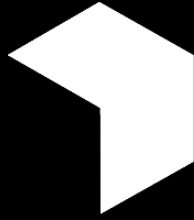


# Addressing Child, Early and Forced Marriage (CEFM) in Cambodia

Insights and recommendations from formative research and surveys

December 2025





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## Acknowledgements

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This report was produced by the research team as part of the formative research and baseline assessment on Child, Early, and Forced Marriage (CEFM) in Ratanakiri and Mondulakiri provinces, Cambodia. The study was commissioned by UNICEF Cambodia, in collaboration with the Ministry of Women's Affairs (MoWA) and the United Nations Population Fund (UNFPA).

This study was made possible through support from the Australian Government's Department of Foreign Affairs and Trade (DFAT) under the *Towards Universal Sexual and Reproductive Health and Rights in the Indo-Pacific (TUSIP): Ending Child, Early and Forced Marriage in Southeast Asia* program, jointly implemented by UNICEF and UNFPA.

The research team extends sincere appreciation to the provincial and district authorities, particularly the involved ministries and line departments of MoWA, MoSVY, MoEYS, MoCFA, Mol, MoH, Provincial/District/Commune Committees for Women and Children (WCCC and CCWC), and PMDC administrations, for their time and collaboration throughout the fieldwork for this study. We'd like to also express gratitude to the adolescent girls, parents, caregivers, community leaders, and key informants who generously shared their views and lived experiences.

Special thanks to the project partners from local organizations, researchers, and enumerators for their dedication and professionalism during data collection in both provinces. The insights captured here would not have been possible without their engagement and support. We are also grateful to Alexander Clark and Celeste Wee for their valuable guidance and constructive feedback.

Finally, this report was developed through a close partnership between the Behavioural Insights Team (BIT) and Gender and Development for Cambodia (GADC), bringing together behavioural science expertise and deep local knowledge throughout the research process.

**Dr Serene Koh**  
**Team Leader**

## List of Acronyms/Abbreviations

BIT	Behavioural Insights Team
CDHS	Cambodia Demographic and Health Survey
CEFM	Child, Early and Forced Marriage
CIP	Commune Investment Plan
COM-B	Capability, Opportunity, Motivation – Behaviour
CSO	Civil Society Organization
CCWC	Commune Committees for Women and Children
FGD	Focus Group Discussion
GADC	Gender and Development for Cambodia
GBV	Gender-Based Violence
<b>GS-NPSC</b>	General Secretariat for the National Social Protection Council
KII	Key Informant Interview
MoCFA	Ministry of Culture and Fine Arts
MoEYS	Ministry of Education, Youth and Sport
MoH	Ministry of Health
Mol	Ministry of Interior
MoLVT	Ministry of Labor, Vocational, and Training
MoP	Ministry of Planning
MoSVY	Ministry of Social Affairs, Veterans and Youth Rehabilitation
MoWA	Ministry of Women's Affairs
NGO	Non-Governmental Organization
PMDC	Provincial, Municipal, District, and Commune
PPP	Positive Parenting Program
SBC	Social and Behaviour Change
SHRH	Sexual Health and Reproductive Health
SRHR	Sexual and Reproductive Health and Rights
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
UPR	Universal Periodic Review
TVET	Technical, Vocational and Education Training
VSG	Village Support Group
WCCC	Women and Children Consultative Committees

# Executive Summary

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## Purpose and Scope

This report presents the combined findings from the participatory formative research and baseline assessment survey conducted by the Behavioural Insights Team (BIT) and Gender and Development for Cambodia (GADC) between July - October 2025 in Ratanakiri and Mondulakiri provinces of Cambodia. The research seeks to deepen understanding of the contextual drivers, social norms, and lived experiences shaping child, early, and forced marriage (CEFM) practices among adolescent girls in Indigenous and rural communities.

The findings are intended to guide the improvement of existing, and/or development of new, feasible, community-led solutions to address CEFM, which will be co-created with local stakeholders. Additionally, the findings should guide UNICEF and key partners (e.g., MoWA, and UNFPA) in refining future Social and Behaviour Change (SBC) strategies and community engagement interventions that promote gender equality, adolescent well-being, and prevention of early marriage.

## Methodological Overview

The study used a **mixed-methods approach**, combining quantitative and qualitative data collected from July to October 2025:

- **Baseline assessment survey:** Conducted with adolescent girls, boys, caregivers, and community members in selected communes of Ratanakiri and Mondulakiri (sample: 562 respondents total).
- **Formative research:**
  - **Focus Group Discussions:** Focus group discussions were conducted with 282 participants, including adolescent girls, adolescent boys, mothers, fathers, and community leaders. The aim of the FGDs was primarily to understand the key demographic and psychographic characteristics of at-risk girls, drivers of CEFM, and awareness and utilisation of existing support systems and services.
  - **Key Informant Interviews:** 30 key informant interviews were conducted with 40 participants across local authorities and institutional stakeholders at sub-national and national levels, including NGOs, government officials, and UN agencies. The aim of the KIIs was primarily to explore existing school/community-based resources, support systems, and services, as well as obstacles and potential opportunities for interventions to tackle CEFM.

## **Baseline Assessment Findings**

### **Economic and education**

Most adolescents in our sample currently attend school. On the other hand, girls who dropped out reported that they think of their education as complete. Over half of all adolescents are unaware of support services that could help them stay in school. For those who are aware, schools are the main source of information.

### **Cultural beliefs and attitudes towards social and gender norms**

Ratanakiri seems to have a higher prevalence and community approval of early marriage than Mondulkiri; girls there are also less confident in refusing early marriage. Adolescents in both provinces have a high level of acceptance for intimate partner violence.

### **Knowledge, awareness, and enforcement related to laws, sexual and reproductive health education, and other programmes.**

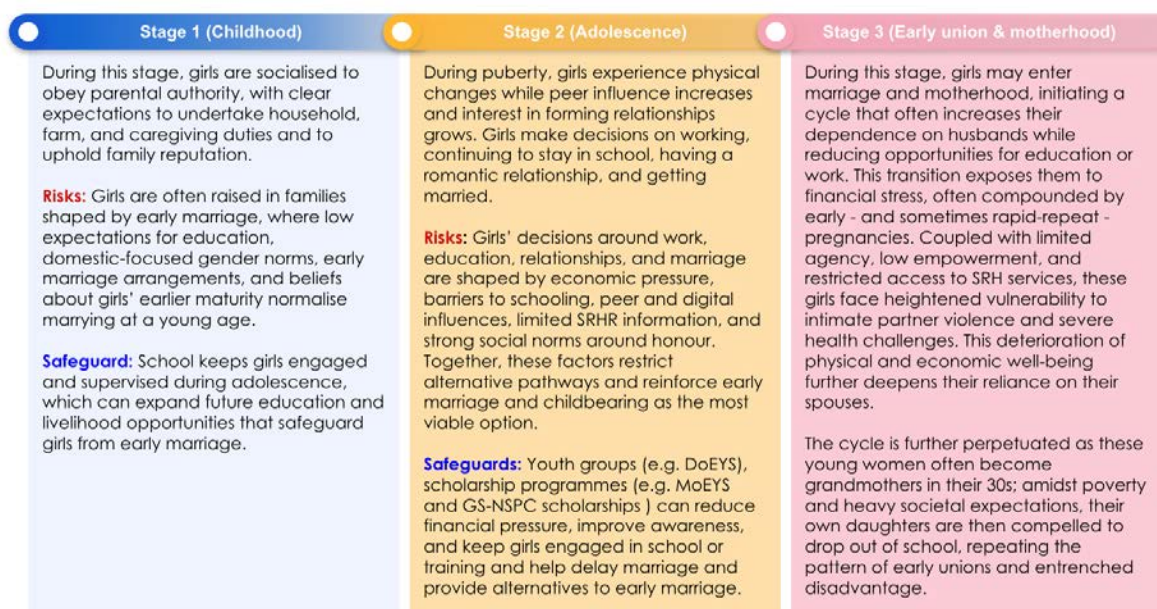
One-third of respondents have never heard of sexual and reproductive health (SRH) information. There are three stakeholders identified: Schools as the main avenue for SRH information dissemination; Health centres as the most trusted source of information; Local authorities as the most trusted avenue for support on child marriage.

### **Digital literacy and exposure**

Over half of the adolescents owned a mobile phone; majority of whom own a smartphone.

## Formative Research Findings: Girls' Journey Map

The following journey map, informed by the formative research, outlines the key stages in the pathway toward CEFM. Each stage leading to early union and motherhood includes associated risks that contribute to CEFM and the safeguards against it at each stage.



## Formative Research Findings: Key Determinants of CEFM

The formative research also identified various risks and safeguards related to CEFM, using the Capability, Opportunity, Motivation – Behaviour (COM-B) Model as a guiding framework. It highlights the three ways to categorise barriers and enablers to a behaviour (e.g., Capability – does the individual have the ability to do the behaviour, Opportunity – do they have the opportunity to do so, Motivation – do they want to do so).

These factors, some of which have been mentioned in the journey map above, can be categorised into several key domains: economic and education; cultural beliefs and attitudes regarding social and gender norms; knowledge, awareness, and enforcement of laws and sexual and reproductive health programs; and digital literacy and exposure.

Economic and education	Risks	
		<ul style="list-style-type: none"> <li>● <b>Opportunity</b> - Low parental expectations for girls' education attainment encourages school dropout.</li> <li>● <b>Opportunity</b> - Limited access to further educational opportunities in remote areas (e.g., lack of secondary schools) makes</li> </ul>

		<p>continued schooling costly and impractical, leading some parents to view keeping girls at home for domestic work or arranging marriage as more viable alternatives.</p>
	Safeguards	<ul style="list-style-type: none"> <li>● <b>Opportunity</b> - School keeps girls engaged and supervised and improves opportunities for girls in the future.</li> <li>● <b>Opportunity</b> - MoEYS and GS-NSPC<sup>1</sup> scholarships to help keep girls in school.</li> </ul>
Cultural beliefs and attitudes about social and gender norms	Risks	<ul style="list-style-type: none"> <li>● <b>Opportunity</b> - Gender norms that dictate that girls' primary aspirations should centre on domestic life and household roles reinforce the expectation that their future lies in domestic duties and marriage.</li> <li>● <b>Motivation</b> - Parents encourage their girls to get married if they have a boyfriend to avoid shame and preserve honour, or to avoid or deal with premarital pregnancy, increasing the likelihood of early marriage.</li> </ul>
Knowledge, awareness, and enforcement related to laws, sexual and reproductive health education, and other programmes	Risks	<ul style="list-style-type: none"> <li>● <b>Capability</b> and <b>Opportunity</b> - Girls have limited accurate SRHR information, due to the belief that it is improper to talk about such matters, increasing the risk of early pregnancy and marriage.</li> <li>● <b>Opportunity</b> - Limited intervention in customary ceremonies reduces barriers to early marriage.</li> </ul>
	Safeguards	<ul style="list-style-type: none"> <li>● <b>Capability</b> - School-based Sexual and Reproductive Health and Rights (SRHR) and Menstrual Hygiene Management (MHM) education equips girls with knowledge to manage reproductive health risks, reducing vulnerability to early pregnancy and pressure to marry early.</li> </ul>
Digital literacy and exposure	Risks	<ul style="list-style-type: none"> <li>● <b>Opportunity</b> - Exposure to digital content around relationships and sex can normalise early romantic involvement and, in some cases, portray early marriage as desirable or aspirational.</li> </ul>

<sup>1</sup> The National Social Protection Council (NSPC) is the key actor in Cambodia responsible for the overall coordination and steering on the development of various social protection strategies and policies. The General Secretariat (GS-NSPC) serves various technical functions (policy, operational, administrative, research, etc.) for the Council.

## Recommendations for CEFM Solutions and Monitoring

### **Recommendation 1: Provide greater financial and practical support to girls to encourage school retention and post-school upskilling.**

- Economic pressure is a key driver of school discontinuation and early marriage. Expanding financial and practical support can reduce immediate cost barriers, ease household livelihood pressures, and make continued education or skills pathways more viable and attractive for girls. It also strengthens agency and empowerment among vulnerable girls, an essential element for breaking the cycle of intergenerational CEFM in target communities.

### **Recommendation 2: Update sexual education to focus on practical birth control skills and the active rejection of domestic violence.**

- Sexual education should prioritise low-barrier, practical learning, such as step-by-step condom use demonstration through trusted services and health centres and explicitly teach adolescents to recognise and reject all forms of intimate partner violence using concrete, real-life scenarios.

### **Recommendation 3: Expand access to school-retention and child-marriage support through youth-centred, non-school information and support channels.**

- To reach adolescents who are out of school or inconsistently attending, support information should be delivered through youth-centred, non-school channels, such as short, mobile-friendly videos shared via peer networks or youth clubs. These should clearly explain, step by step, where to seek help, what will happen next, and reassure adolescents about confidentiality.

### **Recommendation 4: Tailor engagement strategies to provincial differences in norms and practices related to CEFM.**

- Engagement strategies should be adapted to reflect provincial differences in decision-making norms around marriage. In **Mondulkiri**, where parental authority over marriage is widely accepted, interventions should prioritise shifting parents' norms and motivations. In **Ratanakiri**, where support for girls' agency is higher but confidence to refuse marriage is low, programmes should focus on strengthening girls' practical agency while ensuring strong adult backing.

### **Recommendation 5: Feature girls and young women who stayed in school longer or exercised agency in their education, marriage, or career decisions in outreach campaigns, such as in the "Experience Sharing" sessions, to broaden girls' sense of possible life paths.**

- Outreach campaigns can consider featuring positive examples of relatable role models, such as young indigenous women who delayed marriage to stay in school or pursue vocational training, which are shared through experience-sharing sessions and short, repeatable digital formats to make alternative life paths feel visible, credible, and attainable.

**Recommendation 6: Use mixed methods, including vignette-based questions, to monitor changing prevalence and social norms.**

- Monitoring should combine prevalence data with measures of descriptive and injunctive norms, such as vignette-based survey questions and follow-up qualitative research activities, to detect situations where early marriage remains socially perceived as common or acceptable even as reported rates decline, and to better understand the drivers sustaining the practice.

# Introduction

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## Background and Context

Child, early, and forced marriage (CEFM) continues to be a significant issue affecting child protection and gender equality in Cambodia, especially within remote indigenous regions such as Ratanakiri and Mondulakiri provinces. Although there have been notable advancements in education and gender equality at the national level, prevailing cultural norms and economic factors still play a substantial role in shaping marriage decisions for adolescent girls.

Under Cambodian law, the legal marriage age is 18, but exceptions allow underage minors to marry with the consent of a parent or guardian<sup>2</sup>. The Cambodia Demographic and Health Survey (CDHS 2022)<sup>3</sup> reports that approximately 19% of women aged 25–49 were married before reaching 18 years of age, with rates nearly twice as high in the northeastern provinces. Within Indigenous communities, early unions frequently take place through customary ceremonies without official registration, thereby limiting legal protection and access to social services.

During the inception consultations with MoWA, MoEYS, UNICEF, and UNFPA, stakeholders consistently identified three interconnected challenges driving CEFM:

1. **Limited access to Sexual and Reproductive Health and Rights (SRHR) education**, particularly content that is culturally adapted to remote provinces and offered beyond the lower secondary level.
2. **Entrenched gender and social norms** that reinforce the view that girls' value lies in marriage and domesticity.
3. **Economic insecurity and lack of livelihood options** reduce incentives for parents to invest in prolonged schooling.

The Behavioural Insights Team (BIT) and Gender and Development for Cambodia (GADC) were engaged to conduct formative research, implement a baseline assessment, and co-create community-led solutions to support interventions addressing CEFM in Ratanakiri and Mondulakiri.

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<sup>2</sup> National Assembly of the State of Cambodia. (1989, July 26). Law on the marriage and family. *Law on the marriage and family*. In *The Compendium of Cambodian laws* (Council for the Development of Cambodia, UNDP Project CMB96-005). FAOLEX. <https://faolex.fao.org/docs/pdf/cam208228.pdf>

<sup>3</sup> National Institute of Statistics, Ministry of Health [Cambodia], & ICF. (2023). Cambodia DHS, 2021–22: Final report (DHS Final Report No. FR377). The DHS Program. <https://www.dhsprogram.com/pubs/pdf/FR377/FR377.pdf>

This report presents key insights from the formative fieldwork, which will directly inform the design of Social and Behaviour Change (SBC) interventions and community engagement strategies under the joint CEFM programme led by UNICEF, the Ministry of Women's Affairs (MoWA), and UNFPA.

## Objectives of the Formative and Baseline Research

The main objectives of the study were to:

1. **Understand behavioural, social, and structural drivers** of early and forced marriage, and **identify factors that put adolescent girls at risk** in Indigenous and rural areas.
2. **Provide baseline data** for monitoring changes in attitudes, knowledge, and behaviours over the course of intervention implementation and subsequent periods.
3. **Identify actionable entry points** for community-driven interventions and solutions to tackle CEFM in Ratanakiri and Mondulkiri.

## Scope of the Study

The research covers two provinces (Ratanakiri and Mondulkiri), with four districts, eight communes, and sixteen villages sampled within these provinces, focusing on communities with a high prevalence of Indigenous populations (Tampoun, Jarai, Kreung, and Bunong).

Table 1.1: Target Provinces, Districts, Communes, and Villages in the Study

Province	District	Communes	Villages
<b>Mondulkiri</b>	Pechreada	Bousra	Puteut
			Purang
		Srae Ampoum	Pukroch
			Puradeth
	Sen Monorom	Romnea	Putrom
			Srae Y
		Spean Meanchey	Chamkar Tae
			O'Spean
<b>Ratanakiri</b>	Lumphat	Kalaeng	Kalaeng
			Sayors
		Chey Oudom	Thmey
	Vernsai	Pakalan	Srae Chhouk
			Kampong Cham
		Phnom Kok	Pakalan
		Kalai Tavorng	

			Kalai Sapoun
			Phnom Kokprov
			Phnom Koklav

# Methodology

## Research Approach

The study adopted a **mixed-method participatory approach**, combining quantitative and qualitative tools to explore the prevalence, attitudes, and contextual factors of CEFM in two provinces.

## Research Activities

- **Focus Group Discussions (FGDs):** 40 FGDs (20 in each province) segmented by gender and age (fathers, mothers, adolescent girls, adolescent boys).
- **Key Informant Interviews (KIs):** 30 KIs with government officials at national and provincial levels, NGO staff, Indigenous leaders, health officers, and UN agencies.
- **Baseline Survey:** 562 respondents, including a mix of fathers, mothers, adolescent girls, adolescent boys, with 260 respondents in Ratanakiri and 302 in Mondulakiri.

## Research Design and Sampling

### Baseline Assessment Survey

GADC administered face-to-face structured surveys with a total of **562 respondents** across both provinces (260 in Ratanakiri and 302 in Mondulakiri). These respondents included a mix of adolescent girls (ages 10-17), adolescent boys (ages 10-17), and either father/mother/caregiver of surveyed adolescents (aged 18 and above) in the same household.

Our final sample size is larger than the initial plan to survey approximately 480 individuals across two provinces. Our sampling strategy involved surveying at least 30 individuals in each of the 16 total villages, in roughly equal proportions for females, males and parents/caregivers. As much as possible, field researchers ensured that the final sample size consisted of a balanced mix of respondents across villages.

These 16 villages were chosen for the survey in discussion with UNICEF and MoWA, and were strategically selected to fill data gaps in the existing research. The baseline values captured will allow stakeholders to conduct descriptive comparisons with future prevalence rates in these provinces.

[Table 1.2: Survey Participants by Province](#)

Province	Girls	Boys	Adolescent (Selected "Others" as gender)	Adult Parent / Caregiver	Total Respondents
Mondulkiri	96	38	0	168	302
Ratanakiri	68	53	3	136	260
<b>Total</b>	<b>164</b>	<b>91</b>	<b>3</b>	<b>We 304<sup>4</sup></b>	<b>562</b>

### Research tools used

We used a structured questionnaire with validated scales and social norm assessment tools, translated into Khmer. Interpreters translated Khmer into Indigenous languages for respondents from Indigenous communities. All questions were designed to be relevant to adolescent girls and boys, while some questions were not administered to parents or caregivers as they were only targeted at girls and boys. The survey questionnaires are provided in Annex 1.

The translated questionnaires were piloted to ensure acceptability and that responses were elicited in the desired format.

Indicators related to various determinants were assessed and can be broadly grouped into four categories: 1) **Economic and education**; 2) **Cultural belief and attitudes about social and gender norms**; 3) **Knowledge, awareness and enforcement of laws and programmes**; 4) **Digital literacy and exposure**.

The types of survey questions we used consisted of:

- **Validated scales.** Several demographic (i.e., migration) and indicator questions (i.e., beliefs about GBV) were adapted from the Cambodia Demographic and Health Survey.<sup>5</sup>
- **Direct questions.** For indicators without a validated scale, we developed theory-driven questions with inputs from UNICEF, UNFPA and MoWA. This includes questions around girls' self-efficacy in expressing opinions and confidence in their ability to negotiate early marriage.
- **Vignette-based questions.** We measured social norms around early marriage using vignette-based survey questions. These presented hypothetical, locally relevant scenarios with fictitious characters followed by structured questions,

<sup>4</sup> Adult Parent / Caregiver respondents were 70.7% female (n = 215) and 29.3% male (n = 89). Provincial breakdowns were as follows: Mondulkiri (67.3% female, 32.7% male) and Ratanakiri (75.0% female, 25.0% male).

<sup>5</sup> National Institute of Statistics (NIS) [Cambodia], Ministry of Health (MoH) [Cambodia], and ICF. 2023. *Cambodia Demographic and Health Survey 2021–22 Final Report*. Phnom Penh, Cambodia, and Rockville, Maryland, USA: NIS, MoH, and ICF  
<https://dhsprogram.com/publications/publication-FR377-DHS-Final-Reports.cfm>

allowing participants to respond from a third-party perspective, reducing social desirability bias.<sup>6</sup>

## Focus Group Discussions (FGDs)

A total of **40 FGDs** were conducted (20 per province) involving 282 participants. Participants came from five respondent groups: Adolescent girls, Adolescent boys, Mothers, Fathers, and Community leaders. We ensured a balance of participants from each of the five groups (approximately 20% of participants came from each group) to ensure that we obtained diverse perspectives from participants.

Each FGD was conducted for approximately 90 minutes, guided by a semi-structured, open-ended focus group guide tailored for each respondent group. Focus groups were facilitated by 1–3 facilitators and 1–2 notetakers. FGDs were sometimes attended by observers from UNICEF. FGD participants were recruited in-person with support from village officials and community organisations, who supported recruitment by informing community members that research activities will be taking place and that some of them might be invited to participate. Interpreters assisted in translating Indigenous languages back to facilitators and observers.

Table 1.3: FGD Participants by Province

Province	# FGD	Girls	Boys	Mothers	Fathers	Com. Leaders	Total Respond.
Mondulkiri	20	14	23	29	18	38	122
Ratanakiri	20	39	30	31	34	26	160
<b>Total</b>	<b>40</b>	<b>53</b>	<b>53</b>	<b>60</b>	<b>52</b>	<b>64</b>	<b>282</b>

### Research tools used

- One semi-structured focus group guide for each participant group:** Questions in each guide were intentionally framed to be open-ended and non-judgmental, to ensure participants felt safe sharing their views. The guides aimed to solicit lived experiences related to CEFM, understand participants' views on community norms, cultural expectations and attitudes on gender roles, marriage, and how these shape CEFM dynamics. In particular, we adapted UNICEF's Lifeline participatory research activity<sup>7</sup> to support conversations with participants on their lived experience, transitions from childhood to adulthood, and identify critical risks for CEFM. The FGD guides are provided in Annex 2.

<sup>6</sup> Tyagi, C., & Mukherjee, S. (2024). *Compendium of scales and tools measuring social norms*. South Asia Social Norms and Agency Learning Collaborative.

<sup>7</sup> Sood, S., Kostizak, K., Stevens, S. (2020). *Participatory research toolkit for social norms measurements*. UNICEF. <https://www.unicef.org/documents/participatory-research-toolkit-social-norms-measurement>

- **COM-B Model (Capability, Opportunity, Motivation – Behaviour)<sup>8</sup>:** COM-B is a behaviour change model which helps us understand the barriers (defined in this report as **safeguards against CEFM**) and enablers (defined in this report as **risks driving CEFM**) of behaviour, and has been used by behavioural scientists and policymakers to design effective policy solutions. The components, Capability, Opportunity, and Motivation, highlight the three ways to categorise barriers and enablers to a behaviour (e.g., does the individual have the ability to do the behaviour, do they have the opportunity to do so, do they want to do so). We used the COM-B Model to organise risks and safeguards towards the eventual outcome of CEFM. We conducted a co-creation workshop with UNICEF and other stakeholders to share the fieldwork findings based on COM-B, and to surface other potential COM-B factors.
  - **Risks** are the factors that push the girl toward CEFM.
    - They may increase pressure or reduce her options.
    - They may create incentives for early marriage.
    - They may arise from shocks, gaps, or accumulating constraints.
  - **Safeguards** are the factors that protect the girl from CEFM.
    - They may give her alternatives or support.
    - They may buffer or counter social or economic pressures.
    - They may come from people, services, policies, or opportunities.

## Key Informant Interviews (KIIs)

**30 KIIs** were completed with 40 respondents (23 female, 17 male). These informants consisted of government officials (national government, provincial/municipal/district/commune councils, and administrations), NGO and CSO representatives, and health and SRHR professionals. Topics related to the following were explored with key informants:

- What are existing efforts and institutional challenges faced in promoting relevant health and education services and programmes?
- What existing efforts and institutional challenges are faced in policy setting and implementation for CEFM interventions?
- What are key considerations and challenges relating to the support of girls and women?

Table 1.4: KII respondents by Province

Province	# KII	Female	Male	Total Respond.
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<sup>8</sup> Michie, S., van Stralen, M. M., & West, R. (2011). The behaviour change wheel: a new method for characterising and designing behaviour change interventions.

<b>Mondulkiri</b>	17	13	9	22
<b>Ratanakiri</b>	10	9	6	15
<b>Phnom Penh</b>	3	1	2	3
<b>Total</b>	<b>30</b>	<b>23</b>	<b>17</b>	<b>40</b>

Table 1.5: KI Respondents with Disaggregation by Institution/Role

<b>Institution / Role</b>	<b># KIs</b>	<b>Province</b>	<b>Key Functions</b>
<b>DoWA</b>	7	Both	Leads CEFM coordination, awareness, data collection, and referrals via WCCC.
<b>DoEYS</b>	3	Both	Oversees education access and dropout prevention, promotes CSE, and supports school re-entry for married adolescents.
<b>DoH/Provincial Hospital/ Health Centre</b>	3	Both	Offers SRH services, adolescent counselling, medical referrals for pregnant minors, and attends commune case conferences.
<b>DoSVY</b>	2	Both	Manages cases related to family disputes, interpersonal violence, or teenage pregnancy. Offers social services, counseling, and referrals to appropriate shelters or health centres.
<b>DoCA</b>	3	Mondulkiri	Integrate CEFM into adolescent culture and fine art programs.
<b>P/M/C Administration</b>	6	Both	Integrate CEFM into planning.
<b>WCCC</b>	7	Both	Advise on policy and gender equality, community awareness, data collection, cross-sector coordination.
<b>CCWC</b>	2	Both	Community-Level Case Identification, Reporting, and Prevention
<b>District Police</b>	1	Mondulkiri	Enforces legal marriage age and child protection laws, prevents and reports early or forced marriages, and provides data to MoI and DoWA.
<b>UN Representatives</b>	2	Phnom Penh	Policy, technical coordination, data, and funding support
<b>NGO/CSO</b>	4	Both, Phnom Penh	Initiate community-based awareness initiatives, youth empowerment schemes, and livelihood development programmes. Deliver technical assistance to provincial and commune-level mechanisms.

### Research tools used

- **One semi-structured interview guide for each specific participant group (government officials, NGO and CSO representatives, health, and SRHR professionals):** Structured questions in each guide were prepared beforehand, and prompts were included for the interviewer to further understand insights shared by participants. The guides aimed to understand current efforts, policies, and challenges in addressing CEFM at the local level. This includes capturing baseline information on existing programs, inter-sectoral coordination, and resource gaps from the perspective of authorities. The KII guides are provided in Annex 3.

## Data Collection and Analysis

The baseline assessments survey, FGDs, and KIIs were conducted in September and October 2025.

### Baseline Assessment Survey

Survey data was collected using the Kobo Toolbox research software by trained enumerators using digital questionnaires. Initial data cleaning and analyses were performed by the GADC research team in SPSS and Excel, with a second round of validation and cleaning performed by the BIT research team in R.

Quantitative data were analysed to report **descriptive statistics** (frequency, mean, cross-tabulations). The survey results are reported descriptively to provide an initial understanding of baseline values and enable comparisons with future evaluations.<sup>9</sup>

### FGDs and KIIs

FGDs and KIIs were facilitated in local languages (e.g. Bunong, Kreung, Khmer) with gender-matched facilitators, using semi-structured guides. Audio recordings and notes were transcribed and translated for thematic analysis.

Qualitative data were analysed using **thematic analysis** to identify, synthesise, and describe key themes. The resulting insights informed the development of a journey map linking CEFM drivers to intervention touchpoints. Themes were further categorised into safeguards and risks using the COM-B framework, supporting a systematic analysis of the structural, behavioural, and social factors influencing CEFM.

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<sup>9</sup> Descriptive statistics are typically used to **summarise and describe the characteristics of a dataset**, such as using frequencies, averages, percentages, and graphs. It is different from inferential statistics, which involves hypothesis testing to determine whether observed patterns or differences in a sample are likely to exist in the larger population.

Where possible, qualitative findings were triangulated with quantitative results to provide contextual depth, helping us to interpret patterns observed in the survey data.

## Limitations and Considerations for Interpretation

### Limitations and steps taken to mitigate risks.

1. **Representativeness:** Site selection prioritised provinces and villages with underrepresented populations to maximise inclusivity within the study sample. However, access challenges during the rainy season limited engagement with some Indigenous communities, which may have affected their proportional representation.
2. **Sensitivity of topic:** Recognising the sensitivity of discussions around marriage and sexuality, particularly among adolescents, the study adopted a careful and respondent-centred survey design. Questions were phrased to be as neutral and non-judgemental as possible, with the use of indirect questioning techniques, and rapport building to encourage open and comfortable responses. These approaches were intended to minimise social desirability bias and support participants in sharing their perspectives on sensitive issues.
3. **Language and cultural accessibility:** Data collection was conducted in Indigenous languages with the support of local interpreters to facilitate clear communication and culturally appropriate engagement, while acknowledging the possibility of minor interpretive nuances during translation.
4. **Male adolescent participation:** While efforts were made to engage both boys and girls, participation of male adolescents was lower in some communes due to social norms around participation and competing work or schooling commitments that restricted their availability.
5. **Recall accuracy:** Age and timeline information was collected by asking participants directly rather than document verification. Structured probing was used to support accuracy, acknowledging that some responses relied on estimation.

## Ethical Considerations

The study complied with UNICEF ethical standards for research with children and MoWA guidelines, including obtaining informed consent and assent verbally and in writing. The consent and assent forms can be found in Annex 4. Health Media Lab Institutional Review Board provided ethical review approval for the study (Study #2986) on 1 September 2025.

# Baseline Assessment Findings

The baseline survey includes indicators to measure baseline values for previously identified key drivers of CEFM, and the prevalence rates of CEFM in the two provinces. Results from the survey are summarised below (for the breakdown of results for each province, refer to Annex 5). We report the demographic profile of respondents, as well as the findings from the indicators, broadly grouped into four categories of determinants: 1) **Economic and education**; 2) **Cultural belief and attitudes about social and gender norms**; 3) **Knowledge, awareness and enforcement of laws and programmes**; 4) **Digital literacy and exposure**.

Where interesting comparisons and differences exist between the two provinces, Mondulkiri and Ratanakiri, these are called out in each specific section. Annex 6 presents a summary table that brings together all comparisons between the two provinces.

## Demographic Profile of Respondents

### Survey sample

We administered face-to-face structured surveys with a total of 562 respondents across both provinces (260 in Ratanakiri and 302 in Mondulkiri). These respondents included a mix of adolescent girls (ages 10-17), adolescent boys (ages 10-17), and either father/mother/caregiver of surveyed adolescents (aged 18 and above) in the same household.

Table 2.1: Sample Size of Each Respondent Group

Province	Girls	Boys	Adolescent (Selected "Others" as gender)	Adult Parent / Caregiver	Total Respondents
Mondulkiri	96	38	0	168	302
Ratanakiri	68	53	3	136	260
<b>Total</b>	<b>164</b>	<b>91</b>	<b>3</b>	<b>304<sup>10</sup></b>	<b>562</b>

### Age

The surveyed adolescents had a mean age of 13.7 years and a median age of 14 years. Adult parents and caregivers had a mean age of 34.9 years with a median age of 33 years.

<sup>10</sup> Adult Parent / Caregiver respondents were 70.7% female (n = 215) and 29.3% male (n = 89). Provincial breakdowns were as follows: Mondulkiri (67.3% female, 32.7% male) and Ratanakiri (75.0% female, 25.0% male).

Table 2.2: Ages of Survey Respondents

Age (Combined)	Girls	Boys	Adolescent (Selected "Others" as gender)	Adult Parent / Caregiver
Mean	13.6	13.9	13	34.9
Median	14	14	14	33.0

## Indigenous Group

The survey captured a diverse range of Indigenous groups within the sample. The Bunong group represented the largest share of respondents at 35.3% (204 respondents), followed by Khmer at 25.4% (143 respondents) and Lao at 14.7% (79 respondents). Other significant Indigenous groups included Kreung and Tampoun, both comprising 10.7% (60 respondents each) of the total sample. Minor representations were observed for the Kuy and Lun groups (1 respondent each).

To place this coverage in perspective, the 2019 General Population Census of Cambodia (GPCC)<sup>11</sup> identified approximately 22 indigenous groups in Cambodia, with over 85% of the population belonging to six major groups: Bunong, Kuy, Tampon, Kreung, and Prao. Our sample reflects the specific demographics of the two provinces rather than the national distribution. The high representation of the Bunong aligns with Mondulkiri, which is primarily home to the Bunong people. Similarly, the significant presence of Tampoun and Kreung respondents corresponds to Ratanakiri, the province with the largest indigenous population (including Tampoun, Jarai, and Kreung). The representation of the Lao group (14.7%) also tracks with regional patterns, as Khmer Lao people primarily reside in Cambodia's northeastern provinces, especially Ratanakiri, Stung Treng, and Preah Vihear. Conversely, the minimal presence of groups like the Kuy in our sample is expected, as their populations are concentrated in provinces outside of our study area, such as Preah Vihear and Kampong Thom.

Table 2.3: Distribution of Survey Respondents by Indigenous Group

Indigenous group	Girls	Boys	Adolescent (Selected "Others" as gender)	Adult Parent / Caregiver	Total Respond.
Bunong	41.5% (68)	24.2% (22)	0.0% (0)	37.5% (114)	<b>35.3%</b> <b>(204)</b>
Khmer	24.4% (40)	28.6% (26)	33.3% (1)	25.0% (76)	<b>25.4%</b> <b>(143)</b>
Lao	13.4% (22)	25.3% (23)	66.7% (2)	10.5% (32)	<b>14.1%</b> <b>(79)</b>

<sup>11</sup> Ministry of Planning, & Cambodia Indigenous People Alliance. (2024). National report on demographic and socio-economic situation of indigenous peoples in Cambodia: Update 2024. Cambodia Indigenous Peoples Organization. [https://data.opendatacambodia.net/library\\_record/national-report-on-demographic-and-socio-economic-situation-of-indigenous-peoples-in-cambodia-2024-](https://data.opendatacambodia.net/library_record/national-report-on-demographic-and-socio-economic-situation-of-indigenous-peoples-in-cambodia-2024-)

<b>Kreung</b>	10.4% (17)	18.4% (17)	0.0% (0)	8.6% (26)	<b>10.7% (60)</b>
<b>Tampoun</b>	6.7% (11)	2.2% (2)	0.0% (0)	15.5% (47)	<b>10.7% (60)</b>
<b>Other</b>	3.0% (5)	1.1% (1)	0.0% (0)	2.6% (8)	<b>2.5% (14)</b>
<b>Kuy</b>	0.0% (0)	0.0% (0)	0.0% (0)	0.3% (1)	<b>0.2% (1)</b>
<b>Lun</b>	1.1% (1)	0.0% (0)	0.0% (0)	0.0% (0)	<b>0.2% (1)</b>

## Disability

The majority of all respondents (90.4%) reported no disability; 9.1% reported having a disability. 3 respondents (0.6%) indicated they were unsure or preferred not to answer.

Table 2.4: Distribution of Survey Respondents by Disability Status

Disability	Girls	Boys	Adolescent (Selected "Others" as gender)	Adult Parent / Caregiver	Total Respond.
Yes	3.7% (6)	8.8% (8)	33.3% (1)	11.8% (36)	<b>9.1% (51)</b>
No	96.3% (158)	91.2% (83)	66.7% (2)	87.2% (265)	<b>90.4% (508)</b>
Not sure	0.0% (0)	0.0% (0)	0.0% (0)	0.3% (1)	<b>0.2% (1)</b>
Prefer not to answer	0.0% (0)	0.0% (0)	0.0% (0)	0.7% (2)	<b>0.4% (2)</b>

## Marital Status

The vast majority of adolescent respondents aged 10 to 17 were single or never married, accounting for 97.0% of girls and 98.9% of boys. Instances of child and early marriage were observed exclusively among female adolescents in this sample: 1.8% reported being married, and 0.6% were divorced or separated. The mean age of first marriage for the 3 married girls in our survey respondent group was 15.7 years. In contrast, no boys reported being married, widowed, or divorced, though 1.1% are living with a partner.

Among the adult demographic, 83.9% were formally or traditionally married, while 7.2% were widowed. There is 2.0% who are single or never married - they are likely caregivers, such as elder siblings or relatives, of the adolescent.

Table 2.5: Distribution of Survey Respondents by Marital Status

Marital status	Girls	Boys	Adolescent (Selected "Other" as gender)	Adult Parent / Caregiver	Total Respond.
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Single / never married	97.0% (159)	98.9% (90)	100.0% (3)	2.0% (6)	<b>45.9%</b> <b>(258)</b>
Married (formal or traditional)	1.8% (3)	0.0% (0)	0.0% (0)	83.9% (255)	<b>45.9%</b> <b>(258)</b>
Widowed	0.6% (1)	0.0% (0)	0.0% (0)	7.2% (22)	<b>4.1%</b> <b>(23)</b>
Divorced / separated	0.0% (0)	0.0% (0)	0.0% (0)	0.3% (1)	<b>0.2%</b> <b>(1)</b>
Living with a partner	0.0% (0)	1.1% (1)	0.0% (0)	0.0% (0)	<b>0.2%</b> <b>(1)</b>
Prefer not to answer	0.6% (1)	0.0% (0)	0.0% (0)	6.6% (20)	<b>3.7%</b> <b>(21)</b>

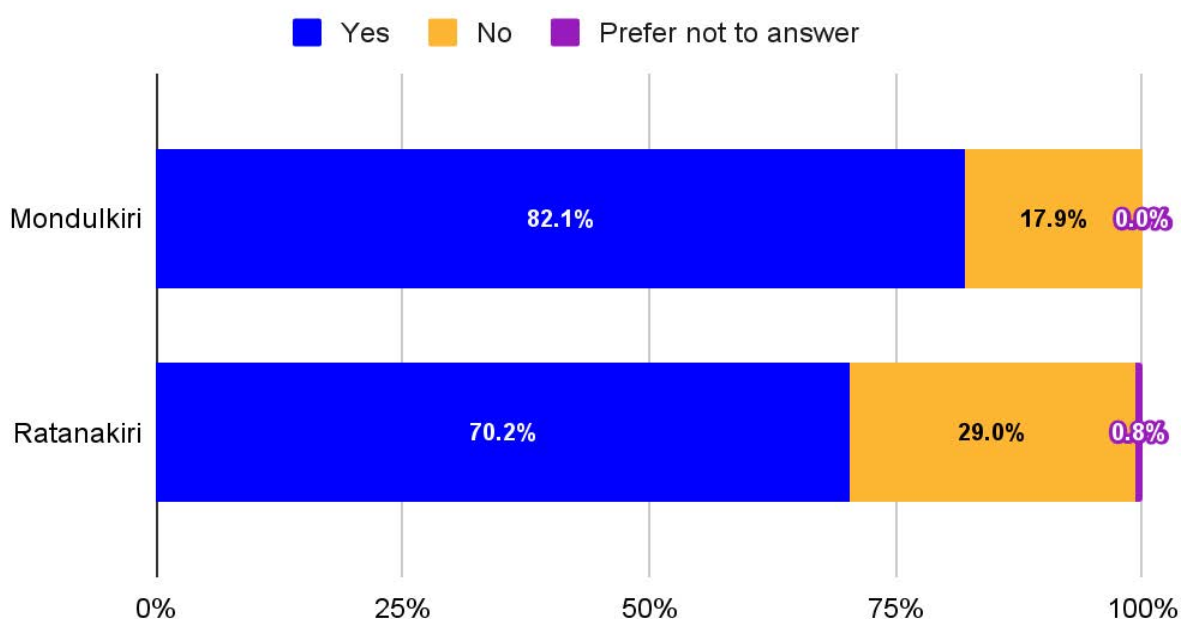
## Results: Economic and Education

### Education Status

Most adolescents (76.4%) are still attending school, predominantly in grades 4 to 8. School retention is higher in Mondulkiri, where 82.1% of adolescents are currently attending school as compared to 70.2% in Ratanakiri.

