

Child Marriage and Maternal Health: An Analysis of Experienced Women in Northern Bangladesh

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Abstract

The contemplations of child marriage (CHM) for growing young girls sustain comprehensively in developing countries assuming a startling global concern, affecting millions of girls by causing multifarious hygienic burden including infant and maternal mortality, morbidity, resulting of early and unexpected pregnancy around the world today. The concoction of this study is to interrogate and assess factors that squeeze on the girl child's marriage and their maternal health in Dinajpur region of Bangladesh from January to April 2018. In addition, a qualitative research design was adopted for analyzing and interpreting target population while women in communities and key informants participated to collect qualitative data. The study revealed that girls hugged often hindrances which limited their ability to cultivate safe choices in phase of sexual and reproductive health. Apparently, resolutions also reiterated the necessity for pragmatic attention to address their vulnerability even for risky pregnancy and secure birth of a child. The study concluded that married girls ripen themselves a distinct and vulnerable group owing to penetrating an immense possession of dodgy treatment, mere stupefaction of CHM strictly and resurging wise reflection towards women following direction of modern maternal health, pennant nuptial decrees universally can stretch to egalitarian society.

Keywords

Child Marriage, Maternal Health, Pregnancy, Reproduction, Vulnerability, Poverty

1.0 INTRODUCTION

The significance of the three-standard trio birth, marriage and death as key events in most people's life cycles are immensely critical. While marriage intertwines young boys and girls maintaining religious, marital act, instead of core individual choice. Meanwhile, an ICRW review shows that, rates of child marriage are highest in parts of Africa, and in South Asia, where one-half to three-fourths of girls are married before age 18. Even, UNICEF declared that One in three girls in the developing world is married before the age of 18 and if there is no reduction in the practice of child marriage, 1.2 billion women alive in 2050 will have married in childhood that is equivalent to the entire population of India (UNICEF, 2014). Although Niger, Mali and Chad have the highest rates of forced child marriage in the world, ranging from 71 percent to 77 percent, but only because of the large populations in India and

Bangladesh, have the greatest number of child brides lives in South Asia, representing 46 percent of all marriages take place before the girl is 18 (ICRW, 2010).

Notably, in the last decade, CHM annihilated 58 million girls, many of whom were married against their will and in violation of international laws and conventions. Concurrently, arranging marriage before reaching 18 is becoming a harsh reality for unlucky young women. Interestingly, elsewhere of the world parents encourage CHM in hoping that the events of marriage will benefit them in sense of financial and social aspect while burdens of the family also be relieved entirely. The higher rates of child marriage typically produce poor maternal and child health, the higher rates of infant and maternal mortality and lower use of skilled birth attendants that attract the researcher to the study (Raj & Boehmer, 2013). Again, the traditional Bangladeshi customs and moral codes, intention of lower dowry payments if people marry their daughter off at an early age also another logic of identifying the topics. From the perception of people, why CHM is arranged to defend a girl's sexuality the so called tradition will be reduced by the outcomes of the study. As CHM is likely to lead early and premature pregnancy, accompanying physical danger for the motherhood, additionally, child forcing the marriage partners, the bride terminates schooling prematurely, by raising mass awareness involving greater participation including international organizations and Non-Governmental Organizations parents willingly agreed to postpone such CHM ferocity.

Finally, the study will be helpful to reduce the future forgetting unhygienic and unexpected anxiety of the young girls. The policy makers, the social workers, the social activist will be able to find out the information of the causes of CHM and the results associated with the maternal health.

1.1 Statement of the problem

Bangladesh has long been known for very early female age at marriage and high teenage fertility (Carmichael, 2011). Naturally, the patriarchal culture of Bangladesh teaches women to remain silent against their husband's aggressive behavior. Evidently, most married women in Bangladesh tend to be socioeconomically dependent on their husbands. This dependency creates another context of their children uncertain and vulnerable (Das et al., 2015; Dalal et al., 2009; Schuler & Islam, 2008). As noted earlier, studies show several staid health conjugations coming with CHM which leads to maternal mortality, sexually transmitted diseases, cervical cancer among others due to unsecure and illness fatality (ICRW, 2010; UNICEF, 2001). Once child brides have been reached, it is also important that they are given opportunities to engage in formal and informal education, skills building activities and income-generating opportunities (PMNCH, 2012). The area of my highlight was to know the transition from adolescence to adulthood how is abruptly curtailed by EM, bringing dangerous evil for the health and development of female adolescents ignoring the 'safe spaces' where married girls could seek support from each other and learn about maternal health services, could demonstrate knowledge about contraception (Erulkar & Muthengi, 2009).

