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Building Resilience and Resistance to Child, Early, and Forced Marriage through Acquiring Skills

Findings from Implementation Research in Nigeria

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EXECUTIVE SUMMARY

The development Research and Projects Centre (dRPC) set out to investigate a much-touted assumption in the child, early, and forced marriage community: that acquiring vocational skills offers girls a pathway to empowerment, agency, and poverty alleviation. The dRPC also set out to test the assumption that empowerment and agency contribute to building girls' resilience and resistance to child, early, and forced marriage. The center sought to explore these assumptions in the context of two ongoing projects it was conducting: Conjugal Slavery in War (CSiW) and Partnership for Innovation and Practice in Secondary Education (PSIPSE).

The research carried out followed a retrospective research design using implementation research methodology and employing both quantitative and qualitative data collection tools. The research was rolled out through two customized skills acquisition programs integrated in existing dRPC interventions. The six-month skills acquisition pilots were implemented in Northern Nigeria, a region of the country with the highest rates of early marriage, where the most recent data shows that 36 percent of girls are married before the age of 15.[1]

Fifty girls participated in the vocational skills acquisition training in a government secondary school in the Northwest state of Kano, which was part of the PSIPSE project. Another fifty girls, displaced by the insurgency in the Northeast, participated in training and counseling provided by a nonprofit organization, Science Village Gombe, in Gombe State.

As this report notes, the study found that while girls in both study sites acquired new skills, derived support and relief, and learned to cope with their anxiety, exposure to the interventions failed to change the girls' acceptance of marriage as their destiny. Moreover, the fact that trauma associated with forced marriage in the Northeast was intertwined with wider trauma related to abject poverty, insurgency, and displacement, suggests that acquiring skills alone does not build resilience to the trauma of abduction and forced marriage. In the Northwest, the contexts of insecurity, a failing secondary school system, and a contracting informal economy make economic empowerment unattainable for girls. Without strong guidance and counseling units within the school system, and without access to capital, markets, and mentorship, it is doubtful that skills alone can empower girls or form the basis of an alternative to early marriage. This study recommends a holistic girls' empowerment program design in which vocational skills is an important but not singular component. Such a program design will build on life skills and counseling to address psychological trauma. Also important will be extended timelines for interventions, integration within government small and medium scale poverty alleviation programs, and post-intervention follow-up mentoring support. A robust

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[1] All girls who participated in the skills training program and research activities gave their informed consent. For those under the age of 18, additional consent was obtained from school authorities, guardians, and/or host families. Participation was voluntary, girls could leave at will, and all identifying information was kept confidential. Photos included in this report have been granted permission by the girls for public distribution.

monitoring and evaluation framework must support learning and redesign of such interventions.

INTRODUCTION AND OVERVIEW OF THE STUDY

Girls' Psychological Trauma: An Emerging Public Health and Social Problem

Nigeria is at a mental health crossroads: a 2019 National Mental Health Bill was tabled by the Senate; celebration of the 2018 World Mental Health Day was the largest recorded in the country; and national newspapers regularly report on high suicide rates and high prevalence of post-traumatic stress disorder (PTSD). Much of these national discussions focus on drug users, women in polygamous unions, prisoners, and pensioners—with little focus on the mental health of adolescent girls and with limited public funds allocated to mental health in general. To date, there is no mental health desk in the Federal Ministry of Health and no more than three percent of the national health budget is allocated to mental health.

Until recently, interest in the mental health and psychological trauma of adolescent girls in Nigeria was largely confined to a niche community of advocates in favor of girls' education and ending early marriage and sexual violence. This changed when Boko Haram, an extremist terrorist organization based in northeastern Nigeria, kidnapped 276 schoolgirls from the Government Secondary School in the town of Chibok one night in April 2014. The internationally publicized abduction of and subsequent sexual violence against the girls by Boko Haram attracted local and global outrage from activists, development practitioners, and politicians, and triggered heightened local concern about girls' mental health issues (AFP 2016).

The trouble with talking about girls' psychological trauma in the context of a specific event like the Chibok abductions is that pressure is placed on politicians to secure the return of the girls at any cost, including paying ransom. Against this background, a girl's mental health is placed second to her recovery. Moreover, there is no attempt to understand how girls who have witnessed abduction, rape, and forced marriage process their experiences; how their perceptions of men, masculinity, and marriage are affected; and how they build resilience in the aftermath of their trauma.

The recent shift in the study of child marriage as a development problem to human rights violations within a humanitarian context have opened up new lines of inquiry around the phenomenon of abduction, conjugal slavery, and forced marriage in the context of insurgency and war. Many gender-conscious researchers studying the impact of the current Islamic insurgency in the Sahel region, and in Northeast Nigeria in particular, have examined the proposition that insecurity is contributing to early, and forced marriages, as families seek protection for their young daughters by giving them in marriage to strongmen, warlords, rich men, and combatants.

An equally significant but unexplored phenomenon is the stigmatization of thousands of divorced, widowed, and freed abducted girls and women, who find themselves with lower social status and are unable or unwilling to remarry. This has fed into a counter-trend in Northeast Nigeria of "freed" girls and women engaging in transactional sex with soldiers and officials of camps for displaced people, as a means of survival. In other cases, families are accepting "returned" daughters who were abducted, raped, and married off to combatants

Another significant but under-researched issue is the persistence of arranged and forced marriages in Nigeria's Northwest, another region experiencing poverty, patriarchy, and political insecurity. Recent public interest in forced and arranged marriages in this region has been in response to incidences of girl-wives attacking or killing older husbands.[2] Therefore, there are important questions to be addressed of how the phenomenon of forced marriage is changing in the Northwest and how it differs from the situation in the Northeast. Related questions include:

- How does psychological trauma from being forced into marriage in a context of insurgency differ from a context of poverty and patriarchy?
- What are the effects on girls who live through these experiences, and what are the effects on girls who witness sisters and friends being forced to marry?
- Are the witnesses less affected?
- What strategies or programs can be put in place to mitigate the impact of psychological trauma faced by girls in such different circumstances?

Framing a Trauma Research Agenda from Girls' Projects in Nigeria

The dRPC, a Nigerian nonprofit organization, generated research questions similar to these while implementing recent girl-focused projects in Northern Nigeria. The center's work coordinating the Conjugal Slavery in War (CSiW) project 2015-2019 confronted the problem of lingering depression and propensity for violence by girl survivors of abduction and forced marriage as a result of the insurgency. Since 2015, dRPC researchers have documented this process through the eyes and voices of abducted girls and women forced to marry, as well as the eyes and voices of girls and women forced to witness marriage of underage girls to Boko Haram fighters in the forest of Sambisa in Borno State. How to build resilience for survivors of the Northeast insurgency emerged as a dominant question for the CSiW project.

Important issues of girls' trauma have also bubbled up in the dRPC's work in Nigeria's Northwest, supporting girls' education in Kano and Jigawa states. During the implementation of the Partnership for Innovation and Practice in Secondary Education (PSIPSE) project (Phase 1, 2013-2015, and Phase 2, 2015-2019), project staff observed the confounding factor of forced marriage inhibiting girls' rates of transition and completion in government secondary schools in Kano and Jigawa states. Baseline, midline, and end-line assessments showed a significant percentage of girls were being persuaded—or in some cases forced—to drop out of secondary school to marry, or were forced to marry immediately after completing secondary school. A 2014 PSIPSE midline assessment report found that between 9 percent and 11 percent of girls in Senior Secondary II and Senior Secondary III (equivalent to grade 9 and 10 in the American education system) in PSIPSE girls' government secondary schools in Kano and Jigawa states were withdrawn from school for marriage during the first phase of the project.

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[2] One exception to this is the chapter by Judith-Ann Walker in the volume edited by Annie Bunting et al., *Marriage by Force? Contestation over Consent and Coercion in Africa*. See Walker (2016).

The fact that girls witnessed their seniors, peers, and sisters being married off at ages 14, 15, and 16 emerged as a significant contributory factor to their acceptance of arranged marriages as natural and desirable. Fear of getting too old and missing the chance for marriage and autonomy in their own homes explains, in part, the girls' willingness to accept arranged marriages. In 2014, through a Knowledge, Attitude, and Practices study of girls in 14 PSIPSE government secondary schools, the dRPC found that the majority of girls identified 16 as the ideal age for marriage. Despite the desirability of marriage, the dRPC PSIPSE project team found that both girls who agreed to arranged marriages, as well as those who resisted, discussed feelings of anxiety, stress, and fear about the future. For girls resisting forced marriage, they described a difficult life in the face of family pressure to marry. For girls agreeing to marriage, the main anxieties were about negotiating with first and second wives, anticipated problems with adult children of their new husbands, and embarrassment about their families' inability[3] to furnish their section of the husband's house and to stock the kitchen with food. How to empower girls to resist forced marriage emerged as a dominant point of inquiry in the PSIPSE project in the Northwest.

