

Bangladesh Development Research Working Paper Series (BDRWPS)

BDRWPS 31 (September 2016)

**Unhappily Ever After: An Analysis of Child Marriages
in Bangladesh and Niger**

Samantha Morrow
American University

The Bangladesh Development Research Working Paper Series (BDRWPS) is a peer reviewed working paper series of the

Bangladesh Development Research Center (BDRC)



The views and interpretations in this paper are those of the author(s) and do not necessarily represent those of the Bangladesh Development Research Center (BDRC).

Copyright © 2016

Bangladesh Development Research Center (BDRC) for the overall Working Paper Series. The copyright of the content of the paper remains with the author(s) and/or the institution(s) submitting the content.

Bangladesh Development Research Center (BDRC)

2508 Fowler Street
Falls Church, VA 22046-2012, U.S.A.

Tel. +1 703 532 4893

E-Mail: contact@bangladeshstudies.org
<http://www.bangladeshstudies.org>



Rights and Permissions

All rights reserved.

Text and graphics may be reproduced in whole or in part and in any form for educational or non-profit purposes, provided that credit is given to the source. Reproductions for commercial purposes are forbidden.

The Bangladesh Development Research Center (BDRC) disseminates the findings of work in progress to encourage the exchange of ideas about development issues in Bangladesh. Our main objective is to disseminate findings and ideas quickly, so we compromise to some limited degree on presentational quality. The papers are signed by the author(s) and should be cited and referred accordingly. The findings, interpretations, and conclusions expressed in this paper are entirely those of the author(s). They do not necessarily represent the view of the BDRC.

Working Papers are available online at <http://www.bangladeshstudies.org/wps/>

Unhappily Ever After: An Analysis of Child Marriages in Bangladesh and Niger

Samantha Morrow*

Abstract

Both Bangladesh and Niger are among the world's poorest countries, while both incidentally have some of the highest rates of child brides. While technically illegal, child marriage is culturally significant and has continued to be prevalent in Bangladesh and Niger. With 76 percent of girls married before they turn eighteen, Niger has the highest rate of child brides in the world. Poverty is a driving factor for many families in Niger to marry girls. In Bangladesh, where 52 percent of girls are married before they turn eighteen, sociocultural norms are a key motivating influence. This paper analyzes the economic motivation behind marrying girls, explains the cyclical role of education, and examines the health-related consequences. Finally, it will provide a brief overview of some solutions that can be utilized to combat this problem.

* Samantha Morrow is an undergraduate student at American University (AU), Washington, DC. An earlier version of this paper has been written for AU's General Education course, Econ-110: The Global Majority. Comments are welcome to be sent directly to the author via E-mail: sm4117a@american.edu.

I. Introduction

In the developed world, girls play house and dream of their wedding day. However, for about 60 million girls who live in developing countries, their wedding day is not a dream and they do not have to play married because they are married and have children.¹ Most countries as well as international law prohibits child marriage. While the prohibition of child marriage can be traced back to the Universal Declaration of Human Rights in 1948, it is formally addressed in Article 16, Section 2 of the Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW), which states that “[t]he betrothal and the marriage of a child shall have no legal effect.”² Still, child marriage remains a reality for far too many girls. Each year, 15 million girls are married before the age of 18).³

Child marriages, alternatively called youth or forced marriages, are most common in rural societies that lack economic opportunities and have cultural standards that encourage gender inequality. Niger has the highest incidence of forced marriages in the world, with 76 percent of girls being married before they turn 18, and 28 percent of girls getting married before age 15. Bangladesh also has a very high rate of child marriages, with 52 percent of girls getting married before age 18, and 18 percent of girls getting married before age 15.⁴

Although child marriages may be motivated by parents wanting the best outcomes for their daughters, forced marriages tend to have the opposite effect. Girls who are married at a young age face a multiplicity of health problems, lack educational opportunities, and lose their independence. Ultimately, youth marriage is harmful to society, limiting economic growth and development, and thus creating a cycle of poverty.

This paper will examine the economic and social forces that combine to encourage youth marriages. It will also analyze the negative effects that come from marrying girls at young ages. Following this introduction is a brief literature review in which some of the most relevant academic articles are presented and summarized. The third section provides some empirical background on Bangladesh and Niger, presenting factual information in order to better understand and compare the two countries. The fourth section examines the causes and the short and long-term impact of youth marriages before the last section provides some conclusions and possible solutions.

II. Brief Literature Review

The concept of forced marriages has, with the intensifying emphasis on solving global poverty, become an increasingly popular issue, thus leading to a sharp increase in literature on the subject. The high rates of child marriages in Bangladesh and Niger have caused this issue to be extensively studied, especially in Bangladesh. The following articles look at child marriage through a broad sociocultural lens and analyze the communities in which it takes place.

¹ Save the Children (2004).

² The Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW) is an international treaty adopted in 1979 by the United Nations General Assembly. A variety of legal issues related to child marriage are examined in de Silva-de-Alwis (2008).

³ Girls Not Brides (2016).

⁴ United Nations Children’s Fund (UNICEF) (2016), Table 9.