Similarly, a wicked cycle of poor health among female adolescents, greater risks of maternal morbidity and mortality how can be reduced, through the development of female education, empowerment of the young girls not emphasizing the stability of traditional prejudice 'girls are wives'. Therefore, the main purpose of this study was to find out the prime reasons and experiences of child marriage in Dinajpur district of Northern Bangladesh and they are; a. What are the roots of child marriages in Bangladesh? b. What are the major experiences of child marriage? c. How can we make people conscious about child marriage?

2.0 LITERATURE REVIEW

Child marriage is a major social concern and a violation of children's rights whether it happens to a girl or a boy as it denies the basic rights to health, nutrition, education, freedom from violence, abuse and exploitation and deprives the child. CHM badly affects to both child and society bearing a strong physical, intellectual, psychological and emotion-al impact, cutting off educational opportunities and chances of personal growth for both girls and boys (UNICEF, 2011). Few reviews suggest that, social and cultural norms, including those related to faith, influence of the age at which a girl is expected to marry. In addition, socio-economic status, education levels, and community context also influence the

likelihood of a being married early (Klugman et al., 2014; Malhotra et al., 2011). Interestingly, it is estimated that over 100 million girls will be married during their childhood before the age of 18 in the next decade, and 14 million will be married by age 15 (Bruce, 2005). And child marriage is frequently prevalent in rural locations of poor countries, characterized by low levels of development and limited school and work opportunities (Lloyd, 2005; UNICEF, 2001).

Several studies regarding the relationship between CHM and Human Immune Deficiency Virus (HIV) revealed that, higher HIV rates among married women in rural Uganda (18 percent) than young unmarried women (15 percent), among 15- 19 years old girls who are sexually active, being married increased their chances of having HIV by more than 75 percent while these studies investigated a limited number of girls in a select number of countries (ICRW, 2010; Clark, 2004). Again, The National Research Council and Institute of Medicine (2005) found that, Young married girls can be at risk of contracting HIV and AIDS if their husbands are significantly older and therefore more likely to have contracted HIV or AIDS in their lifetime. Large age gaps between husband and wife are common in some regions of the world. In central and western Africa, one-third of young women in their first marriages report having a partner that is at least 11 years their senior.

In a study of Rodgers, found that any marriage carried out below the age of 18 years, before the girl is physically, physiologically, and psychologically ready to shoulder the responsibilities of marriage and child bearing (Rodgers, 2012). Furthermore, Nour (2009) stated that owing to the lack of governmental policies about 25,000 girls become child brides every day and out of seven girls one marries before she turns fifteen in the developing world (Nour, 2009; Rodgers, 2012). If child marriage occurs, the girls should have to physically and mentally prepare for child bearing. From some studies it is found that, Girls who experience intimate partner violence (IPV) are at higher risk than girls who do not experience IPV for a number of poor physical health outcomes including severe injury, chronic pain, and gastrointestinal, sexual, and reproductive health issues (Campbell, 2002; Lamb & Peterson, 2012; WHO, 2008). Moreover, Child brides also suffer emotional violence in their homes and experience severe isolation and depression as a result of early marriage (Le et al., 2011; Nour 2009).

Seemingly, several studies showed that, Girls married as children usually enter marriage with low levels of education or no education whatsoever, and limited knowledge and skills to negotiate marital roles (UNICEF, 2011). For example, in Ethiopia, 79 percent of girls who married before the age of 15 had never been to school (Erulkar, 2009). They also tend to have larger age differences with their husbands than those married later, which compromises their power within marriage, including decisions related to family planning (FP), childbearing, and maternal, newborn and child health (MNCH) services (Menschen et al., 1998). Lastly, child marriage is associated with increased total fertility and contributes significantly to population momentum. This occurs because child marriage shortens the time span between generations and increases the number of years that females spend childbearing. Specially in South Asia, there are two main justifications for increasing age at marriage for females. Firstly, early marriage curtails educational attainment which is positively associated with female empowerment and demographic outcomes (Drèze & Murthi, 2001; Field & Ambrus, 2008; Jeffery & Basu, 1996). Secondly, early childbearing is known to have detrimental health implications for the mother as well as her children (Cleland & Kauffman, 1998).

Some Scholars also further argued that, women ran the risk of being abused were poverty, low socio-economic status, a lack of financial independence, socio-economic dependency on husband and/or the institution of husband's or wife's illiteracy, abuse of wife if she was much younger than her husband and, finally, husband prone to drug or alcoholic addiction (Dalal et al., 2009; Salam et al., 2006; Das et al., 2016). All these studies uniformly also suggested that the presence of CHM will be continued in societies until the patriarchal practices will provide girls their privileges and decision-making capacities as male practice in general and only then a decisive plan can be fruitful for the CHM by creating women empowerment reflecting as point of consciousness in developing nations spontaneously.

