



AN EMPIRICAL STUDY ON ASPIRATION OF WOMEN AFTER THEIR CHILD MARRIAGES IN ANANTAPUR DISTRICT OF ANDHRAPRADESH.

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Abstract

Child marriage is still a unsolved problem in many developing countries. In Indian society, subjected to several kinds of problems for centuries. The constitution of India provided for certain safeguards and provisions for preventing child marriages. But available data suggests that the eradication of child marriages could not be achieved to the desired extent. The following questions assume importance in this context: what are the aftermath of child marriages? What are their ambitions? This paper attempts to answer these questions in the context of drought prone Anantapur district of Andhra Pradesh based on an empirical study covering a sample of 60 child brides.

Introduction

The negative effects of child marriage, at individual level and at societal level, are manifested in several ways. If one imagines the life of a girl who gets married at the age of 10 or 14 or below 18, who is neither physically nor emotionally ready to become a wife and a mother. She might get pregnant before her body has fully developed, which can get negative results. There are two major risks before child brides that are infant mortality and maternal mortality.

Aspirations can relate to many aspects of life. Caroline Sarojini Hart argues that aspirations are future-oriented, driven by conscious and unconscious motivations and they are indicative of an individual or group's commitments towards a particular trajectory or end point. An individual might set their aspirations in relation to what they know they can achieve or they might set aspirations more ambitiously to strive for ways of being and doing they are not sure of realizing. Some individuals might aspire in a non-specified way in terms of wanting "a better life," whereas others might strive for specific transformative social change, such as a change in the law.

She may be subjected to domestic violence that may affect her morale, mental and psychological life. She has to give up career opportunities, because of school dropout, and spend her life living in poverty. In the absence of economic freedom, she will not be able to provide better nutrition food to her infants, better education to her children and adequate care of her family. If this cycle continues, there is every possibility of her children likely to face the similar challenges as she faced. Child bride's choice aims to break this cycle and give an opportunity to design her life. Although there are several international agreements and national laws that frown upon the practice of child marriage, it remains a common custom in most parts of the developing world.

Child marriage in India is not a new phenomenon. The practice as it prevails now, though, continues to thrive in economically disadvantaged communities, especially those that are coloured by customary and cultural practices and perspectives that encourage the early marriage of a girl child. It requires multilevel approach to eradicate child marriages. Government ministries, development experts, advocacy agencies, religious and community groups should come to gather, have a national and state level action plan to end child marriages. The available literature throws light on the instances of deprivation of child brides in terms of physical, psychological, social, and economical status in



different parts of the country, especially in rural areas. There are not many studies on child brides, particularly in Rayalaseema region of Andhra Pradesh.

Objectives and Methodology

This article analyses the consequences of child brides. The study was carried out by the individual researcher and it is based on primary data collected from 60 child brides chosen on the basis of systematic sampling method from six villages spread over six mandals from Anantapur district. The reference period of the study was June, 2023.

This study of 60 child brides in the age group of 15 to 24 who got married before 18 years of age, and were interviewed and that every child bride (100 %) reported having aspirations, however, they had never shared with anyone else. It is mainly because they don't have voice or no one in the family listen to their views and aspirations. It appears that, most of the time they are afraid to tell other people about their aspirations. Child brides interviewed revealed aspirations therefore only give a partial view of an individual's "aspiration set". Unshared, aspirations may also form important elements of an individual's aspiration set. Furthermore, aspirations are shaped and constrained by many factors but this is not necessarily readily apparent.

Study tried to elicit the aspirations of child brides through probing on their viewpoints/aspirations about their education, family, children and so on. Besides, attempt has been made to document the health, psychological and social consequences of early marriages.

Results and analysis

Mixed methods – both qualitative and quantitative methods were used to collect the data and information. Research methods adopted in this study are – desk review; and one-to-one interviews with selected child brides. perceptions of child brides; and consequences of child marriages. Questionnaire To collect the information from child brides, semi-structured questionnaire has been developed. It covers all important variables –(a) profile of the informants;(b) general and specific perceptions; (a) challenges related to early marriage and teen-age pregnancy, financial, physical and mental health. (d) their aspirations; Based on answer, further probing was done to know more on why she agree/disagree on particular question. This has helped in quantifying the perceptions and aspirations in a more robust way. Questions in draft questionnaire has been validated by the researcher to find out its relevance and possibility/probability of getting answers from the child brides.

