

Marrying early, particularly at very young ages, is associated with poorer mental health among adult women in Niger and Ethiopia

Niger has the highest rates of child marriage globally. According to the latest Demographic and Health Survey, over three fourths (76.3 percent) of women aged 20-24 in Niger married by age 18, with prevalence changing relatively little in the past two decades (Institut National de la Statistique - INS/Niger & ICF International, 2013). Ethiopia also has historically had very high rates of child marriage, though in recent decades the pace of reduction in child marriages in Ethiopia has exceeded the pace of decline globally. Nevertheless, according to the latest Demographic and Health Survey, about two in five Ethiopian women ages 20-24 (40.3 percent) still married by age 18 (Central Statistical Agency [Ethiopia] & ICF International, 2017).

In 2016, the International Center for Research on Women undertook nationally representative surveys of adult women and their households in Niger and Ethiopia, collecting data on the women's demographic background, health history (including mental health), relationships with their husbands and experiences of intimate partner violence. The intention of the survey was to produce robust data that could be used to assess the impact of child marriage on different domains of a woman's life, including the number of children she may have, her health, her educational attainment, her employment and earnings and her decision-making power. In total, questionnaires were completed by 2,764 women in Niger and 4,149 women in Ethiopia.

In addition to these questionnaires, researchers also conducted one-on-one interviews with women and group discussions with parents of girls between the ages of 8 and 17 in both countries to gain more nuanced information about the factors influencing girls' decisions of when to marry as well as the impacts marrying early may have throughout the remainder of their lives.

PURPOSE

This brief presents the findings of one aspect of this analysis: the exploration of whether and how child marriage is associated with the mental health and psychological well-being of women. The sparse evidence from low- and middle-income countries suggests a negative association between child marriage and mental health outcomes. A study conducted in Ethiopia among a sample of girls aged 10-17 years in the Amhara region found increased odds of suicidality among girls who were ever married, were promised in marriage or had received marriage requests as opposed to girls who had never been in the marriage process (Gage, 2013). Furthermore, the study found that residence in communities with high degree of involvement in stopping child marriage was protective of suicidal ideation (Gage, 2013). Similarly, research from South Asia also suggests that girls married as children are at increased risk for depression

and suicidality, especially due to its indirect linkages with exposure to gender-based violence (Raj, Saggurti, Balaiah, & Silverman, 2009; Raj, Gomez, & Silverman, 2008). However, in sub-Saharan Africa, to our knowledge, no study has assessed the impact of child marriage on psychological well-being in the general adult population, making an assessment of its long-term effects very difficult. There is also limited understanding of the factors that might impact the psychological well-being and mental health of girls who marry early in the sub-Saharan African context. Given the large numbers of adult women who were married as children and may therefore be at risk of poorer mental health, this represents a significant gap in our knowledge.

METHODOLOGY

For this analysis, the questionnaire data comes from a subset of women who completed all of the questions related to mental health (2,463 women in Niger and 3,501 women in Ethiopia).

Well-being was assessed using the Psychological General Well-being Index (PGWBI), a widely-used scale that measures the psychological quality of life of general populations as well as people with chronic diseases. The index includes six domains of women's health and related quality of life: Anxiety, Depressed Mood, Positive Well-Being, Self-Control, General Health and Vitality. These domains can be assessed separately or combined into a single overall measure of well-being. All domains and the overall measure are scored on a scale of 0 to 100, with 100 being the highest possible state of well-being.

FINDINGS

Child marriage is associated with reduced mental health and well-being, particularly for women who marry at very young ages. In both countries, child marriage had a significant impact on women's psychological well-being, even after accounting for other factors that might affect mental health such as household wealth and experiences of intimate partner violence. In Niger, being married at any age up to age 15 significantly decreased women's overall psychological well-being, with the largest effect (relative to those married at 18 or older) on those married at age 12 or earlier. In Ethiopia, a statistically significant relationship was observed only for those who married at age 12 or earlier.

Controlling for other factors that impact psychological well-being, such as socioeconomic status and experiences of intimate partner violence, women in Ethiopia who married at age 12 or earlier scored an average of five points lower on the Psychological General Well-being Index (PGWBI), compared to women that married later, while women in Niger scored an average of more than seven points lower.

These quantitative findings were supported by interviews with women who married before the age of 18, who reported that being forced into marriage (often to a stranger) and the burden of marital responsibilities, most notably partner's sexual demands and childbearing and child-rearing, led to significant emotional distress and depression. As a woman who experienced early, forced marriage in Ethiopia shared: "How do you think it feels to be forced into a marriage and a life with someone you didn't choose or know?"

CONCLUSION

This study provided a unique opportunity to explore the relationship between child marriage and adult mental health using detailed measures on psychological well-being that are not routinely collected by national-level surveys. Our findings show that marrying early, particularly at very young ages, has a strong, negative association with the mental health of women in Niger and Ethiopia. These associations should be further explored to better understand the mechanisms that make those married during early adolescence particularly vulnerable to psychological distress.

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