Among the 23.3% of adolescents who are not enrolled currently, most dropouts occur at the elementary level between Grades 1 and 6 (68.3%), with the median dropout grade at Grade 4, when adolescents are between 9 - 10 years old. In addition, 15% of adolescents have never attended school (i.e., highest attained grade is Grade 0).

### Q10. Are you currently attending school?



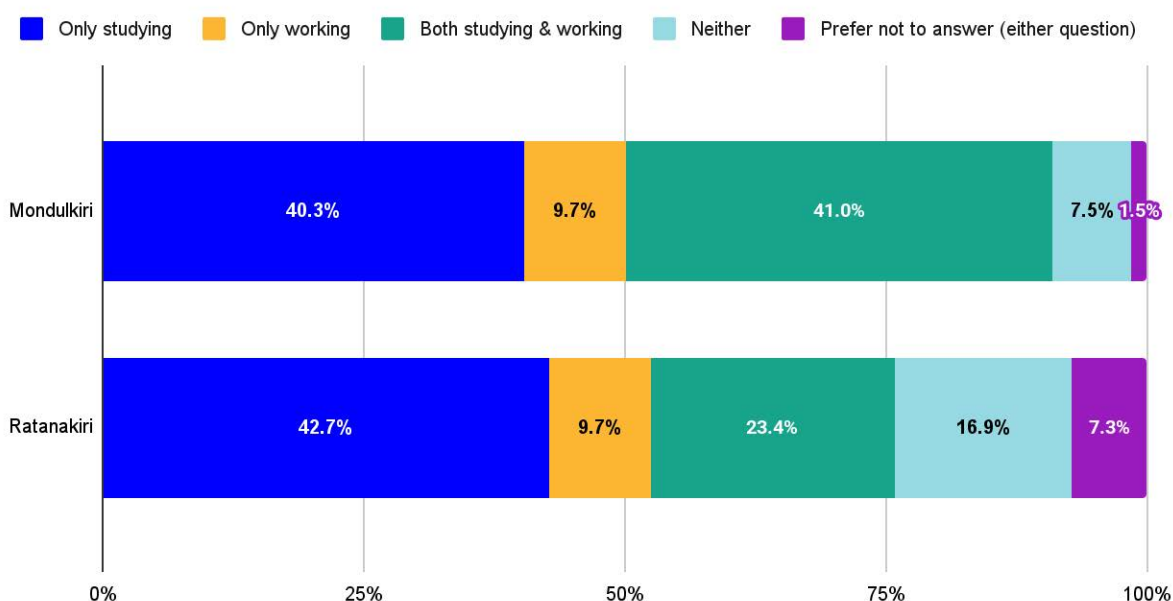
There is a gender difference in education levels attained by girls and boys. Overall, 79.9% of girls are currently enrolled in school, compared to only 69.2% of boys. Among those currently in school, boys are heavily clustered in the primary years (Grades 1-6) - peaking at Grade 4 (19.0%) - while girls show greater representation in lower secondary education (Grades 7-9). Specifically, 39.7% of currently enrolled girls have reached Grades 7-9, compared to only 23.8% of enrolled boys. A similar pattern emerges among those who have already left school: out-of-school boys were more likely to have dropped out during the primary cycle or never completed Grade 1 (17.9% of boys versus 12.5% of girls). In contrast, out-of-school girls were more likely to have persisted into lower secondary education before leaving; 21.8% of girls reached Grades 7-9, compared to only 7.1% of their male counterparts.

### Intersection of Education and Employment

It is worth noting that 41.0% of adolescents in Mondulkiri are both studying and working simultaneously, compared to only 23.4% in Ratanakiri. In contrast, there is a larger proportion of adolescents in Ratanakiri who are neither studying nor working, 16.9%, as compared to 7.5% in Mondulkiri.

Adolescent girls are also more likely to be studying and working at the same time. In Mondulkiri, nearly half of all girls (47.9%) are both working and studying, compared to 23.7% of boys. A similar trend is observed in Ratanakiri, where 29.4% of girls juggle both responsibilities compared to 15.1% of boys. This pattern might be symptomatic of low parental expectations for girls' educational attainment, which could translate into reduced family investment in their schooling. Consequently, girls need to support themselves through working if they want to continue school.

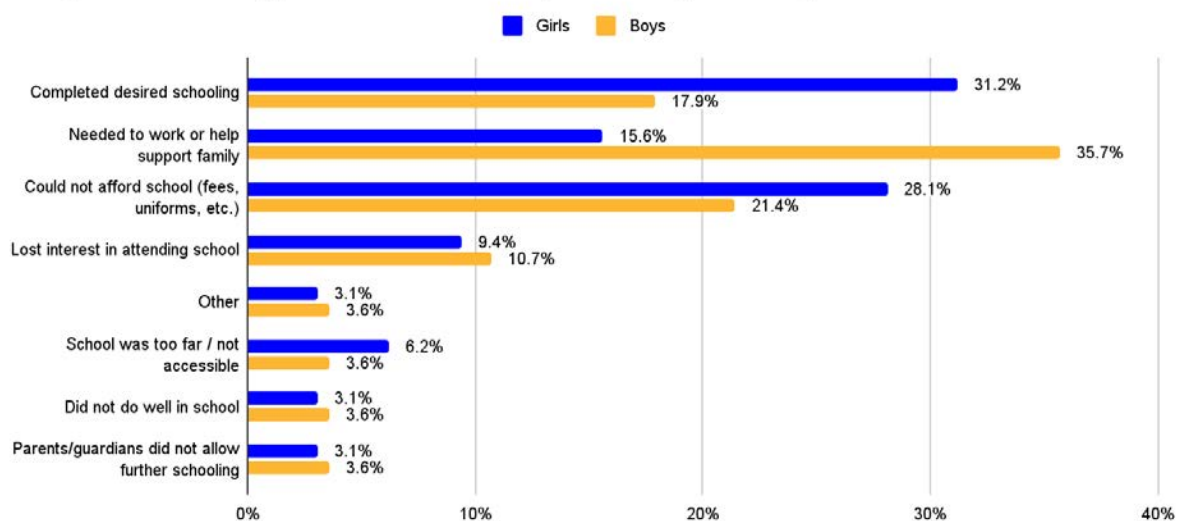
Studying and working status among adolescents



## Reason for Dropout

Self-reported reasons for dropping out are gendered: boys primarily dropped out to support their family financially (35.7%), whereas girls reported leaving because they perceive their education as complete at the grade in which they dropped out (31.2%). This could be linked to traditional gender roles where men are expected to be the main financial provider; conversely, if girls are expected to stay home and not seek formal employment, advanced skills might be deemed unnecessary and lower grades are seen as already “complete.” Among those who left school to support their families, 60% of girls and 40% of boys indicated that marriage contributed to their decision.

Q10c. [For adolescents only] What was the main reason you left or stopped attending school?



The inability to afford school expenses remains the underlying universal barrier. It ranks as the second highest personal reason for both sexes and aligns with broader community perceptions, with 70.1% of all respondents identifying it as one of the main reasons for leaving school. Beyond financial constraints, other significant factors reported by the community include a lack of interest in school (34.5%), family responsibilities and chores (26.9%), and early marriage (23.8%).

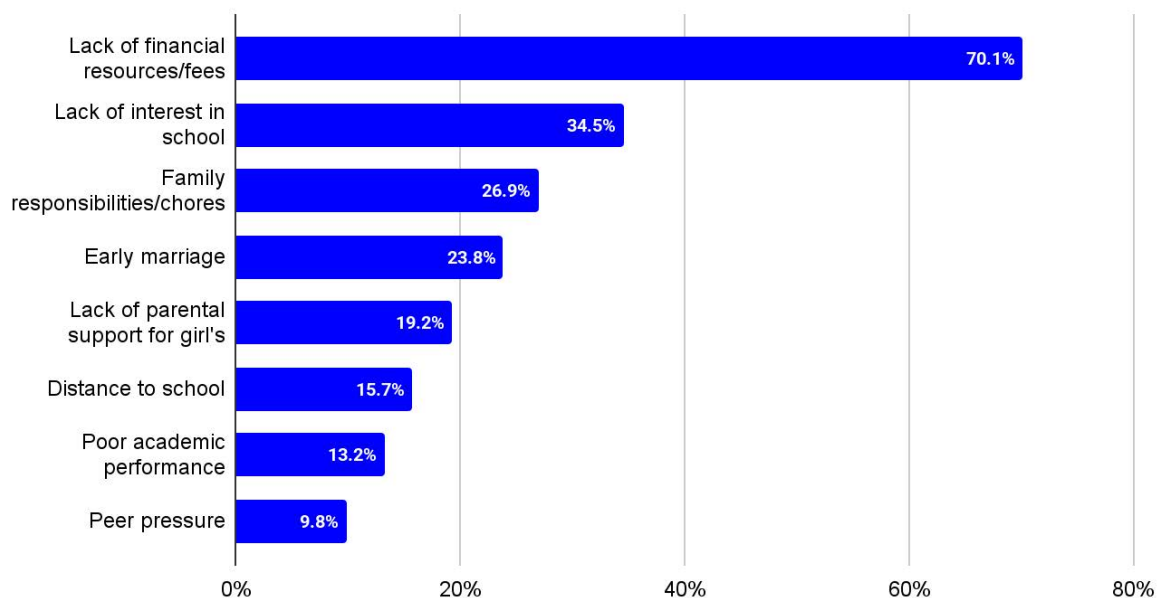
A perception gap exists regarding early marriage or pregnancy as a driver for girls' dropout – specifically, early marriage or pregnancy is viewed as a more common driver of girls' school dropout in general than is reflected in the self-reported experiences of girls who have actually dropped out. While 31.1% of all respondents and 21.9% (36 out of 164) of all girls cited it as a significant driver when asked about factors contributing to girls' school dropout, only 9.4% (3 out of 32) of girls who have dropped out of school reported early marriage or pregnancy as a contributor to that decision.

This disparity could be due to self-other asymmetry, a psychological phenomenon where people explain others' behaviours differently from their own. When observing others, respondents tend to attribute behaviour to salient, socially recognised causes like early marriage. However, when explaining their own lives, individuals often rely on situational or less stigmatising narratives, such as family responsibilities or academic challenges, to preserve a sense of dignity. Admitting early marriage as a personal reason for dropout may imply a loss of agency or invite social judgment, leading respondents to unconsciously favour explanations that feel more like constrained necessities.

On the other hand, it is possible that this divergence reflects the prominence of early marriage or pregnancy in public and community narratives, leading respondents to over-estimate their role in girls' dropout even when it is less commonly reported by affected girls themselves. The over-estimation suggests two possibilities: either the issue is less widespread than commonly believed, or that prevalence has reduced over time but community perceptions have yet to catch up with this change.

Additionally, this perception of marriage as a barrier reveals a distinct generational divergence. Parents and caregivers are nearly twice as likely to cite early marriage or early pregnancy as a key reason for girls dropping out (38.2%) compared to 21.9% of girls and 22% of boys. This indicates that adult respondents perceive marriage as a more prevalent barrier than the adolescents themselves.

**Q11. What do you think are the main reasons girls in your community stop attending school? (Top 8 reasons)**



12

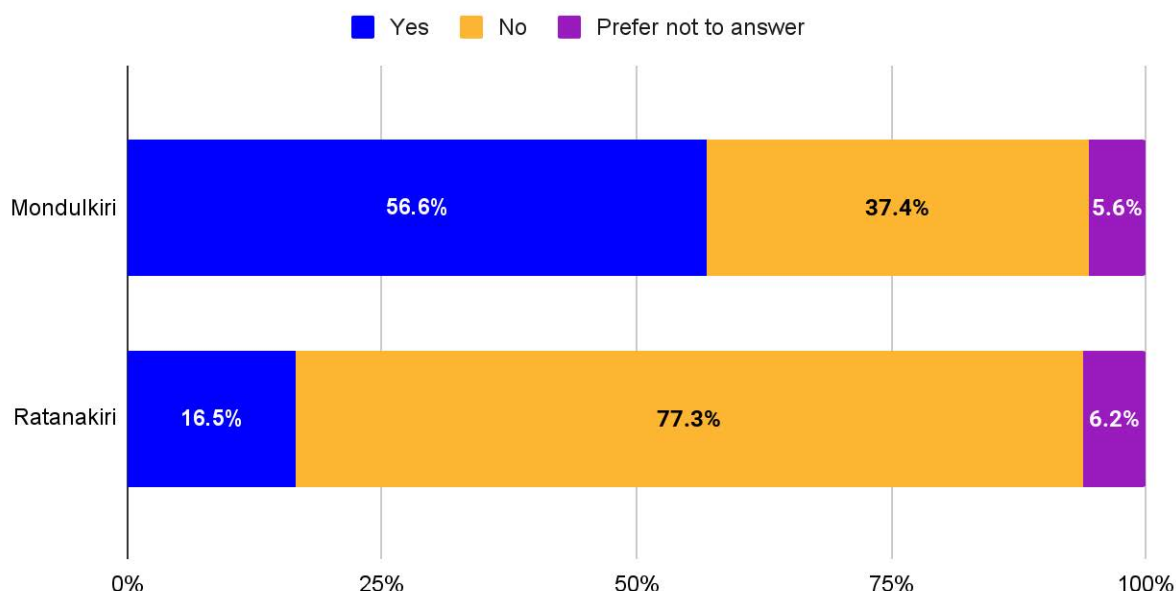
### Awareness of Support Services

Over half of all respondents (55.9%) reported being unaware of any support services to help students stay in school, indicating a critical lack of awareness. Awareness is significantly higher in Mondulkiri (56.6%) compared to Ratanakiri, where only 16.5% of respondents know of any available support.

Interestingly, we observed higher awareness of school-retention support services in Mondulkiri alongside higher school-retention rates in the province. While this pattern does not establish causality, it suggests that greater visibility of support services (and therefore potential utilisation) may play a role in enabling students to remain in school. It remains possible that other broader political or social factors drive higher school retention in Mondulkiri, such as stronger social or political will within the community to prioritise education.

<sup>12</sup> This chart displays all factors cited by at least 10% of respondents. For a complete tabulation of all reported reasons, please refer to the Appendix.

**Q12. Are you aware of any support services or programmes in your school or community that help students, especially girls, stay in school?**

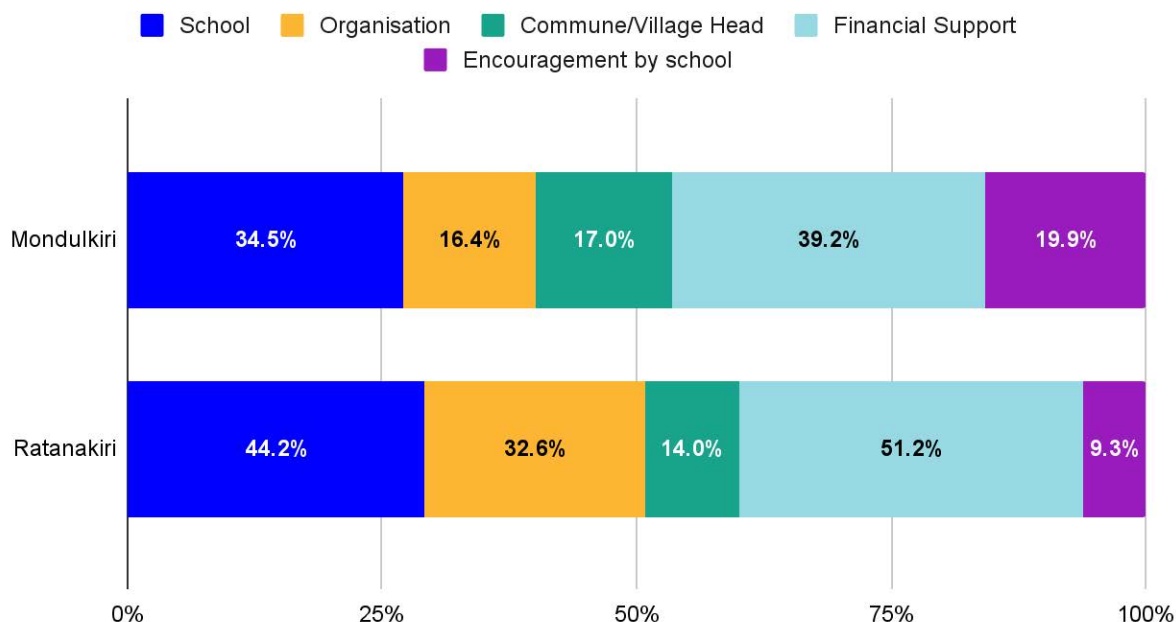


Among those who were aware of resources, schools were identified as the main source of support. Respondents also cited commune/village heads and organisations (e.g. those providing scholarships such as the REDD+ Project<sup>13</sup> ) as key providers. In terms of methods, financial support was the primary mechanism - specifically through scholarships, food, and clothing - followed by encouragement, such as teachers or principals calling and broadcasting messages to families to urge school retention.

In both regions, schools remained the top provider, though they were cited more frequently in Ratanakiri (44.2%) compared to Mondulkiri (34.5%). A notable difference appears in the role of non-governmental actors: organisations were a much more prominent source of support in Ratanakiri (32.6%) than in Mondulkiri (16.4%). Commune and village heads played a similar role across both provinces (17% in Mondulkiri versus 14% in Ratanakiri). Regarding the type of support, financial aid was the dominant method in both regions, though slightly higher in Ratanakiri (51.2%) compared to Mondulkiri (39.2%).

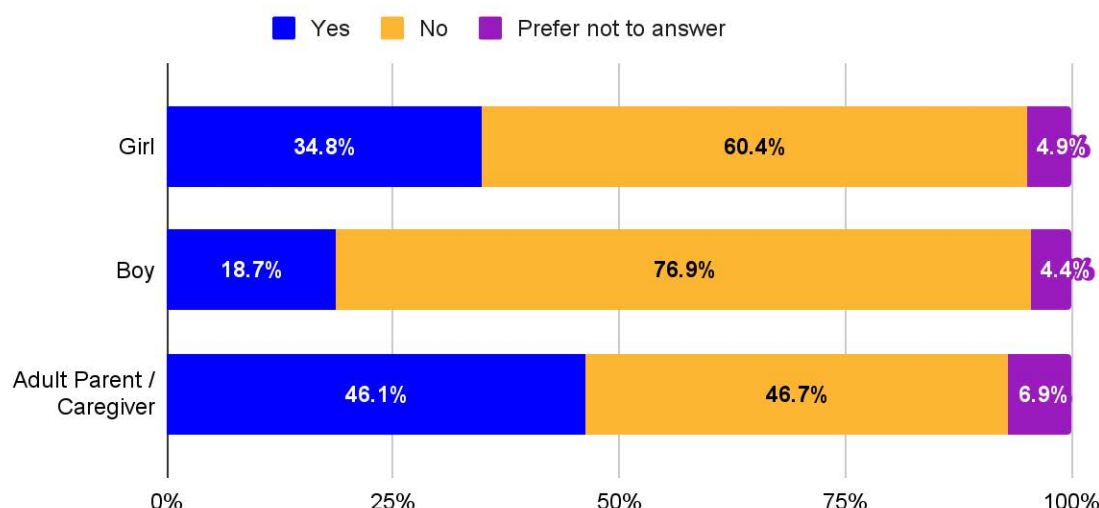
<sup>13</sup> The Southern Cardamom REDD+ scholarship program was launched in 2019 to support students from rural areas, including members of Indigenous communities, to pursue higher education.

**Q12. [If aware] What kind of support services or programmes have you heard of?**



Across the total sample, boys are consistently less informed than girls, with only 23.1% of boys being aware of support services compared to almost 40% of girls (39.6%). This gap is particularly acute in Mondulkiri, where despite higher overall awareness, boys (28.9% are aware) lag significantly behind girls (53.1%). This could be because current information channels are mainly centred around schools, which might reach more girls, as boys drop out at higher rates (30.8% vs. 19.5% for girls). It could also be because the question mentioned “especially girls,” leading boys to interpret the question as focusing exclusively on resources targeted at girls rather than support available to students in general.

**Q12. Are you aware of any support services or programmes in your school or community that help students, especially girls, stay in school?**



## Results: Cultural Beliefs and Attitudes about Social and Gender Norms

### Perceived Prevalence and Acceptability of Early Marriage

Respondents in Ratanakiri perceive early marriage in girls as more prevalent than those in Mondulkiri. On average, respondents in Ratanakiri estimated that 5.6 out of 10 girls are married by age 18, compared to 4.6 out of 10 in Mondulkiri. Although not a fair comparison,<sup>14</sup> to put this finding in perspective, the perceived norm is higher than the rate of marriage in our respondent sample of girls (2.4% by age 17). This shows that perceptions of child marriage were still relatively high in both provinces, underscoring the need for continued work in this area.

Table 2.6: Perceived prevalence of early marriage

<b>Q23. Imagine a village like yours. If there were 10 girls who are 18 years old, how many of them do you think have already been married?</b>			
<b>No. of girls</b>	<b>Mondulkiri</b>	<b>Ratanakiri</b>	<b>Combined</b>
<b>Mean</b>	4.6	5.6	5.0
<b>Median</b>	4.0	5.0	5.0
<b>Total no. of responses</b>	270	202	472
<b>No. of missing responses</b>	32	58	90

<sup>14</sup> It should be noted that for our adolescent respondent group (ages 10-17), the marriage rate is 2.4%. However, it is possible that the girls' marriage rate of 2.4% is potentially an underestimation in this comparison, since 18-year-olds are not included in this sample.

In terms of social acceptability of child marriage, there is a drastic difference between the two provinces. In Mondulkiri, early marriage is largely viewed as socially unacceptable; respondents estimated that, on average, only 16.4 out of 100 people would find it acceptable. In comparison, the mean estimate for Ratanakiri was 45.8 out of 100 people, suggesting that nearly half the community is perceived to support early marriage.

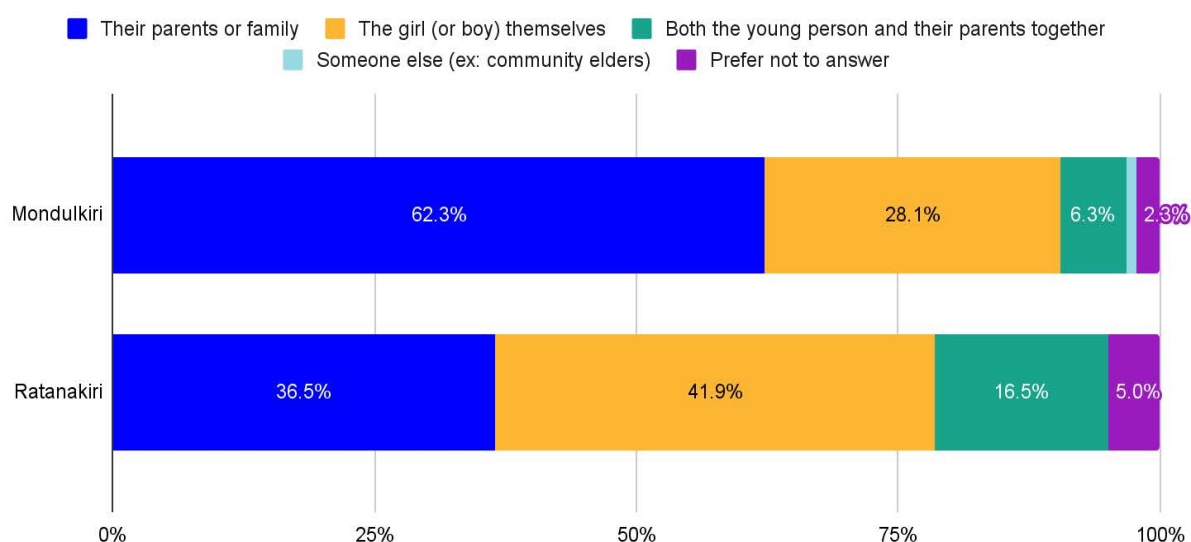
Table 2.7: Perceived acceptability of early marriage

Q24. Imagine that there's a girl called Chan in the village. She is 15 years old. Out of 100 people in the village, how many do you think would find it acceptable for Chan to get married before 18 years old?			
No. of people	Mondulkiri	Ratanakiri	Combined
Mean	16.4	45.8	28.8
Median	4.0	50.0	20.0
Total no. of responses	274	202	476
No. of missing responses	28	58	86

### Agency and Decision-Making Power over Marriage

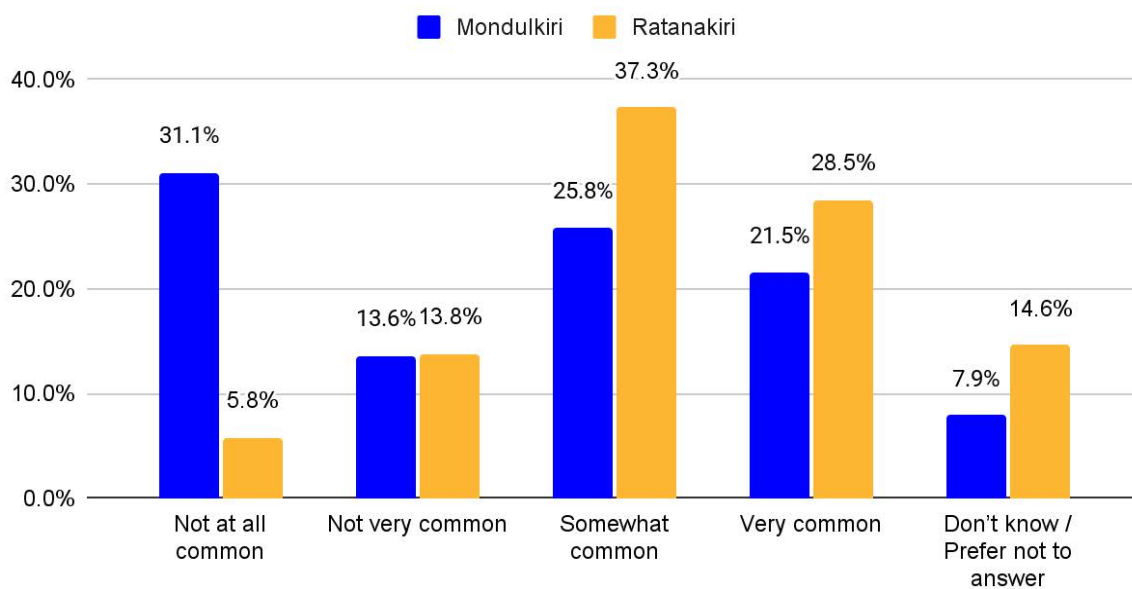
In Mondulkiri, the majority of the respondents stated that parents or family should have the final say (62.3%) on when a girl or boy gets married. Another 28.1% believed that a child should decide for themselves. The opposite was reported in Ratanakiri, with a smaller proportion of respondents reporting that parents should have the final say (36.5%) as compared to the final say coming from the child (41.9%).

Q25. In your opinion, who should have the final say on when a girl/boy gets married?



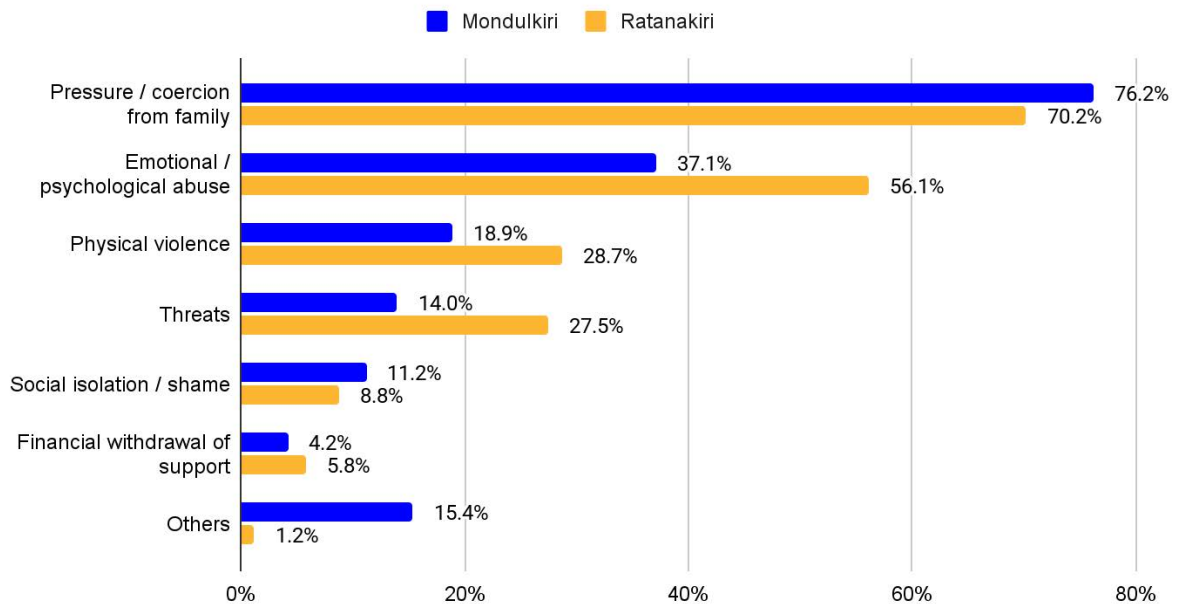
Interestingly, while a higher proportion of Ratanakiri respondents thought that the adolescents themselves should have the final say on marriage timing, girls there face greater challenges refusing family-selected partners. Specifically, 65.8% of Ratanakiri respondents perceive that it is ‘Somewhat’ or ‘Very’ common for girls and women to face challenges when they choose not to marry someone selected by their family, versus 46.3% in Mondulkiri. Notably, over one-third of Mondulkiri respondents believed such challenges are ‘Not at all common,’ a sentiment shared by only 5.8% in Ratanakiri.

**Q26. How common is it for girls or women in your community to face challenges when they choose not to marry someone selected by their family?**



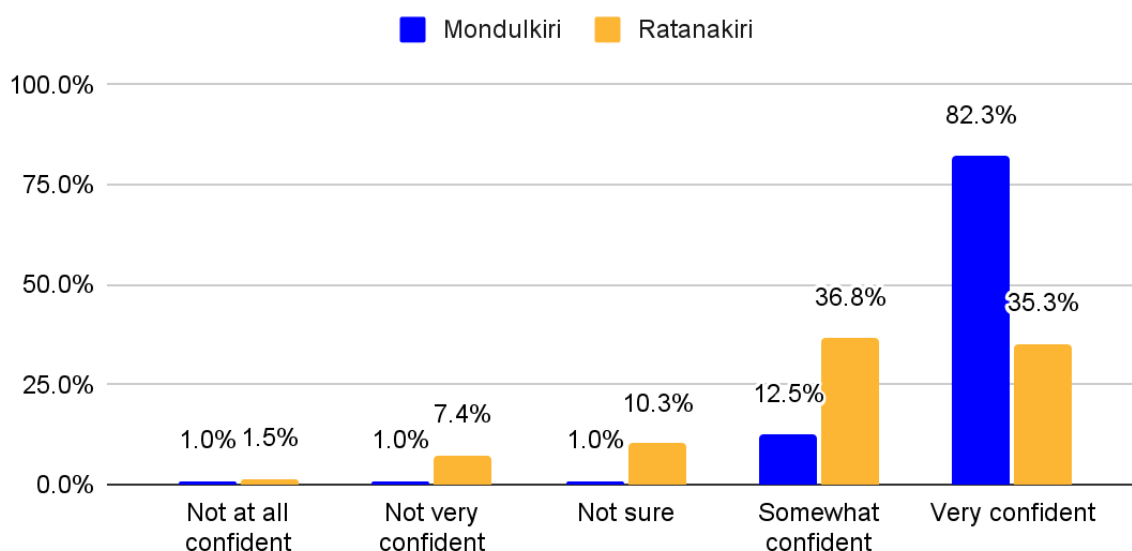
In both provinces, the primary challenge is pressure or coercion from family, cited by 76.2% of respondents in Mondulkiri and 70.2% in Ratanakiri. However, beyond family pressure, the consequences of resistance appear to be more punitive in Ratanakiri. Emotional and psychological abuse is reported by 56.1% of respondents in Ratanakiri compared to 37.1% in Mondulkiri. The threat of physical harm is also more pronounced in Ratanakiri, where 28.7% cited physical violence (versus 18.9% in Mondulkiri) and 27.5% cited threats (versus 14.0% in Mondulkiri). This suggests that while family pressure is universal, the environment in Ratanakiri is far more likely to escalate into abuse and violence when a girl attempts to exercise her agency over partner selection.

**Q26a. What kind of challenges or difficulties do you think they face?**



These punitive consequences are observed alongside a stark difference in girls' confidence in both provinces to refuse marriage. Although the majority of Mondulkiri respondents believed that parents should have the final say in the timing of marriage, girls in Mondulkiri still demonstrate a strong sense of personal agency, with 82.3% reporting they were 'Very Confident' in their ability to refuse marriage before they turned 18 years old. In contrast, despite a higher proportion of respondents believing the girl (or boy) should have the final say, only 35.3% of Ratanakiri girls felt 'Very Confident' in saying no; 36.8% are 'Somewhat Confident.'

**Q27. [For girls only] If someone wanted you to get married before you turned 18 years old, but you did not want to, how confident would you feel in resisting or saying no to that marriage?**



The disparity in confidence could stem from two factors: higher acceptability of child marriage and a lower awareness of help-seeking avenues in Ratanakiri. Only 37.3% of respondents in Ratanakiri knew how to report underage marriage, compared to 48.3% in Mondulkiri, leaving girls with fewer avenues to seek help.

### Attitudes towards Intimate Partner Violence

Across both provinces, there is a high level of acceptance for intimate partner violence among adolescents. In Mondulkiri, 79.9% of adolescents believed that a husband is justified in hitting his wife in at least one of the five specified scenarios (see Table 2.9); in Ratanakiri, 66.9% of adolescents also believed so. In both provinces, boys are more likely to support these justifications than girls - in Mondulkiri, 86.8% of boys agreed to the justifications as compared to 77.1% girls; in Ratanakiri, 71.7% of boys agreed compared to 63.3% of girls.

Table 2.8: Percentage of adolescents who believed that intimate partner violence is justified in at least one of the five specified scenarios.

<b>Q28. [For adolescents only] In your opinion, is a husband justified in hitting or beating his wife in the following situations?</b>			
<b>Said "Yes" to at least one of the five situations</b>	<b>Girl</b>	<b>Boy</b>	<b>Total Adolescents</b>
<b>Mondulkiri</b>	77.1% (74)	86.8% (33)	79.9% (107)
<b>Ratanakiri</b>	63.2%	71.7%	66.9%

	(43)	(38)	(81)
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The leading justification for a husband hitting his wife across both provinces is child neglect, affirmed by 66.4% of respondents in Mondulkiri and 55.6% in Ratanakiri. For other justifications, in Mondulkiri, violence is more frequently justified in the context of mobility, with 50.0% of respondents agreeing that it is justified to hit a wife if she goes out without telling her husband. In contrast, adolescents in Ratanakiri are more likely to justify violence in response to refusal of sex (41.1% versus 33.6% in Mondulkiri) or household mistakes such as burning food (41.1% versus 35.8% in Mondulkiri).