While the experiences of girls in the dRPC's Northeast and Northwest projects appeared different, there are many similarities: Both sets of girls experience heightened psychological trauma and anxiety as a result of life events associated with forced marriage. As a result of these experiences, both sets of girls were pessimistic about the future. Girls also expressed concerns about their ability to be independent and to realize their dreams. But more importantly, feedback from girls in both CSiW and PSIPSE projects pointed to an urgent need to go further than simply documenting trauma, as in the case of CSiW, or observing it as a project finding.

Acquiring Skills to Address Girls in Crisis in Nigeria

The CSiW project was implemented as a pilot in Northeast Nigeria, in an environment in which almost every humanitarian intervention focusing on girls and young women consisted of skills acquisition programs, which was viewed as a strategy for addressing the problems of vulnerability, risk, poverty, and sexual violence faced by girl survivors. The CSiW study found that government, donor agencies, and local nongovernmental organizations all implemented these types of interventions for girl survivors of displacement, abduction, and conjugal slavery within host communities and displaced persons camps. Skills were touted as the vehicle for providing girls with economic security and income, lifting them from poverty, and enabling them to build resilience.

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[3] Traditional marriage rites in Northern Nigeria require that the girl's family bear the responsibility of providing the accommodation and the furnishings—in particular the bed—and in many cases, stocking the new house with basic grains, usually from the family stores from the previous season.

In the Northwest, the PSIPSE project was also implemented in an ecosystem in which acquiring skills was touted as the panacea for girls' empowerment. Throughout the project implementation, the government's main policy goal was to introduce 34 new crafts in the secondary school system. The PSIPSE project supported the Nigerian Educational Research and Development Council (NERDC), the national government agency responsible for curriculum development, in an effort to revise and develop curricula for the 34 subjects for rollout in the national school system. Skills were presented as an alternative to poverty and low self-esteem, and as a strategy for strengthening the girls. The skilled girl was view as an asset to her family, the community, and the nation. Such girls would not be forced into marriage, according to the theory underpinning this project.

Faced with the reality of girls who remained in crisis despite the CSiW and PSIPSE projects, the dRPC set out to investigate whether skills acquisition programs presented girls with a pathway to empowerment and agency and out of poverty. The dRPC also set out to explore whether the purported empowerment and agency benefits of skills programs contributed to building girls' resilience and resistance to child, early, and forced marriage.

The dRPC sought to explore this question as a part of the ongoing CSiW and PSIPSE projects. For the CSiW project, the strategy was to add a discrete skills acquisition component to the ongoing project, which focused on girl survivors displaced by the insurgency. For the PSIPSE project, an after-school club intervention was integrated into the ongoing capacity building project, implemented by the dRPC since 2013.

Learning from Implementation Research

To explore the research question, the dRPC applied an implementation research methodology. As a nonprofit dedicated to participant-driven, community-based research, the dRPC embraced implementation research for its ability to deal with questions that arise out of ongoing projects. The implementation research methodology, which was initially designed to improve the quality of health interventions, has been applied to intervention programs in the social sector, such as education (WHO 2013a, 13; Fogarty International Center n.d.). One of the key characteristics of implementation research as a technique of social inquiry is its ability to provide a practical experimental site for the exploration of a research question.

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Because implementation research is fundamentally about an intervention, trials are important components. In this study, the technique consisted of two pragmatic trials, which were implemented to explore the effectiveness of economic empowerment for girls experiencing the psychological trauma of forced marriage (Patsopoulos 2011). To ensure accurate interpretation of all findings, quantitative methods are combined with qualitative data collection approaches; this mixed methodology (Burke Johnson and Onwuegbuzie 2004) has come to be associated with implementation research. Mixed

methods "provide a practical way to understand multiple perspectives, different types of causal pathways, and multiple types of outcomes" (WHO 2013a, 51). This facilitates a comprehensive review of the research findings, with the aim of communicating to relevant stakeholders (Rycroft-Malone et al. 2012). This so-called realist review "provides explanatory analysis focused on what works for whom, in what circumstances, in what respects, and how" (WHO 2013a, 51).

Designing the Implementation Research in the Northeast and Northwest

The dRPC designed two lines of inquiry, in two different zones in the Northeast and the Northwest. One line of inquiry was regarding the Northeast CSiW intervention, for 50 displaced girls from that area who had been relocated to neighboring communities in Gombe State. The nonprofit organization Science Village Gombe provided customized training in practical skills for these girls for three hours per day for 72 days. The second line of inquiry was the Northwest PSIPSE intervention, also for 50 girls. The dRPC offered training in practical skills during an after-school club for 3.5 hours per day for 60 days.

To track findings and learn from the two practical interventions, the dRPC used implementation research through a hybrid model of one-group quasi-experimental study design (WHO 2013a). This entailed selecting the intervention group (also referred to as participants) through convenience sampling,[4] based on meeting predetermined inclusion criteria relevant to the goals and objectives of the intervention. The dRPC carried out quantitative data analysis using SPSS, and conducted qualitative data analysis using Open Code. The quantitative instrument was based on a 5-point Likert scale to determine responses based on level of agreement. In the case of qualitative data, the dRPC used content analysis of themes to identify and report emerging themes from responses. The dRPC collected data through observation schedules completed by facilitators/trainers and the administration of retrospective tools—both semi-structured questionnaires and in-depth interview guides.

Implementation Research in the Northeast

The dRPC selected Science Village Gombe as the implementing agent for the CSiW implementation research. The intervention population consisted of girls who had survived the insurgency in Northeast Nigeria, were displaced from their homes, and settled in various host communities within Gombe State (box 1).

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[4] "Convenience sampling (also known as availability sampling) is a specific type of non-probability sampling method that relies on data collection from population members who are conveniently available to participate in study." See: https://research-methodology.net/sampling-in-primary-data-collection/convenience-sampling

Implementation Research in the Northwest

To explore the specific research question of the potential for building resistance to trauma caused by the stresses of forced marriage, the dRPC identified one of the Phase 1 PSIPSE schools where girls experiencing trauma had been documented in 2014 and where the school authorities had initiated an after-school club. Once identified, the dRPC worked with the school authorities between January and September of 2017 to attract more students to the club by providing inputs to make the work interesting, and then proceeded to collect data to answer the research question. By February 2017, the dRPC and the selected school had codesigned an intervention for one of the government girls' secondary schools that had been involved in the 2013–2015 PSIPSE project (Phase 1). The intervention was an after-school club to train girls in income-generating skills to improve their livelihoods. While the after-school club was open to approximately 300 girls, space limitations restricted intake to about 150 girls on a first-come, first-served basis. At the end of the eight-month period, 60 girls who had attended at least two sessions per week over a six-month period were randomly selected for inclusion in the end-of-project assessment. Six elected not to participate, following the informed-consent process; 54 participated, but four respondents were dropped because of poor-quality responses.

The retrospective study was designed to ascertain the extent of trauma faced when girls are forced to marry, and to assess changes in attitude, behavior, and expectations of the girls as a result of their participation in the after-school club activities. The ages of the girls were representative of girls from grades Senior Secondary II and Senior Secondary III. A mixed method, quantitative, and qualitative assessment was applied at the end point, through self-administered questionnaires, in-depth interviews, and focus group discussions. A semi-structured questionnaire was used for data collection as a self-administered retrospective tool.

A set of 15 girls was randomly selected for a retrospective in-depth interview in the local language, Hausa. A retrospective study design was selected to minimize disruption to school activities and the girls' after-school program. For the self-administered questionnaires, 50 girls who met the inclusion criteria were invited into a silent room and were each given a copy of the questionnaire to complete, under the guidance of dRPC female staff. This was followed by in-depth interviews with 15 girls and a focus group discussion with 15 girls. Data collected were analyzed using Statistical Package for the Social Sciences (SPSS) Version 16. Quantitative categorical variables were summarized by frequencies and percentages. Qualitative information was summarized and presented mostly in the form of qualitative insertions, through quotes.

Completion of self-administered questionnaires, September 2017

Ethical Considerations and Data Analysis

In the Northeast implementation research, informed consent was sought and obtained from guardians and community leaders in host communities in the town of Gombe. Before enrollment, the dRPC organized a general assembly of the girls, with their guardians and community leaders, during which the details and objectives of the project were explained and consent requested. The dRPC obtained signed or thumb-printed consent forms for the study from the guardians or responsible community leader of each girl enrolled.

The dRPC carried out data collection using a mixture of quantitative and qualitative methods at baseline, midline and end line. At the baseline, quantitative methods were applied in a limited manner at the point of enrolling displaced girls into the project, to determine whether they met inclusion criteria. Life histories of 10 of the girls documented for the CSiW project were also accessed at the baseline of the implementation research. During the midline, an observation schedule recording girls' progress and coping mechanisms was filled out for each girl on a monthly basis. The dRPC completed the midterm observation schedule in May 2018 during a scheduled visit to the village. Given that the dRPC was already engaged with the selected school for the implementation research and had permission for programming, extension of the approval for new data collection was not difficult to secure, especially since school authorities were co-opted into the design and implementation of the after-school clubs. To conduct the retrospective investigation, the dRPC also obtained consent from authorities who reviewed and approved all the instruments and were present for their administration. While most of the 50 girls were under the age of consent, they were still provided with an information sheet about the objective of the implementation project and the assessment, and they were asked to consent by signing before completing the questionnaire.