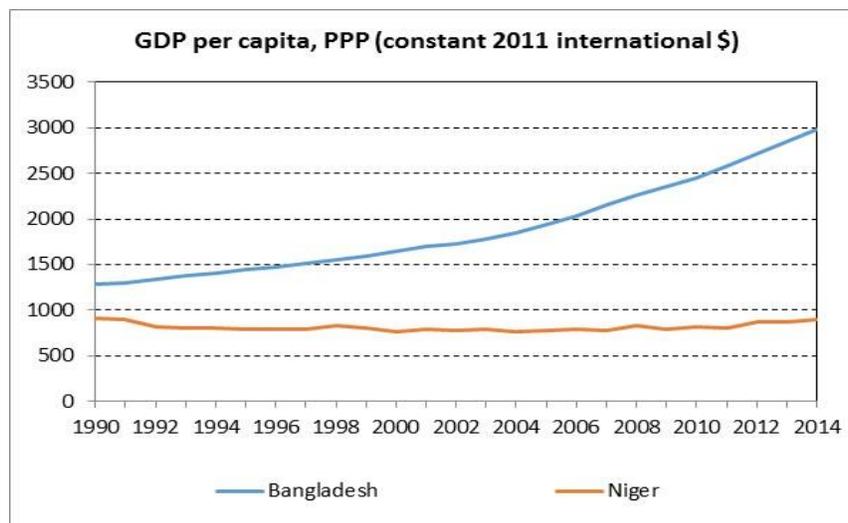
- Kamal and Hassan (2015) examine the prevalence of child marriage and its effect on reproductive outcomes among women in Bangladesh based on the 2011 Bangladesh Demographic and Health Survey data. They find that a girl's education level is the most single significant determinant of child marriage. They also find that after being adjusted for sociodemographic factors, child marriage significantly increases the likelihood of stillbirth, miscarriage and pregnancy termination. Kamal and Hassan suggest that programs should aim to retain girls in school for longer periods, not only to raise the age at first marriage but also for sound reproductive health and Bangladesh's overall social development.
- Lemmon and ElHarake (2014) describe the historical significance of child brides and why it remains popular. They review the current international policies that have been passed in an attempt to curtail forced marriages. They make clear that not only is youth marriage an issue of human rights, but also one that limits economic potential. Specifically, the importance of schooling for girls is emphasized as it both delays marriage and has a beneficial impact on society at large. Finally, they use India, a country with an elevated rate of child brides, as a case study to examine various methods that could be used to alter this norm. However, their ultimate conclusion is that a multi-pronged approach is needed to change the religious, cultural, and economic causes of child brides.
- Lemmon (2014) analyzes the correlation between a country's GDP and its rate of forced marriages. Furthermore, she highlights the connection between a country's level of instability and child marriages, finding that countries that are routinely on the top of the Organization for Economic Cooperation and Development (OECD)'s list of unstable countries have the highest prevalence rates of child marriages. Factors that contribute to instability are natural disasters, conflicts, migration, and economic struggles. Importantly, Lemmon also looks to the direct causes of child marriage, such as famine, in order to find a solution to forced marriages.
- Raj, McDougal, Silverman and Rusch (2014) provide a cross-sectional time series analysis of associations between education and girl child marriage in Bangladesh, India, Nepal and Pakistan from 1991 to 2011. They conclude that primary education is likely insufficient to reduce girl child marriage in South Asia, outside of India. Secondary education may be a better protective strategy against this practice for the region, but may be less effective for prevention of marriage among older relative to younger adolescents.
- Like Raj et al. (2014), Godha, Hotchkiss and Gage (2013) also examine child marriages in Bangladesh, India, Nepal, and Pakistan, though they focus on the association between child marriage and reproductive health outcomes based on the most recent Demographic and Health Surveys conducted in these four countries. Even though the associations are not always consistent across all four countries, the overall results of their study suggest that child marriage is significantly associated with rapidly repeated childbirth, current modern contraceptive use, female sterilization, not using contraception before the first childbirth, pregnancy termination, unintended pregnancy, and inadequate use of maternal health services. They conclude that child marriage adds a layer of vulnerability to women that leads to poor fertility control and fertility-related outcomes, and low maternal health care use.

- Nawal Nour (2006), who is a researcher at the Brigham and Women’s Hospital in Boston, Massachusetts, examines child marriages through a public health lens, focusing on the health problems that accompany youth marriage in Africa. She compiles research from a number of studies. Girls who are forced into marriages at young ages have higher fertility rates, increased levels of maternal and child mortality, and lower use of birth attendants. She also accounts for mental health risks that accompany being married at young ages. She examines the link between HIV and child marriages, finding that in sub-Saharan Africa married girls were at higher risk than their unmarried counterparts. At an individualized level, child marriages pose great risk to both the mother’s and the baby’s health.
- Chowdhury (2004) focuses on the reasons for girls being married in a Bangladeshi village. She examines how child marriages are used to control female sexuality within the custom of purdah (which limits the social interactions between men and women outside marriage). Chowdhury finds that that child marriage occurs as a result of a profit-making motive, despite the huge costs to the individuals involved, the local community and society as a whole.

III. Empirical Background

Bangladesh was formally formed in 1971, after winning independence from Pakistan. Niger is a former French colony that gained independence in 1960. Bangladesh has an area of 148,460 square kilometers (57,320 square miles), which is slightly smaller than the state of Iowa. Despite its relatively small country size, it is with more than 160 million people the world’s eighth most populous country. In contrast, Niger is the sixth largest country in Africa, having an area of 1.267 million square kilometers (489,191 square miles), but has a population of slightly less than 20 million.⁵

Figure 1: PPP-adjusted GDP per capita (in constant 2011 international \$), 1990-2014



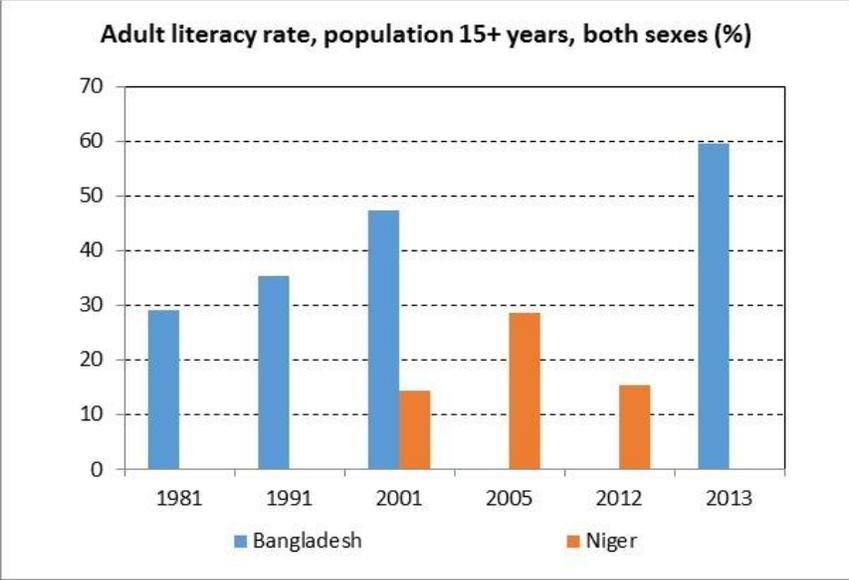
Source: Created by author based on World Bank (2016).

⁵ World Bank (2016).

As shown in Figure 1, Bangladesh’s GDP per capita has more than doubled from 1990 (\$1,290) to 2014 (\$2,979). Given Bangladesh’s progress, the World Bank has in July 2015 re-classified Bangladesh as a lower-middle income country. In contrast to Bangladesh’s upward trend, Niger’s GDP per capita growth has been close to zero, and hence, Niger remains one of the world’s poorest countries. Though there is no data for PPP-adjusted GDP per capita before 1990, expressed in current U.S. dollar, GDP per capita of 1970 was \$138 for Bangladesh and \$144 for Niger. In other words, in 1970, an average person in Niger was slightly richer than an average person in Bangladesh.⁶

The two countries also vary greatly in terms of literacy. Bangladesh has a much higher rate of literacy than Niger. In 1981, which is the first year such data is available, Bangladesh had an adult literacy rate of 29.2 percent. In 2013, the last year such data is available for Bangladesh, adult literacy stood at 59.7 percent. Within three decades, Bangladesh was able to double its adult literacy rate. Though there is far less data available for Niger, Figure 2 shows that Niger has made close to no progress with increasing its literacy rates from 2001 to 2012. While Niger’s literacy increased from 14.4 percent in 2001 to 28.7 percent in 2005, the latest available data shows that in 2012, only 15.5 percent of the adult population was literate.