3.0 METHODOLOGY

3.1 *The Nature of the Study*

The Northern Dinajpur was selected as study region owing to the socio-economic factor and the occurrences were available for the researcher. The study was exploratory and qualitative in nature, was focused on an in-depth understanding of the nature, causes and impacts of CHM in northern Bangladesh because as a qualitative method, in-depth interviews assist to investigate EM and from socio-demographic characteristics of reproductive health to child bearing, and sexual behavior (Adedokun et al., 2016; NDHS, 2008). In fact, FGDs and interviews of in-depth method were conducted in order to trace the base context and conjectural factors of CHM what primarily influenced on the lives of child in the study area associated with the risks of early marriage and childbearing.

3.2 *Data Collection*

The target group was female who are affected and experienced by CHM and later dominated by life partner in the locality. By using purposive sampling technique, a total of 22 women agreed to be interviewed from 110 victims of the region because they were most experienced and got practical knowledge how CHM destroyed their everything and taught them a deep vulnerability while 10 female graduates with prior experience of working in similar cases, were selected as data collectors. Before going to the field, they were effectively trained on multifarious issues including techniques of interviewing, ethics, rapport building and were strictly supervised during the entire data collection period. Through a checklist, interviews were conducted over in Bengali language. The interviews were recorded, taking permission of the respondent, then transcribed and finally translated into English. In order to maintain credibility, to ensure accuracy and appropriate representation of the respondents the transcripts and translations rechecked narratively too. Lastly, a small gift was offered to each respondent for their valuable time for the interview.

3.3 *Data Analysis*

For data analysis, a thematic method was followed and after a meticulous analysis of all the transcripts, the texts were reinterpreted. Then the data were separated catering individual, familial and cultural factors based on their contribution to the increasing CHM, consequences of EM to social and psychological factors of girls including their different difficulties in marital issues. Consequently, these sceneries were then grouped together for providing broad understandings of CHM, as discussed in the results section.

3.4 *Ethical Considerations*

We, here strictly followed different ethical principles that were adopted in similar studies (Das et al., 2016; Dalal et al., 2009; Kabir & Barman, 2019). Prior to conducting the research, each participant was clearly explained its aims and objectives. Besides, we also explained the reasons behind the personal and sensitive questions that were framed in the interview framework. That's why, we sought their oral consent. However, they were given full liberty to end their participation from the interviews at any point. They could skip any uncomfortable questions if they felt the need to do so. Each participant was assured of privacy and confidentiality through the use of pseudonym. The victims were interviewed at times convenient to them. In some cases, our data collectors, who were well trained in counseling, responded appropriately to reduce and manage the emotional distress of the victims.

3.5 *Limitations of the Study*

In general, for a critical and useful study, there might have some limitations and this study was not beyond such limitations. Notably, the data collected from women seeking help were not verified and substantiated from other sources. There was a possibility that some respondents might have suppressed some facts or felt uncomfortable revealing personal and family details relating to the abuse they suffered, especially sexual abuse, because of inherent cultural barriers.

4.0 RESULTS

4.1 Socio-demographic Characteristics of the respondents

The findings of the study revealed that in almost all families suffer from poverty due to the nature of the profession and economic inadequacy. Most of the participants aged between 9 and 15 years of age belonging acute lower socio-economic stratum with an average monthly family income of Tk. 3,650 that reflects a harsh reality in present state. Owing to paltry income from day labor, brick field worker, rickshaw puller etc., most participants had little or no access to education even from their standard of living was abysmal and their health generally was poor. Only 7 participants completed primary education, while 10 respondents just wrote their name and read subconsciously the transcript and rest of them went to school but were unable to complete primary education, out of 22 participants. When we talk about the husbands of the participants, the same scenario we observed, their education was not more than high school degree while some of them were illiterate practicing very patriarchal values of the society. In Bangladeshi culture, a husband is generally older to his wife and they were married before reaching 20 years old (Das et al., 2016). The average age gap between a husband and wife also contributed to major threats of maternal health. Findings also showed that existing sociocultural norms, reinforced by patriarchal structures, made these women become objects of exploitation and misogyny (Bhattacharyya, 2015).

