On 26 September 2015, the United Nations Secretary-General Ban Ki-moon officially launched the Global Strategy for Women’s, Children’s and Adolescents’ Health. It is a new roadmap to end all preventable deaths among women, children and adolescents, and to ensure that they not only survive, but thrive and achieve their full potential. Developed in collaboration with stakeholders led by WHO, the Global Strategy places a specific focus on adolescents and their centrality to the overall success of the 2030 Agenda. The IPU has made a strong commitment to the Strategy through the input of its Member Parliaments, as well as by building on the 2012 IPU resolution Access to health as a basic right: the role of parliaments in addressing key challenges to securing the health of women and children.

Child, early and forced marriage, and adolescents’ health

Practices like child, early and forced marriage (CEFM) remain an obstacle to the full achievement of better health for adolescents and children. CEFM is a human rights violation that robs girls of childhood, puts health and growth at risk, disrupts education, limits opportunities for empowerment and social development, and increases the risk of exposure to violence and abuse. It results in both short- and long-term negative consequences on the wellbeing of girls, including their physical, psychological, emotional, sexual and reproductive health, and on the social and economic development of the child.

The Global Strategy makes a clear reference to CEFM and highlights how investing in CEFM prevention can lead to high returns in terms of women’s, children’s and adolescents’ health. A 10 per cent reduction in CEFM could contribute to a 70 per cent reduction in a country’s maternal mortality rates and a 3 per cent decrease in infant mortality rates. High rates of child marriage are linked to lower use of family planning, higher fertility, unwanted pregnancies, higher risk of complications during childbirth, limited educational advancement and reduced economic earnings potential.

Given that CEFM is inherently linked to deep-rooted gender inequalities, norms, stereotypes and harmful practices, holistic responses and strategies need to be developed and implemented, for example by strengthening child protection systems, improving access to justice, promoting education and enabling access to health care including sexual and reproductive health. In addition laws and policies aimed at preventing and ending CEFM must be enacted, enforced and upheld. Parliamentarians in different regions have taken vital steps towards the development of legal tools aimed at reducing CEFM and have worked to raise awareness on this issue. Despite all these efforts, it is estimated that, if current levels hold, 14.2 million girls will marry too young each year: that is 39,000 girls a day. Harmonizing existing laws and ensuring their implementation are some of the priorities in combating the practice.

With a specific focus on legislation, IPU is working in close collaboration with WHO in order to explore the role of parliamentarians in addressing CEFM. One result of this cooperation is to be a review of CEFM legislation in 37 Asia-Pacific countries. The review identifies key elements of legislation to fight CEFM and barriers to its implementation. The study highlights important findings and recommendations that are useful for the work of parliamentarians on this issue.

This side event will discuss what parliaments can do to operationalize the Global Strategy in their countries in relation to the issue of adolescents’ health and CEFM. Special attention will be paid to the role of parliaments in reviewing legislation and ensuring appropriate enforcement at a country level within an holistic approach to improving the health, education, social and economic status of young women and girls.

Languages of the side event: English and French