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### EARLY MARRIAGE AND ITS ENDURING IMPACTS: INVESTIGATING HEALTH DISPARITIES AMONG WOMEN IN TIMERGARA, DISTRICT LOWER DIR

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#### ABSTRACT

The study was designed to examine health inequalities among women married before the age of 18 years in Timergara, District Dir Lower. The study included early marriage as the dependent variable and health inequalities as the independent variable. A sample size of 384 respondents was purposively selected for primary data collection through structured questionnaire. Furthermore, the collected data were evaluated using Chi-square test at the bivariate level. The study concluded that early marriage has severe impacts on women's health including physical issues such as physical illnesses and limited access to health services, specifically during pregnancy. They study further highlighted the importance of psychological counseling of spouses to help them to navigate their personal and marital life problems. Thus, jointly efforts by government and non-government organization are essential in implementing awareness programs about early marriage to mitigate negative health impacts. Additionally, various sessions should be organized to educate young women about contraceptives and health issues during pregnancy.

**Key words:** Early marriage, child bearing, early pregnancies, physical impacts, marital life and statistical test.

#### Introduction

Early marriage, defined as a marriage that occurs between individuals under the age of 18, is often viewed as a form of forced marriage, as children are generally not capable of making informed decisions about their own well-being before this age (Lloyd & Mensch, 2006). This practice has serious implications for the health and well-

being of young women, endangering their physical, psychological, and social development. The marriage not only deprives young brides of their dreams and goals but also poses significant health risks, particularly for teenage girls, as it affects their physical, mental, and social lives (Khan, 2011). Furthermore, such kinds of marriages are prevalent in many parts of the world, especially in low-income countries and communities with cultural traditions that prioritize the early marriage of girls. Approximately 12 million girls are married every year before the age of 18, equating to 23 girls married every single minute. This alarming statistics underscore the crucial need to address the issue and its effect on women's health (Shreffler, Tiemeyer & Cox Jr, 2021).

One of the most edifying impacts of child marriage is the declining health status of young women. Women in the developing world who are married early often suffer from pregnancy and childbirth complications coupled with a lack of proper healthcare facilities which leads to lots of disrepaired ailments (Jacobs, Thomas & Casper, 2024). Childbearing at younger ages greatly heightens the chances of maternal death, infant mortality, and underweight births. Furthermore, early marriage favors the development of an obstetric fistula, an injury resulting from obstructed labor which manifests as chronic disability, incontinence, and social ostracism (Adola & Wirtu, 2024). On top of health issues, child marriage affects girls' psychological preparedness for married life, professional goals, and economic self-sufficiency (Sumankuuro et al., 2019). It is recommended that in order to avoid marriage of very young children, policies and programs should be made at the community level which increase knowledge, capture religious and community leaders, parents, and provide school and work opportunities to girls (Kedzior, Ryan & Lassi, 2024).

### **Literature Review**

Young women are at an increased risk for infectious disease, poor nutrition, anemia, and vitamin deficiencies. Young brides are at a higher risk of motherly mortality and obstetric complications (Andersen et al., 2022). Being marrying is also a violation of human rights, and to eradicate it is necessary to promote health physical betterment. Reducing early marriage is really key to reducing these and other health risks (UNICEF, 2018). The physical consequences of early childbearing can kill mother and child. Maternal mortality is the top cause of death for girls from 15 to 19 worldwide. Women under 20 and especially those under 15 are two to five times more likely to die in child birth than women over 20. It differs in that they face substantial long-term health consequences even if they survive birth (Lawn et al., 2014). This practice often blocks girls from enrolling in school, stripping them of the knowledge and skills-based education that they need to thrive. Such a lack of education brings long-term consequences on their health, local welfare, and well-being. Moreover, considering

the power dynamics associated with young male perpetrators who marry young girls without resources and support systems to protect themselves, such women in early marriages may also be more likely to come to injury of domestic violence and abuse (Currie, 2011). Young brides also face higher chances of unintended pregnancies, sexually transmitted infections (STIs), and mental health problems. Crucial to reducing these mental and physical health issues and enhancing the wellbeing of young women is early marriage addressed (Vettriselvan et al., 2025).

### **Research Methodology**

The researchers applied a quantitative methodology to explain how young women's physical health was negatively affected by early marriage. The researchers chose purposive sampling to calculate the count of subjects. With a sample size of 384 people chosen from the total population of 1,436,082 to gather data. The data were collected from the participants by using a well-organized questionnaire.