4.2 Roots of child marriage

Child marriage continues to be a reality for many of the world's girls because of a variety of factors i.e. poverty, lack of education and job opportunities, insecurity in the face of war and conflict, and the force of custom and tradition (ICRW, 2010). In general, forced child marriage is much more common in poorer countries and regions, and within those countries, it tends to be concentrated among the poorest households. For example, a girl from a poor household in Senegal is four times more likely to marry as a child than a girl from a rich household. Similarly, in Bangladesh, the factors driving child marriage bestowed on an adjustment mechanism for poor families and from multifarious factors of CHM, four prime factors are considered i.e. poverty, educational limitations and economic options, social pressures and obsolete customs with religion and insecurity in the face of conflict.

4.2.1 Poverty

A major underpinning factor, poverty is encouraging early marriage. Even as, for many poor families, young girls are often considered as an economic burden by their families and their marriage to an older man and into another family is often a family survival strategy, reflecting that one less person to feed, clothe and educate in order to obtain financial security. Even globally, forced CHM is much more common in poorer countries and regions, and within those countries, it tends to be concentrated among the poorest households. For example, a girl from a poor household in Senegal is four times more likely to marry as a child than a girl from a rich household (ICRW, 2007). Statistics show that, in Bangladesh, India, Pakistan and Nepal, parents feel that their burden of paying a dowry at their daughter's marriage will be lower if she is married at a young age. It will be badly lighted by UNICEF focusing on the following collective and individual attitudes and beliefs that led to compel girls for the marriage before the age of 18 years (UNICEF, 2011).

Unmarried girls are considered a liability to family honor. Dowry perpetuates child marriage as it encourages parents to marry off their girls early to avoid an increase in the dowry amount because more educated girls usually require a higher dowry. Another tendency of CHM is to marry girls as early as possible to reduce investment in education of their daughters. With the aim of reducing the costs of wedding ceremonies parents often marry off their children early seizing the opportunity of collectively and or in one ceremony.

The victims of CHM were sometimes physically, mentally as well as psychologically repressed to support the decisions taken by family head, although it marginally occupies the societal recognitions. Nurjahan Begum shockingly remembered her moments:

When I was at the age of 12, got married with over doubled 26 years old Saju Miah. Unluckily, at the very beginning of my life my mother died, I was just a two years old kid. As a result, my father married again and step mother started torturing me occasionally. I agreed to my marriage because of relieving the physical, mental torture of stepmother, although I dreamt to be school teacher in order to flourish the light of education. Besides, I had another two sisters and one brother what indirectly forced me to marriage. Additionally, my father was a tenure farmer, experiencing acute poverty.

Fairly, this finding and the other stated ahead reinforced other studies on CHM describing that in communities or countries where the bride brings resources at the time of marriage the dowry, which is more prevalent in South Asia, the required dowry to be paid by parents may be lower if the bride is younger (World Bank & ICRW, 2018).

Presently, 20 years old Gita Rani got early married with Nabin Kumar, who was 2 years less than Rani. The higher the age of bride, the higher the dowry to be paid to the grooms because in Hinduism the bride's guardian provide 'demand' (local popular term used by the bride, groom personnel's in Bangladesh) to the grooms added by the guardian of Gita. In fact, her parents arranged her marriage forcefully because of her beauty, boys teased her while some of them had threatened to kidnap, gradually Gita was mentally depressed and couldn't continue to go to school. The situations belonged to:

Ultimately parents of Gita stopped her education, though she had a strong desire in studying. This unhealthy situation discouraged her raising voice, what will you do with an education? After all you have to take care of your home, family and works in the fields? Furthermore, you have another three sisters, you know my economic stabilities sharing these, Gita was managed. Finally, they decided to marry their daughter ignoring their neighbor's forbidden only emphasizing security, relieving extreme poverty and with a fresh dream of social relationship.

4.2.2 Educational limitations and Economic options

Relevant sources always recommend that little or no schooling strongly correlates with being married at an early age. And conversely, attending school and having higher levels of education protect girls from the possibility of EM in general. In case of Shefali, as her father was a tenure farmer, ultimately it was difficult for her parents to arrange marriage of four daughters, even quickly growth of sisters was another reason of EM. While the guardians thought that, if they marry their daughter one after another, socio-economic burden might be relieved minimally. Bilkis Akhter added her hard days explaining such;

A chance got my father likely only 30 thousand BDTK, a bicycle will be provided to groom's family as dowry that utilized my father ignoring many things of CHM. Owing to be a rickshaw puller, it was difficult to keep momentum of such opportunity and my housewife mother also supported the marriage. Besides these, we were three sisters and two brothers where I was the elder of them. As a result, I did not continue my schooling. In the cultural milieu of the region, a black skin girl experiences many things what has been greatly true for me because of skin color. Consequently, CHM is very much demanded in the market so that they can make their bride according to groom's desires and expectations to household chores, childbirth.

