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Promotion and protection of the rights of children: promotion and protection of the rights of children

The girl child

Report of the Secretary-General

Summary

In its resolution [72/154](#), the General Assembly requested the Secretary-General to submit a report at its seventy-fourth session on improvements in the social, economic and political investments made by Member States towards empowering girls in rural areas, with a view to assessing the impact of that resolution on the well-being of the girl child. In the present report, advancements in the legal and normative framework supporting girls living in rural areas are highlighted, social, economic and political investments made towards empowering this group are presented, ongoing challenges are described and recommendations for continued progress in this area are included.

* [A/74/150](#).



I. Introduction

1. Aggregate statistics regularly show that, on average, compared with their urban counterparts, children who live in rural areas fare worse across key indicators of child survival and well-being. In rural areas, a smaller share of households has access to basic drinking water and sanitation services. Fewer births are attended by skilled health personnel or are registered, and more children have stunted growth or die before their fifth birthday.¹ At the same time, girls living in rural areas face multiple and intersecting forms of poverty and discrimination, including gender inequality, social exclusion and unequal access to basic social services, power and resources. Still, it is evident that some progress has been made towards the realization of the rights of girls living in rural areas, through increased social, economic and political investments by Member States and other stakeholders in a broad range of sector-specific and multidimensional programming. Such efforts have led to stronger legal norms and standards and the improved delivery of the services needed to support girls and women in rural areas so that they can thrive and reach their greatest potential.

II. Legal and normative framework, global commitments and national-level progress

A. International legal and normative framework

2. States have an obligation to realize the rights of all girls and end all forms of discrimination against them. This is enshrined in the relevant international legal framework and fundamental human rights treaties, including the Charter of the United Nations, the Universal Declaration of Human Rights, the International Covenant on Civil and Political Rights and the International Covenant on Economic, Social and Cultural Rights. In particular, in the Convention on the Rights of the Child and the Optional Protocols thereto, the obligations of signatory States parties to ensure the rights of all children equally thereunder and without discrimination of any kind are reinforced.

3. In article 14 of the Convention on the Elimination of All Forms of Discrimination against Women, the obligation of States parties to take measures to eliminate discrimination against women living in rural areas is underlined. In addition, States parties are obligated to apply all measures of the Convention to women living in rural areas and to ensure that they participate equally in and benefit from rural development. In general recommendation No. 34 (2016) on the rights of rural women, the vital contributions of rural women and the urgent need to improve the protection of their rights are acknowledged.

4. The Convention on the Rights of Persons with Disabilities is aimed at promoting, protecting and ensuring the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and promoting respect for their inherent dignity, without any form of discrimination. Several articles of the Convention are of unique importance to girls who live in rural areas. Article 9 promotes accessibility for persons with disabilities to enable them to live independently and participate fully in all aspects of life in urban and rural areas; article 25 recognizes the right of persons with disabilities to the highest attainable standard of health, including gender-sensitive health services that are provided as close as possible to their own communities, including in rural areas; and article 26

¹ United Nations Children's Fund (UNICEF), *Advantage or Paradox? The Challenge for Children and Young People of Growing Up Urban* (New York, 2018).

reiterates the right of persons with disabilities to maximum independence and inclusion and participation in all aspects of life, as close as possible to their own communities, including in rural areas.

5. In its resolution [70/132](#), the General Assembly recognized continuing economic and social disadvantages for rural women and girls and expressed its dedication to improving their situation. It also recognized that rural women were critical agents in poverty reduction, that they were crucial to the achievement of food security and nutrition in poor and vulnerable households and to environmental sustainability. It urged Member States to attach greater importance to improving the situation of rural women and girls in their national, regional and global development strategies and encouraged Member States, United Nations entities and other stakeholders to promote the empowerment of rural women. In the United Nations Declaration on the Rights of Peasants and Other People Working in Rural Areas, 2018, the key economic role of rural women in families and national economies was recognized.

6. Several conventions of the International Labour Organization (ILO) have a direct impact on girls living in rural areas, including the Minimum Age Convention, 1973 (No. 138); the Worst Forms of Child Labour Convention, 1999 (No. 182); the Forced Labour Convention, 1930 (No. 29), the Protocol of 2014 thereto and the Forced Labour (Supplementary Measures) Recommendation, 2014 (No. 203); and the Domestic Workers Convention, 2011 (No. 189).

B. Global and regional commitments and initiatives

7. The Beijing Declaration and Platform for Action, adopted at the Fourth World Conference on Women, in 1995, reiterates the need to accelerate gender equality and the empowerment of women and girls who live in rural areas, continue to live in conditions of economic underdevelopment and social marginalization and are most affected by environmental degradation. In the strategic objectives and actions outlined in the Platform, numerous recommendations are made for improving the lives of women and girls who live in rural areas, such as reducing illiteracy, increasing household food and nutrition security, strengthening employment and training programmes and increasing access to health services and reproductive health care. In 2015, the 20-year review of the implementation of the Declaration and Platform brought renewed attention to the urgency of eradicating poverty and improving the livelihoods, well-being and resilience of women and girls who live in rural areas.

8. In the Programme of Action of the International Conference on Population and Development, 1994, there is a call for an integrated approach to the special nutritional, general and reproductive health, education and social needs of girls and young women, in particular those among the poorest segments of society, including the rural poor.

9. With gender equality and the empowerment of women at its core, the 2030 Agenda for Sustainable Development presents significant opportunities for Member States to accelerate progress towards empowering women and girls living in rural areas. For example, in Goal 2, structural barriers to food and nutrition security for women and girls living in rural areas are addressed; in Goal 3, sustained and concerted efforts to enhance reproductive, maternal, newborn and child health are called for; in Goal 4, the right of women and girls who live in rural areas to inclusive and equitable quality education is underlined; Goal 6 is aimed at ending open defecation, with a specific focus on the needs of women and girls, noting that open defecation is particularly acute in rural areas. Through the adoption of the 2030 Agenda, Member States committed themselves to increasing investment in rural areas, as well as to

supporting small farmers, who are often women and girls engaged in subsistence farming, small-scale production and agro-industries.

