

TIPPING POINT



**Reflecting on a Decade of Ending
Child Marriage and Empowering
Girls in Leadership.**

TIPPING POINT: 10 YEAR REFLECTION REPORT

LIST OF ACRONYMS

ASRHR: Adolescent Sexual and Reproductive Health Rights AWG:

Adolescent Working Group AWO: Arab Women's Organization

CEFM: Child, Early and Forced Marriages

CIGN: CARE International Gender Network

CSO: Community Service Organizations

CWIN: Child Workers in Nepal

ECOWAS: Economic Community of West African States

EVAW: Ending Violence Against Women

GBV: Gender Based Violence

GNB: Girls Not Brides

MEL: Monitoring Evaluation & Learning

MENA: Middle East and North Africa

MMD: Mata Masa Dubara

OSIWA: Open Society Initiative for West Africa

RCT: Randomized Control Trial

SAA: Social Analysis & Action

SNAP: Social Norms Analysis Plot

SDGs: Sustainable Development Goals

VCPC: Village Child Protection Committee

VSLA: Village Savings and Loan Association

UNFPA: United Nations Fund for Population Activities

UNICEF: United Nations International Children Emergency Fund

UN OHCHR: United Nations Office of the High Commissioner for Human Rights

VCPC: Village Child Protection Committee

VSLA: Village Savings and Loan Association

WACSI: West Africa Civil Society Institute

WRO: Women's Rights Organizations



**Tipping Point
Initiative, CARE.**

**Funded by The
Kendeda Fund**

EXECUTIVE SUMMARY

The Tipping Point Program, launched by CARE, has spanned a decade of dedicated efforts to address Child, Early, and Forced Marriage (CEFM) through a comprehensive, multi-phase approach. This 10-year reflection report provides an in-depth overview of the program's evolution, strategic initiatives, key partnerships, and transformative impacts across Nepal, Bangladesh, and other regions.

Program Evolution and Strategic Approach

The Tipping Point Program was designed in three distinct phases, each building on the lessons and successes of the previous one. Phase 1 (2013-2017) focused on community engagement and foundational interventions, establishing girls' collectives and initiating dialogues on gender norms. Phase 2 (2018-2022) expanded these efforts, incorporating a robust Theory of Change (TOC) and Theory of Action (TOA) to guide targeted strategies and activities. Phase 3 (2023-2027) has emphasized strategic partnerships, coalition building, and adaptive management to scale the impact and ensure sustainable change.

Key Achievements

- 1. Empowering Adolescent Girls:** Throughout the program, Tipping Point has empowered thousands of adolescent girls by enhancing their psychosocial skills, knowledge of rights, and social capital. Safe spaces, life skills education, and leadership training have enabled girls to advocate for themselves and make informed decisions about their lives.
- 2. Shifting Social Norms:** The program has effectively shifted harmful social norms by engaging boys, parents, and community leaders in reflective dialogues and capacity-building sessions. Activities like girls' football teams and drama troupes have increased girls' visibility and mobility, challenging traditional gender roles.
- 3. Influencing Policy and Advocacy:** Tipping Point has played a critical role in influencing policy and advocacy efforts at national and international levels. The program has collaborated with coalitions such as Girls Not Brides (GNB) and engaged in global forums to push for holistic strategies addressing CEFM. In Bangladesh and Nepal, partnerships with local NGOs and government bodies have led to significant policy advancements to sustain project impacts..
- 4. Building Evidence and Learning:** A strong emphasis on Monitoring, Evaluation, and Learning (MEL) has been integral to Tipping Point's success. The program developed a mixed-methods monitoring toolkit, conducted baseline studies, and utilized innovative methodologies like Outcome Harvesting and Most Significant Change (MSC) to track progress and adapt strategies. In addition, impacts of the CARE TPI on girls' multifaceted agency and risk of CEFM was assessed through randomized control trials in Nepal and Bangladesh.



5. **Strengthening Partnerships:** Tipping Point has forged strategic partnerships with grassroots organizations, women’s rights groups, and international coalitions. These collaborations have provided platforms and mentorship for girls, expanded advocacy efforts, and supported the integration of gender-transformative approaches within CARE and beyond.

6. **Girls in Action Model** As experts in their lived realities, adolescent girls present powerful potential to lead critical change in their communities. The Girls in Action Model leverages this understanding to create a space that nurtures and empowers girls as leaders and decision-makers. Guided by materials and processes developed through the Tipping Point Program adolescent girls are equipped to lead norms change and be supported by their allies, taking existing programming a step further for more sustainable impact on girls’ lives and the norms that impact them.

Challenges and Lessons Learned

While the program has achieved significant milestones, it has also faced challenges such as cultural resistance, resource constraints, and the complexities of influencing deeply entrenched social norms. Key lessons learned include the importance of adaptive management, the need for continuous stakeholder engagement, and the value of integrating girls’ voices into every aspect of the program.

Future Directions

Over the past decade, CARE’s Tipping Point Program has made significant strides in empowering adolescent girls, shifting harmful social norms, and influencing policy to address CEFM. This 10-year reflection highlights the program’s transformative impact and outlines a forward-looking vision for continued progress in the fight against child marriage and gender inequality.



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TABLE OF CONTENTS

1. INTRODUCTION	6
• <u>Root Causes of Child Early & Forced Marriage</u>	6
• <u>What is the Tipping Point Project?</u>	7
• <u>Tipping Point's Vision</u>	7
• <u>Tipping Points 3 Phases Regions of Focus: South Asia, MENA and West Africa</u>	8
2. PHASE 1: THE ROAD TO INNOVATION AND LEARNING	10
<u>Program Implementation</u>	10
• <u>Shifting from Individual Action to Collective Action</u>	11
• <u>Pushing Boundaries of Working on Sexual and Reproductive Rights with Adolescents</u>	12
• <u>Strengthening Advocacy Efforts</u>	12
• <u>Evaluation and Findings</u>	13
• <u>Psychosocial Skills and Knowledge of Rights</u>	14
• <u>Increased Mobility and Visibility</u>	14
• <u>Products Developed and Disseminated</u>	15
• <u>Tipping Point Innovation Series</u>	16
3. PHASE 2: BUILDING EVIDENCE FOR SOCIAL NORMS CHANGE	17
<u>Program Implementation</u>	17
• <u>Building Girls Agency</u>	19
• <u>Building evidence</u>	21
• <u>Strengthening Advocacy Efforts</u>	21
• <u>US Government Advocacy</u>	23
• <u>Global Advocacy</u>	23
• <u>Products Developed and Disseminated</u>	24
4. PHASE 3: LEVERAGING INNOVATION FOR IMPACT AT SCALE	26
<u>Program Implementation</u>	26
• <u>Strengthening Influence and Advocacy Through Partnerships</u>	27
• <u>Developing Evidence Based Policies and Strategies</u>	28
• <u>Milestones and Pathways to Ensure Accountability</u>	29
• <u>Evaluation, Learnings and Findings</u>	29
• <u>Products Developed and Disseminated</u>	30
5. LOOKING AHEAD	32
<u>Resources</u>	32

INTRODUCTION

Globally, an estimated 15 million girls under the age of 18 are married annually, often with little or no input into the decision. Compared to their unmarried peers or older women, girls who marry before 18 are less likely to complete primary school, more likely to experience unwanted pregnancies, and face greater risks of sexual and reproductive health issues and maternal mortality and Gender Based Violence (UNICEF 2021). Child marriage imposes parental and domestic responsibilities on adolescents before they are physically, emotionally, and psychologically prepared, hindering them from leading healthy and productive lives.