Similarly, Firoza reported:

Though I had a strong desire of studying, my mother tried to agree at the arrange marriage by understanding the state of financial issues. That unhealthy circumstance discouraged me raising voice, it is cleared by the asking of father. Is there any benefit of studying? My father argues 'We are to do household chores, agricultural activities, so whatever we decide it's all in all, we just behind your good thinking'. Feeling anxiety, I decided to marry of their choosing groom ignoring my dreams. The sense of burden over family also compelled me to agree to the marriage remembering the heartfelt complexities of my poor family.

In many countries of the world, boy's education is being prioritized than girls due to the nature of the state. Materially, parents who are unable to feed their children, or pay for their education costs, may seek a husband for their daughters simply so that the girls can depend. Eventually, poor girls lack access

to education because their families cannot afford fees for exams, uniforms, stationery, and other associated costs instead of education is free and compulsory. In fact, narrow mindset of the patriarchal society towards girls, considering them as submissive, just homemaker and sources of reproduction rather evaluating their great contributions to make next generation smart, eligible to adapt very unfavorable environments (ICRW, 2007; Lal, 2016).

4.2.3 Social pressures and obsolete culture with religion

From earlier to societies, a father is pressurized to marry off his daughter as early as possible to prevent her from becoming sexually active before marriage, because a girl brings dishonor, anxiety to her family and community. Logically, only marriage visualizes a woman's status in many societies, regions that's why parents are worried comprehensively by recognizing if they can't marry their daughters according to social expectations, they will not be able to marry them at all and/or experience vast in quantity. The research revealed that in several communities, social pressures, traditions with religious claims including the widespread practice of paying dowry, and lower dowries for younger girls, make child marriage accepted and expected. Nonetheless, the contemplation of dowry still requiring a bride's family to pay significant sums to the groom encourages the marriage of the youngest adolescent girls because younger brides typically require smaller dowries. Although dowry demands continue in sub-continent even after the wedding, while sometimes resulting in domestic violence against the bride if families are unable to pay the momentous demand (Das et al., 2015). As noted earlier, Gita was teased when she was going to school. She added her reactions:

One day I came to learn from my class mates that the teasers were planning to kidnap me altogether. After learning the fact, I was asking myself, what did I do for them? And was my beauty a curse for my life? Besides, I informed the matter to the head of the school, when the authority didn't take any action, I scared and frightened greatly. My parents got frustrated about my study and finally stopped my schooling saying this 'we are poor and peaceful persons, never desire violence, conflict no need to study and take it as bad luck'.

Fear of sexual harassment of young daughters and failure by police to stem these harassments also become spare cause of CHM in Asian countries like Bangladesh. Hereafter, CHM is regarded as a way to protect a girl's sexuality in an unsafe environment. ICRW (2007) reported certainly considering the truth:

Forced child marriage also is a route to cementing family, clan, and tribal connections or settling obligations. For example, in Pakistan's Northwest Frontier Province, Afghanistan and in some parts of the Middle East, marrying young girls is a common practice to help the grooms' families offset debts or to settle inter-family disputes. At its core, forced child marriage is rooted in tradition. No one religious affiliation was associated with the practice, rather, a variety of religions were associated with a high prevalence of forced CHM in a diversity of countries throughout the globe.

4.2.4 Insecurity in the face of conflict

It is quite difficult when families live in an insecure region, daughters are genuinely cause their parents concern and may they believe that marrying them is the best way to protect them from danger. Even in war-affected areas in Afghanistan, Burundi, Northern Uganda or Somalia, for example, a girl may be married to a warlord or another authority figure who can ensure that she and her family remain safe. In the Democratic Republic of Congo and elsewhere, girls have been abducted or recruited by armed groups and made into the bush wives of combatants and commanders (UNICEF, 2005).

The research found how patriarchal practices and social environment allowed male to dominate and exploit girls with the name of safety, social status. They are compelled to agree to the marriage ignoring their opinion, future and social integration enormously. As Gita explained, my beauty became major obstacles to live in peace and lastly my father got afraid only thinking my safety, sexual harassment. Consequently, the social environment didn't support me to cope with the embarrassing situation.

Regarding insecurity Mariom shared her experience:

My parental cousin Mr. Ali proposed me earlier, as a result my father was tensed about daughter's security, what created a prestige issue in the marital points of view. Again, he was a shopkeeper,

had a cow business, didn't demand any dowry from father, that inspired to EM lastly. Although, I didn't like him, always avoided him, even sometimes was weeping, the decisions were unchanged from father about CHM for protection.