10. In 2018, at the sixty-second session of the Commission on the Status of Women, the priority theme, “Challenges and opportunities in achieving gender equality and the empowerment of rural women and girls”, was promoted. Among other aspects, the challenges and opportunities that girls with disabilities face in rural settings were emphasized. In the session’s conclusions, the need to strengthen normative, legal and policy frameworks, implement economic and social policies for the empowerment of all rural women and girls and strengthen the collective voice, leadership and decision-making of all rural women and girls was highlighted.

11. In the Addis Ababa Action Agenda of the Third International Conference on Financing for Development, it is noted that the majority of poor persons live in rural areas, and, in this context, the need to achieve gender equality, empower all women and girls and fully realize their human rights to achieve sustained, inclusive and equitable economic growth and sustainable development is affirmed.

12. In “Rural youth employment”, a report prepared by the World Bank Group and the International Fund for Agricultural Development (IFAD) as an input for the Development Working Group of the Group of 20 in 2017, the potential that evolving agriculture and food systems have for creating youth employment is highlighted, and a road map for increasing rural youth employment is provided, underlining the need to focus on women and girls living in rural areas because they are often at a greater disadvantage.² The International Land Coalition is a global network of more than 200 civil society and intergovernmental organizations representing 64 countries. To secure land rights, in particular for smallholder farmers, indigenous peoples, pastoralists and women, the Coalition works to bring about positive impacts on the lives of persons, including girls, who live in rural areas.

13. Regional initiatives are also aimed at strengthening laws and policies on key issues that disproportionately affect girls who live in rural areas, such as the African Union Campaign to End Child Marriage and a series of efforts in South Asia, including the Regional Action Plan to End Child Marriage in South Asia (2015–2018), the South Asia Initiative to End Violence against Children and the Kathmandu Call for Action to End Child Marriage in South Asia.

C. Legal and normative progress at the national level

14. Some Member States are taking targeted actions to strengthen national legal and policy frameworks and financing to promote the rights of girls, including those living in rural areas. Such actions include land reform; investment in gender-sensitive infrastructure; the promotion of cash incentives and skills development programmes; initiatives for enhancing the productivity and sustainability of women’s agricultural self-employment, such as subsidies for access to resources; and support for menstrual health and hygiene for girls in peri-urban and rural schools.³ In addition, some States have criminalized practices that affect many girls who live in rural areas, such as child marriage and gender-based violence. National human rights institutions act as a

² World Bank Group and IFAD, *Rural Youth Employment* (2017).

³ United Nations Entity for Gender Equality and the Empowerment of Women (UN-Women), *Progress of the World’s Women 2015–2016: Transforming Economies, Realizing Rights* (New York, 2015).

catalyst to empower women and girls living in rural areas and help to combat the discrimination that they experience.⁴

III. Social, economic and political investments towards empowering girls living in rural areas

A. Poverty and social inclusion

15. Many of the world's 1 billion persons who live in unacceptable conditions of poverty are concentrated in rural areas (A/72/207, para. 7). Moreover, many of the world's poorest persons are girls and women.⁵ Several national Governments, multilateral organizations and non-governmental organizations are actively investing in poverty reduction and social inclusion programming to focus on girls who live in rural areas. For example, the programme entitled "Accelerating progress towards the economic empowerment of rural women", a joint initiative of the Food and Agriculture Organization of the United Nations (FAO), the World Food Programme (WFP), the United Nations Entity for Gender Equality and the Empowerment of Women (UN-Women) and IFAD, provides support, including agricultural training, nutritional assistance, financial services and training in entrepreneurship, to women and children, including girls, who live in rural areas of Ethiopia, Guatemala, Kyrgyzstan, Liberia, Nepal, the Niger and Rwanda.⁶ Countries throughout the Middle East, North Africa and elsewhere are working to reduce gender gaps, reform policies and provide material support to vulnerable girls and families who live in rural areas.

B. Education

16. Gender disparities in education persist for girls who live in rural areas across the globe. They are often fuelled by a range of issues that tend to be acute in rural areas, such as discriminatory social norms; a lack of safety, in particular in public spaces; a lack of female teachers; long distances to travel to school; and a lack of clean water and hygiene facilities. As a result, out-of-school children in low-income countries are more likely to be girls and more likely to come from poor families living in remote areas.⁷ In the Middle East and North Africa, South Asia and sub-Saharan Africa, gender-based disadvantages in education widen as children approach secondary school age, – in particular for girls who are poor, live in rural areas, are from ethnic minority groups and have disabilities.⁸

17. Some national Governments, with the support of partners, are working to remove educational barriers for the most marginalized persons by advancing programmes targeted at underserved and rural communities. Such programmes include teacher training and support for teachers dealing with bilingual education, girls' education, rural learners and other complexities; support for "second chance" education for adolescents who have not been able to complete their primary or secondary education; efforts to attract qualified teachers to poor and remote areas;

⁴ Global Alliance of National Human Rights Institutions and Asia Pacific Forum, "The role of national human rights institutions in promoting gender equality and the empowerment of women and girls living in rural areas", report presented at the sixty-second session of the Commission on the Status of Women, New York, March 2018.

⁵ See www.unwomen.org/en/news/in-focus/rural-women-day/2013.

⁶ IFAD, *Annual Report 2017* (Rome, 2017).

⁷ UNICEF, *Annual Results Report 2017: Education* (New York, 2018).

⁸ UNICEF, *Annual Results Report 2017: Gender Equality* (New York, 2018).

and social protection initiatives aimed at reducing educational barriers for children who live in rural areas.