Study Limitations

The study suffered from limitations of scientific rigor associated with *post hoc* cohort studies in retrospective investigations, especially because, in this case, there was no

control group to compare the changes between baseline and end line. However, it is unlikely that control groups and a prospective methodology would have shed more light on the proposition being tested, given the exploratory nature of the research question and the status of this intervention as a spin-off of existing interventions by the dRPC.

Displaced girls from Borno observed from afar during gardening sessions, April 2017, Gombe

A notable limitation of this study is that girls in the implementation research setting of the Northeast did not experience psychological trauma as a discrete event or set of events in their past, but rather as part of a complex of ongoing traumatic events starting with the first violent attack by Boko Haram and ending with displacement (which was also described as a source of trauma). For this reason, this study does not apply the term PTSD. Similarly, in the Northwest, secondary school girls in the PSIPSE project identified a multitude of stress factors, including anticipation that they would fail their exams. Being forced to marry was just one stress factor, which could not be teased out in a clinical sense. Although PTSD is discussed in this study, it was not applied. Therefore, the implementation research does not attribute the full presentation of psychological trauma faced by the girls to the fear of forced marriage. In this context, findings about strategies to address psychological trauma precipitated by forced marriage must be qualified.

Yet another limitation is that the number of hours spent in training during the six-month programs are still relatively few to be able to conclude on the impact. To compensate for this short timeline, a tracer study was conducted on the girls from the Northeast who graduated from the project. The study, conducted six months after graduation, found that of 32 girls who could be traced, more than two-thirds were not applying new skills acquired. Rather, some were itinerant street vendors in the town of Gombe, while some had married, and others were even thought to be sex workers. No tracer studies were conducted of the girls in the Northwest.

OVERVIEW OF KEY CONCEPTS

Psychological Trauma

Psychological trauma can be described as an overwhelming emotional, behavioral, and physiological response to a distressing event in which a person perceives a risk to the life or safety of themselves or others (American Psychological Association 2017). Trauma is intrinsically subjective, in that it is dependent on what an individual views as threatening, regardless of whether an event is objectively dangerous. While there are huge individual differences in how trauma is caused and experienced, research has highlighted certain patterns.

Early studies of trauma focused on combat trauma, which led to the conceptualization of post-traumatic stress disorder (PTSD), a psychological disorder symptomized by flashbacks, nightmares, emotional numbing, and physiological hyperarousal. Although PTSD remains the most prominently known aftereffect of trauma, subsequent research has revealed additional post-traumatic syndromes. A wider range of experiences have been accepted as potentially traumatic, and psychological and behavioral symptoms of trauma are also understood to be much broader than initially thought. The term "traumatic stress" has been used to characterize a physical and emotional response by an individual to an event or events that are perceived to be life-threatening. Traumatic stress presents in the form of involuntary physical and emotional reactions, ranging from loss of bladder or bowel control and feelings of helplessness, to perpetration of physical violence.

Because child marriage is often without valid consent, it is predicated on attitudes that strip girls of their autonomy and individuality. This alone constitutes a threat to a girl's sense of self and psychological integrity and is therefore potentially traumatic. It also creates a social context that dehumanizes and devalues the intrinsic worth of girls, increasing their risk of exposure to additional traumas (Girls Not Brides n.d.)

Child marriage creates social structures in which girls are often exposed to prolonged abuse, abuses of power, dependence on abusers, betrayal, entrapment, and helplessness, and therefore are particularly at risk of developing complex trauma. Girls are often forced into marriage by their families (Ajumobi 2014), creating a sense of betrayal and of detachment from their previous support structures. Because of their youth, lack of education, and lower social standing, girls then become dependent on their husbands. Men often seek wives considerably younger than themselves, because they are perceived as more obedient, fertile, and faithful (Blake 2013).

Social Trauma of the Child Bride

Child marriage places a girl into complicated social categories as a wife, a junior wife, a mother, and still a child. Once married, young girls move away from their family and friends and are subjected to pervasive practices of female seclusion for married women. Given the age differences, girls can find it difficult to relate to their new husbands. In addition, some girls experience problematic relationships with co-wives or in-laws (Mengistu 2017). These experiences can be isolating and depressing. Married girls also face a new set of social pressures and expectations that differ from those of other children their age. They are less able to focus on education and socializing with peers, and instead experience more restrictions and domestic responsibilities (Nour 2009).

Suicide and Self-Harm

Suicide and self-harm are especially associated with child marriage (Gage 2013). Studies reveal that at a young age, marriage increases females' suicidal behavior as much as six-fold (Vijayakumar 2015). This increase in rates of suicidal behavior and self-harm could be symptomatic of the negative feelings and depression associated with child marriage and related trauma. The negative physical, social, and economic effects of forced and early marriage on young girls and their wider communities are well documented (Walker 2012). Although less established in the literature, multiple studies have now also identified child marriage as a "major psychological trauma" (Le Strat et al. 2011), increasing girls' chances of psychological disorder and distress (Ahmed et al. 2013; Günes et al. 2016). One study found that girls in child marriages suffered a 41 percent increase in the risk of developing disorders such as depression, anxiety, bipolar disorder, and substance abuse (Le Strat et al. 2011), consistent with experiences of complex trauma. Child marriage can clearly be traumatic in and of itself, since it often occurs in situations that directly violate girls' human right to consensual marriage, education, and future prospects (UNFPA n.d.).

Girls in child marriages are less likely to be in happy, harmonious marriages and are more likely to be unhappy, isolated, and disempowered. They are subjected to an increased risk of psychological abuse as well as to physical and sexual abuses and traumas (WHO 2012b). In addition, the association of child marriage with trauma is exacerbated by increasing the girl child's likelihood of exposure to further traumatic experiences, such as poverty, medical problems, sexually transmitted diseases, unwanted pregnancies, and maternal and infant mortality (Pearson 2011). These direct and indirect links to trauma in young girls are now explored.

Building Resilience and Resistance to Child, Early, and Forced Marriage: The Mental Health Approach

There is a dearth of materials on therapeutic psychological interventions to address the psychological trauma caused by forced marriage or the threat of forced marriage. An opportunity to fully explore the mental health implications of child marriage was missed with the World Health Organization (WHO)'s 2012 seminal submission to the 65th World Health Assembly on multiple public consequences of child marriage. Although psychological trauma was identified by the WHO Declaration, the organization failed to tease out any specific interventions to address mental health crises precipitated by child marriage (WHO 2012c), and proposed strategies to address early pregnancy rather than early marriage. While WHO is now taking a leading global stewardship role in the adolescent mental health field (WHO 2017)—producing important studies, guidelines and strategies—such publications do not address the specific psychological trauma of adolescent girls that are precipitated by forced marriage. Even in publications that focus on mental health challenges in contexts of humanitarian crisis interventions, girl survivors of forced marriage are not treated as a specific demographic. Thus, WHO treats child marriage and adolescent mental trauma as two troubling but distinct public health emergencies, one physical and the other mental. This can perhaps be explained by the absence of both gender methodology and micro-level inquiry, even in WHO studies that focus on adolescent mental health interventions and note the scalability of life-skills education interventions. (WHO 2012a).

The Bill and Melinda Gates Foundation (BMGF) working in collaboration with Grand Challenges Canada and the United Nations Population Fund, identifies psychological trauma in early marriage as a key public health challenge. However, given their primary focus on maternal health, the work of these international development partners has been limited to adolescent trauma within marriage, exacerbated by "motherhood in childhood". Against this background, BMGF framed early marriage and early motherhood as a precipitating condition for mental illness. In collaboration with Grand Challenges Canada, BMGF tackled the issue of mental health among adolescent mothers in Round 20 of the Grand Challenges Explorations—Healthy Minds for Adolescent Mothers—launched in September 2017. BMGF/GCC framed the difficulties of this goal in the terms contained in box 2. Three of the BMGF/GCC program leads underscore the severity of this situation for young mothers in the think piece "Strong Minds for Stronger Adolescent and Young Mothers," with the observation, "There are far too many stories of adolescent and young mothers who struggle with depression, psychosocial stress, anxiety, and other mental health conditions. These stories are important to highlight so that we can gain insight into how we might help the 15.6 percent of pregnant women in low- and middle-income countries who suffer from depression or anxiety" (Patterson et al. 2017).

BOX 2. MOTHERHOOD FOR CHILD-WIVES

"In low- and middle-income countries, 25 percent of pregnant women and 19 percent of new mothers experience depression. This affects not only the mother's health, but also her ability to care for her child, and therefore the health of her children, even from birth. Depressed women are 2.1 times more likely to give birth to a low birthweight infant. In childhood, stunting is increased by 40 percent among children of depressed mothers.

Adolescent and young mothers are particularly at risk, given that the highest burden of poor mental health occurs just as young people are establishing the social, cultural, emotional, educational, and economic resources on which they will depend to maintain their health and well-being for the rest of their lives." (Bill and Melinda Gates Foundation, Global Grand Challenges, 2017)

The interventions identified by BMGF/GCC to address the mental health of adolescent mothers were defined as creative solutions that:

- Consider how the needs of adolescent and young mothers may differ from other populations.