Few women are humiliated and blamed for delivering female child, although the total responsibility of being child birth belongs to male in general. Despite the fact, husbands and in-laws expects a male child and it is done with my mother expressed Shefali. Additionally, my father wanted to marry again while my mother protested the 2nd marriage understanding the sufferings of another wife. Shefali's mother reported her sufferings:

As My husband and in-laws wanted a son, they were furious and blamed me for giving birth to three daughters consecutively. For that my in-laws wanted my husband to remarry. As for my husband he was so angry that he was not interested in sending my eldest daughter (Shefali) to school. Lastly, without deep consideration we decided to marry her at an early age.

4.3 EXPERIENCES OF CHILD MARRIAGE

Women reported multiple types of physical, psychological abuses when they went through in their married lives (Das et al., 2016). Eventually, girls experience a very devastating and life's trajectory scene when they marry at early age, have at a higher risk of dying during childbirth, having their child die before its first birthday, contracting AIDS and becoming a victim of domestic violence. After the marriage girls have to do the role of wife, domestic worker, as well as mother at their husband's household (as cited in Nour, 2009).

4.3.1 Maternal and infant health risks

Most relevant researchers found that, girls are more at risk of death or terrible injury and illness in childbirth who marry and give birth before their bodies are fully developed. In 2007, UNICEF reported that a girl under the age of 15 is five times more likely to die during pregnancy and childbirth than a woman in her 20 years old. Risks extend to infants too, if a mother is under age 18, her baby's chance of dying in the first year of life is 60 percent greater than that of a baby born to a mother older than 19 (as cited in ICRW, 2010). The study showed that battered women underwent unbelievable horrors. Shefali remembered how she was assaulted:

My husband constrained me to sexual activities though I was infant, resulting insufferable physical pain and much crying was my usual hour. One day, Siraz forced me to do sex when it was bleeding constantly, then admitted me into a local medical center. I could not raise my voice against husband, was mentally breakdown because of minimal absence of caress in father in laws house. Siraz either slept on floor or went out of room if he was unhappy for physical relation with me. Materially, male only wants females physical body ignoring mind otherwise my husband didn't threaten me to go back to my father's house the next day of my marriage.

Findings also discovered that, three months later of marriage Shefali got her menstruation by taking much homeopathic medicine and three years later she conceived her 1st child. Factually, Shefali miscarried 1st baby because of restlessness, intensity of extreme sexuality even during child conceived. She further added that, she was doing much heavy domestic work i.e. pressing the tube well, anointing house, cooking, washing cloth and pulling out cow dung from one place to another place etc. Similarly, Gita added her experience:

I conceived 1st baby within 4 months of marriage and it was miscarried during 7 months of pregnancy period, due to heavy domestic work. Hence, 9 months later again I conceived my 2nd baby, still I did not know about contraceptive method even my mother hadn't suggested how to use it. Although my husband Mr. Kumar knew about that method, did not think of using it anyway, saying that 'child is the gift of god'.

Some battered women argued that they received no money to run their homes as their husbands refused to provide them with daily essentials, especially food and clothes. Because some were addicted to gambling and few of them forced their wives to sell their labor so that they can add income to the family. In many cases, the husbands and in-laws did not offer nutritious food to pregnant women, remained

hungry but nevertheless had to perform demanding household chores. Nurjahan exposed her heartfelt sufferings:

Hence, I conceived my 1st baby after one year of marriage when my husband left his work and addicted to gambling. The heartfelt condition broke down my mind, although I had no option to left in-laws house. Forcefully, I started to work in a female hostel from early morning to late night, besides cooking all heavy works to be done. Day after my health getting worse, while in the night my idle husband physically tortured, forced me to do sexual activities. I was mentally depressed and couldn't share my problems to other, seemingly in one day, I was senseless falling down from the 2nd floor to the ground floor. Afterwards, it was bleeding and a serious colic and when mother-in-law admitted me into a hospital, unfortunately doctor informed that my baby was aborted and it was 5 months of pregnancy. After abortion it seemed I had no blood in the body, actually heavy work and unhygienic sexual activities were the major reasons of my child death though Saju got change after that incidence.

Naturally, child brides also are at far greater risk of contracting HIV than their counterparts who marry later. Often, they are married to older, more sexually experienced men with whom it is difficult to negotiate safe sexual behaviors, especially when under pressure to bear children (ICRW, 2010). Mothers of Rehena explained the condition of her daughter during childbirth:

My young girl Rehena faced tremendous health risks in childbirth as she was a child bride, a serious condition known as obstetric fistula. As a result, my young child's vagina, bladder and/or rectum teared. It caused a serious harm and without surgery, the condition lasts the rest of the girl's life. Moreover, Fistula patients are commonly poor women, ages 15 to 20, many of whom were child brides.