Root Causes for Child Early and Forced Marriage

Child, Early, and Forced Marriage (CEFM) remains a pervasive issue worldwide, despite numerous legal frameworks established to prevent it. This practice is driven by a complex interplay of social norms, cultural practices, and systemic inequalities. Globally, an estimated 10% of women aged 20-24 were married by age 15, and 37% by age 18 (UNICEF 2021). While boys can also be affected, they generally marry later than girls, underscoring the gender disparity in the practice. Root causes of CEFM contribute to the persistence of this harmful tradition.

Table 1: 7 Root Causes for Child Early & Forced Marriage

Social Norms and Cultural Practices	Dowry expectations, emphasis on girls' purity, and marital relationships that promote hegemonic masculinity. Parents prioritize securing good suitors for their daughters over their education and professional development. Belief that delaying marriage will reduce prospects of finding suitable husbands and resulting in social ostracism.
Deprivation of Educational Opportunities	Many girls are never enrolled in school because either parents do not see the value in it or the distance to primary and secondary school. Most of these schools are located far from their villages which then reduce time for household chores, increases costs for the family, and increase the girls vulnerability.
Domestic and Care Work	Substantial amount of time on household work, such as cooking, cleaning, washing clothes, and caring for siblings fall. This labor, deemed 'women's work,' is less visible and socially undervalued compared to income-generating work. The extensive domestic responsibilities hinder girls from their studies or personal development.
Communication Barriers	Adolescent girls and boys in many communities struggle to communicate openly with their parents or other adults about their future aspirations. As a result, adolescent girls find it challenging to share their dreams and aspirations with their parents and advocate for delayed marriage, which increases the prevalence of CEFM.
Fear of Inter-Caste and Love Marriages	Love and inter-caste marriages are still sources of significant shame for girls and their families, despite a slight shift towards greater social acceptance. Parents, fearing social disgrace, prefer to marry their children early to prevent elopement and preserve family honor.
Gender Disparity	CEFM is rooted in deeply entrenched gender inequality and patriarchal structures, which perpetuate the subjugation of girls and women. Discrimination based on sex and gender begins at birth, depriving girls of their childhood and subjecting them to various forms of injustice, including CEFM.



Girls are taken as burdens in our society. As soon as we are born, our parents start saving for our dowry. When we are married young, they have to give less dowry, so we are forced to marry early to save dowry and lessen family burden.” Adolescent Girl, Kapilvastu

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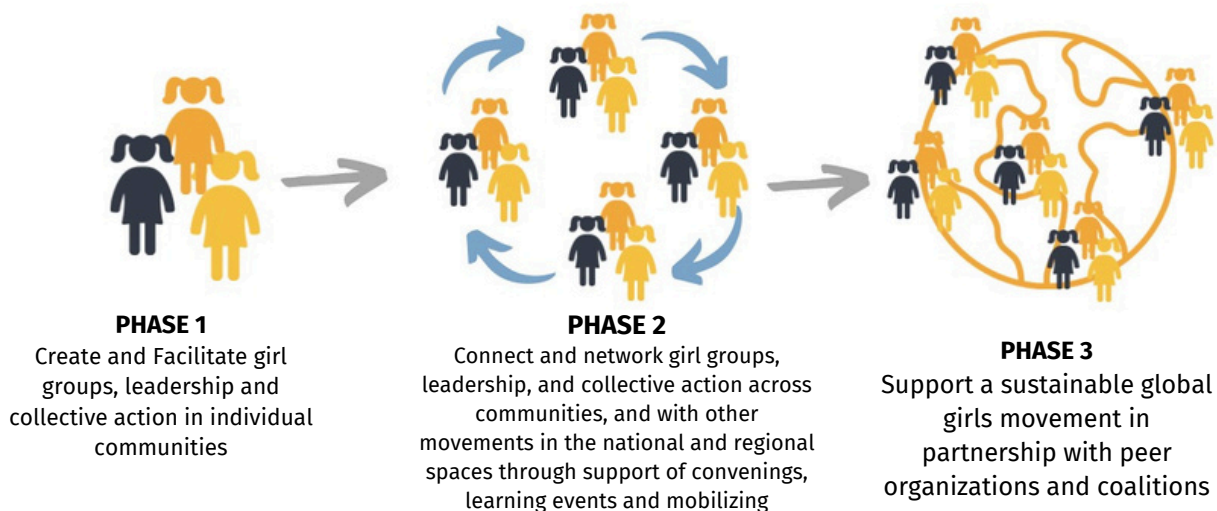
What is Tipping Point?

Tipping point is a multi-country initiative addressing child marriage by focusing on its root causes. We see child marriage as an act of violence, so we enable girls to assert their rights, help families and communities to support them, and influence policy to sustain change.

Tipping Point Vision

Tipping point aspired to identify “tipping points” for shifting the communities’ social norms that restrict the lives and roles of girls (and boys) and uphold the practice of child marriage and dowry. By 2023, through our global evidence-based experience, CARE aimed to be a catalyst in shaping, influencing and supporting sustainable, global, national and local movements to empower and expand the choices, voices, agency, and rights of adolescent girls.

Figure i: CARES Tipping Point Vision to Support Global Girls Movements



Tipping Point's 3 Phases

The Tipping Point Program comprises three phases spanning ten years, as outlined in Figure iii.

Figure ii: Tipping Point Phases.

