

Editorial

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Ending Child Marriage: Battling for a Girl's Right to Choose

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Introduction

Child marriage has been acknowledged as a complex public health concern persisting for centuries together across heterogeneous settings [1]. It has been predominantly attributed to the prevalent gender inequality, sociocultural practices & traditions (like marrying a girl before they reach puberty will bring blessings to families or minimize the risk of sexual violence / pregnancy or any other kinds of disgrace to the family), and poverty (as head of the household often arranges the marriage of their young daughters to reduce the burden of feedingclothing-educating the number of children) in the society [1,2].

The current trends on the child marriage suggest that in the second decade of the 21st century, in excess of 140 million girls (or 0.039 million girls every day) will become child brides, of which almost 50 million will be under the age of 15 years [3]. Even though, child marriage is a global issue, it is extremely prevalent in the rural areas (twice more common than urban areas), where girls have limited opportunities for individual development, especially among the nations from the South Asian region (50% of young girls) and sub-Saharan African region (33% of young girls) [2,3]. Furthermore, the highest rates of child marriage are in African nations, nevertheless India has the most number of child marriages due to its sheer population [3].

Child marriages have been identified as a threat to the entire society as it makes them susceptible to intimate partner violence & sexual abuse, persistent discrimination & violation of human rights, depriving the young girls from education, health and long-term prospects, and even augments the risk of developing a complication during pregnancy and childbirth before they are physically and psychologically ready (leading cause of mortality in girls aged 15-19 years in developing nations) [1,2,4]. In-fact, in most of the poor nations, it has been observed that most of the young girls, irrespective of their age, are deliberately coaxed to demonstrate their fertility after marriage, and hence not allowed to use contraceptives [1,4].

Furthermore, young girls have no power to refuse sex and even are devoid of resources or legal or social support services to come out of an abusive marriage [1,5]. In addition, there is a definitive risk of infant deaths, child malnutrition, maternal deaths, and depression/suicidal tendencies owing to the repetitive exposure to violence and abuse [2,5]. All these factors impose a significant burden on the health system and enhance the cost of child marriage on the health system as well as on the households [1,2].

Though, the problem has its origin for decades together, very little progress has been made towards abolishing the practice of child marriage [1]. In-fact, despite of the fact that close to 160 nations have set the legal age for marriage at 18 years, their enforcement in society is seriously at fault [1,3]. At the same time, if the stakeholders fail to reduce the rates of child marriage and its associated consequences, the program managers will not be able to many health related sustainable development goals which are interrelated [3,5]. Further, amidst the definitive risk of increase in the problem in the coming years, especially due to the expansion of the youth population in developing nations, the plan is to take active measures to end child marriage by the year 2030 [2,3]. It is very important to understand that as cultures / traditions are man-made, and thus it is completely possible to bring about an alteration in the practices which facilitates child marriage

[2,5]. In addition, interventions like providing free universal access to primary education; motivating community leaders to send children to school, especially the girl child; devising a policy to allow girls to resume school even if exposed to pregnancy before the age of 18 years; raising the legally permissible age of marriage to 18 years universally; and extending youth-friendly services to improve their understanding about sexual and reproductive health [1,3].

However, it is a fact that no long-term benefits can be achieved, if the root causes / determinants of child marriage are not addressed with immediate effect [1,3]. Further, there is an extensive need to discourage any practice prevalent in the society which favors discrimination against the girls or reduces the opportunities for girls and young women. Infact, in an attempt to involve more and more numbers of people in the battle against child marriage, a drive has been started in Lebanon to post #IDONT online, and thus support the efforts and help millions of girls to exercise their right to choose when or to who to get married [6].

To conclude, it is high time that the policy makers, international & national agencies, community and religious leaders, private sector, and families, especially men and boys, understands the importance of ending the practice of child marriage and hence do their part to let young girls be girls and not brides.

References

- 1. World Health Organization (2014) UN passes historic resolution on ending child marriage.
- Kamal SM, Hassan CH, Alam GM, Ying Y (2015) Child marriage in Bangladesh: trends and determinants. J Biosoc Sci 47: 120-39.
- 3. World Health Organization (2013) Child marriages: 39 000 every day.
- Hotchkiss DR, Godha D, Gage AJ, Cappa C (2016) Risk factors associated with the practice of child marriage among Roma girls in Serbia. BMC Int Health Hum Rights 16: 6.
- Svanemyr J, Chandra-Mouli V, Raj A, Travers E, Sundaram L (2015) Research priorities on ending child marriage and supporting married girls. Reprod Health 12:80.
- 6. UNFPA (2016) Say #IDONT to fight child marriage this Valentine's Day.

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