- Enable the health and empowerment of young women as an important goal unto itself, and also recognize the dependence of a child's healthy development on the health and empowerment of their mother.

- Use channels for information that are frequently used and trusted by youth and mothers.

- Tackle the main causes of stigma and discrimination for marginalized and vulnerable mothers and adolescents with mental disorders.

- Use innovative approaches to deploy the required human resources in an efficient manner (Global Grand Challenges 2017).

At the time of finalizing this report, BMGF had not yet announced winners of the Healthy Minds for Adolescent Mothers challenge. It is hoped that the foundation will broaden its support for proposals focusing on trauma caused by forced marriage, and not limit its concerns to motherhood-induced trauma with clinical solutions. The fact that the BMGF has recognized mental health as a major challenge in developing countries is significant—and perhaps long overdue—given the critiques of its 2003 "big hits" in global health as being blind to the prevalence of psychological trauma in the global South (Science 2004).

Building Resilience and Resistance to Child, Early, and Forced Marriage: The Skills Acquisition and Economic Empowerment Approach

Acquiring skills and economic empowerment are presented as key recommendations and strategic alternatives to child, early, and forced marriage for advocates of ending child marriage. While skills are not viewed as having therapeutic value to address trauma, *per se*, the underlying assumption in the literature about ending child marriage, that material advancement will empower girls and give them agency, has implications for resilience and resistance. Different thought leaders on this issue come to skills building from different points of view.

For example, the International Center for Research on Women focuses on the concepts of "empowerment" and "agency" to explore the feelings that girls experienced when forced into early marriage and to document the experience of "emancipation" after going through empowerment interventions. With quote after quote from girls, the center report adds the voices of girls to the analytical inquiry and experiential documentation of empowerment (Warner et al. 2014). The report summary of the key elements of successful empowerment interventions includes factors that relate to the emotions at the points in which the girls' agency is challenged and recovered (Warner et al. 2014, 27).

Plan International USA recommends strategies such as life skills, sexuality education, and economic empowerment to protect girls and build resistance against child marriage (Plan International n.d.). Similarly, in building a theory of change about child marriage, the Girls Not Brides platform emphasises the need "to empower girls and enable them to exercise

their rights, for example, through programs that equip girls with training, skills, and information, as well as the provision of safe spaces and support networks"[5].

The United Nations Population Fund, which approaches the issue of child marriage from a concern about motherhood in childhood, identifies creative solutions to build resistance in broader terms. These solutions include: the protective effect of education; enhancing knowledge, building skills; age-appropriate sexuality education; investing in services for adolescents and young people; ending sexual coercion; investing in girls who are pregnant or have children; reaching girls aged 10 to 14; and engaging boys and men (UNFPA 2013, Section 5).

In a piece entitled "Women and Conflict," the U.S. Agency for International Development (USAID) identifies "isolation, alienation, prolonged emotional trauma, and unwanted pregnancies" affecting women in post-conflict situations (USAID 2007, 1). The USAID report outlines the key elements for successful interventions to address emotional trauma in post-conflict situations as possessing a strong cultural understanding, promoting community-based participation, and increasing women's participation in post-conflict decision-making. The main interventions proposed in the report fall into two categories: job training, and employment and livelihoods on the one hand, and engagement in the post-conflict peace process on the other hand. Box 3 gives an example of the former.

In conclusion, the issue of psychological trauma experienced by girls in child marriage has been recognized by leading organizations working to end child, early, and forced marriage in hot spots in the global South. Girls' experiences of social isolation, exclusion, and disempowerment have been identified, as well as their experiences of domestic abuse and sexual violence. However, there is a dearth of in-depth studies about the psychological trauma girls face as a result of these experiences. Addressing the causes and effects of trauma in child marriages would therefore be beneficial, not only to women and children directly affected by child marriage, but also to the social welfare of successive generations in Nigeria.

BOX 3 VOCATIONAL TRAINING FOR WOMEN IN POST-CONFLICT SITUATIONS

In post-conflict Mozambique, women expressed interest in vocational training in such non-traditional skills as carpentry, masonry, and metalworking—areas in which they felt they had better chances of finding employment. The international implementing nongovernmental organizations trained women in building trade skills and were able to assist them in securing jobs.

(USAID, 2007, p.19)

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[5] https://www.girlsnotbrides.org/wp-content/uploads/2014/07/A-Theory-of-Change-on-Child-Marriage-Background-Brief.pdf

CHILD, EARLY, AND FORCED MARRIAGE AND PSYCHOLOGICAL TRAUMA OF GIRLS IN NORTHEAST AND NORTHWEST NIGERIA

Child, Early, and Forced Marriage: A Persistent and Harmful Traditional Practice

Most recent data points to the fact that child marriage remains a persistent negative practice in Nigeria that has not improved over time. The Multiple Indicator Cluster Survey (MICS) conducted by the National Bureau of Statistics and UNICEF, found that 40 percent of women aged 20 to 29 were married before the age of 18 in 2011; the Demographic Health Survey found that 43 percent of girls were married before the age of 18 in 2013. By 2017, the most recent MICS survey found that this figure had increased to 44.1 percent. More worrying, however, is trend analysis of data showing that child marriage is particularly widespread in Northwest and Northeast Nigeria (table 1).

Table 1. Nigerian Women Aged 20-49 Married Before 18 (percent)

Zones	2017
North Central	39.0
Northeast	56.6
Northwest	67.6
Southeast	13.9
South South	21.5
Southwest	14.6
National Average	44.1

Sources: National Bureau of Statistics and United Nations Children's Fund (UNICEF). 2017 *Multiple Indicator Cluster Survey 2016-17, Survey Findings Report*. Abuja, Nigeria: National Bureau of Statistics and United Nations Children's Fund.

The 2017 MICS shows that Nigeria's status as a hot spot for girls married at younger than the age of 15 has not changed. Indeed, 20.5 percent of women aged 20 to 49 reported in the 2017 MICS that they were married before the age of 15. Again, this figure is highest in the Northwest, with 35.6 percent of women aged 20 to 49 reporting that they were married before the age of 15; and in the Northeast, where the figure is 26.4 percent of women. In the southern zones, single-digit figures are recorded for the Southeast (4.9 percent), Southwest (5.1 percent), and South South (7.6 percent). Figure 1 shows that upward movement in the age of marriage remains slow in the Northwest when compared with other zones in the country.

FIGURE 1. MARRIAGE AT YOUNGER THAN 18 IN NIGERIA, 2007-2016 (PERCENT)
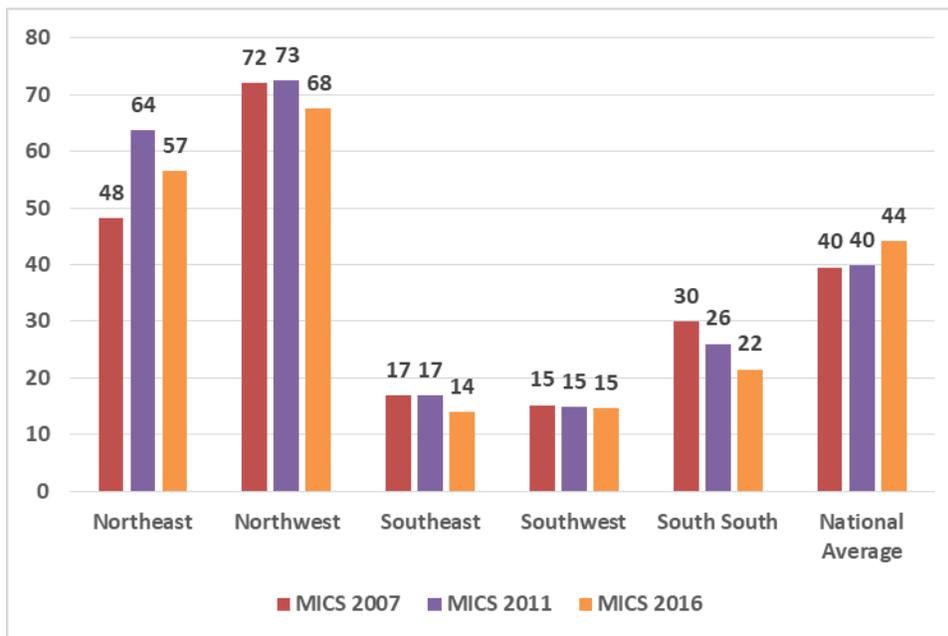
Source: MICS 2007, 2011 & 2017

The prevalence of child marriage in Northern Nigeria and the widespread socio-cultural acceptance of the practice creates situations in which girls, parents, or politicians who condemn or resist child marriage can face social opprobrium or worse (Mark 2013). Seeing that their treatment is socially sanctioned, young girls often suffer in silence, compounding their sense of alienation and distress (Girls Not Brides n.d.). Worsening this situation is the historical practice of abducting adolescent girls in Northern Nigeria for purposes of marrying them.