4.3.2 Domestic and sexual violence

Early married girls are more likely to be abused sexually, physically and emotionally by the husbands, sometimes by the in-laws and, in some cases by the husbands first wife. An ICRW study in India shows that girls who married before age 18 reported experiencing physical violence twice as often, and sexual violence three times as often as girls who married at a later age. Firoza painfully recalled her encounters with violence:

I was surprised when I was beaten by husband after the 1st day of marriage because of extreme sexual intensity. As regular phenomenon he slapped me with his bare hands strongly, though it was painful, no one heard me. Moreover, my husband forced to involve in doing all domestic works, even after at night. Similarly, in one day after 25 days of marriage, I raised voice against their in-lawful decisions afterwards my husbands and in-laws started beating me with an axe. Instead of these, he wanted to divorce me, I just tolerated ignoring all kinds of sufferings.

Research findings also revealed that, despite completing household chores as efficiently as possible, the husbands and in-laws never appreciated the work. On the contrary, they were often mocked at and teased for being unable to perform simple tasks, such as cooking, thereby making their husbands complain about badly cooked food (Das et al., 2016). As Nourin stated her days:

Only for tasty food I was being scolded day by day. In-laws always said, 'your cooking is so bad that nobody can eat it' and my husband supported them blindly. When I tried to raise voice, he would stop talking and would leave home for long days. During the period, the family members desperately neglected me saying 'go to your father's house and live there' otherwise you will experience something more danger.

Similar studies show that, the disrespects towards women are still continuing where most husbands treat their wives as maids in general. Interestingly, husbands would marry them because of the children and the wives would not remarry or leave, thus forcing them into a helpless status. Morally, abused wives hardly went out socially with their husbands. Meherun is one of the battered women and added her odd days boldly:

My husband didn't support to eat good food and claimed that during pregnancy period I experienced serious health problems i.e. dizziness, and blows on my tongue, headache and malnutrition.

It was very tough for me to eat anything, as I lost my food appetite and couldn't rise from the bed about 3 months. Additionally, I needed better suggestion from a doctor but my idle husband never took me to the doctor only for thinking the cost. Being a greedy person, my husband never encouraged me and took the responsibility of the family. Lastly, I was taken to hospital by my father considering the baby growing in my uterus, though birth of a child becomes a dream for parents in some cases.

4.3.3 Educational and psychological abuse

CHM deprives girls of their childhood while they are thrust into the full burden of domestic responsibility, motherhood and sexual relations rather than playing with friends, dreaming about a career or fretting about a school exam. Researches show that, girls who marry before 19 are 50 percent more likely to drop out of high school, often unable to access education, more likely to earn low wages and work opportunities, because they tend to have more children, earlier and more closely spaced and significantly more likely to live in poverty. That's why Gita recalled the complexities:

I missed the chance of education, an unlucky girl because my class mates did good job. They are interested in alleviating poverty, enlightening the locality, empowering them and yes, they are successful today whereas I am only home maker, mother of three children whereas they are playing role as govt. officer. When it was golden time for enhancing my knowledge, improving my social quality, I became the child bride.

It is discovered from the research that, young married girls move away from their parents' home to live with their husband and his family, where they have no friends, no support, and little say in their own lives or in household matters. In simply, young married girls often are isolated and powerless, unable to negotiate or obtain support for issues in their own interest. Frequently, they are exposed to violence and threats of abandonment and divorce. Nurjahan brutally reported:

One day I warned my husband that if he continued to torture me, I would divorce him. He laughed at the news because he knew that it was impossible to leave him. Again, my parent was so poor and was unable to arrange my 2nd marriage, even I had 3 daughters. As a result, nobody will marry me, so I have to live with him life time.

Meanwhile, wives were humiliated and emotionally when their husbands were having extramarital affairs. Nourin described: 'I discovered that my husband was involved in another relationship. He often talked to her over the mobile phone. When I protested, I was severely beaten.'

