Socio-Demographic Factors Affecting Child Marriage in Sudan

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Abstract

In this study 1700 ever married women aged ≤ 35 year were approached over six months (1st December 2012 – 30th May 2013) duration to investigate the socio-demographic factors affecting child marriage in eastern, northern and western Sudan. Their mean (SD) age, age at marriage and husband age was 26.8 (1.1), 19.7 (5.3) and 38.1 (12.7) respectively. More than 1 in 5 (45.9%, 781/1700) of the interviewed women reported being married prior to age 18 year. Among the total respondents child marriage was reported in 12.9% (220/1700), 15.1% (257/1700) and 17.9% (304/1700) in Eastern, Northern and Western Sudan respectively. The highest prevalence of child marriage (marriage prior to 18 years) was reported among those of rural residence, having less than secondary education and their families having >5 members of daughters and sons. Child marriage was also more common among women whose parents and husbands have less than secondary education. The result of this study demonstrated that 45.9% of the women in Sudan continuing to be married before 18 years old thus there is critical need for health education, family planning use and federal effort to reduce the child marriage with special focus on the rural and less educated communities.

Keywords: Child; Marriage; Education; Sudan

Introduction

Child marriage is a marriage of a child under 18 years of age. Worldwide over 60 million girls married before 18 year old [1]. Although child marriage includes both boys and girls, most children married under the age of 18 are girls. In Sub-Saharan Africa and Bangladesh over 60% of girls are married under the age of 18 year [2,3]. Child marriage is a human violation and the United Nations declared that child marriage violates human rights and children’s rights [2]. In Sudan there is no law determining the legal age of marriage. Child marriages in Sudan are arranged by parents, and girls rarely meet their future husband before the wedding. After the marriage the girls move to their husband’s household and become a responsible person in their own home. Child marriage affect the development of children, they miss their opportunity for education [4]. Moreover child marriage put the girl at higher risk of depression and sexual transmitted infections, preterm birth and low birth weight [5]. Children have small pelvis and if they get pregnant soon after child marriage they will be at higher risk of obstructed labour and its consequences. Their risk for obstetric fistula is 88% [6]. Sudan had high incidence rate of teenage pregnancy and maternal mortality [7,8]. In Sudan while teenage pregnancy accounts for 14.7%, 67.1% had no antenatal care and 12.6% were grandmultiparous. Also in our country various obstetric complications that strongly linked to teenage pregnancy were reported these include: preterm birth (2.6%), preeclampsia-eclampsia (4.2%) and obstructed labour (1.9%) [9], thus this study designed to investigate the socio-demographic factors affecting child marriage aiming to provide the policy makers with fundamental data to reduce the prevalence rate of this practice.

Methods

Study area and design

This was a community-based cross sectional descriptive study conducted in three states in Sudan, Kassala (Eastern Sudan), Nahr Elnile (Northern Sudan) and Shimal Kordofan (Western Sudan) states, Figure 1. Sudan had an estimated population of more than 30 million with cultural and ethnic diversity among its different states. Kassala, Nahr Elnile and Shimal Kordofan had an estimated population of 1.8, 2.9 and 1.3 million respectively. Again Kassala is 42,282 square km while Nahr Elnile and Shimal Kordofan are 12.4000 and 11,0852 square km respectively of the total area of Sudan. A total sample size of 1700 women was calculated using a formula for a single population proportion that would provide 80% power to detect a 5% difference at α = 0.05 and which assumed that 10% of women would not respond. Multistage sampling was used to select the study population.

In Sudan there is strong social pressure on families to accept the early marriage and there is no ideal age of women marriage however it is tightly related to economic and educational status.

Eligibility criteria

Ever married women aged ≤ 35 year were approached during the study period and over six months (1st December 2012-30th May 2013) duration to participate in this study aiming to investigate the socio-demographic factors affecting child marriage such as age, education, family size and residence.

Data collection, variables and ethical consideration

Ten medical students were selected as interviewers in each state, they had been trained in relationship building, local cultures, believes, privacy, confidentiality and how to administer the questionnaires. After written informed consent structured questionnaires were used to gather data from the eligible women. We started to fill the questionnaire after explanation of the purpose of the study and making sure the aim of the study was well understood by the participant. Information sought in the questionnaire included socio-demographic characteristics (age,
age at marriage, residence, educational level), marital characteristics (husband age, age at marriage and husband education) and family characteristics of the respondent (parents’ education, respondent’s family size and structure (whether both parents living together or not).

The age and age at marriage was defined as age completed in year at time of interview using the recall method while child marriage was defined as a marriage of a respondent under 18 years old. The study approved and received ethical clearance from the Research Board at the Ministry of Health, Kassala State, eastern Sudan.

