



**NIGER: Women and Girls are better off today than in 1991**

## **Systems-Level Changes**

**March 2024**





A close-up photograph of two hands, one from a person wearing a yellow patterned garment and the other from a person wearing a red and blue patterned garment, exchanging a small coin. The background is blurred, showing a crowd of people.

# Executive Summary

## Matu Masa Dubara: Elevates Women and Girls

Few development programs have a decade long lifespan and impact. CARE's Mata Masu Dubara model (MMD) has been rolled out since 1991, championing women's leadership and economic empowerment in Niger. Originally conceived as savings and credit groups, the model has evolved over the years to address women's groups demands to have better access to public health services, improve nutrition, receive technical training and participate in civic and electoral processes, among others.

In 2023, CARE initiated a ground-breaking systems evaluation of MMD groups in Niger to explore the actual influence the groups have on women's and girl's voice, leadership, economic autonomy and climate justice, [published in a May 2023 report](#). A complementary mixed-methods evaluation conducted from July to December 2023 explores the influence of MMD on women and girls' maternal health, early and forced marriage, education and nutrition, in partnership with the Government of Niger.

Using CARE's pathways of systems-level change, combined with qualitative and quantitative data, the study explored four dimensions of change for each one of the topics mentioned above: 1. Advocacy to influence policies and programs; 2. Changes in social norms; 3. Supporting social movements; 4. Strengthening systems and social responsibility. Today, CARE Niger serves 33,795 groups with 865,000 women and girl members. In Maradi, Zinder, Dosso and Tahoua 1,378 women and men answered a survey; 314 women and men participated in focus group discussions and individual interviews.

**37%** of women joined MMD in the last 5 years or less.

**14%** of adult women in Niger are members of an MMD group

## Maternal Health

### “Abandonment of bad practices”

Systemic changes in maternal health are summarized by a quote from a representative of local authority in Zinder who noticed “an abandonment of bad practices and bad behaviors on the part of men and women with regard to family management and maternal health.” Among the changes, women are:

- Massively frequenting health centers for children’s vaccination, pre- and post- natal care
- Successfully lobbying local authorities to obtain better health care services (hiring midwives/doulas), providing better equipment in the maternity ward (mattresses)
- Supporting a fine of 5,000 FCFA imposed on women who continue to give birth at home
- Leveraging MMD networks to share their knowledge with other women
- Women members of MMD have a slightly higher rate of per-natal visits (98%) during their last pregnancy, compared to 92% of non-MMD members

...but, use of contraception is still split evenly among women who use and those who don’t with no clear factor (neither education, nor social norms)

The majority of adult women (56%) use contraception while 71% of women in prime child-bearing ages (20 – 40 years old) do. Once again, health centers are critical loci for information and provision of services. Using contraception is encouraged by family members, including husbands and also because women “don’t want another child for the time being.” Women’s improved economic outcomes through MMD groups, and capacity to speak in public and share their knowledge with other women is credited for the increased uses of SRHR and maternal health services. speak in public and share their knowledge with other women is credited for the increased uses of SRHR and maternal health services.

## Early & Forced Marriage

### A slow downward trend

**Systemic changes in early and forced marriages:** while Niger continues to have the highest rate of early girl marriage in the world (77%), there is encouraging evidence that mentalities are starting to change.

- Over 90% of women interviewed acknowledge that marrying a girl younger than 15 years old is not normal
- Parents do wait longer to marry their daughter
- All respondents have a deep knowledge and understanding of the risk early marriages pose to the physical and mental health of their daughters, as well as the impact on her economic prospects.
- There is no evidence of the old celebrations that took place when parents removed a girl from school. In fact, most respondents share a sense that the “mentalities have changed.”