Perhaps the best-known example of abductions in the global community involved the 276 Chibok girls in 2014. However, since the Boko Haram insurgency began in 2009, a total of 9,000 women and girls have been abducted and a further 13,000 are unaccounted for (Sinclair 2017). Many of the girls were sexually assaulted by Boko Haram fighters, with child marriage used to "give religious sanction to repeated rape" (Baker 2017). Survivors have described how they were threatened, raped, forced to bear children within child marriages, and punished if they tried to escape. While these traumas may be similar to those faced by other child brides, "Boko Haram wives" face additional hardship even after they are rescued, because they and their children are often distrusted and rejected by their former communities. In many cases, abductions take place in rural remote communities that are overrun by bandits, cattle rustlers, Boko Haram deserters, and sleeper cells of the insurgency.

One of the most significant recent incidences of abduction in the Northwest occurred in December 2016, when 58 girls and young women were taken on their way home to the village of Matankari from the local market known as Bindin. The girls were abducted following two years of such extensive night raids by bandits that community members reported that "it even became a tradition of the men and women of Matankari village to

accept the bandits; anytime they come they choose women and bring them back anytime they wish to" (interview notes 15.9.2017). Community leaders report that of the 58 girls and women kidnapped, approximately 45 were girls aged 14 to 17. After eight months, about 13 girls were reported killed, 40 were returned to the village, and five were kept by the bandits as servile wives. There has been no counseling or medical assistance provided to the girls and women of this community.

Matankari village community leaders at interview with dRPC researcher, October 2017

Married Girls Presenting Psychological Trauma in Northern Nigeria

Given the dearth of psychological research in Nigeria, the controversial and highly politicized nature of child marriage, and the culture of silent suffering created by its widespread practice, it is difficult to gauge the scale of the trauma experienced by young girls in child marriages in Northern Nigeria. Anecdotal evidence points to the effects of complex trauma that can be seen in behaviors exhibited by victims of child marriage. The sections below touch on some examples of substance abuse, self-harm or suicidal behavior, and violent acts (Giller 1999) committed by girls in child marriages.

Substance Abuse

Internationally, substance abuse has been related to the experience of trauma, especially in cases of complex trauma, trauma in young people (NCTSN 2008), and child marriages (Le Strat et al. 2011). Northern Nigeria is experiencing a major substance abuse problem, in particular, use of tranquilizers such as codeine among women. This not only affects younger, single women and school graduates, but increasingly, also married women of all classes (ICiR 2016). The multiple traumas of child marriage make these victims particularly vulnerable to substance abuse. Conclusive statistics about the link between drug abuse and child marriage in Northern Nigeria is lacking, particularly since the practice of secluding married women makes it difficult to observe, but this is certainly an area that merits further research.

Psychological Trauma and Violence

Child brides in Northern Nigeria have come to be viewed as both victims of violence or perpetrators of violence in much of the national media. A particularly horrifying example of abuse of child brides is the case of 12-year-old Hauwa Abubakar, who died after her

husband amputated her legs with an axe when she tried to run away from his house for the third time (Harden 1987).

In the past few years, a large number of high-profile cases have been reported in which girls in child marriages in Northern Nigeria have harmed or killed their husbands. In 2012, Maimuna Abdulmumini was convicted of burning her husband to death as he slept when she was just 13 (Clarke, J.S. 2015). In 2014, 14-year-old Wasila Tasi'u poisoned her 35-year-old husband of 17 days and three of his friends (Pleasance 2014). In 2017, 14-year-old Aisha Isah killed her 40-year-old husband by striking him with a pestle during a fight (Opara 2017). These girls were from poor, rural backgrounds, mostly in Northern Nigeria (Isah was from Northern Niger State) and had limited education. All three of the girls reported incidences of abuse, rape, or neglect during their short marriages (Clarke, J.S. 2014). Signs of trauma were specifically seen in Tasi'u, who refused to speak during her trial, frequently broke down in tears (Clarke, J.E. 2015), and became "withdrawn and scared" (Stein 2014). Her lawyer, Hussaina Ibrahim, has said that these cases are just a drop in the ocean, that she alone is handling 54 cases related to child marriage, including cases of attempted murder (Clarke, J.E. 2015), and that there are "hundreds of similar cases" (Clarke, J.S. 2014).

Wasila Tasi'u and lawyer. Credit: Aminu Abubakar of AFP.

Such instances of violence can be viewed as a direct result of trauma and abuse experienced during child marriage. Although violence as a response to childhood trauma is more commonly seen in males than females (Pickett 2017), all victims of violent trauma are more likely to use violence themselves (Unah 2017), and global research shows that the majority of women imprisoned for murder have experienced domestic abuse (Craven 2003). Violence in these situations in Nigeria also could be seen as the girls' attempt to escape the traumatic situation they find themselves in. A specific aspect of trauma in child marriages is the feeling and experience of entrapment. Girls often face familial and societal pressures to get married and do not have the skills or resources to become independent, leaving them with few or no alternatives to marriage. In such situations, especially when compounded by incidents of abuse, the girls may see harming or murdering husbands as the only way to escape a traumatic situation. Evidence in support of this interpretation can be seen in the case of Tasi'u, who reported that she killed her husband because she had been beaten by her father (Stein 2014) and forced to marry "a man she did not love" (Pleasance 2014). Tasi'u had reportedly been expected to go to bed with her husband on the night that she killed him (Rahman 2014), following an experience when he had tied her to a bed and raped her (Clarke, J.E. 2015).

This interpretation has been used in other cases of domestic abuse and is referred to as "battered wife/woman syndrome"—a response to prolonged exposure to domestic abuse that is associated with PTSD. Those experiencing battered wife syndrome can feel that killing their husband is their only chance of escaping abuse, an argument that has been used as part of a successful legal defence in a number of murder trials worldwide (Craven 2003). This syndrome may be even more likely among child brides than among adult brides, because young girls are more dependent and immature, therefore have even fewer viable alternatives in situations of abuse. Because the girls affected by child marriage are so young, it has also been argued that they do not appreciate the severity of their actions (Stein 2014).

While girls who commit these actions may be hoping for liberation, in the context of Northern Nigeria, they are often exposed to even more trauma. Given the local prevalence of child marriage, these girls were not perceived as victims of abuse but rather as criminals, and were often punished socially and legally. Although technically too young to be sentenced to long prison terms (Stein 2014), both Tasi'u and Adbulmumini were charged with culpable homicide and threatened with the death penalty, spent time in harsh and overcrowded conditions in Nigerian jails, and were separated from their family and children (Stein 2014). Tasi'u's case was eventually dismissed (The Guardian 2015) and Abdulmumini was granted a stay of execution in 2014 (CRIN 2014), but was not released from Katsina prison until September 2016 (Igbanoi 2016).

The prevalence of child marriage in Northern Nigeria calls for interventions and strategies to address the unhappiness, psychological trauma, and physical violence precipitated by this practice. The discussion in the following section points to the need to learn from the gaps and limitations of girl-focused vocational skills acquisition projects when designing comprehensive interventions to address psychological trauma.

FINDINGS: ACQUIRING SKILLS TO BUILD RESILIENCE FOR GIRL SURVIVORS IN NORTHEAST NIGERIA

Trauma Profile of Displaced Girls

Of the 50 girls in Science Village Gombe's skills acquisition program in Northeast Nigeria, 41 girls were aged 12 to 15; six were aged 16 to 17 years; and three either did not know their ages or refused to say. All 50 had witnessed killings of close relatives, nine were abducted from their communities, and 41 fled their communities alone or with family members when attacked by Boko Haram. Of the 41 girls who fled, 38 reported that they encountered Boko Haram combatants along the way and eight reported that they were forced to follow the combatants—in other words, they were abducted. All 30 girls who fled without being abducted reported that they saw fighters along the way, witnessed rapes, and saw women—some of them with babies—being carried along with the combatants as chattel.

In short, these girls had experienced or witnessed abduction, rape, and forced marriage. They had also witnessed murder; they described walking on and hiding behind rotting corpses and watching as those who failed to keep up fell behind and were left to die. When questioned about the lingering impact of their traumatic experiences, the predominant responses of the girls were: fear, sadness, feeling down and low (depression), hopelessness, being overwhelmed by life, worrying, or having no feelings—just wanting to sleep. Some girls reported that they were unable to sleep, staying awake night after night, praying or hiding in corners of rooms; others said that they now slept all day and night and found it difficult to attend lessons in Science Village Gombe. The interview sessions were particularly difficult as girls relived the experiences of abduction and escape, and most of them broke down in tears. In many cases, life history documentation could not be conducted in one-on-one interviews, but rather in focus groups, with the girls supporting each other.

When probing questions were asked about which specific experiences had the most negative impact on them and contributed most to their current stress, girls conflated past experiences with their current situation of displacement and did not answer this question by separating the two experiences. Girls' trauma-inducing experiences were clustered into six areas (figure 2).