Table 2.9: Adolescents' responses to intimate partner violence in five scenarios

<b>Q28. [For adolescents only] In your opinion, is a husband justified in hitting or beating his wife in the following situations?</b>						
	<b>Mondulkiri</b>			<b>Ratanakiri</b>		
	<b>Yes</b>	<b>No</b>	<b>Prefer not to answer</b>	<b>Yes</b>	<b>No</b>	<b>Prefer not to answer</b>
<b>Q28a.</b> If she goes out without telling him	50.0% (67)	47.8% (64)	2.2% (3)	43.5% (54)	48.4% (60)	8.1% (10)
<b>Q28b.</b> If she neglects the children?	66.4% (89)	33.6% (45)	0.0% (0)	55.6% (69)	36.3% (45)	8.1% (10)
<b>Q28c.</b> If she refuses to have sex with him?	33.6% (45)	60.4% (81)	6.0% (8)	41.1% (51)	46.0% (57)	12.9% (16)
<b>Q28d.</b> If she burns the food?	35.8% (48)	61.9% (83)	2.2% (3)	41.1% (51)	50.8% (63)	8.1% (10)
<b>Q28e.</b> Others (No response from most respondents)	0.7% (1)	1.5% (2)	0.0% (0)	1.6% (2)	1.6% (2)	1.6% (2)

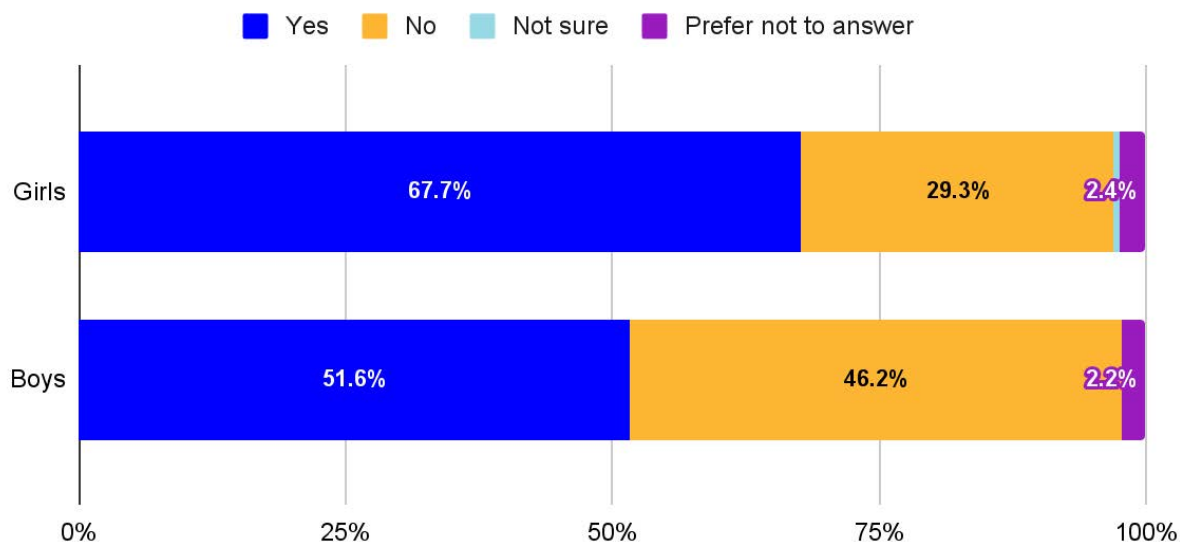
## Results: Knowledge, Awareness and Enforcement related to Laws, Sexual and Reproductive Health Education, and other Programmes

### Awareness and Source of Sexual and Reproductive Health (SRH) Education

Across the total adolescent sample, 62.4% have received some form of SRH education, while 34.9% reported they have never received such information. This indicates that while the majority are being reached, over one-third of the adolescents remain uninformed, with the deficit skewing towards boys. 67.7% of girls reported receiving information on topics such as puberty, menstruation, and contraception,

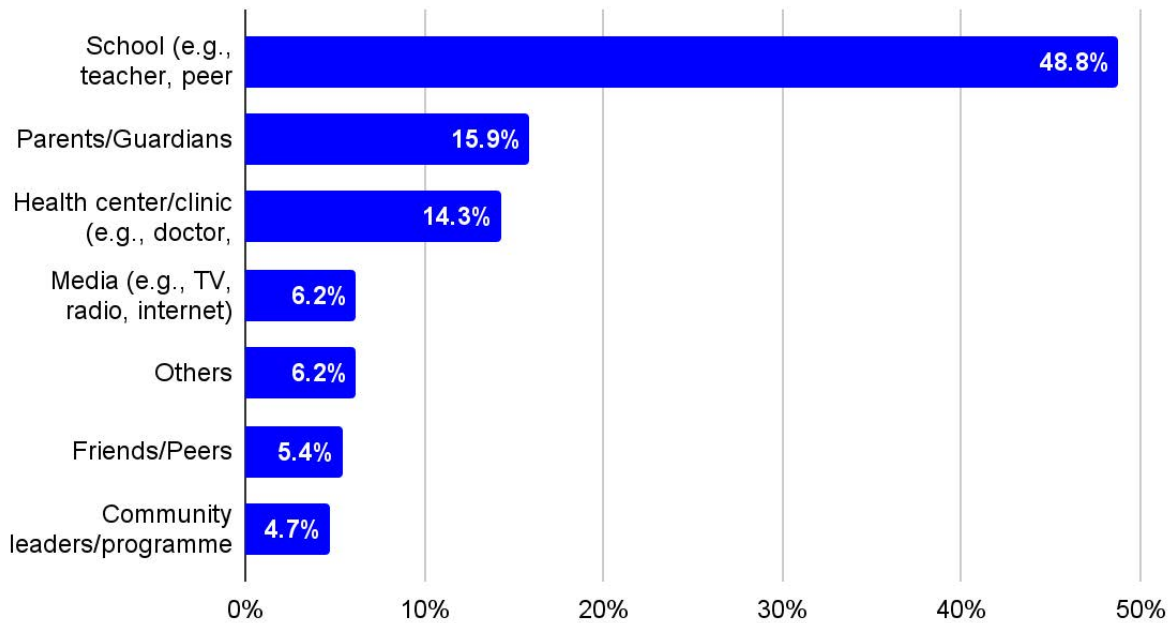
only 51.6% of boys reported the same. This leaves nearly half of the adolescent boy population (46.2% answering "No") without formal guidance on these critical subjects, compared to roughly 29% of girls.

**Q17. [For girls and boys only] Have you ever received any information or education about sexual and reproductive health from school, health workers, parents, or community programs?**



Schools act as the primary pillar for SRH information dissemination, with nearly half of the adolescents (48.8%) who received information identifying schools as their source. This could be because this is the main avenue, outside of family, that adolescents have the most contact with on a daily basis. Key secondary sources include parents and guardians (15.9%) and health centres (14.3%).

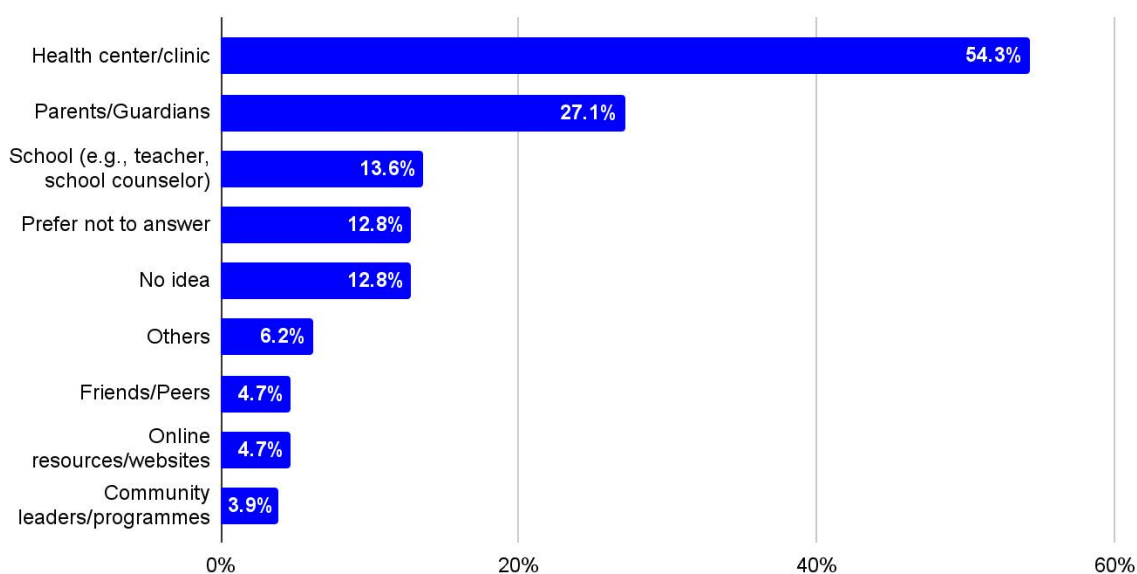
**Q17a. If Yes: Where did you receive this information? (Select all that apply)**



Interestingly, while schools are currently the primary source of information (among the 48.8% who had received any), they are not viewed as a reliable source of information or help with only 13.6% of respondents selecting it as a reliable option. Instead, over half of adolescents (54.3%) identified health centres and clinics as the most reliable source for information. Even though health centres are viewed as the authoritative option, they currently serve as a source of information for only 14.3% of respondents who are aware. This suggests that there are gaps in access to reliable information, which may be related to a variety of barriers - ranging from practical constraints to social or cognitive hurdles, such as limited awareness or trust.

Additionally, 12.8% of adolescents had “No idea” where they could seek reliable SRH information or help, suggesting a need for interventions that increase awareness.

**Q18. [For adolescents only] If a young person needed information about sexual and reproductive health or services (like contraception, family planning), where would they go to get reliable information or help? (Select all that apply)**

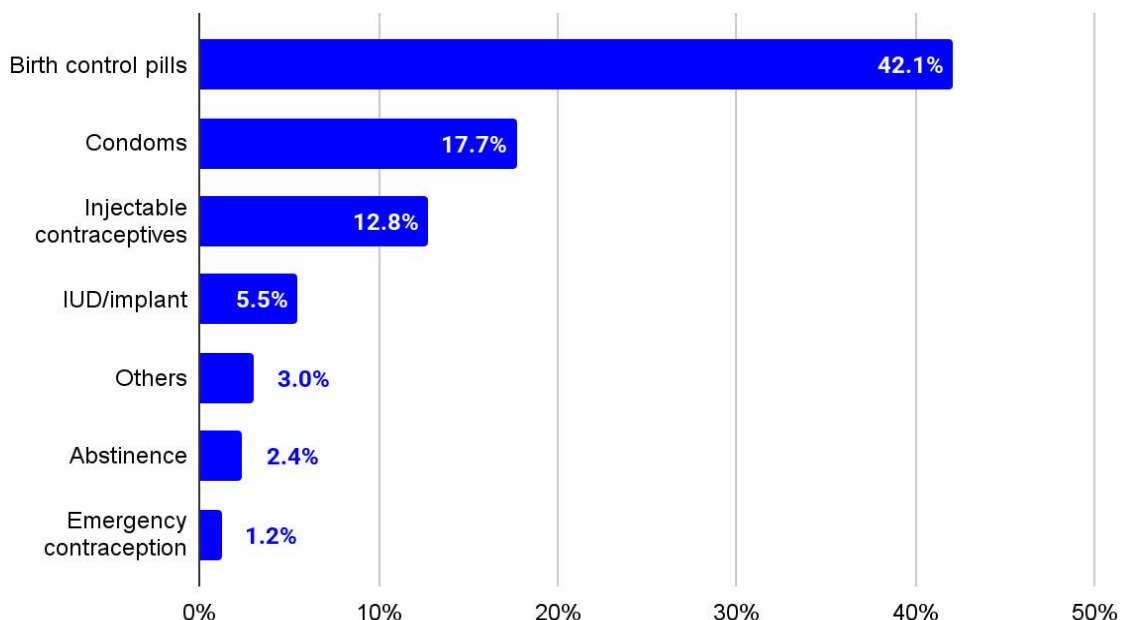


### Knowledge of SRH Information

Overall, the data indicates a significant deficit in reproductive health literacy. In both provinces, fewer than half of all girls (48.8%) possess knowledge of contraceptive methods. In Mondulkiri, 53.1% of girls are aware of ways to prevent pregnancy, with 38.5% unaware. In contrast, Ratanakiri has a lower rate of awareness (42.6%) with nearly half of the girls (48.5%) completely unaware of any method to delay or prevent pregnancy.

Both provinces reported a similar pattern of awareness, with respondents most frequently citing birth control pills (42.1%), followed by condoms (17.7%) and injectable contraceptives (12.8%).

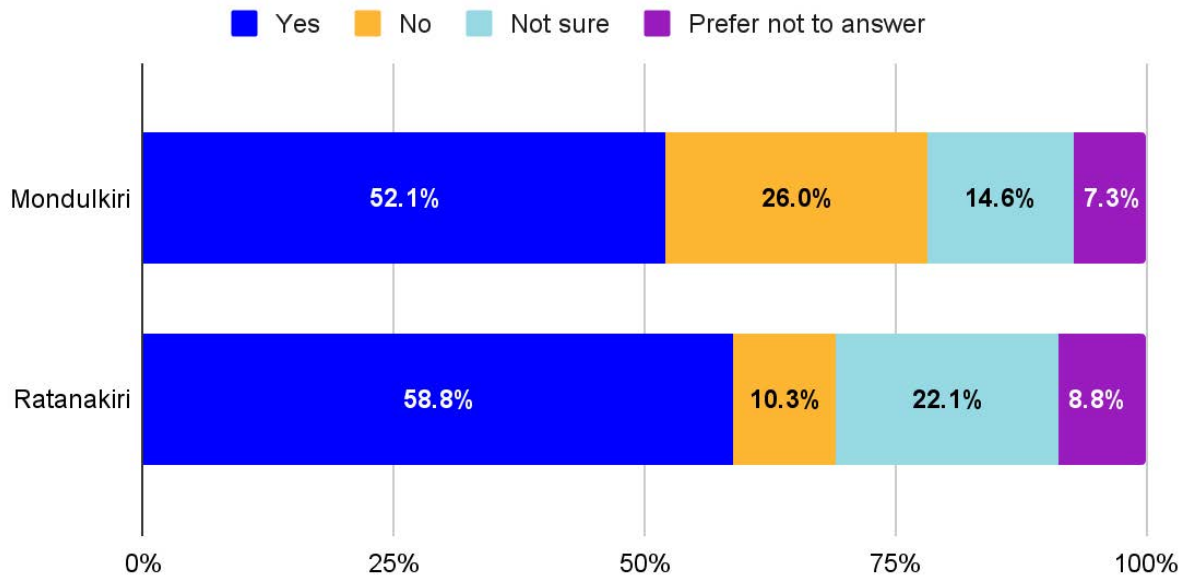
**Q19a. If Yes: Which methods have you heard of?**



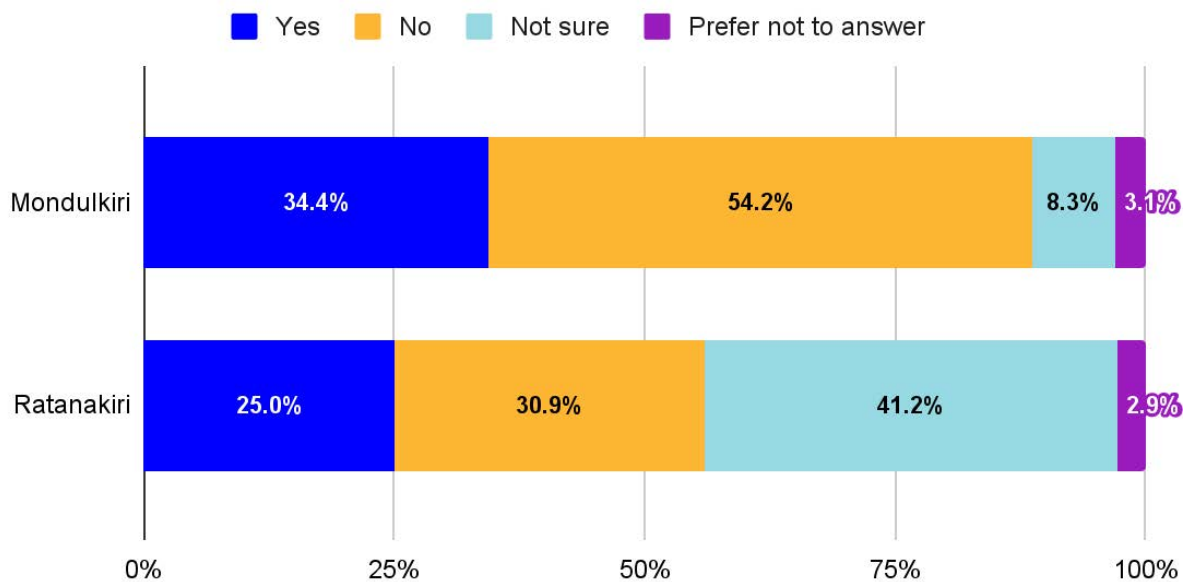
**HIV Knowledge and Misconceptions:** While a slight majority of girls understand the protective benefits of condoms, significant misconceptions persist regarding HIV transmission and symptoms. When comparing provinces, the data reveals a distinct divergence in response patterns. Although rates of correct knowledge varied by topics, a consistent trend of ‘confident incorrectness’ emerged in Mondulkiri versus uncertainty in Ratanakiri.

In Mondulkiri, girls were significantly more likely to provide definitive, yet incorrect, answers across both questions. For instance, over half of the girls in Mondulkiri (54.2%) confidently asserted that appearance is a reliable indicator of HIV status, and one-quarter explicitly stated that condoms do not provide protection - compared to 30.9% and 10.3% in Ratanakiri, respectively. In contrast, girls in Ratanakiri were far more likely to use the ‘Not sure’ option. This uncertainty was most pronounced regarding HIV symptoms, where 42.1% reported being unsure (compared to just 8.3% in Mondulkiri), reflecting a hesitation to commit to an answer rather than a firm belief in misinformation.

**Q20. [For girls only] Can using a condom during sexual intercourse help protect against HIV/AIDS and other sexually transmitted infections (STIs)?**



**Q21. [For girls only] Do you think a healthy-looking person can be infected with HIV?**



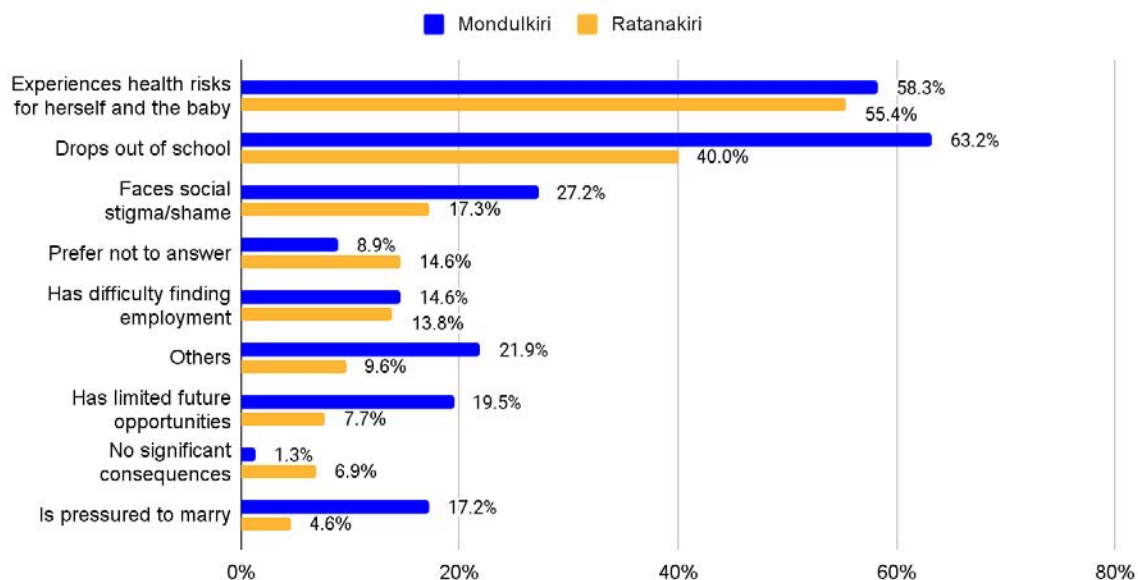
**Consequences of Teenage Pregnancy**

Both provinces identified school dropout, health risks, and social stigma as the top three consequences of teenage pregnancy, differing only in their prioritisation. In

Mondulkiri, respondents view educational disruption as the primary consequence, with 63.2% citing “Drops out of school” as the leading impact, followed closely by health risks at 58.3%. Conversely in Ratanakiri, respondents prioritised “health risks for herself and the baby” as the top consequence (55.4%), followed by school dropout (40.0%).

Social stigma ranked as the third most common consequence in both provinces, though it is felt more acutely in Mondulkiri (27.2%) than in Ratanakiri (17.2%). Additionally, there is a notable distinction in “pressure to marry” as a consequence of pregnancy: 17.2% of Mondulkiri respondents identified it as a consequence, compared to only 4.6% in Ratanakiri. This suggests that while child marriage is generally seen as less acceptable in Mondulkiri, pregnancy creates an exceptional circumstance where marriage is enforced - implying that an unwed pregnant mother is viewed as more unacceptable than a married child. This aligns with the significantly higher rates of perceived social stigma and shame associated with teenage pregnancy reported in Mondulkiri (27.2%) compared to Ratanakiri (17.3%).

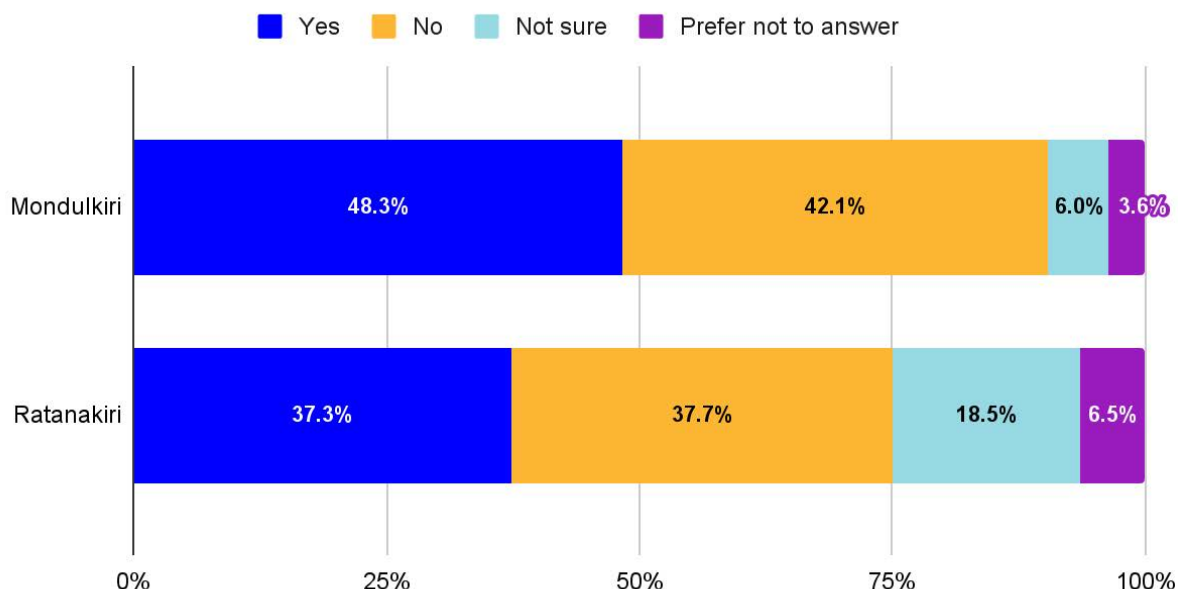
**Q22. In your opinion, what are the main consequences for a teenage girl who becomes pregnant in this community?**



### Knowledge of Help-seeking Avenues

A significant gap exists in actionable knowledge regarding how to prevent early marriage. Overall, fewer than half of the respondents (43.2%) know how to report a potential child marriage or seek help to prevent it. The awareness is slightly higher in Mondulkiri, with 48.3% answering “Yes.” In Ratanakiri, awareness is lower at 37.3%, with a high degree of uncertainty (18.5% answering “Not sure”).

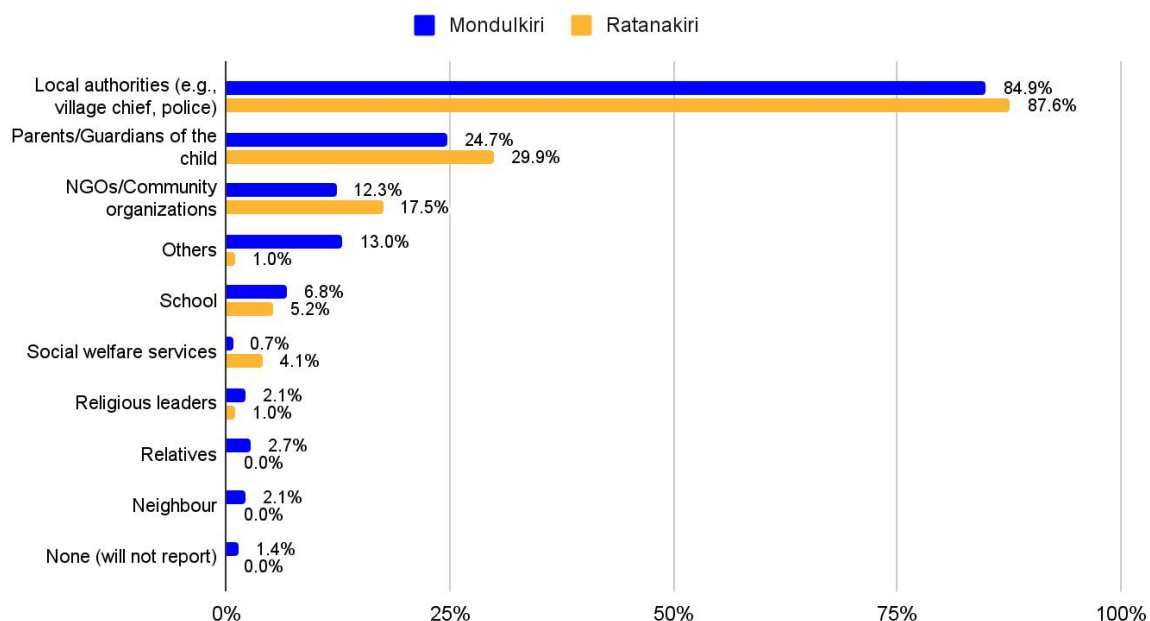
**Q29. If you found out that someone under 18 in your community was going to be married, would you know how to report it or seek help to prevent it?**



Among those who do know how to report, the primary channel of support is local authorities such as village chief or the police, cited by 84.9% of respondents in Mondulkiri and 87.6% in Ratanakiri. Parents and guardians serve as a distant second option, cited by 24.7% in Mondulkiri and 29.9% in Ratanakiri. The third most common channel cited is non-governmental organisations (NGOs) and community organisations, identified by 12.3% in Mondulkiri and 17.5% in Ratanakiri.

This heavy reliance on formal structures could impede help-seeking: approaching legal or official figures can be daunting for an adolescent, and the low awareness of “less intimidating” sources like NGOs could create a critical gap in the support network.

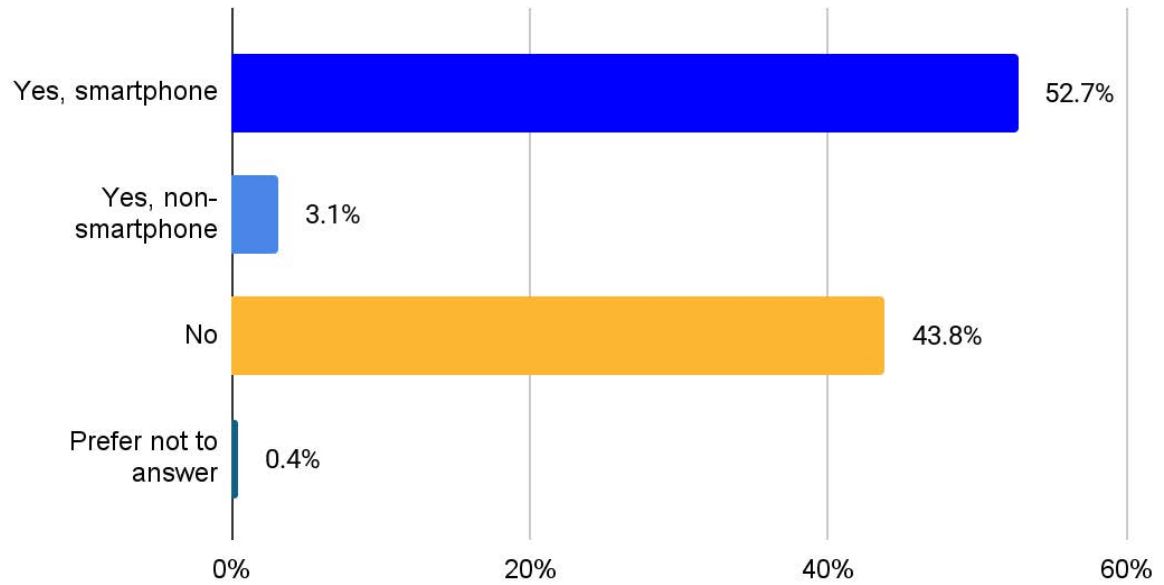
**Q29a. If Yes: Where would you go or who would you contact?**



## Results: Digital literacy and Exposure

More than half of the adolescents (55.8%) own a mobile phone. Among those with phones, 94.4% own smartphones. The ownership rates do not differ significantly by gender or province. The prevalence of mobile phones and smartphones offers a promising alternative channel for intervention, allowing programs to deliver SRH information, reporting mechanisms, and educational content directly to adolescents - potentially reaching those outside the school system.

**Q14 & Q15. Do you personally own a mobile phone? If yes, is it a smartphone?**



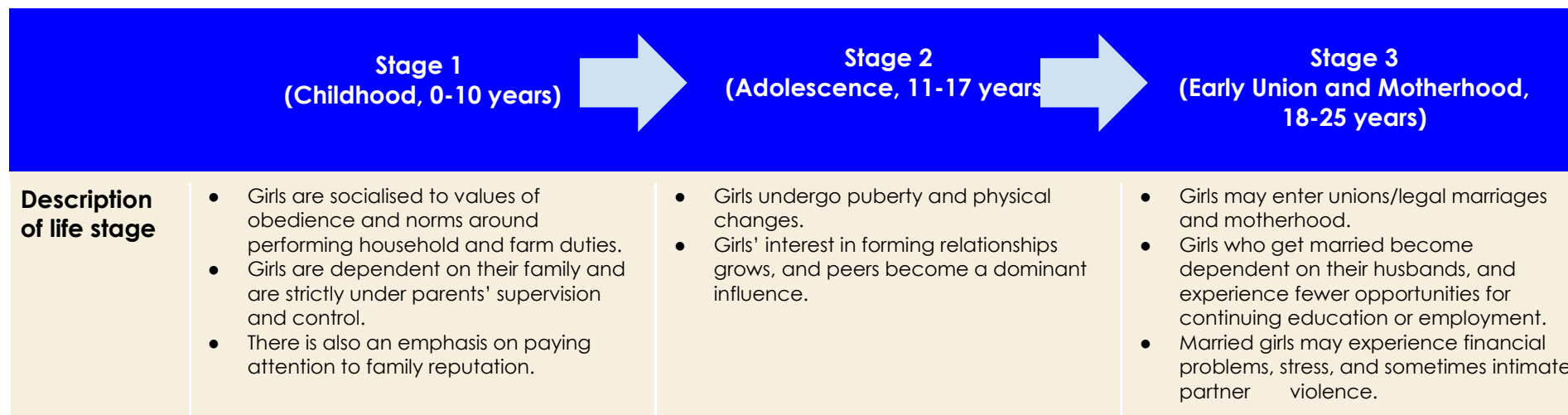
# Participatory Formative Research Findings

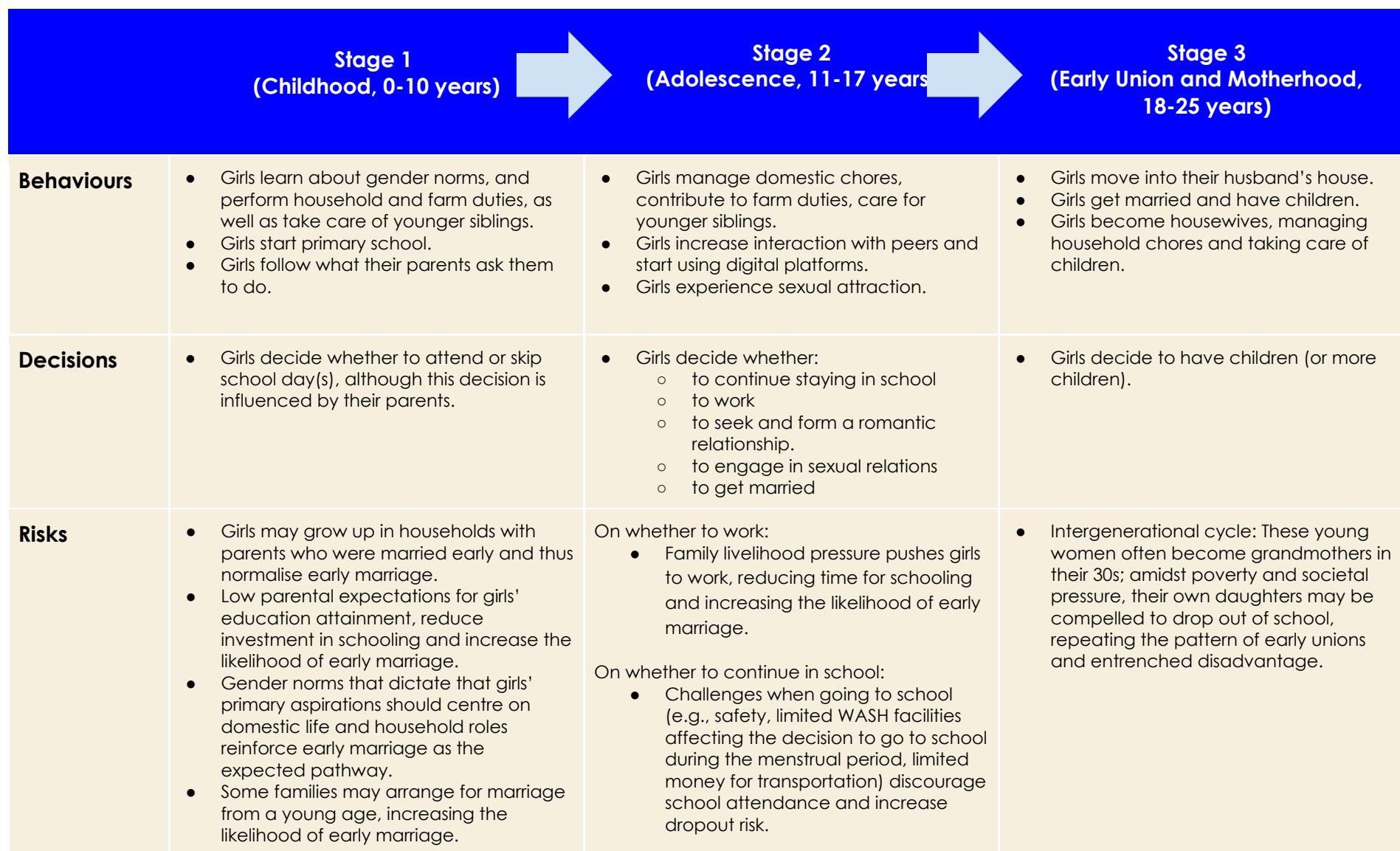
Findings from the qualitative activities - FGDs and KIs - were synthesised to identify key themes and determinants shaping adolescent girls' journey towards CEFM. Following the fieldwork, an initial summary of findings was compiled and shared with UNICEF, fieldworkers from GADC, and other stakeholders in a Journey Mapping Workshop. In the workshop, participants co-created journey maps in breakout groups, further elaborating on the contextual factors, risks, and safeguards influencing girls' decisions and actions. See Annex 7 for the journey mapping group activity sheets used during the Journey Mapping Workshop.

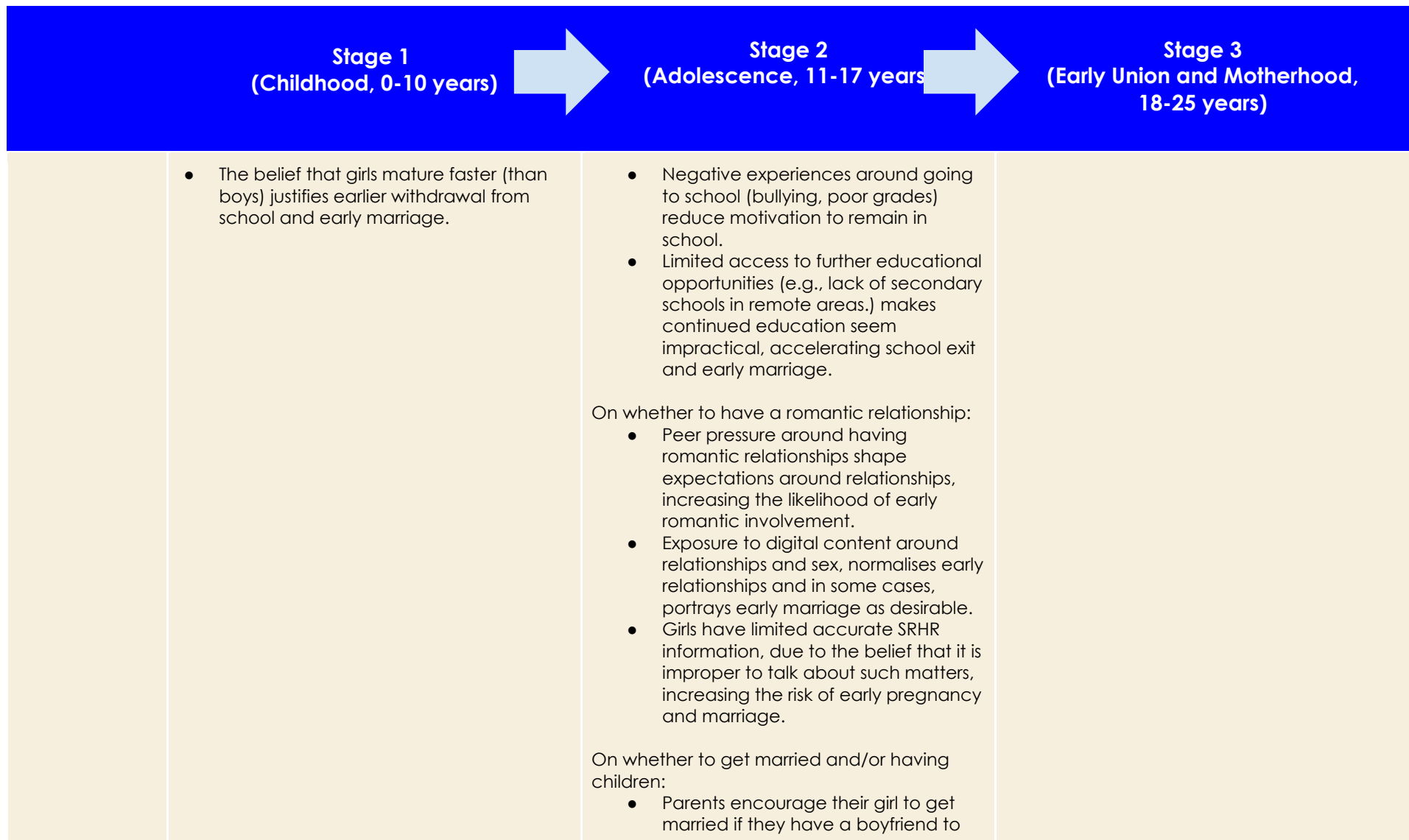
These inputs were subsequently consolidated into the final journey map presented below.

## Girls' Journey Map

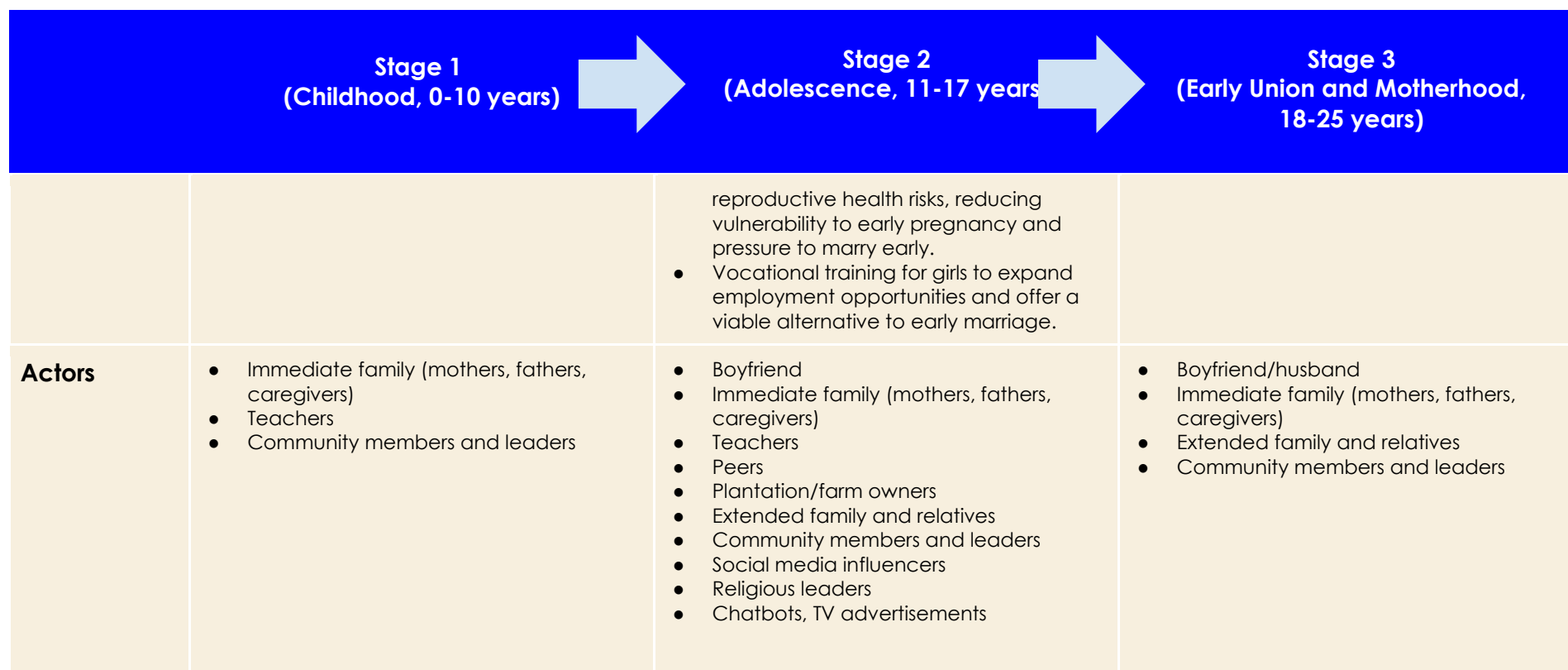
The girls' CEFM journey follows progressive transitions:







<div style="display: flex; justify-content: space-around; align-items: center; background-color: #0056b3; color: white; padding: 10px;"> <div style="text-align: center;"> <b>Stage 1</b>            (Childhood, 0-10 years)         </div> <div style="font-size: 2em; color: white;">➔</div> <div style="text-align: center;"> <b>Stage 2</b>            (Adolescence, 11-17 years)         </div> <div style="font-size: 2em; color: white;">➔</div> <div style="text-align: center;"> <b>Stage 3</b>            (Early Union and Motherhood,            18-25 years)         </div> </div>			
		<p>avoid shame and preserve honour, or to avoid or deal with premarital pregnancy, leading to early marriage.</p> <ul style="list-style-type: none"> <li>• The belief that having children early is desirable, reinforces marriage soon after adolescence.</li> <li>• Customary unions without formal registration allow early marriages to proceed outside legal safeguards, increasing the risk of early marriage.</li> <li>• The belief that marriage may help secure the girl's economic stability increases the pressure to marry early.</li> <li>• Poor awareness of the existing marriage laws and limited intervention in customary ceremonies reduce barriers to early marriage.</li> </ul>	
<b>Safeguards</b>	<ul style="list-style-type: none"> <li>• School keeps girls engaged and supervised during adolescence, which can expand future education and livelihood opportunities that safeguard girls from early marriage.</li> </ul>	<ul style="list-style-type: none"> <li>• Youth groups organised by DoEYS to raise awareness about early marriage and other youth issues.</li> <li>• MoEYS and GS-NSPC scholarships to help keep girls in school.</li> <li>• The Family Package Social Assistance Programme for low-income families allows girls to stay in school longer.</li> <li>• School-based Sexual and Reproductive Health and Rights (SRHR) and Menstrual Hygiene Management (MHM) education equip girls with knowledge to manage</li> </ul>	N/A - Risks or safeguards for CEFM in Stage 3 not applicable as girls have entered marriage / motherhood



## Key Risks and Safeguards towards CEFM, by Focus Area

Below, we categorise the key risks and safeguards according to the CEFM focus areas that were identified and prioritised in the inception phase.