18. Ensuring water, sanitation and hygiene in schools is also a key element of ensuring access to education for girls living in rural areas in part because many rural areas have poor sanitation infrastructure. In 2018, the United Nations Children’s Fund (UNICEF) produced the first comprehensive global guidance package on menstrual health and hygiene in schools. Afghanistan, Cambodia and other countries are working with partners to improve the menstrual health and hygiene friendliness of water, sanitation and hygiene facilities in schools in such areas through assessments, guidelines for teachers and other initiatives.⁹

19. As a direct result of the gender-related education gap, girls who live in rural areas are not well represented in the labour force. This is indicated by the rate of young people between the ages of 15 and 29 years who are not in education, employment or training, which is twice as high for girls and women than for boys and men and is presumably even higher for girls who live in rural areas.¹⁰

C. Health and HIV

20. In 2017, 5.4 million children under 5 years of age throughout the world died, largely owing to preventable diseases.¹¹ Children living in remote rural areas face an increased risk, owing in part to their higher risk of not being vaccinated.¹² In response, some Governments are increasing their investments in improving health services for rural populations, including girls. For example, Zambia has constructed hundreds of new health posts, including in rural areas, and upgraded dozens of clinics. Other investments by national Governments include training health workers to conduct at-home visits, including in rural areas; training more female community health workers; working to dispel negative social norms and perceptions about maternal and newborn care; improving access to nutrition services and counselling for children, adolescents and women, including those who live in rural areas; and expanding the reach of immunizations, such as the human papillomavirus vaccine, in rural and other marginalized communities.

21. Impoverished, rural and poorly educated adolescent girls remain at risk of contracting sexually transmitted infections and are more likely to become pregnant than their wealthier, urban and more educated counterparts. There are three times more adolescent pregnancies among rural and indigenous populations than among urban ones.¹³ Investments have proved effective with regard to developing and implementing strategies for maternal, newborn, child and adolescent health. For instance, El Salvador, Nepal, Peru, Sri Lanka and other countries have reported notable progress in advancing maternal health services in rural areas.

22. Across the globe, 3 million children and adolescents were estimated to be living with HIV in 2017. Globally, two thirds of new HIV infections among adolescents

⁹ UNICEF, *Annual Results Report 2017: Water, Sanitation and Hygiene* (New York, 2018); UNICEF, *Annual Results Report 2016: Education* (New York, 2017).

¹⁰ International Labour Organization (ILO) and UNICEF, “GirlForce: skills, education and training for girls now”, October 2018.

¹¹ UNICEF and others, “Levels and trends in child mortality”, 2018.

¹² Estimates generated by the World Health Organization (WHO) and the Maternal and Child Epidemiology Estimation Group (2018); UNICEF, *Annual Results Report 2017: Health* (New York, 2018).

¹³ Every Woman Every Child, *The Global Strategy for Women’s, Children’s and Adolescents’ Health (2016–2030)* (2015).

between 15 and 19 years of age were among girls.¹⁴ In response, the world has seen an unprecedented infusion of investment in and contributions to the HIV sector in recent years. For instance, in Guatemala, the Ministry of Health and the Pan American Health Organization, in collaboration with UNICEF, have implemented a community-based screening programme for pregnant women in indigenous and rural populations.

23. Key global programmes include the All In initiative; the Adolescent Girls Initiative; the DREAMS (determined, resilient, empowered, AIDS-free, mentored and safe women) Initiative; the HIV Epidemic Response fund of the Global Fund to Fight AIDS, Tuberculosis and Malaria; the Start Free, Stay Free, AIDS Free framework; and the programme 2gether 4 SRHR (together for sexual and reproductive health and rights), a collaboration launched in 2019 involving UNICEF, the United Nations Population Fund (UNFPA), the Joint United Nations Programme on HIV/AIDS (UNAIDS) and the World Health Organization (WHO) in East and Southern Africa.

24. In 2018, WHO produced implementation guidance on pre-exposure prophylaxis to address the gaps in the prevention of HIV for adolescents and young people. The guidance also benefits adolescent girls who live in rural areas.¹⁵ In addition, UNFPA, UNICEF, the United Nations Development Programme (UNDP) and the United Nations Educational, Scientific and Cultural Organization (UNESCO) have developed a programming toolkit that includes technical assistance to support States in scaling up HIV prevention interventions for and with key adolescent and young populations. In 2018, UNESCO, UNFPA and other partners revised and republished *International Technical Guidance on Sexuality Education*, which, among other important aspects, provides guidance on delivering comprehensive sexuality education programmes within and outside school settings and includes a focus on indigenous young people who live in rural areas.

D. Violence, sexual abuse and exploitation

25. Across the world, girls experience physical, sexual and emotional violence at staggering rates. According to data from the Violence against Children and Youth Surveys, an initiative led by the Centers for Disease Control and Prevention of the United States of America and the Together for Girls partnership, an overwhelming number of girls, including those living in rural areas, experience sexual violence before they reach 18 years of age. This includes large numbers of girls and young women who are harassed, tricked or coerced into or physically forced to have sex, regardless of their economic class, support system or location.

26. Given the severe problem of distribution of child sexual abuse material on the Internet, in particular images of girls, the United Nations Office on Drugs and Crime (UNODC) works to prevent girls from becoming victims of cyber-enabled crime in urban and rural zones in El Salvador and Guatemala and supports Member States to strengthen judicial responses to such crimes. The Safe Access to Fuel and Energy Humanitarian Working Group of the United Nations aims to reduce the risk of violence that women and girls who live in rural areas face while collecting firewood. In humanitarian settings and rural areas, girls and women often travel long distances to find sufficient firewood to cook for their families, which exposes them to the risks of physical and sexual violence. Several national Governments, including those of Rwanda, South Africa and others, are taking additional actions to address gender-

¹⁴ UNICEF, “Children, HIV and AIDS: global snapshot” infographic, December 2018. Available at <https://reliefweb.int/sites/reliefweb.int/files/resources/Global-snapshot-2018.pdf>.

¹⁵ WHO, “Going global: the adoption of the World Health Organization’s enabling recommendation on oral pre-exposure prophylaxis for HIV”, *Sexual Health*, vol. 15, No. 6 (2018).

based violence through national-level programmes, such as call-in hotlines, safe spaces and other interventions.

