























SIERRA LEONE COUNTRY PROFILE

Sierra Leone is home to 800,000 child brides. Of these, 400,000 married before age 15.

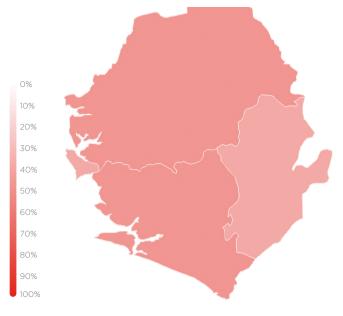
Source: UNICEF global databases, 2020. Demographic data are from United Nations, Department of Economic and Social Affairs, Population Division (2019). World Population Prospects 2019, Online Edition. Rev. 1.

Notes: For details on the calculation of girls and women married in childhood, see: United Nations Children's Fund, Child Marriage: Latest trends and future prospects, UNICEF, New York, 2018. Values below 2 million are rounded to the nearest hundred thousand.



Married before age 18





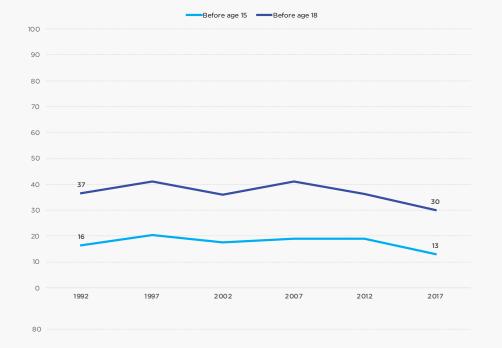
Percentage of women aged 20 to 24 years who were first married or in union before age 18

Note: This map is stylized and not to scale. It does not reflect a position by UNFPA or UNICEF on the legal status of any country or area or the delimitation of any frontiers. Source for child marriage prevalence data is Sierra Leone Multiple Indicator Cluster Survey (MICS) 2017.

Percentage of women aged 20 to 24 years who were first married or in union before age 15 and before age 18

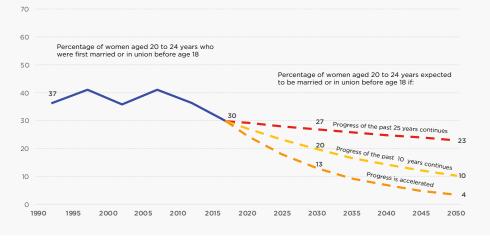
Source: Sierra Leone MICS 2017

Note: This trend analysis is based on the prevalence of child marriage across age cohorts, as measured in the latest available survey.



Projections of the prevalence of child marriage

Source: UNICEF analysis based on the Sierra Leone MICS 2017



Message from UNFPA and UNICEF Sierra Leone country representatives



Dr. Kim Eva DicksonUNFPA Sierra Leone country representative



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The first phase of the Global Programme to End Child Marriage was implemented between 2016 and 2019 as an important response to the high rate of child marriage in Sierra Leone. Phase I helped to sharpen the focus of work to end child marriage by putting the Government, communities and children themselves at the centre of efforts to promote the required cultural, social and legislative changes at all levels of society.

For example, UNICEF's support for sensitization of 149 Paramount Chiefs have placed them in a better position to identify and refer potential or actual child marriage cases to service providers. More girls, on the other hand, are now participating in information sharing and other empowerment initiatives that are designed to help them delay marriage. Through UNFPA's work on upgrading adolescent-friendly facilities, adolescent girls are increasingly able to benefit from services rendered through separated and confidential spaces thus expanding the potential for use of these services.

The successes from Phase I have built a strong foundation for sustainable change for girls in Sierra Leone in the area of ending child marriage. In many ways, the programme represented the best of the United Nations: effective multilateral partnerships, interagency cooperation and mutually reinforcing programme work between UNFPA and UNICEF on a national scale with a strong impact for the most vulnerable in the most hard-to-reach places.

These combined efforts were only possible with the generous and unwavering support of donors whose commitment to ending child marriage and supporting the girls and young women of Sierra Leone allowed all of the important work to take place on the ground. In this regard, we express gratitude to all of our donors, and all of those contributing to the UN Joint Fund. We also must commend the Government of Sierra Leone for their openness, commitment and ambition in working with UNFPA and UNICEF to tackle this issue.