Domain	Risks	Safeguards
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<p><b>Economic and education</b></p>	<ul style="list-style-type: none"> <li>● Low parental expectations for girls' education attainment, reduce investment in schooling.</li> <li>● Family livelihood pressures push girls to work, reducing time for schooling.</li> <li>● Challenges when going to school (e.g., safety, limited WASH facilities affecting the decision to go to school during the menstrual period, limited money for transportation) discourage school attendance and increase dropout risk.</li> <li>● Negative experiences around going to school (bullying, poor grades) increase the risk of girls dropping out.</li> <li>● Limited access to further educational opportunities in remote areas (e.g., lack of secondary schools) increases the risk of girls not continuing into further education.</li> </ul>	<ul style="list-style-type: none"> <li>● School keeps girls engaged and supervised and improves opportunities for girls in the future.</li> <li>● Vocational training for girls to expand employment opportunities and offer a viable alternative to early marriage.</li> <li>● MoEYS and GS-NSPC scholarships to help keep girls in school.</li> <li>● The Family Package Social Assistance Programme for low-income families.</li> </ul>
<p><b>Cultural beliefs and attitudes about social and gender norms</b></p>	<ul style="list-style-type: none"> <li>● Girls may grow up in households with parents who were married early and thus normalise early marriage.</li> <li>● The belief that girls mature faster (than boys) justifies earlier withdrawal from school and early marriage.</li> <li>● Gender norms that dictate that girls' primary aspirations should centre on domestic life and household roles reinforce early marriage as the expected pathway.</li> <li>● Some families may arrange for marriage from a young age, limiting girls' school participation and accelerating school exit.</li> <li>● Peer pressure around having romantic relationships, shape expectations around relationships, increasing the likelihood of early romantic involvement.</li> <li>● Parents encourage their girl to get married if they have a boyfriend to avoid shame and preserve honour, or to avoid or deal with premarital pregnancy.</li> </ul>	

	<ul style="list-style-type: none"> <li>• Customary unions without formal registration allow early marriages to proceed outside legal safeguards, increasing the risk of early marriage despite the legal restriction.</li> <li>• The belief that marriage may help secure the girl's economic stability increases the pressure to marry early.</li> </ul>	
<b>Knowledge, awareness, and enforcement related to laws, sexual and reproductive health education, and other programmes</b>	<ul style="list-style-type: none"> <li>• Girls have limited accurate SRHR information, increasing the risk of early pregnancy and marriage.</li> <li>• The belief that having children early is desirable reinforces early marriage.</li> <li>• Poor awareness of the existing marriage laws and limited intervention in customary ceremonies reduce barriers to early marriage.</li> </ul>	<ul style="list-style-type: none"> <li>• School-based Sexual and Reproductive Health and Rights (SRHR) and Menstrual Hygiene Management (MHM) education equip girls with knowledge to manage reproductive health risks, reducing vulnerability to early pregnancy and pressure to marry early.</li> </ul>
<b>Digital literacy and exposure</b>	<ul style="list-style-type: none"> <li>• Exposure to digital content around relationships and sex, normalises early relationships and in some cases, marriage as well.</li> </ul>	

## Risk archetypes: What does an at-risk girl look like?

We found that girls' vulnerability to CEFM is produced and intensified over time through a sequence of events and decisions (or vulnerability pathways), reflecting not only their individual choices but also the wider social, economic, and structural contexts that shape them. Based on our findings, we developed four risk archetypes that illustrate common vulnerability pathways experienced by at-risk girls. These archetypes **should not be interpreted as fixed profiles of individuals**; rather, they serve as **illustrative personas** that can be useful in helping CEFM stakeholders and programme designers understand the different risk pathways undertaken and can be used to guide the development of responsive and context-appropriate messages that would be relevant to each of these

archetypes. Importantly, archetypes **should not** be applied to classify individuals, determine service eligibility, or inform clinical judgements.

Aspect	Risk archetype			
	Disrupted Schooling	Pregnancy-triggered	Exposed Early Relationship	Norm-guided
<b>Description</b>	Girls whose schooling becomes difficult, interrupted, or ends prematurely due to a variety of reasons. Marriage emerges as a practical response when education is no longer seen as viable.	Girls who become pregnant, and marriage is initiated to manage shame and gossip.	Girls who form romantic relationships, with some degree of personal choice. Once the relationship becomes known, parents or caregivers initiate conversations on marriage to prevent pregnancy or social risk.	Girls are socialised from an early age to see marriage as the expected transition into adulthood.
<b>Key trigger event</b>	Dropping out or disengaging from school	Pregnancy	Relationship discovery by parents	Reaching a socially acceptable age for marriage
<b>Other risks</b>	Family livelihood pressure, challenges related to attending school, low parental expectations for girls' education attainment, the belief that marriage may help	Limited accurate SRHR information, peer pressure around having romantic relationships.	Limited accurate SRHR information, peer pressure around having romantic relationships.	Family expectation and gender norms that dictate that girls' primary aspirations should centre on domestic life and household roles.  Descriptive social norms

	secure the girl's livelihood.			where girls observe peers getting into early relationships.
<b>What marriage is meant to solve</b>	Economic security, clear "next step" after education	Repair and protection of family reputation	Prevention of pre-marital pregnancy, protection of family reputation	Fulfilment of social and gender expectations, maintenance of social standing

# Implications of Findings

## Key Insights from Baseline Data

### Economic and Education

**Summary of Findings: Most adolescents in our sample currently attend school. On the other hand, girls who dropped out reported that they think of their education as complete. Finally, over half of all adolescents are unaware of support services that could help them stay in school. For those who are aware, schools are the main source of information.**

While the majority of adolescents are currently attending school, 23.3% are not enrolled, including 4.6% who have never attended school. For those who left, dropout typically occurs early at the elementary level (Grades 1-6), with the median dropout point at Grade 4. Self-reported reasons for leaving are distinctively gendered: boys primarily drop out to support their family financially whereas girls most often leave because they perceive their education as “complete” at the grade they stopped. The inability to afford school expenses was a universal barrier, ranking as the second highest personal reason for both sexes.

Furthermore, a critical information gap exists regarding retention support. Over half of all respondents reported being unaware of any services to help students stay in school. This disconnect is particularly severe in Ratanakiri, where only 16.5% of respondents knew of available support, compared to 56.6% in Mondulakiri. Among those who are aware, schools were identified as the primary source of support, with financial aid cited as the main method of assistance.

**Implications: While schools remain a vital and effective entry point for reaching the majority of adolescents, relying on them as the sole dissemination channel risks excluding the most vulnerable population: those who have already dropped out. To bridge this gap, future awareness campaigns need to expand beyond the classroom to engage out-of-school adolescents through community-based and digital channels. Interventions need to be targeted in response to the timing and nature of dropouts.**

The reliance on schools as the primary avenue for information creates a significant coverage gap. Given that schools are the main source for disseminating support services and SRH information, those excluded from the education system remain difficult to reach. Future campaigns should expand dissemination channels beyond schools (e.g., via village networks and NGOs) to engage out-of-school youths. This is particularly critical given the overlap between the drivers for leaving school and

factors that make adolescents vulnerable to early marriage. Out-of-school adolescents face a unique compound vulnerability: the very same economic pressures that forced them to leave school also heightens their risk of entering early marriages.

Furthermore, the timing and nature of dropouts necessitate targeted, holistic interventions. The timing of dropouts implies that interventions must be front-loaded, targeting students before Grade 4 to be effective. In particular, more intensified efforts are needed in Ratanakiri to bridge the massive awareness gap. Moreover, the gendered nature of dropouts suggests that financial aid covering school fees alone is insufficient. Strategies need to go beyond direct educational costs to explore holistic family support that alleviates the immediate economic pressure on boys to work, while also addressing norms that undervalue girls' education.

### Cultural Beliefs and Attitudes towards Social and Gender norms

**Summary of Findings: Ratanakiri seems to have a higher prevalence and community approval of early marriage than Mondulkiri, alongside a lower confidence among girls to refuse it. Notably, adolescents in both provinces report a high level of acceptance for intimate partner violence.**

The two provinces have differing norms and practices regarding early marriage. Compared to Ratanakiri, Mondulkiri is characterised by lower perceived prevalence of early marriage and less community approval of the practice. While parents have the final say on the marriage timing, girls in Mondulkiri report feeling more empowered to refuse early marriage and face less negative consequences for rejecting family-selected partners. However, this agency has limits: the province has a higher stigma around teenage pregnancy compared to Ratanakiri, coupled with a prevailing belief that marriage is the necessary solution to such "shame." Consequently, this stigma acts as a critical pressure point for forced marriage to resolve the social consequences of unwed pregnancy.

In contrast, Ratanakiri shows a higher perceived prevalence of early marriage and an equally higher perceived community approval of the practice. Although the decision-making dynamic regarding timing of marriage appears more collaborative - with only a 5.4% difference between parents and adolescents making the final call - this does not equate to more agency for girls. Girls report lower confidence in their ability to refuse early marriage and face more punitive challenges if they resist family-selected partners.

Despite these regional distinctions, a concerning commonality exists across both provinces: a high level of acceptance among adolescents regarding intimate partner violence (73.7%). This is concerning as it stands in stark contrast to broader national

trends (CDHS 2021-22<sup>15</sup>) where youth (15-19 years old) are increasingly rejecting violence, with 33% of young women and 17% of young men expressing tolerance. A potential reason for this discrepancy could be due to the “rural effect,” where rural populations nationally are statistically more prone to condoning violence<sup>16</sup>. Adolescents in these remote provinces might have been insulated from the progressive norm changes observed elsewhere, therefore retaining higher tolerance for spousal violence.

When examining prevalence, however, the provinces diverge. Mondulhiri recorded the second-highest rate of physical violence by a partner (19%) in the country; here, the high acceptance directly correlates with high victimisation. Conversely, Ratanakiri reports one of the lower prevalence rates (6.6%); this disparity - high acceptance paired with low reported figures - could be a signal of severe underreporting where the violence is viewed as “justified” and thus goes unrecognised as a crime. Furthermore, national data highlights that for girls aged 15-19, violence is almost exclusively tied to their current partner, marking these early relationships as a critical site of immediate vulnerability.

**Implications: Interventions to address cultural norms around early marriage should be province-specific, as we found differences in the preferred locus of decision-making power, levels of confidence in resisting early marriage, and beliefs about pregnancy and CEFM. Across both provinces, more work is needed to reduce the occurrence and acceptance of intimate partner violence.**

These findings establish a critical baseline for tailoring interventions to address early marriage. It is evident that child marriage is more accepted in Ratanakiri, suggesting mindsets and norms around child marriage are more deeply rooted in the Ratanakiri province. Tactically, in Mondulhiri, strategies must engage parents as key gatekeepers, given their dominance over marriage timing decisions. Conversely, in Ratanakiri, efforts must focus on building genuine agency, ensuring that girls are truly empowered during the decision-making process, including saying no to unwanted marriage without fear of retribution.

Across both provinces, further work is needed to reduce the prevalence of child marriage and protect adolescents from punitive consequences of resisting unwanted marriages. The shared acceptance of intimate partner violence in both regions also underscores a universal need for interventions that specifically targets and dismantles norms justifying violence.

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<sup>15</sup> National Institute of Statistics. (2024). *Further Data Analysis Report (Domestic Violence) From the Cambodia Demographic and Health Survey 2021-2022*. Ministry of Planning. [https://nis.gov.kh/nis/CDHS\\_Further\\_Data/CDHS%20Domestic%20Violence%20Report%202024\\_En.pdf](https://nis.gov.kh/nis/CDHS_Further_Data/CDHS%20Domestic%20Violence%20Report%202024_En.pdf)

<sup>16</sup> *ibid.*

Knowledge, Awareness and Enforcement related to Laws, Sexual and Reproductive Health Education, and other Programmes.

**Summary of Findings: One-third of respondents have never heard of sexual and reproductive health (SRH) information and appear to have significant gaps in knowledge about key issues. Three stakeholders were identified as important for SRH-related information and help: Schools as the main source of information; health centres as the most trusted source of information; and local authorities as the most commonly cited avenue for support on child marriage.**

The survey reveals significant gaps in knowledge and access to SRH information. Approximately one-third of respondents have never heard of SRH information; fewer than half of all girls possess knowledge of contraceptive methods. Distinct regional patterns also emerge regarding the nature of this knowledge gap. In Mondulkiri, respondents displayed “confident incorrectness”: across the two questions on SRH information, 26.0% and 54.2% confidently provided the incorrect answer. In contrast, Ratanakiri respondents expressed high uncertainty: for the same questions, 22.1% and 41.2% of respondents indicated they were “not sure.” In terms of source of information, while schools currently serve as the primary channel for dissemination, health centres were rated as the most reliable source. Additionally, regarding help-seeking avenues, over 80% of respondents identified local authorities as their primary point of contact for support.

**Implications: Interventions should prioritise closing knowledge gaps through tailored SRH education while simultaneously diversifying help-seeking avenues. As the current heavy reliance on formal structures may impede adolescents from approaching legal or official figures, it is crucial to establish more accessible, less intimidating channels for both reliable information and support.**

Broadly, across both provinces, a specific lack of knowledge regarding contraceptive methods remains a critical barrier to preventing unwanted early teenage pregnancy, highlighting an urgent area for curriculum reinforcement.

There is also a need to strengthen SRH education across the two provinces, with interventions tailored to the distinct nature of the knowledge gaps in each region. Programs in Mondulkiri need to focus on unlearning and correcting misconceptions, while those in Ratanakiri should prioritise foundational education to address uncertainty. To maximise impact, these efforts should be co-led by schools and health centres, leveraging the high credibility of medical professionals. Furthermore, the high prevalence of “confident incorrectness” in Mondulkiri suggests that the quality of SRH curriculum should also be reviewed to ensure that students are receiving and retaining medically accurate information.

Finally, the heavy reliance on formal structures (i.e. local authorities) for reporting could impede help-seeking: approaching legal or official figures can be daunting for

an adolescent, and the low awareness of “less intimidating” sources like NGOs creates a critical gap in the support network. Therefore, while it is important to engage trusted stakeholders like local authorities, it is also crucial to diversify these avenues to include options that are more easily accessible and approachable for adolescents.

## Digital Literacy and Exposure

**Summary of Findings: Over half of the adolescents owned a mobile phone, and almost all of these were smartphones.**

More than half of adolescents (55.8%) own a mobile phone, and among these owners, 94.4% possess smartphones.

**Implications: Mobile phones and smartphones could present an alternative channel for information dissemination and interventions.**

The prevalence of mobile phones and smartphones offers an untapped channel for intervention, allowing programs to deliver SRH information, reporting mechanisms, and educational content directly to adolescents - potentially reaching those outside the school system. However, the potential of these tools must be weighed against disparities in access. Consequently, digital interventions should serve as a complement to, rather than a replacement for, traditional outreach, ensuring that adolescents without digital access are not bypassed.

## Key Insights from FGDs

We identify drivers influencing girls' pathways to CEFM by categorising them according to Capability, Opportunity, and Motivation factors below.

### Economic and Education

**Opportunity: Girls miss or drop out of school due to family livelihood responsibilities and economic constraints**

Based on the interviews and FGDs we conducted, we found that family livelihood pressure is one of the key factors that influences the extent to which girls miss and/or drop out of school. While girls are often expected to assist on family farms, the presence of commercial plantations nearby adds a distinct layer of complexity. For families facing financial scarcity, these plantations serve as a powerful temptation, offering immediate income that often outweighs the perceived long-term benefits of education. Consequently, adolescents may be influenced to prioritise paid labor, causing work obligations to gradually overtake school priorities. This occurs within a broader cultural context in which children are taught from an early age to obey their parents, and where there are strong norms and expectations that they should contribute to family responsibilities. Additionally, low household income can also impact a family's capacity to afford essential school supplies.



**Resources  
and time**

This is considered an opportunity barrier, specifically, the lack of resources and time, where the external demands of financial pressure physically and socially hinder the girl from attending school.

*“Poor households prioritise work; daughters quit school first.”  
(Community leader, Ratanakiri)*

*“I help my parents on the farm and often miss class.”  
(Girl, Ratanakiri)*

*“Some girls stop studying after primary school because parents can't afford books and uniforms.”  
(Girl, Ratanakiri)*

This suggests that social assistance programs for low-income families (e.g., The Family Package Social Assistance Programme) may have the potential to indirectly prevent school dropouts among girls. In addition, further exploration is recommended to determine the role of plantations and possibly include plantations as a catalyst for change. By engaging plantation owners and local stakeholders, future programs could explore potential solutions - such as conditional employment policies or education-linked incentives - that harness the economic power of plantations to support, rather than hinder, women's agency and school retention.

**Opportunity: Limited access to further educational opportunities (e.g., lack of secondary schools in remote areas)**



**Resources  
and time**

Girls' low attendance is further exacerbated by another opportunity barrier: limited access to post-primary education. Our interviews discovered that many girls discontinue schooling during the transition from Grade 6 to Grade 7 (typically ages 11–13). One of the key factors that drive this is that there are few lower and upper secondary schools, and they are often located far from students' homes.

As a result, attending school is time-consuming and costly as girls need to travel long distances, which not only exposes girls to safety risks, but also increases the financial and logistical burden on households. For many families, these constraints discourage continued enrollment. Consequently, parents may view keeping girls at home - where they can contribute to domestic work - or arranging marriage as more practical alternatives than bearing the ongoing costs of schooling. These decisions are further

reinforced by prevailing gender norms that deprioritise girls' educational attainment, as discussed in the following section.

*"Girls often stop at grade 6–7; parents say they're old enough to help or marry."  
(Teacher, Mondulkiri)*

*"High school is far, across the river, and expensive."  
(Father, Ratanakiri)*

*"When we finish grade 6, there is no school nearby. Some girls stay home, and soon people start talking—then marriage comes."  
(Girl, Mondulkiri)*

## Cultural Beliefs and Attitudes about Social and Gender Norms

### **Opportunity: Prevailing gender norms emphasise domestic life and household roles as girls' primary aspirations**



#### **Social and cultural norms**

Our interviews highlighted deeply embedded gender norms and social expectations as a key contributing factor. In many communities, girls' aspirations are expected to centre on domestic life and household responsibilities, rather than continued education or paid work. From a young age, girls are socialised into these roles, often taking on household tasks and caring for younger siblings as part of their daily routine. This early socialisation reinforces the notion that becoming a 'good woman' is closely tied to domestic duties and marriage.

Early socialisation to domestic responsibilities, combined with limited exposure to other possibilities, ultimately restricts the range of life trajectories that girls can realistically imagine for themselves. In this context, delaying marriage may be perceived as unusual or even socially undesirable.

*"From 14 to 16, girls should learn household skills to be a 'good woman'."  
(Father, Ratanakiri)*

*"My dream is a big house from working rice fields."  
(Girl, Ratanakiri)*

*"If the girl delays marriage, she will be called an old woman."  
(Father, Ratanakiri)*

**Motivation: Parents encourage their girl to get married if they have a boyfriend to avoid shame and preserve honour, or to avoid or deal with premarital pregnancy**



**Beliefs about consequences**

Another key contributing factor relates to beliefs about the social consequences of not marrying off one's daughter, particularly concerns around reputation, shame, and social judgement. In many communities, parents encourage or pressure girls to marry if they are known to be in a romantic or intimate relationship, as a way to prevent premarital pregnancy and safeguard family honour. Marriage is therefore often seen as a protective measure against perceived moral "mistakes" (i.e. premarital pregnancy) and the risk of community judgement.

In some cases, premarital pregnancy itself becomes the immediate trigger for marriage, with parents arranging marriage to preserve social standing and avoid shame.

In addition, negative events within the village are sometimes attributed to non-marital romantic or sexual relationships. For instance, when misfortunes such as the death of livestock occur, premarital relationships (and by extension, the families involved) may be blamed, increasing pressure on families to formalise them through marriage in order to protect the family's reputation. Taken together, these social pressures create strong incentives for parents to arrange marriages early, as a means of safeguarding both family honour and community standing.

*"Parents sometimes force marriage because they fear their children will make mistakes or the community will judge them. They worry about shame, so they push marriage early."  
(CSO Representative, Phnom Penh)*

*"We tell our daughters to marry early before they make mistakes."  
(Mother, Mondulhiri)*

*"If a girl and boy become intimate or she gets pregnant, the parents must make them marry. If not, the village believes bad things will happen, like livestock dying or relatives falling ill."  
(Girl, Ratanakiri)*

*"When a girl becomes pregnant, the family forces her to marry to keep the family's reputation."  
(Government official, Mondulhiri)*

Knowledge, Awareness and Enforcement related to Laws, Sexual and Reproductive Health Education, and other Programmes.

**Capability and Opportunity: Girls have limited accurate SRHR information, increasing**

## the risk of early pregnancy and marriage.



### Knowledge

Gaps in knowledge, particularly regarding sexual and reproductive health and rights (SRHR), represent an important capability barrier contributing to early child marriage.

Many girls lack access to accurate and timely SRHR information, largely because discussions around relationships, sexuality, and reproduction are limited. This reflects an opportunity barrier, driven by prevailing norms that such topics are inappropriate to be discussed openly.



### Social and cultural norms

Restricted opportunities for open discussion limit girls' capability to understand and manage sexual and reproductive health risks. In the absence of reliable information from trusted adults, girls often rely on peers or social media as their primary sources of information, which can be incomplete or misleading.

Whilst some safeguards exist - most notably SRHR education delivered through schools - not all girls remain in school long enough to benefit from these programmes. At the same time, SRHR information that girls receive through other sources outside of school (such as peers and social media) may not be reliable. As a result, gaps in knowledge persist, increasing the risk of unintended pregnancy which can prompt families to pursue early marriage as a practical solution to avoid social judgement.

*"Teen pregnancies declined to about 9–10% with strengthened SRHR education."  
(Health and education official, Ratanakiri)*

*"Teen pregnancies remain high; parents allow marriage to protect the child's future."  
(Health and education official, Ratanakiri)*

*"We are shy to talk about those things. Parents say it is not good for girls,"  
(Girl, Mondulkiri)*

## Opportunity and Motivation: Limited intervention in customary ceremonies



### Opportunities in the environment

Our interviews also indicated that the enforcement of the marriage laws are still limited in preventing child marriage, creating opportunity and motivational enablers for early child marriage. Whilst national law sets the minimum legal age of marriage at 18 years (or 16 with parental consent), marriages involving adolescents below the legal age often proceed informally through customary ceremonies, with official

registration deferred by the couple until they reach the required age.



**Beliefs about consequences**

From the perspectives of adolescents and parents, the law creates the perception that marriage can still legitimately take place despite existing age restrictions. Authorities are typically involved only at the point of marriage certificate registration, rather than at the time of the ceremony itself, limiting their ability to prevent early marriages. This gap between the legal framework and customary practice means that early marriage remains both feasible and socially acceptable under current enforcement arrangements, despite the presence of legal safeguards.

*“Authorities typically do not intervene apart from refusing certificates.”  
(Government official, Ratanakiri)*

*“Some weddings are done quietly in line with traditional practices.”  
(Commune chief, Ratanakiri)*

*“Many marry based on preference at 16–17 despite law.”  
(Community leader, Ratanakiri)*

Digital Literacy and Exposure

**Opportunity: Exposure to digital content around relationships and sex.**



**Opportunities in the environment**

Our interviews also found that increased access to mobile phones and digital content is a key factor that influences adolescents’ attitudes towards relationships and marriage. Greater exposure to online content can shape norms around having a boyfriend, engaging in intimate relationships, and marrying at a young age. In doing so, it can normalise early romantic involvement and, in some cases, portray early marriage as desirable or aspirational.



### Role models

Social media also provides new paths for girls to meet boys, expanding opportunities for relationships beyond their immediate communities. In this context, marriage decisions are increasingly influenced by online trends, contributing to a shift away from arranged marriages towards self-selected partnerships. For some girls, the desire to conform to the online trend can lead to early marriage. These dynamics highlight how digital exposure - particularly in the absence of digital literacy or guidance - can contribute to early child marriage by reshaping social norms and expectations around relationships.

*“Trend has shifted from arranged to self-selected marriages.”  
(Government official, Ratanakiri)*

*“Influence of the digital era, some imitate and marry early.”  
(Government official, Ratanakiri)*

*“Girls marry because they follow their friends or social media.”  
(Girl, Mondulkiri)*

## Key Insights from Key Informant Interviews

Existing efforts in promoting relevant health and education services and programmes, policy setting, and implementation.

**Summary of findings: Existing efforts in promoting relevant health/education services and programmes exist across government and NGO actors. Local coordination and increasing accessibility for difficult-to-reach households is critical for successful service / programme delivery.**

The current landscape of interventions involves a mix of government-led provincial plans, and community-based interventions involving NGO partnerships and school-based youth engagement. At the provincial level, actions are largely coordinated through schools and the Provincial Advisory Committee and the Provincial Women and Children's Consultative Committee (PWCCC), with commune and village chiefs supporting local mobilisation, accessibility, and translation, including targeted door-to-door outreach for vulnerable households. In parallel, NGO partners and the government conduct direct community engagement and awareness campaigns, support peer-to-peer youth advocacy through school clubs and advisory groups and provide financial and educational incentives.

- **Institutional and policy approach:** Most government action is centralised in schools and coordinated through the PWCCC. Commune and village chiefs

are engaged for local mobilisation, coordination, and translation support. Through the PWCCC, the government also conducts door-to-door visits for families with members who have disabilities. Commune chiefs help organise meetings at the local level and ensure accessibility.

- **Direct community engagement:**

- NGO partners organise community meetings (e.g., work with PWCCC to conduct direct community engagement sessions, such as encouraging parents to keep children in school) as well as awareness campaigns with the community on CEFM.
- Since 2017, Ratanakiri has implemented a Provincial Action Plan focusing on raising awareness in communities about the impacts of early marriage. Key strategies include the following, and are conducted annually in nearly all districts across the province:

- **Experience sharing:** Inviting youth who were married early to share their experiences in elementary and high schools, with extended invitations to parents, teachers, community leaders, and local authorities. In some cases, parents or local authorities who have witnessed or experienced early child marriage also share their perspectives.
- **Film screenings:** Organising community screenings of a video on early child marriage produced by SVC, followed by Q&A sessions to engage participants in discussion.

- **Stakeholder engagement:** NGO partners organise training for important actors in the CEFM ecosystem, such as training teachers to equip them with the knowledge to respond to student questions about SRHR.
- **Financial and educational incentives:** Programs include government scholarships (240,000 riel per student per year) to support and encourage students to stay in school, and NGO-led initiatives (e.g., SOS Children's Villages) that provide educational materials and financial support to students under 18, conditional on students remaining unmarried.
- **Peer-to-peer advocacy:** Youth advisory groups, school clubs, and peer-to-peer awareness sessions are utilised to empower students to raise awareness about CEFM amongst their peers and encourage them to stay in school. Organisations such as SVC and Plan International work with these youth groups to organise these activities.
- **Targeted outreach:** Campaigns are often delivered through video screenings and awareness sessions in schools and communities. Additionally, specific efforts are made by the Department of Social Affairs to expand awareness

about CEFM. These initiatives include displaying banners and showing videos from UNICEF that highlight the impacts of child, early, and forced marriage.

Challenges faced in promoting health and education services and programmes, policy setting, and implementation.

**Summary of findings: Key informants highlighted that persistent implementation challenges exist, including weak enforcement of marriage laws, funding and capacity constraints, barriers to reaching mobile and indigenous communities, and gendered perceptions of responsibility.**

Despite existing efforts, several systemic and cultural barriers hinder the effectiveness of CEFM prevention. Efforts to address CEFM are constrained by weak enforcement of marriage laws, limited funding for outreach, and practical barriers to engagement in remote areas. Language barriers, and seasonal mobility across dual residences, hinder consistent communication and participation, while gendered norms limit male involvement, particularly among fathers.

- **Weak legal enforcement:** There is a lack of accountability for marriage laws. Typically, no action is taken when cases of child marriage occur. Local authorities often do not intervene, and sometimes even attend weddings. Other times, weddings are conducted quietly and on a small scale, in line with traditional practices, making them less visible to local authorities.
- **Funding gaps:** A lack of dedicated budget to support transportation costs and refreshments forces officers to personally fund outreach, severely limiting the frequency and reach of activities to ensure that services and programmes reach communities in remote areas.
- **Language barriers:** Effective communication is hindered by language barriers in indigenous communities. To address this, commune or village chiefs support real-time translation during meetings to facilitate understanding and discussion.
- **Dual residence living patterns with seasonal movement:** Reaching rural and indigenous communities is logistically challenging due to remoteness and seasonal mobility, as many families maintain two residences (one in the village and another near farmland), moving between them throughout the year. Community members are also often unavailable for activities because they spend extended periods working on farms.
- **Gendered perceptions of responsibility for CEFM:** Male participation, particularly among fathers, is limited, as awareness-raising activities on the risks of CEFM are often perceived as the responsibility of women or mothers, reducing men's engagement.

Key considerations relating to the support of girls and women.

**Summary of findings: Key informants emphasised the importance of strengthening support for girls and women by broadening stakeholder involvement and integrating age-appropriate CEFM content into school curriculum.**

Future strategies should focus on diversifying stakeholders and integrating CEFM-relevant education into permanent structures.

- **Potential for greater involvement of health and education systems:** Other stakeholders have the potential to play a stronger role in increasing impact.
  - **Medical advocacy:** In particular, key informants believed that health centres can contribute more actively to education and awareness-raising, with health professionals being best placed to explain the health impacts of early marriage on girls.
  - **Curriculum integration:** In addition, integrating age-appropriate content on the risks and consequences of early marriage into the school curriculum would enable trained teachers to provide accurate information and support longer-term future planning among students.

## Recommendations

### Recommendation: Provide greater financial and practical support to girls to encourage school retention and post-school upskilling

**Key Insight:** The findings from our formative research identified family livelihood pressure as a key driver of early marriage. Economic hardship, combined with expectations for girls' labour (girls are often asked to help their parents on farms or plantations) and the high costs of schooling (attending post-primary education is time-consuming and costly due to distance), often disrupts continued education, making early marriage appear a more viable option. Families are often pushed toward alternatives perceived as more economically practical, such as early marriage or girls' contribution to domestic labour.

When immediate costs of schooling outweigh long-term rewards, girls may view early marriage or labour as a more viable path to autonomy and financial stability.

To increase school retention among girls, **greater financial and practical support** should be provided. **Scholarship and transportation support need to be expanded to benefit more at-risk girls in remote communes**, alongside **investments in hygiene facilities and the distribution of feminine hygiene products**. However, support should also go beyond direct educational costs to alleviate family economic pressure on girls to work. Furthermore, financial support would be beneficial for both girls in school and those who have already left, helping them participate in skill-building programs like apprenticeships or Technical, Vocational and Education Training (TVET). Financial support would also alleviate any economic shocks that external economic pressures, such as climate-related disasters might cause (e.g., livestock deaths, droughts, etc.).

The importance of economic interventions is supported by the existing literature. A systematic review of interventions to tackle early marriage in low- and middle-income countries found that **cash transfers and school fee support are effective in improving school attendance and delaying marriage**, by reducing girls' financial reliance on men.<sup>17</sup> However, by themselves, these programs are insufficient to challenge the gender norms that perpetuate CEFM and should be supplemented by other interventions.

Broadly, it would be valuable to continue exploring what concrete opportunities girls can realistically access. Behavioural interventions and communications campaigns

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<sup>17</sup> Yunara, Y., Suraya, A. S., Pratiwindya Sudarsiwi, N., Sa'adah Ayu Lestari, H., Patuh Padaallah, A., Istiana, D., & Rahayu, F. K. (2025). Interventions for early marriage in low-and middle-income nations: a systematic review. *Healthcare in Low Resource Settings*, 13.

are likely to have limited impact if there are no clear and viable alternative pathways beyond the immediate home, village, or plantation context.

## Recommendation: Update sexual education to focus on practical birth control skills and the active rejection of domestic violence

**Key Insight:** A substantial proportion of adolescents (approximately one-third), particularly boys, reported never having received SRH information, and fewer than half of girls were able to name any method to delay or prevent pregnancy. At the same time, acceptance of violence within intimate relationships remains high across both provinces, with many adolescents believing that a husband is justified in hitting his wife under certain circumstances.

The findings from the baseline assessment highlight significant gaps in adolescents' exposure to sexual and reproductive health (SRH) information and endorsement of norms that tolerate intimate partner violence. To address this, sexual education should be strengthened to focus on two priority areas:

- 1) **Equipping adolescents with practical, usable contraceptive skills:** SRH messaging should provide clear, actionable instruction on pregnancy prevention. Given that nearly half of the girls in Ratanakiri and Mondulakiri lack basic awareness on contraceptive skills, campaigns should focus first on building foundational knowledge. In addition, existing research demonstrates that our cognitive bandwidth and decision-making ability decrease when we are poorer.<sup>18</sup> Adolescents with financial stress and competing daily pressures are likely to be cognitively overloaded, which can limit their cognitive bandwidth to absorb and retain complex information. To address both low awareness and limited cognitive capacity, SRH educational campaigns should prioritise “low-barrier” approaches that reduce complexity by **focusing on a single, easy to implement contraceptive method**, rather than presenting multiple options simultaneously. For example, SRH sessions could demonstrate the correct use of condoms (a method known to only 17.7% of respondents who reported awareness of any contraceptive method) through step-by-step explanations, visual aids, or demonstrations, including when and how to use them. This should ideally be complemented by financial or service-based support that ensures condoms are available and affordable. The aim is to make it easier for both adolescent girls and boys to learn, remember and apply. Importantly, both boys and girls should be included in this learning, reinforcing shared responsibility for preventing unwanted pregnancy. In addition, campaign or programme organisers should collaborate with health centres to

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<sup>18</sup> <https://www.bi.team/blogs/poverty-and-decision-making-how-behavioural-science-can-improve-opportunity-in-the-uk/>

deliver SRH information, as health centres are who community members trust most for reliable information on SRH, and would have expertise to curate and deliver accurate information.

- 2) **Educate and challenge norms regarding what constitutes acceptable and unacceptable behaviour within relationships:** In educational content, there should be a clear rejection of all forms of intimate partner violence. Programmes should use concrete scenarios to illustrate common situations, such as making mistakes, jealousy, or refusal of sex, and clearly state that violence is not justified in any circumstance. SRH sessions can also equip adolescents (girls and boys), with non-violent strategies for managing emotions and conflict. Presenting positive role models who demonstrate equitable, non-violent relationships can further reinforce these messages.

## Recommendation: Expand access to school-retention and child-marriage support through youth-centred, non-school information and support channels

**Key Insight:** Awareness of school-retention and child-marriage support services is low. Over half of all respondents (55.9%) reported being unaware of any services to help students stay in school, and reported awareness is particularly low in Ratanakiri (16.5% of respondents know of any available support). Although services do exist, findings suggest that the information is not reaching adolescents, especially boys and those already disengaged from school, as the current information channels are mainly centred around schools. In this context, peer influence becomes especially important: during adolescence, peers are a primary source of information and play a significant role in shaping decisions and behaviours.

The findings point to a gap between where information is currently delivered (schools) and where many adolescents spend their time (i.e., out of school, online). To reach groups of adolescents with limited awareness, it would be essential to deliver **simple, repeated messages about where to seek help** through non-school touchpoints, such as youth groups, community events, health outreach, or village-level activities.

These messages should clearly communicate how to seek help or report concerns, using a step-by-step guidance (e.g., who to contact, where to go, what will happen) to reduce uncertainty about the help-seeking process. In addition, the message should **reassure adolescents about the consequences of seeking help** (e.g., privacy and confidentiality), particularly for adolescents who may fear negative repercussions for seeking help that goes against their family's approval or expectations. Messages are likely to reach adolescents if they are delivered using digital and mobile-friendly, engaging formats, such as short videos, or chat-style stories, which can be shared peer-to-peer via their phones.

**Peer-led advocacy** can also frame help-seeking as normal, supported and peer-endorsed, increasing the salience and persuasiveness of messages to adolescents. Youth-focused activities in the community, such as children's clubs, could empower young people to act as agents for spreading knowledge about help-seeking channels, selecting youth "champions," and providing them with resources they can share with their peer networks. To encourage these youths to advocate and champion help-seeking, **promoting help-seeking can be framed as an act of care for friends or siblings, to tap into social responsibility or collectivity norms.**

**Recommendation:** Tailor engagement strategies to provincial differences in norms and practices related to CEFM

**Key Insight:** The baseline findings highlight significant differences between Mondulkiri and Ratanakiri in how marriage decisions are made and how much agency adolescent girls feel they have in practice. In Mondulkiri, marriage decisions are widely perceived to rest with parents or family members, with most adolescents (62.3%) stating that parents or family should have the final say on a child's marriage. Nonetheless, Mondulkiri girls report high confidence levels in their ability to refuse marriage before they turned 18 years old. In Ratanakiri, views on who should decide on marriage are more mixed: 41.9% of respondents believe the child should decide, while 36.5% believe parents should. Despite more Ratanakiri girls believing that the child should have more agency, girls reported lower confidence in their ability to refuse early marriage, with only around one-third feeling "very confident" in saying no before age 18.