E. Harmful practices

27. Each year, 15 million girls are married before they reach 18 years of age, largely in the poorest households and rural areas of sub-Saharan Africa and South Asia.¹⁶ UNICEF reports that the proportion of women between 20 and 24 years of age globally who were married by the age of 18 tends to be higher in rural areas than in urban ones, including across all countries in West and Central Africa with available data.¹⁷ Girls who are subject to child marriage are at increased risk of sexual abuse and exploitation. Growing global investments and increasing momentum towards eliminating this harmful practice are evident.

28. The General Assembly adopted resolution [73/153](#), its third resolution on child, early and forced marriage, in 2018. The Global Programme to Accelerate Action to End Child Marriage has invested in reaching adolescent girls in 12 high-burden countries through life skills interventions linked to education, health and child protection systems. The Global Programme also undertakes large-scale media campaigns across 64 countries.

29. The exact number of girls and women worldwide who have undergone female genital mutilation remains unknown, yet overall estimates indicate that the practice has been declining in the past three decades.¹⁸ However, girls and women between the ages of 15 and 49 years who live in rural areas are, on average, still more likely to think that the practice should continue.¹⁹ To address this, the UNFPA-UNICEF Joint Programme to Eliminate Female Genital Mutilation works to provide high-quality services and increase community engagement while fortifying legal and normative frameworks in the 17 countries with the highest rates of female genital mutilation. With support from the Joint Programme, 13 countries have developed legal and policy frameworks banning the practice, and 3.2 million girls and women have received protection against it and specialized care services.

30. The Spotlight Initiative, a joint effort of the European Union and the United Nations to end violence against women and girls, began programming in Africa in 2018. It is in Africa where the investment is greatest, with approximately \$300 million provided to eight countries and at the regional level with the aim of preventing and redressing sexual and gender-based violence, with an explicit focus on harmful practices, including female genital mutilation and child marriage, which have a heavy impact on girls living in rural areas. The Initiative brings together all relevant stakeholders in support of the full implementation of the 2030 Agenda and the right of women and girls to live a life free of violence and harm.

F. Food and nutrition

31. Malnutrition, including stunted growth, wasting, anaemia and obesity, plagues children across the globe. Africa and Asia, where the majority of people live in rural

¹⁶ UNESCO Institute for Statistics and UNICEF, *Fixing the Broken Promise of Education for All: Findings from the Global Initiative on Out-of-School Children* (Montreal, 2015).

¹⁷ UNICEF, “Child marriage”, March 2018. Available at <https://data.unicef.org/topic/child-protection/child-marriage>. Data based on demographic and health surveys and multiple indicator cluster surveys.

¹⁸ UNICEF, “Child marriage: latest trends and future prospects”, 2018.

¹⁹ UNICEF, data set on female genital mutilation, October 2018. Available at <https://data.unicef.org/resources/dataset/fgm/>.

areas, are the two regions most affected by nutritional deficiencies.²⁰ There, more than one in three women suffer from anaemia, more than one quarter of children under 5 years of age have stunted growth and the number of overweight children is on the rise.²¹ In every region of the world, women are slightly more likely to be food-insecure than men.²²

32. Recognizing that the improved nutrition of female infants and children translates into better survival, growth and development among adolescent girls and women, the General Assembly proclaimed 2016–2025 the United Nations Decade of Action on Nutrition. The Decade of Action is a commitment of WHO member States to ensuring the sustained and coherent implementation of nutrition policies and programmes, including for girls who live in rural areas. Through the Scaling Up Nutrition movement, 60 Governments have joined together to mobilize multisectoral support for improved maternal and child nutrition and to prioritize nutrition in their national development plans, noting that equity, equality and non-discrimination for all, with women and girls at the centre, are a top priority.

33. WFP works to analyse gender equality and the empowerment of women with the ultimate goal of ensuring that the different food security and nutrition needs of women, men, girls and boys are met, including adapting programmes to the needs of girls throughout their life cycle. Through its school feeding programmes, WFP provides millions of girls and boys with meals and snacks every year, including in rural areas, where more than half the recipients are girls. The organization also prioritizes the education and well-being of girls, taking a multisectoral approach to nutrition education by promoting messages related to nutrition, nutrition-sensitive practices, life skills, education, the risks of child marriage and pregnancy, HIV/AIDS and other issues.

34. UNICEF collaborated with Governments in 30 countries in 2018 to roll out programmes to improve the quality of the diets and the nutritional status of adolescent boys and girls, reaching some 58 million adolescents.²³ In the same year, UNICEF reached 15 million girls and boys with micronutrient powders to support their optimal growth and development and more than 255 million children, including girls who live in rural areas, with vitamin A supplements to support their immune systems and reduce their risk of mortality.²⁴

35. In some contexts, WFP, UNICEF and other United Nations entities have partnered with national Governments to provide adolescent girls with iron and folic acid tablets during lean agricultural seasons, given the high percentage of women and girls of reproductive age who suffer from anaemia.

G. Water, sanitation, hygiene and other infrastructural services

36. Globally, progress towards the realization of the rights to safe water, sanitation and hygiene has been slow and uneven, in particular in rural areas, where girls bear a

²⁰ FAO and others, *The State of Food Security and Nutrition in the World 2017: Building Resilience for Peace and Food Security* (Rome, FAO, 2017).

²¹ WHO, “Prevalence of anaemia in women of reproductive age: estimates by WHO region”, Global Health Observatory data repository. Available at <http://apps.who.int/gho/data/view.main.ANAEMIAWOMENPREVANEMIAREG> (accessed on 19 June 2019); UNICEF, WHO and World Bank Group, “Levels and trends in child malnutrition: UNICEF/WHO/World Bank Group joint child malnutrition estimates – key findings of the 2018 edition”, 2018.

²² FAO and others, *The State of Food Security and Nutrition in the World 2017*.