Prevalence of Child Marriages in Andhra Pradesh

According to the 2011 Census the population of India is slightly over 1.2 billion, about 48 percent of which is female and nearly 68 percent of these women live in rural areas of the country. Women in rural areas have very less opportunities and lack the capability to participate in decision making. As a result of male-controlled mindsets and gender norms, young girls are subject to social evils like child marriage and female genital mutilation. Child marriage in India is still commonly practiced and according to the census in 2011, 17 million children between the age of 10 and 19 were already married, out of which 76% were girls. The incidents of child marriage vary across different regions and states in India. Rajasthan, Jharkhand, Uttar Pradesh, Karnataka, Madhya Pradesh and Andhra Pradesh have the highest prevalence of child marriages. This section establishes the prevalence of child marriages in Andhra Pradesh and using data from Census 2011, National Family and Health Survey (NFHS) and District Level Household Survey (DLHS).



Profile of the child brides

PROFILE OF THE CHILD BRIDES

■ Peddapadu ■ Cherukulapadu ■ Munugala ■ Kalugotla ■ Kowtalam ■ Deva

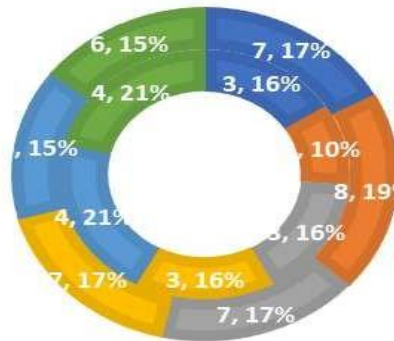


Figure 1

Of the 60 child brides interviewed, 19 have married in the age between 11 and 14 years. Larger majority (68.4%) got married between 15 and 18 years of age (Fig 1). Several reports says that early marriage of girl leads to early pregnancy and early pregnancy results in several sever health complications that may lead to infant and maternal mortality. In this context, the assumption could be those girls who got married before 14 years of age may have larger risk factors than those who got married between 15 and 18 years of age.

Age at Marriage for different religious group

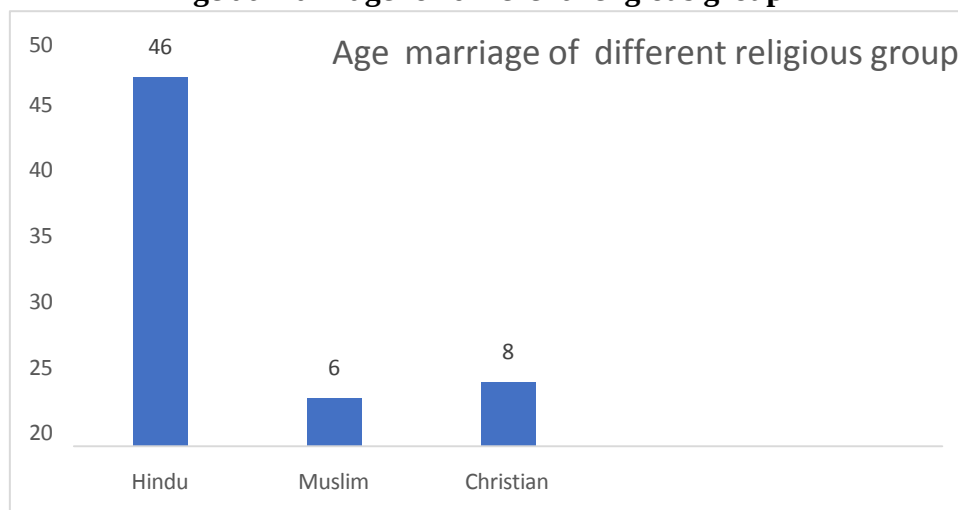


Figure 2

Data in (Fig 2). indicates the child marriages for different religious groups. However, given that number of respondents is extremely high for Hindu respondents when compared to Christians and Muslims this may not be a very accurate conclusion.