**Mondulkiri:** A majority of adolescents reported that parents or family should have the final say on a child's marriage, indicating that parental authority is both socially accepted and expected. In this context, interventions that focus primarily on empowering adolescents to refuse early marriage are unlikely to be sufficient if parental norms and motivations remain unchanged. **Interventions in Mondulkiri should prioritise engaging parents and caregivers directly** as primary decision-makers. An example of how this could be implemented could be in the form of **parent-focused dialogues integrated into existing parent-facing platforms, such as community meetings, or parent-teacher interactions.** These sessions could focus on the role of parents' responsibility on the wellbeing of their child, delivering messages that emphasise the health, educational and economic benefits of delaying marriage. Having community leaders and facilitators to discuss **practical alternatives to early marriage** so as to address parents' underlying concerns, such as family reputation, safety or financial security, would be important during these sessions to help parents identify alternative solutions and action them.

**Ratanakiri:** Girls in Ratanakiri had higher levels of support for girls' agency, but low levels of confidence to refuse marriage against their own decisions. As such,

**interventions in Ratanakiri should focus on strengthening girls' practical agency, while ensuring they are supported by trusted adults.** Shifting the burden of refusal away from girls alone may increase their confidence, particularly when programmes pair skills-building with strong social support for navigating marriage decisions safely. Examples of elements that campaigns may implement include:

- Providing girls with **concrete refusal and delay strategies**, such as how to ask for more time, and how to involve another adult when marriage is proposed.
- Identify and train **adult allies** (e.g., teachers, community leaders, men) who can support girls and intervene in discussions with parents when necessary. Schools may also consider having designated "child marriage protection officers" (this could be a trusted teacher, counsellor, health worker) that adolescents could turn to for support. Such adults would be more easily accessible to adolescents as schools are the main touchpoint and could also be less intimidating to approach than the local authorities or police (who are currently the main avenue that adolescents in our sample are aware of).
- Use group-based activities and role-play to **practise responding to realistic scenarios** to help girls build confidence and normalise hesitation or refusal.
- Programme framing should emphasise **shared goals** with parents, such as children's wellbeing, safety, and future stability, rather than focus narrowly on rights or resistance, as parents may refuse their child's attendance if they believe the programme promotes values that conflict with tradition or undermine parental authority.

**Recommendation: Feature girls and young women who stayed in school longer or exercised agency in their education, marriage, or career decisions in outreach campaigns, such as in the "Experience Sharing" sessions, to broaden girls' sense of possible life paths**

**Key Insight:** We found out from key informants that existing experience-sharing initiatives in Ratanakiri largely centre on women who experienced early marriage themselves, as well as individuals who have witnessed early marriage sharing their reflections. Additionally, findings from our formative research highlight that girls most often leave because they perceive their education as "complete" at the grade they stopped (31.2% of all girls), suggesting that there is a narrower sense of what educational progression and alternative futures could look like for themselves.

As part of shifting social norms, outreach campaigns such as "experience sharing" sessions should be broadened beyond cautionary tales of early marriage, to include positive role models who have successfully pursued alternative trajectories. While

these narratives may serve as cautionary examples, they primarily highlight adverse outcomes of early marriage experiences, and risk reinforcing early marriage as a descriptive norm that is common or inevitable.

In contrast, exposure to **real-life role models** who stayed in school or exercised agency in education, marriage, or career decisions can **make alternative pathways more salient, credible, and socially acceptable**. Programmes could feature young women who delayed marriage to continue school, pursue vocational training, or enter employment. Role models can also be supported with structured talking points that focus on concrete decision moments (such as negotiating with parents, choosing to stay in school) and how these challenges were navigated. Such sharing will make pathways feel more concrete and attainable, as compared to abstract success stories.

Outreach campaigns held infrequently may have limited reach and impact, as not all adolescents are able to attend consistently, especially those facing competing time demands and livelihood-related responsibilities. For example, the “Experience Sharing” sessions in Ratanakiri are **currently held only once a year**. To reinforce and extend the impact of outreach, programmes could explore **digital delivery channels** that allow role-model narratives to be shared more frequently and reach girls who may not attend in-person sessions. Drawing on evidence from BIT’s prior work, **moderated messaging platforms or chatbots** could be used to deliver role-model stories in short, episodic formats, enabling private and repeated engagement on sensitive topics. For example, BIT’s WhatsApp-based chatbot, ChattyCuz was found to improve gender-equitable attitudes and reduce self-reported exposure to intimate partner violence among young women in South Africa.<sup>19</sup> This evidence suggests that **behaviourally-designed digital tools delivered through widely used platforms can support norm change at scale**, and complement in-person experience-sharing initiatives.

**Recommendation: Use mixed methods, including vignette-based questions, to monitor changing prevalence and social norms**

**Key Insight:** Early marriage is perceived as a common practice in both provinces. Our findings suggest that on average, respondents estimated the prevalence of early marriage to be at 50% (56% of girls in Ratanakiri and 46% of girls in Mondulkiri married by age 18). However, the perceived social acceptability of early marriage differs between the two provinces. In Mondulkiri, early marriage is largely viewed as socially unacceptable. On average, respondents believed that 16.4% of people in

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<sup>19</sup> BIT. (2023, October 18). *Groundbreaking research on WhatsApp chatbot to reduce intimate partner violence published in PLOS*. <https://www.bi.team/press-releases/groundbreaking-research-on-whatsapp-chatbot-to-reduce-intimate-partner-violence-published-in-plos>

their village would find it acceptable. In Ratanakiri, the estimate was 45.8%.

Social norms can help explain why behaviours in society often remain unchanged despite extensive awareness campaigns. **Perceived prevalence tells us what the descriptive norm is and the level it is at and can be triangulated with actual prevalence of early marriage.** Descriptive norms refer to individuals' perceptions of what others in their community are doing,<sup>20</sup> and it can sustain a practice even when actual behaviour is changing, which makes it an important indicator to continue monitoring even as actual prevalence decreases. Even if recorded early marriage rates are low, if people believe it is common, they may adjust their behaviour to marry early to avoid social risk or stigma.

Similarly, **injunctive norms**, which capture what people believe others expect or approve of (perceived acceptability),<sup>21</sup> **can also sustain early marriage practices.** If people believe it to be expected or approved of, higher levels of perceived acceptability can cause people to feel pressure to conform even if early marriage instances are decreasing.

In order to have comprehensive monitoring of CEFM, **a mixed-methods approach (one that combines quantitative and qualitative data sources) should be used.** Bringing together multiple methods allows findings to be triangulated, strengthening confidence in the results while also providing richer context and a more nuanced understanding of both observed trends and the norms that reinforce them. Representative surveys, such as the CDHS, can track actual prevalence rates. It should be complemented by surveys with social norm measurement questions to gauge shifts in social norms. Specifically, **using vignette-based survey questions**, containing hypothetical, locally relevant scenarios, can help to reduce social desirability bias in responding to topics that are more sensitive in nature, such as early marriage, by allowing respondents to distance themselves from the subject in question. Additionally, FGDs and KIs can help shed light on the underlying reasons behind the prevalence and social norm findings, as well as provide important context for developing, implementing, and evaluating interventions.

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<sup>20</sup> UNICEF. (2021). *Defining social norms and related concepts.*

<https://www.unicef.org/media/111061/file/Social-norms-definitions-2021.pdf>

<sup>21</sup> Ibid.

## Additional Insights from GADC

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Findings show that child, early, and forced marriage in Ratanakiri and Mondulakiri is influenced by complex economic, social, and behavioural factors. Increased awareness of marriage law and SRHR has not changed behaviour due to ongoing barriers like poverty, school distance, and few livelihood options.

The COM-B framework highlights how limited capability, restricted opportunity, and strong motivation reinforce early marriage decisions. In remote communes, dropping out of school often leads parents to see marriage as the sole secure option for girls.

Cultural expectations that connect female reputation with family status, along with economic challenges, can result in parents arranging marriages for girls during adolescence or when they begin relationships. This practice is often maintained by community discussions and observation, especially in areas where few girls finish secondary education or have independent income.

Positive changes are emerging. CCWC, DoWA, teachers, and religious leaders are using community dialogues to question traditional beliefs. In Mondulakiri, faith groups and NGOs support continued education, and in Ratanakiri, some officials challenge child marriage norms. Youth groups and scholarships show that delaying marriage benefits girls and their families.

Therefore, CEFM should be seen as a gradual process driven by social and economic pressures, not a single event. Tackling it requires both spreading information and implementing systemic changes that increase girls' choices and shift community attitudes toward education, protection, and empowerment.

### Recommendations

The following recommendations offer actionable, measurable, and scalable strategies derived from research findings, aligned with the COM-B framework and Cambodia's national gender and youth policies.

All numeric targets are proportional or range-based, using baseline coverage estimates from Ratanakiri and Mondulakiri. The targets indicate coverage rates of 15.0%–25.0% for the five-year implementation period and will be adjusted through further planning and monitoring.

## Policy Formulation and Institutional Coordination

- Establish a **national CEFM coordination mechanism** involving MoEYS, MoI, MoSVY, and MoJ.
- Conduct **biannual birth/marriage registration drives** in communes with the lowest registration rates.
- Translate and distribute **SRHR and legal information in indigenous languages** to all lower and upper secondary schools.
- Integrate **CEFM monitoring indicators** into MoWA's National Management Information System (NMIS).
- Strengthen **provincial CEFM coordination platforms** in Ratanakiri and Mondulkiri by conducting quarterly reviews and joint reporting.

## Education and Youth Empowerment

- UNICEF and MoEYS should **extend scholarship and transportation support** to benefit 15.0%–20.0% of at-risk girls in remote communes.
- Implement **Comprehensive Sexuality Education (CSE) at all lower-secondary levels** and ensure that at least 90.0% of teachers receive training.
- Set up **dormitories or boarding facilities** in each province to address dropout rates related to travel distance and safety concerns.
- Launch **TVET and apprenticeship programs** for 15.0% of lower-secondary girls in collaboration with MoLVT and local employers.
- Encourage **peer mentorship and youth-led networks** to facilitate education, leadership, and digital literacy.

## Social and Behaviour Change (SBC) and Community Engagement

- MoWA and UNFPA should **jointly coordinate a national SBC campaign** focused on “Education Before Marriage” utilizing community radio, local drama, and social media.
- Organize **biannual community dialogues** throughout all target communes using COM-B discussion guides.

- Provide **training for approximately 150 local facilitators and 100 male participants** (elders, monks, teachers, youth leaders) focused on gender equality and communication to support behaviour change.
- Identify **“Role-Model Families”** at both the commune and provincial levels to serve as examples.
- Facilitate **cross-provincial learning exchanges** with other CEFM-priority provinces or neighbouring countries.

## Access to Services, Livelihoods, and Monitoring

- UNFPA should support the **setup of youth-friendly health corners** in all health centres in target provinces.
- UNICEF and MoSVY should collaborate to **provide cash-plus support packages**, including education, SRHR counselling, and parenting sessions (approximately 20.0% of vulnerable households with adolescent girls).
- Develop **comprehensive reintegration pathways** enabling young mothers to return to educational or technical and vocational training (TVET) programs.
- Conduct **COM-B-based monitoring** on a biannual basis to systematically assess progress in knowledge, opportunity, and motivation indicators.
- MoWA should develop a **national CEFM case-tracking and referral database**, which will be integrated with CCWC and commune reporting systems.

## Annexes

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### Annex 1. Survey Questionnaire

#### I. Respondent Background and Demographics

X1. [Record the village name]

X2. [Record the commune name]

X3. [Record the district name]

X4. [Record the province name]

Q1. [All respondents] What is your age? ..... (record in month and year)

- (number)
- 99 = Prefer not to answer

**Q2. [All respondents] What is your sex?**

- 1 = Female
- 2 = Male
- 3 = Other (specify: \_\_\_\_\_)
- 99 = Prefer not to answer

**Q3. [All respondents] What is your indigenous group?**

- 1 = Khmer
- 2 = Bunong
- 3 = Kreung
- 4 = Tampoun
- 5 = Jarai
- 6 = Other (specify: \_\_\_\_\_)
- 99 = Prefer not to answer

**Q4. [All respondents] What is your ethnic group?**

- 1= Khmer Islam
- 2= Khmer Vietnamese
- 3= Khmer Chinese
- 4= Khmer Lao
- 5= Other (specify: \_\_\_\_\_)
- 99 = Prefer not to answer

**Q5. [All respondents] Any disability?**

- 1= Yes
- 2= No
- 99 = Prefer not to answer

**Q6. [For all respondents] Do you have any difficulty in doing any of the following activities: seeing, hearing, walking, remembering, or communicating – even if you use glasses, a hearing aid, or other assistive devices?**

- 1 = No difficulty
- 2 = Some difficulty
- 3 = A lot of difficulty
- 4 = Cannot do at all
- 99 = Prefer not to answer

**Q7. [All respondents] What is your current marital status?**

- 1 = Single / never married
- 2 = Married (formal or traditional)
- 3 = Living with a partner
- 4 = Divorced / separated
- 5 = Widowed
- 99 = Prefer not to answer

**Q7a. [If ever married] How old were you when you first got married? (Response recorded in years) .....**

- (number)
- 99 = Prefer not to answer

**Q8. [All respondents] How long have you been living continuously in this village?**

- (number) years
  - For enumerator: If less than one year, record '00' years
- Always
- Visitor

**Q9. [All respondents] In what month and year did you move here?**

- Month:

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(01 = January, 02 = February, 03 = March, and so on; 99 = Don't know month)

- Year:

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(9999 = Don't know year)

## II. Education Access and Barriers

**Q10. [For girls and boys only] Are you currently attending school?**

1 = Yes (currently in school)

2 = No (not in school)

99 = Prefer not to answer

- If Yes: **Q10a. What grade are you in currently?** \_\_\_\_ (record current grade level)
- If No: **Q10b. What is the highest grade you completed in school?** \_\_\_\_ (record grade level or "0" if no formal schooling) and continue to Q8c.

**Q10c. What was the main reason you left or stopped attending school? (select one)**

*For enumerator: Do not read the list outright. Allow the respondent to answer in their own words, then mark the corresponding category. If "Other," write down the response.*

- Completed desired schooling
- Needed to work or help support family
- Married or became pregnant
- School was too far / not accessible
- Could not afford school (fees, uniforms, etc.)
- Did not feel safe at school / on the way to school
- Did not do well in school.

- Lost interest in attending school.
- Parents/guardians did not allow further schooling.
- Other (specify: \_\_\_\_\_)

**Q10d. [For girls only] (If Q8c selected "Married or became pregnant" or "Needed to work or help support family") Did your marriage or pregnancy contribute to you stopping or leaving school?**

- 1 = Yes
- 2 = No
- 99 = Prefer not to answer

**Q10e. [For boys only] (If Q8c selected "Needed to work or help support family") Did your marriage contribute to you stopping or leaving school?**

- 1 = Yes
- 2 = No
- 99 = Prefer not to answer

**Q11. [All respondents]: What do you think are the main reasons girls in your community stop attending school? (Select all that apply)**

- Lack of financial resources/fees
- Family responsibilities/chores
- Early marriage
- Early pregnancy
- Safety concerns (at school or on the way)
- Lack of interest in school
- Poor academic performance
- Lack of parental support/value for girl's education
- Lack of separate sanitation facilities (toilets) for girls at school
- Distance to school
- Peer pressure
- Other (specify: \_\_\_\_\_)
- 99 = Prefer not to answer

**Q12. [All respondents] Are you aware of any support services or programmes in your school or community that help students, especially girls, stay in school?**

- 1 = Yes
- 2 = No
- 99 = Prefer not to answer
- If Yes: **Q12f-i. What kind of support services or programmes have you heard of? (Open-ended, then categorise during analysis if possible \_\_\_\_\_)**

**Q13. [For girls and boys only]** Are you currently doing any work to earn money (aside from your own housework or schooling)?

1 = Yes

2 = No

99 = Prefer not to answer

**Q14. [For girls and boys only]** Do you personally own a mobile phone?

1 = Yes

2 = No

99 = Prefer not to answer

**Q15. [For girls and boys only, if they own a phone]** Is your phone a smartphone (i.e. a phone that can connect to the internet)?

1 = Yes

2 = No

99 = Prefer not to answer

### III. Core Survey Questions

**Q16. [For girls only]** Do you feel comfortable speaking up and expressing your opinions or wishes in front of others, for example, with your family or in your community without fear?

1 = Very comfortable

2 = Somewhat comfortable

3 = Not sure

4 = Not very comfortable

5 = Not at all comfortable

99 = Prefer not to answer

**Q17. [For girls and boys only]** Have you ever received any information or education about sexual and reproductive health (e.g., puberty, menstruation, contraception, healthy relationships) from school, health workers, parents, or community programs?

1 = Yes

2 = No

99 = Prefer not to answer

If Yes: **Q15a. Where did you receive this information? (Select all that apply)**

- School (e.g., teacher, peer educator)
- Health centre /clinic (e.g., doctor, nurse)
- Parents/Guardians
- Community leaders/programmes
- Friends/Peers
- Media (e.g., TV, radio, internet)
- Other (specify: \_\_\_\_\_)
- 99 = Prefer not to answer

**Q18. [For girls and boys] If a young person needed information about sexual and reproductive health or services (like contraception, family planning), where would they go to get reliable information or help? (Select all that apply)**

- Health centre /clinic
- School (e.g., teacher, school counsellor)
- Parents/Guardians
- Community leaders
- Friends/Peers
- Online resources/websites
- No idea
- Other (specify: \_\_\_\_\_)
- 99 = Prefer not to answer

**Q19. [For girls only] Have you heard of any ways in which men and women can prevent or delay a pregnancy until they are ready to have a child?**

1 = Yes

2 = No

99 = Prefer not to answer

**Q19a. If Yes: Which methods have you heard of?**

*For enumerator: Do not read aloud the prepared list but check off all methods the girl mentions from the list.*

1= birth control pills

2= condoms

3= injectable contraceptives

4= IUD/implant

5= emergency contraception

6= abstinence

7= Other (specify: \_\_\_\_\_)

99 = Prefer not to answer

**Q20. [For girls only] Can using a condom during sexual intercourse help protect against HIV/AIDS and other sexually transmitted infections (STIs)?**

1 = Yes

2 = No

3 = Not sure

99 = Prefer not to answer

**Q21. [For girls only] Do you think a healthy-looking person can be infected with HIV?**

1 = Yes

2 = No

3 = Not sure

99 = Prefer not to answer

**Q22. [All respondents] In your opinion, what are the main consequences for a teenage girl who becomes pregnant in this community? (Select all that apply)**

- Drops out of school.
- Faces social stigma/shame.
- Has limited future opportunities (education, work)
- Experiences health risks for herself and the baby
- Is pressured to marry.
- Has difficulty finding employment?
- No significant consequences
- Other (specify: \_\_\_\_\_)
- 99 = Prefer not to answer

**Q23. [All respondents] Imagine a village like yours. If there were 10 girls who are 18 years old, how many of them do you think have already been married?**

- (number)
- 99 = Prefer not to answer

**Q24. [All respondents] Imagine that there's a girl called Chan in the village. She is 15 years old. Out of 100 people in the village, how many do you think would find it acceptable for Chan to get married before 18 years old?**

- (number)
- 99 = Prefer not to answer

**Q25. [All respondents] In your opinion, who should have the final say on when a girl/boy gets married?**

1 = The girl (or boy) themselves

2 = Their parents or family

3 = Both the young person and their parents together

4 = Someone else (ex: community elders)

99 = Prefer not to answer

**Q26. [All respondents] On a scale of 1 to 4, 1 being not at all common and 4 being very common, how common is it for girls or women in your community to face challenges when they choose not to marry someone selected by their family?**

1 = Not at all common

2 = Not very common

3 = Somewhat common

4 = Very common

99 = Don't know / Prefer not to answer

If answered "3" or "4": **Q26a. What kind of challenges or difficulties do you think they face?**

*For enumerator: Do not read aloud the prepared list but categorise and check off all answers the girl mentions from the list.*

- Pressure/coercion from family.

- o Social isolation/shame
- o Physical violence
- o Emotional/psychological abuse
- o Financial withdrawal of support
- o Threats
- o Other (specify: \_\_\_\_\_)

**Q27. [For girls only] If someone wanted you to get married before you turned 18 years old, but you did not want to, how confident would you feel in resisting or saying no to that marriage?**

- 1 = Very confident
- 2 = Somewhat confident
- 3 = Not sure
- 4 = Not very confident
- 5 = Not at all confident
- 99 = Prefer not to answer

**Q28. [For girls and boys only] In your opinion, is a husband justified in hitting or beating his wife in the following situations?**

*For enumerator: Read each scenario and record the response as Yes or No for each.*

Question	Response		
	Yes	No	Prefer not to answer
<b>Q28a.</b> If she goes out without telling him?			
<b>Q28b.</b> If she neglects the children?			
<b>Q28c.</b> If she refuses to have sex with him?			
<b>Q28d.</b> If she burns the food?			
<b>Q28e.</b> Other			

**Q29. [All respondents] If you found out that someone under 18 in your community was going to be married, would you know how to report it or seek help to prevent it?**

- 1 = Yes
- 2 = No
- 3 = Not sure
- 99 = Prefer not to answer

*If Yes: Q29a. Where would you go or who would you contact?*

*For enumerator: Do not read the list outright. Allow the respondent to answer in their own words, then mark the corresponding category. If “Other,” write down the response.*

- Local authorities (e.g., village chief, police)
- Social welfare services
- NGOs/Community organizations
- Religious leaders
- School
- Parents/Guardians of the child
- Other (specify: \_\_\_\_\_)

## **Annex 2. Focus Group Discussion (FGD) Guides**

### **Focus Group Discussion (FGD) Guides**

All FGDs are conducted as semi-structured discussions (about 90 minutes) with 6–8 participants, led by trained facilitators (with an indigenous-language interpreter if needed) and a note-taker. Guides are semi-structured providing key topics and questions but allowing flexibility for participants' narratives. In line with UNICEF's participatory methods, FGDs use local storytelling prompts and vignettes to explore sensitive social norms. Ground rules (confidentiality, respectful listening, voluntary participation) are established at the start. The facilitators employ a gender-sensitive and intersectional approach, acknowledging differences in experiences by age, marital status, and ethnicity. Each guide's questions are open-ended and non-judgmental to ensure participants feel safe sharing their views (following the “do no harm” principle of avoiding any judgmental or culturally insensitive phrasing). The guides aim to illuminate community norms, attitudes, and lived experiences related to CEFM, while also identifying resources and solutions.

#### **I. FGD Guide: Adolescent Girls (At-Risk and Married)**

**Objectives:** To understand girls' firsthand perspectives on the drivers of early marriage, their lived experiences (both those who are married and those at risk), and the factors that protect girls or put them on a path toward CEFM.

#### **Introduction:**

- *The facilitators should introduce themselves, the purpose of the FGD, explain the ground rules around privacy and confidentiality, and obtain written or verbal informed consent from participants.*

- The facilitators should invite participants to introduce each other and remind them to keep what is being shared in this discussion confidential.

#### **Guidance for Lifeline Activity and Key Discussion Topics & Questions:**

- The Lifeline activity aims to set the stage for participants to reflect on their experiences and observations of other people's experiences.
- After the Lifeline timeline has been completed, the facilitator can use the Key Discussion Topics and Questions as a follow-up guide to explore and probe particular areas.
- The questions written in **bold** should be prioritised. If there is not enough time, the facilitator may choose to skip the questions that are not in bold.

#### **Lifeline Activity<sup>22</sup>**

- **“We would like to start by doing a group activity. In this activity, we will together imagine the life of a ‘typical’ girl or woman in this village from birth until they are an adult.”**
- **Show the printed/drawn visual of a lifeline, which is a line with different ages from 0 until 49 years old. Predetermined ages on the lifeline should include ages that are typically associated with the start and end of schooling, as well as ages 16 and 18 should be included.**
- **Divide the group into smaller groups of 2-4 people, if necessary.**
- **“Your task is to think about the life events of a ‘typical’ girl or woman in this village. A ‘typical’ girl or woman is someone whom most girls or women in this village resemble – the most normal or average girl/woman.”**
- **Instruct participants to write down key events in temporal order. Alternatively, the facilitator can ask participants to name key life events and when they occur and help participants to write them down on the lifeline.**
- **Other ages apart from the predetermined ages can be added if they are mentioned by participants.**
- **If getting married is not included in the timeline, explicitly ask participants on when families usually start having a conversation about marriage, when it gets negotiated/discussed and decided, and the girl/woman gets married.**

#### **Key Discussion Topics and Questions:**

1. **Social Norms, Cultural Norms and Expectations (20 minutes):**
  - **“What are girls and boys expected to do (their roles and responsibilities) in your family and community?”**
  - *Probe:*

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<sup>22</sup> The Lifeline is a participatory research method that can be used to explore important events that occur over time to measure social norms, attitudes, and behaviours. Participants are asked to fill out timelines with important events/experiences, listed in temporal order. Further information can be found at <https://www.unicef.org/documents/participatory-research-toolkit-social-norms-measurement>

- “When it comes to schooling, relationships, and marriage, what do people in your community expect from girls your age?”
- **“What are girls expected to do when they grow up?”**
  - “What about boys?”
  - “At what age do most girls in your community get married?”
- *If needed:* Ask about any traditional customs or sayings regarding when a girl is considered ready for marriage. For example, “Are there any local sayings in your community about when a girl is considered ready for marriage?”
  - *If the participants struggle to answer, the facilitator may prompt possible answers: this could be puberty or ideas about preventing shame/pregnancy.*
- Introduce a scenario: **“Imagine there’s a girl called Bopha, 13 years old, in your village. One day her parents say that they want her to get married to the son of one of their neighbours soon.”**
  - **“What would most girls in Bopha’s position do in this situation?”**
  - **“What would most people in the village expect Bopha to do in this situation?”**
  - **“Do you think Bopha thinks anything good might happen if she gets married now?”**
    - **“If yes, what good things do you think she might hope for?”**
- **“But Bopha does not want to marry young. She announces that she does not want to marry at this age.”**
- **“What would her family say about her decision?”**
- **“What would other people in the village say about her decision?”**
- “What if it was a boy in Bopha’s position who refuses to get married - what would his family or people in the village say?”
- Introduce a scenario for discussion: **“Now suppose a 14-year-old girl called Dara is in a relationship with a boy of the same age and wants to get married. What would her family and most people in the community say or do to her? (the facilitator can use a common local name for the scenario)**
  - **“Now suppose a 14-year-old girl called Rith becomes pregnant and wants to marry a boy. What would her family and most people in the community say or do to her? (the facilitator can use a common local name for the scenario)**
- **“Suppose there’s a 14-year-old boy called Arun in your community who wants to marry his girlfriend. What would his family and most people in the community say or do to him?” (the facilitator can use a common local name for the scenario)**
- *For the facilitator’s reference: Use these scenarios to get boys talking about differences in people’s expectations or treatment between boys and girls. Often communities worry more about girls’ honour and might push marriage for a pregnant girl, whereas a boy might not be expected to marry so young.*

## 2. Drivers of Early Marriage (20 minutes):

- **“What are your dreams for your future?”**
  - *The facilitator can ask this question if the icebreaker on dreams for the future was not done.*
  - *The aim for this question is to understand the girls' future aspirations, and whether getting married might be one of them.*
  - *If some mention getting married: ask “When would you like to get married?”*
    - Probe: “Why?”
- **“Why do you think some girls in your village get married before the age of 18 years old?”**
  - Encourage participants to share any stories or examples (without naming names) of why certain girls ended up marrying before turning 18 years old.
    - For example, “Sometimes an example can help us understand things better. Without naming names, could you share an example of a girl in your community and what led to her getting married before 18 years old?”
  - *Follow-up probes (do **not** read out first, only mention if girls struggle to answer):*  
Possible reasons might include:
    - Economic: family's economic difficulties, wanting to secure a girl's future
    - Cultural beliefs, social norms; beliefs and attitudes around gender and gender; norms: concerns about a girl's reputation or premarital relationships, “friends are doing so.”
    - Education: lack of opportunity to continue school, girls not expected to attain a certain level of education
    - Digital literacy and access: online information or interaction encouraging/discouraging people to get married.
  - For unmarried participants: **“Can you share how a girl's life may change after she gets married as a teenager?”**
    - For married participants, the facilitator may ask them to share their thoughts as well.
    - *If participants struggle to answer, the facilitator may prompt possible answers: Does she continue her schooling? How does her health or daily life change? Does she have a baby soon?*
  - Understanding how disability may or may not play a role: **“Do you know any girls with a disability in your community?”**
    - *When talking about disabilities, most people may also think of physical disabilities, even though disabilities also include physical, visual, hearing, intellectual, and mental impairments. Briefly explain the different types of disabilities to participants. This can be done by showing them pictures.*
    - If yes:
      - **“What do girls with disabilities usually experience when it comes to getting married or not getting married?”**

- **“When it comes to schooling, relationships, and marriage, are there any differences in what people expect from girls with disabilities compared to those without disabilities?”**
- “When it comes to schooling, what do people expect from girls with disabilities?”
- “When it comes to relationships, what do people expect from girls with disabilities?”
- “When it comes to marriage, what do people expect from girls with disabilities?”
- If no:
  - “What do most people in your community think about girls with disabilities?”

### 3. Knowledge of Rights, SRH, and services (15 minutes):

- **“Have you heard of any laws about how old you must be to marry?”**
  - See what girls know about the legal minimum age for marriage (which is 18 years old according to the law, and whether they know some exceptions exist or not).
- *Probe:*
  - “Are there some girls in your community who get married before 16 years old?”
  - “Could you share how they got married before they were 16?”
- SRH: **“Can getting married before 18 affect a girl’s health?”**
  - **“What health issues can a girl who gets married before 18 experiences?”**
- Ask if they know of places or people who help girls: **“If any girls need advice or help to stay in school or avoid early pregnancy or marriage, are there people or services that can help?”**
  - *Probe: “Could you share some examples?”*
  - *If the participants struggle to answer, the facilitator may prompt possible answers: NGOs, scholarship programs, youth clubs, health clinics providing counselling, etc.*
- **“If you need advice or help regarding relationships or avoiding marriage, is there someplace or someone you can go to or to talk to?”** (This aimed to understand their awareness of support systems, like a trusted teacher, an NGO hotline, etc.)

### 4. Support Systems and Influencers (10 minutes):

- **“Who do you usually turn to for advice about things like marriage, relationships, or any problems you face?”**
- Common answers might be mother, father, an older sibling, a friend, or perhaps a teacher or community elder. Discuss these: are they helpful?
- Ask: **“Who has the final say in deciding when and who a girl gets married to?”** (example: parents, grandparents, the girl herself, etc.) and **“Do girls get to express what they want?”**

- Also, find out if the girls know of any peer support: “Do girls your age talk to each other about wanting or not wanting to marry early?”
  - “Do you and your friends ever discuss how to handle family pressure or how to stay in school?”
  - **“If a 15-year-old girl is being asked to get married, but she doesn't want to, are there any people/places she can turn to for help?”**
    - *If yes:* “Could you name the people/places?”
5. **Protective Factors and Possible Solutions (10 minutes):**
- **“What do you think would help girls in your community avoid having to marry before they are ready?”**
  - *For the facilitator's reference:* Let the girls brainstorm freely. They might suggest things like having scholarships or financial support to continue school, job opportunities, community education so parents understand the harms, stricter enforcement of the law, having someone to talk to or mediate with parents, etc. *If the participants struggle to answer, the facilitator may prompt these possible answers.*
  - Ask follow-ups: “Who or what has helped some girls you know to delay marriage or say no?” (For example, maybe a supportive parent or a teacher intervened, or a girl who could earn money and support herself.)
  - Encourage creative ideas, this not only informs the project design but also empowers girls by validating their voices.

#### **Facilitation notes:**

Ensure a female facilitator leads this FGD in a private, safe setting. Begin with an introduction or a trust-building exercise (example: an icebreaker about dreams for the future). For married girls, be sensitive to potential trauma or regret, and emphasise that they may share only what they are comfortable with. Use third-person scenarios to discuss sensitive topics indirectly, helping participants speak freely without personal disclosure if they prefer. Throughout, the facilitator should be attentive to signs of distress and ready to provide support or take a break as needed (per ethical protocol).

End the discussion on a positive and empowering note. For example, ask each girl to share one hope she has for herself or for girls in her community. Thank them sincerely for sharing their thoughts and reassure them that their voices are important for guiding solutions.

## **II. FGD Guide: Adolescent Boys**

**Objectives:** To capture boys' views on gender roles, marriage, and how these shape CEFM dynamics. This guide examines how adolescent boys perceive the practice of early marriage, their expected roles (as future husbands or community members), and

their knowledge of relevant norms and SRHR issues. Engaging boys is crucial for an intersectional gender approach, recognizing boys as allies or gatekeepers in ending CEFM.

### Guidance for Key Discussion Topics and Questions:

- The questions written in **bold** should be prioritised. If there is not enough time, the facilitator may choose to skip the questions that are not in bold.

### Key Discussion Topics and Questions:

1. **Perceptions of Early Marriage (15 minutes):**
  - **“Is it common for boys your age to get married?”**
  - **“What about girls your age?”**
  - “Have you seen or heard of it happening here?”
  - *Follow up: “**What do you think about someone your age getting married?**”*
  - *If a boy in the group is already married (uncommon but possible), allow sharing if he is comfortable. Otherwise, keep it general: Are teen marriages happening, and how do peers react to them?*
2. **Gender Norms & Expectations (15 minutes):**
  - **“What are boys expected to achieve or do by the time they are 18 in your community?”**
  - **“What about girls?” (“What are girls expected to achieve or do by the time they are 18 in your community?”)**
  - You can summarise the differences between boys and girls that were mentioned back to the participants, asking them to confirm your understanding.
    - *If the participants struggle to answer, the facilitator may prompt possible answers: Differences could be boys being expected to finish school or start earning money, girls being expected to be married or helping at home by that age.*
  - **“What are most boys your age in your community like when it comes to school, relationships, and marriage?”**
  - “At what age do most girls in your community get married?”
    - “How about boys?”
  - Introduce a scenario for discussion: **“Suppose there is a 14-year-old boy called Pros in your community who wants to marry his girlfriend. How would his family and community react?”** (*the facilitator can use a common local name for the scenario*)
  - **“Suppose a 14-year-old girl called Dara is in a relationship with a boy of the same age and wants to get married. What would her family and most people in the community say or do to her?”** (*the facilitator can use a common local name for the scenario*)

- **“Now suppose a 14-year-old girl called Rith becomes pregnant and wants to marry a boy. What would her family and most people in the community say or do to her?”** (the facilitator can use a common local name for the scenario)
- *For the facilitator's reference: Use these scenarios to get boys talking about differences in people's expectations or treatment between boys and girls. Often communities worry more about girls' honour and might push marriage for a pregnant girl, whereas a boy might not be expected to marry so young.*

### 3. Drivers of Early Marriage (10 minute)

- **“Why do you think some girls and boys in your village get married before the age of 18 years old?”**
- Understanding how disability may or may not play a role: **“Do you know any girls or boys with a disability in your community?”**
  - *When talking about disabilities, most people may also think of physical disabilities, even though disabilities also include physical, visual, hearing, intellectual, and mental impairments. Briefly explain the different types of disabilities to participants. This can be done by showing them pictures.*
  - If yes:
    - **“What do girls and boys with disabilities usually experience when it comes to schooling, relationships, and getting married?”**
    - **“Are there any differences in what people expect from girls and boys with disabilities compared to those without disabilities?”**
  - If no:
    - **“What do most people in your community think about girls and boys with disabilities?”**

### 4. Influences on Boys' Attitudes (15 minutes):

- **“Let us imagine there is a 14-year-old boy called Vaha that lives in your community. He has been thinking about whether and when to get married. He hears different things from different sources. What kinds of things do you think Vaha might be hearing?”**
- *Probe: “Where do you think he has heard this from?”*
- *For the facilitator's reference: Possible influences include parents and family expectations, things they learn in school, the examples of elder siblings or friends, religious or cultural teachings, and media (Facebook, YouTube, TV drama, etc.).*
- Ask: **“Do you and your friends ever talk about these things like when to get married or what you want for the future?”**
  - If yes: **“What do those conversations sound like?”**
- *If not mentioned, prompt: “Have you ever seen messages on TV, radio, or social media about getting married?”*
  - **“Did those have any impact on them?”**

### 5. SRH Knowledge and Attitudes (Boys) (15 minutes):

- **“How do boys learn about topics like puberty, sex, or preventing pregnancy?”**
  - *Discuss whether they have formal education (in school, any class on these topics?) or if they mainly hear from friends/internet/other sources.*
  - **“Do you feel you have enough information on how to avoid getting a girl pregnant or staying safe?”** gauge their confidence or gaps.
  - *Ask if they know about ways to prevent pregnancy (e.g., condoms, contraception) – not as a quiz, but: “How can a boy or girl prevent pregnancy?”*
    - *“Would you feel comfortable getting a condom or going to a clinic for advice.”*
    - *“Why or why not?”*
  - *Attitudes about consent can be touched on: “What do you think about the idea that in a relationship or marriage, a woman can say no to sex?” see if they respect that concept. (This ties in with gender norms around power in sexual relations.)*
  - *Ensure this stays a discussion, not a lecture; correct serious misinformation gently if it comes up (for example, if someone says a myth like “you can't get pregnant first time,” the facilitator can pose it as a question to the group to see if others disagree, then clarify the fact).*
6. **Knowledge of Consequences (5 minutes):**
- **“In your opinion, what challenges or problems may happen when girls or boys marry as teenagers?”**
  - *Encourage boys to articulate consequences for girls. For the facilitator's reference: this may include health risks (do they know childbirth is riskier for young girls?), dropping out of school, loss of adolescence, etc.*
  - *Then ask about consequences for boys: “Would a boy who gets married before the age of 18 face any challenges?” “What challenges would they face?”*
    - *For the facilitator's reference: Examples may include needing to provide financially, cutting short his education or youth.*
  - *This is to assess boys' awareness. Some may not have thought about it beyond “girls get pregnant so they marry.” The facilitator can gently fill knowledge gaps if myths arise (example: if a boy says, “nothing bad happens, it's normal,” the facilitator can later in the discussion mention real risks or data in a non-lecturing way).*
7. **Boys' Role in Solutions (5 minutes):**
- **“What role do you think boys and men can play in reducing or ending early marriage in your community?”**
  - *Initially, some boys might say “It's not our decision, it's the parents' or girls' issue.” Encourage them to think beyond that.*
  - *Prompt ideas:*
    - *“Could boys do anything if their friend is involved in an early marriage?”*

- “How can boys support girls to stay in school or say no if they’re not ready for marriage?”
- *They might mention standing by their girlfriend to delay marriage, or respecting that a girl wants to wait, or speaking up in peer groups that marrying so young is not good.*
- *If they struggle, flip perspective: “If you have a younger sister or cousin, would you want her to marry early? If not, what could you as a brother or relative do to help her avoid that?”*
  - *If the participants struggle to answer, the facilitator may prompt possible answers: help by sharing household work so sisters have time to study, or by advocating with parents about the benefits of girls’ education, or simply not pressuring girls into relationships.*
- Gather their suggestions on community changes:
  - *For the facilitator’s reference: maybe they will mention awareness campaigns, stricter laws, more education/employment for youth, etc. Write these down.*

**Facilitation notes:** A male facilitator (or co-facilitator) may lead to ensure boys speak openly, while maintaining a respectful tone regarding girls. Start with open-ended questions. If they are resistant to answer the first time, you can rephrase the question and give them some time to answer. Only use specific prompts as the last resort. Be mindful of macho or sexist remarks; gently challenge misconceptions with facts or follow-up questions rather than judgment, fostering a reflective environment. Ensure any deeply personal issues (e.g., discussions of sexual experiences or pressures) are handled carefully and kept confidential within the group.

End by asking the boys one positive question: “What is one thing you would like to see change in your community regarding girls and boys and marriage?” or “What advice would you give your younger brother or sister about marriage?” This leaves them thinking as they conclude. At the end, thank them for their honest input and time.