### **Ethical Consideration**

Ethical considerations in research area includes doing no harm, respecting everyone's dignity, obtaining appropriate consent, and keeping people's information private and secure. Further, it is also important for the researcher to be respectful and very careful while collecting information from potential respondents. The researchers explained the purpose of the study and ensures that confidentiality and researchers stick to the questions related to the research.

### **Data Analysis and Interpretation**

Data analysis defines the entire process of forming and summarizing raw data in order to produce significant information. The data analysis was performed by using computer software, Statistical Package for Social Sciences (SPSS) which help to identify, analyze, summarize and explanation of quantitative data. The data was analyzed using inferential statistics and the researchers used Chi Square Test to measure the relationship among the variables.

The table 1.1 describes the perception of women towards their physical health who married under the age of 18. A series of statements were asked from the sampled respondents about their physical health, majority i.e. (320 out of 384) of the sampled respondents were of the opinion of the given statement that early marriage definitely has resulted in physical exhaustion for me. Further, (37 out of 384) of the sampled respondents disapproved the given statement. Moreover (27 out of 384) respondents were unaware of the problem. The Chi-square test was applied and hence found a strong association between both variables ( $P=0.000$ ). Moreover, important indicator about physical health issues such as malnutrition can be more prevalent in women who enter into early marriage, i.e. (320 out of 384) of the sampled respondents approved the given statement. Further, (37 out of 384) of the respondents disapproved

the statement. Moreover (27 out of 384) were neutral view about the statement. The results of the second indicator of the above table is said to be significant ( $P=0.000$ ). Similarly, answering to a statement regarding early marriage increase the risk of maternal mortality is exceedingly significance ( $P=0.000$ ). Majority, i.e. (320 out of 384) of the respondents were favored the statement. Further, (37 out of 384) of the respondents disfavored the given statement. Moreover (27 out of 384) were unaware about the statement. Likewise, the below table describes that early marriage has leads to early pregnancies, affecting physical well-being, majority i.e. (110 out of 384) of the respondents were against to the statement where, (259 out of 384) of the respondents favored the statement and (15 out of 384) of the sampled respondents were of the view that they didn't know. The value of test was found significant ( $P=0.000$ ).

Correspondingly, question related to early marriage can have negative impacts on women's physical health due to early child birth, majority, i.e. (320 out of 384) of the sampled group favored the statement, where, (37 out of 384) of the respondents denied and only (27 out of 384) of the respondents were unaware. The Chi-square test value is exceedingly significance ( $P=0.000$ ). In the same way, arguing on the statement regarding early marriage has restricted my ability to make decisions about my own health, majority, i.e. (322 out of 384) of the respondent approved the given statement. Further, (54 out of 384) of the respondents denied the statement. Moreover (08 out of 384) were neutral view about the statement. The results of the sixth indicator of the above table is said to be significant as the Chi-square value is ( $P=0.50$ ).

Likewise, a high significant relation ( $P=0.000$ ) was established between the concept of early marriage affects my ability to pursue educational goals, majority i.e. (68 out of 384) of the sampled respondents declared untrue the given statement, while, only 8.1 percent (311 out of 384) of the sampled respondents went along with to the statement and only (05 out of 384) were neutral view about the statement.

In the same way, a statement related to women who marry early are more likely to experience health related issues, majority i.e. (197 out of 384) of the respondents approved the statement whereas, (129 out of 384) of the respondents denied and only (58 out of 384) of the respondents remained neutral about the statement. The Chi-square test value is exceedingly significance ( $P=0.005$ ).

Similarly, an answering to a statement regarding having experienced complications related to family planning due to early marriage, majority i.e. (291 out of 384) of the respondents were of the opinion of the given statement whereas, (91 out of 384) of the respondents disapprove the given statement and only (2 out of 384) were unaware about the statement. The Chi-square test value is exceedingly significance ( $P=0.000$ ).

In subsequent, while discussing a statement related to maintaining a healthy lifestyle become more challenging due to early marriage, i.e. (309 out of 384) of the sampled

respondents approved the given statement. Further, (74 out of 384) of the sampled respondents disapproved the statement. Moreover (1 out of 384) were neutral view about the statement. The results of the second indicator of the above table is said to be significant as the Chi-square value is below than 0.05 (P=0.000).