²³ UNICEF, *Goal Area 1: Every Child Survives and Thrives – Global Annual Results Report 2018* (New York, 2019).

²⁴ Ibid.

disproportionate share of the impact of the inadequate public service delivery of water, sanitation and hygiene.²⁵ Around the world, girls and women have the primary responsibility for collecting and using household water where water is not provided publicly. They must also devise complex coping mechanisms to maintain hygiene and their dignity, in particular during menstruation. Unsafe water, unsafe sanitation and inadequate handwashing are the leading health risk factors for children between 10 and 14 years of age, and diarrhoeal disease remains the third-highest cause of disability-adjusted life years for young adolescent girls.²⁶

37. At the same time, in some countries, investments have led to gains in overall access to safe water and basic sanitation and the reduction of open defecation, which has positive ramifications for girls and other persons living in rural areas. Notably, as of 2018, more than 64 million persons in India are living in newly certified open-defecation-free villages.²⁷

38. In addition, menstrual health and hygiene in schools and communities and improving water, sanitation and hygiene services in emergency contexts are becoming greater policy and programme priorities at the country, regional and global levels. These initiatives are aimed at enhancing the safety and security of women and girls, and thereby decreasing gender-based violence, as they gain access to latrines and water points, including in camps for displaced persons. They are also aimed at making poorly designed infrastructure more gender-sensitive and increasing the availability of water, sanitation and hygiene and menstrual health and hygiene facilities in camps and in rural and other areas. In this regard, in 2015, the United Nations Inter-Agency Standing Committee released the Guidelines for Integrating Gender-based Violence Interventions in Humanitarian Action, which include comprehensive guidance on water, sanitation and hygiene across all stages of humanitarian programming.

39. In 2018, the United Nations Human Settlements Programme (UN-Habitat) developed the document entitled “Urban-rural linkages: guiding principles and framework for action to advance integrated territorial development”, which contains specific provisions to enhance integrated territorial development and mainstream health and well-being into public service planning, including menstrual health and hygiene and safe spaces for the physical activity of women, young people and children in urban and rural areas.

H. Participation

40. The participation of children and adolescents through their active consultation on the formulation, planning, implementation and monitoring of policies, programmes and projects aimed at tackling poverty improves accountability between duty bearers and rights holders. It is also a main determinant of the successful empowerment of rural girls, because girls who meaningfully participate in decision-making that affects their lives, families, schools and communities are more likely to improve their own circumstances and contribute to social progress.

41. In 2018, Governments, multilateral organizations, civil society, the private sector and young people around the world launched Generation Unlimited, a global partnership that is focused on reducing the number of girls and boys not in education, employment or training. In Turkey, Zambia and other countries, UNICEF has

²⁵ WHO and UNICEF, *Progress on Drinking Water, Sanitation and Hygiene: 2017 Update and SDG Baselines* (Geneva, 2017).

²⁶ WHO, *Global Accelerated Action for the Health of Adolescents (AA-HA!): Guidance to Support Country Implementation* (Geneva, 2017).

²⁷ UNICEF, *Goal Area 4: Every Child Lives in a Clean and Safe Environment – Global Annual Results Report 2018* (New York, 2019).

prioritized the civic engagement of girls, including those who live in rural areas, in issues related to their well-being through skills development, strengthening platforms (such as student councils and girls' clubs) and dialogue with decision makers.

42. Household methodologies are used by IFAD to address underlying social norms, attitudes, behaviours and systems that represent the root causes of gender inequality, which is acute in rural areas. As household methodologies improve intrahousehold relationships and increase harmony, they also have the potential to reduce violence towards women and girls and their abuse and exploitation.

IV. Ongoing challenges for empowering girls in rural areas

A. Limited access to services

43. Notwithstanding significant investments, women and girls living in rural areas still suffer disproportionately from human rights violations; multiple and intersecting forms of poverty; political exclusion; a lack of access to information and social protection; unequal access to opportunities and basic social services, power and resources; gender inequality with regard to domestic work; and the effects of climate change. Moreover, many programmes in which alleviating gender discrimination and deprivation is prioritized are focused on women and fail to reach vulnerable girls before they reach 18 years of age.

44. Girls living in rural areas in low-income countries are far more likely to be out of school than other children.²⁸ In the majority of the countries with available data, less than half of poor women who live in rural areas have basic literacy skills, and they tend to be less literate than the rural average.²⁹ In addition, many countries have closed or consolidated rural schools owing to rural-urban migration or reduced fertility rates.³⁰ Such disadvantages fuel barriers to employment and decision-making, create incentives for girls to move from rural to urban areas and have other negative individual and social consequences.³¹

45. With regard to access to health services, including sexual and reproductive health services, challenges persist, such as a lack of accessibility of health facilities and of qualified health professionals in rural areas. The limited access to information and communications technology (ICT) of rural women and girls is another factor that hampers their ability to obtain access to health information, identify health needs and participate in the planning and delivery of the critical health services required to maintain their health, nutrition and well-being. In sub-Saharan Africa, 52 per cent of adolescent girls and young women who live in rural areas are unable to make decisions about their own health.³² Around the globe, women are more likely than men to experience food and nutrition insecurity, and women and girls who live in rural areas continue to suffer from high levels of malnutrition (see [E/CN.6/2018/3](#)).

46. Limited access to education and information on reproductive health, a lack of access to reproductive health services and underlying gender-inequitable social norms also remain major challenges for girls and women who live in rural areas. Globally,

²⁸ UNESCO, *Global Education Monitoring Report: Gender Review 2018 – Meeting Our Commitments to Gender Equality in Education* (Paris, 2018).

²⁹ See [E/CN.6/2018/3](#); and UNESCO, *Global Education Monitoring Report 2016: Gender Review – Creating Sustainable Futures for All* (Paris, 2016).

³⁰ UNESCO, *Global Education Monitoring Report 2019: Migration, Displacement and Education – Building Bridges, Not Walls* (Paris, 2018).