We would be remiss if we do not recognize and thank the tireless work of all UNFPA and UNICEF staff at the country level in Sierra Leone. Working with the Government, civil society, and other stakeholders, they made Phase I the success that it is. We will now strive to ensure that Phase II builds on Phase I to drive even greater progress in the context of leaving no one behind as an effective strategy for accelerating an end to the harmful practice of child marriage once and for all.

Country movement to accelerate action to end child marriage: Key moments and achievements of Phase I

In Phase I, the Global Programme in Sierra Leone deepened partnerships with the government to accelerate action to end child marriage, and provided data and evidence with advocacy to promote policy change and legal reform at various levels.

Significant achievements in Sierra Leone since the inception of the Global Programme include:

57,709 adolescent girls aged 10-19

have participated in at least one programme intervention aimed at empowering them

with skills and information to delay child marriage.

8,956 adolescent girls aged 10-19

have been supported by the programme to enroll and continue with their education to delay child marriage. 56,336

individuals in the community

have been engaged and regularly participated in dialogues promoting genderequitable norms including delaying child marriage.

11

community health centres and health posts

were renovated by the Global Programme and upgraded

to include separate and confidential spaces, including waiting rooms, for the provision of services to adolescents and youth.

A costed, multisectoral National Strategy for the Reduction of Adolescent Pregnancy and Child Marriage (2018–2022)

was launched in **December 2018** by the President alongside the 'Hands Off Our Girls' flagship programme of the First Lady.

Age-appropriate information on sexual and reproductive health, life-skills, financial literacy and livelihood skills were provided to adolescents using a government-validated and standardized national life-skills manual.

149 Paramount Chiefs developed and are implementing

293 community

action plans

which resulted in increased awareness on violence, identification and referral of cases of abuse to service providers, and monitoring and follow-up on incidences for timely redress; similarly

6

Memoranda of Understanding

on ending child marriage

were signed with the Paramount Chiefs and local chiefs in the six operational districts comprising **120 communities**.

Phase I Country Programme Strategies

The primary strategic approaches taken in Phase I by the Sierra Leone country programme are as follows:

1. Sustained adolescent empowerment and engagement

Applying the standardized national life-skills manual to capacitate and empower girls to make better choices in life.

2. Community mobilization for social norms change

Reaching out to traditional and religious leaders, and community members (men, women, boys and girls) to promote adolescent girls' empowerment.

3. Fostering policy, multisectoral coordination, advocacy, service delivery and legal environment

A costed, multisectoral National Strategy for Reduction of Adolescent Pregnancy and Child Marriage (2018–2022) was launched in December 2018. 4. Scaling up programmes in other sectors
Working in the sectors and thematic areas
of education, health, social welfare, social

of education, health, social welfare, social protection and peacebuilding to improve on service delivery.

5 Improving evidence generation and use of data by investing in research to inform current programmes

Coordinated studies on child marriage to inform policy and programming.



EMPOWERING ADOLESCENT GIRLS WITH SKILLS AND INFORMATION

In 2019:



26,192 adolescent girls aged 10-19

in programme areas actively participated in at least one targeted intervention

In July 2019, a road map for implementation of comprehensive sexuality education (CSE) was developed following the national stakeholder meeting that reviewed the sexuality, education, review and assessment tool (SERAT). In December 2019, the Reproductive Health Taskforce was set up to address radical inclusion in education.

The task force has a specific working group on CSE.

Since 2016:



57,709 adolescent girls aged 10-19

in programme areas actively participated in at least one targeted intervention

Results from 2016–2019 programme implementation

During Phase I of the programme, the government provided support to create a framework for age-appropriate sexual and reproductive health information and education through the launch of the *National Life-Skills Manual* for in-school and out-of-school adolescents. Training was provided to over 200 national life-skills trainers to scale-up life-skills training.

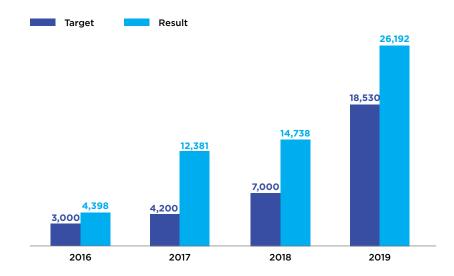
The life-skills education, facilitated by mentors, was provided to adolescent girls in the community through girls' clubs. Adolescent girls in the clubs were segmented by age (10-14 and 15-19) to ensure that age-appropriate information on sexual and reproductive health and life-skills was provided to those both in-school and out-of-school to enable them to develop their leadership skills, self-esteem and to make informed choices. The mentors had refresher training on the National Life-Skills Manual to increase their knowledge in facilitating life-skills sessions in the girls' clubs. The girls acquiring livelihood skills also had sessions on life-skills to enable them make informed choices.