*...but quantitative data still shows a high number of girls under the age of 18 being married, as large families face hard economic choices.*



Niger has the highest rate of early child marriage in the world despite strong commitment from the Government to meet SDG 5.3.1. to eliminate it by 2030. Participants acknowledged understanding the risks early marriage poses to girls’ health, including early pregnancy, general





risks to her health, depression, social isolation, and interrupted education. Over 50% of women respondents shared that they agreed to early marriage for their daughters to avoid pregnancy, presumably out of wedlock, and avoid juvenile delinquency. Tradition (20%) and reducing household burden (11%) come last.

The Government of Niger has instituted Protection Committees that are often composed of MMD members. These members enjoy high status in communities where they are seen as local champions for girls' and women's rights. However, change is still very slow to come. 61% of women interviewed knew of them, but few are aware of the number of interventions the Committees actually undertake.

## Mothers and Fathers Support Girls' Education

### An irreversible change

**Systemic changes in girls' education:** "Nowadays, boys only like educated girls." While women's literacy rate (29.6%) still lags men's (46%), when it comes to education, mentalities are also starting to change. Men and women agree that

- The same education opportunities are afforded to boys and girls
- Girls and boys tend to start school at the same age, 7 year old
- Girls should get a secondary education and beyond
- No more celebration when girls drop out of school

*...but girls are perceived as being less attentive to their studies and more likely to get sexually active if they go and stay in school.*

Men and women shared that it was accepted that girls get a secondary education and agreed that girls and boys had the same educational opportunities. In their communities, adults feel that boys and girls are encouraged to marry someone who has completed their education cycle (high school or higher). More men than women disagreed with the statement that girls are expected to leave school once they marry. Focus group discussions clearly highlighted the change in attitudes: "Nowadays, girls study like boys, in fact we even have female teachers from our villages." Women members of MMD further shared that "parents are no longer opposing a girl's education, rather they encourage them." Girls still drop out of school though, because of their lack of academic achievement." Parents also indicate their belief that girls tend to pay less attention to their studies than boys and that sending them to school carries the risk of early unwanted pregnancies.

## Nutrition : MMD Members Have Better Access to Land

**Systemic changes in nutrition:** Access to land, especially fertile land remains challenging for women. However, women members of MMD seem to have better access to land ownership than non- MMD members.

- Women and youth have a better understanding of the importance of providing pregnant and breast-feeding women nutritious foods
- Women and youth are more likely to sacrifice some of their nutritious foods and give it to pregnant or breastfeeding women
- A majority of women know the benefits of exclusive breastfeeding, however most of them make the decision to adopt it with the health agent.

Women don't own land, except when they are MMD members. Indeed, MMD membership increases the likelihood that women will purchase land themselves. MMD members' land is more fertile because of the training they have received in income generation, agriculture and soil management.

Women and youth agree that nutritious foods should be provided to pregnant and breastfeeding women, as a community priority. While the same groups of respondents believe that community members will "eat less nutritious food to give it to pregnant and breastfeeding women", men seem to be more sceptic on the pervasiveness of the sacrifice. Again, women and youth are much more aware than men about exclusive breastfeeding than men.

### Way Forward

Are women and girls of Niger better off in 2023 than they were in 1991?

Yes.

While the review noted progress made towards more gender equity for girls' education, access and use of sexual and reproductive health services and more attention paid to the welfare of pregnant and breastfeeding women, early and forced marriage still persists. Leveraging

The power of MMD groups and other trusted community leaders (teachers, principals, MMD female leaders, religious leaders) to design interventions to curb early marriage would yield tremendous benefits. Indeed, early marriage robs girls of 9% of their future income.<sup>1</sup>

Through MMD, women of Niger have found their voice, been elected to parliament in record numbers (over 30% in 2021), and participate in local decision making processes as town councilors and local representatives. Acting both at the program, local level and the national, influencing one, CARE, its partners and networks of MMD groups will continue to create a better, safer, more prosperous environment for Nigerian girls.

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<sup>1</sup> <https://econreview.studentorg.berkeley.edu/the-economics-of-child-marriage/>



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