the health, education, social security, nutrition, WASH and justice sectors improve the availability, accessibility and quality of free and/or subsidised adolescent-friendly education and health services, including SRHR services, for girls and their caregivers. Priorities include:

→ Increasing the availability of, and access to, all health services necessary for the survival, development, and protection of girls – especially menstrual health and hygiene, SRHR services, and psychosocial support – by addressing cost and infrastructural barriers.

→ Expanding access to food through school and community-based feeding programmes that include education about gender norms and the importance of girls’ nutrition.

→ Increasing availability and access to child protection services for girls within communities and schools through legal reform, such as in regard to the age of marriage; through strengthened surveillance, reporting and referral mechanisms; and through integrated services for survivors in schools, health facilities, and IDP camps.

→ Improving girls’ access to, and completion of, schooling and vocational education by addressing cost barriers (for instance, making school free and subsidising transport costs).

The UN, AU, and governments should meaningfully involve girls in the design, implementation and monitoring and evaluation of public policies, budgets and legislation and put strong accountability mechanisms in place to track progress. A critical step is removing barriers to participation faced by girls in humanitarian settings.
ENDNOTES

6 Hereafter, the term ‘girls’ is used to refer to adolescent girls.
12 Ibïd.
13 Analysis of the following: ACLED. 19 May 2023. ‘Regional Hub: Africa’. [Downloadable dataset containing all data recorded in Africa from the beginning of ACLED coverage to the present.] https://acleddata.com/africa/ (accessed May 2023) (hereafter ACLED dataset analysis)
14 Ibid.
15 Ibid.
16 Ibid.
22 ACLED dataset analysis
25 GRFC 2023 p 70
26 GRFC 2023 p 73
27 GRFC 2023 p 111
28 Compiled from GRFC 2023
34 AGC Report
Using mixed methods, data were collected in February 2020 in Bandiagara, Bankass, Diré and Gourma Rharous in Mali, and Tougan, Bomborokuy, Kongoussi and Pissila in Burkina Faso. Seventy-two focus group discussions (FGDs) were held with 412 girls, 148 boys, and 151 parents and guardians; also, 67 key informant interviews (KIIs) were conducted with a variety of stakeholders. A quantitative survey was conducted among 378 girl respondents. See AGC Report p 4.


RGAs are used in emergency settings to gather information quickly about the needs and coping strategies of women, men, boys and girls. They involved a combination of reviews of secondary data; household surveys, including among 809 households in the central Sahel; FGDs with about 2,500 women, men, girls and boys in this region; and KIIs with community leaders, technical experts, service providers and government representatives. See BH 2023 p 4

The UN Committee on the Rights of the Child (UNCRC) defines ‘violence’ in a broad way: it encompasses all forms of harm, including ‘all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse’. See UNCRC. 2011. General Comment No. 13: The Right of the Child to Freedom from All Forms of Violence. https://bit.ly/3oxQ0TU (accessed May 2023)


Ibid. ‘During Burkina Faso’s annual “free contraception week”, women and girls are offered free contraceptives through NGOs and local health centres. One health centre in Kaya reported that demand during that week is five times higher than average.’

AGC 2020 pp 36-37
AGC 2020 p 46
AGC 2020 p 37
AGC 2020 p 29

AGC 2020 p 75
AGC 2020 p 29
BH 2023 p 23
AGC 2020 p 30
BH 2023 p 25
BH 2023 pp 13, 35
AGC 2020 p 28
Ibid.
AGC 2020 p 29
BH 2023 p 25
Ibid.
Ibid.
BH 2023 p 22
AGC 2020 p 31
AGC 2020 p 53.
BH 2023 p 20
Ibid.
AGC 2020 p 39
Ibid.
Ibid.
See ‘Key findings: Impacts on the right to protection’.
AGC 2020 p 43
AGC 2020 p 40
AGC 2020 p 43
AGC 2020 p 45
See ‘Key findings: Impacts on the right to protection’.
BH 2023 p 21
Ibid.
BH 2023 p 24
Ibid.
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About Plan International

We strive to advance children’s rights and equality for girls all over the world. We recognise the power and potential of every single child. But this is often suppressed by poverty, violence, exclusion and discrimination. And it’s girls who are most affected.

As an independent development and humanitarian organisation, we work alongside children, young people, our supporters and partners to tackle the root causes of the challenges facing girls and all vulnerable children. We support children’s rights from birth until they reach adulthood, and enable children to prepare for and respond to crises and adversity. We drive changes in practice and policy at local, national and global levels using our reach, experience and knowledge. For over 85 years we have been building powerful partnerships for children, and we are active in over 80 countries.

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