

Awareness on Child Marriage and its Consequences on Health among Chepang Community Madi, Chitwan

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ABSTRACT

Background: Child marriage is considered as social and health concern in Nepal, particularly in marginalized communities like Chepang. The study aim was to assess the level of awareness about child marriage and its health consequences among Chepang communities of Madi, Chitwan.

Method: A descriptive cross-sectional study was conducted among 98 participants of Chepang communities from 15 to 30 years age group. Data was collected through semi-structured interview schedule and analyzed using descriptive and inferential statistics such as frequency, percentage, mean, standard deviation and chi-square.

Result: The finding of the study revealed that more than two third of the respondents (76,5%) had adequate level of awareness regarding child marriage and its consequences. However, significant portion of the respondents had inadequate awareness about legal provision of child marriage. There was no significant association between levels of awareness on child marriage with selected sociodemographic variables of the respondents.

Conclusion: The study concludes that most of the respondents had adequate level of awareness about child marriage and its consequences. However, many of them still lacked a clear understanding on the legal aspects of child marriage.

Key words: child marriage; chepang community; awareness; health consequences.

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INTRODUCTION

Marriage is an important part of human life, which is an association that demands maturity, ability and responsibility. Child marriage in Nepal is considered a major health barrier to, women's health as well as the social and economic development of nation.¹ Child marriage is a violation of children's rights.² Child marriage is a threatened issue for adolescent girls. Healthy adolescent girl indicate healthy future generation.³ The rate of child marriage worldwide reaches 21%.⁴ Nepal has one of the highest rates of child marriage in Asia for both girls and boys.⁵ The higher rates in urban regions could be due to factors like migration, economic pressures, or different social norms.⁶ National Civil Act of Nepal 2017, which amended the minimum age of marriage to

20 for both women and men.⁷ Early marriage has large influence on women's reproductive health which result increases the risk for maternal and fetal death, congenital abnormalities, premature birth, pre-eclampsia, low birth weight, different sexually transmitted diseases, obstetric fistulas, miscarriage and so on. For eliminating the practice of child marriage is included in 2030 SDG's target.^{8,9,10} Young adolescents (aged 10-14) face a higher risk of complications and death as a result of pregnancy than older women.¹¹ This study aimed to assess the awareness on Child marriage and its Consequences on health among Chepang Community Madi, Chitwan.

METHODS

A descriptive cross-sectional study design was used

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to assess the awareness on child marriage and its consequences on health among Chepang community of madi municipality ward no. 9, Chitwan. The study was conducted among males and females age 15 to 30 years who were willing to participate. Individuals with mental disabilities were excluded from the study. The study setting was purposively selected. A semi-structured face to face interview schedule was developed by the researcher for data collection. Non-probability purposive sampling technique was used to select the desired sample. Ethical approval was obtained from the Institutional Review Committee of Bharatpur Hospital, Chitwan (Reference number: 080/081-BNS 021). Written informed consent was obtained from each respondent before data collection. Data were collected using semi-structured interview schedule from June 15 to July 15, 2024. Each interview took approximately 20-25 minutes to complete. The validity of the instrument was ensured by thoroughly reviewing the relevant literature and consulting with subject expert and statistician. Reliability was maintained by pretesting the tool on 10% of total sample size among Chepang individual 15 to 30 years who were visiting outpatient department at Bharatpur hospital, Chitwan. Necessary modifications were made to the instrument based on the pretest findings. The pretest sample were excluded from the main study.

The sample was estimated based on a previous study in which the prevalence of awareness regarding child marriage and its consequences is 31%.¹² The required sample size was calculated as 98 by using formula $n = Z^2pq/d^2$ with a prevalence of 15% and 5% margin of error. A semi-structured interview schedule consisting of socio-demographic variables and awareness related question on child marriage variables was taken from each participants. This study was conducted among 98 participants. Participants were ensured their information would remain confidential and would not be disclosed to anyone outside the research activities. Data were checked daily for completeness and consistency. The data were analyzed using SPSS version 16 for both descriptive and inferential statistics. The level of awareness was

determined based on the possible score obtained from knowledge-related question and was categorized into two groups: $\leq 50\%$ as inadequate awareness and $>50\%$ as adequate awareness.¹

RESULTS

Out of 98 respondents, most of respondents (79.6%) were age 20 years and above. The mean age of respondents was 23.02. More than half (62.2%) of respondents were female and 37.8% were male. Regarding marital status, more than two-third respondents (77.6%) were married, among them 63.2% were married before 20 years. Majority (95.9%) of the respondents were Christian and others (Hinduism and Buddhist). More than half (61.2%) of the respondents had primary level education and 14.3% had illiterate. Concerning the occupation

Table 1. Socio-demographic characteristics of respondents. (n=98)

Variables	Frequency (%)
Age at complete years	
<20	20(20.4)
≥ 20	78(79.6)
Mean age \pm SD	23.02\pm 4.35
Sex	
Male	37(37.8)
Female	61(62.2)
Marital status	
Married	76(77.6)
Unmarried	22(22.4)
Age at marriage (n=76)	
Before 20 years	48(63.2)
At 20 years and after	28(36.8)
Religion	
Christian	94(95.9)
Others	4(4.0)
Educational level	
Illiterate	14(14.3)
Primary level	60(61.2)
Secondary level and above	24(24.4)
Occupation	
Agriculture	29(29.6)
Labour	29(29.6)
House maker	29(29.6)
Student	11(11.2)

status of respondent, agriculture, labour and house maker were equal that is 29.6% and 11.2% were student. Majority of the respondent's monthly income was equal and more than 15000 (Table 1).