³¹ UN-Women, “Learn the facts: rural women and girls”, 28 February 2018.

³² Based on available data from 28 countries. See UNAIDS, “Women and girls and HIV”, 2018.

maternal deaths remain more prevalent in poorer and rural households.³³ In rural parts of sub-Saharan Africa, more than 50 per cent of women between 15 and 24 years of age were pregnant before the age of 18 between 2011 and 2016.³⁴

47. Notwithstanding remarkable progress made in preventing the vertical transmission of HIV, 18.8 million women and girls across the world are living with the virus.³⁵ In real terms, this means that, every four minutes, three young women become infected with HIV.³⁶ Owing to gender inequality, rural women, young women and girls in particular, are especially vulnerable.³⁷ This is due in part to the limited knowledge of HIV among adolescent girls and young women, in particular those who live in rural areas. Although timely diagnosis and the initiation of treatment can ensure better outcomes, diagnosis continues to occur late, and antiretroviral treatment reaches only some of the persons who need it, with suboptimal regimens and formulations.

48. Through global analysis conducted in 2016, it was found that an estimated 90 per cent of countries reported insufficient financing to meet national targets for drinking water, sanitation and water quality in rural areas.³⁸ Poor access to safely managed drinking water and the practice of open defecation persist on a large scale, primarily in South Asia and sub-Saharan Africa, with the poorest rural areas suffering the most (see [E/CN.6/2018/3](#)). In the absence of water, soap and sanitation facilities, menstrual health and hygiene remain difficult for women and girls who live in rural areas. The lack of clean, safe and private sanitation and the paucity of latrines are also linked directly to sexual violence against girls and women living in rural areas.

B. Labour issues

49. Girls living in rural areas suffer from significant disparities with regard to access to skills development compared with their peers. This is in part a result of persistent gender stereotypes, adverse social norms, discrimination and other factors that impair girls' access to opportunities (*ibid.*). Poorer, less educated girls living in rural areas face limited means of acquiring new skills, information and knowledge owing to their limited access to ICT (*ibid.*). In this regard, most of the 3.9 billion persons globally who are not connected to the Internet are rural women and girls and poorer and less educated persons.³⁹

50. Many women and girls living in rural areas work in the informal economy, in which the work is often unpaid or invisible. They also engage in paid and unpaid care and domestic work, which can involve tasks such as household chores and caring for children and those who are ill (see [A/72/207](#)). More girls under the age of 16 years are in domestic service than in any other category of child labour.⁴⁰ In 2016, for the first time, ILO provided estimates of the involvement of children, including girls living in rural areas, in household chores. The estimates showed that 800 million

³³ *Ibid.*

³⁴ UNAIDS, "At a glance", 2018.

³⁵ UNAIDS, "Women and girls and HIV".

³⁶ *Ibid.*

³⁷ Sophie J.S. Pascoe and others, "Poverty, food insufficiency and HIV infection and sexual behaviour among young rural Zimbabwean women", *PLOS One*, vol. 10, No. 1 (January 2015).

³⁸ UNESCO, *Global Education Monitoring Report 2017/8: Accountability in Education – Meeting Our Commitments* (Paris, 2017).

³⁹ UN-Women, "Learn the facts".

⁴⁰ ILO, *Helping Hands or Shackled Lives?: Understanding Child Domestic Labour and Responses to It* (Geneva, 2017).

children between 5 and 17 years of age perform chores for their households, with girls much more likely than boys to do so.⁴¹

51. Many young people, in particular female adolescents, remain unemployed or out of the labour force, and women and girls of legal working age living in rural areas are less likely to engage in paid employment, compared with their counterparts in urban areas. When they do, they tend to earn less than their male counterparts.⁴² In some cases, the pay gap between men and women doing the same work can be as high as 40 per cent. Limited employment among young women who live in rural areas is often driven by increased unpaid care work, as well as gender-based inequality and discrimination.⁴³

52. Women and adolescent girls living in rural areas make up a large percentage of the workforce in agriculture, a sector that falls largely within the informal economy and has little or no social protection or labour rights.⁴⁴ Girls who engage in such work are more likely to be in vulnerable employment than their male counterparts because they are more likely to be classified as self-employed or family workers than as employees or employers.⁴⁵

53. Most child labourers working in agriculture are engaged in subsistence and commercial farming and livestock herding as contributing family workers.⁴⁶ In some cases, a lack of accessible, affordable day care in rural areas results in parents bringing younger children to the fields, exposing them to the same workplace hazards that the children's older siblings and the parents themselves face.⁴⁷ Africa has the highest prevalence rate, with 85 per cent of the children in child labour working in agriculture.⁴⁸

54. According to ILO, the forced labour of children includes forced labour in the private economy, the commercial sexual exploitation of children and State-imposed forced labour.⁴⁹ In 2016, 24.9 million adults and children were engaged in some form of forced labour, with women and girls, including those who live in rural areas, accounting for 71 per cent of the total.⁵⁰ In one example, some 59 per cent of child domestic workers in Jakarta and other metropolitan areas in Indonesia were girls from rural areas.⁵¹ A lack of opportunities in rural areas often pushes women and girls to migrate away from those areas towards informal economies elsewhere, where they may face discrimination and exploitation, including forced labour.

C. Restricted land ownership

55. Women often have limited access to land, an essential household asset for persons who live in rural areas. Many countries do not provide women and men with equal rights to own, use and control land. Even in contexts in which laws exist, in many cases government implementation of such laws is weak, oversight is poor, and

⁴¹ ILO, *Global Estimates of Child Labour: Results and Trends, 2012–2016* (Geneva, 2017).

⁴² ILO, "Empowering women in the rural economy: decent work in the rural economy", policy guidance notes (Geneva, 2018).

⁴³ ILO, *World Employment and Social Outlook: Trends for Women 2017* (Geneva, 2017); ILO, "Empowering women in the rural economy".

