



Article Marrying Young: Limiting the Impact of a Crisis on the High Prevalence of Child Marriages in Niger

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Abstract: Child marriage is a harmful and discriminatory global practice, robbing millions of girls of their childhood. Global attention and momentum to end early marriage has increased over the years; however, the impact of the COVID-19 pandemic has affected this progress. It has been predicted that over the next decade up to 10–13 million more girls will be at risk of child marriage because of the pandemic. Since Niger has consistently had the highest rate of child marriage in the world, this study will explore the impact of the COVID-19 pandemic on child marriages within the west and African region but specifically within Niger. This article will look at past response efforts to other pandemics, specifically Ebola, and show how the girl-child remains disproportionately disadvantaged, especially during pandemics. The article will conclude with recommendations on the importance of incorporating a gender analysis into preparedness and response efforts to eliminate child marriages.

Keywords: child marriage; child marriage in Niger; child marriage and development goals; COVID-19 and child marriage; impact of child marriages; impact of pandemics

1. Introduction

Child marriage¹ is a harmful and discriminatory global practice robbing millions of girls of their human rights by hindering their health, development and well-being (Yaya et al. 2019). Whilst various studies have detailed the negative impact of child marriages on the health and development of the girl-child (Briggs and Ngo 2020; Brolin Ribacke et al. 2016; Myers 2013), other researches have documented the adverse economic and social effects and consequences of child marriage for the child brides² themselves, their families and their communities (Villegas et al. 2021; John et al. 2019; Parsons et al. 2015; Vogelstein 2013; Yaya et al. 2019). In addition, a further study has found that the practice of early marriage costs the global economy trillions of dollars (Wodon et al. 2017). Consequently, as well as violating the human rights of girls', child marriage brings significant development impacts at the individual, community and society levels and it remains a fundamental barrier to the achievement of international and national commitments for development and gender equality (Parsons and McCleary-Sills 2017).

It is therefore not surprising that the problem of child marriage has gained considerable global attention in the past two decades with a target for the elimination of child marriage by 2030 recently included in the sustainable development goals (SDGs) (Malhotra and Elnakib 2021). Whilst seeing a slight decline in some countries over the past years, the battle to combat child marriages remains a recurrent global struggle (Malhotra and Elnakib 2021). The disproportionately high rate of early marriage amongst girls is widely documented and recognised by the international scholarship and community (Koski and Clark 2021; Sri et al. 2021; Briggs and Ngo 2020; Pesando and Abufhele 2019; UNICEF 2020a).

¹ This term is used in its widest sense to refer to marriages involving a person aged below 18 in countries where the age of majority is attained earlier or upon marriage.

² The terms "child marriages", "early marriage" and/or "child brides" will be used interchangeably in this article.

Rooted in gender inequalities and discriminatory societal norms (Monla-Hassan and Yacoubian 2020; Rivera 2011), child marriages and/or child brides can be found in every region of the world. Reportedly, approximately 12–15 million girls marry annually before the age of 18 years (Yaya et al. 2019; UNICEF 2018b); however, during times of crises these existing inequalities are exacerbated (Van Damme et al. 2020). It has been predicted that over the next decade up to 10-13 million more girls will be at risk of child marriage as a result of the current COVID-19 pandemic (UNICEF 2020a, 2021). The issue of child marriages is, however, particularly dire in a region like Africa that already finds itself faced with varying humanitarian contexts (Tchole et al. 2020) and where the overall prevalence of child marriage is higher than the global average (Yaya et al. 2019). Indeed, while it is too early to assess the full impact of COVID-19 on adolescent girls, early reports indicate that the health, social, political and economic effects of the COVID-19 pandemic are disproportionately affecting girls and women by exacerbating existing systemic gender inequalities at all levels (Briggs and Ngo 2020; Wenham et al. 2020). Importantly, one of the most damaging effects of the pandemic is a spike in child marriages globally (Malhotra and Elnakib 2021; World Vision 2021; BBC 2020). The impact of COVID-19 on girls' human rights and the goal of achieving gender equality depends largely on how countries choose to respond to the pandemic.

In this regard, the Ebola outbreaks and other public health crises in the African regions provide indicators of how adolescent girls are disproportionally affected by these pandemics (Wenham et al. 2020), and the lessons from past disease outbreaks in the region have illustrated the importance of incorporating a gender lens into disease response and prevention (Wenham et al. 2020; Davies and Bennett 2016; Smith 2019). Since outbreaks are not only public health emergencies but also political and socioeconomic emergencies, this article argues that one can learn from the African Ebola responses and avoid a "tunnel vision" (Richardson et al. 2016). This is because previous pandemics have generated insights into how a "tunnel vision" aimed at solely averting a health crisis has led to the alarming neglect of women and girls (Cader 2017; Wenham et al. 2020). To fail to learn from previous responses means that any pandemic response will do more harm than good.

Although child marriage is prevalent across Africa (Yaya et al. 2019; UNICEF 2017), its prevalence is greatest in West and Central Africa (WACA), where it is estimated that overall 68 percent of marriages are child marriages. In some individual countries the reported prevalence is even higher. For example, countries within WACA that have reported the highest incidences of early marriage include Guinea with 72.8 percent, Mali with 69 percent and Nigeria with 64 percent (Yaya et al. 2019).

However, Niger, with between 75 and 76 percent, is the country with the highest percentage of child marriages in the region (John et al. 2019; Yaya et al. 2019). According to the 2012 Niger Demographic and Health Survey (DHS), 77 percent of women aged 25–49 were married by age 18, with a median age at first marriage of 15.7 (the lowest of all the countries for which DHS data are available) (USAID 2013; UNICEF 2018b). This article will therefore focus on and explore the prevalence of child marriages in Niger and look at how efforts can be accelerated to achieve their SDGs. This will be achieved through exploring how the COVID-19 pandemic shifted the immediate focus away from many social ills, specifically child marriage and through the lens of past response efforts to other pandemics, specifically Ebola. This article will look at how the girl-child has been and continues to be disproportionately disadvantaged, directly impacting the gains made by the global and regional community as well as country-specific efforts in reducing child marriages.

Consequently, a major portion of this study will explore the impact of the COVID-19 pandemic on child marriages within the WACA region but specifically within Niger. The aim is to highlight how responses to previous public health crises and the Ebola outbreak specifically have consistently resulted in adolescent girls being disproportionally affected by these emergencies (Wenham et al. 2020) and that despite these experiences current policies and public health efforts continue to be silent on the gendered impacts of disease outbreaks (Smith 2019). For example, it is documented how during the 2014–2016 west

African outbreak of the Ebola Virus Disease (EVD) gendered norms meant that women were more likely to be infected by the virus given their predominant roles as caregivers within families and as front-line health-care workers (Davies and Bennett 2016; Gemignani and Wodon 2015). However, just as during the EVD outbreak in WACA, COVID-19 response efforts focus primarily on reducing the number of new virus cases rather than correspondingly implementing protocols aimed at protecting the most vulnerable in society (Menéndez et al. 2015).

