

PSYCHOLOGICAL AND SOCIAL EFFECTS OF CHILD MARRIAGE IN INDIA, AND THE CURRENT LAWS IN PREVENTING THIS HARMFUL PRACTICE

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ABSTRACT

Child marriage is a significant societal issue that has endured for generations in India, particularly in the Northern States. This issue is more prevalent in the North. Regardless of how or why it began, the question of why it continues to exist at an age and period when women's emancipation is a topic that is receiving a lot of attention has to be investigated further. Since the country's independence, the government has been working to eliminate this cruel and inhumane practise, which not only violates the children's fundamental rights but is especially harsh to young girls. Since the country's independence, the government has been working to strengthen the legislative requirements that prohibit this practise. The current research was carried out in some of the states in Northern India that are known for their high levels of political consciousness in order to investigate the reasons behind why supporters of child marriage still face little resistance from the more enlightened members of its communities and the reasons behind why the voices of those who are opposed to this practise are silenced. At the same time, the purpose of the study is to evaluate the effectiveness of the laws that are currently in place to prevent weddings between minors and the role that law enforcement apparatus plays in this process.

Keywords : Child Marriage, Situational

INTRODUCTION

The practise of marrying off children at a young age is one of the increasing problems faced by developing countries. According to the census completed in 2001, there are 1.5 million young girls in India who have already married before reaching the age of 15. Twenty percent of these, or around 300,000 people, are moms to one or more children. According to estimates provided by the census taken in 2001, the typical age that women marry is now 18.3 years old. The typical age of a man is 22.6 years.1 There is a high frequency of child marriage in India, and there are several variables that contribute to this high prevalence. One of the primary causes for the prevalence of child marriage in the nation is the country's economic and social backwardness, as well as its social practices and customs and religious beliefs.

The social and psychological effects of child marriage were felt equally by both boys and girls. When a girl lives with a guy and takes on the position of carer for him, the presumption is often made that she has become an adult woman, even if she has not yet attained the age of 18 years. This is the case even if the girl is younger than 18 years old. However, the impact on females is far greater and more intense. She is obligated to do a significant

amount of housework, is put under a great deal of stress to have offspring, is responsible for the upbringing of children, faces restrictions on her ability to make decisions and has less options in her life.

The widespread practise of marrying off children at an early age is symptomatic of the country's crises in human rights. Both the Central Government and the State Government are exerting efforts to put a stop to the harmful practices of child marriage that are prevalent in the county. But the issue that has to be asked is, "Has the Indian government been successful in putting an end to the age-old practise of child marriage?" We shall provide a response to the aforementioned issue by doing an investigation into the current state of child marriage legislation in Assam as well as the state of the situation in that state.

As with the other states in India, the custom of marrying young girls off at a young age is prevalent in Assam as well. According to the findings of the Annual Health Survey conducted in 2010-2011, ten of Assam's districts have rates of marriage among minors that are higher than the state and national norms, which respectively stand at 21 and 22 percent. In addition, the state average for married women in the age range of 20-24 who got married before they turned 18 years old is as high as 39.4 percent. These women were married before they turned 18.

OBJECTIVE OF THE STUDY

- 1. To determine the prevalence and incidence of child marriages, particularly those involving young women, in the states that were chosen for this study.
- 2. To conduct an investigation into the many socioeconomic and cultural elements that contribute to the practise of child marriage in the states that were researched.

RESEARCH METHODOLOGY

From November 1st to November 4th, 2015, activists from the HRLN and the Barak Human Rights Protection Committee conducted a fact finding mission in the Cacher District of Assam in order to explore the prevalence, causes, and impacts of child marriage in the region. The team travelled to Bhuvan Valley, Kalain Field Research Unit, Jalalpur Primary Health Care, Rajpur Tea Estate, Lakhimpur Block Primary Health Care, and Sonia Primary Health Care. The fact finding team's goals were twofold: first, to determine whether or not these data were correct and whether or not they represented faulty reporting of ages at marriage; and second, to determine whether or not the figures hid greater rates of child marriage in tea gardens in comparison to other areas. In this research, the facts as well as the fundamental rights abuses that women and girls confront in rural Cachar are outlined. Interviews with young girls and young pregnant women, as well as interviews with local NGOs, police, and ASHA, as well as secondary data and a study of the relevant literature, formed the basis of this research. The group talked to twenty different young ladies..

DATA / ANALYSIS

The Government of Assam needs to address the high rate of girls who drop out of school, improve access to education, expand vocational training opportunities, educate communities about the dangers of child marriage, mandate accurate and standardized reporting of child marriage, and ensure that the 2006 Protection of Children

from Marriage Act (PCMA) is enforced. Only then will they be able to effectively combat child marriage. Unhappily, many of these government and civil society projects are still in their infant stages, and a great deal of work still has to be done to prevent child marriage on a local level.



Figure 1.The situational analysis of child marriage and the use of the PCMA in the Cachar district of Assam is presented

The Cachar district may be found in the most southern section of the state of Assam. Silchar (Sadar) and Lakhipur are the names of the two administrative subdivisions that have recently been established within the district. The district has a total of 1023 census villages, 895 of which are revenue villages. In all, the district has 1023 villages. In the Cachar district, there are a total of 163 Gaon Panchayats. Within the district there are a total of fifteen community development blocks in addition to the five revenue circles .