Figure 2: Adult Literacy Rates in Bangladesh and Niger, all available years



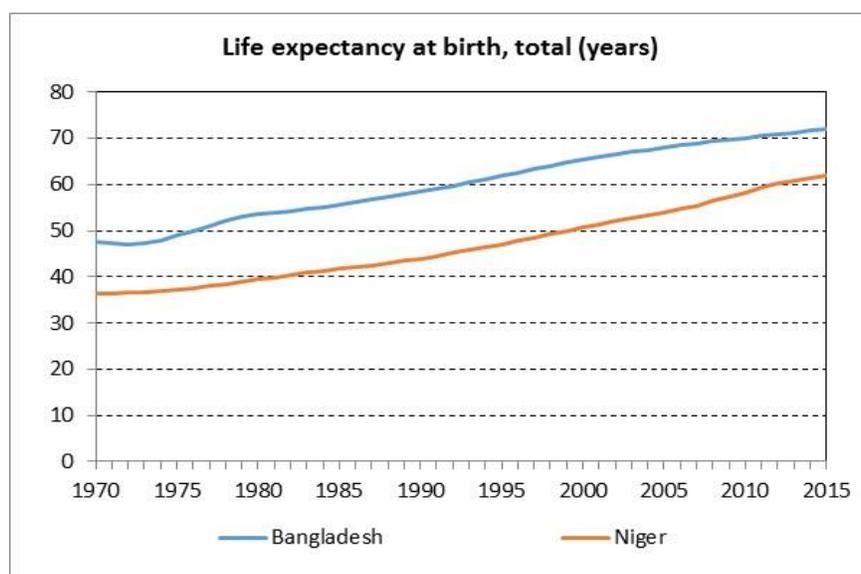
Source: Created by author based on World Bank (2016).

Figure 3 compares the average total life expectancies of Bangladesh and Niger. In 1970, Bangladesh had a life expectancy of 47.5 years, while Niger had an average life expectancy of 36.3 years. As of 2015, Bangladesh had an average life expectancy of 72 years, while Niger had an average life expectancy of 62 years. Despite the two countries’ very different evolution of GDP

⁶ World Bank (2016).

per capita and literacy, both countries have experienced a similar rate of increase in life expectancies. From 1970 to 2015, the average life expectancy increased in Bangladesh by 24.5 years, while it increased by 25.7 years in Niger.

Figure 3: Total Life Expectancy at Birth in Bangladesh and Niger (1970-2015)



Source: Created by author based on World Bank (2016).

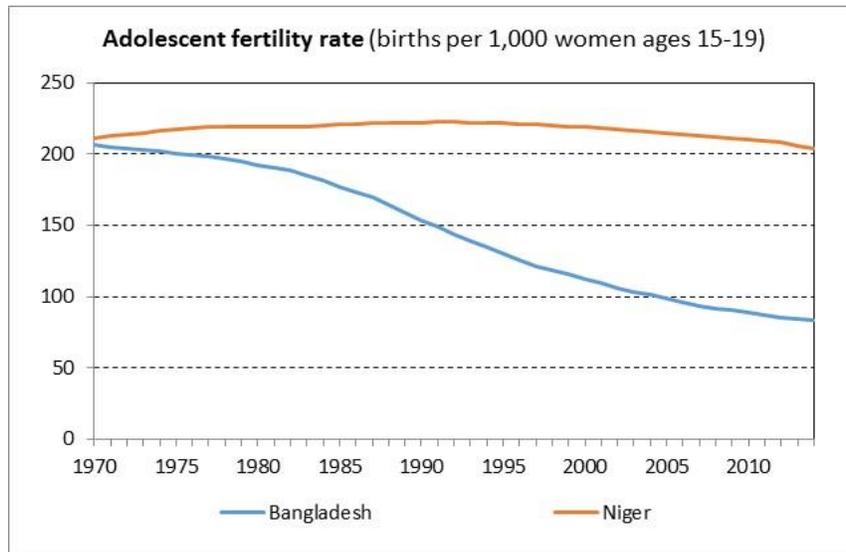
IV. Discussion

IV.1. Definition and Evolution of Child Marriage

Child marriage is defined as a marriage where one or both spouses are under 18 years old. While child marriages are no longer a problem in most industrialized countries, they remain common in some developing countries, such as Bangladesh and Niger. In both Bangladesh and Niger, child marriage is technically illegal, but national legislation is ignored and rarely enforced. In Niger, marriage under age 15 is outlawed and in Bangladesh, the age of consent is 18. However, in the rural communities, child marriages are common as economic pressures combined with prevailing social norms take precedent over national laws.

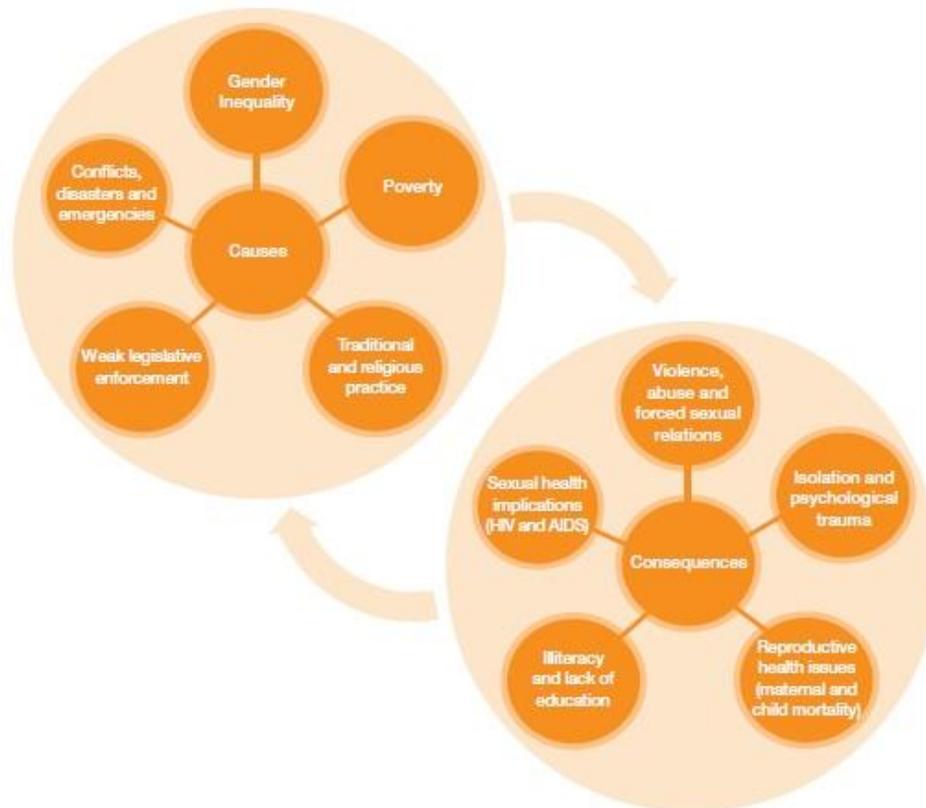
While there is no time series data readily available for child marriages in neither Bangladesh nor Niger, given that girls typically do not give birth in these countries without being married, we can look at the adolescent fertility rate (which is defined as births per 1,000 women ages 15-19) to get some idea on how child marriages have evolved over time. As shown in Figure 4, in the case of Bangladesh, the adolescent fertility rate has decreased continuously from 206 births per 1,000 teenage women in 1970, to 83.5 births per 1,000 teenage women in 2014. On the other hand, in the case of Niger, the adolescent fertility rate has slightly increased from 1970 until 1992, and then equally slightly decreased from 1992 to 2014. Given this evolution, Niger's adolescent fertility rate of 2014 was about the same as it was in 1970.