This continued failure to adequately respond to the needs of the most vulnerable during COVID-19 once again means that the girl-child is unduly disadvantaged, resulting in an alarming surge in all forms of gender-based atrocities and more specifically in child marriages (Recavarren and Elefante 2020). By looking to the Ebola experience, it is hoped that experiences from past outbreaks will highlight the importance of incorporating a gender analysis into preparedness and response efforts to improve the effectiveness of interventions aimed at eliminating child marriages and promoting gender and health equity goals in line with various SDGs.

The overall aim is to encourage pandemic preparedness not only in WACA but within Niger, thereby addressing systemic weaknesses that have led to the spike in child marriages and allow Niger the opportunity to prepare for and mitigate the impact of future pandemics on the girl-child.

1.1. Statement of the Problem

Child marriage and the needs of adolescent girls are often overlooked in crisis situations like the Ebola and COVID-19, and during such crises early marriage increases exponentially (Monla-Hassan and Yacoubian 2020). Niger, with the highest rate of child marriages in the world, faces a preponderance of risk factors that not only threaten to but have exacerbated the underlying conditions that create an enabling environment for child marriages.

1.2. Aims and Objectives

Lessons from past pandemics have shown that effective programmatic prevention of and response to child marriage cannot be achieved without first understanding the prevalence of child marriage, the nature of child marriage practices, the political and socio-economic factors influencing child marriage practices and the existing prevention and response activities in a given country or region. Only when this is understood can gaps in existing approaches and promising new approaches to prevent and respond to child marriage be identified. Therefore, one of the aims of this paper is to understand the prevalence of child marriage, the nature of child marriage practices and the political and socio-economic factors influencing child marriage practices in the WACA region.

The main objectives of this article are to assess responses, explore approaches and identify gaps in efforts to address child marriage across the region but specifically within Niger, thereby providing country offices with the information they need to accelerate and strengthen their work to end child marriage, especially during times of crisis. By looking at the major pathways through which COVID-19 increases the risk of child marriages, this article will aim to offer a framework to promote the rights of girls to delay marriage, address the conditions that perpetuate the practice and ensure that girls fully enjoy their childhood free from the risk of marriage.

Advocating for a gendered-approach to policies and programmes during crisis situations, this article will then aim to generate regional and country-specific recommendations for accelerating and strengthening efforts in addressing child marriage. The conclusion and recommendations will therefore focus on how Niger can limit the impact of a crisis on child marriages and achieve its SDGs.

1.3. Rationale for This Study

Child marriages and the continued practice thereof is a form of abuse and a violation of children's rights (Nour 2009). It deprives girls of their childhood, their wellbeing and their potential by interrupting their schooling and limiting their opportunities to career and vocational advancement (Pesando and Abufhele 2019). In addition, becoming a child bride compromises a girls' development through early pregnancy, leads to social isolation and places young women at an elevated risk of intimate partner violence (IPV), which is in turn linked to additional adverse physical and mental health outcomes (Kidman 2017).

Additionally, in many cultures, girls reaching puberty are expected to assume gender roles associated with womanhood, including entering a union and becoming a mother (Johansson 2015). The practice of early marriage is consequently a direct manifestation of gender inequality and acts as a significant obstacle to a country's achievement of their developmental goals (Davis et al. 2013).

Since before the Covid-19 pandemic and despite national and international laws banning child marriages and, regardless of some countries' positive efforts towards the elimination thereof (UNICEF 2015, 2018b), the global scale of child marriages has not significantly decreased to an extent where this practice no longer poses a threat to the development and growth of the girl-child. One of the biggest concerns of the consequence of the COVID-19 measures is that the pandemic is estimated to have disrupted significant efforts made thus far to end child marriages (Briggs and Ngo 2020), the resulting significance thereof is that millions more will be forced into early marriages between 2020 and 2030 (UNICEF 2020b).

There is a very real concern in both the national and international community that if efforts to end child marriages are not accelerated, WACA will risk becoming the region with the highest numbers of child brides by 2050. The impacts of the various COVID-19-related restrictions, including disruptions to child marriage programming and wide-reaching economic crises and associated stresses on families, will further weaken planned efforts to end child marriage. It therefore becomes imperative to prioritise opposing early marriage in policy and programme development (Parsons and McCleary-Sills 2017).

1.4. Methodology and Approach

This study utilises a desk literature review of legal policies, national strategies/action plans and programmes and interventions related to child marriage prevention. In addition, the author reviewed multiple databases to identify relevant academic publications, books, journal articles, programme evaluations, survey data and other influential sources, including data from peer-reviewed journals and grey literature. Many documents included in this review consist of grey literature publications such as reports by UNICEF, UNFPA, Office of the United Nations High Commissioner for Human Rights (OHCHR), United Nations (UN) and World Vision. To meet the objectives of this study, the main results of the desk review are included in this article to strengthen the conclusions and recommendations reached.

The approach of this article is that it will begin by briefly summarising the international human rights framework for the abolition of child marriages and proceed to isolate some key characteristics, as well as the scale and harmful effects of the nature of child marriages. It is acknowledged that whilst all countries, including African countries, are faced with the challenge of child marriages, the focus of this article will be on the WACA region and specifically on Niger because of Niger's unenviable status of having the highest overall prevalence of child marriages in the world.

A discussion around the context of and reasons for the persistence of child marriages in Niger will be pursued. In this discussion some of the main vulnerability factors that have emerged from the literature review will be stressed to help highlight the diversity and complexity of this issue and to better understand how to address and ultimately prevent child marriages.

This article will then examine how these vulnerability factors are exacerbated during crisis situations and how progressive policies and practices would help to prevent early

marriage and consequently adverse outcomes among girls. This paper will then look at the lessons from previous health crises, specifically the Ebola outbreak, to highlight how responses to previous crises have consistently resulted in girls being inordinately affected leading to a worrying rise in child marriages.

Finally, whilst looking at some of the other remaining challenges like the pathways to child marriages in Niger during COVID-19, this paper will highlight some positive guidelines in reducing the rates of early marriages and consequently conclude with recommendations designed to respond to the needs of adolescent girls during a crisis.

1.5. Limitations of This Study

Part of the challenge of applying lessons from previous pandemics is that pandemics by their very nature are often unique and the COVID-19 pandemic is unprecedented in modern history in its global coverage. In addition, while the actual number of girls that have been married since the beginning of the crisis is unknown, pre-COVID data can be used to predict the impact of the pandemic on child marriage in the near future. Such projections can be made by examining existing patterns as well as historical information on the effects of educational disruption, economic shocks and programme efficacy on this harmful practice (UNICEF 2021). Despite the limitations on confirmed statistics around early marriages during this pandemic, lessons learned about how such crises impact some of the most vulnerable children remain valid pointers for concerted global, national and local actions. By reporting on the nature of the potential impacts of COVID-19 on child protection outcomes and key risk factors, the article can be seen as a means of effecting a multi-dimensional strategy for responses and for future research prioritisation. A further limitation is that due to the recent phenomenon that is COVID-19, there is a lack of scholarly articles on the impact of COVID-19.