Those who finished their training in livelihood skills graduated and were provided with start-up kits to start their own small enterprises to enhance their economic status in the community.

Overall, 57,709 adolescent girls actively participated in at least one targeted intervention supported by the Global Programme during Phase I. Furthermore, UNICEF engaged 28,447 adolescents aged 15-19 as 'U-Reporters', who used the social messaging platform U-Report to undertake polling on issues concerning young people at least four times throughout the year.

A retrospective study conducted in 2018 on the social drivers and dynamics that encourage child marriage within targeted areas of the Global Programme revealed that 47 per cent of girls scored fairly well on the self-efficacy scale compared to 30 per cent in the comparison areas.

Number of adolescent girls (aged 10-19) in programme areas actively participating in at least one targeted intervention



Challenges

Challenges include availability of real-time data on the attendance number of the girls, the high cost of production of the life-skills manuals, and the standard package for girls' participation in the safe space.

Support should be provided for girls who have left school – including girls with young children – to re-enter school. This is challenging for many reasons, including the need for childcare for the children, but this may be the best way to keep these girls from falling further into poverty and social isolation and from having additional children throughout their teen years.

Lessons learned

There is a need to improve the quality, scale and reach of programmes that directly target adolescent girls, especially for the most marginalized, leveraging, coordinating and complementing other government, United Nations and civil society-led initiatives in line with the national action plan.

Shifts in Phase II

The programme will support work on standardizing the curriculum of safe spaces, incorporating the relevant topics from the national standardized life-skills manual, while also developing a more effective tool (including establishment of criteria) to map out adolescent girls looking at their vulnerabilities, and measuring the changes in the participating girls' attitudes and behaviours as a result of the interventions.



EMPOWERING GIRLS THROUGH EDUCATION SUPPORT



8,956

adolescent girls
in programme areas
supported to access
and remain in primary
or lower secondary
school or non-formal

education

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Results from 2016–2019 programme implementation

During Phase I, the Global Programme supported girls who had dropped out of education to return to school, and girls at risk of dropping out to remain in school. The support included coverage of the costs of school fees, uniforms, books, school bags and other supplies. 8,956 girls were supported to return to formal education.

About 68,088 primary and junior secondary school-level girls in programme areas also benefitted from complementary support through the Girls' Access to Education (GATE) project and other projects to remain in school. The girls were supported specifically with provision of school materials and uniforms.

Challenges

The closure of the GATE programme in September 2019 has created a gap in education support for girls. Hence, funding for and complementary approaches to providing services that help adolescent girls access formal education, as well as to providing informal learning opportunities, must be re-evaluated.

It has been observed that there is a lack of communication and coordination between the Ministry of Social Welfare, Gender and Children's Affairs and the Ministry of Basic and Secondary Education, exacerbated by the limited capacity of the National Secretariat for the Reduction of Teenage Pregnancy (which also handles child marriage) to facilitate the dialogue between the two ministries.

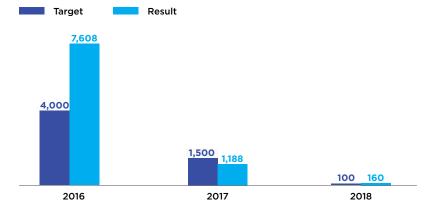
Lessons learned

School-related gender-based violence (GBV) such as corporal punishment, bullying and sexual harassment, exploitation and abuse are prevalent in schools and school communities in Sierra Leone. It has been observed that involving relevant stakeholders in addressing school-related GBV has helped to enhance the safety and retention of girls and other vulnerable children. But there is need for research and documentation to validate this observation and learn about applying a whole school approach to prevent school-related GBV.

Shifts in Phase II

In Phase II, education systems will be better supported to provide comprehensive sexuality education and quality services, and ensure that adolescents are reached and equipped to use those services.