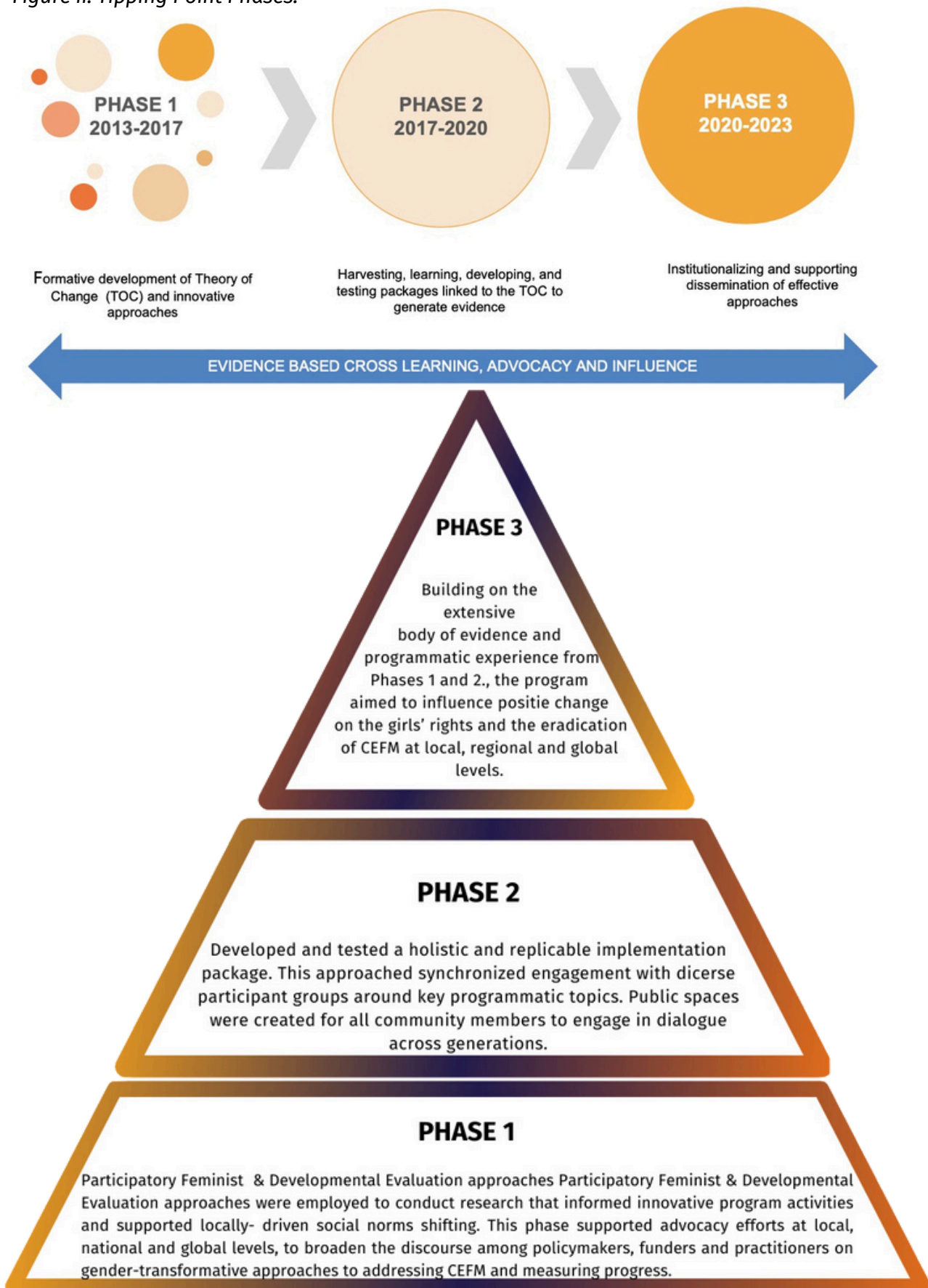
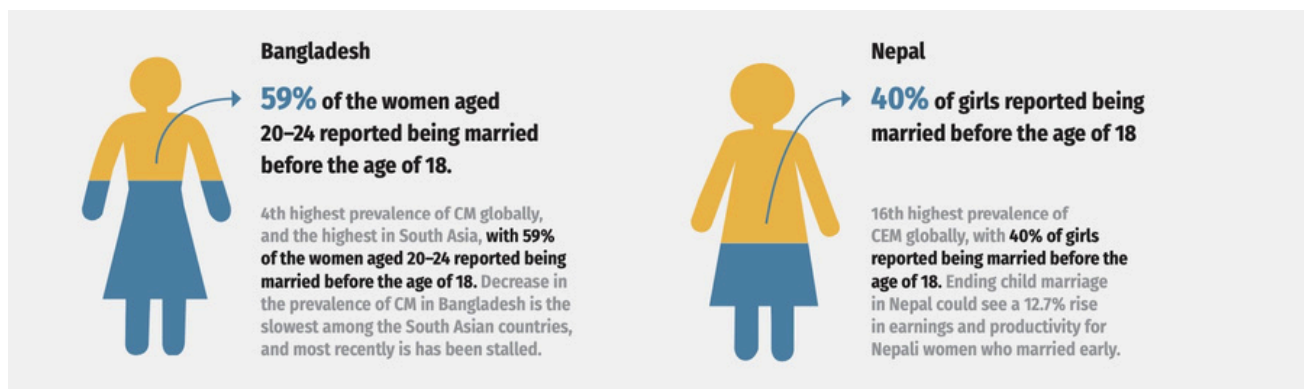


Figure iii: Rates of Child Marriage in Bangladesh & Nepal



Regions of Focus: South Asia, North West Syria and West Africa

The Tipping Point project was established with the intention of innovating strategies for tackling root causes of child marriage in countries with some of the highest rates of child marriage globally, while also engaging in advocacy on the issue across global platforms of funders, researchers and key decision makers.

Phase 1 and Phase 2 enabled the team to develop experience and expertise in the root causes of CEFM and appropriate programming in South Asia. In Phase 3 Tipping Point expanded its influence throughout West Africa and the Middle East and North Africa (MENA) and North West Syria. This was possible through intentional partnership and strategic investments with CARE's regional teams in West Africa, MENA and North West Syria. CARE is already working with adolescent groups and movement organizations in some capacity in these regions, which dramatically impacted the CARE Tipping Point team's ability to engage.

Figure iv: Tipping Point initiatives in the following regions.



PHASE 1 (2013-2017): THE ROAD TO INNOVATION AND LEARNING

Phase 1 of the Tipping Point Initiative (2013-2017) addressed child marriage through a dynamic process of innovation, insight, and advocacy in Nepal and Bangladesh. In 16 sub-districts of Nepal and 90 villages of Bangladesh, the project engaged with adolescent girls and boys, parents, community and religious leaders, and national networks of social activists, experts, and government agencies. These areas are both geographically and economically isolated from other regions. CARE aimed for this initiative to contribute to global understanding of the complex issues driving child marriage and to identify strategies that could create a "tipping point" for sustainable change, preventing child marriage and creating viable alternative paths for adolescent girls.

Program Implementation

Tipping point is engaging in an iterative approach to implementation as guided by the Theory of Change (Figure V), as actors engage and issues emerge, the approach helps the program team tailor and adapt strategies to promote social norms that support gender equitable opportunities.

Figure V: Phase 1 Theory of Change



Shifting from Individual Action to Collective Action

A central focus of Phase 1 was to support and facilitate girls' groups in connecting more closely to collective action around their rights and realizing their collective power. While the objective was to foster spontaneous, self-initiated collective actions, the team also supported and recognized instances where girls' groups worked collectively to organize events and actions initially led by the project staff. Across both countries, there was a blend of both types of collective action. Nearly all girls' groups engaged in collective actions driven by project staff, while several groups also undertook spontaneous, independent initiatives.

Figure VI highlights examples of collective action. In some instances, the activities conducted by the groups were in partnership with boys' groups. This strategic collaboration promoted alternative images of how adolescent girls and boys can interact in support of girls' rights and helped reduce the stigma around boy-girl interactions.

Figure VI: Collective Action in Nepal and Bangladesh.



COLLECTIVE ACTION IN NEPAL

If a member of a girls' group stopped attending meetings or school the girls, as a group, visited her home and persisted until her parents agreed to let their daughter return to school. The groups were seen as fierce advocates for their rights.

Groups developed and performed a skit and song to share why they do not wish to marry early.

Groups led events like the Balika Sabha (adolescent parliament) and Knowledge Fair, working collectively to mobilize themselves, delegate responsibilities and decide on program objectives, activities, and plan to implement events.



COLLECTIVE ACTION IN BANGLADESH

A girls' group made a complaint against a teacher for harassment and succeeded in getting the subdistrict administrator to address the issue.

In several villages, group members wanted to attend a picnic outside their village and persuaded parents to support them.

Girls started a savings group to support peers who were unable to attend school because fees were prohibitive.

Performing in public spaces, attending rallies, engaging in community-level competitions, and playing football with adolescent boys.

Pushing Boundaries of Working on Sexual and Reproductive Rights with Adolescents

During the first two years of the Tipping Point Initiative, teams in both Nepal and Bangladesh primarily focused on building relationships and trust within the community. By the third year, they began introducing content on adolescent sexual and reproductive health rights (ASRHR) and masculinities to both girls' and boys' groups, while also facilitating similar conversations with parents. This work on ASRHR was a significant achievement, given its complexity and sensitivity. It was promising to observe adolescent girls and boys breaking down barriers, asking questions about their bodies, and engaging in discussions on previously taboo topics.