In addition, another major limitation on choosing a country like Niger to focus on is that country-specific details are limited. Whilst there is a body of literature on early and child marriage, the evidence on child marriages specifically in Niger is limited. There are even fewer studies on the impact of pandemics on child marriages in Niger specifically. Field studies are necessary for more information regarding child marriage in specific countries, but that is not the purpose of this article. For this article, the author has searched multiple data bases using the term "early marriage in Niger", "child marriage in Niger", "effect of pandemics on child marriage" and "Ebola and child marriages". However, and as mentioned, in this bibliographical research a limited amount of work related to child marriages in Niger was found, and consequently this article will rely on grey literature where appropriate.

1.6. Knowledge Gap

This article is meant to reinforce the small amount of studies published, showing that the field is still incipient with opportunities for research.

2. International and National Legal Framework and Commitments

A solid legal framework plays a powerful role in transforming norms and protecting girls' rights (Rivera 2011). Several international conventions are committed to eradicating child marriage by detailing States' responsibilities for protecting children from marriage, defining a minimum age of marriage and requiring free and full consent in any marital decision. Amongst them, the Universal Declaration of Human Rights (1948) (UDHR), of which Niger is a signatory, recognises the right to "free and full" consent to marry and states that a person must be suitably mature to make an informed decision. Several other legal instruments recognise the marriage of a girl or boy before the age of 18 as a violation of the child's human rights, including the right to education, to express their views freely, to protection from all forms of abuse and to be protected from harmful traditional practices, for example, the *Supplementary Convention on the Abolition of Slavery*, the *Slave Trade, and Institutions and Practices Similar to Slavery*, 1956; the *International Covenant on Civil*

and Political Rights, 1966; and the International Covenant on Economic, Social and Cultural Rights, 1966.

In addition to the UDHR, the two other major international agreements that have been ratified by Niger and that aim to protect the rights of children are the 1989 United Nations Convention on the Rights of the Child (CRC) and the 1990 African Charter on the Rights and Welfare of the Child (ACRWC). The CRC does not specifically mention child marriage. However, it does obligate State parties to take measures to "abolish all traditional practices prejudicial to the health of children" (CRC, Art. 24(3)). Compared to the CRC, the ACRWC is more comprehensive since it addresses the unique factors that the African child faces such as traditional customs (ACRWC, Art. 21(2)).

If one has regard to the harmful consequences of child marriage on a child bride's physical, mental and sexual health, it is clear that the harmful traditional practices referred to in the CRC therefore also include child marriages. In addition, the CRC obligates State parties to ensure that children attain the highest attainable standard of health by taking measures to, among others, ensure appropriate pre-natal and post-natal health care for mothers and basic knowledge of child health and nutrition, to diminish infant and child mortality and to provide medical assistance and health care to all children (Article 24 of the CRC). The CRC therefore specifically recognises that the health of children is determined by adequate and appropriate pre-natal and post-natal care for pregnant women. It will be shown how most child brides do not access appropriate and adequate pre-natal and post-natal care during their pregnancies, endangering their lives as well as the lives and health of their babies.

Additionally, the rights to equality and non-discrimination are set forth in the 1979 Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), which prohibits child marriages and sets 18 as the minimum age for marriage. Despite ratifying CEDAW, Niger continues to make several reservations to certain main provisions of CEDAW. This discussion will, however, not pursue these reservations save to mention that these instruments discussed above identify child, early and forced marriage as forms of gender-based discrimination that disproportionately affects women and girls. Child marriage is a manifestation of discrimination against women and girls, a violation of their rights and an obstacle to the girl child's full enjoyment of her rights (Arthur et al. 2018). The practice is further perpetuated by entrenched adverse customs and traditional attitudes that discriminate against women or place women in subordinate roles to men, or by women's stereotyped roles in society (CEDAW, Art. 16–17). Cultural and socio-economic conditions, poverty and a lack of access to education also influence early marriages.

More recently, the global community has agreed to the SDG targets, which comprise a key initiative to advance gender equality, education and health (Ayebare et al. 2020; UN 2015; UNICEF 2019b). Niger has committed to eliminate child marriage by 2030, in line with the SDGs, which are the blueprint to achieve a better and more sustainable future for all.

Niger's Laws

There are three sources of law in Niger, namely, statutory, customary and religious law. However, Niger is based essentially on customary law and to a lesser degree the *Civil Code 11 of 1999* (Arthur et al. 2018). The *Civil Code* legalises girls' marriage at age 15 and boy's marriage at 18. Article 144 of the *Civil Code*, however, provides that consent from parents can legalise marriages between minors. Due to this clause and customs, a high percentage of girls are married off well before their 15th birthday with the requisite consent of the elders (Urama et al. 2014).

Due to the existence of the two other sources of law, the *Judicial System of the Republic* of Niger Act of 1962 (JSA) and the Muslim/Sharia law the Civil Code is virtually never applied (Lagoutte et al. 2014). Article 51 of the JSA specifically states that matters relating to marriage are governed by custom. For persons with customary status, the minimum age of marriage is 14 for girls and 16 for boys. A major issue is that custom does not provide

for an age of majority, which greatly impacts child marriage decisions. A law has been proposed to change the age to 18 for girls but due to traditions it has not yet been adopted (Gemignani and Wodon 2015).

The issue is that customary law remains the most commonly accepted and naturally applied source of law, rather than statutory law, which is perceived to be originating "elsewhere" (Lagoutte et al. 2014). Therefore, despite being a signatory to various international treaties, which all require Niger to prohibit child marriages, very little is being done to address the incoherence in domestic legislation with that of their international legal obligations (Urama et al. 2014).

3. Drivers and Consequences of Child Marriages in Niger

Whilst there has been substantial research done on some of the factors that drive child marriages and of the consequences thereof (Klugman et al. 2014; Yaya et al. 2019; Vogelstein 2013; Parsons and McCleary-Sills 2017), there is still a dearth of knowledge directly addressing these drivers in Niger. However, the current body of evidence clearly indicates that despite diversity across regions and communities, many common threads lead to child marriage and its harmful consequences (Monla-Hassan and Yacoubian 2020).

The following discussion provides an overview of some of the key factors driving early marriage in Niger and the consequences thereof. This is done with the aim to highlight the serious impacts of early marriage on not only the girl-child but on the family, the community and the economy at large. This discussion is crucial for a more holistic understanding of early marriage as the resolution of the problem demands that it be assessed in its broader context.

3.1. Poverty

One of the most pervasive drivers of child marriage is poverty (Pesando and Abufhele 2019). Niger being one of the poorest countries, according to the current UN Human Development Index, means that extreme poverty is a major factor in the prevalence of child marriage in the country. It has been reported that half of the country's population live on less than two dollars a day (Dirk 2018). The high prevalence of child marriage is both a symptom and a consequence of poverty. Reports indicate that girls living in poor households are approximately twice as likely to marry before 18 years than girls living in 'better-off' households (UNICEF 2016).