Age of marriage for different caste groups

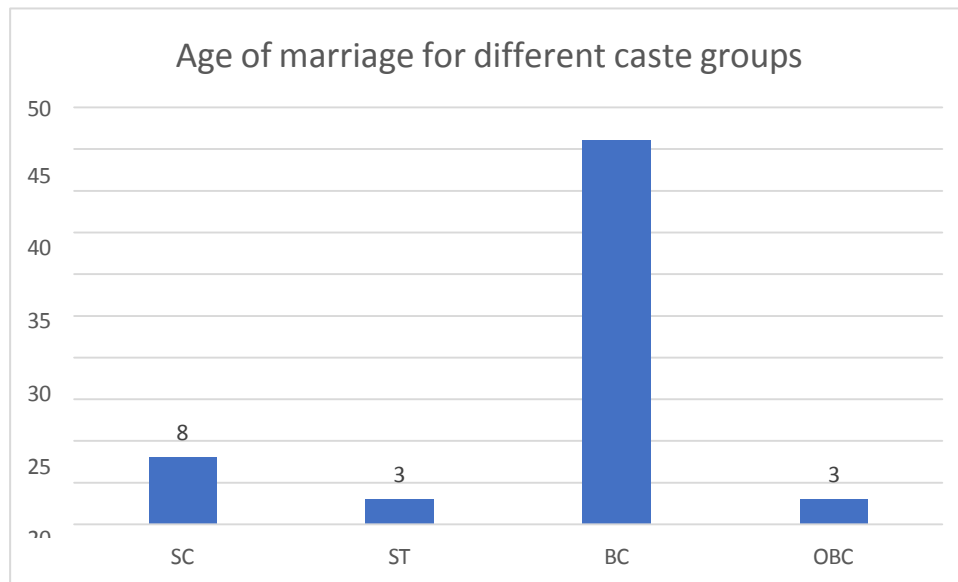


Figure 3

On an average the mean age for marriage for SCs, STs and OBCs remains around 17 years. However, the mean age for BCs is lower of around 15, but then again, this group had the largest number of respondents so the data could be biased against them.

Education at the time of marriage and present activity

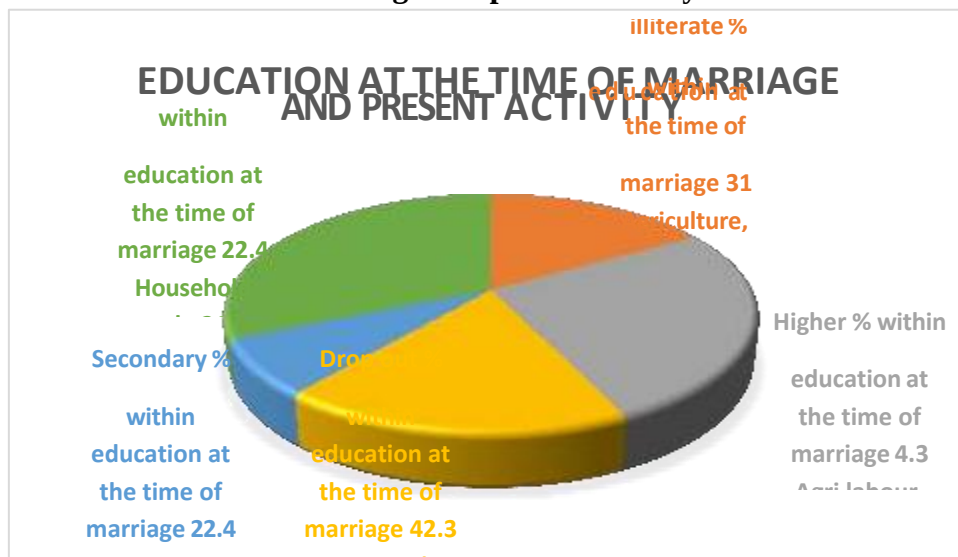


Figure 4

Data in (Fig 4). shows girls who have dropped out of school, post marriage their main economic activity remains household work. About 65% of the girls who had dropped out of education worked as household help and about 16% of the same were engaged in agriculture. About 31% of the illiterates were engaged as agriculture laborers and the same percentage were employed as non-agricultural laborers. Among those with secondary education, 31.5% of the girls were housewives and 26.5% were agricultural labors.