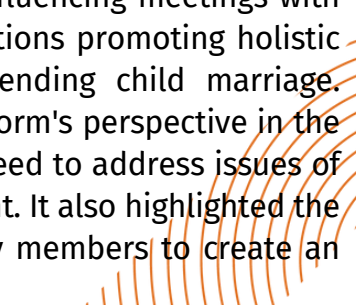
Despite these successes, the initiative encountered several challenges. A major obstacle was the scarcity of existing organizations in Nepal and Bangladesh with which CARE could partner to provide adequate support as the teams rolled out the ASRHR content. While there was expertise available to deliver ASRHR content strictly from a health perspective, finding experts skilled in facilitating nuanced conversations about sexuality, particularly regarding girls' sexuality, proved difficult.

Recognizing the need for capacity building in this area, the team formed strategic partnerships with CREA and TARSHI, two India-based organizations renowned for their expertise in ASRHR. Together, they conducted in-depth workshops for project staff. Despite the logistical challenges posed by their location in India, these partnerships were essential. The teams concentrated on enhancing staff capabilities through workshops and creating safe spaces for reflection. This approach allowed facilitators to examine their own values and ideas about sexuality, masculinity, and patriarchy, ultimately making them more open and comfortable when engaging in conversations with adolescents and their parents.

Strengthening Advocacy Efforts

CARE continued to play a pivotal role as a member of the Girls Not Brides (GNB) network, significantly influencing the implementation of the Government of Nepal's National Strategy to End Child Marriage. Released in March 2015, this strategy raised the minimum age for marriage from 18 to 20. Building on this strategy, the Government of Nepal developed a National Action Plan to End Child Marriage, with CARE's Tipping Project serving as a key contributor and supporter.

The Tipping Point Program team participated in networking and influencing meetings with government and nongovernmental stakeholders to provide suggestions promoting holistic adolescent empowerment rather than punitive approaches to ending child marriage. Notably, CARE successfully advocated for the inclusion of a social norm's perspective in the National Strategy and Action Plan. This advocacy emphasized the need to address issues of sexuality and foster alternative options for adolescent empowerment. It also highlighted the importance of engaging families, religious leaders, and community members to create an enabling environment for empowerment.



CARE was invited to an expert workshop convened by the United Nations Office of the High Commissioner for Human Rights (UN OHCHR) in Geneva. This workshop focused on the impact of existing strategies and initiatives to address child, early, and forced marriages (CEFM) and aimed to develop recommendations for further action by states and the international community. This event provided an excellent opportunity for CARE to influence recommendations, broadening them beyond policy and emphasizing the importance of addressing the root causes of CEFM, focusing on girls' rights and empowerment, and incorporating social norms.

Furthermore, CARE was invited to an expert group meeting on the evidence base for accelerated action to end child marriage in South Asia, convened by UNICEF South Asia and UNFPA Asia and Pacific in Bangkok in September 2016. CARE shared its monitoring, evaluation, and learning (MEL) approach for the Tipping Point Initiative. This opportunity allowed CARE to promote feminist MEL approaches and showcase the programming and innovations from the Tipping Point Initiative that could influence the large UNICEF-UNFPA portfolio addressing CEFM in South Asia.

Evaluation and Findings

At the end of Phase 1, CARE staff, alongside an external evaluation team, visited project sites to gather insights from girls, boys, parents, and community members. Teams from CARE Bangladesh, CARE Nepal, CARE USA, Jaintia Shinnomul Songstha (JASHIS), and Action for Social Development (ASD) played a key role in designing and implementing the evaluation and providing feedback on preliminary findings. The Overseas Development Institute (ODI) offered technical expertise and managed the qualitative SenseMaker data collection components.

"The fact that the group allowed my sister to learn of the ills of child marriage provided credibility to her knowledge and is a major part of why my father got convinced to halt my marriage," Shushila shares in hindsight. Shushila also recalls the numerous meetings that occurred between the community members and all the hard work that went in to finally allow her father to change the decision for the better."



Both of the young girls say that trying to convince a society against something that is deemed acceptable is a tough challenge, and this is where CARE's work plays a vital role.

The evaluation underscored Tipping Point's success in advancing gender equity through its iterative and adaptive strategies. Key findings revealed that the approaches utilized in Phase 1 were effective in fostering social norms supportive of gender equity. Among the results:

Psychosocial Skills and Knowledge of Rights:

Girls gained psychosocial skills, knowledge of their rights, social capital, and increased confidence. Safe spaces and life skills education enhanced their ability to advocate for themselves. Girls developed a thorough understanding of how gendered social norms affected their lives, and many spoke up against harassment and expressed their opinions. Activities like football and drama troupes empowered girls to be active and visible in public, despite some community resistance. They increasingly sought support from adult allies to negotiate with parents on issues like staying in school, delaying marriage, and participating in project activities. Their aspirations shifted towards meaningful careers and equitable relationships. With improved knowledge in menstrual management, nutrition, and livelihoods, girls successfully advocated for resources from local government authorities.

Increased Mobility and Visibility:

Girls' mobility and visibility significantly increased. Project activities allowed girls to spend more time outside their homes, gaining greater freedom of movement. Girls' football teams and community events raised their profiles locally and beyond, despite some backlash. Adolescents grew more resilient and determined, and it became socially acceptable for girls and boys to mingle in project meeting spaces.

Improved Parent-Adolescent Relationships:

Parent-adolescent relationships improved, with parents reporting greater enjoyment of their adolescent children and girls experiencing increased trust and openness. Mothers, in particular, became better listeners and valued their daughters' voices. Parents of daughters in the program became less concerned with family honor and more balanced in decision-making. Participating families displayed non-normative behaviors, such as better chore-sharing between men and women.

Shifting Key Norms: Key norms began to shift. Dowry became less acceptable among those exposed to Tipping Point's messages, and girls took pride in speaking out against it. The education of girls became more normalized, with less concern about them being overly educated. Boys in the program began challenging norms of male dominance and took on household work traditionally done by their sisters or mothers, stressing equitable decision-making in marriage.

Emergence of Strong Allies: Strong allies for girls emerged in project villages. Members of Ending Violence Against Women (EVAW) Forums and local volunteer groups regularly supported girls, advocating collectively and individually to address barriers such as staying in school, delaying marriage, and protecting bodily autonomy. Religious clerics and government officials also emerged as allies, though support from these groups was less consistent.

Transformation of Project Staff: Project staff transformed their assumptions about gender and leadership. Through workshops and personal reflections, they became more aware of the role of gender in shaping their lives and discovered new capabilities in leading change. Topics of sexuality and bodily autonomy were particularly valued, fostering personal growth and resilience. As community members observed the staff's development and their fortitude in facing criticism, staff members became role models.

The work in Phase 1 demonstrated that activities which challenge traditional social norms in safe, public environments effectively shift attitudes and behaviors. The project piloted new methods for operationalizing social norm change, focusing on positive messages about girls rather than solely on the negative outcomes of child marriage. Tipping Point also introduced innovative measures for assessing social norms and normative change, such as the Social Norm Analysis Plot (SNAP) tool, which can inform both academic research and program design.



Embracing the exploratory nature of Phase 1, CARE intentionally implemented a process open to innovations from the ground up. This approach allowed a wide range of activities to be developed and tested across both settings, demonstrating a key goal of Phase 1: fostering context-specific, innovative programming.

Products Developed & Disseminated

During Phase 1, Tipping Point developed a series of products to advance the field of girls' rights and CEFM programming. These outputs are categorized into three main areas: Innovation Series, Evaluation Reports, and Community Participatory Analysis and Policy Briefings.