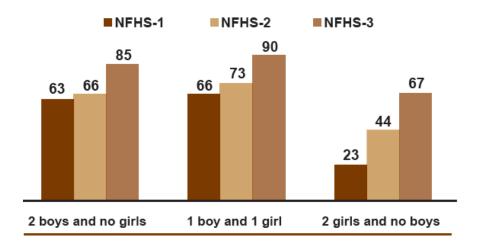
Table 1 The fact seeking team went to the Bhuvan Valley tea garden, which is located in the Lakhipur block

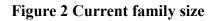
Name of Revenue Circles	Name of Blocks		
Katigora	Katigorah		
	Salchapra		
	Barkhola		
	Kalain		
Silchar	Salchapra		
	Barkhola		
	Silchar		
	Udarbond		
	Tapang		
	Sonai		
	Barjalenga		
	Narshingpur		
Udarbond	Udarbond		
Sonai	Silchar		
	Sonai		
	Narshingpur		
	Palanghat		
	Baskandi		
	Binnakandi		
Lakhipur	Baskandi		
	Rajabazar		
	Lakhipur		

The rate of fertility is affected by child marriage, which leads to early child bearing, which in turn leads to repeated pregnancies, which are harmful to women's health. "Among young women age 15-19 in Assam, NFHS III reports that 16 percent have already begun childbearing." However, among women who are 19 years old, over two-fifths (39%) are either either moms or pregnant, but just 3% of women who are 15 years old have begun childbearing.8 percent of births take place within 18 months of the most recent birth, and 12 percent of births take place within 24 months of the most recent birth.

This accounts for over half of all non-first-order births, which take place within three years after the most recent first-order birth. According to the findings of several studies, delaying each subsequent delivery by at least three years brings the risk of infant death down.

Preferences in terms of fertility: There is some indication that males are favoured over daughters in Assam. Only two to three percent of women and men have the desire to have more daughters than boys, whereas 24 percent of women and 18 percent of men want more sons than daughters. On the other hand, the majority of men and women want at least one daughter in addition to having at least one boy in their family.





The number of daughters a woman has a significant impact on her desire to have more children. For instance, among women who have already given birth to two kids, those who have already given birth to two males are 27 percent more likely to desire no more children than those who have already given birth to two daughters. Notably, the percentage of presently married women who already have two children and who do not desire any more children is greater in NFHS-3 than it was in NFHS-2, and this is true regardless of the number of boys the women already have. This demonstrates that women do not have the capacity to make decisions on family planning, and as a result, women are more likely to have multiple pregnancies, which puts them at risk for HIV, STIs, and other issues associated to pregnancy. It has an impact on the health of both the mother and the kid.

Table 2 The following table represents the early childhood mortality rate in Assam

Background characteristic	Neonatal mortality (NN)	Postneonatal mortality ¹ (PNN)	Infant mortality (₁ g _o)	Child mortality (4q1)	Under-five mortality (_s q _o)
Residence					
Urban	42.9	7.7	50.6	17.6	67.4
Rural	49.7	23.9	73.5	27.4	98.9
Education					
No education	57.6	30.4	88.0	36.3	121.1
<10 years complete	43.5	18.6	62.1	19.7	80.5
10 or more years complete	(35.9)	(0.0)	(35.9)	(6.3)	(41.9)
Religion					
Hindu	45.5	18.0	63.5	21.2	83.3
Muslim	51.5	28.9	80.4	37.3	114.7
Christian	•	•	*	*	*
Caste/tribe					
Scheduled caste	(67.3)	(14.5)	(81.7)	(31.5)	(110.7)
Scheduled tribe	(43.9)	(15.1)	(59.0)	(25.8)	(83.2)
Other backward class	39.2	20.4	59.6	17.9	76.4
Other	48.1	25.9	74.0	29.1	100.9
Wealth index					
Lowest	67.7	27.8	95.4	37.2	129.1
Second	45.2	24.3	69.5	32.9	100.1
Middle	42.0	24.8	66.8	18.3	83.9
Fourth	(46.3)	(7.5)	(53.7)	(6.6)	(59.9)
Highest	(14.5)	(2.4)	(17.0)	(7.1)	(23.9)
Child's sex					
Male	45.5	23.8	69.3	22.6	90.3
Female	52.3	20.3	72.6	29.9	100.3
Mother's age at birth					
<20	70.1	23.5	93.6	32.4	123.0
20-29	44.0	23.6	67.6	24.0	89.9
30-39	36.3	13.1	49.5	23.4	71.8
40-49	•	•	*	*	*
Birth order					
1	61.9	15.7	77.7	12.2	88.9
2-3	46.0	24.7	70.7	29.6	98.2
4+	38.6	24.8	63.4	35.4	96.5

Source: NFHS III

- Women whose age is less than 20 years, the neonatal mortality rate among then was recorded at 70.1% and infant mortality rate was recorded at 93.6% which is relatively high when compared to women within the age group 20-29;
- Women whose age is less than 20 years, the neonatal mortality rate among then was recorded at 70.1% and infant mortality rate was recorded at 93.6%;
- Thus, the above shows that the rural areas of Assam had a mortality rate of 98. It was recorded that the baby death rate was 44.0%, and it was recorded that the infant mortality rate was 24.0%.

CONCLUSION

In conclusion, the fact finding team discovered that child marriage was significantly underreported in the tea gardens of Cachar District, which is located in the state of Assam. The majority of child brides did not continue their education after being married and lacked any type of financial autonomy as a result. Child marriage was shown to have a positive correlation with both a low level of living and education. Regrettably, marriage between minors is still a common practise in the tea plantations, and more work has to be done to change this. The state government of Assam is responsible for ensuring that child weddings are reported, educating the public about the harmful effects of child marriage, and prosecuting those who engage in the practise. As a result, there is a significant lack of progress made towards the implementation of PCMA in the teagarden region of the Cachar district.

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