### III. FGD Guide: Mothers of Adolescents

**Objectives:** To explore the beliefs, knowledge, and practices of mothers (and female caregivers) regarding child marriage and adolescent girls’ wellbeing. Mothers often make or influence decisions about daughters’ marriages, so understanding their perspectives is key. The guide investigates norms passed through generations, mothers’ aspirations for their children, and the support or constraints they experience.

#### **Introduction:**

- *The facilitators should introduce themselves, the purpose of the FGD, explain the ground rules around privacy and confidentiality, and obtain written or verbal informed consent from participants.*

- *The facilitators should invite participants to introduce each other and remind them to keep what is being shared in this discussion confidential*

#### **Guidance for Lifeline Activity and Key Discussion Topics & Questions:**

- The Lifeline activity aims to set the stage for participants to reflect on their experiences and observations of other people's experiences.
- After the Lifeline timeline has been completed, the facilitator can use the Key Discussion Topics and Questions as a follow-up guide to explore and probe particular areas.
- The questions written in **bold** should be prioritised. If there is not enough time, the facilitator may choose to skip the questions that are not in bold.

#### **Lifeline Activity<sup>23</sup>**

- **“We would like to start by doing a group activity. In this activity, we will together imagine the life of a ‘typical’ girl or woman in this village from birth until they are an adult.”**
  - **Show the printed/drawn visual of a lifeline, which is a line with different ages from 0 until 49 years old. Predetermined ages on the lifeline should include ages that are typically associated with the start and end of schooling, as well as ages 16 and 18 should be included.**
  - **Divide the group into smaller groups of 2-4 people, if necessary.**
  - **“Your task is to think about the life events of a ‘typical’ girl or woman in this village. A ‘typical’ girl or woman is someone whom most girls or women in this village resemble – the most normal or average girl/woman.”**
  - **Instruct participants to write down key events in temporal order. Alternatively, the facilitator can ask participants to name key life events and when they occur and help participants to write them down on the lifeline.**
  - **Other ages apart from the predetermined ages can be added if they are mentioned by participants.**
  - **If getting married is not included in the timeline, explicitly ask participants on when families usually start having a conversation about marriage, when it gets negotiated/discussed and decided, and the girl/woman gets married.**
1. **Cultural Norms and Marriage Practices (15 minutes):**
    - **“In your community, what is considered the ‘right’ or acceptable age for a girl to marry?”**
    - *After discussing girls, ask: “What about for a boy to marry?”*
    - **“Why do you think people believe those are the right ages?”**

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<sup>23</sup> The Lifeline is a participatory research method that can be used to explore important events that occur over time to measure social norms, attitudes, and behaviours. Participants are asked to fill out timelines with important events/experiences, listed in temporal order. Further information can be found at <https://www.unicef.org/documents/participatory-research-toolkit-social-norms-measurement>

- **“Could you share any local sayings related to the age a girl or boy should get married?”**
  - *Discuss any traditional beliefs or sayings that influence this (for example: wanting to avoid premarital pregnancy to protect family honour, or customary practices like arranged engagements at a certain age).*
- *Ask if these expectations have changed over time: “Are things different now for this generation of girls compared to when you were young?”*
  - *For the facilitator’s reference: It’s possible that girls now marry later or earlier than in the past.*
- 2. **Mothers’ Personal Experiences (10 minutes):**
  - **“Thinking back to when you were a teenager, what was the common age for marriage in your community at that time?”**
  - *Probe:*
    - *“At what age did you get married?”*
    - *“During your teenage years, did you feel any external pressure regarding the subject of marriage?”*
  - *If they are comfortable, mothers can share their own stories (example: “I married at 15 because...”) or stories of sisters/friends.*
  - *This sharing helps illustrate how ingrained early marriage practices might be and also how mothers who married early feel about it now.*
  - *Facilitators note: Make it clear sharing is voluntary. They can use third person (“I knew a girl who...”) if they prefer not to personalise.*
- 3. **Perceived Drivers for Early Marriage (15 minutes):**
  - **“From your perspective as a mother, what reasons do some families here have for marrying their daughter off early?”**
  - *For the facilitator’s reference: Let them list reasons freely. Common ones might include: economic hardships (one less mouth to feed, or expecting bride price/dowry), fear of daughters engaging in premarital relationships or becoming pregnant out of wedlock, maintaining family honour or community reputation, lack of secondary school nearby (so nothing else for the girl to do after primary), wanting to secure a good match while one is available, or influence of elders.*
  - *Also explore: “Is there ever pressure from family members or the community about when your daughter should marry?”*
    - *Probe: “Could you describe what that pressure looks like, if it exists?”*
  - **Protective side: Ask, “In what situations or circumstances would you refuse to let your daughter marry early?”**
    - *For example, if she wanted to continue education, if you felt the suitor/family is not right, etc. This helps identify what mothers see as valid reasons to delay marriage (valuing education, wanting a better life, etc.).*

- Questions related to disability: **“If a child has a disability, does that change how the family or community thinks about their marriage or education?”**
  - *When talking about disabilities, most people may also think of physical disabilities, even though disabilities also include physical, visual, hearing, intellectual, and mental impairments. Briefly explain the different types of disabilities to participants. This can be done by showing them pictures.*
  - *“Are there different expectations for daughters versus sons with disabilities?”*
  
- 4. **Knowledge and Attitudes about Laws/Health (10 minutes):**
  - **“Have you heard of any law in Cambodia about a minimum age for marriage?”**
    - *See if mothers know that generally the legal age is 18 (acknowledging they might mention 16 with parental consent just note what they say).*
  - **“What do you think of that law?”**
  - *Probe: “Do people in your village follow it?” (Sometimes, rural, or indigenous communities might not strictly follow national law for customary marriages, gauge their views.)*
  - **“What about health have you heard of any health risks for a girl who has a baby in her teens?”**
    - *Get their awareness level. Possibly share common risks if they have not heard (but only after they answer).*
  - *“Do you know of any programs or services that help girls for example, to continue schooling, or any organizations educating about early marriage?”*
    - *If yes, do they trust or use them? (For instance, maybe an NGO did a workshop in the village, or there is a clinic that gives info.)*
  
- 5. **Parent–Child Communication and Agency, and Decision-Making in Marriage (15 minutes):**
  - **“How do you talk with your daughter about topics like marriage, relationships, or her future?”**
    - *Probe: “Do mothers generally discuss these things openly, or is it taboo?”*
  - **“If the idea of marriage for your daughter comes up, how would the decision usually be made in your family?”**
    - *Probe:*
      - *“Would you ask your daughter what she wants?”*
      - *“Who has the final say in deciding when and who a girl gets married?”*
  - *“If your daughter had concerns about marriage or someone bothering her, do you think she would feel comfortable telling you?”*
    - *Probe: “Why or why not?”*

- *This explores how much voice girls have at home from the mother's perspective. Some mothers might say "I would ask my daughter," others might say "daughters usually obey what we arrange." Note those differences.*
  - **"Imagine you have a 15-year-old daughter or son who comes to you and says they want to get married soon, what would you do?"**
    - *This question aims to understand whether mothers have the knowledge or skills to communicate or negotiate with their child to delay marriage when the idea of getting married before the age of 18 years old is initiated by the child.*
6. **Hopes and Fears for Daughters (and Sons) (5 minutes):**
- **"As a mother, what do you hope for in your daughter's future? And what worries you the most for her?"**
    - *Encourage them to speak from the heart, maybe they hope their daughter gets educated, has a better life, maybe avoids the struggles they had.*
    - *Fears could include unwanted pregnancy, being unable to find a good husband if she waits or conversely fear she will marry too young and suffer.*
  - *Then ask: "Do you have similar hopes or worries for your sons? Are they different from your daughters'?" For instance, maybe they worry sons will not find jobs or will marry late, etc. Compare the level of concern for daughters vs. sons regarding marriage timing and life success.*
  - *This comparison yields insight into gender bias or equal aspirations.*
7. **Support Networks (10 minutes):**
- **"When you have concerns about raising your daughter, who do you turn to for advice or help?"**
    - *Common answers may be their husband, their own mother or mother-in-law, other female relatives, neighbours, women's group, etc.*
    - *Ask if they have heard of or participated in any mother's groups or community meetings on these topics (child marriage, parenting adolescents). If not, would they find it helpful to have such a space?*
    - *Also, are there local women or leaders they look up to who advocate for girls (for instance, a village chief's wife who is active, etc.) or are most influencers pushing early marriage? This helps map the social support or pressure points.*
  - **"What kinds of support would help mothers make decisions about when their daughters marry?"**
    - *If some have mentioned that they wish their daughters don't get married early/when they are not ready yet, ask: "Are there specific kinds of support that you think would help you, as a mother, to delay your daughter's marriage until she's older and ready?"*

- *Solicit ideas: maybe financial support (scholarships for education so marriage is not seen as the only option), vocational training for girls (so they have economic opportunities), having secondary schools closer, stricter enforcement of laws against child marriage, community support groups where mothers discuss these issues, or awareness campaigns that persuade husbands/elders to value later marriage.*
- *Also, “What support do mothers need to protect their daughters?” (Maybe information about risks, someone to back them up when they say no to an early marriage, etc.)*
- *If relevant, discuss any positive deviants: “Do you know any mother in your community who is determined to not let her daughter marry early? What is her reasoning and how is she managing that?” This can reveal existing protective attitudes and how they cope with social pressure.*

**Facilitation notes:** Hold mothers' FGDs with a female facilitator in a comfortable community setting (example: a common house) where privacy is ensured from men or authority figures, so women can speak freely. Use empathy and avoid any implication of blame (example: if a mother did marry off a daughter early, approach the topic with understanding of her circumstances).

Provide information gently when myths arise (for instance, if a mother believes marrying young protects against sexual violence, the facilitator can acknowledge her concern).

In closing, thank the mothers and perhaps end with a positive collective activity, example: ask each mother to give one piece of advice or wish for her daughter (or future generation of girls). This can leave a sense of solidarity. Emphasize how valuable their insights are, and how this information will help shape programs that support both mothers and daughters.

#### **IV. FGD Guide: Fathers of Adolescents**

**Objectives:** To gather the perspectives of fathers (and male caregivers) on CEFM, recognising their influence in household decisions and community norms. This guide explores fathers' attitudes towards their daughters' and sons' futures, gender norms in parenting, and their knowledge of CEFM-related issues.

##### **Introduction:**

- *The facilitators should introduce themselves, the purpose of the FGD, explain the ground rules around privacy and confidentiality, and obtain written or verbal informed consent from participants.*
- *The facilitators should invite participants to introduce each other and remind them to keep what is being shared in this discussion confidential*

### Guidance for Lifeline Activity and Key Discussion Topics & Questions:

- The Lifeline activity aims to set the stage for participants to reflect on their experiences and observations of other people's experiences.
- After the Lifeline timeline has been completed, the facilitator can use the Key Discussion Topics and Questions as a follow-up guide to explore and probe particular areas.
- The questions written in **bold** should be prioritised. If there is not enough time, the facilitator may choose to skip the questions that are not in bold.

### Lifeline Activity<sup>24</sup>

- **“We would like to start by doing a group activity. In this activity, we will together imagine the life of a ‘typical’ girl or woman in this village from birth until they are an adult.”**
- **Show the printed/drawn visual of a lifeline, which is a line with different ages from 0 until 49 years old. Predetermined ages on the lifeline should include ages that are typically associated with the start and end of schooling, as well as ages 16 and 18 should be included.**
- **Divide the group into smaller groups of 2-4 people, if necessary.**
- **“Your task is to think about the life events of a ‘typical’ girl or woman in this village. A ‘typical’ girl or woman is someone whom most girls or women in this village resemble – the most normal or average girl/woman.”**
- **Instruct participants to write down key events in temporal order. Alternatively, the facilitator can ask participants to name key life events and when they occur and help participants to write them down on the lifeline.**
- **Other ages apart from the predetermined ages can be added if they are mentioned by participants.**
- **If getting married is not included in the timeline, explicitly ask participants on when families usually start having a conversation about marriage, when it gets negotiated/discussed and decided, and the girl/woman gets married.**

### Key Discussion Topics and Questions:

1. **Social Norms, Community Expectations, and Masculine Roles (10 minutes):**
  - **“In your community, what do people expect of girls when they reach ages like 14, 15, or 16?”**
  - **“What about boys, what expectations are there for them at those ages?”**
  - *Discuss what is commonly believed. For example, some might say “By 14 a girl should be preparing to marry,” or alternatively “We prefer our girls to wait.” For boys, maybe “By 16–18 a boy should start thinking about earning money*

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or be mature enough to start a family” or maybe they expect boys to marry later.

- This question aims to contrast norms: whether fathers think a girl is considered an adult earlier than a boy, etc.
- Follow-up: **“Do you agree with these expectations personally, or do you see things differently for your own children?”**

## 2. Decision-Making in Marriage (20 minutes):

- **“When it comes to deciding if or when a daughter should marry, who is usually involved in that decision in families here?”**
- Explore family power dynamics: “Which family member or family members play a big role in deciding?”
- **“Imagine there’s a father in your village named Vanna who has a 15-year-old daughter who is still in school. One day, the family receives a marriage proposal from a neighbour.”**
- Ask: **“What do you think most fathers in Vanna’s position would do?”**
- **“What would most people in the community expect him to do?”**
- **“Do you think Vanna might see anything good or useful about her marrying now?”**
  - Probe: **“What might those be?”**
- **“What would happen if the family decides not to let her marry now?”**
- “Do fathers generally ask their daughters what they want, or is it decided for them?”
- Also touch on the practice of bride price or dowry if relevant: **“Are there traditions like bride price or dowry in your community?”**
  - **“Do these traditions influence families’ decisions about when daughters marry?”** (Some indigenous groups have bride price customs; handle this sensitively.)
- If community elders (like village chiefs or elders’ council) are sometimes involved in match-making, bring that up: “Are marriages ever arranged or encouraged by community leaders or elders?”
- Questions related to disability: **“If a child has a disability, does that change how the family thinks about their marriage or education?”**
  - When talking about disabilities, most people may also think of physical disabilities, even though disabilities also include physical, visual, hearing, intellectual, and mental impairments. Briefly explain the different types of disabilities to participants. This can be done by showing them pictures.
  - Probe: “Are there different expectations for daughters versus sons with disabilities?”

## 3. Drivers of Early Marriage (15 minutes):

- **“What reasons do you think lead some families here to consider early marriage for their daughters or sons?”**

- Possible prompts if not mentioned: poverty (one less dependent, or hoping the marriage brings financial support), “protecting” the girl’s reputation (if she has a boyfriend or if there’s a risk of pregnancy, better marry her off), lack of opportunities (no school or job, so marriage seems like the only path), family ties (marrying into another family for alliance), etc.
- Ask specifically: **“In your view, are there benefits for the family if a girl continues her education longer?” “Why or why not?”** This encourages them to weigh short-term vs. long-term. For example, maybe some fathers will say “Yes, if she finishes school, she might get a good job and help the family” or others might say “No, education isn’t useful here for girls, better she marries.” Note these attitudes.
- “What about your hopes for your son when it comes to getting married?”
  - Probe: “Do you expect your son to start earning and marry early, or do you expect he waits until he’s financially stable?”
  - This can reveal if fathers inherently see a difference (often they prefer sons to be older/mature for marriage but not as concerned if daughters marry young).

#### 4. Awareness of Laws and Risks (10 minutes):

- **“Do you know if there’s a law about the minimum age for marriage in Cambodia?”**
- See if fathers know that marriage under 18 is illegal without exceptions (or mention of the exception for girls 16 with parental consent – just capture what they say).
- Probe:
  - **“What do you think of that law?”**
  - “Do people pay attention to it around here?”
  - Note responses and expressions.
- **“Have you seen or heard about any challenges or difficulties when girls marry young, like at 15 or 16?”**
  - For the facilitator’s reference: For example, health problems for the mother or baby, marriages ending in divorce, or other difficulties.
- “Could you share any stories you have heard?” Encourage them to share any actual observations: maybe “Yes, I saw a girl who had trouble giving birth,” or “Often young couples fight and separate,” etc.
- Also ask if they think the same issues would happen for boys or not (some might say “young boys can’t provide, so they divorce or struggle”).
- This checks if fathers are aware of the negative consequences of CEFM or not.

#### 5. Gender Norms and Parental Responsibility (10 minutes):

- **“What do you believe is a father’s responsibility when it comes to your children’s future, especially when it comes to marriage?”**
  - Some fathers might respond in terms of protecting daughters from harm or dishonour (which could mean marrying her off early to avoid

premarital sex). Others might say ensuring she is educated and marries only when ready.

- *If not directly answered, probe: “Do you feel it is your duty to make sure your daughter is safe and does not get a ‘bad reputation’? “How do you balance that with her education or her own wishes?”*
- **“And for your son, what responsibilities do you see yourself having when it comes to his future?”**
- *This gets at whether fathers see early marriage as protecting daughters or potentially harming them. It also touches on how rigidly they hold gender norms (e.g., “a good father must ensure his daughter is virginal at marriage” vs. “a good father ensures his daughter has a career first”).*
- **“Imagine you have a 15-year-old daughter or son who comes to you and says they want to get married soon, what would you do?”**
  - *This question aims to understand whether fathers have the knowledge or skills to communicate or negotiate with their child to delay marriage when the idea of getting married before the age of 18 years old is initiated by the child.*

#### 6. Community Engagement and Solutions (10 minutes):

- **“Do fathers in this community ever talk among themselves about topics like teenage pregnancy or child marriage?”**
- *Possibly they might not formally, but maybe informally.*
- *Probe: “Where do they talk about this?” See if there are any forums (maybe at pagoda meetings, village meetings).*
- **“Have local leaders, like village chiefs or religious leaders, spoken about girls marrying young or staying in school?”**
- **“What did they say, and what did you think about it?”**
- *Ask: “What do you think fathers like you could do, if anything, to help reduce early marriage in your community?”*
  - *They might initially say it is up to women or the government, but push them to consider their role: Could they pledge not to marry their daughters early? Could they encourage other fathers? Could they support programs for youth?*
- **“What kinds of information, resources, or support would help you make decisions about your children’s marriage that you feel are in their best interest?”** *Maybe they might want to know more about the consequences, or have assurance that if their daughter stays unmarried, she will be okay (example: opportunities for her). Get suggestions.*

**Facilitation notes:** A male facilitator should lead the session to encourage fathers to speak openly among their peers. It is important to create a non-confrontational atmosphere and to recognise that fathers are often motivated by concern for their families’ wellbeing, even if their choices may contribute to CEFM.

Facilitators should approach the discussion with respect and appeal to fathers' protective instincts. For example, by highlighting that keeping a daughter healthy and ensuring she receives an education is part of being a good father. The discussion should reveal not only attitudes but also potential entry points to engage men. For this purpose, note any positive deviants (fathers who proudly say "I want my daughter to be educated and marry later") as examples.

At the end, thank the participants and invite each father to share one commitment or wish: "One thing you'd like to do or see done to support your daughter's or son's future." This closing can be both revealing and motivating. Emphasise that their insights will help shape programmes that include fathers, not just mothers, as their involvement is crucial.

## V. FGD Guide: Community Leaders/Gatekeepers (Tribal Chiefs / Village Leaders)

### Objective:

To understand tribal and community leaders' perspectives on cultural expectations, social norms, and roles in influencing or preventing child, early, and forced marriage (CEFM), and to explore avenues for community-led solutions.

#### Guidance for Key Discussion Topics and Questions:

- The questions written in **bold** should be prioritised. If there is not enough time, the facilitator may choose to skip the questions that are not in bold.

### Key Discussion Topics and Questions

#### 1. Community Norms and Marriage Expectations (10 minutes)

- **"In your view, what are the views in your community about when girls and boys should marry?"**
- "Do you think these views have changed over time?"
- *Probe:* "If so, what is influencing those changes?"
- **"Are there community sayings or proverbs that reflect beliefs about the right time for girls to marry?"**
- *Probe:*
  - **"Are the expectations different for boys?"**
  - "Why do you think these differences exist?"

#### 2. Drivers of Early Marriage (15 minutes)

- **"From your experience as a community leader, what are the main reasons some families choose to marry their daughters before age 18?"**
- *Ask them to elaborate their answer.*

- *Follow-up probes (do **not** read out first, only mention if they struggle to answer):*  
Possible reasons might include:
    - Economic reasons: family's economic difficulties, wanting to secure a girl's future.
    - Cultural beliefs, social norms; beliefs and attitudes around gender and gender; norms: concerns about a girl's reputation or premarital relationships
    - Education: lack of opportunity to continue school, girls not expected to attain a certain level of education
    - Digital literacy and access: online information or interaction encouraging/discouraging people to get married.
  - **“Do some families think marrying a girl early protects her or the family's honour?”**
  - *Probe:*
    - **“Do you see any differences in these reasons among families from different Indigenous groups?”**
    - **“And what about families with different economic situations?”**
- 3. Role of Tribal Leadership and Local Authorities (10 minutes)**
- **“What roles do tribal leaders or village chiefs typically play when it comes to people getting married?”**
  - “Are you involved in blessing, permitting, or organising marriages?”
  - **“Have there been situations where you, or other leaders, have intervened to stop or delay a marriage?”**
  - *Probe:* “Could you share what happened?”
  - *Follow-up:* “Are there any government rules or national laws about child marriage that affect what you can do as a leader?”
- 4. Awareness of Laws and Legal Frameworks (10 minutes)**
- **“Are you aware of what the law in Cambodia says about the minimum age for marriage?”**
  - “What do you think about this law?”
  - **“Do people in your community understand or follow the law?” “Why or why not?”**
  - **“If there are parents who request approval for their children who are under the age of 18 years old to get married, what do the local authorities usually do?”**
- 5. Education and Girls' Life Paths (10 minutes)**
- **“In your view, what are the advantages or disadvantages for girls to continue school through secondary level?”**
  - **“What challenges prevent girls from continuing their education?”**
  - **“What support or programs exist to help girls continue their studies?”**
  - *Prompt:* “Have any girls in your village succeeded in finishing school or becoming leaders?” “What helped them?”

**6. Marriage and Adolescent Pregnancy (10 minutes)**

- “In your experience, what happens when a girl becomes pregnant before marriage?”
- “How does the community usually respond?”
- “Are there efforts to marry her quickly?” “Who decides that?”
- “How are these situations handled differently between boys and girls?”

**7. Experiences of Girls with Disabilities (5 minutes)**

- “Are there girls with disabilities in your community?”
- *If yes:* “What are their experiences when it comes to schooling?”
- “And what about their experiences with relationships and marriage?”
- “Do they face added challenges or discrimination?”
- “Are families more or less likely to seek marriage for girls with disabilities?”

**8. Support Services and External Actors (5 minutes)**

- “Are there any organisations, programmes, or government services that support girls or families around marriage decisions?”
- “In your view, how effective are these programmes or services?”
- “Are they easy for Indigenous communities to access?”
- *Probe:* “What is missing or needed?”

**9. Pathways to Prevention and Solutions (5 minutes)**

- “What do you think could help reduce early marriage in your community?”
- “What kinds of activities or approaches would you support to help reduce early marriage?”
- “What kind of support would help you as a leader play a stronger role in protecting girls?”
- *Prompt:* “Would you support efforts to engage fathers, boys, or religious leaders in this work?”

**Facilitation notes:**

- Use a culturally respectful approach and conduct the FGD in the appropriate local language.
- Ensure the setting allows for open and dignified dialogue (e.g., avoid mixed-gender or public settings that may inhibit responses).
- Acknowledge and honour the role of tribal leaders as knowledge-holders and custodians of cultural values.
- Use participatory tools where relevant (e.g., ask them to reflect on “a time when a girl’s marriage decision caused a conflict or challenge in the village”).
- Be mindful not to stigmatise cultural practices but instead treat the interview as an open dialogue.



## Annex 3. Key Informant Interview (KII) Guides

### Guidance for all KII guides:

- The questions written in **bold** should be prioritised. If there is not enough time, the facilitator may choose to skip the questions that are not in bold.

### I. KII Guide: Local Government Officials (Provincial/District Authorities)

**Target Informants:** Officials from relevant government departments (Women's Affairs, Education, Health, Social Affairs, Ministry of Interior), as well as commune council members or child protection committee representatives in Ratanakiri and Mondulkiri.

**Purpose:** To understand government efforts, policies, and challenges in addressing CEFM at the local level. This includes capturing baseline information on existing programs, inter-sectoral coordination, and resource gaps from the perspective of authorities.

#### Key Interview Topics and Questions:

1. **Prevalence and Trends (5 minutes):**
  - **"How would you describe the situation of child marriage in your province/district?"**
  - **"Is it more common in certain communities or groups?"**
  - "Has it been changing over time?"
    - Ask for any available data or observations (e.g., "Have you seen any decline or increase in the past 5 years?").
2. **Current Government Initiatives (10 minutes):**
  - **"What programs or actions are currently in place by the government to prevent or respond to CEFM here?"**
  - *Probe specific interventions if needed: awareness campaigns, school enrollment drives, economic support to families, enforcement of laws (For example, birth registration or marriage registration processes and any other existing support systems or services to prevent underage marriage).*
  - **"Thank you for sharing. Could you share how the government obtains information on how the programs are running?"**
  - *This question serves to understand existing monitoring and evaluation efforts of current programs, to understand its implementation and effectiveness. Probe into details such as the information that is collected, by who, how often, which programs are information collected on.*
  - "From your perspective, does child marriage affect girls and boys differently in this province?"

- *The facilitator can adapt the question to fit the location under the interviewee's purview.*
  - "How so?"
  - "Are there certain subgroups of girls who are less likely to benefit from these programs?"
    - "How about girls with disabilities?"
    - "How about girls from Indigenous communities?"
- 3. Inter-Departmental Coordination (10 minutes):**
- **"How do different government departments (Women's Affairs, Education, Health, etc.) work together on this issue?"**
  - **"Are there any challenges when it comes to inter-departmental coordination?"**
    - "Could you share the challenges?"
    - *Assess whether there is a coordinated strategy or if efforts are siloed. For instance, "Is there a task force or regular meetings on child protection/gender issues?"*
    - *Probe further if needed: "If not, what makes coordination challenging?"*
- 4. Institutional Challenges (15 minutes)**
- **"What are the main challenges you face in implementing programs against early marriage?"**
  - Ask follow up questions such as:
    - "Are there enough services for adolescents (like reproductive health, counselling, shelters)?"
    - "How does the government collect information or data on child marriage at the local level?"
    - "Do you have access to this data?"
    - "What do you think about the data the government has?"
    - "Do you think it's sufficient or not?" "Why?"
    - "How about when it comes to engaging indigenous leaders and communities?"
      - o *Probe if needed: "Are there any language or cultural barriers that make it challenging for government programs to be effective?"*
      - o "Could you share more?"
- 5. Laws and Enforcement (15 minutes):**
- "What does the law say about the minimum age for marriage?"
  - **"How do you see this law affecting decisions around marriage for girls and boys in this community?"**
    - *Probe:*
      - "Do people generally know about this law?"
      - "What do they think about it?" *Assess whether families support this law, oppose it, or have mixed opinions.*
      - "Why do you think that is the case?"

- “Do families respond differently when it comes to girls versus boys?”
  - **“Are there situations where families might still support early marriage, even when they know it’s against the law?”**
    - “What might those situations be?”
    - “Are the pressures or motivations different for girls and boys?”
  - “In your view, do laws have any role in preventing early marriage?”
    - *If yes:* “What might that role be?”
    - “Are other types of support also needed?”
    - “What kinds of support or services do you think could help families or adolescents delay marriage?”
    - “Are there different kinds of support needed for girls compared to boys?”
  - **“From your experience, are there any challenges in applying or enforcing these laws in Indigenous or remote communities?”**
    - *If yes:* **“What are they?”**
    - *Probe:* “Could you tell us which groups you think this applies to?”
    - *Use as follow-up only if they struggle to answer:* “For example, do things like birth registration, distance from services, or cultural practices play a role?”
    - “Are girls and boys affected differently by these challenges?”
  - **“If an underage marriage is discovered, what usually happens?”**
    - *Probe:* **“Do local officials intervene or report it?”**
    - “Have there been any publicised cases or legal actions in your area, or none at all?”
    - “In your view, is the current law adequate? Why or why not?”
    - **“Do you know if some underage marriages still happen quietly without official registration?”**
    - **“If yes, how do local authorities usually respond to that?”**
6. **Engagement with Communities (10 minutes):**
- **“In what ways, if any, do local authorities engage community leaders or parents around child marriage?”**
  - **“In what ways, if any, do local authorities engage girls and young women around child marriage?”**
  - *Follow-up probes (only if needed):*
    - “For example, are there community meetings, local media, or use of networks like pagodas or indigenous gatherings?”
  - “What do you think about these?”
7. **Partnerships with NGOs/CSOs (10 minutes):**
- “Are you currently working with any NGOs or civil society groups on child marriage or related issues (like girls’ education, youth health)?”
  - *Follow-up probes (if needed):*

- “If yes, what kinds of support or activities do these partners provide?”
- “If not, why do you think that is?”

**8. Suggestions and Areas for Improvement (5 minutes):**

- “What do you think would most help efforts to reduce child marriage in this province?”
- “If you could suggest areas of improvements or new initiatives, what would it be?”

**Facilitation notes:** For Commune or Village Officials interviews, questions will be phrased in more accessible terms but cover similar ground focusing more on their immediate role, example: “What do you do if you hear of a family planning to marry their 14–15-year-old child?”.

## **II. KII Guide: NGO and CSO Representatives**

**Target Informants:** Staff of non-governmental or civil society organisations working in the region on relevant areas, example: representatives from NGOs focusing on child protection, gender equality, indigenous rights, youth development, health (such as Plan International, Save the Children, local NGOs like CARE or indigenous people’s associations, etc.).

### **Key Interview Topics and Questions:**

**1. Organisational Role and Activities (10 minutes):**

- **“Can you share your organisation’s work in Ratanakiri/Mondulhiri related to child marriage or adolescent girls’ empowerment?”**
  - *Understand what programs or research they have (example: running girls’ clubs, providing scholarships, advocacy campaigns, etc.). Also clarify since when and where (which districts/communities) they have been active.*

**2. Key Observations and Drivers (15 minutes):**

- **“From your experience, what are the main drivers of CEFM in the communities you work with?”**
- “Do you see differences in how child marriage affects girls vs. boys in this province?”
- **“Are there certain subgroups of girls, such as those with disabilities or from ethnic minorities, who may be more vulnerable to early marriage?”**
- **“Are there certain subgroups of girls who are less likely to benefit from current interventions?”**
- *This invites an expert summary, which might echo factors like gender norms, economic hardship, lack of education, etc., but with concrete anecdotes.*

NGOs may reference specific cultural practices or emergent issues (like migration for work leading to informal early unions, etc.).

### **3. Community Engagement and Norms (10 minutes):**

- **“How have community members, like parents or local leaders, responded to your work on early marriage?”**
  - Probe: “Have you faced any resistance or notable successes?”
  - Probe examples if needed: “Could you share examples?” This could be an awareness session where elders pushed back citing tradition, or conversely a village where an elder became a champion after engagement. This shows what strategies work or do not (e.g., involving respected elders vs. youth-only approaches).

### **4. Gender and Inclusion Strategy (10 minutes):**

- **“In what ways, if any, do your programs take into account gender differences and the needs of Indigenous communities, including their language and cultural practices?”**
- Probe:
  - **“Are there any particular approaches or adaptations you have made?”**
  - **“Have you faced any challenges in doing this?”**
  - **“Could you share the challenges you have faced?”**
  - We want to understand if and how NGOs adapt materials to local languages, involve both women and men, and address intersectional issues (like reaching the most marginalized girls). Perhaps they train indigenous youth as peer educators, or use participatory media (theatre, radio in local language).

### **5. Collaboration with Government (10 minutes):**

- **“How do you coordinate with government authorities or other stakeholders on this issue?”**
- Check if they feed data into government systems, participate in government-led committees, or face any bureaucratic hurdles. Also, if they provide any capacity building to officials or work in schools/health centres with permission.

### **6. Challenges in Program Implementation (10 minutes):**

- **“What challenges have you encountered in trying to reduce early marriage here?”**
- Only use as prompts if they struggle to answer: Challenges may include difficult terrain to reach villages, trust-building with indigenous communities (maybe some initial distrust of outsiders), sustaining funding, aligning with local customs (some interventions might conflict with tradition). They might also mention

COVID-19 or other external factors if relevant (example: pandemic causing school dropouts).

- **“Are there any challenges specific to Indigenous communities?”**
  - Probe, if needed: “Could you tell us which groups you think this applies to?”

#### **7. Innovations and Best Practices (10 minutes):**

- **“Have you tried any new or innovative approaches that you found effective in delaying marriage or changing norms?”**
- Examples: a mother-daughter mentorship program, radio talk shows in indigenous languages, engaging boys through sport, etc. Gather details on what worked and why, as well as what has not worked.
- Recommendations: **“Based on your experience, what would you recommend for future programs or policies to better address CEFM among indigenous communities here?”**

**Facilitation notes:** The interviewer should show knowledge of any major recent studies or programs the NGO did (per inception review) to build rapport and dive deeper. Also, ask if they have any data or report they can share, which could enrich the baseline.

### **III. KII Guide: Health and SRHR Professionals**

**Target Informants:** Professionals focused on adolescent health and sexual and reproductive health and rights (SRHR) in the region. This could include doctors or midwives at provincial hospitals, the head of a health centre, a youth-friendly services coordinator, or an officer from UNFPA/UNICEF or similar working on SRHR in these provinces.

#### **Key Interview Topics and Questions:**

##### **1. Adolescent Health Overview (10 minutes):**

- **“How would you describe the state of adolescent reproductive health in Ratanakiri/Mondulkiri?”**
- Probe, if needed: “What are the most pressing issues you see?” Examples include teen pregnancy rates, contraceptive use, STIs.
- “What kinds of health interventions or programs for adolescents have been tried in your area?”
- **“In your view, which of these have worked well?” “Why?”**
- **“Which have been less effective?” “Why?”**
- “What challenges may girls or families encounter when trying to access these programs?”

##### **2. Linkages of Health and Marriage (5 minutes):**

- **“In your experience, how does early marriage impact health outcomes for girls?”**
  - *Expect details on complications like higher maternal mortality or obstetric issues among incredibly young mothers, mental health issues, or malnutrition. They may also mention that early marriage often means early pregnancy, which can be risky.*
3. **Service Access and Utilisation (15 minutes):**
- **“Do indigenous adolescent girls and boys in your area use health services (like contraception, antenatal care, delivery)?”**
  - *Probe: “Why or why not?”*
  - *Probe barriers if necessary: cultural (example: shyness, preference for traditional healers), practical (distance, cost), or systemic (lack of youth-friendly services). For example, do married teens attend maternal health services more than unmarried teens access contraceptive advice? Is there any stigma if an unmarried girl seeks contraception?*
  - **“Are there subgroups of girls—such as those with disabilities or from ethnic minorities—who may be more vulnerable to early marriage?”**
    - *Probe: “Could you tell us which groups you see this with?”*
  - **“Are these groups also less likely to access or benefit from health services?”**
    - *Probe: “Could you tell us which groups you see this with?”*
4. **Quality of Youth-Friendly Services (10 minutes):**
- **“Do local health facilities in your area offer youth-friendly SRH services?”**
  - **“Could you describe what is available?”**
  - *Check if there are dedicated youth clinics or if staff are trained to be nonjudgmental. Mention if they have outreach programs in schools or villages. If something like the Ministry of Health's adolescent health services exist, ask about their reach in Indigenous communities.*
5. **Coordination with Other Sectors (10 minutes):**
- **“Do you work with teachers or social workers on issues like teenage pregnancy or early marriage?”**
  - *For example, a health professional might give talks at schools or be part of a multisector committee. This yields insight into integrated approaches or lack thereof.*
6. **Policy and Training (10 minutes):**
- **“What policies or guidelines guide your work on adolescent health?”**
  - **“Have health staff here received any training on counselling adolescents?”**
  - **“And what about training on responding to cases of gender-based violence?”**
  - *See if they reference national standards or any special initiatives (example: training by an NGO or UN on providing adolescent-friendly care, or on how to*

handle a disclosure of forced marriage or abuse). Also, are there protocols for mandatory reporting if a child is harmed (which ties into safeguarding)?

7. **Recommendations (10 minutes):**

- **“What changes or improvements in health services or community health education do you think could help reduce early marriage?”**
- **“And what could help lessen its impact on girls’ health when it does occur?”**
- *Note: Use these interviews to also obtain any existing studies or data the health professionals might have. This can complement our baseline.*
- *Ensure sensitivity: if discussing topics like abortion (in case of teen pregnancy), tread carefully as it is a sensitive legal topic in Cambodia. Focus on available care and support.*



## Annex 4. Consent and Assent Forms

### Consent Form: Key Informant Interview (KII)

**Title of the Research:** *Understanding the Lives and Choices of Adolescents in Ratanakiri and Mondulhiri*

**Organizations Involved:** Gender and Development for Cambodia (GADC), Behavioural Insights Team (BIT), with support from UNICEF Cambodia, UNFPA, and the Ministry of Women's Affairs

#### **Why are we doing this research?**

We want to learn from your insights about how early and forced marriage affects adolescents in your community, including what programs, services, or local practices could help girls and boys have more choices and safer futures.

#### **Why and how were you selected?**

We are here today because you were selected as a potential participant through our work with trusted community members like commune chiefs and women leaders, as well as through UNICEF's networks, past program engagements, and referrals from local NGOs. We believe you are the right person to speak with to help us understand the lives and choices of adolescents in your community.

#### **What will happen?**

- You will have a one-on-one conversation with a trained interviewer.
- The discussion will take 60–90 minutes.
- We will ask about your experiences and views on youth, gender norms, community roles, and local efforts to support adolescents.
- If you agree, we may take notes.

#### **Will there be any risk or discomfort?**

Some topics may be sensitive. You may skip any question or stop the interview at any time. We are committed to ensuring your safety, confidentiality, and well-being.

#### **Will there be any benefit?**

Your participation in this study may not benefit you directly, but your voice will help guide programs and policies that support youth in your community. You may receive a small token of appreciation, such as a notebook or a stipend for your travel.

#### **Voluntary Participation**

You are free to decide whether or not to join. Your decision will not affect your work, reputation, or relationship with any organization.

**Follow up interview.**

We might, under certain circumstances, ask for a follow up interview with you. This session would not exceed 45 minutes and would only be scheduled if you agree and if it fits comfortably with your schedule.

**Use and reuse of data.**

Any information you share with us is completely confidential and will only be used for this study. We will keep your personal details separate from your answers, so no one can link your responses back to you. We will combine everyone's answers into a single data file and remove any details that could be used to identify you. The findings will be presented in a summary report for organisations like UNICEF, but we will not include any personal information in that report.

We will keep the data file (with your personal information removed) in a secure place for 10 years just in case it is needed for a formal check. After that, it will be permanently destroyed.

**Confidentiality**

The information you provide will be strictly confidential and never connected to you. When we tell other people about this research, we will remove any information that could directly identify you, like your name or location, from your answers before we share the information with anyone. No one will ever know what answers you gave unless required by law (example: child abuse). Only a few researchers from GADC, BIT and UNICEF will have access to this information, and all information will be stored safely under the care of the lead researcher.

**Consent Statement\***

By signing below, I confirm that:

- I understand the purpose of the interview and have had a chance to ask questions.
- I know my participation is voluntary, and I can stop at any time.
- I agree to take part in the key informant interview.
- I agree to be contacted further if any follow-up interview is required.

**If you have any questions about anything, you can always call Long Borin at 069 555 632 or 096 325 1690 ([longborin14@gmail.com](mailto:longborin14@gmail.com)/[info@gadc.org.kh](mailto:info@gadc.org.kh))**

Name: \_\_\_\_\_

Signature/thumbprint: \_\_\_\_\_

Date: \_\_\_\_\_

Interviewer's name: \_\_\_\_\_

Interviewer's phone number: \_\_\_\_\_

Interviewer's email: \_\_\_\_\_

Signature of interviewer: \_\_\_\_\_

## Consent Form: Focus Group Discussion (FGD)

**Title of the Research:** *Understanding the Lives and Choices of Adolescents in Ratanakiri and Mondulakiri*

**Organizations Involved:** Gender and Development for Cambodia (GADC), Behavioural Insights Team (BIT), with support from UNICEF Cambodia, UNFPA, and the Ministry of Women's Affairs

### **Why are we doing this research?**

We want to understand how young people and families experience life in your community, especially around education, marriage, and growing up. This will help improve services that are responsive to both girls and boys in diverse cultural and social contexts.