Poverty also drives unemployed parents to regard girl-children as economic burdens, both with regard to education costs and the practice of a dowry system (Bakrania et al. 2020), which is a financial transaction entered into at the time of marriage. Early marriage is therefore often viewed as a means of reducing the financial burden for parents and as a source of income (Burzynska and Contreras 2020). In one study of 36 villages in Niger, it was found that the strongest argument girls themselves made in favour of marriage was that it would improve their economic situation and increase their social status (Myers and Harvey 2011).

However, there is little to no evidence that an increase in social status would prevent married girls from harm and provide more financial stability. In fact, the majority of married girls and child mothers have limited powers to make decisions, are generally less able to earn an income and are vulnerable to multiple health risks, violence, abuse and exploitation (Sri et al. 2021; Fatratra and Abdou 2019). Evidence through this literature review indicates that since girls are more likely than adult women to be married or betrothed to significantly older men (Smaak and Varia 2015), the age gap and power differentials between child brides and adult husbands effectively undermines their agency and autonomy (Sri et al. 2021; Kidman 2017). This unequal power relationship inherent in child marriages means that child brides are often exposed to serious health risks, including HIV and other sexually transmitted infections, early pregnancy and early childbearing (Neal et al. 2015).

A serious consequence of early marriage is the subsequent pressure to bear children at an early age, which has potentially disastrous outcomes. Since almost 80 percent of births occur within marriage, married girls are more vulnerable than their counterparts to multiple reproductive health problems (Southward 2013). Both globally and specifically within developing countries, pregnancy-related causes are the largest contributor to mortality among girls aged 15 to 19, killing nearly 70,000 girls each year (Monla-Hassan and Yacoubian 2020; Klugman et al. 2014). Reports have suggested a strong correlation between the age of the mother and maternal mortality and morbidity (UNICEF 2020b; Harman 2016; Neal et al. 2015). Niger features among the countries with the world's highest rates of maternal mortality and the lowest contraceptive prevalence rates (Walker 2013). Complications during pregnancy and delivery remain the leading cause of death for females aged between 15-19 years in the country (Parsons et al. 2015). Early childbearing also increases the risk of complications. Specifically, premature childbirth can lead to a variety of health problems for mothers, including obstetric fistula, a debilitating condition that causes chronic incontinence and results in shame and social isolation (Neal et al. 2015). Specifically, in impoverished communities in Niger, young women below the age of 20 remain particularly susceptible to developing fistulas (WHO 2019).

Together with the harms to a child brides' health, several reports reviewed drew attention to various other harms associated with early marriages, including but not limited to physical violence, marital rape and economic and psychological violence (Sri et al. 2021; Monla-Hassan and Yacoubian 2020; Kidman 2017; Neal et al. 2015; Parsons and McCleary-Sills 2017). According to UNICEF, the proportion of women married by the age of 18 shows an increase in domestic violence (UNICEF 2020b, 2021). Women who marry younger are more likely to believe that a husband has a right and is justified in beating his wife (Delprato et al. 2015), making child marriage a manifestation of violence. In Niger, poverty and the lack of power that comes with the wide age difference increases a girl-child's vulnerability (Fatratra and Abdou 2019), directly impacting her health, development and well-being.

3.2. Socio-Cultural Factors

There are many aspects to consider when analysing a country's social behaviour. Traditional practices, for example, are diverse and distinct to each social group. For this reason, it is important to understand that there are beliefs and norms within social groups that may vary (Rivera 2011). Such beliefs and norms result in unequal gender status and power relations that can translate to the perpetual subjugation of girls and women (Brolin Ribacke et al. 2016).

Globally, systemic gender inequality underpins child marriages where one in five girls are married before the age of eighteen (Monla-Hassan and Yacoubian 2020). In Niger, three in four girls marry before their eighteenth birthday (UNICEF 2020b, 2021), due in large part to deeply entrenched societal norms and the status of women in society (Yaya et al. 2019). There is a real concern amongst families of stigmatisation if they do not marry girl-children according to social expectations and a fear of dishonour from pregnancy outside of marriage (Fatratra and Abdou 2019; Gemignani and Wodon 2015). Marriage is therefore valued by communities, and because girls are primarily viewed as wives and mothers (Burzynska and Contreras 2020) there is a lack of interest in investing in their education.

These traditional beliefs on the role of girl-children in society, together with their lower status, reinforces the gendered notions of poverty and powerlessness, which means that they continue to bear the burden of the region's persistent economic crisis (Parsons and McCleary-Sills 2017). The result is an increase in the discrimination of women because of their continued subjugation to poverty, illiteracy, powerlessness and gender-based violence (GBV) (Walker 2013).

3.3. Lack of Education

Various literature studies have shown that child marriages are universally associated with low levels of schooling (Malhotra and Elnakib 2021; Burzynska and Contreras 2020;

Cader 2017). Niger is no different in that child marriage is closely linked to poverty and girls' educational opportunities (Parsons and McCleary-Sills 2017). Research also indicates that child marriage is strongly associated with girls who have received little or no formal education (Delprato et al. 2015), and girls with no education are up to six times more likely to marry than girls with a secondary education.

The link between education and the prevalence of child marriage is particularly evident in Niger, where 81 percent of women aged 20–24 with no education and 63 percent with only primary education were married or in a union at age 18, compared to only 17 percent of women with a secondary education or higher (UNICEF 2020b, 2021; Fatratra and Abdou 2019). It is important to consider the cause and effect relationship between inadequate education and child marriage since research shows a link between girls' educational levels and age at marriage, namely, that advanced median age at first marriage directly correlates with higher rates of girls in school (UNICEF 2019a, 2018b). The high rates of illiteracy and a lack of education for girls in Niger mean that many of them and their families see few alternatives for the future except an early marriage (Burzynska and Contreras 2020; Yaya et al. 2019).

3.4. Inadequate Laws

A discussion of Niger's domestic laws above have indicated how customary laws and religion takes precedence over its statutory laws. Religious and customary traditions comprise the most dominant factors contributing to the consistently high child marriage statistics in Niger (Wodon et al. 2017). It is tradition rather than the law that decides when girls are old enough to marry (Dirk 2018). The preference of custom and religion over statutory laws results in child marriages being conducted with relative impunity (Bandiera et al. 2018). Supporting laws and policies to end child marriage and a real commitment to enacting legislation is crucial in the fight against the elimination of child marriages.

There are various other factors that contribute to child marriages in Niger, like pressure groups in the form of religious groups and associations opposed to legislative changes (UNFPA-UNICEF 2019), the hunger crisis and political conflict (Walker 2013). What is evident from these factors is that early marriages are often perceived by families as a protective measure and used as a response to economic difficulties. This attitude, however, results in lost development opportunities, limited life options, GBV and poor health for girls.

