

Endline Evaluation of the Breakthrough ACTION Nepal Local Systems Strengthening to Reduce Child, Early, and Forced Marriage Project: A Summary in Brief

Background

Breakthrough ACTION Nepal’s Local System Strengthening to Reduce Child, Early, and Forced Marriage (R-CEFM) project (2020–2024) funded by United States Agency for International Development supported activities to strengthen the institutional and technical capacity of local governments in Madhesh Province to design, budget, implement, monitor, evaluate, and coordinate social and behavior change (SBC) programs to reduce child, early, and forced marriage (CEFM). The project aimed to strengthen the SBC capacity of six focus municipalities by coordinating with stakeholders to address CEFM issues locally. The goal of the municipalities was to reduce CEFM to improve the lives and well-being of girls and women. The municipalities implemented 11 types of activities addressing the different levels of society, from high-level decision makers to parents and children.

To explore the direct effects of the capacity-strengthening activities, the R-CEFM project applied a complexity-aware approach that included capacity strengthening self-assessments, outcome harvesting, and the most significant change approach. To measure the direct effects of activities led and funded by municipalities—which were also indirect effects of the R-CEFM project—a household-based endline evaluation survey was conducted. These four methods collectively provided a comprehensive triangulation of data encompassing both intended and unintended outcomes, stakeholder perspectives on impact, and participating stakeholders’ and organizations’ evolving capacity to sustain the results. By combining these approaches, the project ensured a holistic assessment, enhancing the effectiveness and sustainability of capacity-building initiatives over time. This brief presents highlights from the capacity strengthening self-assessments and the endline evaluation survey. To add context and nuance to the findings reported herein, a separate brief on outcome harvesting presents specific capacity strengthening outcomes and a most significant change brief highlights how these activities were perceived by stakeholders.

Capacity Self-Assessments

Capacity strengthening self-assessments are designed to evaluate an organization’s, program’s, or individual’s ability to develop and sustain relevant capacities and competencies over time. At the start of the project, Breakthrough ACTION Nepal, working with Madhesh Province officials, conducted baseline capacity self-assessments at the provincial and municipal levels. These assessments evaluated capacity in four domains: program planning, design, and management; SBC theories; coordination and advocacy; and monitoring and evaluation (M&E). These assessments were completed by over 150 ward- and municipality-level staff working in small groups to determine scores.

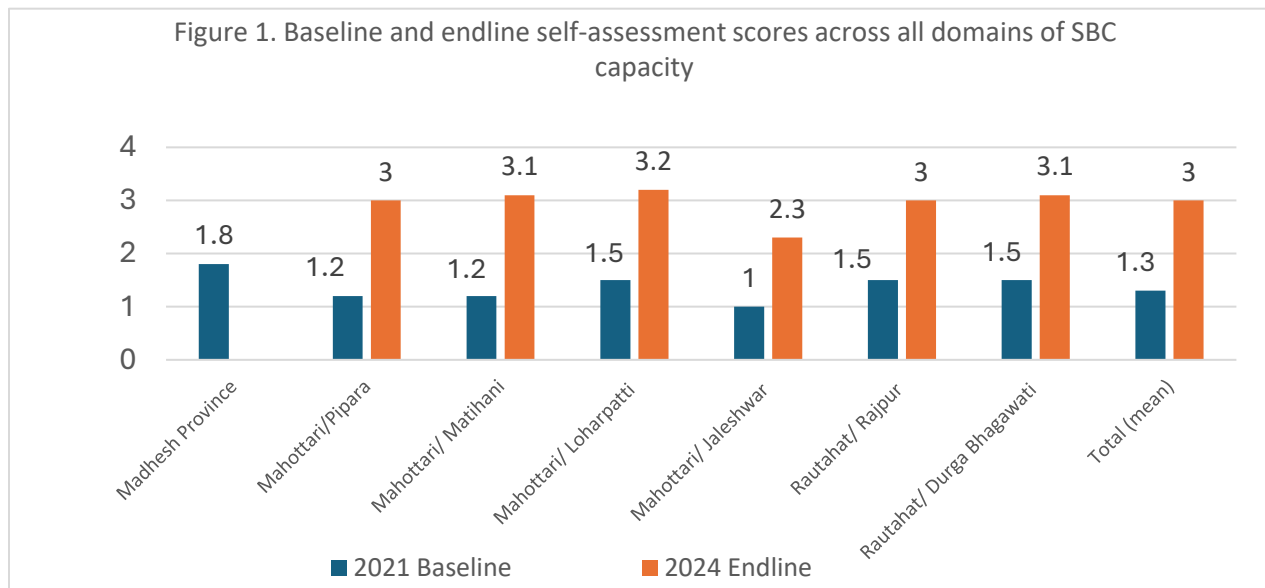
Findings from baseline self-assessments helped to identify key gaps in SBC capacity for reducing CEFM, including a lack of understanding about SBC, lack of evidence-based SBC program design and planning, inadequate coordination among stakeholders, and lack of M&E practice for R-CEFM activities.