Education at the time of marriage/unprepared for sexual life and early pregnancy Cross tabulation (%).

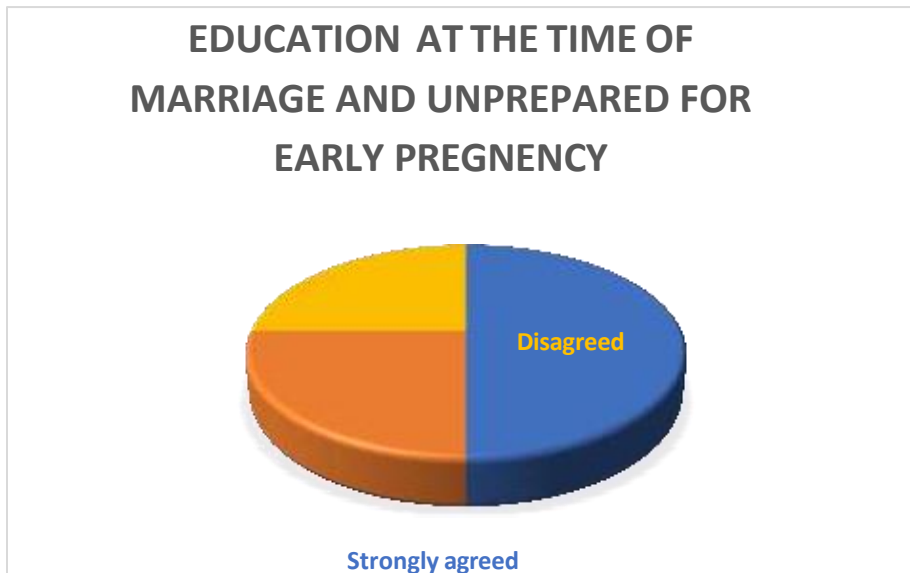


Figure 5

Out the total respondents across all levels of education, 65% of the child brides strongly agreed to being unprepared for sexual life and early pregnancy to the same sentiment. Among the girl who were dropouts at the time of marriage. About 33.33% strongly to having been unprepared for sexual life and early pregnancy. strongly agreed to being unprepared to deal with rigors of childbirth and sexual life. Only 26.6% of respondents across all of education disagreed to having being unprepared. Hence it can be assessed that child brides despite some form of education, are unprepared to deal with the complications of early marriage.

Key problems faced by child brides

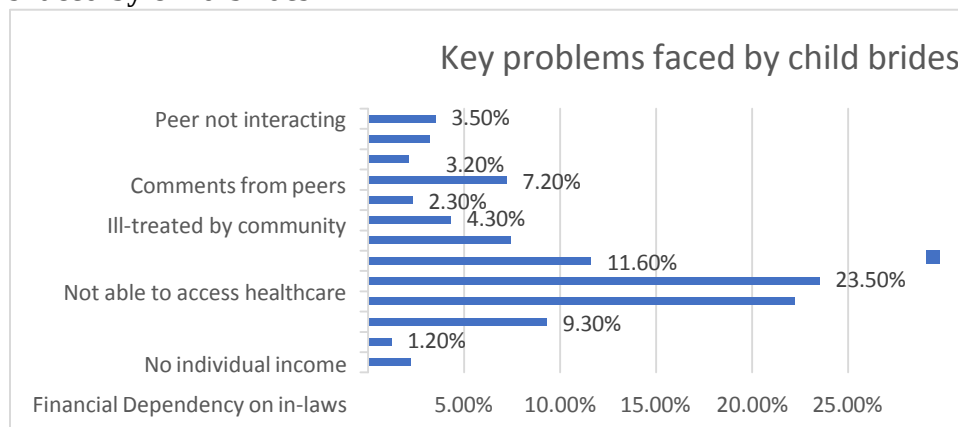


Figure 6

Above (Fig 6). presents an analysis of the key problems being faced by Child brides. 22.20% of the brides expressed problems due to financial dependency on husband, followed by 23.50% of them facing problems due to lack of individual income. About 9.30% of the respondents expressed troubles with financial dependency on in-laws, closely followed by 11.60% having concerns over not be able to purchase clothes. These problems stem from poor financial status of the child brides owing to lack of