Tipping Point Innovation Series:

Bangladesh

[Brief 1: Amader Kotha \(Our Voice\)](#)
[Brief 2: Football for Girls](#)
[Brief 3: Amra-O-Korchi \(We are also doing\)](#)
[Brief 4: Tea Stall Series](#)

Nepal

[Brief 5: Boys Cooking Competition](#)
[Brief 6: Intergenerational Dialogues](#)
[Brief 7: Raksha Bandhan](#)
[Brief 8: Street Drama](#)

Evaluation Report

[Tipping Point Nepal: Phase 1 Evaluation Findings](#)
[Tipping Point Bangladesh: Phase 1 Evaluation Findings](#)
[Baseline Evaluation: Social Norms](#)
[Measuring Social Norms & Girls Empowerment: Report of the SenseMaker](#)
[Method Brief: Social Norms Measurement](#)
[Method Brief: Outcome Mapping](#)
[Methods Brief: SenseMaker](#)
[Tool: Sensemaker Tool](#)
[Tool: Photovoice Tool](#)
[Outcome Mapping Report: Nepal & Bangladesh](#)
[Study of the Tipping Point Program in Bangladesh](#)
[Impact of Tipping Point Initiative, a social norms intervention, in addressing child marriage and other adolescent health and behavioral outcomes in a northern district of Bangladesh](#)

Community Participatory Analysis & Policy Briefings

[The Cultural Context of Child Marriage in Nepal & Bangladesh: Findings from CARE's Tipping Point Project](#)
[Community Participatory Analysis](#)
[CPA Study: Summary Findings on Child Marriage in Nepal](#)
[CARE TP Compressed Report Nepal English Single Pages.pdf](#)
[CPA Study: Summary Findings on Child Marriage in Bangladesh](#)
[CPA Toolkit for Field Facilitators](#)
[Policy Recommendations: Bangladesh](#)
[Policy Recommendations: Nepal](#)
[Policy Brief: Child Restraint Act 2017 \(Bangladesh\)](#)
[Evaluating Advocacy for Policy Implementation: A Pilot of Two Tools](#)

Policy Brief

[CARE Tipping Point Policy Brief Nepal English Single Pages.pdf](#)
[Strategy Brief: Phase 1](#)

A collection of tools, technical briefs and other resources to support donors, governments and practitioners' investment in gender-transformative, social norms change, girl-led activism, and intergenerational dialogue approaches for adolescents' rights can be found [here](#).

PHASE 2 (2017 - 2020): BUILDING EVIDENCE FOR SOCIAL NORMS CHANGE

In Phase 2, the Tipping Point team shifted the focus from individual girls to strengthening existing relationships and structures, thereby enhancing girls' agency and activism. CARE engaged in a comprehensive program design process to ensure that Phase 2 was informed by the learnings and lessons from Phase 1. The project team along with key stakeholders, partner non-governmental organizations (NGOs), and colleagues, conducted an in-depth process to gather input to understand the successes and challenges experienced. This process led to the identification of four program design pillars and five goals for Phase 2.

Program Implementation

The following four pillars were identified as critical areas requiring focused efforts to advance the field of CEFM and to build evidence on approaches that prioritize girls' rights over protectionist strategies that perpetuate patriarchal norms.

Figure vii 4 Critical Areas to Advance CEFM



Phase 2 of the Tipping Point Initiative developed and tested intervention models for gaps identified in CEFM programming. The aim was to continue creating a positive impact on the lives of adolescent girls by implementing these targeted interventions. With the four design pillars, five strategic goals were identified for Phase 2:

1. Harvest Learning and Emerging Evidence: Utilize findings from Phase 1 evidence to identify the most promising and impactful activities and strategies for community engagement around the 4 pillars identified.
2. Develop Focused Intervention Packages: Create and implement specific intervention packages that address key components of the Tipping Point Theory of Change, aligning them with the four core design pillars.
3. Impact Adolescent Girls' Lives and Build Evidence: Implement and evaluate the intervention packages to directly improve the lives of adolescent girls and to build robust evidence for effective approaches.
4. Leverage CARE's Potential for Large-Scale Impact: Connect learning and evidence generation across CARE's adolescent girls' rights and empowerment programs to maximize large-scale impact.
5. Engage in Advocacy and Influence: Support ongoing advocacy efforts at local, national, and global levels to broaden the discourse around CEFM programming and to promote adolescent girl-centered movements.

Implementation of Phase 2 activities was guided by a Theory of Change (ToC) which outlined pathways to synchronize engagement with girls and boys, parents, and community members to strengthen adolescent girl empowerment.

Figure vii: Phase 2 Theory of Change



Program implementation centered on three key components. First, it aimed to build girls' agency, empowering them with the confidence, skills, and knowledge needed to lead and advocate for their rights. Second, it involved changing norms, working with boys and parents to foster support for girls' leadership and activism, encouraging these stakeholders to become allies in the fight against gender inequality. Third, it engaged community members creating an enabling environment where girls could exercise their rights, while simultaneously transforming harmful social and gender norms that perpetuate discrimination and limit girls' opportunities. This also enabled CARE staff and partners to challenge their own bias resulting in staff transformation and enhancing their ability to work as change agents .

Building Girls' Agency

Weekly Sessions with Girls:

The program team conducted reflective and capacity-building sessions for girls in all intervention villages in Nepal and Bangladesh. These sessions aimed to empower adolescent girls by raising critical awareness about gender issues and their rights, enhancing their confidence, skills, and social capital. Initially, the sessions focused on communication, knowledge about their rights and bodies, and reflecting on their dreams and aspirations. The girls were encouraged to share this newfound knowledge and experience with family and friends outside the Tipping Point groups. Importantly, the girls reported increased confidence in speaking up against sexual assault and expressed plans to share information about it with other girls in their communities.

Additionally, the program-built girls' capacity in leadership, teamwork, and financial literacy. Many girls were introduced to topics such as insurance for the first time, with each session preparing them to participate in Village Savings and Loan Associations (VSLAs).

Weekly Sessions with Boys:

The boys' sessions focused on reflecting on unequal gender norms and the privileges associated with them, encouraging boys to challenge inequalities such as hegemonic masculinity and its effects on girls and society. Adolescent boys in both Nepal and Bangladesh found the session on "Father's Rule," which addressed patriarchy and masculinity, particularly compelling. They reflected on the advantages they experience as males and committed to standing against this discrimination in their own homes.

Monthly Sessions with Parents:

Monthly meetings were held with both mothers and fathers, although sessions for mothers attracted more participants due to fathers' work schedules. Mothers appreciated coming together to discuss sensitive and useful topics such as the risks and benefits of CEFM, menstruation, and gender equality. These sessions provided a platform for mothers and daughters to discuss their apprehensions and support each other.

Inter-group Dialogues:

The program completed four inter-group dialogues in Bangladesh and three in Nepal. The first dialogue was based on the girls' mapping of unsafe areas in their villages, prompting collective action to enhance safety. The second dialogue focused on dreams and aspirations, where parents shared their adolescent dreams, and adolescents reflected on how unequal gender norms affected their parents' lives and now their own. The third dialogue brought all participant groups together to reflect on the gendered division of labor, noting how girls and women spend more time working than boys and men. In Bangladesh, a fourth dialogue was conducted where mothers and daughters shared their experiences of menstruation and stigma, discussing ways to change negative practices and attitudes surrounding menstruation.

Changing Norms

Girl-Led Activism: The Tipping Point Initiative expanded the [EMpower's](#) Learning Community model by adding a risk mitigation and management module and linkages with boys and parent allies. These enhancements supported girls in navigating backlash to their activism without diminishing their leadership roles.

Allyship Training for Boys and Parents:

Support structures are vital for young activists' success. Training workshops for boys and parents from Tipping Point groups teach them how to be effective allies.