> *Girls felt fear, sadness, feeling down and low (depression), hopelessness, being overwhelmed by life, worrying, or having no feelings—just wanting to sleep.*

FIGURE 2. SOURCES OF PSYCHOLOGICAL TRAUMA FOR DISPLACED GIRLS IN THE NORTHEAST

Girls identified the murder of family members as the greatest source of trauma. This was followed by the journey to freedom and to internal displacement in Gombe State. There was no significant pattern in the ranking of the other sources of trauma. Violence was included among those sources because many girls recalled being beaten by insurgents. While those conducting the study had expected rape and forced marriage to be the main trauma-inducing factor, instead, the girls talked mainly about the loss of loved ones and their experience of the dangers they had encountered, especially meeting combatants while fleeing.

Rape and forced marriage were viewed as a single undifferentiated violent experience by both girl witnesses and those who were themselves survivors of these violent acts. Girls spoke in terms such as "they used us" or "they used women." None of the girls in Science Village Gombe who were abducted and forced to "marry" a combatant stayed in the relationship for longer than four weeks, because the combatants were on the move and the girls were not taken into camps. According to the interviews, most of the girls in the skills acquisition project appeared to have been abducted by particular contingents of Boko Haram fighters who struck in three locations: Damboa, Borno State, during Ramadan in 2015; Gwoza, Borno State, two weeks after Eid Al Fitr in 2016; and Mubi, Adamawa State, in 2016. The girls described the combatants who overran these settlements as particularly vicious and more interested in killing men and recruiting boys than in taking or keeping women with them as they made their way into the bush—although the girls also noted that many women and girls were taken. A 16-year-old girl who escaped but whose sister was taken told the interviewer:

They were not really after women, they only wanted men. We kept meeting them on the way, some of them wanted to take the women along, some of them showed us the way and told us they were not after women. We suffered on our way because sometimes we came

across corpses, sometimes while running we even stepped on corpses and fell down. The men were forced to wear women's attire (laffaya and wrapper), because if [the combatants] met men on the road, they would kill them, and if they saw any girl they liked, they took them along…. Sometimes, we bumped into [the combatants] in the forest, because some of them were hiding in the forest. Not all of them came into town.

All of the girls who witnessed abduction and rape in their community during the initial attack or while trying to escape viewed the experience as a singular horrific episode, without disaggregating it into its constituent parts.

The Intervention

Science Village Gombe enrolled all 50 girls living with host families in the intervention, gave them identity cards, and set up an attendance register for documenting their participation. The course consisted of a mix of literacy training, skills acquisition, counseling, sports, and agriculture activities for three days a week during a six-month period (table 2).

Table 2. Summary of Northeast Intervention

No.	Component	Description	Time Allocated
1.	Hands-on skills acquisition	Tailoring, cosmetology, catering, making handbags/shoes, gardening, bead making, knitting, agriculture	60 percent
2.	Literacy training	Theoretical classroom training in reading and writing, tailoring, cosmetology, catering, making handbags/shoes, bead making, knitting	30 percent
3.	Counseling	Support for coping skills, moving forward after past traumatic experiences, building resilience and independence	10 percent

Literacy lessons took place for one hour and were followed by two hours of hands-on instruction in crafts. The girls were asked to choose among five crafts, and were grouped accordingly, 10 girls per craft. Each participant had a total of 216 hours of instruction during the six-month project. The girls also received counseling support once a week, through mentors at the intervention site.

Guided by a facilitator, the girls prepared lunch for themselves, which gave them an opportunity to learn modern techniques of domestic chores and basic food and personal hygiene. The girls also had one hour of outdoor sports activities and two hours of gardening. Each of the participants had a square box garden and was responsible for nurturing the crop until it was ready for harvest. Harvesting was staggered, so that every week, the girls would have some crops for themselves. They would give part of the harvested crops to their host family, to boost the family's nutrition, and sell part of the crops, to earn some money.

Displaced girls during the implementation research at Science Village Gombe

Qualitative Findings

The theory of change underlying the pilot project—that acquiring vocational skills and empowerment helps build resilience in the target beneficiaries—was tested through in-depth interviews with 15 girls and three focus group discussions with 15 girls each. Girls were asked probing questions about which skills they had acquired and how the process of learning new skills had helped them to cope with their feelings of sadness, depression, and fear. Girls interviewed and girls who participated in focus groups both had positive things to say about the experience, although with some qualifications. For some of the girls, engaging in creative activities such as cosmetology helped them forget their situation and think about beautiful things instead. Interestingly, one of the positive thoughts that girls voiced was about getting dressed for their "marriage" in the future.

Girls at the implementation research project, Science Village Gombe

While all the girls identified forgetting the past as the primary benefit of the Science Village Gombe program, a small group of girls—10 aged 12 to 16, and four aged 17—said that the program's main benefit was to give them hope that they could earn future incomes (box 4).

Box 4. Girls' Feedback About Potentially Earning Income

"I don't get as frightened as I used to in the beginning. So many things have changed, because we have friends and they teach us new things to help us to make money..." **-Girl 1**

"Whenever I slept, I used to think about what I went through... the sound of guns and all that. I am into trades now, I never thought I would be able to do all this. It has really helped me..." **-Girl 2**

"Everything I have learned here has really changed me, especially the skills I have now. When I go home, I will try to sell [what I made] and even make profit..." **- Girl 3**

This positive feedback notwithstanding, in the two focus group discussions, all the girls reported persistent nightmares, horrifying flashbacks, and paranoia about being trailed by rebels and at risk of abduction. Such fears were reported during the six-month period of the intervention.

Quantitative Findings

The qualitative results were complemented by quantitative data, to determine levels of resilience. Findings from the Resilience Assessment Questionnaire, administered to a sample of 15 girls in the Science Village Gombe program, are presented in table 3.

Table 3: Responses to Resilience Assessment Questionnaire

No.	QUESTIONS	Strongly Disagree	Dis-agree	Not sure	Agree	Strongly Agree
1.	I now have new skills to improve my life	1	3		7	4
2.	When faced with new challenges, I think about how to survive and overcome the challenges		3	2	7	3
3.	I am now able to think positively about myself		3	3	6	3
4.	I am now able to adjust to changes		2	1	4	8
5.	I am now able to forget my past bad experiences		3	2	7	3
6.	I am no longer afraid of people; I now have friendships		3	1	5	6
7.	I am now able to focus my mind and my energy on my current situation so that I can plan for the future		6	3	4	2
8.	I am hopeful	1	4		6	4
9.	I do not blame myself for the bad things that happened to me in the past			1	5	9

Table 3 suggests that while the girls appear to have a generally positive outlook, with strong indications of adaptation— particularly as seen from the responses to questions 3, 4 and 9—the responses to question 7, and to a large extent to question 8, suggest that the six-month intervention in Science Village Gombe did not entirely succeed in giving them hope for the future.

In summary, the Northeast implementation research pilot project points to mixed findings. Girls said they were able to forget traumatic experiences in their 261 contact hours at Science Village Gombe. They did this by forming new friendships and learning new skills. Some girls also saw the income-earning value of their new skills and talked about going home to use their new skills to generate an income. Alongside this positive story, however, the implementation research found that girls had not actually escaped the trauma, because they continued to have nightmares and to view their displacement experience as an extension of trauma. Counselors working with the girls noted in their observation schedules that the girls' situation of displacement in host communities constituted a new source of uncertainty and poverty, and also contributed to a continued experience of stress.

Furthermore, girls were not optimistic about the future, and while some nursed the idea of being a beautiful bride, other girls lived with the shame of abduction and sexual violence, which they were reluctant to speak about. Instead, the girls told researchers about trauma resulting from murders, violence, and hardships. Few of the girls told stories of sexual violence, and to the extent that they did, the girls made no distinction between rape and forced marriage. To the girls, it was all sexual violence, which they had to escape from as fast as possible. It is important to note that none of the girls in this cohort were abducted and taken to insurgent camps. They were taken from villages or abducted at the point of fleeing, abused while on the move, and found their way to Gombe State after months of walking in the forest, begging for lifts and living off the charity of terrorized communities in hiding. That they were uncertain of their future at the end of this intervention is not surprising, and that this intervention lifted some of the burden of trauma also is not surprising.

FINDINGS: ACQUIRING SKILLS TO BUILD RESISTANCE TO EARLY MARRIAGE FOR IN-SCHOOL GIRLS IN NORTHWEST NIGERIA

Trauma Profile of Girls in Kano and Jigawa States

Baseline studies on barriers to girls' education in Partnership for Innovation and Practice in Secondary Education (PSIPSE) schools conducted by the dRPC between 2013 and 2016 pointed to forced marriage as a key factor that both inhibited girls' pursuit of further education and caused stress in their performance. During the first phase of the PSIPSE project (2013–2015) the dRPC conducted surveys on barriers to girls' educational outcomes in 13 government girls' secondary schools in two Northwest Nigerian states, Jigawa and Kano. Baseline, midline and end-line surveys of girls during this first phase found a pyramid of stress factors, with fear about poor academic performance and being withdrawn from school for marriage ranking behind stress about insecurity, poverty, and fights with stepmothers (table 4 captures the findings).