Figure 4: Adolescent Fertility Rates in Bangladesh and Niger, 1970-2014



Source: Created by author based on World Bank (2016).

Figure 5: Causes and Consequences of Child Marriages



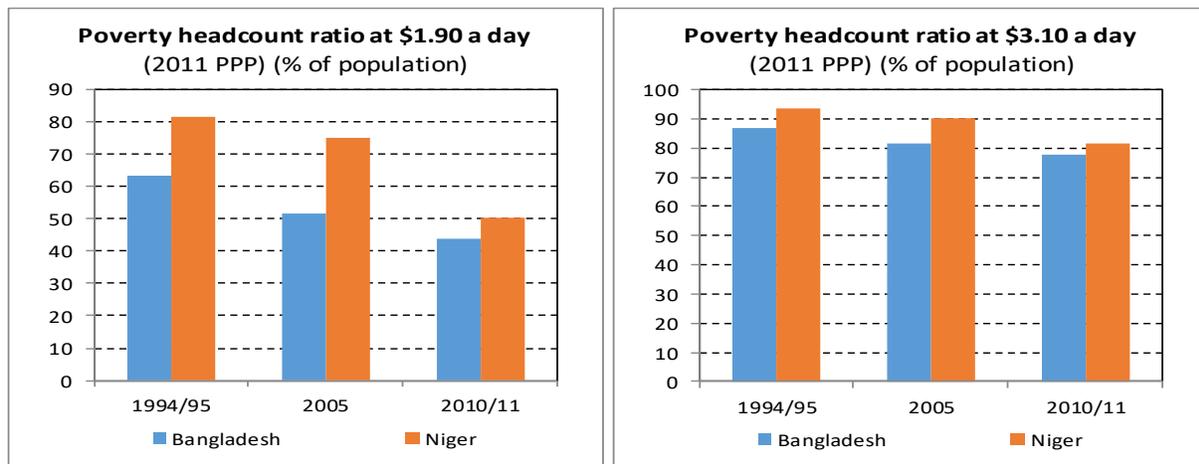
Source: Myers and Harvey (2011), p. 9.

IV.2. The Economics of Child Marriage

As shown in Figure 5 above, child marriage has many causes and consequences. Myers and Harvey (2011) have identified the main causes to be gender inequality; poverty; traditional and religious practice; weak legislative enforcement; and conflicts, disasters and emergencies, while the consequences were identified as violence, abuse and forced sexual relations; isolation and psychological trauma; reproductive health issues (maternal and child mortality); illiteracy and lack of education; sexual health implications (HIV/AIDS). However, as the arrow going from the lower right circle to the upper left circle indicates, the consequences feed back into the causes.

At a very basic level, most factors that contribute to forced marriages can be attributed to extreme levels of poverty. As shown in left panel of Figure 6 below, in 2010/11, 50 percent of Niger's population lived in absolute poverty (less than PPP\$1.90 a day), while in Bangladesh almost 44 percent of the population lived on less than PPP\$1.90 a day. Furthermore, as the right panel of Figure 6 shows, the percentage of people living below PPP\$3.10 a day in 2010/11, was 82 percent for Niger and 78 percent in Bangladesh. Figure 6 shows that both countries have made considerable progress in reducing poverty, but given the still high percentages in 2010/11, people in both Bangladesh and Niger face constant struggles stemming from their lack of financial security.

Figure 6: Percentage of Population Living in Poverty in Bangladesh and Niger



Source: Created by author based on World Bank (2016).

A study conducted by the United Nations Children's Fund (UNICEF) (2014) discovered that in the poorest 25 percent of households, more than half the girls were child brides, while in the wealthiest 25 percent of households only one in every sixteen girls was a child bride. Ultimately, the study found that there was a strong relationship between lower rates of child marriages and higher levels of development such as urbanization, education and wealth. Looking at household wealth to find connections between poverty and the prevalence of child marriages can be extrapolated to analyze Bangladesh and Niger in terms of how economic development influences forced marriages. Comparing Figure 1 (showing GDP per capita) with Figure 4 (showing

adolescent fertility rates) also support that there is a strong link between the level of income and child marriage.

Furthermore, both Bangladesh and Niger have financial customs that encourage younger marriages. In both countries, a girl's age is attached to a value; and as she ages, she becomes more of a burden and less of a financial asset, increasing the pressure to marry girls when they are young. According to cultural and religious beliefs that are prevalent in Bangladesh and Niger's rural areas, a girl's purity must be protected and marriage at a young age is believed to be 'socially beneficial' for the girl. Being married just before or at the onset of puberty is considered a way to protect a girl's reputation and value.

In Bangladesh, the girl's family pays dowry to the groom's family. As a girl gets older, she is considered less desirable and the dowry increases, thus encouraging early marriages. In Nigerian society, cultural traditions dictate that the groom's family must pay the bride's family, commonly using cows as a form of currency, with an inverse relationship between age and value. "Child marriage becomes a business transaction that regulates and commodifies girls' and women's' sexuality and reproduction" (African Union, 2015, p. 11). Early marriage is thought of to ensure respectability and to safeguard honor, and a way to secure the maximum amount of profit for their family (World Vision, 2013). Being married young is thought to serve as a form of protection against pre-marital pregnancy and against sexual assault that can damage a girl's reputation.