### **Why and how were you selected?**

You previously indicated your interest in participating when we shared this activity through your local leaders and community members. We believe you will help us understand the lives and choices of adolescents in your community.

### **What will happen?**

- You are invited to join a group discussion with 6–10 people from your community.
- It will last about 60–90 minutes.
- You will be asked questions about community beliefs, opportunities for youth, and challenges girls and boys face.
- What you share will be kept private, and we kindly ask that you do not share the things other participants have talked about outside this group. We will not use your name in any reports.

### **Will there be any risk or discomfort?**

Some questions may feel personal or emotional. You can skip any question or stop participating at any time. We will do our best to ensure a safe, respectful space for everyone.

### **Will there be any benefit?**

You will not receive money, but your voice will help guide programs and policies that support youth in your community. You may receive a small token of appreciation, such as refreshments or stationery.

### **Voluntary Participation**

Joining is your choice. You may choose to leave the discussion at any time, with no negative consequences.

**Use and reuse of data.**

Any information you share with us is completely confidential and will only be used for this study. We will keep your personal details separate from your answers, so no one can link your responses back to you. We will combine everyone's answers into a single data file and remove any details that could be used to identify you. The findings will be presented in a summary report for organisations like UNICEF, but we will not include any personal information in that report.

We will keep the data file (with your personal information removed) in a secure place for 10 years just in case it is needed for a formal check. After that, it will be permanently destroyed.

**Confidentiality**

While we cannot guarantee that other people in the study will keep the information private, we will keep the information you shared confidential and never connect your information to you. When we tell other people about this research, we will remove any information that could directly identify you, like your name or location, from your answers before we share the information with anyone. You can choose to use a pseudonym or nickname instead of your real name in the discussion. No one will ever know what answers you gave unless required by law (example: child abuse). Only a few researchers from GADC, BIT and UNICEF will have access to this information, and all information will be stored safely under the care of the lead researcher.

**Questions**

Before you say yes or no to being in this study, we will answer any questions you have. If you join the study, you may ask questions at any time. **Do you have any questions for us?**

**Would you like a copy of this consent?****Consent Statement**

By signing below, I confirm that:

- I understand the purpose of the discussion.
- I know my participation is voluntary and I can stop at any time.
- I agree to take part in the focus group discussion.

**If you have any questions about anything, you can always call Long Borin at 069 555 632 or 096 325 1690 (longborin14@gmail.com/info@gadc.org.kh)**

Name: \_\_\_\_\_

Signature/thumbprint: \_\_\_\_\_

Date: \_\_\_\_\_

Interviewer's name: \_\_\_\_\_

Interviewer's phone number: \_\_\_\_\_

Interviewer's email: \_\_\_\_\_

Signature of interviewer: \_\_\_\_\_

### **Verbal consent script**

\*Note for research team: The research team will read out the form for participants who are unable to read or write, and thus unable to provide their written consent. For participants that require the research team to read out the consent form for them, follow these instructions below to obtain their consent. If you are not sure a participant fully understands the consent, it is best to ask them to explain it back to you. This helps ensure they are clear on what they are agreeing to.

### **Consent Statement**

(Start the voice recording)

In order for us to document your consent, please answer Yes/No to the following questions.

1. "Do you understand the purpose of this discussion and have you had the chance to ask any questions you may have?"
2. "Do you understand that your participation is voluntary, and that you can stop the discussion at any time without any consequences?"
3. "Do you agree to take part in this discussion?"

(Stop the recording)

## Consent Form: Survey Questionnaire

**Title of the Research:** *Understanding the Lives and Choices of Adolescents in Ratanakiri and Mondulhiri*

**Organizations Involved:** Gender and Development for Cambodia (GADC), Behavioural Insights Team (BIT), with support from UNICEF Cambodia, UNFPA, and the Ministry of Women's Affairs

### **Why are we doing this research?**

We want to understand how young people and families experience life in your community, especially around education, marriage, and growing up. This will help improve services that are responsive to both girls and boys in diverse cultural and social contexts.

### **Why and how were you selected?**

To make sure we hear from all kinds of people, we got a list of households with young people from your village chief. From that list, we randomly selected 10 parents. We believe that speaking with you will help us better understand how we can support young people and families in your community.

### **What will happen?**

- You will answer a 15-minute-long questionnaire.
- We will not write down your name, and your answers will be private.
- You can skip any question if you prefer not to answer. You can stop at any time.

### **Will there be any risk or discomfort?**

Some questions may feel personal or emotional. You can skip any question or stop participating at any time. We will do our best to ensure a safe, respectful space for everyone.

### **Will there be any benefit?**

You will not receive money, but your voice will help guide programs and policies that support youth in your community. You may receive a small token of appreciation, such as refreshments or stationery.

### **Voluntary Participation**

Joining is your choice. You may choose to stop the survey at any time, with no consequences.

### **Use and reuse of data.**

Any information you share with us is completely confidential and will only be used for this study. We will keep your personal details separate from your answers, so no one can link your responses back to you. We will combine everyone's answers into a single data file and remove any details that could be used to identify you. The findings will be presented in a summary report for organisations like UNICEF, but we will not include any personal information in that report.

We will keep the data file (with your personal information removed) in a secure place for 10 years just in case it is needed for a formal check. After that, it will be permanently destroyed.

### **Confidentiality**

The information you provide will be strictly confidential and never connected to you. When we tell other people about this research, we will remove any information that could directly identify you, like your name or location, from your answers before we share the information with anyone. No one will ever know what answers you gave unless required by law (example: child abuse). Only a few researchers from GADC, BIT and UNICEF will have access to this information, and all information will be stored safely under the care of the lead researcher.

### **Questions**

Before you say yes or no to being in this study, we will answer any questions you have. If you join the study, you may ask questions at any time. **Do you have any questions for us?**

**Would you like a copy of this consent?**

### **Consent Statement**

By signing below, I confirm that:

- I understand the purpose of the survey.
- I know my participation is voluntary and I can stop at any time.
- I agree to take part in the survey.

**If you have any questions about anything, you can always call Long Borin at 069 555 632 or 096 325 1690 (longborin14@gmail.com/info@gadc.org.kh)**

Name: \_\_\_\_\_

Signature/thumbprint: \_\_\_\_\_

Date: \_\_\_\_\_

Enumerator's name: \_\_\_\_\_

Enumerator's phone number: \_\_\_\_\_

Enumerator's email: \_\_\_\_\_

Signature of enumerator: \_\_\_\_\_

### **Verbal consent script**

\*Note for research team: The research team will read out the form for participants who are unable to read or write, and thus unable to provide their written consent. For participants that require the research team to read out the consent form for them, follow these instructions below to obtain their consent. If you are not sure a participant fully understands the consent, it is best to ask them to explain it back to you. This helps ensure they are clear on what they are agreeing to.

### **Consent Statement**

(Start the voice recording)

In order for us to document your consent, please answer Yes/No to the following questions.

1. "Do you understand the purpose of this survey and have you had the chance to ask any questions you may have?"
2. "Do you understand that your participation is voluntary, and that you can stop the survey at any time without any consequences?"
3. "Do you agree to take part in this survey?"

(Stop the recording)

## **Assent Form for Children/Adolescents (Ages 10–17): Focus Group Discussion (FGD)**

We want to talk with you as part of a study to learn more about your life, your dreams, and your views about school, growing up, and marriage. This is to help create better support for young people in your community.

### ***Why and how were you selected?***

You previously indicated your interest in participating when we shared this activity through your schoolteachers, youth groups, or local leaders. We believe that you are the right person to speak with to help us better understand how we can support young people in your community.

### ***What will happen?***

- You will talk with other young people and a trained facilitator.
- This will last about 1 hour.
- We will not write down your name, and your answers will be private.
- We will not use your name or personal details in any reports, so no one will be able to tell that you participated.
- You can skip any question if you prefer not to answer. You can stop at any time.
- To protect everyone's privacy in the group, we kindly ask that you do not share the things other young people have talked about outside this group, including telling people who took part in the discussion.

### ***Will there be any risk or discomfort?***

Some questions may feel personal or emotional. You can skip any question or stop participating at any time. We will do our best to ensure a safe, respectful space for everyone.

### ***Will there be any benefit?***

Your participation in this study may not benefit you directly, but it may benefit others. You will receive a small token appreciation for your time.

### ***Do I have to join?***

No. It is completely your choice. No one will be upset if you say no. If you want to be in the study now and change your mind later, that is okay too.

### ***Use and reuse of data.***

Everything you tell us is completely private and will only be used for this study. We will keep your name and personal details separate from your answers, so no one will be able to know what you have said. We will put everyone's answers together into one big data file, making sure to remove any details that could be used to identify you.

The findings will be shared in a summary report for organisations like UNICEF, but it will not have any of your personal information in it.

We will keep the data file in a secure place for 10 years just in case it is needed for a formal check, and then we will permanently destroy it.

### **Confidentiality**

Everything you tell us today will be kept private. We promise to never connect your name or where you live to your answers. You can choose to use a nickname instead of your real name in the discussion. When we share what we learn from this research with others, we will make sure to remove anything that could point back to you. So, no one will ever know what you said. Only a few people, who are researchers from GADC, BIT, and UNICEF, will be able to see your original answers.

- GADC is a local organisation based in Phnom Penh working on gender equality.
- BIT is an international research organisation that will be helping with the study; and
- UNICEF is an international organisation that is working on child rights both in Cambodia and other countries.

Do not worry, all your information will be kept safe and private by our main researcher. The only time we would ever have to share something is if the law absolutely requires it (like in serious cases, for example, if someone is being harmed).

### **Questions**

Before you say yes or no to being in this study, we will answer any questions you have. If you join the study, you can ask questions at any time. Do you have any questions for us?

### **Do you understand what this is about, and do you want to take part?**

- Yes, I want to join the discussion
- No, I do not want to join?

### **Would you like a copy of this paper?**

**If you have any questions about anything, you can always call Long Borin at 069 555 632 or 096 325 1690 (longborin14@gmail.com/info@gadc.org.kh)**

Your name (first name or nickname only): \_\_\_\_\_

Signature/thumbprint: \_\_\_\_\_

Date: \_\_\_\_\_

Interviewer's name: \_\_\_\_\_

Interviewer's phone number: \_\_\_\_\_

Interviewer's email: \_\_\_\_\_

Signature of interviewer: \_\_\_\_\_

### **Verbal consent script**

\*Note for research team: The research team will read out the form for participants who are unable to read or write, and thus unable to provide their written consent. For participants that require the research team to read out the consent form for them, follow these instructions below to obtain their consent. If you are not sure a participant fully understands the consent, it is best to ask them to explain it back to you. This helps ensure they are clear on what they are agreeing to.

### **Consent Statement**

(Start the voice recording)

In order for us to document your consent, please answer Yes/No to the following questions.

1. "Do you understand the purpose of this discussion and have you had the chance to ask any questions you may have?"
2. "Do you understand that your participation is voluntary, and that you can stop the discussion at any time without any consequences?"
3. "Do you agree to take part in this discussion?"

(Stop the recording)

## **Assent Form for Children/Adolescents (Ages 10–17): Survey Questionnaire**

We want to ask you several questions as part of a study to learn more about your life, your dreams, and your views about school, growing up, and marriage. This is to help create better support for young people in your community.

### ***Why and how were you selected?***

To make sure we hear from all kinds of young people, we got a list of households with young people from your village chief. Then, we randomly picked 20 of you. We believe that speaking with you will help us better understand how we can support young people in your community.

### ***What will happen?***

- You will answer a 15-minutes-long questionnaire.
- We will not write down your name, and your answers will be private.
- You can skip any question if you prefer not to answer. You can stop at any time.

### ***Will there be any risk or discomfort?***

Some questions may feel personal or emotional. You can skip any question or stop participating at any time. We will do our best to ensure a safe, respectful space for everyone.

### ***Will there be any benefit?***

Your participation in this study may not benefit you directly, but it may benefit others. You will receive a small token appreciation for your time.

### ***Do I have to join?***

No. It is completely your choice. No one will be upset if you say no. If you want to be in the study now and change your mind later, that is okay too.

### ***Use and reuse of data.***

Everything you tell us is completely private and will only be used for this study. We will keep your name and personal details separate from your answers, so no one will be able to know what you have said. We will put everyone's answers together into one big data file, making sure to remove any details that could be used to identify you. The findings will be shared in a summary report for organisations like UNICEF, but it will not have any of your personal information in it.

We will keep the data file in a secure place for 10 years just in case it is needed for a formal check, and then we will permanently destroy it.

### **Confidentiality**

Everything you tell us today will be kept private. We promise to never connect your name or where you live to your answers. When we share what we learn from this research with others, we will make sure to remove anything that could point back to you. So, no one will ever know what you said. Only a few people, who are researchers from GADC, BIT, and UNICEF, will be able to see your original answers.

- GADC is a local organisation based in Phnom Penh working on gender equality.
- BIT is an international research organisation that will be helping with the study; and
- UNICEF is an international organisation that is working on child rights both in Cambodia and other countries.

Do not worry, all your information will be kept safe and private by our main researcher. The only time we would ever have to share something is if the law absolutely requires it (like in serious cases, for example, if someone is being harmed).

### **Questions**

Before you say yes or no to being in this study, we will answer any questions you have. If you join the study, you can ask questions at any time. **Do you have any questions for us?**

#### **Do you understand what this is about, and do you want to take part?**

- Yes, I want to participate in the survey
- No, I do not want to participate

**If you have any questions about anything, you can always call Long Borin at 069 555 632 or 096 325 1690 (longborin14@gmail.com/info@gadc.org.kh)**

#### **Would you like a copy of this paper?**

Your name (first name or nickname only): \_\_\_\_\_

Signature/thumbprint: \_\_\_\_\_

Date: \_\_\_\_\_

Enumerator's name: \_\_\_\_\_

Enumerator's phone number: \_\_\_\_\_

Enumerator's email: \_\_\_\_\_

Signature of enumerator: \_\_\_\_\_

### **Verbal consent script**

\*Note for research team: The research team will read out the form for participants who are unable to read or write, and thus unable to provide their written consent. For participants that require the research team to read out the consent form for them, follow these instructions below to obtain their consent. If you are not sure a participant fully understands the consent, it is best to ask them to explain it back to you. This helps ensure they are clear on what they are agreeing to.

### **Consent Statement**

(Start the voice recording)

In order for us to document your consent, please answer Yes/No to the following questions.

1. "Do you understand the purpose of this survey and have you had the chance to ask any questions you may have?"
2. "Do you understand that your participation is voluntary, and that you can stop the survey at any time without any consequences?"
3. "Do you agree to take part in this survey?"

(Stop the recording)

## Parental Consent Form: Focus Group Discussion (FGD)

**Title of the Research:** *Understanding the Lives and Choices of Adolescents in Ratanakiri and Mondulhiri*

**Organizations Involved:** Gender and Development for Cambodia (GADC), Behavioural Insights Team (BIT), with support from UNICEF Cambodia, UNFPA, and the Ministry of Women's Affairs

### **Why are we doing this research?**

We want to understand how young people and families experience life in your community, especially around education, marriage, and growing up. This will help improve services that are responsive to both girls and boys in diverse cultural and social contexts.

### **Why and how was your child selected?**

Your child previously indicated that he/she is interested in participating in these activities when it was shared by their school teacher, youth groups or local leaders. We believe that your child is the right person to speak with to help us better understand how we can support young people in your community.

### **What will happen?**

- Your child will talk with other young people and a trained facilitator.
- This discussion will last about 1 hour.
- We will not write down your child's name, and his/her answers will be kept private.
- He/she can skip any question if he/she prefers not to answer. He/she can stop at any time.
- What he/she shares will be kept private, and we also kindly ask that your child not share things other young people have talked about outside the group. We will not use his/her name in any reports.

### **Will there be any risk or discomfort?**

Some questions may feel personal or emotional. Your child can skip any question or stop participating at any time. We will do our best to ensure a safe, respectful space for everyone.

### **Will there be any benefit?**

Your child's participation in this study may not benefit them or you directly, but it may benefit others, as your child's responses may improve programs and policies that support youth in your community. Your child may receive a small token of appreciation.

### **Voluntary Participation**

Your child's participation in this study is voluntary. If your child does not want to be in the study, it is okay. If they want to be in the study now and change their mind later, that is okay too. Your decision about whether your child may participate in this study or to answer any specific questions will in no way affect any services that you or they receive.

### **Use and reuse of data**

Any information your child share with us is completely confidential and will only be used for this study. We will keep your child's personal details separate from their answers, so no one can link their responses back to your child. We will combine everyone's answers into a single data file and remove any details that could be used to identify your child. The findings will be presented in a summary report for organisations like UNICEF, but we will not include any personal information in that report.

We will keep the data file (with your child's personal information removed) in a secure place for 10 years just in case it is needed for a formal check. After that, it will be permanently destroyed.

### **Confidentiality**

While we cannot guarantee that other people in the study will keep the information private, we will keep the information your child shared confidential and never connect any information to you or your child. We will put information we learn from your child together with information we learn from other young people in the study. No one will be able to tell what information came from your child. When we tell other people about this research, we will remove any information that could directly identify your child, like his/her name or location, from his/her answers before we share the information with anyone. Your child can choose to use a pseudonym or nickname instead of his/her real name in the discussion. No one will ever know what answers your child gave unless required by law in case of a criminal behaviour. Only a few researchers from GADC, BIT and UNICEF will have access to this information, and all information will be stored safely under the care of the lead researcher.

### **Questions**

Before you say yes or no to your child being in this study, we will answer any questions you have. If your child joins the study, your child or you may ask questions at any time. You or your child may also contact us through, **Long Borin at 069 555 632 or 096 325 1690 (longborin14@gmail.com/info@gadc.org.kh)** if you have any questions or concerns.

**Do you have any questions for us?**

**Do you need some time to discuss whether you will allow your child to participate?**

## Would you like a copy of this consent?

### **Consent Statement**

By signing below, I confirm that:

- I understand the purpose of the discussion.
- I know my child's participation is voluntary and he/she can stop at any time.
- I agree for my child to take part in the focus group discussion.

Child's Name: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Signature/thumbprint (parent): \_\_\_\_\_

Date: \_\_\_\_\_

Interviewer's name: \_\_\_\_\_

Interviewer's phone number: \_\_\_\_\_

Interviewer's email: \_\_\_\_\_

Signature of interviewer: \_\_\_\_\_

### **Verbal consent script**

\*Note for research team: The research team will read out the form for participants who are unable to read or write, and thus unable to provide their written consent. For participants that require the research team to read out the consent form for them, follow these instructions below to obtain their consent. If you are not sure a participant fully understands the consent, it is best to ask them to explain it back to you. This helps ensure they are clear on what they are agreeing to.

### **Consent Statement**

(Start the voice recording)

In order for us to document your consent, please answer Yes/No to the following questions.

1. "Do you understand the purpose of this survey and have you had the chance to ask any questions you may have?"

2. "Do you understand that your child participation is voluntary, and that your child can stop the discussion at any time without any consequences?"
3. "Do you agree for your child to take part in this discussion?"

(Stop the recording)

## Parental Consent Form: Survey Questionnaire

**Title of the Research:** *Understanding the Lives and Choices of Adolescents in Ratanakiri and Mondulhiri*

**Organizations Involved:** Gender and Development for Cambodia (GADC), Behavioural Insights Team (BIT), with support from UNICEF Cambodia, UNFPA, and the Ministry of Women's Affairs

### **Why are we doing this research?**

We want to understand how young people and families experience life in your community, especially around education, marriage, and growing up. This will help improve services that are responsive to both girls and boys in diverse cultural and social contexts.

### **Why and how was your child selected?**

To make sure we hear from all kinds of young people, we got a list of households with young people from your village chief. Then, we randomly picked 20 young people, and your child is one of the selected ones. We believe that speaking with your child will help us better understand how we can support young people in your community.

### **What will happen?**

- Your child will answer a 15-minutes-long questionnaire.
- We will not write down your child's name, and his/her answers will be private.
- Your child can skip any question if he/she prefers not to answer. He/she can stop at any time.

### **Will there be any risk or discomfort?**

Some questions may feel personal or emotional. Your child can skip any question or stop participating at any time. We will do our best to ensure a safe, respectful space for everyone.

### **Will there be any benefit?**

Your child's participation in this study may not benefit them or you directly, but it may benefit others, as your child's responses may improve programs and policies that support youth in your community. Your child may receive a small token of appreciation.

### **Voluntary Participation**

Your child's participation in this study is voluntary. If your child does not want to be in the study, it is okay. If they want to be in the study now and change their mind later, that is okay too. Your decision about whether your child may participate in this study

or to answer any specific questions will in no way affect any services that you or they receive.

### ***Use and reuse of data***

Any information your child share with us is completely confidential and will only be used for this study. We will keep your child's personal details separate from their answers, so no one can link their responses back to your child. We will combine everyone's answers into a single data file and remove any details that could be used to identify your child. The findings will be presented in a summary report for organisations like UNICEF, but we will not include any personal information in that report.

We will keep the data file (with your child's personal information removed) in a secure place for 10 years just in case it is needed for a formal check. After that, it will be permanently destroyed.

### ***Confidentiality***

We will put information we learn from your child together with information we learn from other young people in the study. No one will be able to tell what information came from your child. When we tell other people about this research, we will remove any information that could directly identify your child, like his/her name or location, from his/her answers before we share the information with anyone. No one will ever know what answers your child gave unless required by law in case of a criminal behaviour. Only a few researchers from GADC, BIT and UNICEF will have access to this information, and all information will be stored safely under the care of the lead researcher.

### ***Questions***

Before you say yes or no to your child being in this study, we will answer any questions you have. If your child joins the study, your child or you may ask questions at any time. You or your child may also contact us through, **Long Borin at 069 555 632 or 096 325 1690 (longborin14@gmail.com/info@gadc.org.kh)** if you have any questions or concerns.

**Do you have any questions for us?**

**Do you need some time to discuss whether you will allow your child to participate?**

**Would you like a copy of this consent?**

### ***Consent Statement***

By signing below, I confirm that:

- I understand the purpose of the study.
- I know my child's participation is voluntary and he/she can stop at any time.

- I agree for my child to take part in the survey questionnaire.

Name: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Signature/thumbprint (parent): \_\_\_\_\_

Date: \_\_\_\_\_

Interviewer's name: \_\_\_\_\_

Interviewer's phone number: \_\_\_\_\_

Interviewer's email: \_\_\_\_\_

Signature of interviewer: \_\_\_\_\_

### **Verbal consent script**

\*Note for research team: The research team will read out the form for participants who are unable to read or write, and thus unable to provide their written consent. For participants that require the research team to read out the consent form for them, follow these instructions below to obtain their consent. If you are not sure a participant fully understands the consent, it is best to ask them to explain it back to you. This helps ensure they are clear on what they are agreeing to.

### **Consent Statement**

(Start the voice recording)

In order for us to document your consent, please answer Yes/No to the following questions.

1. "Do you understand the purpose of this survey and have you had the chance to ask any questions you may have?"
2. "Do you understand that your child participation is voluntary, and that your child can stop the survey at any time without any consequences?"
3. "Do you agree for your child to take part in this survey?"

(Stop the recording)



## Annex 5. All Baseline Assessment results.

### Q1. [All respondents] What is your age?

Mondulkiri

Age	Girls	Boys	Adolescent (Selected "Others" as gender)	Adult Parent / Caregiver
Mean	13.3	13.7	NA	36.7
Median	13	13	NA	35

Ratanakiri

Age	Girls	Boys	Adolescent (Selected "Others" as gender)	Adult Parent / Caregiver
Mean	14.2	14	13	32.7
Median	14	14	14	32

### Q2. [All respondents] What is your sex?

Age	Girls	Boys	Adolescent (Selected "Others" as gender)	Adult Parent / Caregiver
<b>Mondulkiri</b>	58.5% (96)	41.8% (38)	0.0% (0)	55.3% (168)
<b>Ratanakiri</b>	41.5% (68)	58.2% (53)	100.0% (3)	44.7% (136)

### Q3. [All respondents] What is your indigenous group?

Mondulkiri

Indigenous group	Girls	Boys	Adolescent (Selected "Others" as gender)	Adult Parent / Caregiver	Total Respondents
<b>Bunong</b>	70.8% (68)	57.9% (22)	NA	67.9% (114)	<b>67.5%</b> <b>(204)</b>
<b>Khmer</b>	28.1% (27)	42.1% (16)	NA	31.5% (53)	<b>31.8%</b> <b>(96)</b>
<b>Kreung</b>	1.0% (1)	0.0% (0)	NA	0.0% (0)	<b>0.3%</b> <b>(1)</b>
<b>Other</b>	0.0% (0)	0.0% (0)	NA	0.6% (1)	<b>0.3%</b> <b>(1)</b>

Ratanakiri

Indigenous group	Girls	Boys	Adolescent (Selected "Others" as gender)	Adult Parent / Caregiver	Total Respondents
<b>Khmer</b>	19.1% (13)	18.9% (10)	33.3% (1)	16.9% (23)	<b>18.1%</b> <b>(47)</b>
Lao	32.4% (22)	43.4% (23)	66.7% (2)	23.5% (32)	<b>30.4%</b> <b>(79)</b>
<b>Kreung</b>	23.5% (16)	32.1% (17)	0.0% (0)	19.1% (26)	<b>22.7%</b> <b>(59)</b>
<b>Tampoun</b>	16.2% (11)	3.8% (2)	0.0% (0)	34.6% (47)	<b>23.1%</b> <b>(60)</b>
<b>Other</b>	7.4% (5)	1.9% (1)	0.0% (0)	5.1% (7)	<b>5.0%</b> <b>(13)</b>
<b>Kuy</b>	0.0% (0)	0.0% (0)	0.0% (0)	0.7% (1)	<b>0.4%</b> <b>(1)</b>
<b>Lun</b>	1.5% (1)	0.0% (0)	0.0% (0)	0.0% (0)	<b>0.4%</b> <b>(1)</b>

#### Q4. [All respondents] What is your ethnic group?

Mondulkiri

Ethnic group	Girls	Boys	Adolescent (Selected "Others" as gender)	Adult Parent / Caregiver	Total Respondents
<b>Khmer</b>	11.5% (11)	100.0% (38)	NA	45.8% (77)	<b>41.7%</b> <b>(126)</b>
<b>Khmer Lao</b>	0.0% (0)	0.0% (0)	NA	0.6% (1)	<b>0.3%</b> <b>(1)</b>
<b>Khmer Vietnamese</b>	2.1% (2)	0.0% (0)	NA	1.8% (3)	<b>1.7%</b> <b>(5)</b>
<b>Kuy</b>	0.0% (0)	0.0% (0)	NA	0.6% (1)	<b>0.3%</b> <b>(1)</b>
<b>Stieng</b>	0.0% (0)	0.0% (0)	NA	0.6% (1)	<b>0.3%</b> <b>(1)</b>
<b>Prefer not to answer</b>	86.5% (83)	0.0% (0)	NA	50.6% (85)	<b>55.6%</b> <b>(168)</b>

Ratanakiri

Ethnic group	Girls	Boys	Adolescent (Selected "Others" as gender)	Adult Parent / Caregiver	Total Respondents
<b>Khmer</b>	41.2% (28)	30.2% (16)	0.0% (0)	59.6% (81)	<b>48.1%</b> <b>(125)</b>
<b>Khmer Lao</b>	52.9% (36)	62.3% (33)	100.0% (3)	37.5% (51)	<b>47.3%</b> <b>(123)</b>
Lao	0.0% (0)	0.0% (0)	0.0% (0)	1.5% (2)	<b>0.8%</b> <b>(2)</b>

<b>Lun</b>	0.0% (0)	0.0% (0)	0.0% (0)	0.7% (1)	<b>0.4%</b> <b>(1)</b>
<b>Prefer not to answer</b>	5.9% (4)	7.5% (4)	0.0% (0)	0.7% (1)	<b>3.5%</b> <b>(9)</b>

**Q5. [All respondents] Any disability?**

Mondulkiri

<b>Disability</b>	<b>Girls</b>	<b>Boys</b>	<b>Adolescent (Selected "Others" as gender)</b>	<b>Adult Parent / Caregiver</b>	<b>Total Respond.</b>
<b>Yes</b>	1.0% (1)	5.3% (2)	NA	13.1% (22)	<b>8.3%</b> <b>(25)</b>
<b>No</b>	99.0% (95)	94.7% (36)	NA	85.1% (143)	<b>90.7%</b> <b>(274)</b>
<b>Not sure</b>	0.0% (0)	0.0% (0)	NA	0.6% (1)	<b>0.3%</b> <b>(1)</b>
<b>Prefer not to answer</b>	0.0% (0)	0.0% (0)	NA	1.2% (2)	<b>0.7%</b> <b>(2)</b>

Ratanakiri

<b>Disability</b>	<b>Girls</b>	<b>Boys</b>	<b>Adolescent (Selected "Others" as gender)</b>	<b>Adult Parent / Caregiver</b>	<b>Total Respond.</b>
<b>Yes</b>	7.4% (5)	11.3% (6)	33.3% (1)	10.3% (14)	<b>10.0%</b> <b>(26)</b>
<b>No</b>	92.6% (63)	88.7% (47)	66.7% (2)	89.7% (122)	<b>90.0%</b> <b>(234)</b>

**Q6. [For all respondents] Do you have any difficulty in doing any of the following activities: seeing, hearing, walking, remembering, or communicating – even if you use glasses, a hearing aid, or other assistive devices?**

Mondulkiri

<b>Disability</b>	<b>Girls</b>	<b>Boys</b>	<b>Adolescent (Selected "Others" as gender)</b>	<b>Adult Parent / Caregiver</b>	<b>Total Respondents</b>
<b>No difficulty</b>	72.9% (70)	81.6% (31)	NA	57.7% (97)	<b>65.6%</b> <b>(198)</b>
<b>Some difficulty</b>	25.0% (24)	18.4% (7)	NA	35.7% (60)	<b>30.1%</b> <b>(91)</b>
<b>A lot of difficulty</b>	1.0% (1)	0.0% (0)	NA	6.0% (10)	<b>3.6%</b> <b>(11)</b>

<b>Cannot do at all</b>	0.0% (0)	0.0% (0)	NA	0.6% (1)	<b>0.3%</b> <b>(1)</b>
<b>Prefer not to answer</b>	1.0% (1)	0.0% (0)	NA	0.0% (0)	<b>0.3%</b> <b>(1)</b>

Ratanakiri

<b>Disability</b>	<b>Girls</b>	<b>Boys</b>	<b>Adolescent (Selected "Others" as gender)</b>	<b>Adult Parent / Caregiver</b>	<b>Total Respondents</b>
<b>No difficulty</b>	86.8% (59)	86.8% (46)	33.3% (1)	78.7% (107)	<b>81.9%</b> <b>(213)</b>
<b>Some difficulty</b>	8.8% (6)	11.3% (6)	66.7% (2)	18.4% (25)	<b>15.0%</b> <b>(39)</b>
<b>A lot of difficulty</b>	2.9% (2)	0.0% (0)	0.0% (0)	2.2% (3)	<b>1.9%</b> <b>(5)</b>
<b>Cannot do at all</b>	1.5% (1)	1.9% (1)	0.0% (0)	0.0% (0)	<b>0.8%</b> <b>(2)</b>
<b>Prefer not to answer</b>	0.0% (0)	0.0% (0)	0.0% (0)	0.7% (1)	<b>0.4%</b> <b>(1)</b>

**Q7. [All respondents] What is your current marital status?**

Mondulkiri

<b>Marital Status</b>	<b>Girls</b>	<b>Boys</b>	<b>Adult Parent / Caregiver</b>	<b>Total Respondents</b>
<b>Single / never married</b>	100.0% (96)	100.0% (38)	2.4% (4)	<b>45.7%</b> <b>(138)</b>
<b>Married (formal or traditional)</b>	0.0% (0)	0.0% (0)	85.7% (144)	<b>47.7%</b> <b>(144)</b>
<b>Living with a partner</b>	0.0% (0)	0.0% (0)	0.0% (0)	<b>0.0%</b> <b>(0)</b>
<b>Divorced / separated</b>	0.0% (0)	0.0% (0)	0.6% (1)	<b>0.3%</b> <b>(1)</b>
<b>Widowed</b>	0.0% (0)	0.0% (0)	7.1% (12)	<b>4.0%</b> <b>(12)</b>
<b>Prefer not to answer</b>	0.0% (0)	0.0% (0)	4.2% (7)	<b>2.3%</b> <b>(7)</b>

Ratanakiri

<b>Marital Status</b>	<b>Girls</b>	<b>Boys</b>	<b>Adolescent (Selected "Others" as gender)</b>	<b>Adult Parent / Caregiver</b>	<b>Total Respond.</b>
<b>Single / never married</b>	92.6% (63)	98.1% (52)	100.0% (3)	1.5% (2)	<b>46.2%</b> <b>(120)</b>

<b>Married (formal or traditional)</b>	4.4% (3)	0.0% (0)	0.0% (0)	81.6% (111)	<b>43.8%</b> <b>(114)</b>
<b>Living with a partner</b>	0.0% (0)	1.9% (1)	0.0% (0)	0.0% (0)	<b>0.4%</b> <b>(1)</b>
<b>Divorced / separated</b>	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)	<b>0.0%</b> <b>(0)</b>
<b>Widowed</b>	1.5% (1)	0.0% (0)	0.0% (0)	7.4% (10)	<b>4.2%</b> <b>(11)</b>
<b>Prefer not to answer</b>	1.5% (1)	0.0% (0)	0.0% (0)	9.6% (13)	<b>5.4%</b> <b>(14)</b>

**Q7a. [If ever married] How old were you when you first got married? (Response recorded in years)**

Mondulkiri

<b>Years</b>	<b>Adult parent / caregiver</b>
<b>Mean</b>	24.9
<b>Median</b>	21

Ratanakiri

<b>Age</b>	<b>Girl</b>	<b>Adult parent / caregiver</b>
<b>Mean</b>	15.7	26.1
<b>Median</b>	16	19

**Q8. [All respondents] How long have you been living continuously in this village?**

Mondulkiri

<b>Duration</b>	<b>Girls</b>	<b>Boys</b>	<b>Adult Parent / Caregiver</b>	<b>Total Respondents</b>
<b>Always</b>	89.6% (86)	89.5% (34)	60.1% (65)	<b>73.2%</b> <b>(221)</b>
<b>Visitor</b>	4.2% (4)	2.6% (1)	1.2% (2)	<b>2.3%</b> <b>(7)</b>
<b>(Number) Years</b>	6.2% (6)	7.9% (3)	38.7% (65)	<b>24.5%</b> <b>(74)</b>

Ratanakiri

<b>Duration</b>	<b>Girls</b>	<b>Boys</b>	<b>Adolescent (Selected "Others" as gender)</b>	<b>Adult Parent / Caregiver</b>	<b>Total Respond.</b>
<b>Always</b>	97.1% (66)	96.2% (51)	100.0% (3)	81.6% (111)	<b>88.8%</b> <b>(231)</b>

<b>Visitor</b>	1.5% (1)	0.0% (0)	0.0% (0)	4.4% (6)	<b>2.7%</b> <b>(7)</b>
<b>(Number) Years</b>	1.5% (1)	3.8% (2)	0.0% (0)	14.0% (19)	<b>8.5%</b> <b>(22)</b>

**Q8a. [If select (Number) Years] How many years have you been living continuously in the village?**

Mondulkiri

<b>Years</b>	<b>Girl</b>	<b>Boy</b>	<b>Adult parent / caregiver</b>
<b>Mean</b>	4.7	4.3	15
<b>Median</b>	4.5	5	13

Ratanakiri

<b>Years</b>	<b>Girl</b>	<b>Boy</b>	<b>Adult parent / caregiver</b>
<b>Mean</b>	8	10	14.2
<b>Median</b>	8	10	13

**Q10. [For girls and boys only] Are you currently attending school?**

Mondulkiri

<b>Education status</b>	<b>Girl</b>	<b>Boy</b>	<b>Adolescent (Selected "Others" as gender)</b>	<b>Total respondents</b>
<b>Yes</b>	88.5% (85)	65.8% (25)	0.0% (0)	82.1% (110)
<b>No</b>	11.3% (11)	34.2% (13)	0.0% (0)	17.9% (24)

Ratanakiri

<b>Education status</b>	<b>Girl</b>	<b>Boy</b>	<b>Adolescent (Selected "Others" as gender)</b>	<b>Total respondents</b>
<b>Yes</b>	67.6% (46)	71.7% (38)	100.0% (3)	70.2% (87)
<b>No</b>	30.9% (21)	28.3% (15)	0.0% (0)	29.0% (36)
<b>Prefer not to answer</b>	1.5% (1)	0.0% (0)	0.0% (0)	0.8% (1)

### Q10a. What grade are you in currently?

Mondulkiri

Current grade	Girl	Boy	Total respondents
1	1.2% (1)	0.0% (0)	0.9% (1)
2	2.4% (2)	4.0% (1)	2.7% (3)
3	2.4% (2)	12.0% (3)	4.5% (5)
4	8.2% (7)	16.0% (4)	10.0% (11)
5	21.2% (18)	12.0% (3)	19.1% (21)
6	17.6% (15)	24.0% (6)	19.1% (21)
7	21.2% (18)	12.0% (3)	19.1% (21)
8	8.2% (7)	12.0% (3)	9.1% (10)
9	7.1% (6)	4.0% (1)	6.4% (7)
10	3.5% (3)	4.0% (1)	3.6% (4)
11	1.2% (1)	0.0% (0)	0.9% (1)
12	5.9% (5)	0.0% (0)	4.5% (5)

Ratanakiri

Current grade	Girl	Boy	Adolescent (Selected "Others" as gender)	Total respondents
1	2.2% (1)	2.6% (1)	0.0% (0)	2.3% (2)
2	6.5% (3)	2.6% (1)	0.0% (0)	4.6% (4)
3	2.2% (1)	15.8% (6)	0.0% (0)	8.0% (7)
4	10.9% (5)	21.1% (8)	0.0% (0)	14.9% (13)
5	15.2% (7)	15.8% (6)	33.3% (1)	16.1% (14)
6	8.7% (4)	7.9% (3)	33.3% (1)	9.2% (8)

<b>7</b>	10.9% (5)	7.9% (3)	33.3% (1)	10.3% (9)
<b>8</b>	19.6% (9)	10.5% (4)	0.0% (0)	14.9% (13)
<b>9</b>	15.2% (7)	2.6% (1)	0.0% (0)	9.2% (8)
<b>10</b>	6.5% (3)	2.6% (1)	0.0% (0)	4.6% (4)
<b>11</b>	0.0% (0)	10.5% (4)	0.0% (0)	4.6% (4)
<b>12</b>	2.2% (1)	0.0% (0)	0.0% (0)	1.1% (1)

**Q10b. [If no to Q10] What is the highest grade you completed in school?**

Mondulkiri

<b>Current grade</b>	<b>Girl</b>	<b>Boy</b>	<b>Total respondents</b>
<b>0</b>	18.2% (2)	7.7% (1)	12.5% (3)
<b>1</b>	9.1% (1)	0.0% (0)	4.2% (1)
<b>2</b>	9.1% (1)	23.1% (3)	16.7% (4)
<b>3</b>	18.2% (2)	15.4% (2)	16.7% (4)
<b>4</b>	0.0% (0)	15.4% (2)	8.3% (2)
<b>5</b>	0.0% (0)	15.4% (2)	8.3% (2)
<b>6</b>	9.1% (1)	7.7% (1)	8.3% (2)
<b>7</b>	36.4% (4)	15.4% (2)	25.0% (6)