This discussion also clearly highlights that child marriage directly violates rights to health, education, equality and non-discrimination, consensual marriage and the right to live free from violence and harm, which are enshrined in international human rights instruments including CEDAW, the CRC and the ACRWC, all of which call on states to ensure the elimination of all forms of discrimination and harmful practices against girls and to also ensure the protection of the rights children.

3.5. Emergency/Crisis Situations

These above-mentioned drivers of early marriage are exacerbated for girls in crisis situations (Villegas et al. 2021; Schlecht et al. 2013). During times of crisis, child marriages in unstable contexts like the COVID-19 pandemic (Burzynska and Contreras 2020) have intensified the multiple negative outcomes for girls and women specifically. The disruptive impacts of the virus are playing out in several ways, directly impacting early marriages (Bakrania et al. 2020).

Initial empirical research shows that COVID-19, together with its infection control measures, have had detrimental impacts on the girl-child's development, safety and wellbeing (Briggs and Ngo 2020). Other reports have noted an increase in child marriage during these times as families driven by poverty and fear feel that their daughters would be safer if married (Villegas et al. 2021). Additionally, the increased risks of poverty from financial instability and other factors discussed about leave girls even more vulnerable to this practice. For instance, during this time child marriage increases because girls are seen as financial assets and an opportunity to claim dowry as a survival strategy during economic hardships presents itself in the form of early marriage.

The crisis situation has further undermined girls' health, including sexual and reproductive health (SRH) and rights, and increased the risk of sexual violence and GBV (Sri et al. 2021; Delprato et al. 2015).

Soon after COVID-19 was detected in all 24 countries in the WACA region, schools closed, affecting an estimated 128 million children (Regional Inter-Sector Coordination Group R-ISCG). In Niger alone, at the peak of the pandemic, 3.8 million children were out of school across the country (Yolande Wright 2020). Reports indicate that in Niger girls are more likely to be married if they are not already attending school and that they are less likely to return to school after a period of absence (Morgan 2015; SIDA 2017). This is in large part due to financial issues, domestic and care responsibilities falling solely on female family members and a general preference for boys to return to schooling (Burzynska and Contreras 2020). In addition, the pandemic has put girls in Niger at a greater risk of harmful practices, GBV and sexual exploitation (Villegas et al. 2021). The increase in GBV and exploitation can be seen as a direct result of the closure of schools. The closing of schools as a mitigation measure in response to COVID-19 has contributed to the deprivation of a protective environment for girls (Burzynska and Contreras 2020).

The evidence shows that pandemics disproportionately impact women and girls in Niger and adversely impact child marriage (Wenham et al. 2020; Briggs and Ngo 2020; Davies and Bennett 2016). The increase in child marriages during this time is due to the underlying drivers of child marriage, namely, poverty, barriers for girls staying in or returning to school, the taboo around female sexuality linked to the perceived "shame" of a pregnancy out of wedlock and limited SRH services, all of which are heightened during a crisis.

4. Learning from Ebola

The discussion around the drivers of early marriage has highlighted some of the major vulnerabilities facing Niger. As the largest country in WACA, it has a vulnerable economy, low literacy and lack of infrastructure with little access to health care (Tchole et al. 2020). Whilst crises are complex and multifaceted, these prevailing conditions can multiply the factors that allow for child marriages. Outbreaks can worsen existing vulnerabilities, inequities and distrust in society. By looking at previous response efforts to outbreaks, the following discussion will show why, together with implementing public health interventions, it is crucial for authorities to respect the human rights and dignity of everyone and to be responsive to the needs of the vulnerable. Attention to societal needs, GBV, safeguarding and pathways to exploitation is especially crucial. Experience from the Ebola outbreak is important as it highlights the need for urgent action both to prevent and respond to the vulnerabilities faced by girls and women, including early marriages (Brolin Ribacke et al. 2016). Implementation of measures during pandemics without a concomitant plan to implement holistic approaches that take into account not only containment issues but socio-cultural issues as well is crucial. In addition, a failure to do so will impact the achievement of all of the SDGs.

When COVID-19 was first detected in WACA during February 2020, governments responded by closing borders, restricting internal travel, initiating curfews and closing schools and market places (Van Damme et al. 2020). The 2020–2021 coronavirus shutdowns have been reported as being almost a parallel situation to what took place in West Africa during the largest Ebola outbreak of 2014–2016 (Bhatti 2020). With the intensity of the EVD outbreak concentrated in Guinea, Liberia and Sierra Leone and a few outbreaks elsewhere in the region (Omilabu et al. 2016), the response efforts in these three most affected countries have produced potential lessons for all West African countries, including Niger (Omilabu et al. 2016). Looking at the experiences of the Ebola pandemic in these countries should serve as a blueprint for governments to be proactive and take preventive measures to limit the impact of future outbreaks on early marriage.

During the current COVID-19 pandemic throughout the Ebola outbreak, rapid contagion saw the governments of WACA implement three main policy responses. The first was aimed at tracking infections whilst also transforming some health facilities into Ebola holding centres, the second was the closure of schools for the 2014–2015 academic year, and the third involved the governments' imposed lock-downs and travel bans (Bandiera et al. 2018). A consequence thereof and a major lesson learned was that the crisis demonstrated, amongst others, how easily infectious diseases can overwhelm a fragile health system (Delamou et al. 2017; Elston et al. 2015; Evans et al. 2015).

Of particular concern has been the 'feminisation of the EVD' during the outbreak (Davies and Bennett 2016). The collapse of the health care system meant access to standard medical services, such as antenatal and maternal care, was severely hampered during the outbreak (Elston et al. 2015). A combination of capacity constraints and fears that hospitals were breeding grounds for the virus led to considerably fewer girls and women accessing antenatal care or giving birth in health facilities during the crisis, increasing mortality and morbidity (Bandiera et al. 2018). In addition, efforts to stop the EVD pandemic led to a decrease in access to reproductive health information, loss of livelihoods, a loss of education and a contraction of social support networks (Van Damme et al. 2020). These severely undermined strategies to end harmful practices like child marriages, effectively threatening the progress that had been made over the past decade (UNICEF 2020b).

The schooling policy response to the virus had a particularly acute impact on young girls. The Ebola pandemic forced Sierra Leone and Liberia to close more than 10,000 schools for up to 10 months to contain the virus. This prevented approximately five million children from attending school in countries with already very low rates of educational attainment to begin with (UNICEF 2020b). The closure of schools in response to Ebola disrupted the education of girls who were already lagging behind that of boys (UNW 2015) and resulted in the loss of one year of human capital accumulation. Evidence indicates that in these two countries, which have some of the world's poorest and who are still recovering from the effects of more than a decade of civil war, girls continue to be unduly affected due to the EVD pandemic (Bhatti 2020).