education and endemic poverty of these families. 7.40% of the respondents expressed concerns over lack of health care and absence of quality food was felt by a few of them. A small proportion also expressed that their voice is not heard. Being subjected to domestic violence, isolation from peers and unable to meet their parents were also some concerns expressed by these child brides.

It is to be noted that, child brides are not able to say much about the violence and abuse. This is mainly because, according to majority of the child brides, abuse is the most common feature within the family and they used to it. In few cases, they are reluctant to discuss about the violence either in the family or in the society. Few said that they are not supposed to talk about such issues with outsiders.

Percentage receiving Maternity Care

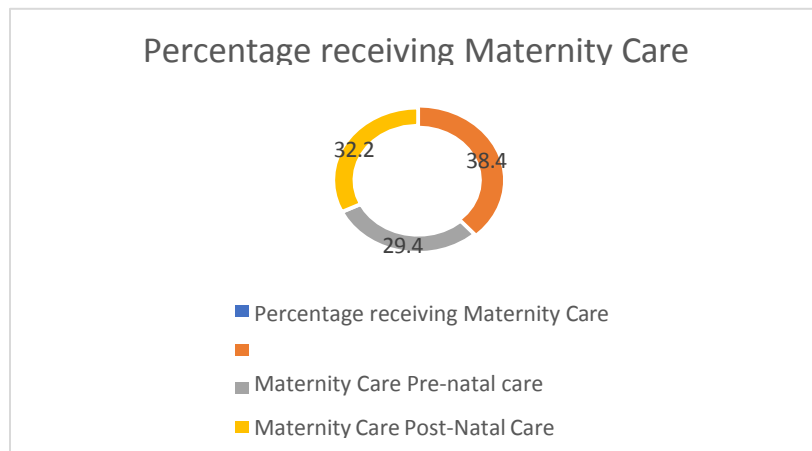


Figure 7

(Fig 7). Presents among the child brides interviewed 38.4% received pre-natal care, even fewer about 29.4% received post-natal care. Only 32.2% accessed immunization services. This points to the deficits that girls below 18, face in accessing maternal health benefits. Since most maternal health programs are designed for girls above 18 years of age, child brides are excluded from this service.

Ambitions of child brides

Wish to have a small family of two or three children/using any family planning methods Recommendations from the perspectives of child brides.

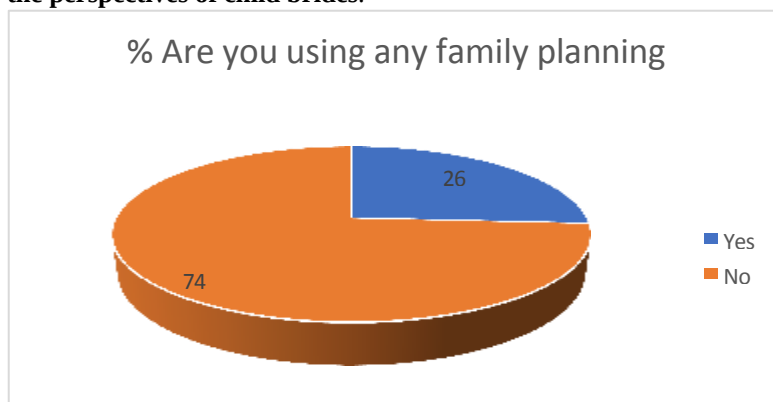


Figure 8



(Fig 8). represents it is evident that 74% of the child brides interviewed who wish to have a small family do not using any family planning methods. Only 26% of those aspiring for a small family are using family planning method. This reflects the lack of awareness as well as the societal norms prevalent, hindering young girls from making choices. In most of the cases, it was told that spacing the family is not in her control and husband and mother-in-law is taking decisions.