Regarding the source of information, 34.7% of respondents heard about child marriage from educational institution, and 15.3 % had heard from health institution (Table 2).

Table 2. Source of information of respondents. (n=98)	
Information source*	Frequency (%)
Radio/ TV	28(28.5)
Health institution	15(15.3)
Family/friends	23(23.5)
Educational institution	34(34.7)
NGO	26(26.5)

Note: *Multiple response

Out of 98 respondents, 40.8% of respondents had knowledge about correct meaning of child marriage. More than half (68.4%) of respondents were aware of legal age of marriage. Likewise, most of respondents (81.6%) felt love marriage is the most common cause of child marriage followed by poverty (33.7%), social impact & family pressure (25.5%). Similarly, majority of respondents (90.8%) were aware of legal provision against child marriage. More than half of respondents (59.2%) believed that strong cultural traditions is the most common barriers to effective enforcement of laws against child marriage (Table 3).

Out of 98 respondents, more than half (60.2%) of respondents provided correct response about risk of maternal mortality and morbidity is the most common health consequences and 68.4% respondents believed that it increases the risk of domestic violence. Regarding impact on girl's education, 76.5% respondents were response it leads to school dropout. Concerning economic & psychological impact, more than two third of respondents (74.5%) believed that it increased poverty & economic dependence and higher incidence of loneliness & postpartum depression. Similarly, regarding the areal of social impact, more than half (54.1%) of respondents mentioned that it hampers efforts to eradicate poverty (Table 4).

Table 3. Respondents' awareness regarding meaning and legal provision of child marriage. (n=98)	
Variables	Correct response Frequency (%)
Meaning of child marriage	
Marriage before physically, physiologically, psychologically and socially mature	40(40.8)
Legal age of marriage	
20 years for both girls and boys	67(68.4)
Causes of child marriage*	
Poverty	33(33.7)
Social impact & family pressure	26(26.5)
Love marriage	80(81.6)
Legal provision against child marriage	
If yes, Legal Punishment (n=89)	
Rs. 30,000 fine & up to 3 years imprisonment	42(47.2)
Barriers to enforcement of laws	
Strong cultural traditions	58(59.2)

Note: *Multiple response

Table 4. Respondents' awareness regarding effects of child marriage. (n=98)	
Variables	Correct response Frequency (%)
Health consequences	
Risk of maternal mortality & morbidity	59(60.2)
Domestic violence	67(68.4)
Impact on girl's education	
Leads to school dropout	75(76.5)
Economic impact	
Increased poverty and economic dependence	73(74.5)
Psychological impact	
Higher incidence of loneliness & postpartum depression	73(74.5)
Social impact *	
It often leads to social isolation & reduced opportunity	42(42.9)
It hampers effort to eradicate poverty	53(54.1)
Reinforcement of gender inequality	32(32.7)

Note: *Multiple response

Regarding the prevention of child marriage, the most important role of parents to provide opportunities for education to child (95.9%). Responsibilities form community level, 86.7% of respondents stated that need to carry out awareness program and 87.8%

respondents stated that spreading awareness and educational campaign through social media can prevent the child marriage. Similarly, majority of respondents (87.8%) respondents answered that provision of strong laws is the most effective strategy to prevent child marriage by the nation Table 5.

Table 5. Respondents' Awareness regarding Prevention of Child Marriage. (n=98)	
Variables	Correct response Frequency (%)
Parents' responsibility	
Provide opportunities for education to child	94(95.9)
Community responsibility	
Carryout awareness program about child marriage	85(86.7)
Role of social media	
By spreading awareness and educational campaigns	86(87.8)
Role of government *	
Education and awareness about child marriage	83(84.7)
Provision of strong laws	86(87.8)
Girls' empowerment	57(58.2)
Reduced poverty	29(29.6)

Note: *Multiple response question

The level of awareness in different domains, majority of the respondents have the adequate awareness on prevention (93.9%) and inadequate awareness on meaning, cause & legal provision (46.9% (Table 6).

Table 6. Awareness aspect of respondents regarding child marriage. (n=98)		
Aspect of child marriage	Level of awareness	
	Inadequate n(%)	Adequate n(%)
Meaning, cause and legal provision	46 (46.9)	52 (53.1)
Effects or consequences	27 (27.6)	71 (72.4)
Prevention	6 (6.1)	92 (93.9)

More than two third of respondents (76.5%) had adequate level of awareness and 23.5% had inadequate level of awareness (Table 7).