The EVD outbreak also showed that the longer girls were kept out of school the greater the probability that they would not return (Villegas et al. 2021). Moreover, without the protection of time in school, girls were more exposed to early pregnancy and sexual abuse (Bandiera et al. 2018; Burzynska and Contreras 2020), which, together with a families' fears of stigmatisation and "dishonour", led to families marrying off their adolescent teens, increasing the rates of early marriages (Morgan 2015).

Additionally, pre-existing gender notions and the economic burdens faced by families during the pandemic meant that there was a higher probability of boys returning to schools, as opposed to girls (Villegas et al. 2021). A preference to invest in the education of boys because of preconceived notions of the status of girls in society meant that girls took over the domestic responsibilities (Burzynska and Contreras 2020). Domestic responsibilities were also absorbed by the girl-child in the event of the death of a parent or both parents (Burzynska and Contreras 2020). When harmful gender norms (Gemignani and Wodon 2015) and family "honour" are combined with real or perceived insecurity, this leads families to marry their daughters as a way to prevent pregnancies outside of marriage and to gain some kind of financial security (Morgan 2015).

As indicated, school closures were also associated with an increase in adolescent pregnancies (Villegas et al. 2021). Following the Ebola crisis in Sierra Leone and Liberia, there were huge spikes in pregnancies (Bhatti 2020). According to UNICEF, school closures in Sierra Leone during the 2014–16 Ebola outbreak contributed to a doubling of cases of adolescent pregnancies to some 14,000 teenage pregnancies (UNICEF 2020a).

Furthermore, discrimination against pregnant girls and social norms tends to exclude pregnant girls and/or young mothers from returning to school (Gemignani and Wodon 2015). Following the re-opening of schools after the EVD crisis and because of the formal ban on pregnant girls (Bandiera et al. 2018), pregnant adolescent girls faced specific stigma

and discrimination in returning to school (Elston et al. 2015). To avoid the stigma associated with out-of-wedlock pregnancies, families were more inclined to marry off their daughters.

The crisis also impacted economic opportunities for all. However, each policy response had further, albeit unintended, consequences for women (Burzynska and Contreras 2020). In a region where women are mostly engaged in the informal sector (Bandiera et al. 2018), restrictions on movement and closure of market spaces impacted family incomes, and with little or no social protection it drove more families into poverty (Bandiera et al. 2018; UNDP 2017; Evans et al. 2015) and consequently increased the incidence of child marriages.

It is apparent that the EVD response efforts to the crisis focused primarily on a combination of containment and mitigation measures to delay a surge in cases that could overwhelm the health sector. This prioritisation, however, entirely neglected the disproportionate effect that it has had on the girl-child. The pandemic has also demonstrated that multiple forms of violence are exacerbated within crisis contexts, including child marriage, sexual exploitation and abuse. It also highlights the consequences of failing to adopt a gender perspective on pandemics (Yaya et al. 2019). The economic strain caused by the lock-down places an additional burden on already vulnerable communities (Kumala Dewi and Dartanto 2019). The loss of income forces families to marry off their young girls, perceiving them as financial burdens (Johansson 2015). These issues faced by the girl-child translated to a drastic increase in child marriage during the Ebola outbreak (Monla-Hassan and Yacoubian 2020).

The lesson is that Niger must tailor scientifically and culturally sound public health actions with an aim on preventive interventions, rather than relying on a therapeutic approach that would overwhelm the country and region. A strong response to COVID-19 and future pandemics will require building on these lessons. In addition, any effective response effort must additionally be cognisant of the context and pathways through which the current COVID-19 pandemic has increased the risk of child marriage.

5. Learning from COVID-19: Pathways That Increases the Risk of Child Marriages

The above discussion signposts that the COVID-19 pandemic is raising the risk of child marriage through various pathways, including but not limited to interrupted education, economic shocks, disruptions to programmes and services, death of a parent and an increase in GBV. It is acknowledged that while these five factors are likely to affect child marriage in all settings, additional contextual factors also play a role. Such factors include the overall prevalence of child marriage, the amount of marriage payments, gender and social norms, the availability of social protection and poverty alleviation programmes and the presence of ongoing conflicts and crises (Bandiera et al. 2018).

A crucial pathway to child marriage is the interruption of schooling for children (Burzynska and Contreras 2020). The COVID-19 pandemic has disrupted school systems and widened educational inequalities by shrinking opportunities for many vulnerable children (Villegas et al. 2021). The EVD outbreak has shown that the closing of schools leads to millions of girls being out of school, which leaves them vulnerable to early pregnancies, domestic violence and child marriage (Bhatti 2020). The evidence is also clear that education is a protective factor against child marriage. Families tend to make decisions about a girl's education and marriage in parallel. Thus, school closures such as those triggered by COVID-19 will push more girls towards marriage since school is no longer an option (Ayebare et al. 2020). In addition, cultural gender norms that place girls as a housewife or caregivers can dissuade a family from allowing their daughter to complete her education (Bandiera et al. 2018). In these scenarios, girls are at a much higher risk of early marriage.

Additionally, decisions around education are also directly related to economic shocks for households brought on by the government's restrictions on movement resulting in a reduction in economic activities (Ayebare et al. 2020). Social distancing requirements, business closures and travel restrictions associated with COVID-19 have all led to a drop in economic activity, the loss of livelihoods and household poverty (Davies and Bennett 2016). The resulting economic insecurity may limit the ability of parents to provide for

their children (Kostelny et al. 2016). Quarantine and lockdown restrictions, combined with lengthy school closures, increase the economic impact on vulnerable families and disincentivise children's return to school (Bandiera et al. 2018).

Disruptions to programmes and services creates two further pathways to child marriage. Firstly, pandemic-related travel restrictions and social distancing can make it difficult for girls and women to access health care (Briggs and Ngo 2020) along with programmes and services that aim to protect them from child marriage as well as sexual violence and GBV. Secondly, such disruptions intensify sexual violence and abuse of women and girls (Sri et al. 2021). Quarantines and lockdown conditions presented higher risks (Briggs and Ngo 2020), resulting in increased domestic stress, the exercise of controlling behaviours by perpetrators and restricted access of victims to services and help (Sri et al. 2021). Disruptions in such services can create difficulties in accessing the formal justice system, which can be used to curb exploitation, violence or block an illegal marriage (Denney et al. 2015). Disruptions to essential services also make it difficult to access contraception, resulting in teenage pregnancy and subsequent child marriage (Risso-Gill and Finnegan 2015; Delamou et al. 2017). A lack of access to medical facilities during outbreaks also intensifies risks during childbirth and compromises the safe delivery of children (Villegas et al. 2021).

Finally, the death of a parents can also increase the pathway to early marriage as there is a high probability that a female orphan is more likely to drop out of school to assume parental responsibility for younger siblings or be married off since family members may find it difficult to support them (Burzynska and Contreras 2020). At the peak of the EVD, some 16,600 children were registered as having lost one or both parents or their primary caregivers to EVD in Guinea, Liberia and Sierra Leone (UNICEF 2015). While boys were more likely to end up as child labourers, orphaned girls were at a higher risk of being married off early (Bakrania et al. 2020). There is therefore a clear correlation between the EVD and the gendered impacts thereof.

