Child Marriage: Knowledge, Factors, Consequences and Utilization of Maternal Services among Early Married Women

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ABSTRACT

Background: In 2020, UNFPA estimated additional 13 million child marriage cases in Nepal after a decade of lockdown due to COVID-19 wherein 2020, the data of child marriage before the age of 18 reached 5 million where marriage done before the age of 15 years was 1.3 million as per UNICEF. In Nepal, the legal age for marriage is 20 years. As per the National Criminal Code 2074, article 173 (1,2 and 3), one is imprisoned for three years with a penalty of Rs. 30,000, if found to violate the law: marrying before reaching the legal age.

Methods: An analytical cross-sectional study was conducted. The sampling design used for the study was simple random sampling. Out of 9 municipalities in Sindhuli district, Dudhauli municipality was selected by using lottery method. 8 wards out of 14 wards in Dudhauli municipality were selected by using purposive sampling. 160 participants were early married women within the age of 15 to 24 years. Three key stakeholders were selected for Key Informant Interview from the local government level worker, non-Governmental organizations working within the municipality, and Dudhauli Health Post. One focused group discussion was conducted with 6 early married women. All the collected data were analyzed through simple descriptive statistics such as frequency, percentage, mean and inferential statics by using chi-square. For a qualitative study, the information collected from the key stakeholders was documented in narrative form.

Results: Seven out of 126 women suffered from miscarriage during their second delivery. There is a significant association between the age of marriage and the number of children (P-value 0.0520) and birth time after marriage (P-value 0.019). The majority, 32.6 percent believes that child marriage can be prevented by children's counseling

Conclusions: Only 1.6 percent of early married women faced complications during delivery. Majority of physically active women engaged in agriculture sector (97.5%) did not face any difficulty during delivery. None of the early married women have ever suffered from obstetric fistula despite of early delivery.

Keywords: Cause; child marriage; consequence; knowledge; Nepal

INTRODUCTION

A formal or informal union between a girl and boy where both may be below the age of 18 or one of them below this age is considered as child marriage.[1] The legal age for marriage in Nepal is 20 years. [2,3] National Criminal Code 2074, article 173 (1,2 and 3) states to imprison couples for three years with a penalty of Rs. 30,000, if found to have child marriage. [2] In 2020, UNFPA estimated additional 13 million child marriage cases in Nepal after a decade of lockdown due to COVID-19[4] where in 2016, 5 million girls had child marriage below 18 years. [5] Consequence of child marriage includes the complications observed during the pregnancy leading to cause death estimation of 70,000 15-19 aged girls.[3-10] Therefore, study aimed to generate data supporting

SDG goal 3 on major causes and consequences of child marriage on reproductive health. [11]

METHODS

A cross-sectional study was conducted. The study area was 8 wards of Dudhauli Municipality lying in Sindhuli district. The sampling design used for the study was simple random sampling. Out of 9 municipalities in Sindhuli district, Dudhauli municipality was selected by using lottery method. 8 wards out of 14 wards in Dudhauli municipality were selected by using purposive sampling. The sample size was determined by using infinite formula having 37% prevalence rate of child marriage in 2016.[12] 160 early married women within the age group of 15-24 years were selected for the research

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study. Pre-testing was done in Kamalamai Municipality.

The manually collected data was coded and entered in Statistical Package for Social Science (SPSS) version 16. All the collected data were analyzed through simple descriptive statistics such as frequency, percentage, mean and inferential statics by using chi-square. For a qualitative study, the information collected from the key stakeholders was documented in narrative form

Three key stakeholders were selected for Key Informant Interview (KII) from the local government level worker, non-Governmental organizations(NGOs) working within the municipality, and Dudhauli Health Post. One focused group discussion was conducted with 6 early married women.

An approval letter was taken from Dudhauli Municipality. National Ethical Guideline for health research in Nepal 2019 was followed.[13]The ethical review was taken from Ethical Review Board, Nepal Health Research Council under the reference no. 1740.