Quarterly Sessions with Community Leaders:

Quarterly meetings were held with influential community members, including government officials, religious leaders (in Bangladesh), and schoolteachers (in Nepal). Skilled facilitation helped engage religious leaders in challenging norms. For example, during a "Vote with Your Feet" activity, younger religious leaders expressed traditional views on gender roles, which were countered by older leaders with examples of successful women working alongside men.

Social Norms Change Activities:

In Bangladesh, activist girls engaged local officials, religious leaders, and teachers in a men's cooking competition to challenge the gendered division of labor. One participant remarked on the value and skill required for cooking, acknowledging the contributions of homemakers. Following the first inter-group dialogue, girls organized a community talk show on creating safe spaces for girls.

Staff Transformation

The Tipping Point approach enabled CARE staff and partners to examine and challenge their own biases, which could contribute to stigma and discrimination, thereby enhancing their effectiveness as change agents. From the outset, regular capacity-building and reflection practices were implemented and continued throughout the program. These activities not only strengthened the Tipping Point monitoring, evaluation, and learning system by addressing daily challenges and successes but also supported adaptive management and ensured implementation fidelity.



Building Evidence

The program's monitoring framework was operationalized in both Nepal and Bangladesh, resulting in the development of a mixed-methods monitoring toolkit. This toolkit was designed to collect qualitative and quantitative data to track program activities, monitor progress toward outcomes, and ensure implementation fidelity.

Strengthening Advocacy Efforts

The CARE team and partners continued to participate and support advocacy efforts nationally and internationally.

Agenda 2030: The Tipping Point program led the development of the Adolescent Working Group's recommendations to the Agenda 2030 task force. These recommendations included a specific commitment to meeting the rights, needs, and aspirations of adolescents and youth as a unique impact group, incorporating youth voices to finalize the directive. As Agenda 2030 emphasized CARE's commitment to gender equality, the Tipping Point supported aligning CARE's approach with U.N. Sustainable Development Goal 5 and sought feedback from movements on how to be better partners.

Regional Engagement: In collaboration with the Middle East and North Africa (MENA) regional team, a desk review focused on the prevention and response to CEFM through ASRH and gender-based violence (GBV) programming in MENA was facilitated. Additionally, a partnership strategy was developed and translation of the global SAA manual into Arabic was funded. Providing this resource in the region's most spoken language facilitated staff integration of these principles into their projects.

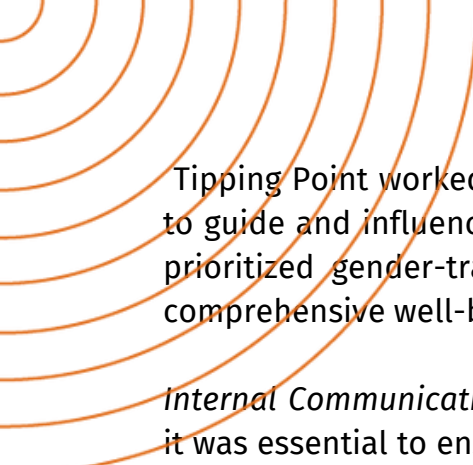
Gender Justice Team Engagement: In September 2019, Tipping Point led a session on girl-led movement building at the CARE International Gender Network (CIGN) Convening, using experiences from the girls in Sunamganj, Bangladesh. This gathering of gender experts and feminist allies endorsed the Social Movements Position Paper, guiding CARE's engagement with movements and rethinking partnership nature. Tipping Point also led a social norms design session to socialize a comprehensive social norms approach and the project's Social Norms Design Principles. The continued engagement with the Gender Justice team's sub-teams resulted in integrating CEFM into grant proposals and external communication products, centralizing adolescent girls' rights within gender-transformative agendas.

Internal Influencing at CARE Bangladesh and CARE Nepal: In Bangladesh, Tipping Point influenced programming across sectors, including the Shouhardo project, an \$88 million USAID Food for Peace program, leading to a study on the impact of child marriage legislation. The Tipping Point team also contributed to program design, garnering senior management interest in scaling Tipping Point programming through future multi-sectoral initiatives.

In Nepal, Tipping Point leveraged the success of the Girls' Rights Forums from Phase 1 to influence other projects within CARE Nepal. Members from other adolescent girl-focused projects, including Udaan, joined the forum, expanding outreach within CARE and with local NGOs like Mahuri Home to advocate for ending CEFM with municipal authorities. These forums demonstrated to other CARE projects that adolescent girls can and should be active in advocacy and decision-making.

In Nepal, Tipping Point collaborated with the Ministry of Women, Children, and Senior Citizens to conduct a one-day workshop, allowing approximately 300 stakeholders to provide input into a plan to address gender-based violence. During this workshop, Plan International and CARE Nepal hosted a side event to influence the ministry to implement the national strategy to end child marriage and the national gender-based violence action plan.

Adolescent Working Group Engagement: Tipping Point actively supported the Adolescent Working Group (AWG) to foster multi-sector collaboration and coordination around adolescent and youth program quality across CARE.



Tipping Point worked with the AWG to develop an Adolescent Empowerment Framework to guide and influence adolescent youth program design across sectors. This framework prioritized gender-transformative approaches and adolescent-led advocacy to inform comprehensive well-being and empowerment.

Internal Communications: To influence a large and decentralized organization like CARE, it was essential to ensure that other projects, departments, and individual staff members were aware of the innovative work being done by Tipping Point and its relevance to their activities. We implemented several mechanisms, including the biannual Tipping Point Spotlight newsletter, which highlighted Tipping Point developments and resources, promoting girl-led activism and social norms programming across CARE.

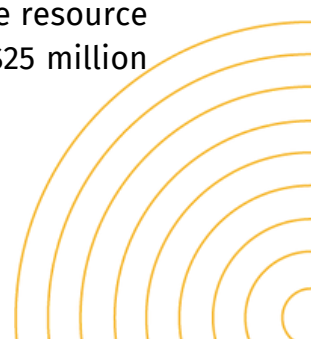
CARE CEFM Learning Xchange: Launched by Tipping Point in 2018, the CEFM Learning Xchange became a vital community for adolescent empowerment practitioners across CARE to share learning and build capacity. Regular webinars were hosted to enable staff to learn from experts on CEFM programming topics, such as staff transformation or VSLA with young adolescents.

Influencing Action and Change

CARE and UNFPA entered a formal global memorandum of understanding in Phase 2, focusing on gender equality and adolescent programming. This partnership laid the groundwork for national- and regional-level collaborations between CARE and UNFPA, leaders in adolescent sexual and reproductive health and rights in both emergency and development settings. This collaboration aimed to strengthen gender and social norms approaches. Additionally, Tipping Point supported the collective agenda on adolescent sexual and reproductive health and social norms through consistent contributions and leadership within the Social Norms Learning Collaborative led by the Institute for Reproductive Health.

U.S. Government Advocacy

The Tipping Point program continued to collaborate with coalitions such as Girls Not Brides (GNB) USA, the Coalition to End Violence Against Women and Girls, and the Coalition for Women's Economic Empowerment and Equality. These efforts aimed to advocate for robust funding for CEFM programs in the FY21 U.S. foreign assistance budget. The request to Congress included a justification for \$250 million for the resource implementation of the U.S. Global Strategy to Empower Adolescent Girls and \$25 million specifically for programming to address CEFM.



Furthermore, Tipping Point worked with coalition colleagues, including GNB USA and other coalitions in which CARE played a leadership role, to emphasize the U.S. Global Strategy to Empower Adolescent Girls as a priority in meetings and off-the-record conversations with U.S. Administration officials.