⁴⁴ ILO, "Empowering women in the rural economy"; UN-Women, "Learn the facts".

⁴⁵ ILO, *World Employment and Social Outlook: Trends 2018* (Geneva, 2018).

⁴⁶ ILO, "Empowering women in the rural economy".

⁴⁷ Hans Van de Glind, *Migration and Child Labour: Exploring Child Migrant Vulnerabilities and Those of Children Left Behind*, ILO Working Paper (Geneva, 2010).

⁴⁸ ILO, *Global Estimates of Child Labour: Results and Trends, 2012–2016* (Geneva, 2017).

⁴⁹ ILO, *Global Estimates of Modern Slavery: Forced Labour and Forced Marriage* (Geneva, 2017).

⁵⁰ Ibid.

⁵¹ UNESCO, *Global Education Monitoring Report 2019*.

customary and religious practices and discriminatory gender norms undermine their full implementation. Women, who tend to be excluded from local government, are often left out of decision-making related to access to and the use of land and other critical resources. Such a lack of legal ownership also has an impact on girls living in rural areas because they are unable to inherit land.

D. Gender-based violence and harmful practices

56. Women and girls living in rural areas are disproportionately affected by gender-based violence and more likely to lack access to justice, effective legal remedies and rehabilitation and reintegration services.⁵² Girls and women are the primary targets of trafficking for sexual exploitation, and children who live in rural areas may be particularly vulnerable to specific forms of trafficking, such as the targeting of persons moving from rural environments, according to UNODC.⁵³ While the practice of child marriage is declining globally, across all regions girls who live in rural areas are more likely to become child brides than their urban counterparts.⁵⁴ Similarly, in many contexts the practice of female genital mutilation is more prevalent in rural areas.⁵⁵

E. Other forms of discrimination and deprivation

57. Disability is one of the most common grounds of discrimination and marginalization, in particular when it intersects with age, gender and location. Girls with disabilities living in rural areas face stigmatization; an increased risk of violence, exploitation and abuse; and insufficient access to inclusive education, infrastructure, information, health-care facilities and services, spaces for recreation and leisure, employment and social protection (see [E/2018/27](#)). In some regions, girls and women with disabilities who live in rural areas have the lowest rates of literacy, educational attainment and school attendance and are more likely to be underweight or have stunted growth.⁵⁶

58. Humanitarian emergencies, including conflicts, exacerbate structural inequalities between boys and girls. Women and girls who live in rural areas often feel the impact of humanitarian crises more profoundly than other populations because they face a heavier burden of work, such as having to travel longer distances to fetch water and firewood.⁵⁷ Unaccompanied and separated girls are particularly vulnerable to gender-based violence and sexual exploitation and abuse because camps for displaced populations are often not built with the protection of girls in mind. In general, forced displacement and migration have a compounding effect on the vulnerability of girls originating from rural areas. In addition, attempts to recover from humanitarian disasters can be more challenging for women and girls who live in rural areas because of their limited access to ICT and information.⁵⁸

⁵² Committee on the Elimination of Discrimination against Women, general recommendation No. 34 (2016) on the rights of rural women, para. 6.

⁵³ *Global Report on Trafficking in Persons 2018* (United Nations publication, Sales No. E.19.IV.2).

⁵⁴ UNICEF, “Ending child marriage: progress and prospects”, 2014.

⁵⁵ UNICEF, data set on female genital mutilation.

⁵⁶ Economic and Social Commission for Western Asia, *Disability in the Arab Region 2018* (Beirut, 2018); and Nora Groce and others, “Malnutrition and disability: unexplored opportunities for collaboration”, *Pediatrics and International Child Health*, vol. 34, No. 4 (2014).

⁵⁷ United Nations Environment Programme, *Global Gender and Environment Outlook* (Nairobi, 2016).

⁵⁸ Organization for Economic Cooperation and Development, *Gender and Sustainable Development: Maximizing the Economic, Social and Environmental Role of Women* (Paris, 2008).

59. Child-headed households are present in rural areas in humanitarian and development settings. In humanitarian settings, such households are found in refugee camps and among internally displaced persons and children on the move who have become separated from their parents or caregivers during flight. In development contexts, child-headed households are often a symptom of multidimensional poverty and social disempowerment, having first emerged on a large scale in sub-Saharan Africa in the 1990s as a result of the HIV/AIDS epidemic.⁵⁹

60. In any context, children from child-headed households are often disadvantaged, marginalized and discriminated against as a direct result of not having a parent or an adult caregiver.⁶⁰ They tend to lack adequate shelter and basic materials, such as blankets, clothing and shoes; face food insecurity; and suffer from behavioural and emotional problems. As a result of gender and social norms, girls in child-headed households tend to prepare and serve meals and take on other domestic duties normally assumed by mothers.⁶¹ Furthermore, they are more vulnerable to sexual exploitation.⁶²

61. Some indigenous and tribal women who live in rural areas face additional layers of disadvantages and discrimination, including increased exposure to social and economic exclusion, marginalization, exploitation, gender-based violence and the impacts of climate change. This is often because of the inequitable distribution of roles, resources and power within their communities and because women tend to be more dependent than men on natural resources and harvests.

F. Lack of disaggregated data

62. Overall, it is extremely difficult to identify and track the ongoing challenges that girls and women who live in rural areas face owing to a lack of disaggregated data, including data that are broken down according to sex, age, location and disability. Gaps in data exist with regard to availability, timeliness and adherence to international standards. Efforts on the part of UNICEF, UNODC and other organizations to improve the availability of disaggregated data are under way.

V. Recommendations

63. States should invest in needed structural changes and legal and policy reform to ensure that girls who live in rural areas are not left behind. This involves ensuring that international laws and norms are respected; renewing political commitments; strengthening regional and national laws and policies; addressing differences in the way that the needs of men and women are considered during development planning; strengthening collaboration among sectors, such as nutrition and education; and increasing investments in rural infrastructure, poverty eradication programmes and community awareness-raising. It also requires investing in efforts to eliminate adverse social norms that perpetuate stereotypes and discrimination based on gender and civil or marital status, including for girls living in rural areas.