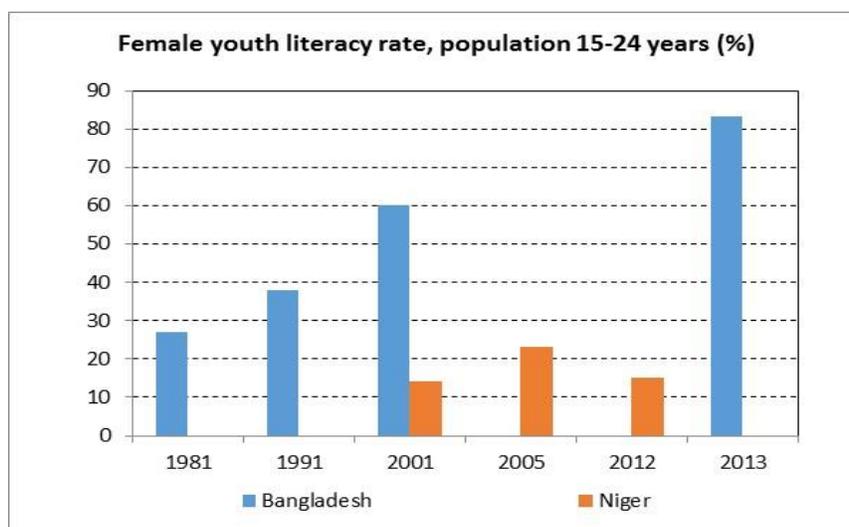
Even in cases of sexual assault, the girl is considered ruined, and thus less valuable. In some cases, if a girl is raped she will be given to the rapist in order for the bride and bride's family to avoid shame or disgrace. In these societies, a girl who is rumored to have a romantic affair, is no longer desirable and effectively thought of as a damaged good. Research conducted by World Vision UK (2013, p. 8) found that "[f]ear of rape and sexual violence, of unwanted pre-marital pregnancies, of family shame and dishonour, of homelessness and hunger or starvation were all reported by parents and children as legitimate reasons for early marriage".

In all these circumstances, it is beneficial for the bride's family to marry off a girl at a young age and in both Bangladesh and Niger cultural standards serve to reinforce these economic incentives. The African Union's (2015, p. 21) Report on Child Marriage states that "poverty drives unemployed parents to regard children as economic burdens, school fees as unaffordable, and girls as sources of potential dowry income." Overall, in Bangladesh and Niger, economic pressures combined with social norms that enforce gender inequality create a cultural standard where forced marriages become an accepted tradition.

IV.3. Education and Child Marriage

As Figure 7 shows, Bangladesh has made considerable progress in increasing female youth literacy rates from 27 percent in 1981 to 83 percent in 2013. This is however not the case for Niger, which increased female youth literacy rates only marginally from 14.2 percent 2001 to 15.1 percent in 2012 (even though it seemingly was 23.2 percent in 2005). Figure 7 is also consistent with the evolution of adolescent fertility rates shown in Figure 4 above, which we used as an indicator for the evolution of child marriages.

Figure 7: Female Youth Literacy Rates in Bangladesh and Niger, all available data



Source: Created by author based on World Bank (2016).

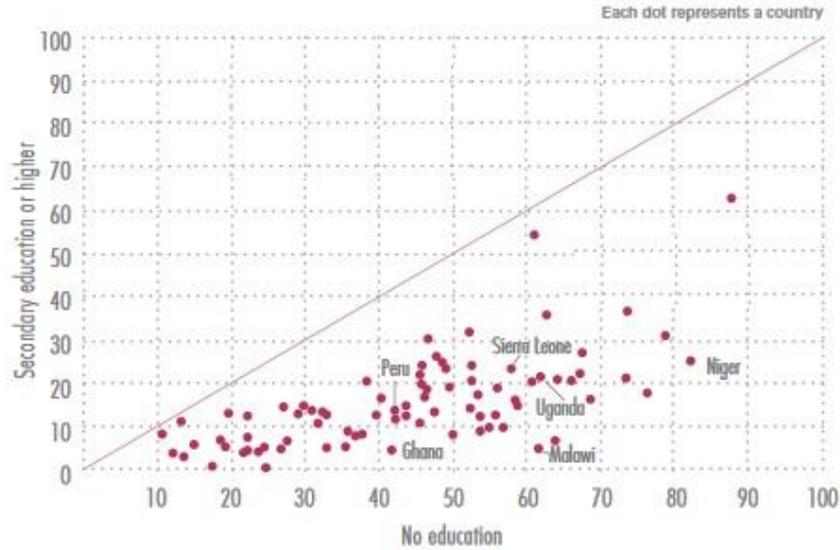
Lack of education is both a cause and an effect of child marriages. Girls who are not enrolled in school have higher rates of marriage but girls who get married are often forced to drop out of school. Mothers who are uneducated have children who are uneducated and who also marry early, creating a cycle. For parents, girl's education is a lower priority than boy's education. During times of economic insecurity, parents are more likely to pull a girl out of school than they are to pull out a boy.⁷ This is related to gender expectations as girls in rural communities have few options besides marriage and eventual motherhood, leading to the idea that education for girls has little benefit.

However, education has hidden benefits for the girl, her offspring, and society. Education delays marriage, as girls who are enrolled in school are more likely to be seen as children by their parents (Lemmon and ElHarake, 2014). Girls with no education marry at rates that are three times higher than their peers who are enrolled in secondary school; girls with education at the primary level are twice as likely to be married by age eighteen than those with secondary school education. In Niger only 10 percent of girls are enrolled in secondary education, in Bangladesh 51 percent of girls are enrolled (CARE, 2015). Myers and Harvey (2011) show that for each additional year of schooling, literacy rates increase by 6 percent. Additional education also gives girls more control over their reproductive health as well as delaying marriage.

The horizontal axis of Figure 8 shows the percentage of uneducated women (aged 20-49 years), who were married or in union before age 18, while the vertical axis shows the percentage of educated women (aged 20-49 years), who were married or in union before age 18. The figure shows clearly that child marriage is far more common among uneducated women. For example, it shows that in Niger, about 82 percent of the uneducated women were married or in union before age 18, while the percentage of child marriages for educated women is with about 26 percent far lower.

⁷ Lemmon and ElHarake (2014).

Figure 8: Child Marriage by Education Level



Source: United Nations Children’s Fund (UNICEF) (2014), p. 4.

Increasing education also helps in reducing the high adolescent fertility rates shown in Figure 4 above. As pointed out, for example in Lemmon and ElHarake (2014), there is a positive relationship between higher education and contraceptive use in girls. As shown by Myers and Harvey (2010), a girl who completes seven years of education has on average two less children than girls who do not complete education. However, in rural Bangladesh and in Niger girls are more likely to be married than to be sent to school.⁸

IV.4. Environmental Disasters and Child Marriages

Bangladesh and Niger are both subject to environmental disasters. Niger suffers from repeated droughts⁹ and Bangladesh experiences both reoccurring floods and frequent hurricanes. Environmental disasters have the largest impact on rural populations whose livelihood depends on agriculture and who have the least amount of support.¹⁰ Natural disasters ruin crops, threaten livestock and cut rural communities off from supply chains. Since much of the population in Bangladesh and Niger depends on agriculture,¹¹ an unstable economic situation is created which impacts child marriages as financial instability has been found to be a primary motivation for child marriages.¹²

⁸ CARE (2015).