Global Advocacy

CARE collaborated with partners to influence the Australian government to take a strong stance during negotiations around a Human Rights Council Resolution on CEFM, which was adopted by the Council in July 2019. CARE and other NGOs submitted a joint brief urging the Australian government to leverage its Human Rights Council membership to "urge states to develop holistic strategies aimed at addressing the root drivers of CEFM and to work with community and religious leaders, as well as other traditional authorities, to create change in harmful social norms and power dynamics that drive child marriage." The final resolution, co-sponsored by 76 other states in addition to Australia, included strong language highlighting the needs of married girls, recognizing girls' right to sexual and reproductive health, and acknowledging that criminalization of CEFM is insufficient without complementary measures and support programs.

In Bangladesh, Tipping Point was a member of the Citizen's Initiative against Domestic Violence (CIDV), GNB Bangladesh, and the Rape Law Reform Coalition. Through these coalitions, Tipping Point participated in several advocacy opportunities, such as developing consistent messages on CEFM, submitting a letter to the Inspector General of Police seeking support, and publishing a Facebook page on domestic violence in Bangladesh. CARE Bangladesh also took part in a meeting with legal aid organizations to discuss the implementation challenges of the Child Marriage Restraint Act.

Products Developed & Disseminated

Tipping Point developed and disseminated multiple products in Phase 2 to contribute to the field of girls' rights and CEFM programming. The products can be divided into three main categories: Program Technical Guidance and Tools, Research Findings and Monitoring and Evaluation Guidance and Tools.

Program Technical Guidance and Tools	Facilitators Manual for Adolescent Girls
	Facilitators Manual for Adolescent Boys
	Facilitators Manual for Mother's Groups
	Facilitators Manual for Father's Groups
	Facilitators Manual for Religious Leaders
	Intergroup Dialogue Facilitators Manual
	Technical Brief: Girl Led Activism and Structured Allyship
	Technical Brief: Intergroup Dialogue for Gender and Social Norms Change
	Baseline Report: Nepal
	Baseline Report: Bangladesh
Research Findings	Tipping Point Phase 2 Baseline Social Norms Findings Brief
	Impact of Tipping Point Initiative, a social norms intervention, in addressing child marriage and other adolescent health and behavioral outcomes in a northern district of Bangladesh
	Impact evaluation of the Care Tipping Point Initiative in Nepal: study protocol for a mixed-methods cluster randomised controlled trial
Monitoring & Evaluation Guidance and Tools	Tipping Point Global Impact Evaluation Summary
	Tipping Point Monitoring, Evaluation, Accountability and Learning Resources
	Tipping Point Evaluation & Results

A collection of tools, technical briefs and other resources to support donors, governments and practitioners' investment in gender-transformative, social norms change, girl-led activism, and intergenerational dialogue approaches for adolescents' rights can be found here. The innovation for girl-led change seen in Phase 2 was further catalyzed in Phase 3 of Tipping Point, the culmination of six years of multi-level programming and advocacy to critically engage the discourse on CEFM.

PHASE 3 (2020-2023): LEVERAGING INNOVATION FOR IMPACT AT SCALE

Phase 3 aimed to further support sustainable movements for girls. This phase sought to collaborate with peer organizations and coalitions in Nepal, Bangladesh, West Africa, the MENA region, including North West Syria, to influence both the agenda around adolescent girls' rights and the direction of global programming and investments. Tipping Point expanded its methodologies and approaches with a pilot project in Ethiopia and Jordan. In North West Syria with CARE Turkey and Syria Relief Tipping Point activities focused on addressing key gender and protection related problems rooted in the Northwest Syrian context, such as child marriage and child rights. The focus on West Africa was strengthened through work in Mali and Niger, while efforts in Nepal and Bangladesh were consolidated and advanced. Phase 3 infused the early- and child-marriage space with momentum from a diverse coalition of feminist and other rights-based movements, amplifying the impact of Tipping Point's initiatives globally.



Program Implementation

In Phase 3, Tipping Point remained committed to centering the voices and experiences of girls and their communities, holding each pathway to change accountable to increasing girls' visibility and meaningful participation in movements to expand their voice, choice, agency, and rights. Starting from this foundation of advocacy and influence, Tipping Point sought to impact governments and donors' adoption, implementation, and funding of evidence-based policies and strategies that address root causes and empower girls to shape agendas and engagement mechanisms. To support sustainable, scaled impact throughout CARE's organizational footprint and those of partners and peers, CARE identified milestones and operationalized pathways for accountability to girls' rights through investments in social norms and gender-transformative approaches across sectors.



Strengthening Influence and Advocacy Through Partnerships

Phase 3 required broader partnerships beyond previous implementation-based modalities. Tipping Point aimed to partner with grassroots movement-affiliated organizations that could provide platforms and mentorship for girls to advance their issues.

In Bangladesh, Tipping Point partnered with women's rights organizations (WROs) such as Naripokkho and the Bangladesh National Women Lawyers Association to link them with girls' collectives. In Nepal, Tipping Point collaborated with Child Workers in Nepal (CWIN). CWIN added value through its experience organizing local, sub-national, and national campaigns for child rights and ending child marriage. As a network partner of Girls Not Brides (GNB), CWIN brought practical experience in promoting adolescent girls' leadership at the provincial level, networking, and alliance building.

Additionally, Tewa and WOREC in Nepal, raised awareness on local philanthropy and worked to advance women's opportunities through a feminist perspective. Tewa initiated and supported institutions for women's empowerment, providing a basis for partnership with girl activists across Nepal.

In the Middle East and North Africa (MENA) and West Africa, CARE continued collaborating with partners already engaged in child marriage advocacy. In MENA, the Lebanese Women Democratic Gathering (RDFL) served as an implementation partner and the lead for the Not Before 18 coalition in Lebanon. In Jordan and Egypt, the Arab Women's Organization (AWO) and ACT Egypt advanced child marriage advocacy through coalition work with CARE.

CARE Turkey, in partnership with Syria Relief, implemented the Tipping Point Initiative, leveraging successful strategies from Bangladesh and Nepal. This project in Northwest Syria aimed to tackle CEFM through gender-transformative methods, empowering girls, challenging harmful gender norms, and advancing CARE's Gender Equality framework. The 12-month project focused on the most vulnerable community members, particularly adolescent boys and girls aged 13-17 in Kafr Takharim.

In West Africa, the Mata Masa Dubara (MMD) movement, also known within CARE as Women on the Move, represented a confederation of Village Savings and Loan Associations with over 1 million members in Mali and Niger as of 2019. MMD mentored and connected with girls to work toward ending CEFM.

Developing Evidence-based Policies and Strategies

In Bangladesh, Tipping Point remained an active part of the GNB network and the Men Engage Alliance, vital platforms for advocacy through collaborative action with like-minded organizations. Additionally, Tipping Point engaged with WROs and CSOs such as Naripokkho, Bangladesh Legal Aid and Services Trust, Bangladesh National Women Lawyers Association, and the Centre for Policy Dialogue to influence the national government.

In Nepal, key partnerships for achieving strategic objectives included the National Human Rights Commission, the National Women's Commission, Children as Zones of Peace, the National Planning Commission, relevant government ministries, the Men Engage Alliance, the National Inter-Religious Network, and Jagriti Child and Youth Concern Nepal (JCYCN). These partnerships focused on ending harmful social norms and ensuring youth and children's participation in state-building mechanisms.