64. States and other relevant actors should enhance social protection systems, cash transfers and access to services, including to sexual and reproductive health and

⁵⁹ Jace Pillay, "Problematizing child-headed households: the need for children's participation in early childhood interventions", *South African Journal of Childhood Education*, vol. 6, No. 1 (2016).

⁶⁰ Ibid.

⁶¹ Nozipho Mkhathshwa, "The gendered experiences of children in child-headed households in Swaziland", *African Journal of AIDS Research*, vol. 16, No. 4 (2017).

⁶² Pillay, "Problematizing child-headed households".

rights, for girls and women who live in rural areas. This includes increasing child grants, unconditional cash grants and educational grants, as well as extending comprehensive water, sanitation and hygiene services to rural areas, including in humanitarian contexts, and eliminating discriminatory patterns in the provision of water and sanitation to ensure that the needs of girls and women are addressed, including with regard to menstrual health and hygiene and girls and women with disabilities. In addition, it involves investing in order to improve and expand HIV prevention and treatment programmes for adolescent girls and other persons living in rural areas, as well as to scale up access to affordable and high-quality primary and gender-specific health services in rural areas. Efforts to combat adolescent pregnancy and reduce pregnancy-related mortality among girls and women who live in rural areas are also required across all regions. In part, such efforts involve expanding education and training for young people in and out of school, including information related to puberty, menstruation and sexual and reproductive health.

65. Increasing access to high-quality and inclusive education and training for girls who live in rural areas must also be a priority area for States and other relevant actors. They should focus on gender-responsive planning in the education sector, gender-responsive budgeting and the cross-sectoral coordination of plans to remove barriers to education and increase literacy levels for girls who live in rural areas. Additional investments are also needed to improve the quality of education for girls living in rural areas, including in improved water, sanitation and hygiene infrastructure and greater numbers of female teachers, in order to increase their access to free and high-quality secondary education and training and to improve the safety of the learning environment, in particular with regard to gender-based violence and harassment in and around schools. In some cases, investment in alternative learning pathways, for example to accommodate the right to education of the large population of girls who move from rural to urban areas, is needed.

66. States and other relevant actors should take multipronged actions to protect the labour rights of girls and women of legal working age who live in rural areas. Among other actions, this requires strengthening gender- and age-related labour market policies; increasing the access of girls and women to skills training; providing financial services and decent work and economic opportunities in the agriculture and non-agricultural sectors; increasing investment in the rural enterprises of girls and women, including through cash transfers; reducing children's vulnerability to child labour in agriculture; eliminating discrimination in employment and occupation; adopting measures to prevent violence and harassment in the world of work; promoting policies and providing services that facilitate the balancing of work and family responsibilities, for example childcare facilities; and establishing policies that reduce the workload of girls and promote a more equal distribution of unpaid care work. It also requires recognizing the social significance of the role of parents in the upbringing of children, as well as promoting paid maternity, paternity and parental leave.

67. States should implement legal and policy reform to ensure the establishment and full implementation of gender-equitable land and inheritance rights. They and other relevant actors should also promote a better understanding of women's property and inheritance rights at the community level.

68. States and other relevant actors should make the elimination of violence, harassment and harmful practices against girls, in particular those who live in rural areas, their highest-level priority. This involves developing and implementing integrated plans to prevent and respond to gender-based violence, including ensuring the wide availability of affordable and high-quality services for survivors and comprehensive prevention programmes that are aimed at adverse social norms and other drivers of gender-based violence, as well as strengthening rule of law

institutions. In rural areas in particular, it may also involve increasing investments in order to provide solar energy, which could eliminate the threat of violence that girls and women face while collecting firewood. Engagement in community-based prevention efforts that are aimed at changing societal attitudes regarding patriarchy and the value of girls is also needed. It is important that such efforts be focused on men and boys as agents of change. Priority attention should also be paid to campaigns that support religious institutions, faith-based leaders and traditional healers in their efforts to eliminate harmful traditional practices. Member States should consider requesting further analysis of the worldwide scourge of violence and harassment against girls.

69. States should increase their efforts to protect the rights of the most vulnerable and marginalized girls who live in rural areas and to extend services to them. With regard to children in child-headed households, early intervention programmes that are aimed at improving their social environment, lives and economic situation are essential. Systemic interventions that target discrimination against children in child-headed households are also needed. States and other relevant actors should take into account the systemic and multiple forms of discrimination faced by girls with disabilities and should work to strengthen and implement inclusive and accessible approaches that enhance their meaningful participation and representation in rural societies, including facilitating access to affordable and high-quality health services, education and ICT.

70. States and other relevant actors should invest in the collection, analysis and dissemination of data on development and humanitarian indicators that are disaggregated by sex, age, location, disability and other key markers. This requires strengthening the capacity of national statistical offices and other relevant institutions so that high-quality disaggregated data can be used to help decision makers to identify and support policies and actions that will improve the situation of girls and women living in rural areas. Member States should consider requesting further analysis of the availability of data that are disaggregated by sex, age, location and disability, as well as the identification of related knowledge gaps.

71. States and other relevant actors should prioritize efforts to increase opportunities for economic participation, decision-making and leadership for women and girls, in particular adolescent girls, who live in rural areas. This involves developing and implementing locally relevant empowerment strategies that increase the engagement of girls at all levels of power.

72. States and other relevant actors should invest in improving access to information and knowledge, in particular ICT, for girls and women who live in rural areas. Increasing their access to digital and other technologies is essential to increasing their capacity to identify their health and other needs. This requires the provision of broadband coverage in rural, remote and low-population-density communities and the achievement of other connectivity targets for those areas. To close the ICT gender gap, all relevant actors should focus on the accessibility, affordability, usability, skills required for use, safety and security of mobile technology and other ICT for girls who live in rural areas.