Table 4. Most Worrisome Issues for Girls

Most Worrisome Issues	Kano State (N=54)		Jigawa State (N=54)	
	Frequency	%	Frequency	%
Social violence	25	46	2	4
Early marriage	9	17	36	67
Family issues	8	15	9	17
Failing exams (academic issues)	8	15	4	8
Others	5	7	2	4
Totals	54	100	54	100

Source: Partnership for Innovation and Practice in Secondary Education data collected in 2016.

Stress resulted in girls' inability to concentrate on academic work; episodes of group hysteria; depression; poor academic performance; low confidence about passing exams; and feelings of futility about advancing to tertiary education. Girls expressed strong feelings when talking about the stress related to domestic problems and hardship, as well as about being forced to marry (box 5):

Box 5. Girls' Feedback About Stress Factors

> "My father wants to get me married and I want to study."

> "I want to be a gynecologist, but my future scares me. Since I am getting married soon, my responsibilities will increase, and I cannot study. I don't know what to do. What do I do?"

> "My parents are getting me married without me living my dreams."
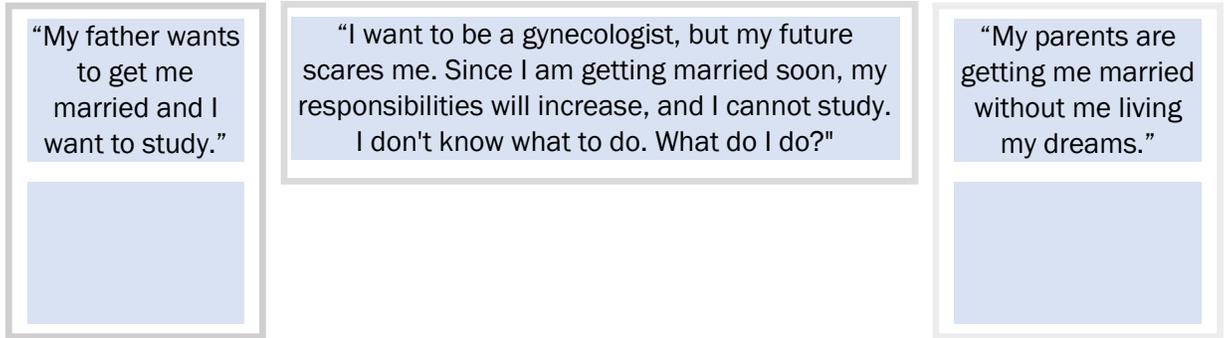
Guidance and Counseling to Address Forced Marriage

Alongside the phenomenon of girls under stress in the government secondary schools in the Northwest, the dRPC study found an almost complete absence of guidance and counseling in the school system. In the second phase of the PSIPSE project (2016–2017) the dRPC made a decision to tackle the stresses faced by girls by introducing a Guidance and Counseling (GandC) component to the project that trained teachers and built capacity in the education administration to sustain the new work. Even during the second phase of PSIPSE, when GandC capacity enhancement became a primary objective of the project, this component remained challenging, because teachers responsible for GandC continued to hold conservative views and failed to support girls' empowerment. When teachers responsible for GandC were asked about the experiences of girls being forced to marry, their responses reflected their conservative views:

> ..."this is something very normal. I think the parents deserve some commendation for letting their daughters to go as far as senior class in the school. Many parents would not allow their girls to even be enrolled into the secondary schools, let alone allowing them to spend four to five years in the system. While I do not support parents' decisions to withdraw their girls from school for early marriage, I would not bitterly condemn it and frown at those parents, because it is apparently part of the culture, something hard to control or modify."

> -A teacher on withdrawal of girls from school for marriage

> "Well, I cannot deny the fact that some parents do withdraw their daughters from school for marriage. As much as we are not happy about it, we are helpless in this regard. We actually do not have much problem with it. In fact, we, as members of school authority, normally accept invitations to such marriages whenever presented. We recently attended and celebrated with one of our students who was withdrawn from school for marriage."

> -A teacher-counselor on withdrawal of girls from school for marriage

Socio-Demographics of Participants

Table 5a summarizes the demographic characteristics of the respondents. A total of 50 girl students participated in the study. The average age of the participants was about 16; 36 of the 50 girls were younger than 17, and 14 girls were approximately 18. Many parents enroll their children in the formal school system comparatively late, usually because they want them to reach a certain level at Islamic schools first, to ensure that they have appreciable religious knowledge. In many cases, this practice leads to children not being enrolled in primary school until the age of 7 or 8. Slightly more than half of the girls (56 percent) were urban dwellers, while 44 percent resided in rural areas.

The study also examined the occupations of the girls' fathers, the highest education attained by their parents and family members funding girls' education, and the size of their families. Most fathers (40 percent) were civil servants, followed by informal sector businessmen such as traders (26 percent), and other categories in private sector employment (34 percent). Regarding education, 64 percent of the girls reported that their fathers had at least a diploma or a university degree, 28 percent had either a primary or secondary school certificate, and 8% of the girls reported that their fathers had no formal education. The highest education levels of the mothers were reported as polytechnic/college/university (34 percent), primary/secondary school (54 percent), and no formal education (12 percent).

Table 5a summarizes these data.

Table 5a. Socio-Demographics of Participants (N=50)

Socio-Demographics	Frequency	%
Age (years)		
15 to 17	36	72
18	14	28
Residence		
Urban	28	56
Rural	22	44
Father's occupation		
Civil servant	20	40
Businessman	13	26
Others	17	34
Father's highest level of education		
Polytechnic/Colleges/Universities	32	64
Primary/ Secondary school	14	28
None	04	08
Mother's highest level of education		
Polytechnic/Colleges/Universities	17	34
Primary/ Secondary school	27	54
None	06	12
Education sponsor		

Father	40	80
Others	10	20
Number of father's children		
< 10	20	40
> =10	30	60

Table 5b shows that civil servant fathers had the highest level of education, while fathers whose occupation fell into the category of other (private sector employees) also had a high level of education.

Table 5b. Father's Level of Education and Type of Occupation

Father's Occupation	Father's Level of Education					
	Tertiary		Primary/ Secondary		None	
	N	%	N	%	N	%
Civil servant (N=20)	17	85	02	10	01	05
Businessman (N=13)	06	46	05	38	02	15
Other (N=17)	12	71	04	24	01	05

Secondary School Girls Under Stress

To explore the issue of stress, the study raised and explored questions around the girls' plans for after secondary school. Table 6 presents the results.

Table 6. Selected Responses on Factors Related to Early Marriage

Girls' Plans for After Secondary School	Number	%
(N=50)		
Girls who plan to get married after school	20	40
Girls who plan to continue education	17	34
Girls who plan to start a business after school	13	26

Table 7 shows that most of the girls who planned to start a business were younger (aged 15 to 17). As expected, a significant number of the 18-year-old girls planned to marry.

Table 7. Girls' Plans for the Future, by Age

Girls' Plans for After Secondary School	Age Category			
	15 to 17 years		18 years	
	Number	%	Number	%
Girls who plan to get married after school (N=20)	12	60	08	40
Girls who plan to continue education (N=17)	13	76	04	24
Girls who plan to start a business after school (N=13)	11	85	02	15

To explore pressure on girls to marry, the study asked girls specific questions about who initiated the arrangements for their marriage. In response, 41 of the 50 girls confirmed that their father (in 24 cases) or other family member (in 17 cases) had already spoken to them about marriage, and that marriages were being arranged for them. Of the other family members, grandmothers were a fairly distant second to fathers, with the distribution as follows: grandmothers (6), uncles (5), mothers (4), and elder sisters (2).

Forced to Marry, or Early Marriage by "Own Choice"?

Of the 41 girls who had been informed about an arranged marriage, 20 said that they were not being forced. They explained that they agreed to marriage once informed, and that they now perceived the imminent marriage as their "own choice," as illustrated in the quote below. This was not an unexpected finding, given that 20 girls indicated they planned to get married after completing secondary school. However, it was surprising that not one of these 20 girls had initiated arrangements towards her marriage; in all cases, a family member handled this.

I want to get married. That has always been my dream. All my friends are getting married. I will marry by next year. My father is arranging it.

The remaining 21 girls did not want to be married and did not accept such arrangements. Of these 21, 16 girls (76 percent) had planned to continue with their education and five (24 percent) had wanted to start a business. When questioned about whether they felt pressured or forced, all 21 girls responded "yes". They stated that pressure came in the form of frequent reminders, and also that pressure accumulated as multiple family members (especially fathers and grandmothers) talked to them about marriage. Reminders were described as both distressing and nagging events with a lot of "*talk talk*".

Of the 41 girls who reported being spoken to about marriage in the past year, 19 girls (46 percent) were reminded one to five times; 13 girls (31 percent) six to 10 times; four girls (8 percent) 11 to 15 times; and 5 girls (12 percent) one to six times. Analysis of responses found an association between the number of times girls were spoken to about marriage and the girls' self-definition of their post-secondary school plans. Indeed, the study found that the 13 girls who were spoken too most frequently about marriage were the same girls who self-identified as getting married after school. Responses from girl respondents in group discussions expressed their feelings about the pressure they faced (box 6).