Aspire towards suitable education vs. Economic Independence

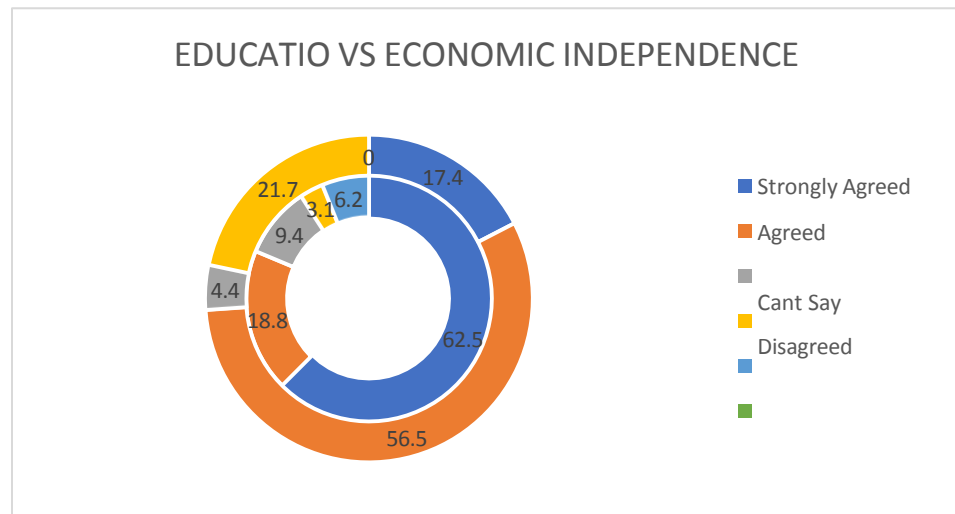


Figure 9

From the data presented in (Fig 9). it is evident, that 17.4% of the child brides who wished for

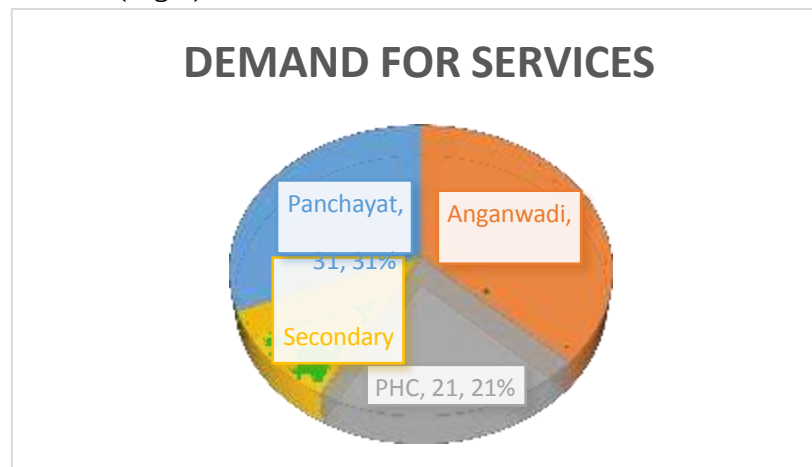


Figure 10

financial independence strongly, also aspired for good education to get a job. And 56.5% respondents agreed to have financial independence. Most of them have told that financial independence facilitates them in providing better nutrition to their children and educate them properly. In other words, financial independence gives chance to mould their families in better way. Demand for services (Figure 10) Represents pie-chart, it is evident that Anganwadi services are the used and desired by 37% of the Child Brides interviewed. Most of this category child brides are either pregnant and or having infants. Though few don't have children or pregnancy, seeking Anganwadi support to come out from anaemia and malnutrition.



Besides, quite a few talked about SABLA/Adolescent girls' scheme through which girls belong to BPL families and school drop-outs are selected and attached to the local Anganwadi Centres for six monthly stints of learning and training activities. So that they can increase self- confidence, boost morale and give dignity. Also, it will help to avoid early marriages.

The demand to access Panchayat services is also 31%. This category is mainly concern about the role of GPs in preventing child marriages. About 21% of the respondents wish to access a Primary Health Centre. Most of this category child brides are having pre and post pregnancy related health complications. About 11% feel the need for access to secondary education and continue to complete higher education that helps in fetching income to maintain their families.