The findings will contribute to gaining information on the status of child marriage and its consequences supporting policymakers, decision-makers at the local, province, and central levels in policy planning and decision-making process. Further, it will contribute to the achievement of SDG goals3, 4,and 5.[11]

RESULTS

Table 1. Socio-demographic characteristics of early married women (n=160).

Variables	Frequency (N)	Percentage (%)
Age of respondents in the year		
15-19	26	16.2
20-24	134	83.8
Type of family		
Nuclear	64	40.0
Joint	96	60.0
Ethnicity		
Janajati	111	69.4
Musahar	20	12.5
Dalit	16	10.0
Brahmin	5	3.1
Chhetri	1	0.6
Madhesi	7	4.4
Educational level		
Illiterate	63	39.4
Basic level	29	18.1

Secondary level	66	41.2
Bachelor	2	1.2
Occupation of respondent		
Agriculture	156	97.5
Business	3	1.9
Labor	1	0.6

The study was conducted among 160 early married women aged ranging from 15 to 24 years. 134 (83.8%) women aged between 20 to 24 years. 39.4% of them were illiterate

Table 2. Knowledge about child marriage (n=160).

Characteristics	Frequency (N)	Percentage (%)
Heard about child marriage		
Yes	119	74.4
No	41	25.6
Legal age of marriage in Nepal		
Incorrect	39	32.8
Correct	80	67.2
The first source of information		
Social media	33	20.6
School	45	28.1
Relatives/friends	37	23.1
Organization	3	1.9
Street drama/ flash mob	1	0.6

The majority of respondents i.e.119 out of 160 (74.4%) have heard about child marriage of which only 39 (24.4%) respondents knew about the legal age of marriage in Nepal.

"Social media is the source of information to hear about child marriage and it is too the cause of child marriage as adolescents use social media as an efficient means to fall in love and elope" - *Keshab Lama, Melmilap Committee, Dudhauli (name of character changed)*

Table 2. Factors related to child marriage (n=160).

Variables	Number (N)	Frequency (%)
Education of respondents before marriage		
Illiterate	63	39.4
Basic level	29	18.1
Secondary level	66	41.2
Bachelor	2	1.2
Cause of child marriage*		
Poverty	6	3.4%

Dowry	2	1.1%
Culture	12	6.9%
Love marriage	130	74.3%
Family pressure	25	14.3%

*Multiple responses

Table 3 shows that 80.6% of women decided by their own to get married whereas 31 (19.4%) women got married by the decision of their parents. 130 (74.3%) have been engaged in love marriage which was the major cause of child marriage followed by family pressure (25%), culture (6.9%), poverty (3.4%), and dowry (1.1%).

"Love marriage is the main cause of child marriage in Danuwar community whereas, in Musar community, daughters are pressured to get married in an earlier age" -*Deepak Dahal Chairperson of NGO (name of character changed)*

Table 3. Consequences of child marriage (n=126).

Variables	Number (N)	Frequency (%)
Dropout from school		
Yes	66	66.7
No	33	33.3
Complication during delivery		
Yes	2	1.6
No	124	98.4
Miscarriage		
Yes	7	5.6
No	119	94.4
Divorce		
Yes	3	1.9
No	157	98.1

Table 4 shows that out of 99 educated women, 66 (66.7%) dropped out from school due to their marriage. It was interesting to know that only 2 (1.6%) early married women faced complications during delivery.

"As most of us are engaged in agricultural chores, so we are physically active and strong. Because of our activeness, even if we marry at our early age, we do not face complications during pregnancy and delivery" - *Hira Danuwar, Participant of FGD (name of character changed)*

The women of Sindhuli were physically active and involved in the agriculture sector (97.5%), which was the major reason behind normal delivery. None of them have ever suffered from obstetric fistula.

"Majorly, in Musar community, cases reveal that malnutrition, poverty and low knowledge regarding maternal services degrade the maternal health leading to complications during delivery" - *Chitra Khatri, Senior AHW of Health Post (name of character changed)*

Table 4. Bivariate association between different variables.