⁹ For example, in 2004 Niger experienced a severe drought, which hurt the agricultural sector and overall GDP per capita growth decreased by 3.5 percent (World Bank, 2016).

¹⁰ Lemmon (2014).

¹¹ In the case of Bangladesh, the percentage of people employed in agriculture was 47.5 percent of total employment in 2010 (which is the latest available year such data is available for Bangladesh). In the case of Niger, the percentage of people employed in agriculture was 56.9 percent of total employment in 2005 (which is the latest available year such data is available for Niger).

¹² Lemmon (2014).

Research conducted by World Vision UK (2013) in rural Niger found that in times of drought, child marriage is frequently used as a survival strategy. In a practice referred to as “famine marriages”, families effectively sell off their daughters in order to provide for their other children. Likewise, in Bangladesh, rates of forced marriages have been found to increase after environmental disasters. For example, Cyclone Sidr, which hit Bangladesh in November 2007, caused an increase in the number of forced marriages. As documented in World Vision UK (2013), research conducted after the hurricane found that in 2008, 62 percent of not previously married or engaged girls were married. Reasons given ranged from girls being thought of as an economic burden and inability to provide for them due to widespread destruction and instability. Because so many families rely on agriculture for both food and income, in times of natural disasters, girls are used as a kind of human currency, and marriage is a way to reduce household expenses.¹³

IV.5. Child Marriages and Health Considerations

Forced marriages completely disrupt the normal progression of childhood and harm the forward movement of society. Child marriages have severe health consequences by forcing young girls into roles their minds and bodies are not yet ready for. Childrearing is an important consideration in marriage and girls may feel pressured to prove their fertility, especially in cases where there is a large dowry involved. In these situations, girls have no autonomy, no ability to make demands of their husband, and bow to social pressures that encourage early and repeated childbirth.

Sex is an expected part of marriage and girls consequently feel as though they do not have the power to reject their husband’s sexual advances. Bangladesh and Niger both have patriarchal societies that emphasize the male’s superior role in the household. In child marriages, this ideology surfaces when a girl’s denial of sex is met with domestic violence, creating situations where withholding from sexual activity is all but impossible.¹⁴

Not only is physical abuse a common response to denial, but also in instances where a girl refuses to have intercourse, marital rape can and frequently does occur. Marital rape is linked to increased gynecological, central nervous system, and stress-related health problems (Campbell et al., 2002). Even when the intercourse is consensual, if a girl’s body is not physically fully developed, microscopic vaginal tears can easily form during sex.¹⁵ Vaginal tears increase transmission of sexually transmitted diseases (STDs).

Especially in Niger, where there is a cultural double standard that encourages males to engage in premarital and unprotected sex and widespread infection of HIV/AIDS, getting married before age twenty has become a significant risk factor for contracting HIV/AIDS.¹⁶ Engaging in sexual intercourse at a young age causes increased risk for HIV and other STD because due to vaginal lacerations transmission rates are higher than normal. Moreover, as Nour (2006, p. 1645) explains, there is a combined risk factor as “STDs such as herpes simplex virus type 2 infection, gonorrhea, or chlamydia enhance girls’ vulnerability to HIV.”

There are also other health concerns that can be connected to problems caused by sexual activity

¹³ Lemmon (2014).

¹⁴ World Vision UK (2013).

¹⁵ Frioux, Blinman and Christian (2011).

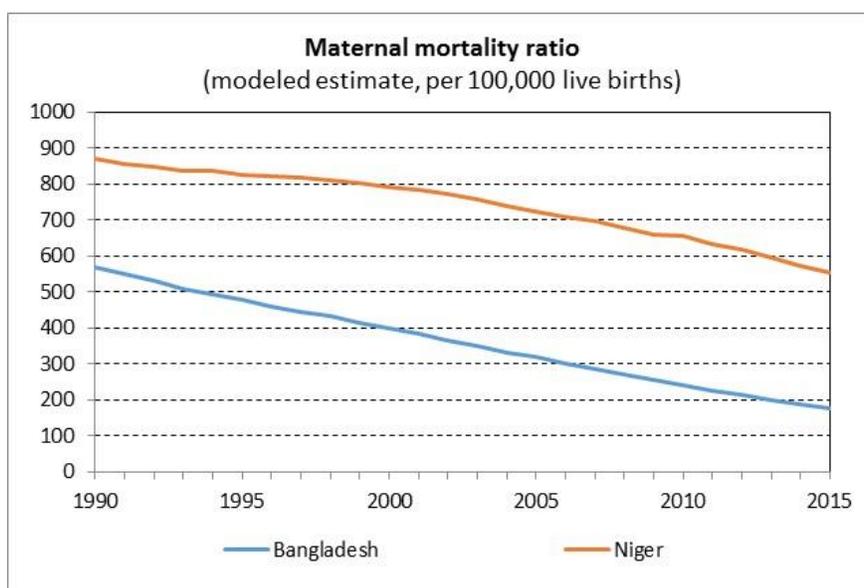
¹⁶ Nour (2006).

in young girls. Rates of cervical cancer are elevated in countries where child marriages are prevalent.¹⁷ Chances of developing cervical cancer are increased if human papillomavirus (HPV)¹⁸ is contracted and if a woman has given birth many times. Forced marriages create the perfect circumstances for cervical cancer as condoms are rarely used and average rates of fertility are high. Girls lack the ability to demand contraception and getting married at a young age is a predictor of mothers having more babies over the course of their lives than women who marry later.¹⁹

There are significant health risks for both mother and baby associated with youth pregnancies. Pregnancy before age eighteen is common in Bangladesh and Niger due to the high rates of child marriage. In Niger, 51 percent of girls have their first child before eighteen, while in Bangladesh 40 percent of girls have their first child before 18.²⁰ In both Bangladesh and Niger, complications linked to early childbearing are the leading cause of mortality in girls between the ages of 15-19.²¹ In low-income countries, girls who become pregnant when they are younger than fifteen have double the risk of dying in childbirth than women who are older than 20 years.²²

Figure 9 compares the maternal mortality rates of Bangladesh and Niger from 1990 to 2015. Though both countries have made progress with reducing maternal mortality, Bangladesh still has an average maternal mortality rate of 176 deaths per 100,000 live births, while Niger has an average maternal mortality rate of 553 deaths per 100,000 live births.