It is clear that these pathways to child marriage are rooted in gender inequality and driven by a complex set of factors that take root in more stable contexts and are exacerbated in times of crisis. The COVID-19 crisis has intensified some of the main social and economic drivers of early marriage and has created various pathways to child marriage. The academic evidence highlights that school closures, economic shocks, service disruptions, pregnancy and parental death due to the pandemic are putting the most vulnerable girls at risk of child marriage. The evidence reiterates the obvious, that a crisisexacerbated increase in household poverty, interrupted education together with uncertain employment opportunities, is a key driver of child marriage (Bakrania et al. 2020).

The full impact of the COVID-19 pandemic is still to be quantified. However, knowing the risks, the question then becomes: what is the best way to adapt during pandemics and the current COVID-19 to prevent more girls being married off as children? Experience from the EVD context becomes important in answering and responding to this concern. These lessons and the current dire situation highlight the urgent need for action both to prevent and respond to the vulnerabilities faced (Dala and Wreh 2015), specifically the real risks of an increase in child marriages.

6. Some Initiatives by Niger

This discussion would not be complete without looking at some initiatives by Niger to curtail early marriage. Like in the discussion on international frameworks, the aim herein is not to provide a critical analysis of these initiatives, but it is included to show that there have been some positive initiatives and to get a general understanding of why these initiatives are failing to eliminate child marriages in Niger.

Before the COVID-19 crisis, various initiatives to end child marriages were in place in Niger. For example, the Niger Government developed a multi-sector national action plan to end child marriage and adopted a decree for the protection of the girl-child in school to guarantee access and retention until age 16 (UNICEF 2019a). The programme also provided support towards the finalisation and dissemination of the National Strategic Plan on Adolescent and Youth Health 2017–2021 and the National Gender Policy and Action Plan. The programme to end child marriages supported the establishment of a multi-stakeholder collaboration between the Niger Government and UNICEF-UNFPA and created a platform that is used to advocate for better legislation in favour of the rights of adolescents (Fatratra and Abdou 2019).

In addition, the Niger UNFPA-UNICEF programme supports the Government in expanding the network of Village Child Protection Committees to promote positive practices in communities targeted by the programme (UNICEF 2018a). Education sessions by the Village Child Protection Committees were able to prevent cases of child marriage through direct mediation with parents and assisted girls to return to school. The UNFPA-UNICEF Niger programme further provides girls with comprehensive knowledge related to reproductive health personal hygiene, GBV, financial skills, gender issues and girls' personal aspirations. The initiative also aims to strengthen girls' social competencies to help them make their own decisions and to fully participate within their community.

There are various other national policies and strategies that attempt to address certain aspects of child marriage. These include the National Policy on Nutritional Security of 2018, which addresses early pregnancy, the National Gender Policy and the National Strategy for the Prevention and Management of Gender-Based Violence and its action plan, of which one of the strategic pillars addresses child marriage and includes an action plan for the reduction of early pregnancies. Nevertheless, there is no action plan that specifically addresses child marriage in a holistic way.

In addition, despite Niger having ratified a number of international agreements relating to the rights of women and children, the country is yet to review the age of marriage amongst girls in line with these international commitments.

It is clear that Niger has adopted some national strategies to end child marriages, but what is more apparent is the absence of action plans aimed at increasing investment in the poorest with clear interventions to delay early marriage. In addition, COVID-19 has caused many of the initiatives to stall, further impacting child marriage, and yet response policies and programmes remain silent on this harmful practice. More than a year into the pandemic, action is urgently needed to prevent and mitigate the toll of COVID-19 on children and their families. The need for a COVID-19 response strategy that extends beyond health and that prioritises a broader set of rights that includes a gendered approach is a necessity. There must be a significant increase in efforts to end child marriage and stepping-stone targets for groups with the highest rates of child marriage must be set.

This has particular significance for the achievement of Niger's SDGs. Since the rate of child marriages has remained consistently high over the last decade and, together with the twin effects of the pandemic, this means that the government must act to significantly increase the rate of progress to meet its SDG targets and commitments (Wodon et al. 2017).

Reversing the current impact of a pandemic trend in Niger will require rethinking the governance of the response. The following conclusions and recommendations will consequently focus on the kinds of proactive responses that are required.

7. Conclusions and Recommendations

Child marriage is a human rights violation. It is seen as one of the main challenges impeding the full realisation and enjoyment of children's rights and it is also one of the main obstacles to the attainment of the SDGs (Clark 2017). An increasing number of countries, including Niger, which has the highest rate of child marriages globally, have committed to working towards gender equality and the elimination of all harmful practices (Yaya et al. 2019). Addressing child marriage is, however, a complex issue and requires recognition of the various factors that contribute to the perpetuation thereof.

This study has highlighted that even before the COVID-19 crisis, a number of inequitable and gender-reinforcing norms related to poverty, barriers for girls staying in or returning to school, stigmas arising out of the perceived "shame" of a pregnancy out of wedlock, limited SRH services and information are heightened during a crisis. The impact of the COVID-19 pandemic has exacerbated these existing inequalities and gender-norms in society and risks undoing decades of progress for girls' human rights, including gender equality (Rivera 2011).

Whilst the Ebola outbreaks have shown that gender matters, the responses have, however, struggled to effectively address the gendered impact thereof. The vast majority of activities to address the health impacts of the current COVID-19 pandemic have ignored the role of gender and the disproportionate impact that this has had on the adolescent girl (Wenham et al. 2020). This failure has resulted in gender-blind pandemic responses that are less effective than they should be, with grave consequences for the most marginalised and discriminated sections of society. The Ebola outbreak and the current COVID-19 pandemic without a concomitant plan to implement holistic approaches that consider not only containment issues but socio-cultural issues as well negatively impact the girl-child, leading to an increase in child marriages (Harman 2016).

This article therefore calls on Niger and the WACA region to learn from the past in order to show progression towards gender equality and towards the elimination of all harmful practices as articulated in the SDGs. The findings in this research suggest a number of potential opportunities to delay child marriage in Niger during a crisis. Based on these study findings, key recommendations are discussed below.

7.1. Holistic Approach

Any intervention must be developed in a participatory and inclusive manner and include a national action plan that is operational, holistic, coordinated, budgeted and considers the cultural and traditional specificities of Niger. Inclusiveness and participatory interventions mean that Niger women and girls must be included in all post-crisis discussions. It remains crucial that the government aims to also prioritise the promotion and protection of the rights of girls. These responses are important to prevent, respond to and eliminate the practice of child marriage, especially during crises (Wodon et al. 2017).