Variables	Knowledge of legal age of marriage in Nepal			
	Correct	Incorrect	Total	P-value
Age of marriage (Respondents)				
10-14	1	1	2	
	50.0%	50.0%	100%	
15-19	79	38	117	
	67.5%	32.5%	100.0%	0.550
Occupation				
Agriculture	78	38	116	
	67.2%	32.8%	100.0%	
Business	2	1	3	
	66.7%	33.3%	100.0%	1
Ethnicity*				
Janajati	63	25	88	
	71.6%	28.4%	100.0%	
Musahar	4	10	14	
	28.6%	71.4%	100.0%	
Dalit	8	0	8	
	100.0%	.0%	100.0%	
Brahmin	2	2	4	
	50.0%	50.0%	100.0%	
Chhetri	1	0	1	
	100.0%	.0%	100.0%	0.003
Madhesi	2	2	4	
	50.0%	50.0%	100.0%	
Education*				
Illiterate	14	19	33	
	42.4%	57.6%	100.0%	
Literate	66	20	86	
	76.7%	23.3%	100.0%	0.001

*Chi-square and Fisher's test P <0.05

Table 5 shows that ethnicity and education have an association with knowledge on the legal age of marriage (P-value 0.003 and 0.001 respectively) whereas the age of marriage and occupation is not associated with knowledge on the legal age of marriage.

Table 5. Bivariate association between age of marriage and reproductive health

	Age at the time of marriage			
Characteristics	10-14	15-19	Total	P-value
Presence of Children				
Yes	4	122	126	
	3.2%	96.8%	100.0%	
No	0	34	34	0.579
	.0%	100.0%	100.0%	
No. of children*				
1	1	87	88	
	1.1%	98.9%	100.0%	
2	3	23	26	0.052
	11.5%	88.5%	100.0%	
3	0	12	12	
	.0%	100.0%	100.0%	
Age at first birth				
Below 10	0	1	1	
	0.0%	100.0%	100.0%	
15-19	3	83	86	
	3.5%	96.5%	100.0%	0.932
20-24	1	38	39	
	2.6%	97.4%	100.0%	
Birth time after marriage*				
1 year	1	107	108	
	0.9%	99.1%	100.0%	0.019
2 year	2	9	11	
	18.2%	81.8%	100.0%	
3 year	1	6	7	
	14.3%	85.7%	100.0%	
	.0%	100.0%	100.0%	

*Chi-square and Fisher's test P <0.05

Table 6 shows that there is a significant association between age of marriage and number of children (P-value 0.052) and birth time after marriage (P-value 0.019). Age of marriage have no association with the presence of children and age at first birth.

Table 7 shows that out of 126 mothers, PNC visit was only done by 14 mothers (31.8%). There is a significant association between place of delivery and ANC checkup with the type of family (P-value 0.001 and 0.064 respectively). Similarly, there is an association between ethnicity and PNC checkup (P-value 0.077). Likewise, a Significant association between education and place of delivery was observed (P-value 0.002)

Table 6. Status of the utilization of maternal health services.

	Utilization of maternal health services					
	ANC checkup		Place of delivery		PNC checkup	
Variables	Yes	No	Health institution	Home	Yes	No
Type of family*						
Nuclear	38	6	35	9	14	30
	86.4%	13.6%	79.5%	20.5%	31.8%	68.2%
Joint	79	3	80	2	17	65
	96.3%	3.7%	97.6%	2.4%	20.7%	79.3%
Occupation						
Agriculture	114	9	113	10	31	92
	92.7%	7.3%	91.9%	8.1%	25.2%	74.8%
Business	2	0	1	1	0	2
	100.0%	.0%	50.0%	50.0%	.0%	100.0%
Labor	1	0	1	0	0	1
	100.0%	.0%	100.0%	.0%	.0%	100.0%
Ethnicity*						
Janajati	81	6	79	8	25	62
	93.1%	6.9%	90.8%	9.2%	28.7%	71.3%
Musahar	18	1	18	1	4	15
	94.7%	5.3%	94.7%	5.3%	21.1%	78.9%
Dalit	10	0	10	0	0	10