Figure 9: Maternal Mortality Ratios in Bangladesh and Niger, 1990-2015



Source: Created by author based on World Bank (2016)

¹⁷ Nour (2006).

¹⁸ Human papillomavirus (HPV) is an STD that is transmitted through unprotected intercourse.

¹⁹ Save the Children (2004).

²⁰ World Vision UK (2013).

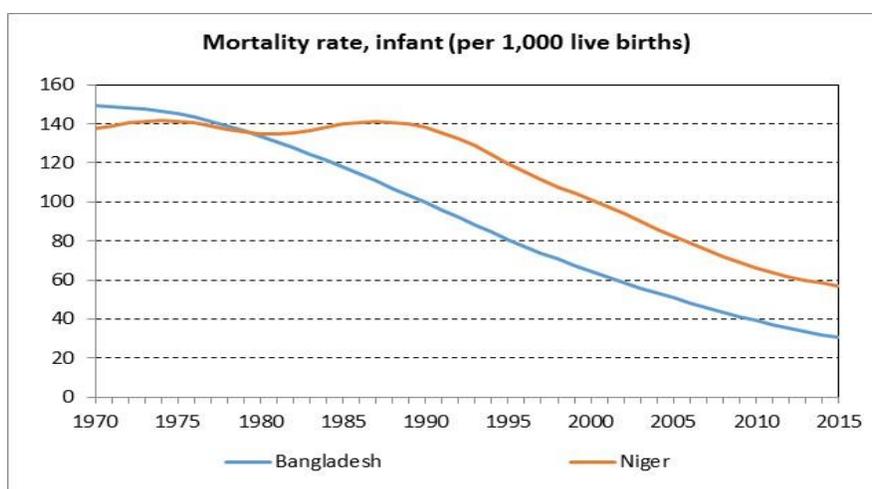
²¹ World Vision UK (2013).

²² Save the Children (2004).

Maternal mortality rates include deaths caused by complications associated with childbearing such as hemorrhaging, obstructed labor, sepsis, pre-eclampsia and eclampsia.²³ Complications with childbirth and pregnancy are most common when a girl is under eighteen years old, however, many of them are easily prevented with good healthcare.²⁴ In rural communities, where forced marriages happen most frequently, there is a shortage of health services available. In Bangladesh, community clinics are routinely understaffed and lack supplies.²⁵ In Niger, a country with a relatively low population density, distance commonly poses a significant obstacle to accessing health services.²⁶ In any case, in both countries, girls are left without options and must deliver the baby at home, increasing the risk to both themselves and their child.

Though maternal health complications come in many forms, one of the most widespread complications is obstetric fistula. Obstetric fistula is caused by obstructed labor, which is common when young girls give birth as their bodies are not finished developing and leads to holes in the birth canal, preventing future pregnancies and constant incontinence.²⁷ Obstetric fistula is twice as common in girls under fifteen than it is in older women and leads to a lifetime of shame.²⁸ It is easily fixable with surgery, but due to poor medical resources, most women are not able to get it repaired.

Figure 10: Infant Mortality Rates in Bangladesh and Niger, 1970-2015



Source: Created by author based on World Bank (2016)

When girls get pregnant at a young age, they are not the only ones who are at increased risk of mortality and complications. Babies born to girls under age fifteen are at increased risk of being born early, with low birth weight, or dead.²⁹ Babies born prematurely face a number of health-

²³ Nour (2006).

²⁴ Save the Children (2004).

²⁵ World Vision UK (2013).

²⁶ World Vision UK (2013).

²⁷ Howson, Kinney and Lawn (eds.) (2012).

²⁸ African Union (2015).

²⁹ Save the Children (2004).

related concerns such as fighting infections or maintaining normal body temperatures that can have long-term health implications.³⁰ Low birth weight is frequently caused by maternal malnutrition, anemia or lack of spacing between pregnancies and can lead to stunted growth.

High rates of infant mortality correlate to the elevated number of child brides. As Raj and Boehmer (2013) state, a 10 percent decrease in child marriages is among others associated with a 3 percent decrease in infant mortality rate, and a 70 percent decrease in maternal mortality rate. Figure 10 shows the evolution of infant mortality rates in Bangladesh and Niger from 1970 to 2015. In 1970, the infant mortality rate was slightly higher in Bangladesh than in Niger. However, due to about two decades of no progress with reducing infant mortality rates in Niger, Bangladesh has lower infant mortality rates than Niger since 1980. As of 2015, Bangladesh's infant mortality rate stood at 30.7 deaths per 1,000 live births, while Niger's was 57.1 deaths per 1,000 live births.

V. Conclusions and Solutions

Using the adolescent fertility rate as a rough indicator for child marriages, this paper has shown that Bangladesh has made significant progress in reducing child marriage, while Niger seems to have made very little progress. This paper has also shown that there is a high correlation between the evolutions of GDP per capita, literacy rates, and child marriages. Bangladesh, which experienced steady and robust growth in GDP per capita, also experienced sharply increasing literacy rates, and decreasing child marriages. Niger's GDP per capita remained almost stable over the last 25 years, has not been able to increase its literacy rates, and made little progress with reducing child marriages. In any case, child marriages are still widespread in both countries, especially among poor families and in rural areas.

Because forced marriages are caused by a number of factors, there is no easy solution. All solutions must be multi-faceted and work to change gender norms and poverty that are two key underlying causes of child marriages. On the other hand, as mentioned previously, international and national legislation has little impact on reducing child marriage. This is due to lack of enforcement and a number of religious exemptions or parental approval of marriages.

Improving birth registrations can have a positive impact and help to decrease the number of girls getting married, especially at a very young age, i.e., below the age of 15 years. In rural communities of Bangladesh and Niger, there are very low rates of birth registration, which means that there is no reliable data to ensure a girl is above the legal age. Birth registrations are much higher in urban areas, where child marriages are also less common. Increasing the number of children registered at birth can decrease child marriage and will also provide more accurate data on rates of child marriage.

Increasing economic development is a viable solution to decreasing the economic incentives that encourage child marriages. Urbanization expands economic opportunities and provides increased access to education and healthcare services. As the urban population grows, there is increasingly stable economic growth and a movement of jobs into economic sectors that are less vulnerable than agriculture to natural disasters. As Bangladesh's population becomes increasingly urbanized,

³⁰ See Howson, Kinney and Lawn (eds.) (2012) for a detailed report on the various health effects associated to premature birth.

the service sector of the economy has correspondingly increased, creating a more stable economy.