In MENA, partnerships utilized existing collaborations with Not Before 18 Coalition leads, such as RDFL in Lebanon and ACT in Egypt. AWO's work in Jordan, both as a partner and a lead advocate on CEFM, connected girls and CARE workstreams to policy and advocacy forums. CARE's implementing partner, Syria Relief (SR), has been operational in NW Syria since 2013, specializing in the Protection sector. SR was responsible for implementing the Child Protection component. They actively participated in the Protection Cluster, and relevant sub-clusters and working groups, particularly Child Protection and Gender-Based Violence. SR contributed to the development of the Cluster's Standard Operating Procedures (SOPs) and guidelines for quality protection services through their involvement in the Child Protection Case Management Task Force. SR's Turkey office provided close support to the protection field staff through supervision, coaching, and mentorship.

In West Africa, Tipping Point partnered with The West Africa Civil Society Institute (WACSI), established by the Open Society Initiative for West Africa (OSIWA) in 2005. WACSI strengthens civil society in the sub-region through capacity-building and network strengthening investments in women's groups and youth networks. Tipping Point brokered linkages between MMD networks and WACSI's ongoing work with GNB to support local women's organizations in advancing advocacy efforts to end child marriage in Nigeria, Guinea, Niger, Mali, Burkina Faso, and Sierra Leone. This effort mobilized communities to hold the Economic Community of West African States (ECOWAS) accountable to its roadmap to end child marriage in West Africa through five active CSO networks.

Milestones and Pathways to Ensure Accountability

Finally, Tipping Point's work played a critical role in influencing the formulation of the new USAID CEFM strategy and policy. CARE's influence within the USAID strategy is evidenced by explicit citations of Tipping Point within the implementation plan. Tipping Point's findings within programs in Nepal and Bangladesh emphasized the importance of addressing social norms as the root causes of child marriage, guiding USAID's approach. The USAID learning agenda now also includes a specific question on addressing the taboo of sexuality, derived from a document by the sexuality working group co-chaired by CARE.



Shifting dialogue, policy, and practice within CARE required extensive partnerships across global Member Partners and within each participating country office. Globally, Tipping Point utilized the global AWG and its subgroup on Youth-Led Movement Building as platforms. These groups connected practitioners with resources and served as focal points for strategies on girls' rights. The CARE Youth Network and the CARE International Gender Network, coalitions of practitioners and staff, were actively engaged by leadership to identify and spread resources for improved youth-led and gender-transformative practices.

The Global Gender Cohort's leadership and member advisors, under the mandate of the Gender Justice unit, were key stakeholders in building and implementing the enhanced program quality resources provided by Tipping Point in Phase 3. The CARE International Steering Committee on Social Movements amplified Tipping Point's work and connected it to various parts of CARE, enhancing the organization's support for movements advancing social justice.

Evaluation, Learnings & Findings

Tipping Point developed a Results Framework that articulated the advocacy goals, outcomes, outputs, and indicators specific to each team's advocacy plan. This framework included units, methods, and intervals of measurement to monitor interim outcomes along the anticipated change pathways, beyond just progress toward major wins. To track activities that might contribute to advocacy successes, Tipping Point conducted regular activity and output reporting. Monitoring, Evaluation, and Learning (MEL) workshops were organized with in-person global support in Bangladesh and Nepal, and virtually in other regions, to collaborate with partners on designing the monitoring framework and ensure alignment with the needs and objectives of CARE, Tipping Point, and our partners and girls.

Phase 3 employed several methodologies to understand implementation effectiveness and impact:

Tipping Point Phase 3's comprehensive evaluation methodologies ensured that the program remained adaptive and impactful in advocating for adolescent girls' rights and ending child marriage. Tipping Point Phase 3 cultivated a continuous culture of learning and reflection within its teams while enhancing accountability to girls and partners.

Outcome Harvesting: Suitable for complex contexts, this methodology identified meaningful outcomes and documented Tipping Point's contributions, particularly for advocacy and influencing goals.

Most Significant Change (MSC): This participatory evaluation allowed participants to generate and analyze personal accounts of change, capturing both positive experiences and obstacles, thereby informing programming decisions.

Score Cards: These tools tracked changes in actors' perceptions, support, and capacities over time, providing a low-resource way to gauge the impact of program activities and strategies on key stakeholders.

Products Developed & Disseminated

[Root Causes of Child Early and Forced Marriage \(from CC's files, cannot find link\)](#)
[Tipping Point - Tipping Point. Root Causes of CEFM.pdf - All Documents \(sharepoint.com\)](#)
Learning Brief: Gendered Political Economy Workshop (from files, not web)
Girls' Leadership & Movements: Building connections with Women's Rights Organizations to further girls' rights
[Tipping Point building connections brief.docx \(sharepoint.com\)](#)
[Tipping Point - CARE TP Aspen Brief.pdf - All Documents \(sharepoint.com\)](#)
Engaging men for Women's Voice and Leadership in Women Lead in Emergencies Programming

[Innovation Brief: Girl Led Activism and Advocacy](#)
[Social Norms Design Checklist](#)
[Social Norms Data Use Tool](#)
[Girl Led Social Norms Shifting Activities](#)
[Tipping Point: Adolescent Empowerment Index](#)

Girl Led Action
[Replication and Scale-up of the Learning Communities on the Move \(LCOM\) Model for Girl-led Activism and Norms Shifting](#)
[Mentors' Training & Facilitation Package: A model for girl led activism and movement building](#)
[Girls' Activist Package: A model for girl led activism and movement building](#)
[Learning Communities on the Move \(LCOM\) Model Overview](#)

In Phase 3, Tipping Point relied on information gathered from successful approaches to addressing CEFM to advocate for girls' increased visibility and meaningful participation in movements that seek to expand their voice, choice, agency, and rights. Additionally, Tipping Point campaigned for governments and donors to recognize and be held accountable to implement and fund evidence-based policies and strategies that address the root causes of CEFM. Lastly, Phase 3 worked to make CARE's programming more accountable to our commitment to girls' rights by investing in social norms and gender-transformative approaches for adolescent girls across sectors.

LOOKING AHEAD

Tipping Point Project showed supporting girls to lead change their own way had the most impact on reducing child marriage, but also resulted in many additional positive benefits for girls' empowerment, beyond child marriage, such as increased mobility and confidence to advocate for the changes they want to see. Girls are influencing change beyond their own lives and homes and ensuring the voices of female youth are heard within broader rights movements. Girls in Action model is a key methodology utilized in the Tipping Point program, which supports girls to build movements for change on the issues that matter to them most by combining girls' leadership with social norms approaches.

Layering on Girls in Action to existing work on the ground is an easy and cost-effective way to ensure the full and equal participation of girls. Girls in Action has been successfully layered onto on-the-ground programming in Bangladesh, Nepal, Mali, Niger, Ethiopia and North West Syria, empowering girls to advocate for their human rights, build their confidence, and become leaders in their communities.

The Girls in Action model is ideal for any donor and partner wishing to promote girls' rights by strengthening their ability to take action on the issues that matter most to them. For those wishing to engage more deeply on a specific issue while ensuring girls' voices and choices remain at the forefront, CARE has many successful examples of proven models which can be developed to incorporate Girls In Action.

ACKNOWLEDGEMENTS

Thank you to The Kendeda Fund, for constantly supporting the Tipping Point Initiative and helping to positively change lives of thousands of girls across 6 countries. We appreciate the support of CARE's team members in each country, including consultants, Country Offices, and the Gender Justice Team members.

RESOURCES

https://www.care.org/our-work/health/fighting-gender-based-violence/tipping-point/tippin_g-point-program-resources/, and [rights of adolescent girls](#).



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