	100.0%	.0%	100.0%	.0%	.0%	100.0%
Brahmin	4	1	5	0	2	3
	80.0%	20.0%	100.0%	.0%	40.0%	60.0%
Chhetri	1	0	0	1	0	1
	100.0%	.0%	.0%	100.0%	.0%	100.0%
Madhesi	3	1	3	1	0	4
	75.0%	25.0%	75.0%	25.0%	.0%	100.0%
Education*						
Illiterate	37	6	34	9	12	31
	86.0%	14.0%	79.1%	20.9%	27.9%	72.1%
Basic level	24	1	24	1	6	19
	96.0%	4.0%	96.0%	4.0%	24.0%	76.0%
Secondary level	56	2	57	1	13	45
	96.6%	3.4%	98.3%	1.7%	22.4%	77.6%
*Chi-square and Fisher's test P<0.05						

DISCUSSION

The study shows that 74.4% of respondents have heard about child marriage out of which 67.2% knew about the legal age of marriage in Nepal. The study conducted in Jumla found that 73% of respondents have heard about child marriage out of which only 28% could give the correct answer regarding the legal age of marriage in Nepal. [14] The report of Plan Nepal shows that the major cause of marriage among early married women was family pressure (67.1%) which was followed by tradition (26.3%), self-decision (15.1%), and poverty (10.3%). [15] Similarly, the study conducted in Palpa found that the major cause of child marriage was family pressure (39%) followed by self-decision (25%), tradition, and poverty (8%) each. [16] Likewise, the study carried out in Bangladesh and India found that the major cause of child marriage is poverty. [17,18] But, in this study, love marriage (74%) was the major cause of child marriage.

The study carried out in Sub Saharan Africa found that 95.6% of early married women within the age of 15 to 24 years have children with 56.1% of respondents having childbirth in the first year of marriage. [19] The study in Pakistan found that 15.7% of respondents have 1 child, 15%, 35.3%, 34% of respondents have 2,3, and more than 4 children respectively. [20] This study shows that 78.8% early married women have children which is lower than the data of Sub Sahara Africa (95.6%). 85.7% of respondents have childbirth in the first year of marriage which is higher than the data of Sub-Saharan Africa (56.1%). 69.8% of respondents have 1 child, 20.6%, 9.5% have 2 and 3 children respectively which is low in comparison to study of Pakistan (15.7%, 20.6%, 34% respectively).

The study in Rural Western Nepal found that 85% of early married women with miscarriage suffered from age between 15-19 years and 15% beyond 20 years. [21] 6% early married women revealed to suffer from a miscarriage in the study of Palpa. [16] The study in Jumla, Nepal found that 12.7% of early married women suffered from a miscarriage. 21% faced complications during pregnancy and 17% faced complications during delivery. [14] The report of Plan Nepal found that 57.6% of respondents suffered from miscarriage below 18 years. [15] The study of Bangladesh stated that miscarriage and complication during delivery are the major health consequences of child marriage. [18] This study shows that 5.6% of early married women suffered from a miscarriage which is low in comparison to the study done in Rural Western Nepal, Palpa and Jumla, and report of Plan Nepal.

The study carried out in Nuwakot revealed that 87.1% did not face any complications during pregnancy. ANC visit was done by 57.4% of respondents. 70.5% delivery was done in health institutions. 47.2% have visited for PNC checkups. [22] 1.6% of respondents revealed that they faced complications during delivery which is low in comparison to the study of Jumla (17%). It was interesting to know that none of the respondents of this study faced complications during pregnancy. This study shows that ANC visit was done by 92.6% of early married women which is high than the result of Nuwakot (57.4%). In this study, 91.3% of respondents visited any health institution for delivery which is high in comparison to the study of Nuwakot (70.5%). This study shows that 24.6% of early married women visited for PNC checkups which is low in comparison to the study of Nuwakot (47.2%).

CONCLUSION

Majority of women decided by their own to get married at early age. Love marriage was the major type of child marriage in SIndhuli. Very few early married women faced complication during delivery and had heavy bleeding and faced difficulty to conceive. Majority of physically active women engaged in agriculture sector (97.5%) did not face any difficulty during delivery. Some women suffered from miscarriage during their second delivery. None of them have ever suffered from obstetric fistula.

CONFLICT OF INTEREST

The authors declare no conflict of interest.

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