Box 6. Girls' Feedback About Pressure to Marry

Girl 1: "Oh! the only thing my father wants to see now is me getting married. He cannot stop talking about it. He suddenly became more proud of me when I agreed to marry."

Girl 2: "My grandmother would never allow a change in decision in my proposed marriage after secondary school, no matter what."

Girl 3: "My father wants to get me married, and I want to study."

The 21 girls who felt pressured to marry against their will they reported feeling sad and having a sense of hopelessness. Even when girls were lured into early marriage with the promise that they would be allowed to go back to school, they were not convinced that their husbands would allow them to return to the classroom. All 21 girls who reported pressure to marry were promised that, after marriage, they would be allowed to go back to school.

After-School Clubs as an Alternative to Forced Marriages

After-school club activities included dressmaking, leather work, catering, and baking, among many others. The majority of girls—46 of the 50 girls covered in the sample, or 92 percent—reported that they acquired a range of entrepreneurial skills from the activities. These 46 included 19 of the 20 who planned to get married after school; 14 of the 17 who planned to continue their education; and all 13 girls who planned to start a business.

The most popular skill acquired by the girls was fashion design (29 girls, or 63 percentWhen asked if the new skills they had acquired were adequate to start a business and become self-reliant, 36 of the 50 girls (72 percent) responded yes, while 14 (28 percent) said no.

The 41 girls who had been informed that a marriage was being arranged for them were asked whether their families would reduce the pressure on them to marry if they proceeded to use their new skills to start a business. Only 11 of the girls, or 27 percent, said yes—even though almost all the girls reported that they had acquired new skills, and 72 percent felt that those skills were adequate to start a business.

Economic Empowerment as an Alternative to Early Marriage

The 41 girls whose marriages were being arranged were questioned further about whether their families would support them to go into business as an alternative to early marriage. The 11 girls who had responded "yes" were largely from families in which the fathers had a university education, as shown in table 8.

Table 8 Factors in Parents Agreeing to Delay Marriage

| Selected Factors | Delay marriage if the student establishes business and earns enough money? | | | |
| | Yes | | No | |
	Frequency	%	Frequency	%
Residence				
Urban (N=28)	7	25	21	75
Rural (N=22)	6	27	16	73
Father's education				
Colleges/Universities (N=35)	9	26	26	74
Primary/ Secondary school (N=11)	4	36	7	64
None (N=04)	0	00	4	100

These 11 girls explained that their family's preference for marriage could easily be reversed if they were able to establish a good business and earn an income for the family. One of the girls expressed this in the following terms:

I may be wrong, but I think my uncle can drop his intentions on my marriage after secondary school if he sees that I have a good business and can bring in money. He may see me as no longer a liability [laughs].

The 30 girls who believed that their families would not change their intention to marry them off offered reasons that can be classified into two groups. One group (12 girls) said their family's fear of business failure was the main reason. One girl put it this way:

Yes, we now have some good skills and we are more than grateful for that, but honestly speaking, skills alone cannot help open up shops. We need financial support in the form of capital, we need connections to markets.

"My grandmother would never allow a change in the decision to my marriage after secondary school, no matter how much money I can make. She has always been saying that I am more than old enough to get married now that I am 16. I should marry now."

The second explanation was an inflexible endorsement of early marriage by senior members of families and of the community. Responses from 18 of the girls pointed to this fact. For example, one girl noted:

The strong pressure from my father's friends, my uncles, and the rest of the people won't allow my family to change their mind on my marriage immediately after secondary school.

To summarize, findings from the implementation research in the Northwest reveal that as long as girls are under pressure to marry after completing their secondary education, the option of economic independence by applying the skills acquired from the after-school club activities was not a realistic alternative. Findings point to a reality in which girls are up against fathers, grandmothers, fathers' friends, and community members who have set

notions of an ideal age of marriage at or less than 18 years. This suggests that acquiring skills perse may be limited as a single intervention, and must be complemented by supports including microfinance and—as one girl put it—"contacts".

CONCLUSIONS

The development Research and Projects Center (dRPC) cocreated and supported two pilot implementation research projects to explore significant questions about the potential for skills acquisiton to mitigate the psychological trauma of forced marriages for girl survivors in Northeast Nigeria and for girls in secondary schools in Northwest Nigeria being forced into marriages. While limitations to the methodology and the short, six-month timeline of the intervention research affected the dRPC's ability to distill and generalize findings to the wider population of girls in Northern Nigeria, the study nevertheless produced meaningful results, with implications for future research and programming.

In both Northeast and Northwest, girls wanted to acquire income-generating skills and valued their time in the skills-learning environments. However, while skills distracted them from stressful realities, it was not a cure-all for the girls in the Northeast, who had a negative view of their future prospects and could not see beyond the traumatic experience of flight from their villages and their current displacement. For the in-school girls in the Northwest, acquiring skills without access to finance and social capital, and in the context of strong family determination to marry them off before they became "too old", did not translate to independence. Moreover, both sets of girls valued marriage above the struggle for economic independence. This was so in the case of girls in secondary schools in the Northwest, and also in the case of displaced girls in the Northeast, who were most excited about acquiring beautician skills to attract husbands. These findings demonstrated the fact that marriage continues to be highly prized by girls, their families, and communities, and that economic empowerment is at best viewed as a desirable but unattainable alternative to marriage.

While both sets of girls had experienced psychological trauma, described in detail to the research team, in the case of girls in the Northeast, trauma from sexual violence and forced marriage was intertwined with continuing traumatic experiences, ranging from the murder of loved ones, to poverty and displacement. While girls had both witnessed and experienced sexual violence, their greatest pain came from the murder of sisters, mothers, and especially the men in their families.

For the 50 girls in the secondary school intervention site in the Northwest, the fear and anxiety from being forced into an arranged marriage even before completing secondary school was overwhelming. At the end of the six-month intervention, there was little evidence to suggest that the acquisition of skills provided girls with an alternative to early marriage or that girls would be able to resist the persistent reminders about marriage from authority figures such as their fathers, grandmothers, uncles, and fathers' friends. While the study did not explore the interaction between other trauma sources—such as fears about poor academic performance insecurity, and abduction and homicide in the community—all these factors were part of the girls' existence and shaped their decisions to accept rather than resist marriage.

In conclusion, this study examined an important but unexplored context of psychological trauma in which girls in Northern Nigeria exist. The study explores how forced marriage contributes to trauma as well as acts as an escape from psychological trauma. Findings

show that income-generating skills-based interventions are at best a distraction—they are not a pathway to economic empowerment and do not present an alternative to early marriage. Findings reveal the complexity of the trauma experience as linked to personal and shared experience, and highlight the fact that fear of forced marriage is but one of many fears affecting a girl's mental health. The fact that mental health fragility in girlhood is carried into early motherhood challenges the development community to focus more closely on girls' stresses when designing economic empowerment interventions.

The fact that trauma associated with forced marriage in the Northeast was intertwined with a wider trauma related to abject poverty, insurgency, and displacement, suggests that acquiring skills does not inherently address trauma, but can be part of a trauma treatment program that addresses physical and mental health and provides welfare such as cash transfers for the survivors and host community. This finding presented a challenge for those designing economic empowerment interventions. In this context, skills acquisition interventions for survivors of forced marriage must incorporate psycho-therapeutic programs implemented in safe spaces and with long-term timelines that include mentoring support after the program, and must address infrastructural and historical barriers to true empowerment. Findings from the Northeast also suggest the need for an increased counseling component, as well as for addressing material insecurities and continuing of displaced girls.

In the Northwest, the context of insecurity, a failing secondary school education system with low student pass rates, and a contracting informal economy, renders economic empowerment an unattractive option for girls. The dRPC is working with the Nigerian Educational Research and Development Council (NERDC), under the Partnership for Innovation and Practice in Secondary Education (PSIPSE) project, to introduce entrepreneurship into the new secondary school craft curriculum. The hope is that entrepreneurship will provide girls with new soft skills to complement the vocational skills of existing programs. Without strong guidance and counseling units in the school system, and without access to capital, markets, and mentorship, it is doubtful that vocational skills alone can empower girls and constitute an alternative to early marriage.

Findings from this implementation research have implications for feminist theory building about the utility of economic empowerment for the emancipation of girls and women. While acquiring vocational skills is doubtless good for girls—addressing gender-based exclusion from the workforce, empowering the girls, and perhaps providing alternatives to early marriage—just how this works is a research question that requires further investigation. Moreover, the meaning of alternative to marriage differs for early adolescent schoolgirls who are being pressured into marriage and late adolescent girls who have experienced the trauma of forced marriage and are considering marriage once again.

Such differences must be considered in designing the best mix of vocational, life, and entrepreneurial modules in skills acquisition interventions for girls. But these interventions must be also be mixed with components that address psychological trauma. In addition, interventions to build resilience and resistance to early marriage require cost-effective investments over an extended timeline. Such interventions must be aligned and embedded within national and sub-national governments' small- and medium-scale poverty alleviation programs. Our learning from this study points to the importance of intervention design and re-design based on empirical evidence in which girls' stories, fears, and hopes are central.

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