Number of adolescent girls in programme areas supported to access and remain in primary or lower secondary school or nonformal education



SOCIAL AND BEHAVIOURAL CHANGE COMMUNICATION TO INFLUENCE SOCIAL AND GENDER NORMS

In 2019:



580

individuals

in programme areas regularly participated in dialogues promoting gender equitable norms including delaying child marriage

Since 2016:



59,536

individuals

in programme areas regularly participated in dialogues promoting gender equitable norms including delaying child marriage

includes 13,418 boys and men

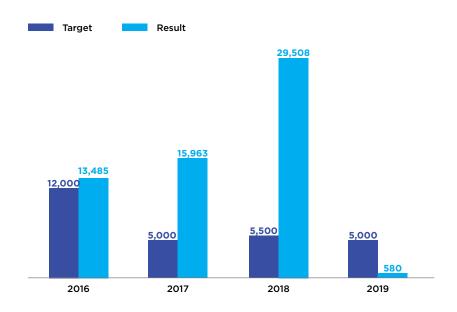
Results from 2016–2019 programme implementation

Community engagements and generational dialogue sessions were held with men, women, boys and girls among key stakeholders, parents and guardians, Sowies (secret societies), herbalists, religious leaders and traditional leaders, and community-based groups in a bid to address the negative effects of harmful practices including child marriage. These groups are engaged as they play a key role in organizing, participating in and supporting community dialogue sessions with parents and guardians, which create platforms for duty-bearers at the community level to discuss and explore ways to address issues that affect their children's future. The participants are also reminded of the national laws and local bylaws that protect children, women and girls in the communities and that they are accountable to uphold these rules, and promote positive attitudes and actions.

During Phase I, through engagements with the Inter-Religious Council, 500 religious leaders across the country made a symbolic pledge not to solemnize the marriages of minors. Overall, 59,536 individuals regularly participated in community dialogues promoting gender-equitable norms including delaying child marriage. The programme also supported the Inter-Religious Council to organize campaigns within the community, in which 3,200 individuals participated.

A retrospective study conducted in 2018 on the social drivers and dynamics that encourage child marriage within targeted areas of the Global Programme revealed that 40 per cent of individuals agreed that the family should decide at what age a girl should be married.

Number of individuals in programme areas who regularly participate in dialogues and/or are reached with media campaigns promoting gender equitable norms including delaying child marriage



Challenges

Based on the findings from the retrospective study in 2018, a lot more can be done on gender-transformation by fostering critical examination of inequalities and gender roles, norms and dynamics. This is partly a result of the lack of resources and capacity of partners in tailoring the activities to specific groups of people (men, women, boys and girls) and as such, the dialogues could not go deep enough to address power dynamics and structures.

Lessons learned

Discriminatory social norms lie at the root of negative behaviours and tend to perpetuate harmful (and often gender-biased) practices such as child marriage. Promoting positive social norms is a key strategy to address elimination of harmful practices and more largely to prevent violence. Understanding how much norms really motivate action among the various

behavioural drivers, as well as being able to show rigorous evidence, is crucial for the development of programming on social norms, and its subsequent monitoring.

Shifts in Phase II

Phase II will focus on improving parenting practices and transforming harmful masculinities and gender roles through building knowledge, awareness and understanding in communities, focusing on men and boys, parents and caregivers, and traditional and religious leaders.



STRENGTHENING PREVENTION AND PROTECTION SYSTEMS

In 2019:



25,296

adolescent girls

in programme areas have utilized health or protection services

Since 2016:



138
service
delivery points

in programme areas implement guidelines for adolescent girlfriendly health and protection services



non-formal/ primary/secondary schools

implement interventions to improve the quality of education for adolescent girls

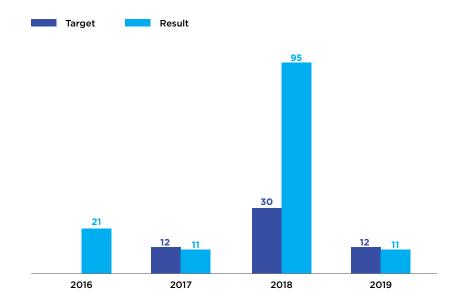
Results from 2016–2019 programme implementation

During Phase I, the Global Programme provided support towards the renovation of 11 health centres and community health posts to include separate and confidential spaces for provision of adolescent-friendly services in three districts where adolescents faced challenges to accessing services. Overall, 25,296 adolescent girls have accessed services in these facilities. According to the 2018 retrospective study, 21 per cent of the adolescent girls interviewed mentioned accessing health or protection services during the previous 12 months.