To address these gaps, Breakthrough ACTION Nepal’s R-CEFM project designed activities to strengthen the capacity of municipalities and wards to plan, develop, and manage the implementation and to monitor activities using SBC principles and approaches for reducing CEFM around local needs and opportunities.



Madhesh Province Government
Ministry of Sports and Social Welfare
Janakpurdam, Nepal

Endline results point to major improvements in capacity across all domains (see Figure 1 for overall scores; detailed data are not shown). The overall capacity scores increased from 1.3 to 3.0 out of a total score of 4.



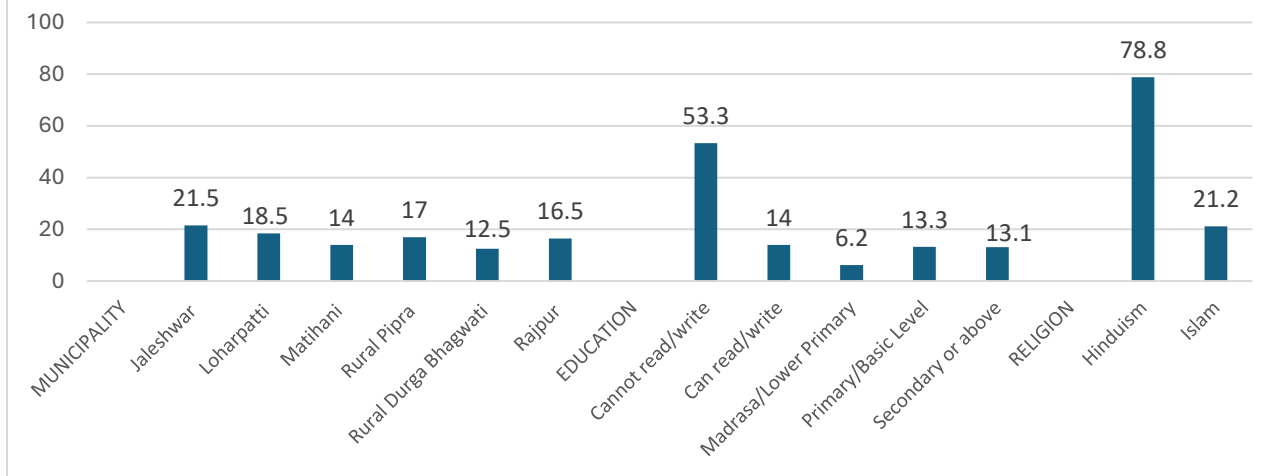
Some of the key accomplishments that stakeholders identified included the following:

- Adoption of evidence-based design and planning utilizing local quantitative and qualitative data to address critical issues
- Mobilization of formal and informal structures to support CEFM reduction efforts, creating a broad base of community and institutional support
- Systematic integration of SBC activities into the annual planning process, with annual budget allocations ensuring sustained focus and effectiveness
- Establishment of an M&E system, incorporating regular checklists to track progress, ensure accountability, and drive continuous improvement in the CEFM reduction initiatives

Direct Effects of Municipalities’ Activities: 2024 Endline Survey

To evaluate associations between activities implemented and funded by municipalities, the R-CEFM project conducted a household-based, cross-sectional study of parents or guardians of children ages 12–21 (children who were between the ages of 10–19 at any time during the project implementation period) in 4,000 households across the six project municipalities. Based on bivariate analysis, these findings reflect direct effects of the municipalities’ activities and indirect effects of the R-CEFM project’s capacity strengthening activities. Figure 2 shows the percent distribution of respondents by municipality, educational attainment, and religion.

Figure 2. Percent distribution of respondents' sociodemographic characteristics (N=4,000)



Program Participation

Nearly 86% of respondents reported being exposed to at least one of the municipality- or ward-level R-CEFM-related activities, reflecting the effectiveness of the municipalities' diversity and appropriateness of the activities and the effectiveness of their implementation plans. Those individuals were then asked about participation in/awareness of nine specific activities. The three activities with the highest levels of participation or direct awareness were observing rallies regarding CEFM (66%), hearing religious or political leaders speak (63%), and participating in gatherings where parents and adolescent girls discussed child marriage (57%).

86%

Reported participation in (78%) or direct awareness of (8%) at least one of the municipality- or ward-level R-CEFM-related activities.

Legal age of marriage and the youngest acceptable age

Almost 94% of respondents correctly reported that the legal age of marriage is 20 years or older, while 84% of respondents stated that the acceptable age of marriage was 20 years or older. Responses differed significantly by all background characteristics. All respondents were asked why families might have their child married before age 20. The two most-cited reasons were the fear that a child would elope in a love marriage (81%) and the presence of poverty or financial insecurity (56%).

Changes related to program exposure

Discussions about child marriage

Respondents exposed to any of the nine activities were asked if their exposure to R-CEFM-related activities changed their perspective. Nearly 27% of the respondents thought that the discussion around child marriage

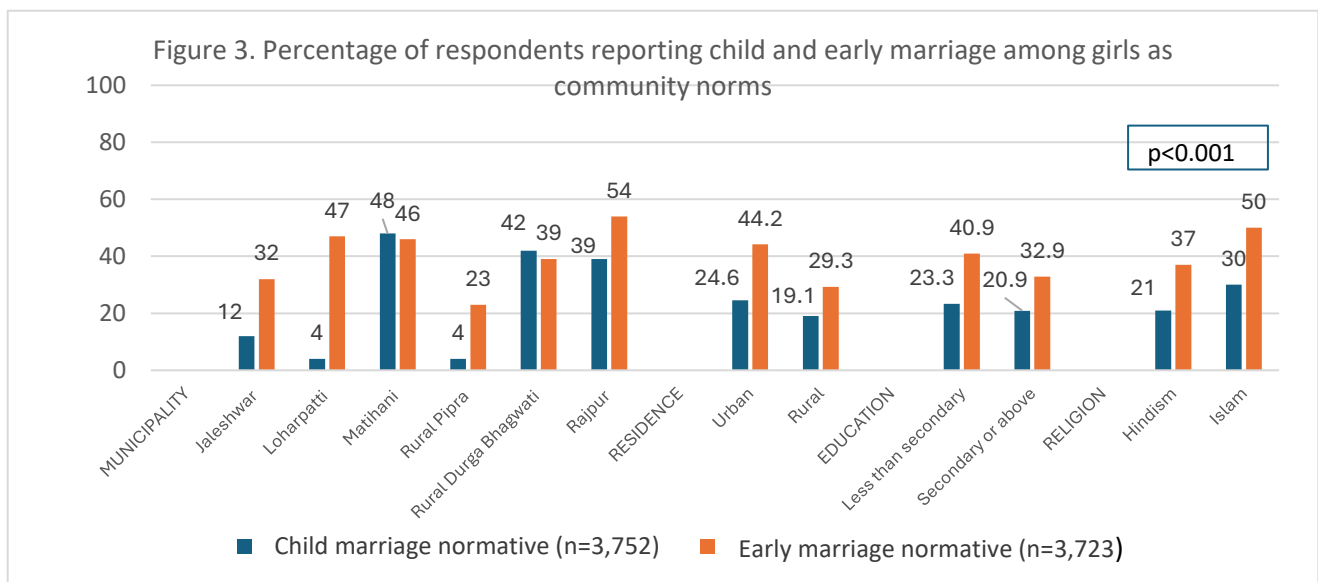
(individuals younger than age 18) had changed a lot, reflecting major shifts in societal attitudes, heightened awareness, and significant policy or legal changes and resulting in robust actions to combat the practice. Almost 32% thought that the discussion on child marriage had changed moderately with noticeable changes reflecting evolving societal attitudes and increased awareness. About a quarter of respondents felt the discussion had changed only slightly, and only 12% responded that the discussion had not changed at all. Almost 5% of the respondents said that they were unaware of whether and how the discussions on child marriage have changed in their community.