Demand for Educational Services

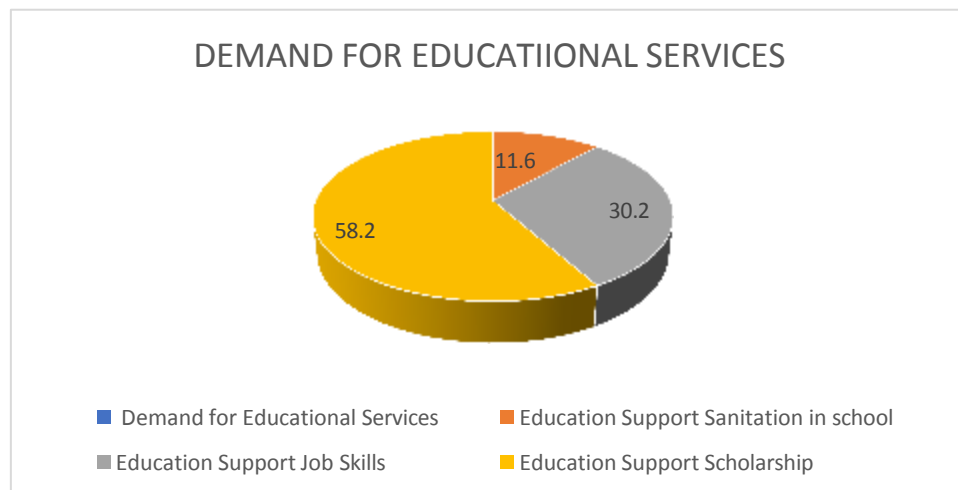


Figure 11

(Fig 11). Says about 58% of the Child Brides under study requested for scholarships to continue further education. About 30% requested for Job-Oriented Training and a small percentage of 11% also demanded sanitation facilities in school. A few of the girls requested for transport facilities, better faculty and books. This reflects the inadequacy of the services at educational machinery in the village.

Health Problems in infants of child brides

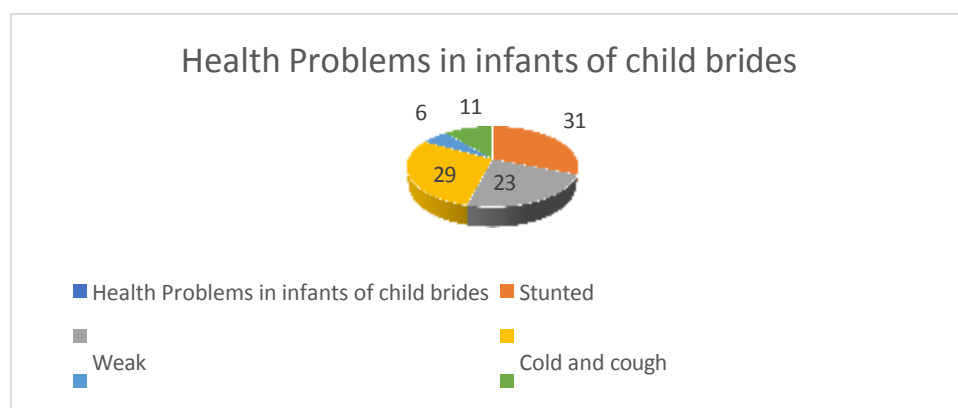


Figure 12

(Fig 12). Illustrates health problems encountered by children born to adolescent mothers who are unprepared to take rigors of childbirth. About 31% infants reported to have low birth weight and are



stunted. About 29% of infants are having cold and cough too frequently. Child Brides are often physically weak and hence they bear weak children. 23% of the children born are reported to be malnourished. 11% of the infant are not breast fed.

Major Findings of the study: To address critical challenges, most of the child brides are looking at Gram Panchayat support in preventing child marriages, accessing development services/provisions. Similarly larger majority are demanding the health services, particularly post and pre-natal services and immunisation services, and Anganwadi services for their infants, particularly for those who are stunted (malnourished) and often falling sick. One of the critical points emerged is the proper and timely support from Anganwadi/health centre to address the anaemic conditions among adolescent girls. Majority of the child brides said that they have less or no knowledge about family planning methods and spacing the family, for which they are demanding proper support from health services.