Among the different socio-demographic variables, there was no association between respondents' level

of knowledge towards awareness of child marriage and its consequence (Table 8).

Table 7. Respondents' overall level of awareness on child marriage. (n=98)	
Level of awareness	Frequency (%)
Inadequate Awareness	23(23.5)
Adequate Awareness	75(76.5)
Mean \pmSD = 12.98 \pm 2.45	

Minimum score=0, Maximum score=24

Table 8. Association between level of awareness with different socio-demographic variables. (n =98)				
Variables	Inadequate awareness n(%)	Adequate awareness n(%)	χ^2	p-value
Age (in complete year)				
<20	8(40)	12(60)	3.82	0.051
≥ 20	15(19.2)	63(80.8)		
Sex				
Male	8(21.6)	29(78.4)	0.11	0.737
Female	15(24.6)	46(75.4)		
Marital status				
Married	15(19.7)	61(80.3)	2.63	0.105
Unmarried	8(36.4)	14(63.6)		
Age of marriage				
Before 20 years	10(20.8)	38(79.2)	0.1	0.753
After 20 years	5(17.9)	23(82.1)		
Educational level				
Illiterate	6(42.9)	8(57.1)	3.84	0.146
Primary	11(18.3)	49(81.7)		
Secondary & higher	6(25)	18(75)		
Student	5(45.5)	6(54.5)		

Note: Chi square test

DISCUSSION

The study finding showed that, cent percent of respondents heard about child marriage from source of educational institution (34.5%). Out of them, 0.8% of respondents correctly identified child marriage as marriage before being physically, physiologically, psychologically and socially mature and 68.4% knew the legal age of marriage which is different from the study conducted by ¹² where, 73% of respondents heard about child marriage and most of respondents received information from TV/Radio. Only 27.4% of respondents correctly stated that the meaning of child marriage and legal age of marriage were 31%.

The study findings revealed that more than two third of the respondents (76.5%) had adequate awareness

on child marriage. There was no significantly associated with respondents' level of knowledge with age, sex, marital status and educational status. This finding is similar to the study conducted by¹⁰ where more than half of the adolescents (59.6%) have inadequate knowledge about early marriage and there was no statistically significant relationship between gender, age, maternal education and parental income with level of knowledge of adolescents about early marriage. This study which is contrast from the study conducted by^{1,3} where more than half of respondents (64.68%) had inadequate knowledge. There was statistically significant between level of knowledge regarding early marriage and its consequences with age, education, marital status, religion and total number of sibling. That might be due to differences in the maturity level of the respondents.

Likewise, regarding cause of child marriage majority of the respondents (81.6%) stated that love marriage is the main cause of child marriage followed by poverty (33.7%), social impact & family pressure (25.5%) & numerous siblings (1%) which is little bit similar to the study conducted by¹³ where love marriage was 74.3%, followed by family pressure (25%), poverty(3.4%) that may be due to both belongs to marginalized and backward community.

The study found that the main health consequences of child marriage were: maternal mortality and morbidity (60.2%), risk of domestic violence (68.4%), school dropout rates (76.5%), increased poverty and economic dependence (74.5%), higher rates of postpartum depression and loneliness (54.1%), and more than half (54.1%) thought that the main social impact of child marriage was that it hinders efforts to end poverty. The findings of the study is similar to the study done by^{8,12,14-16} where the respondents stated that due to child marriage they had quit their education, mothers who had faced complications during pregnancy, delivery and postpartum period, suffer from domestic violence, lack of social coherence and isolation and so on.

Regarding prevention of child marriage majority of the respondents believed that education to the

child from parents (95.9%), girls empowerment (58.2%), awareness program in community (86.7%), provision of strong laws (87.8%) from community and government will helps to reduce child marriage which is similar to the study conducted by^{11,16} where preventing measure are education, girls employment, awareness program, children counselling about child marriage. Appropriate care provided by skilled health professionals competent in sexual and reproductive health care, before, during and after childbirth can save the lives of women and newborn babies. Mass media plays an important role in spreading awareness regarding early marriage.

Limitation

The study was limited to Madi municipality of, Chitwan which limits the generalizability of the finding in other research setting. Sample size of Chepang population was also low because of their few households in that community comparatively. So, the finding of the study needs to be taken carefully to generalize for other setting.

CONCLUSIONS

The overall study revealed that most of the respondents had adequate level of awareness about child marriage and its consequences. Most of the them were familiar with the importance of parental responsibility in educating children and community awareness program as preventive measures of child marriage. However, many of them still had inadequate understanding of legal aspects of child marriage. Child marriage have found to have many consequences on women health, education and overall wellbeing leading to maternal and child health complications, increased dependence, and psychological issues like loneliness and postpartum depression. So, education and awareness program are important and need to be strengthened to prevent child marriage in Chepang communities.

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