Perceptions regarding CEFM

Almost half (48%) of respondents reported that they decided against having their children marry before age 20 after being exposed to R-CEFM-related activities or messages. Another 40% acknowledged that they recognized marriage before age 20 as problematic because it impedes further education and can pose health risks if the girl becomes pregnant before age 20. Only 7% reported that their participation in or awareness of R-CEFM-related activities did not change their views, and they still considered it acceptable for children to marry before age 20.

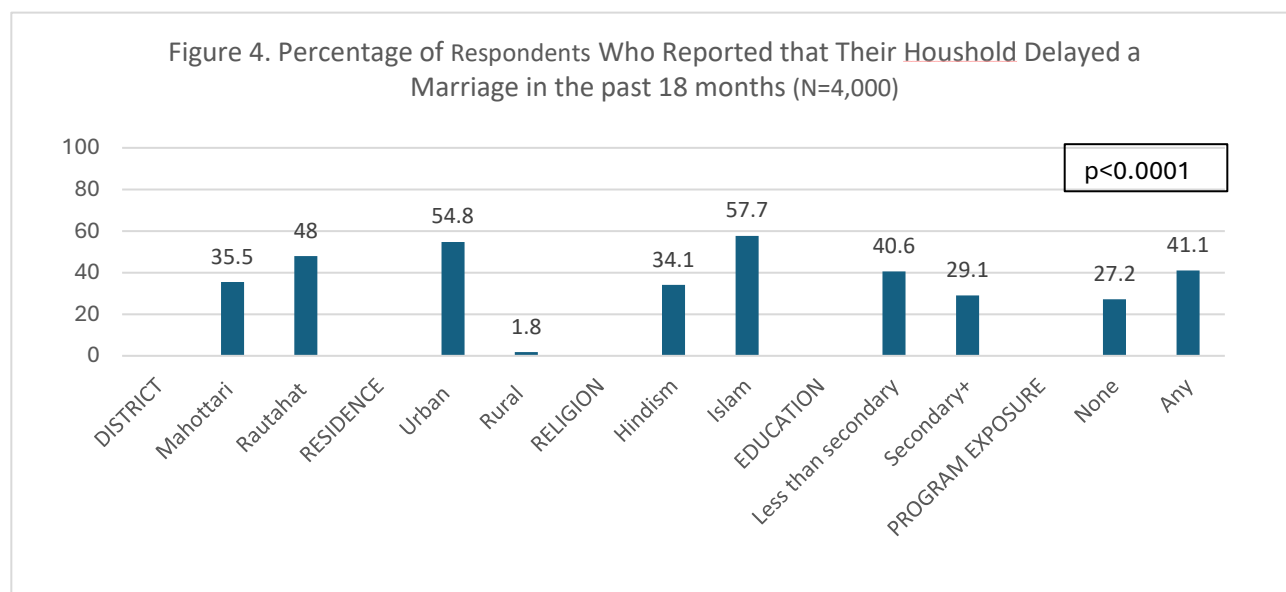
Social Norms

A behavior is considered a descriptive social norm when more than half of a population or group practices it or is thought to practice it. Overall, only 23% of respondents reported that at least half of people in their community arrange marriages of daughters younger than age 18 (child marriage). As shown in Figure 3, this proportion ranged from a low of 4% in Loharpatti and Pipra to a high of 48% in Matihani. Based on these findings, child marriage is not a social norm in any of the municipalities. When asked a similar question about arranging marriages of daughters ages 18 or 19 (early marriage), 40% reported that at least half of people in their community do so, with 54% reporting this practice in Rajpur, the only municipality where early marriage could be said to be normative. Urban respondents were more likely than rural respondents to cite both child and early marriage as norms, as were Muslims compared with Hindus and individuals with less than a secondary education compared with those with secondary education or higher (Figure 3). Differences were statistically significantly different across all background characteristics.



Delayed marriage

Over 39% of households included in the survey delayed the marriage of children younger than age 20 during the 18-month period prior to the survey in which municipality-led activities were implemented. As shown in Figure 4, the statistical likelihood of delaying an underage child's marriage was significantly greater for those with less than secondary education (40%) compared with at least a secondary education (29%), in urban (55%) compared with rural areas (2%), among Muslims (58%) compared with Hindus (34%), and in Rautahat (48%) compared with Mahottari (36%). These findings suggest that the program has reached some historically marginalized groups and those with lower education levels, a proxy measure of access to resources. Importantly, those with any exposure to the activities (41%) were more likely to have delayed a marriage than those with no exposure (27%), indicating that program exposure was protective. The three main reasons for delayed marriages were that the respondent learned about the negative health consequences of child/early marriage for girls (62%); heard about the legal consequences, including possible fines or jail time (38%); and recognized that marriages of those under 20 years would not be officially registered with the government (36%).