1. Small family norms: Many aspired for small family with two children, however awareness on family planning is very low. Mother-in-law and husbands are the decision makers in spacing the family. Demand made by them is proper counselling to their husbands and mothers-in-law on consequences of early marriage, sexual life, and birth spacing. In this context, there is a need to improve the reach out of primary health care and Anganwadi services to those girls who were married before 18 years of age.
2. Economic independence: Most of the child brides aspire for economic independence, however their educational background is not supporting them. Some of them have told that they need vocational training on job-oriented programs including soft skills. Those who are not interested to pursue further education after marriage, strongly aspire to have skill training course that will give chance to earn. It is therefore, job oriented vocational skill trainings have to be embedded into the present curriculum starting from secondary/higher education. Department of education has to rethink on how best the existing curriculum at secondary and high schools linked with vocational training courses, including soft skills. It is essential to map the local skill training centres run by the government, corporates and NGOs and link them with the existing structure of education.
3. Scholarships to pursue higher education: It is one of the widely talked point. Some of the child brides have said that due to financial difficulties in the family, they were forced to dropout from schools. If such support exists or accessible to them, perhaps their parents would have not thought of early marriage and forced them to drop out from school. In such cases, it is important to think about conditional cash transfers, bicycles to girls in secondary education, hygienic sanitation facilities in schools, and embedded vocational education in to secondary schools as suggested by Copenhagen Consensus in their recent report.
4. Healthy life: Majority aspired to lead healthy life, particularly to their infants. Those who had early pregnancy are demanding Anganwadi services. Those who are not pregnant also looking for Anganwadi services. Particularly this category of child brides is either malnourished or anaemic. Here, primary health care has to focus more on adolescent girls (either married early or unmarried) provide proper knowledge about menstrual cycle and hygiene, importance of Iron Folic, family planning methods, pre- and post-natal care and immunization.
5. Demand for services: Anganwadi, Panchayat, PHC and Secondary education are the most demanded services by the child brides. Particularly to Gram Panchayat their demand is to involve at right time to prevent child marriages. Those who are in urban area demanded timely support from policy as well as from legal services. Members of Gram Panchayat has to be sensitized on the socio-economic consequences of child marriages and made accountable to



prevent such incidents. If they act properly, most of the child marriages can be prevented.

6. Demand for information: Majority of the child brides have no or low awareness about their entitlements, child marriage prevention act and other child protection measures. It is essential to include such informative syllabus from the secondary education level.
7. Role of parents: Most of the child brides' have told that, mothers should play an intermediary role between girl children and the father and council father not to opt girl's marriage. In many cases, fathers are the decision makers about their daughters. In this context, it is essential to sensitize the parents on adverse impact of child marriages. Mothers' committees (Like school education committees – as told by child brides) has to be formed in each one of the vulnerable villages. Link it with other core stakeholders, starting from Panchayat, School, SHGs and front-line health functionaries to watch the families which are vulnerable and may opt girl child marriages. Most of the child brides strongly suggested that prevention should start from village itself.

Finally, this study brings following policy points: To end this persistent practice, policymakers should recognize that addressing child marriage is not only a moral imperative, but it is also a cost-effective and strategic move. Public-private partnerships and other collaborative mechanisms need to be designed to support efforts by civil society and the private sector to combat child marriage. Given the social norms, traditions and beliefs to the perpetuation of child marriage, programs that collaborate with political, community and religious leaders, self-help groups, and youth clubs should be a particular focus. Government policy on child marriages should focus on three critical areas: maternal and child health, family planning, and girls' secondary education. These are either one way or other related to child marriages and survival of the victims. It is also important for policy makers to ensure that efforts should address the girls who are already married and their children.

Monitoring and Evaluation is one of the critical factors in addressing the child marriages. In this context, it is important to identify vulnerable children, vulnerable families in specific vulnerable geographical regions, collect accurate data and accordingly investments need to be planned and monitored.