Statistical analysis

Data were entered into a computer database and SPSS software (SPSS Inc., Chicago, IL, USA, version 13.0) and double checked before analysis. The Student’s t-test and \( \chi^2 \) test were used to compare means and proportions, respectively between those who experienced child marriage and those who were not. \( P<0.05 \) was considered significant.

Results

Participants’ characteristics

A total of 1700 ever married women aged \( \leq 35 \) years had been enrolled and none of them refused to participate in this study. Their mean (SD) age, age at marriage and husband age was 26.8 (1.1), 19.7 (5.3) and 38.1 (12.7) respectively. The majority had less than secondary education 62.2% (1056/1700) and of rural residence 60.2% (1023/1700). More than 1 in 5 (45.9%, 781/1700) of the interviewed women reported being married prior to age 18 year. Among the total respondents child marriage was reported in 12.9% (220/1700), 15.1% (257/1700) and 17.9% (304/1700) in Eastern, Northern and Western Sudan respectively. Distribution of the practice per state revealed a prevalence rate of 41.9%, 46.1% and 49.3% in Kassala, Nahr Elnile and Shimal Kordufan respectively. Thirty seven women (2.2%) reported marriage prior to 13 year while 16.8% (287) and 26.8% (457) reported marriage between 13-15 and 16-17 year respectively. Factors associated with child marriage

The highest prevalence of child marriage (marriage prior to 18 years) was reported among those of rural residence, having less than secondary education and their families having \( \geq 5 \) members of sisters and daughters. Child marriage was also more common among women whose parents and husbands have less than secondary education, (Table 1).

Discussion

The finding of this study showed high prevalence rate of child marriage in Sudan and very high proportion of women enter marriage at younger age. Educational level of the girls themselves, of their parents as well as their husband, rural residence and those being living in family of \( \geq 5 \) members are the main associated factors with the practice. Our findings is higher than the prevalence in other developing countries such as India (45%) [10]. This means child marriage in Sudan is unacceptably very high, moreover no major difference in the prevalence of the practice between the different states in the country and this suggest that without decision from the health planner and policy makers no improvement in obstetric outcome will be achieved. The difference in mean (SD) age between the respondents and their
husbands appeared in this study (26.8 [1.1] Vs 38.1 [12.7]) is not surprising and it goes with many other reports [11]. This is because when women seek early motherhood while the men postpone marriage until they obtain employment in order to afford bride wealth. In Mali, the ratio of married girls to boys is 72:1; in Kenya, it is 21:1; in Indonesia, it is 7:5:1; in Brazil, it is 6:1; and even in the United States, the ratio is 8:1 [1]. The Universal Declaration of Human Rights states that individuals must enter the marriage freely with full consent and must be at full age and in 1989 the Convention on the rights of the Child defined children as persons under 18 years old [1]. Child marriage leads to earlier birth at young age, this fact with low use of contraception in countries like Sudan put the women at greater risk of unwanted pregnancy, high parity and hence high incidence rate of obstetric complications [12]. Research has shown that age at marriage is affected by individuals and family background; these include races, geographic location and poverty [13]. Sudan has one of the lowest net school enrolment rates in the world and this might be due to early marriage which is a cultural and desirable that shifts the girls away from education [14]. It is of no doubt education gives the woman the ability to make her own decision regarding the reproductive health. Likewise parents’ education in many African countries as well as in the current study was strongly associated with reproductive health such as female genital mutilation and child marriage thus it is not surprising to find early marriage is strongly associated with the educational status of the parents and the women themselves. Axinn and Thornton stated that people whose parents have higher educational attainment and financial assets are less likely to marry young [14,15].

Family size in the current study is a predictor for child marriage and of course increase in family size will burden the economic status of the family. Thus the young women who are less likely to receive economic support from their parents are highly vulnerable to early marriage. Rural residence is another risk factor for child marriage in the present study and this possibly because the poverty and low economic situation in the rural society lead the parents of the girl to search for alternative situation rather than their home or even to minimize the family size and hence reducing their financial commitments. Family structure such as family size plays very important role in timing of marriage however there is controversy in the literature regarding this factor [16]. The different socio-demographic factors which affecting the child marriage in this study should be considered while the policy makers putting their strategies for the eradication of the practice and we don’t believe the law is going to resolve the problem. This because many countries sharing Sudan the same cultural background determine certain age as a legal age for marriage but the practice is still of high prevalence. For example, although the legal age of marriage is 18 years, in Mali 65% of girls are married at a younger age; in Mozambique, it is 57%; and in India, it is 50%. In some parts of Ethiopia, although the legal age of marriage is 15 years, 50% of younger girls are married [17].

**Conclusions**

The result of this study demonstrated that 45.9% of the women in Sudan continuing to be married before 18 years old thus there is critical need for health education, increased family planning use and federal effort to reduce the child marriage with special focus on the rural and less educated communities.

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