Conclusions

The endline results of the self-assessment study point to major quantitative and qualitative improvements across the six municipalities in capacity across all domains. By integrating evidence-based design with local-level insights, mobilizing diverse stakeholders, incorporating strategic SBC activities with dedicated budgets, and establishing robust guidelines and an M&E system, municipalities and wards successfully developed programs tailored to reduce CEFM. This enhanced capacity led to significant and wide-ranging changes as reflected in the endline evaluation survey results.

Knowledge regarding the legal age of marriage was 94%, although the percentage was somewhat lower in Rajpur (88%). Moreover, this study found that child marriage is not normative in any of six municipalities, and early marriage is a social norm only in Rajpur.

The endline results found that an impressively high percentage of respondents—86%—had participated in or were directly aware of the municipalities’ activities, which far exceeded expectations. This high exposure illuminates the success of the capacity building approach designed to be led and owned by municipalities and wards, which are best able to design locally appropriate and effective programs. Furthermore, almost half of the respondents reported that they had decided not to have underage children marry because of their participation in these activities. Finally, nearly two out of five respondents maintained that they had delayed an underage marriage during the period when the municipalities implemented their activities. Tellingly, this outcome was reported not only by groups that are relatively privileged, but among groups with limited resources, suggesting that the program has made important advances in furthering social equity. While important progress has been made, changing a long-standing practice takes time and considerable effort, and the data demonstrate that poverty is a key reason for child and early marriages, so must be addressed. Municipalities and wards have committed to continue to hone their skills and expand their activities supported by ample budgetary allocations to achieve the ultimate goal, namely, the elimination of CEFM to increase the health and well-being of girls and women.

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