Urbanization also increases the availability of education. Growth in urban population correlates to increases in adolescent literacy rate, especially female youth literacy. Increases in the number of people living in urban communities can be linked to increases in female education; both of which are correlated to decreased rates of child marriages. As discussed previously, education has numerous other effects that help to improve the quality of life for girls such as delaying marriage, lower fertility rates, and increasing contraceptive use. Hence, as stated by the African Union (2015), marginal investments in girls' education can have a substantial impact on GDP growth and well-being.

Furthermore, the longer a girl is in school, the more opportunity she has to learn about contraceptive methods; and the later she is married the more autonomy she has to use them. Currently, in Bangladesh and Niger, there are high levels of unmet contraceptive needs and overall low rates of contraceptive use. Increasing the prevalence of contraceptives in Bangladesh and Niger would be beneficial. Furthermore, a major barrier to healthcare is access, as living in rural communities means that the nearest doctor or hospital is not easily available. Living in an urban environment means that before, during, and after birth, women receive better care than their rural counterparts.

However, major barriers that women face are the cultural and social norms that enforce gender inequality. While economic and educational opportunities are important, realistically, until attitudes change relatively little can be done. Working within the community to change perspectives is essential. A social inclusion of adolescent girls that keeps them on a path to achieving their maximum human potential will result in significant economic growth and more sustainable development.

References

- African Union (2015). *Campaign to End Child Marriage in Africa: The Effects of Traditional and Religious Practices of Child Marriage on Africa's Socio-Economic Development* (Addis Ababa, Ethiopia: African Union); available at: http://pages.au.int/sites/default/files/5465_CCMC_Africa_report.pdf.
- CARE (2015). *Vows of Poverty: 26 Countries Where Child Marriage Eclipses Girls' Education* (Atlanta, United States: CARE); available at: <http://vowsofpoverty.care.org/>.
- Chowdhury, Farah Deeba (2004). The Socio-cultural Context of Child Marriage in a Bangladeshi Village. *International Journal of Social Welfare*, Vol. 13, No. 3 (July), pp. 244-253.
- De Silva-de-Alwis, Rangita (2008). *Child Marriage and the Law* (New York, United States: United Nations Children's Fund (UNICEF), Division of Policy and Planning, Legislative Reform Initiative Paper Series, January); available at: [http://www.unicef.org/policyanalysis/files/Child_Marriage_and_the_Law\(1\).pdf](http://www.unicef.org/policyanalysis/files/Child_Marriage_and_the_Law(1).pdf).
- Frioux, Sarah M.; Thane Blinman; and Cindy W. Christian (2011). Vaginal Lacerations from Consensual Intercourse in Adolescents. *Child Abuse & Neglect*, Vol. 35, No. 1, pp. 69-73.

- Girls Not Brides (2016). *About Child Marriage* (London, United Kingdom: Girls Not Brides); internet resource available at: <http://www.girlsnotbrides.org/about-child-marriage/>.
- Godha, Deepali; David R. Hotchkiss; and Anastasia J. Gage (2013). Association between Child Marriage and Reproductive Health Outcomes and Service Utilization: A Multi-Country Study from South Asia. *Journal of Adolescent Health*, Vol. 52, No. 5 (May), pp. 552-558.
- Howson, Christopher P.; Mary V. Kinney; and Joy E. Lawn (eds.) (2012). *Born Too Soon: The Global Action Report on Preterm Birth* (Geneva, Switzerland: World Health Organization, in collaboration with March of Dimes, The Partnership for Maternal, Newborn & Child Health (PMNCH), and Save the Children, et al.); available at: http://www.who.int/pmnch/media/news/2012/201204_borntoosoon-report.pdf.
- Kamal, S. M. Mostafa and Che Hashim Hassan (2015). Child Marriage and Its Association with Adverse Reproductive Outcomes for Women in Bangladesh. *Asia-Pacific Journal of Public Health*, Vol. 27, No. 2 (March), pp. NP1492-NP1506.
- Lemmon, Gale T. (2014). *Fragile States, Fragile Lives: Child Marriage Amid Disaster and Conflict* (New York, Council on Foreign Relations (CFR), Working Paper, June); available at: <http://www.cfr.org/global/fragile-states-fragile-lives/p33093>.
- Lemmon, Gale T. and Lynn S. ElHarake (2014). *High Stakes for Young Lives: Examining Strategies to Stop Child Marriage* (New York, Council on Foreign Relations (CFR), Working Paper, April); available at: <http://www.cfr.org/women/high-stakes-young-lives/p32764>.
- Myers, Juliette and Rowan Harvey (2011). *Breaking Vows: Early and Forced Marriage and Girls' Education* (London, United Kingdom: Plan UK); available at: <http://www.plan-uk.org/resources/documents/Breaking-Vows-Early-and-Forced-Marriage-and-Girls-Education/>.
- Nour, Nawal M. (2006). Health Consequences of Child Marriage in Africa. *Emerging Infectious Diseases*, Vol. 12, No. 11, pp. 1644-1649; available at: http://wwwnc.cdc.gov/eid/article/12/11/06-0510_article
- Raj, Anita and Ulrike Boehmer (2013). Girl Child Marriage and Its Association with National Rates of HIV, Maternal Health, and Infant Mortality across 97 Countries. *Violence Against Women*, Vol. 19, No. 4, pp. 536-551.
- Raj, Anita; Lotus McDougal; Jay G. Silverman; and Melanie L. A. Rusch (2014). Cross-Sectional Time Series Analysis of Associations between Education and Girl Child Marriage in Bangladesh, India, Nepal and Pakistan, 1991-2011. *PLoS ONE*, Vol. 9, No. 9, e106210; available at: <http://journals.plos.org/plosone/article?id=10.1371%2Fjournal.pone.0106210>.
- Save the Children (2004). *Children Having Children: State of the World's Mothers 2004* (Westport, Connecticut, United States: Save the Children); available at: http://www.ungei.org/resources/files/SaveTheChildren_SOWM_2004_final.pdf.
- United Nations Children's Fund (UNICEF) (2014). *Ending Child Marriage: Progress and Prospects* (New York, United States: UNICEF, June); available at:

http://www.unicef.org/media/files/Child_Marriage_Report_7_17_LR..pdf

United Nations Children's Fund (UNICEF) (2016). *The State of the World's Children 2016: A Fair Chance for Every Child* (New York, United States: UNICEF, June); available at: http://www.unicef.org/publications/files/UNICEF_SOWC_2016.pdf.

World Bank (2016). *World Development Indicators/ Global Development Finance database* (Washington, DC: The World Bank); as posted on the World Bank website: <http://data.worldbank.org/data-catalog/> (downloaded on June 28, 2016).

World Vision UK (2013). *Untying the Knot: Exploring Early Marriage in Fragile States* (London, United Kingdom: World Vision UK); available at: https://www.worldvision.org/sites/default/files/images/Untying-the-Knot_report.pdf.