7.2. Strengthen Legal Framework

The ongoing practice and high prevalence of child marriage in Niger points to the governments' failure to comply with its international and regional human rights obligations (Lagoutte et al. 2014). As a signatory to *CEDAW*, *CRC* and the ACRWC, amongst others, Niger is bound to uphold its commitment to the protection of women and children. To strengthen legal protection against child marriages, Niger should uphold their international and regional commitments by harmonising conflicting dispositions of domestic legislation with international human rights standards (Smaak and Varia 2015). Niger must therefore make a concerted effort to realise the implementation of the provisions pertaining to child rights in order to combat the adverse consequences of child marriage. An amendment to the *Civil Code* to raise the minimum age of marriage for girls to 18 would be an important step towards this goal.

7.3. Strengthen Policy Frameworks

As a result of the pandemic, millions of girls are at risk of becoming child brides by 2030 (Yaya et al. 2019). However, this is not a foregone conclusion. The opportunity to mitigate the impact of the pandemic and prevent additional child marriages is at hand. Effective programming measures could delay the age at first marriage and lower the risk of marrying in childhood. Such measures could reduce the additional number of child brides. The government of Niger should focus on adopting programming and policy efforts related to child marriage to target adolescent girls in gender-synchronised ways, and they must invest in providing resources to effectively implement comprehensive national strategies to end child marriage as a key component in the effort to realise girls' rights. Based on the evidence from previous pandemics, child protection responses to those affected by

COVID-19 may usefully focus on some of the key risk factors identified in this research (Bahl et al. 2021; Burzynska and Contreras 2020; Brolin Ribacke et al. 2016).

7.4. Keeping Schools Open and Ensuring Continued Learning

It is clear that school closures increase the risk of early marriage. The literature suggests that one of the best ways to prevent marriage for adolescent girls is to keep them in school. However, for girls to remain in school efforts are needed to address discrimination and social norms that determine the opportunities and potential futures available to girls. Education for girls is crucial to countering child marriage because schools provide an arena of empowerment, limit girls' perceived dependence on a spouse for a stable future and provide the prospect of a future career (Villegas et al. 2021).

To this end, promising interventions aimed at keeping girls in school and providing them with possible opportunities are crucial in the fight against early marriages. Investing in such interventions, documenting the impacts of these interventions and implementing a broad range of gender transformative policies will all be key to ensuring a better future both for girls and the country as a whole (Wodon et al. 2017).

However, where it is clearly impossible to keep schools open, Niger must explore and implement alternative methods of continuing education during times of crises (Azevedo et al. 2020). For example, investment in remote learning facilities during COVID-19 and other pandemics must be explored to ensure that girls are able to effectively access distance and online learning opportunities. Where the internet is not available, educational material could be sent through the post (if possible) or classes can be held via radio to ensure schooling continues. Schools and education are key factors in the fight to reduce early marriages.

7.5. Responding to Orphans

Key approaches to responding to the vulnerable situation of orphans may include social protection by, for example, providing economic support for persons designated with their care or providing meals and access to other resources and services. Other approaches could also include educational interventions through the provision of school uniforms and educational materials as well as sponsorship of tuition and communitybased interventions that seek to empower and educate these children with life skills (Villegas et al. 2021; Ayebare et al. 2020; Richardson et al. 2016).

7.6. Investing in Social Protection

In addition, the government must strongly advocate for social protection to prevent an increase in child marriage as a negative coping mechanism (Ayebare et al. 2020). Social safety nets could help lessen financial burdens during times of crises and thereby decrease the chances of school dropout. For example, to relieve the financial pressure of school closures on vulnerable groups, governments and schools should provide food services to those who face food insecurity. Governments should also consider providing basic income grants to families with young children who have lost their livelihoods due to the pandemic. This could serve as an incentive against turning to child marriage as a financial solution. Expanding social safety nets may also contribute towards providing survivors of sexual violence and exploitation with access to justice and medical services (Sri et al. 2021).

7.7. Access to Health, Protective Services and Justice

Safe spaces should be made available to all, especially adolescents during crisis settings. This study emphasises the importance of also prioritising services to respond to issues of violence against women and girls (Yaya et al. 2019). This includes ensuring access to healthcare workers and to safe spaces, as well as increasing communication and awareness of services through advocacy. The evidence finds that the lockdown limited access to formal justice. Governments and NGOs should create a child marriage hotline for girls at risk of early marriage during the pandemic, with access to over-the-phone

health resources such as reproductive health information. These services must form part of a preventive and responsive policy if Niger is committed to reducing the rates of child marriages and achieving its SDGs.

7.8. Evidence Gathering and Research

It has also become clear that there is a dearth of and a crucial need for country specifics on the impact that the pandemics have and continue to have on women and girls. In addition, there remains a continuous need for further research on the effects of infectious outbreaks and other crises focusing specifically on detailed interventions and their impact on women and girls. Niger must invest in learning, monitoring and conducting research about what is happening during the crisis in order to inform efforts to end child marriage during the pandemic and beyond. Consequently, the government must invest in evidence gathering and research throughout the pandemic to prepare for programming after the crisis and to measure the success of any post-crisis recovery interventions.

7.9. A Gendered Approach

One of the main problems identified in this research has been the lack of a comprehensive, integrated and gendered response to pandemics. Ebola has shown how the crisis disproportionately impacts girls and how they are further impacted by school closures and barriers to re-enrolling, disruption to economic and health facilities and access to justice (Briggs and Ngo 2020; Burzynska and Contreras 2020). Preventive measures aimed at girls must therefore be included in any crisis-related response, including the response to this COVID-19 pandemic. At the forefront of their post-pandemic recovery strategy, Niger must collaborate with non-governmental organisations (NGOs) to prioritise initiatives that advance gender equality. The Niger government and NGOs must ensure that pandemic preparedness and response plans are grounded in children's rights and gender analysis. They must also address the increased risks of GBV for adolescent girls and ensure that the COVID-19 pandemic response does not undermine efforts to end child marriage.

In the short term, programmes need to be adjusted to incorporate child marriage prevention alongside other initiatives aimed at curbing the spread of the virus and the social and economic repercussions of the pandemic. Over the medium and long term, numerous measures can be taken to address the consequences of COVID-19 on child marriage. Niger must include a comprehensive post-pandemic approach to involve girls' health and safety mechanisms in addition to the standard public health precautions. This could involve the active distribution of educational and medical resources necessary to circumvent child marriage as a solution to financial and cultural barriers. Ending the practice of early marriage also requires long-term cultural and attitudinal change within communities and the creation of sustainable and viable alternatives.

Finally, since early marriage fundamentally alters the course of a girls' life, the full effect of the pandemic on human development will play out over a generation. Therefore, interventions will be needed to improve the well-being and prospects of girls, whether in or out of marriage or before, during or after a pandemic. The task of addressing child marriage as part of a response to the pandemic is consequently vital. Waiting until the pandemic is over will be too late to mitigate its impact on child marriage. Without aggressive interventions and response efforts, Niger will revert to the same cycles of poverty and harmful practices, leaving millions more young girls to never fully realise their guaranteed human rights.

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