The programme strengthened the capacity of social workers, family support unit officers, community learning centre coordinators and school guidance counsellors through training in efforts to increase awareness of gender-based violence, prevention strategies and response mechanisms, and to strengthen actions in these areas. The programme worked with village development committees to coordinate all community structures that include child welfare committees, mothers' clubs, mother-to-mother support groups and Paramount Chiefs. Paramount Chiefs and their 225 communities developed, and are implementing, community action plans, resulting in increased awareness on violence, identification and referral of cases of abuse to service providers, and monitoring and following up on incidences for timely redress.

The programme supported 200 junior secondary schools to implement interventions to improve the quality of education for adolescent girls.

Number of service delivery points in programme areas implementing guidelines for adolescent girl-friendly health and protection services



Challenges

Referral for services and follow-up is a big challenge. The health workers visiting the schools and learning centres will refer the girls for services but will not follow-up with the data as to the services provided. Referral slips were found to be utilized but not recorded.

Lessons learned

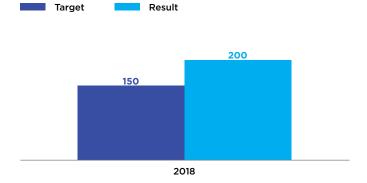
Integrated service provision will enhance coordination and linkages for both protection and health services.

Constant engagement at the highest level with policymakers to ensure that comprehensive sexuality education and the benefit of it to girls and boys is understood for enhancing the quality of education.

Shifts in Phase II

The priority for Phase II is to strengthen the school health programme to better cater to the needs of adolescents.

Number of non-formal/primary/secondary schools implementing interventions to improve the quality of education for adolescent girls





STRENGTHENING LEGISLATIVE AND POLICY FRAMEWORKS

The country
has a national
strategy and
costed national
action plan on
ending child
marriage

Results from 2016–2019 programme implementation

Sierra Leone now has a National Strategy for the Reduction of Adolescent Pregnancy and Child Marriage (2018–2022) which is integrated into national and regional development plans and frameworks through a nationwide coordination mechanism led by the National Secretariat for the Reduction of Teenage Pregnancy. The National Strategy for the Reduction of Adolescent Pregnancy and Child Marriage is a follow-on to the National Strategy for the Reduction of Teenage Pregnancy (2013–2015). The increasing recognition of child marriage as a problem in the country has led to the need to address the two issues jointly as they are interlinked.

Through the work of the Global Programme, 225 community action plans to end child marriage and teenage pregnancy are being implemented across the target districts, and are regularly updated by coordination committees. There is also improved coordination at chiefdom, subnational and national levels, where meetings take place regularly with multisector stakeholders from sectors such as education, health and child protection, to agree on concrete steps for policy implementation.

The programme supported the Law Reform Commission in conducting a validation exercise of the existing laws. Based on the recommendations, a draft bill to harmonize the Child Rights Act (2007) and the Customary Marriage and Divorce Act (2009) was submitted to the Members of the Parliament in 2018.

However, the review and finalization has been slow. Progress made in other areas includes a review of relevant laws on sexual violence and related issues (including child marriage), which resulted from a heightened national level of awareness of sexual violence in households and communities. This led to advocacy actions and flagship campaigns such as the 'Hands Off Our Girls' campaign supported by the First Lady. The campaign addresses wider objectives concerning young women's and girls' empowerment and education, as well as issues such as gender-based violence, rape, and all forms of abuse and discrimination against women and girls.

Challenges

A national three-year work plan to implement the National Strategy for the Reduction of Adolescent Pregnancy and Child Marriage was developed based on key priorities with the process being led by the National Secretariat for the Reduction of Teenage Pregnancy. However, they do not have the capacity to actually coordinate and lead the implementation of the work, which results in fragmented work being carried out across the districts by various partners. Furthermore, a bill on the prohibition of child marriage has been developed but its enactment is pending, although the legal framework has been reviewed by members of parliament.

Lessons learned

Ending child marriage requires strong multisectoral coordination between ministries, departments and agencies to ensure that a quality, evidence-based programme is delivered, but this is a challenge in Sierra Leone. Building government ownership has been difficult in the past. Efforts will be made to increase ownership and build capacity as the programme will support areas and structures across various sectors identified and prioritized by the government.

Shifts in Phase II

UNFPA and UNICEF will continue to foster an enabling legal and policy environment, support government leadership, financing and accountability, and ensure that civil society, youth-led organizations and women's rights organizations, researchers, media, traditional and religious leaders and other influencers are engaged, consulted and contribute to developing effective actions to end child marriage.