**1.1 Association between Early Marriages and Health Inequalities**

		Agree	Disagree	Neutral		
Early marriage has resulted in physical exhaustion for me.	Agree	270	47	3	320	(P=0.000) (X <sup>2</sup> =39.52)
	Disagree	32	5	0	37	
	Neutral	17	5	5	27	
	Total	319	57	8	384	
Physical health issues such as malnutrition can be more prevalent in women who enter into early marriage.	Agree	270	47	3	320	(P=0.000) (X <sup>2</sup> =39.52)
	Disagree	32	5	0	37	
	Neutral	17	5	5	27	
	Total	319	57	8	384	
Early marriage increases the risk of maternal mortality.	Agree	270	47	3	320	(P=0.000) (X <sup>2</sup> =39.52)
	Disagree	32	5	0	37	
	Neutral	17	5	5	27	
	Total	319	57	8	384	
Early marriage has leads to early pregnancies, affecting physical well-being.	Agree	208	45	6	259	(P=0.000) (X <sup>2</sup> =20.68)
	Disagree	102	8	0	110	
	Neutral	9	4	2	15	
	Total	319	57	8	384	
Early marriage can have negative impacts on women's physical health due to early child birth.	Agree	270	47	3	320	(P=0.000) (X <sup>2</sup> =39.52)
	Disagree	32	5	0	37	
	Neutral	17	5	5	27	
	Total	319	57	8	384	
Early marriage has restricted my ability to make decisions about my own health.	Agree	272	44	6	322	(P=0.50) (X <sup>2</sup> =9.46)
	Disagree	40	13	1	54	
	Neutral	7	0	1	8	
	Total	319	57	8	384	
Early marriage affects my ability to pursue educational goals.	Agree	265	41	5	311	(P=0.000) (X <sup>2</sup> =39.66)
	Disagree	52	15	1	68	
	Neutral	2	1	2	5	
	Total	319	57	8	384	
Women who marry early are more likely to experience health related issues.	Agree	162	35	0	197	(P=0.005) (X <sup>2</sup> =14.76)
	Disagree	112	13	4	129	
	Neutral	45	9	4	58	
	Total	319	57	8	384	

I have experience complications related to family planning due to early marriage.	Agree	240	45	6	291	(P=0.000) (X <sup>2</sup> =96.30)
	Disagree	79	12	0	91	
	Neutral	0	0	2	2	
	Total	319	57	8	384	
Maintaining a healthy lifestyle become more challenging due to early marriage.	Agree	265	42	2	309	(P=0.000) (X <sup>2</sup> =60.78)
	Disagree	54	15	5	74	
	Neutral	0	0	1	1	
	Total	319	57	8	384	

### Conclusion

The study concludes that ending early marriage is essential, as early marriage negatively impacts the health of young brides. Girls who marry early have limited decision-making power within the marital home and face significant health risks that can affect both the mother and her infants. After marriage, young brides need training and psychological counseling to help them navigate personal and marital life challenges, along with access to appropriate health and social services. Educating young men and women on safer pregnancy practices and childbirth can further reduce risks. Because young brides often become mothers during adolescence, both they and their children are likely to experience poorer overall nutrition and health. By emphasizing these physical health consequences, this research also underscores the urgent need for support systems and health interventions that can help improve women's well-being in these contexts. The research calls for a comprehensive effort to reduce the health effects of early marriage on women. It highlights the importance of multi-focal initiatives for both tackling their physical health problems and in establishing environments conducive to empowering young women to choose healthy lifestyles.

### Suggestions

In order to reduce the rate of early marriages, it is paramount to ensure legal accountability by amending the Child Marriages Restraint (CMRA) Act of 1929. CMRA restrains early child marriages, but in order to increase its effectiveness and ensure accountability, it should be reinforced. Together With these legislative measures, health policymakers at the community level need to organize educational sessions to highlight the harmful consequences of child marriage, such as the adverse effects it can have on health and education. Changing societal attitude or norms that perpetuate marriage at an early age can be done through education and creating campaigns to inform the public. Most importantly, strong measures should be put on local Jirgas that sanction child marriage as restriction to such practices usually renders their influence overstated and, consequently, challenges the official legal order. The government can impose legal restrictions on such informal self-governing bodies to

enhance the already existing legal instruments. Moreover, the age at which girls and boys can legally marry should be incorporated in existing legal frameworks so that there is no ambiguity among the clauses. Finally, efforts should be focused on eliminating and changing harmful attitudes and traditions that are the foundation of child marriage. Children should be made free from the burden of being subjected to an abusive custom, and instead, be made an integral part of society with the rights to safety and other basic social services.

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