Ratanakiri

<b>Current grade</b>	<b>Girl</b>	<b>Boy</b>	<b>Total respondents</b>
<b>0</b>	9.5% (2)	26.7% (4)	16.7% (6)
<b>1</b>	9.5% (2)	0.0% (0)	5.6% (2)
<b>2</b>	19.0% (4)	13.3% (2)	16.7% (6)
<b>3</b>	9.5% (2)	13.3% (2)	11.1% (4)

<b>4</b>	23.8% (5)	20.0% (3)	22.2% (8)
<b>5</b>	0.0% (0)	20.0% (3)	8.3% (3)
<b>6</b>	4.8% (1)	6.7% (1)	2.8% (1)
<b>7</b>	4.8% (1)	0.0% (0)	2.8% (1)
<b>8</b>	4.8% (1)	0.0% (0)	2.8% (1)
<b>9</b>	4.8% (1)	0.0% (0)	2.8% (1)
<b>Prefer not to answer</b>	4.8% (1)	0.0% (0)	2.8% (1)

### Q10c. What was the main reason you left or stopped attending school? (select one)

Mondulkiri

Main reason for dropout	Girls	Boys	Total
Completed desired schooling	18.2% (2)	15.4% (2)	16.7% (4)
Could not afford school (fees, uniforms, etc.)	45.5% (5)	0.0% (0)	20.8% (5)
Lost interest in attending school	27.3% (3)	23.1% (3)	25.0% (6)
Needed to work or help support family	0.0% (0)	46.2% (6)	25.0% (6)
Parents / guardians did not allow further schooling	0.0% (0)	7.7% (1)	4.2% (1)
Other	9.1% (1)	7.7% (1)	8.3% (2)

Ratanakiri

Main reason for dropout	Girls	Boys	Total
Completed desired schooling	38.1% (8)	20.0% (3)	30.6% (11)
Could not afford school (fees, uniforms, etc.)	19.0% (4)	40.0% (6)	27.8% (10)
Did not do well in school	4.8% (1)	6.7% (1)	5.6% (2)
Needed to work or help support family	23.8% (5)	26.7% (4)	25.0% (9)
Parents / guardians did not allow further schooling	4.8% (1)	0.0% (0)	2.8% (1)

School was too far / not accessible	9.5% (2)	6.7% (1)	8.3% (3)
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**Q10d. [For girls only] (If Q8c selected "Married or became pregnant" or "Needed to work or help support family") Did your marriage or pregnancy contribute to you stopping or leaving school?**

Mondulkiri

*No girl from Mondulkiri selected "Married or became pregnant" or "Needed to work or help support family" as the main reason for dropping out. Hence this question does not apply.*

Ratanakiri

Dropout reason (Marriage)	Girl
Yes	60.0% (3)
Prefer not to answer	40.0% (2)

**Q10e. [For boys only] (If Q8c selected "Needed to work or help support family") Did your marriage contribute to you stopping or leaving school?**

Mondulkiri

Dropout reason (Marriage)	Boy
Yes	66.7% (4)
No	16.7% (1)
Prefer not to answer	16.7% (1)

Ratanakiri

Dropout reason (Marriage)	Boy
No	75.0% (3)
Prefer not to answer	25.0% (1)

**Q11. [All respondents]: What do you think are the main reasons girls in your community stop attending school? (Select all that apply)**

Mondulkiri

Reasons	Girl	Boy	Adult parent / caregiver	Total respondents
Lack of financial resources / fees	55.2% (53)	52.6% (20)	66.7% (112)	61.3% (185)
Family responsibilities / chores	39.6% (38)	44.7% (17)	24.4% (41)	31.8% (96)
Early marriage	18.8% (18)	21.1% (8)	30.4% (51)	25.5% (77)
Early pregnancy	3.1% (3)	10.5% (4)	17.9% (30)	12.3% (37)
Safety concerns (at school or on the way)	0.0% (0)	2.6% (1)	6.0% (10)	3.6% (11)
Lack of interest in school	44.8% (43)	36.8% (14)	48.2% (81)	45.7% (138)
Poor academic performance	7.3% (7)	10.5% (4)	20.2% (34)	14.9% (45)
Lack of parental support / value for girls' education	33.3% (32)	15.8% (6)	19.6% (33)	23.5% (71)
Lack of separate sanitation facilities (toilets) for girls at school	0.0% (0)	7.9% (3)	4.8% (8)	3.6% (11)
Distance to school	4.2% (4)	13.2% (5)	13.1% (22)	10.3% (31)
Peer pressure	7.3% (7)	2.6% (1)	11.9% (20)	9.3% (28)
Domestic violence	3.1% (3)	0.0% (0)	0.6% (1)	1.3% (4)
Phone distraction	2.1% (2)	0.0% (0)	5.4% (9)	3.6% (11)
Health reason	3.1% (3)	0.0% (0)	1.8% (3)	2.0% (6)
Due to romantic relationship	1.0% (1)	2.6% (1)	8.9% (15)	5.6% (17)
Prefer to work instead of continuing studies	4.2% (4)	0.0% (0)	0.6% (1)	1.7% (5)
Prefer not to answer	3.1% (3)	5.3% (2)	6.0% (10)	5.0% (15)

Ratanakiri

Reasons	Girl	Boy	Adolescent † (Selected "Others" as gender)	Adult parent / caregiver	Total respond.
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Lack of financial resources / fees	66.2% (45)	90.6% (48)	66.7% (2)	83.8% (114)	80.4% (209)
Family responsibilities / chores	25.0% (17)	11.3% (6)	0.0% (0)	23.5% (32)	21.2% (55)
Early marriage	19.1% (13)	13.2% (7)	100.0% (3)	25.0% (34)	21.9% (57)
Early pregnancy	2.9% (2)	1.9% (1)	0.0% (0)	0.7% (1)	1.5% (4)
Safety concerns (at school or on the way)	4.4% (3)	1.9% (1)	0.0% (0)	5.1% (7)	4.2% (11)
Lack of interest in school	27.9% (19)	15.1% (8)	66.7% (2)	19.9% (27)	21.5% (56)
Poor academic performance	19.1% (13)	9.4% (5)	0.0% (0)	8.1% (11)	11.2% (29)
Lack of parental support / value for girls' education	20.6% (14)	5.7% (3)	0.0% (0)	14.7% (20)	14.2% (37)
Lack of separate sanitation facilities (toilets) for girls at school	2.9% (2)	0.0% (0)	0.0% (0)	0.0% (0)	0.8% (2)
Distance to school	22.1% (15)	20.8% (11)	0.0% (0)	22.8% (31)	21.9% (57)
Peer pressure	19.1% (13)	5.7% (3)	33.3% (1)	7.4% (10)	10.4% (27)
Prefer not to answer	2.9% (2)	0.0% (0)	0.0% (0)	3.7% (5)	2.7% (7)

Other reasons (e.g. domestic violence, phone distraction, etc.) were not reported by the respondents in Ratanakiri.

**Q12. [All respondents] Are you aware of any support services or programmes in your school or community that help students, especially girls, stay in school?**

Mondulkiri

Awareness	Girl	Boy	Adult Parent / Caregiver	Total respondents
<b>Yes</b>	53.1% (51)	28.9% (11)	64.9% (109)	56.6% (171)
<b>No</b>	44.8% (43)	65.8% (25)	26.8% (45)	37.4% (113)
<b>Not sure</b>	0.0%	0.0%	0.6%	0.3%

	(0)	(0)	(1)	(1)
<b>Prefer not to answer</b>	2.1% (2)	5.3% (2)	7.7% (13)	5.6% (17)

Ratanakiri

<b>Awareness</b>	<b>Girl</b>	<b>Boy</b>	<b>Adolescent (Selected "Others" as gender)</b>	<b>Adult Parent / Caregiver</b>	<b>Total respondents</b>
<b>Yes</b>	8.8% (6)	11.3% (6)	0.0% (0)	22.8% (31)	16.5% (43)
<b>No</b>	82.4% (56)	84.9% (45)	100.0% (3)	71.3% (97)	77.3% (201)
<b>Prefer not to answer</b>	8.8% (6)	3.8% (2)	0.0% (0)	5.9% (8)	6.2% (16)

**Q13. [For girls and boys only] Are you currently doing any work to earn money (aside from your own housework or schooling)?**

Mondulkiri

<b>Currently working</b>	<b>Girl</b>	<b>Boy</b>	<b>Total respondents</b>
<b>Yes</b>	54.2% (52)	42.1% (16)	50.7% (68)
<b>No</b>	45.8% (44)	52.6% (20)	47.8% (64)
<b>Prefer not to answer</b>	0.0% (0)	2.6% (1)	0.7% (1)
<b>Missing response</b>	0.0% (0)	2.6% (1)	0.7% (1)

Ratanakiri

<b>Currently working</b>	<b>Girl</b>	<b>Boy</b>	<b>Total respondents</b>
<b>Yes</b>	54.1% (46)	36.0% (9)	50.0% (55)
<b>No</b>	45.9% (39)	60.0% (15)	49.1% (54)
<b>Missing response</b>	0.0% (0)	4.0% (1)	0.9% (1)

**Q14. [For girls and boys only] Do you personally own a mobile phone?**

Mondulkiri

Mobile phone	Girl	Boy	Total respondents
Yes	46.9% (45)	65.8% (25)	52.2% (70)
No	53.1% (51)	34.2% (13)	47.8% (64)

Ratanakiri

Mobile phone	Girl	Boy	Adolescent (Selected "Others" as gender)	Total respondents
Yes	69.1% (47)	49.1% (26)	33.3% (1)	59.7% (74)
No	30.9% (21)	49.1% (26)	66.6% (2)	39.5% (49)
Prefer not to answer	0.0% (0)	1.9% (1)	0.0% (0)	0.8% (1)

**Q15. [For girls and boys only, if they own a phone] Is your phone a smartphone (i.e. a phone that can connect to the internet)?**

Mondulkiri

Smart-phone	Girl	Boy	Total respondents
Yes	95.6% (43)	96.0% (24)	95.7% (67)
No	4.4% (2)	4.0% (1)	4.3% (3)

Ratanakiri

Smart-phone	Girl	Boy	Adolescent (Selected "Others" as gender)	Total respondents
Yes	91.5% (43)	96.2% (25)	100.0% (1)	
No	8.5% (4)	3.8% (1)	0.0% (0)	

**Q16. [For girls only] Do you feel comfortable speaking up and expressing your opinions or wishes in front of others, for example, with your family or in your community without fear?**

Mondulkiri

Comfort level	Girl
Very comfortable	44.8% (43)
Somewhat comfortable	28.1% (27)
Not sure	2.1% (2)
Not very comfortable	9.4% (9)
Not at all comfortable	13.5% (13)
Prefer not to answer	2.1% (2)

Ratanakiri

Comfort level	Girl
Very comfortable	30.9% (21)
Somewhat comfortable	38.2% (26)
Not sure	5.9% (4)
Not very comfortable	13.2% (9)
Not at all comfortable	10.3% (7)
Prefer not to answer	1.5% (1)

**Q17. [For girls and boys only] Have you ever received any information or education about sexual and reproductive health (e.g., puberty, menstruation, contraception, healthy relationships) from school, health workers, parents, or community programs?**

Mondulkiri

SRH information	Girl	Boy	Total respondents
<b>Yes</b>	70.8% (68)	50.0% (19)	64.9% (87)
<b>No</b>	27.1% (26)	47.4% (18)	32.8% (44)
<b>Not sure</b>	1.0% (1)	0.0% (0)	0.7% (1)
<b>Prefer not to answer</b>	1.0% (1)	2.6% (1)	1.5% (2)

Ratanakiri

SRH information	Girl	Boy	Adolescent (Selected "Others" as gender)	Total respondents
<b>Yes</b>	63.2% (43)	52.8% (28)	0.0% (0)	59.7% (74)
<b>No</b>	32.4% (22)	45.3% (24)	0.0% (0)	37.1% (46)
<b>Prefer not to answer</b>	4.4% (3)	1.9% (1)	100.0% (3)	3.2% (4)

**Q17a. Where did you receive this information? (Select all that apply)**

Mondulkiri

Source of SRH information	Girl	Boy	Total respondents
School (e.g. teacher)	55.2% (53)	39.5% (15)	50.7% (68)
Health <b>centre</b> / clinic	20.8% (20)	7.9% (3)	17.2% (23)
Parents / Guardians	16.7% (16)	10.5% (4)	14.9% (20)
Community leaders / programmes	3.1% (3)	7.9% (3)	4.5% (6)
Friends / Peers	5.2% (5)	0.0% (0)	3.7% (5)
Media (e.g. TV, radio, internet)	3.1% (3)	5.3% (2)	3.7% (5)
Organisations	4.2% (4)	0.0% (0)	3.0% (4)
Prefer not to answer	0.0% (0)	2.6% (1)	0.7% (1)

Ratanakiri

Source of SRH information	Girl	Boy	Total respondents
School (e.g. teacher)	55.2% (53)	39.5% (15)	50.7% (68)
Health <b>centre</b> / clinic	20.8% (20)	7.9% (3)	17.2% (23)
Parents / Guardians	16.7% (16)	10.5% (4)	14.9% (20)
Community leaders / programmes	3.1% (3)	7.9% (3)	4.5% (6)

Friends / Peers	5.2% (5)	0.0% (0)	3.7% (5)
Media (e.g. TV, radio, internet)	3.1% (3)	5.3% (2)	3.7% (5)
Organisations	4.2% (4)	0.0% (0)	3.0% (4)
Prefer not to answer	0.0% (0)	2.6% (1)	0.7% (1)

**Q18. [For girls and boys] If a young person needed information about sexual and reproductive health or services (like contraception, family planning), where would they go to get reliable information or help? (Select all that apply)**

Mondulkiri

Reliable source of SRH information	Girl	Boy	Total respondents
School (e.g. teacher)	25.0% (24)	10.5% (4)	20.9% (28)
Health <b>centre</b> / clinic	58.3% (56)	31.6% (12)	50.7% (68)
Parents / Guardians	41.7% (40)	15.8% (6)	34.3% (46)
Community leaders / programmes	5.2% (5)	5.3% (2)	5.2% (7)
Friends / Peers	5.2% (5)	0.0% (0)	3.7% (5)
Media (e.g. TV, radio, internet)	2.1% (2)	10.5% (4)	4.5% (6)
Others	7.3% (7)	15.8% (6)	9.7% (13)
I don't know	3.1% (3)	13.2% (5)	6.0% (8)
Prefer not to answer	10.4% (10)	15.8% (6)	11.9% (16)

Ratanakiri

Reliable source of SRH information	Girl	Boy	Adolescent (Selected "Others" as gender)	Total respondents
School (e.g. teacher)	4.4% (3)	7.5% (4)	0.0% (0)	5.6% (7)
Health <b>centre</b> / clinic	48.5% (33)	69.8% (37)	66.7% (2)	58.1% (72)
Parents / Guardians	17.6% (12)	20.8% (11)	33.3% (1)	19.4% (24)

Community leaders / programmes	4.4% (3)	0.0% (0)	0.0% (0)	2.4% (3)
Friends / Peers	7.4% (5)	3.8% (2)	0.0% (0)	5.6% (7)
Media (e.g. TV, radio, internet)	5.9% (4)	3.8% (2)	0.0% (0)	4.8% (6)
Others	0.0% (0)	5.7% (3)	0.0% (0)	2.4% (3)
I don't know	23.5% (16)	15.1% (8)	33.3% (1)	20.2% (25)
Prefer not to answer	14.7% (10)	13.2% (7)	0.0% (0)	13.7% (17)

**Q19. [For girls only] Have you heard of any ways in which men and women can prevent or delay a pregnancy until they are ready to have a child?**

Mondulkiri

Heard of contraceptive methods	Girl
Yes	53.1% (51)
No	38.5% (37)
Prefer not to answer	7.3% (7)
Missing responses	1.0% (1)

Ratanakiri

Heard of contraceptive methods	Girl
Yes	42.6% (29)
No	48.5% (33)
Prefer not to answer	8.8% (6)

**Q19a. If Yes: Which methods have you heard of?**

Mondulkiri

Types of contraceptive methods	Girl
Birth control pills	43.8% (42)

Condoms	16.7% (16)
Injectable contraceptives	12.5% (12)
IUD / Implant	5.2% (5)
Emergency contraception	0.0% (0)
Abstinence	3.1% (3)
Others	5.2% (5)
Prefer not to answer	0.0% (0)

Ratanakiri

Types of contraceptive methods	Girl
Birth control pills	39.7% (27)
Condoms	19.1% (13)
Injectable contraceptives	13.2% (9)
IUD / Implant	5.9% (4)
Emergency contraception	2.9% (2)
Abstinence	1.5% (1)
Others	0.0% (0)
Prefer not to answer	0.0% (0)

**Q20. [For girls only] Can using a condom during sexual intercourse help protect against HIV/AIDS and other sexually transmitted infections (STIs)?**

Mondulkiri

Can a condom prevent HIV/STIs?	Girl
Yes	52.1% (50)
No	26.0% (25)
Not sure	14.6% (14)

Prefer not to answer	7.3% (7)
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Ratanakiri

Can a condom prevent HIV/STIs?	Girl
Yes	58.8% (40)
No	10.3% (7)
Not sure	22.1% (15)
Prefer not to answer	8.8% (6)

**Q21. [For girls only] Do you think a healthy-looking person can be infected with HIV?**

Mondulkiri

Can a condom prevent HIV/STIs?	Girl
Yes	34.4% (33)
No	54.2% (52)
Not sure	8.3% (8)
Prefer not to answer	3.1% (3)

Ratanakiri

Can a condom prevent HIV/STIs?	Girl
Yes	25.0% (17)
No	30.9% (21)
Not sure	41.2% (28)
Prefer not to answer	2.9% (2)

**Q22. [All respondents] In your opinion, what are the main consequences for a teenage girl who becomes pregnant in this community? (Select all that apply)**

Mondulkiri

Consequences of teenage pregnancy	Girl	Boy	Adult Parent / Caregiver	Total respondents
Drops out of school	70.8% (68)	60.5% (23)	59.5% (100)	63.2% (191)
Faces social stigma / shame	34.4% (33)	26.3% (10)	23.2% (39)	27.2% (82)
Has limited future opportunities (education, work)	18.8% (18)	13.2% (5)	21.4% (36)	19.5% (59)
Experiences health risks for herself and the baby	46.9% (45)	63.2% (24)	63.7% (107)	58.3% (176)
Is pressured to marry	12.5% (12)	7.9% (3)	22.0% (37)	17.2% (52)
Has difficulty finding employment	4.2% (4)	26.3% (10)	17.9% (30)	14.6% (44)
No significant consequences	0.0% (0)	0.0% (0)	2.4% (4)	1.3% (4)
Others	17.7% (17)	7.9% (3)	27.4% (46)	21.9% (66)
Prefer not to answer	4.2% (4)	10.5% (4)	11.3% (19)	8.9% (27)

#### Ratanakiri

Consequences of teenage pregnancy	Girl	Boy	Adolescent (Selected "Others" as gender)	Adult Parent / Caregiver	Total respond.
Drops out of school	42.6% (29)	47.2% (25)	66.7% (2)	35.3% (48)	40.0% (104)
Faces social stigma / shame	25.0% (17)	11.3% (6)	66.7% (2)	14.7% (20)	17.3% (45)
Has limited future opportunities (education, work)	10.3% (7)	1.9% (1)	33.3% (1)	8.1% (11)	7.7% (20)
Experiences health risks for herself and the baby	57.4% (39)	20.8% (11)	100.0% (3)	66.9% (91)	55.4% (144)
Is pressured to marry	7.4% (5)	1.9% (1)	33.3% (1)	3.7% (5)	4.6% (12)

Has difficulty finding employment	16.2% (11)	5.7% (3)	66.7% (2)	14.7% (20)	13.8% (36)
No significant consequences	7.4% (5)	13.2% (7)	0.0% (0)	4.4% (6)	6.9% (18)
Others	14.7% (10)	13.2% (7)	0.0% (0)	5.9% (8)	9.6% (25)
Prefer not to answer	11.8% (8)	17.0% (9)	0.0% (0)	15.4% (21)	14.6% (38)

**Q23. [All respondents] Imagine a village like yours. If there were 10 girls who are 18 years old, how many of them do you think have already been married?**

Mondulkiri

No. of girls	Girl	Boy	Adult parent / caregiver	Total
<b>Mean</b>	4.5	4.0	4.7	4.6
<b>Median</b>	5.0	4.0	4.0	4.0
<b>Min</b>	0.0	0.0	0.0	0.0
<b>Max</b>	10.0	9.0	10.0	10.0
<b>Responses</b>	93	29	148	270
<b>Missing responses</b>	3	9	20	32

Ratanakiri

No. of girls	Girl	Boy	Adolescent (Selected "Others" as gender)	Adult parent / caregiver	Total
<b>Mean</b>	5.8	5.8	4.0	5.4	5.6
<b>Median</b>	5.0	6.0	4.0	5.0	5.0
<b>Min</b>	1.0	0.0	3.0	0.0	0.0
<b>Max</b>	10.0	10.0	5.0	10.0	10.0
<b>Responses</b>	45	43	2	112	202
<b>Missing responses</b>	23	10	1	24	58

**Q24. [All respondents] Imagine that there is a girl called Chan in the village. She is 15 years old. Out of 100 people in the village, how many do you think would find it acceptable for Chan to get married before 18 years old?**

Mondulkiri

No. of ppl	Girl	Boy	Adult parent / caregiver	Total
Mean	14.3	23.2	16.3	16.4
Median	5.0	20.0	0.0	4.0
Min	0.0	0.0	0.0	0.0
Max	100.0	100.0	100.0	100.0
Responses	93	29	152	274
Missing responses	3	9	16	28

Ratanakiri

No. of girls	Girl	Boy	Adolescent (Selected "Others" as gender)	Adult parent / caregiver	Total
Mean	40.7	55.3	25.0	44.9	45.8
Median	30.0	60.0	25.0	40.0	50.0
Min	0.0	10.0	20.0	0.0	0.0
Max	100.0	100.0	30.0	100.0	100.0
Responses	49	41	2	110	202
Missing responses	19	12	1	26	58

**Q25. [All respondents] In your opinion, who should have the final say on when a girl/boy gets married?**

Mondulkiri

Who have the final say	Girl	Boy	Adult Parent / Caregiver	Total respondents
<b>Their parents or family</b>	53.1% (51)	57.9% (22)	68.5% (115)	62.3% (188)
<b>The girl (or boy) themselves</b>	40.6% (39)	28.9% (11)	20.8% (35)	28.1% (85)
<b>Both the young person and their parents together</b>	6.2% (6)	2.6% (1)	7.1% (12)	6.3% (19)
<b>Someone else</b>	0.0% (0)	0.0% (0)	1.8% (3)	1.0% (3)
<b>Prefer not to answer</b>	0.0% (0)	10.5% (4)	1.8% (3)	2.3% (7)

Ratanakiri

Who have the final say	Girl	Boy	Adolescent (Selected "Others" as gender)	Adult Parent / Caregiver	Total respond.
<b>Their parents or family</b>	45.6% (31)	34.0% (18)	66.7% (2)	32.4% (44)	36.5% (95)
<b>The girl (or boy) themselves</b>	26.5% (18)	54.7% (29)	0.0% (0)	45.6% (62)	41.9% (109)
<b>Both the young person and their parents together</b>	20.6% (14)	9.4% (5)	33.3% (1)	16.9% (23)	16.5% (43)
<b>Someone else</b>	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
<b>Prefer not to answer</b>	7.4% (5)	1.9% (1)	0.0% (0)	5.1% (7)	5.0% (13)

**Q26. [All respondents] On a scale of 1 to 4, 1 being not at all common and 4 being very common, how common is it for girls or women in your community to face challenges when they choose not to marry someone selected by their family?**

Mondulkiri

Commonality of challenges	Girl	Boy	Adult Parent / Caregiver	Total respondents
<b>Very common</b>	31.2% (30)	34.2% (13)	13.1% (22)	21.5% (65)
<b>Somewhat common</b>	18.8% (18)	26.3% (10)	29.8% (50)	25.8% (78)
<b>Not very common</b>	12.5% (12)	2.6% (1)	16.7% (28)	13.6% (41)
<b>Not at all common</b>	34.4% (33)	15.8% (6)	32.7% (55)	31.1% (94)
<b>Don't know / Prefer not to answer</b>	3.1% (3)	21.1% (8)	7.7% (13)	7.9% (24)

Ratanakiri

Commonality of challenges	Girl	Boy	Adolescent (Selected "Others" as gender)	Adult Parent / Caregiver	Total respond.
<b>Very common</b>	27.9% (19)	18.9% (10)	0.0% (0)	33.1% (45)	28.5% (74)
<b>Somewhat common</b>	33.8% (23)	45.3% (24)	100.0% (0)	34.6% (47)	37.3% (97)

<b>Not very common</b>	13.2% (9)	20.8% (11)	0.0% (0)	11.8% (16)	13.8% (36)
<b>Not at all common</b>	10.3% (7)	3.8% (2)	0.0% (0)	4.4% (6)	5.8% (15)
<b>Don't know / Prefer not to answer</b>	14.7% (10)	11.3% (6)	0.0% (0)	16.2% (22)	14.6% (38)

**Q26a. [If answered 'Somewhat common' or 'Very common'] What kind of challenges or difficulties do you think they face?**

Mondulkiri

Types of challenges	Girl	Boy	Adult Parent / Caregiver	Total respondents
<b>Pressure / coercion from family</b>	97.9% (47)	69.6% (16)	63.9% (46)	76.2% (109)
<b>Social isolation / shame</b>	2.1% (1)	8.7% (2)	18.1% (13)	11.2% (16)
<b>Physical violence</b>	16.7% (8)	21.7% (5)	19.4% (14)	18.9% (27)
<b>Emotional / psychological abuse</b>	22.9% (11)	69.6% (16)	36.1% (26)	37.1% (53)
<b>Financial withdrawal of support</b>	6.2% (3)	0.0% (0)	4.2% (3)	4.2% (6)
<b>Threats</b>	10.4% (5)	13.0% (3)	16.7% (12)	14.0% (20)
<b>Legal</b>	0.0% (0)	0.0% (0)	4.2% (3)	2.1% (3)
<b>Others</b>	8.3% (4)	0.0% (0)	25.0% (18)	15.4% (22)
<b>Prefer not to answer</b>	0.0% (0)	0.0% (0)	2.8% (2)	1.4% (2)

Ratanakiri

Types of challenges	Girl	Boy	Adolescent (Selected "Others" as gender)	Adult Parent / Caregiver	Total respond.
<b>Pressure / coercion from family</b>	71.4% (30)	73.5% (25)	66.7% (2)	68.5% (63)	70.2% (120)
<b>Social isolation / shame</b>	9.5% (4)	0.0% (0)	0.0% (0)	12.0% (11)	8.8% (15)
<b>Physical violence</b>	31.0% (13)	29.4% (10)	33.3% (1)	27.2% (25)	28.7% (49)

<b>Emotional / psychological abuse</b>	59.5% (25)	55.9% (19)	66.7% (2)	54.3% (50)	56.1% (96)
<b>Financial withdrawal of support</b>	11.9% (5)	0.0% (0)	0.0% (0)	5.4% (5)	5.8% (10)
<b>Threats</b>	28.6% (12)	20.6% (7)	0.0% (0)	30.4% (28)	27.5% (47)
<b>Legal</b>	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)	1.2% (2)
<b>Others</b>	2.4% (1)	2.9% (1)	0.0% (0)	0.0% (0)	0.0% (0)
<b>Prefer not to answer</b>	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)

**Q27. [For girls only] If someone wanted you to get married before you turned 18 years old, but you did not want to, how confident would you feel in resisting or saying no to that marriage?**

Mondulkiri

<b>Confidence in saying no</b>	<b>Girl</b>
Very confident	82.3% (79)
Somewhat confident	12.5% (12)
Not sure	1.0% (1)
Not very confident	1.0% (1)
Not at all confident	1.0% (1)
Prefer not to answer	0.0% (0)
Missing responses	2.1% (2)

Ratanakiri

<b>Confidence in saying no</b>	<b>Girl</b>
Very confident	35.3% (24)
Somewhat confident	36.8% (25)
Not sure	10.3% (7)
Not very confident	7.4% (5)

Not at all confident	1.5% (1)
Prefer not to answer	0.0% (0)
Missing responses	8.8% (6)

**Q28. [For girls and boys only] In your opinion, is a husband justified in hitting or beating his wife in the following situations?**

**Q28a. If she goes out without telling him?**

Mondulkiri

Justified in hitting wife?	Girl	Boy	Total respondents
Yes	51.0% (49)	47.4% (18)	50.0% (67)
No	47.9% (46)	47.4% (18)	47.8% (64)
Prefer not to answer	1.0% (1)	5.3% (2)	2.2% (3)

Ratanakiri

Justified in hitting wife?	Girl	Boy	Adolescent (Selected "Others" as gender)	Total respondents
Yes	33.8% (23)	56.6% (30)	33.3% (1)	43.5% (54)
No	60.3% (41)	32.1% (17)	66.7% (2)	48.4% (60)
Prefer not to answer	5.9% (4)	11.3% (6)	0.0% (0)	8.1% (10)

**Q28b. If she neglects the children?**

Mondulkiri

Justified in hitting wife?	Girl	Boy	Total respondents
Yes	64.6% (62)	71.1% (27)	66.4% (89)
No	35.4% (34)	28.9% (11)	33.6% (45)

Ratanakiri

Justified in hitting wife?	Girl	Boy	Adolescent (Selected "Others" as gender)	Total respondents
Yes	42.6% (29)	69.8% (37)	100.0% (3)	55.6% (69)
No	52.9% (36)	17.0% (9)	0.0% (0)	36.3% (45)
Prefer not to answer	4.4% (3)	13.2% (7)	0.0% (0)	8.1% (10)

### Q28c. If she refuses to have sex with him?

Mondulkiri

Justified in hitting wife?	Girl	Boy	Total respondents
Yes	30.2% (29)	42.1% (16)	33.6% (45)
No	64.6% (62)	50.0% (19)	60.4% (81)
Prefer not to answer	5.2% (5)	7.9% (3)	6.0% (8)

Ratanakiri

Justified in hitting wife?	Girl	Boy	Adolescent (Selected "Others" as gender)	Total respondents
Yes	38.2% (26)	45.3% (24)	33.3% (1)	41.1% (51)
No	51.5% (35)	37.7% (20)	66.7% (2)	46.0% (57)
Prefer not to answer	10.3% (7)	17.0% (9)	0.0% (0)	12.9% (16)

### Q28d. If she burns the food?

Mondulkiri

Justified in hitting wife?	Girl	Boy	Total respondents
Yes	31.2% (30)	47.4% (18)	35.8% (48)
No	66.7% (64)	50.0% (19)	61.9% (83)
Prefer not to answer	2.1%	2.6%	2.2%

	(2)	(1)	(3)
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Ratanakiri

Justified in hitting wife?	Girl	Boy	Adolescent (Selected "Others" as gender)	Total respondents
Yes	32.4% (22)	50.9% (27)	66.7% (2)	41.1% (51)
No	63.2% (43)	35.8% (19)	33.3% (1)	50.8% (63)
Prefer not to answer	4.4% (3)	13.2% (7)	0.0% (0)	8.1% (10)

### Q28e. Other

Mondulkiri

Justified in hitting wife?	Girl	Boy	Total respondents
Yes	1.0% (1)	0.0% (0)	0.7% (1)
No	1.0% (1)	2.6% (1)	1.5% (2)
No response (most respondents didn't choose 'Others')	97.9% (94)	97.4% (37)	97.8% (131)

Ratanakiri

Justified in hitting wife?	Girl	Boy	Adolescent (Selected "Others" as gender)	Total respondents
Yes	1.5% (1)	1.9% (1)	0.0% (0)	1.6% (2)
No	2.9% (2)	0.0% (0)	0.0% (0)	1.6% (2)
Prefer not to answer	1.5% (1)	1.9% (1)	0.0% (0)	1.6% (2)
No response (most respondents didn't choose 'Others')	94.1% (64)	96.2% (51)	100.0% (3)	95.2% (118)

**Q29. [All respondents] If you found out that someone under 18 in your community was going to be married, would you know how to report it or seek help to prevent it?**

Mondulkiri

Know how to report?	Girl	Boy	Adult Parent / Caregiver	Total respondents
Yes	40.6% (39)	57.9% (22)	50.6% (85)	48.3% (146)
No	53.1% (51)	39.5% (15)	36.3% (61)	42.1% (127)
Not sure	3.1% (3)	2.6% (1)	8.3% (14)	6.0% (18)
Prefer not to answer	3.1% (3)	0.0% (0)	4.8% (8)	3.6% (111)

Ratanakiri

Know how to report?	Girl	Boy	Adolescent (Selected "Others" as gender)	Adult Parent / Caregiver	Total respond.
Yes	25.0% (17)	50.9% (27)	0.0% (0)	39.0% (53)	37.3% (97)
No	42.6% (29)	22.6% (12)	66.7% (2)	40.4% (55)	37.7% (98)
Not sure	19.1% (13)	20.8% (11)	33.3% (1)	16.9% (23)	18.5% (48)
Prefer not to answer	13.2% (9)	5.7% (3)	0.0% (0)	3.7% (5)	6.5% (17)

**Q29a. [If Yes] Where would you go or who would you contact?**

Mondulkiri

Who to report to?	Girl	Boy	Adult Parent / Caregiver	Total respondents
Local authorities (e.g. village chief, police)	87.2% (34)	72.7% (16)	87.1% (74)	84.9% (124)
Social welfare services	0.0% (0)	0.0% (0)	1.2% (1)	0.7% (1)
NGOs/Community organisations	15.4% (6)	9.1% (2)	11.8% (10)	12.3% (18)
Religious leaders	7.7% (3)	0.0% (0)	0.0% (0)	2.1% (3)
School	20.5% (8)	4.5% (1)	1.2% (1)	6.8% (10)

Parents / Guardians of the child	17.9% (7)	50.0% (11)	21.2% (18)	24.7% (36)
Neighbours	2.6% (1)	4.5% (1)	1.2% (1)	2.1% (3)
Relatives	7.7% (3)	0.0% (0)	1.2% (1)	2.7% (4)
Don't report	0.0% (0)	0.0% (0)	2.4% (2)	1.4% (2)
Others	10.3% (4)	4.5% (1)	16.5% (14)	13.0% (19)

#### Ratanakiri

Who to report to?	Girl	Boy	Adult Parent / Caregiver	Total respond.
Local authorities (e.g. village chief, police)	88.2% (15)	88.9% (24)	86.8% (46)	87.6% (85)
Social welfare services	5.9% (1)	3.7% (1)	3.8% (2)	4.1% (4)
NGOs/ Community organisations	17.6% (3)	33.3% (9)	9.4% (5)	17.5% (17)
Religious leaders	5.9% (1)	0.0% (0)	0.0% (0)	1.0% (1)
School	11.8% (2)	3.7% (1)	3.8% (2)	5.2% (5)
Parents / Guardians of the child	52.9% (9)	18.5% (5)	28.3% (15)	29.9% (29)
Neighbours	0.0% (0)	0.0% (0)	0.0% (0)	1.0% (1)
Relatives	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
Don't report	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
Others	0.0% (0)	3.7% (1)	0.0% (0)	0.0% (0)



## Annex 6. Summary Table: Comparison of the Two Provinces across Key Indicators

Indicator	Mondulkiri	Ratanakiri
<b>Economics and Education</b>		
<b>School Retention</b>	<b>Higher Retention (82.1%)</b> 41.0% of adolescents are both studying and working simultaneously; 7.5% are doing neither.	<b>Lower Retention (70.2%)</b> 23.4% of adolescents are both studying and working simultaneously; 16.9% are doing neither.
<b>Awareness of Support Services</b>	<b>Moderate Awareness (56.6%)</b> Over half of respondents know help exists. However, boys lag behind girls (28.9% vs 53.1%) in awareness.	<b>Critical Awareness gap (16.5%)</b> The vast majority are unaware of any support services.
<b>Primary Sources of Support</b>	<b>Schools (34.5%) &amp; Village Heads (17.0%)</b> Lower reliance on NGOs (16.4%). Financial aid is the dominant method.	<b>Schools (44.2%) &amp; NGOs (32.6%)</b> Significantly higher reliance on non-governmental organisations. Financial aid is the dominant method.
<b>Cultural beliefs and attitudes about social and gender norms</b>		
<b>Perceived Prevalence of CEFM</b>	<b>Lower perceived prevalence</b> Estimated that 46% of girls would have been married by age 18	<b>Higher perceived prevalence</b> Estimated that 56% of girls would have been married by age 18
<b>Perceived Community Approval of CEFM</b>	<b>Significantly lower community approval</b> Estimated only 16.4% of people would find child marriage acceptable	<b>Higher community approval</b> Estimated that 45.8% of people would find child marriage acceptable
<b>Marriage Decision-making</b>	<b>Parent-Driven</b> 62.3% believe parents/family should have the final say.	<b>Adolescent-Driven</b> 41.9% believe the child should decide (v.s. 36.5% for parents)
<b>Girls' Agency to Refuse Marriage</b>	<b>High Agency</b> 82.3% of girls feel 'Very Confident' they can refuse early marriage.	<b>Low Agency</b> Only 35.3% of girls feel 'Very Confident' in refusing.

<b>Consequences of Refusing Family-Selected Partner</b>	<p><b>Lower likelihood of challenges, which is primarily family pressure.</b></p> <p>46.3% perceived it to be 'Somewhat' or 'Very common' for girls to face challenges if they refuse.</p> <p>Primary challenge is pressure; less likely to escalate to violence</p>	<p><b>Higher likelihood of challenges, which are more punitive &amp; abusive in nature.</b></p> <p>65.8% perceived it to be 'Somewhat' or 'Very common' for girls to face challenges if they refuse.</p> <p>Higher reports of emotional abuse (56.1%) and threats of physical violence (28.7%)</p>
<b>Attitudes towards Intimate Partner Violence</b>	<p><b>Higher acceptance</b></p> <p>79.7% of adolescents believed that IPV is justified in at least one of the five specified scenarios.</p>	<p><b>Slightly lower acceptance</b></p> <p>66.9% of adolescents believed that IPV is justified in at least one of the five specified scenarios.</p>
<b>Knowledge, awareness, and enforcement related to laws, sexual and reproductive health education, and other programmes</b>		
<b>SRH/HIV Knowledge Pattern</b>	<p><b>Confident Incorrectness</b></p> <p>Girls are more likely to give definitive but wrong answers (e.g. 54.2% incorrectly believe appearance indicates HIV status).</p>	<p><b>High Uncertainty</b></p> <p>Girls are more likely to answer, "Not sure" (e.g. 41.2% unsure about HIV symptoms).</p>
<b>Teen Pregnancy &amp; Stigma</b>	<p><b>Higher Stigma &amp; Pressure to Marry</b></p> <p>Pregnancy is a significant pressure point; marriage might be seen as the necessary solution to "shame."</p>	<p><b>Lower Relative Stigma &amp; Pressure to Marry</b></p> <p>Main concerns are around health risks and dropping out from school.</p>
<b>Knowledge of Help-Seeking Avenues</b>	<p><b>Higher awareness</b></p> <p>48.3% reported knowing how to report a potential CEFM.</p>	<p><b>Lower awareness</b></p> <p>37.3% reported knowing how to report.</p>
<b>Digital literacy and exposure</b>		
<b>Possession of mobile phone</b>	<p><b>Marginally Lower Mobile Ownership</b></p> <p>52.2% of adolescents own a mobile phone.</p>	<p><b>Higher Mobile Ownership</b></p> <p>59.7% of adolescents own a mobile phone.</p>

# Annex 7. Journey Map Workshop Outputs

Below are the filled group activity sheets that were used to brainstorm the journey map during the Journey Mapping Workshop.

## Group 1:



## Group 2:





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