STRENGTHENING DATA AND EVIDENCE

Results from 2016–2019 programme implementation

The programme provided support in convening workshops to prepare Sierra Leone's Sustainable Development Goals (SDGs) adaptation report. The SDGs were integrated into the 2016 National Budget and have been aligned with the eight pillars of Sierra Leone's third-generation poverty reduction strategy paper.

The programme supported a secondary analysis of the 2015 Census as well as the 2013 Demographic and Health Survey data on child marriage. The analysis assessed trends over a five-year period to examine the prevalence of child marriage and its associated proxy

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factors. The study provided much data to monitor progress towards ending child marriage in Sierra Leone and to document and better understand the proximal and distal determinants of child marriage.

In 2018, the programme conducted a retrospective study on the social drivers and dynamics that encourage child marriage. Findings from the study were used to contextualize the theory of change for Phase II of the programme as well as to inform the design of the Phase II of the programme.

Challenges

Measurement of social norms has been a challenge during Phase I. Understanding how much norms really motivate action among the various behavioural drivers, as well as being able to show rigorous evidence, is crucial for the development of programming on social norms, and its subsequent monitoring.

Lessons learned

With the complexity of the issue, a number of strategies and actions are required for the overall aim of empowering adolescent girls to make decisions about marriage, within a supportive environment that involves their families, the community, society and public structures, institutions, systems and services. At the same time, a key lesson learned from the studies is that the Global Programme needs to simplify the work and our approach. In Phase II, the programme will focus more on quality rather than quantity, on convergence rather than widespread coverage, and on building a sustainable programme – with sustainable approaches – to end child marriage.

Shifts in Phase II

UNICEF, with the Ministry of Social Welfare, Gender and Children's Affairs, has commissioned an ethnographic study on female genital mutilation in Sierra Leone that seeks to generate qualitative data to guide the development of interventions to address the issue of female genital mutilation, including monitoring and evaluation, and especially on how to move forward the National Strategy for Ending Female Genital Mutilation review and implementation. The programme expects there will be significant implications to the work on child marriage, as the two issues are intricately linked. UNICEF will also continue the work on social norms change and behavioral drivers, including a formative study, specifically looking at child marriage.

MMUNICATIONS TO END CHILD MARRIAGE

Stories

- New youth advisory panel established to end child marriage and reduce teenage pregnancy in Sierra Leone
- A guiding hand: School counsellors in Sierra Leone address early pregnancy, child marriage

Social media posts

- "NPP don kom now" sang students from Freetown Secondary School for Girls, during their drama skit, touching on topics of #TeenagePregnancy, #ChildMarriage, and #FamilyPlanning.
- #DYK about the newly established Youth Advisory Panel supported by @UNFPA in #SierraLeone?

IMPLEMENTING PARTNERS

NAME OF IMPLEMENTING PARTNER	TYPE OF PARTNER	PARTNER FOCUS AREA	MAIN PARTNER
Women in Crisis Movement	Local NGO Youth rights		UNFPA
Fambul Initiative for Equality (FINE - SL)	Local NGO Women's rights		UNFPA
Matei Initiative Empowerment Program for Sustainable Development (MATCOPS)	Local NGO Youth rights		UNFPA
Inter-Religious Council Sierra Leone (IRCSL)	National Partnership		UNICEF
Advocacy Movement Network (AMNet)	Local NGO Children's rights, women's rights		UNICEF
Council of Churches Sierra Leone (CCSL)	National Partnership		UNICEF
National Secretariat for the Reduction of Teenage Pregnancy	Government body		Both
Ministry of Social Welfare, Gender and Children's Affairs	Government body		Both
Office of the First Lady	Government body		UNFPA
Ministry of Basic and Senior Secondary School	Government body		Both

PROGRAMME IMPLEMENTATION AREAS

GEOGRAPHIC AREA	Output 1.1: Life-skills and economic support	Output 1.2: Education support	Output 2.1: Social and behavioural change	Output 3.1: Quality health and protection services	Output 3.2: Quality education
Bonthe		•	•	•	•
Falaba	•	-	•		
Kambia	•	-	-	•	•
Koinadugu	•	•	•	•	•
Kono	•	•	•		
Port Loko	•	•	•	•	•
Pujehun	•	•	•	•	•

