4.4 Mass awareness and child marriage

In general, to minimize the incidences of CHM, Bangladesh government strictly started various projects including girl's education, child protection, skill development training, child marriage protest program, incentive program for girl's, capacity building of stakeholders, media mobilization, prioritization of girls to primary education, empowering girl's program and girls' residential schools etc. Accordingly, the declaration of UNICEF 2011, CHM can be stopped with the following ways:

- Promoting girls' education and empowering them
- Integration of child protection, empowerment of adolescent girls and women's equality
- Improving the nutritional and health status of adolescent girls
- Scheme for National program for education of girls by scholarship through setting up residential schools
- Ensuring security for tribes and other backward castes and minorities in difficult areas
- Initiating child marriage protest program and raising voice boldly against child marriage
- Building the capacity of reliving from prejudice
- Arranging nationwide awareness campaign for controlling over population
- Implementation of strong laws related to child marriage

- Behavior change communication related program should be designed and implemented to sensitize the parent on ill effect of child marriage
- Introducing poverty alleviation program focusing livelihood standard
- Arranging campaign for the health of mothers
- Avoiding the obsolete culture related to women and
- Implementing the existing laws related to child growth for future generation

5.0 DISCUSSION

Naturally, the practice of patriarchy promoted the CHM because women were unambiguously incorporated to the decision-making activities, a fact that our findings integrally validated. The study revealed that variety of factors were responsible for the CHM and events of early marriages in northern Bangladesh. Some of these were; absolute poverty which compelled parents to engage their daughters to CHM, a sense of powerlessness feeling of the victims that contributed to their silence, traditional and sacrificing mindsets of the girls also support EM, the presence of male's domination, lack of knowledge regarding gender equity, a harsh mentality of obeying existing laws and customs, prejudices and religious compliances. Culturally, poor socio-economic condition and infrastructure of the region stemmed from the prevailing gender traditionalism and passive role of females indirectly promoted the practice of CHM in Bangladesh.

In fact, Adolescent girls suffered from inferiority and lack confidence in dealing with other people. Marriages involving a very young wife and much older husband tend to be less cohesive, riddled with marital strife and dissatisfaction, and more likely to end in divorce, abandonment, or polygamy. The study also suggested that girls married at young ages were more likely to experience multiple pregnancies, recurrent miscarriage and termination of pregnancy and delivery related complications. Even girl brides experienced difficulties to achieve healthy pregnancies because of poor physical and mental health, and susceptible to sexually transmitted diseases, fistula, and poor sexual health. In some cases, child brides experienced greater risk of HIV than girls who married later (ICRW, 2010). Many respondents reported that they had to tolerate domestic violence as they financially and emotionally dependent on their husbands. For example, brutal sexual instinct forced girl bride to sexual activities and discouraged to use contraceptive also impacts on health of child bride. For this, brides were threatened to divorce and separation while some responded that demanding dowry even after marriage broadened the cases of divorced. Meanwhile, husbands and in-laws exploited this situation by indulging in relentless abuse (Das et al., 2015).

Research also revealed that socio-cultural factors caused CHM and maternal complexities manifesting unequal power relations between males and females. For example, age gap between husband and wife causes conflict to sexual relationship that affects to daily familial matters enormously, wife abuse and controlling their voice reflects to the intensity of gender discrimination (Dalal et al., 2009). Religion with traditional prejudice occupy a great portion of customs in Bangladesh, what indifferently treats the CHM as concern of poor parents focusing the theme that 'today or tomorrow a girl will be wife of individual'.

Subconsciously, social pressures of parents delivered by common people of community and with the name of social status, the term 'burden' is used to the girl child what strictly goes to the challenge in respective areas seriously. It was also found that in one hand for safety reasons guardians stopped education of their girls and decided to marry them because eve teasing, sexual harassment might cause brutal occurrences with their dears. On the other hand, girls dedicated their all dreams as they never raised voice against the parent's decision.

6.0 CONCLUSION

The current study is an effort of identification and generalizations of CHM targeting different forms of reasons, experiences associated in northern Bangladesh. Again, the phenomenon CHM how effects on the health and societal aspects, what kind of vulnerabilities imposed by EM is also tried to find out by

this study. Specially, poverty, economic hardship, insecurity, and social pressures promote CHM ignoring any aspects of helpless, powerless girl child. Although, the young brides experience large scale threats throughout their lives including starvation, divorce, threat of separation, extreme conflict of ideology with husbands and in-laws. The findings also be useful for practitioners, policy maker's human rights activists to develop strategies to fight CHM as well as to raise consciousness. In short, CHM is a recurring social problem in Bangladesh that distracts the social, educational and psychological development of young girls creating a silence culture through multifarious domination of patriarchy. For this, gender equity needs to be sensitized so that we can enrich our culture minimizing domestic violence and anti-social practices from this territory. Only then, laws will be obeyed, existence of society will be easier, no one will be neglected including CHM and functional behavior regarding girls will be advanced gradually.

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