UNIT 3 EARLY MARRIAGE AND TEENAGE PREGNANCY

Structure

3.0 Objectives

3.1 Introduction

3.2 Definition and Magnitude
  3.2.1 NFHS data for Early Marriage and Teenage Pregnancy
  3.2.2 NFHS data for MMR and IMR

3.3 Causes for early Marriage

3.4 Impact (ill effects) of early Marriage
  3.4.1 Family Problems
  3.4.2 Health Problems
  3.4.3 Education and Career Problems
  3.4.4 Emotional Problems

3.5 Causes of Teenage Pregnancy
  3.5.1 Biological Factors
  3.5.2 Social and Cultural Factors
  3.5.3 Service Delivery Factors

3.6 Impact of Teenage pregnancy
  3.6.1 Unsafe Abortion
  3.6.2 Risks Associated with Adolescent Pregnancy
  3.6.3 Unmarried Adolescent
  3.6.4 Intergenerational Effect

3.7 Role of Teachers

3.8 Let Us Sum Up

3.9 Key Words

3.10 Answers to Check Your Progress

3.11 References

3.0 OBJECTIVES

After going through this unit, you will be able to:

- discuss the magnitude of early marriage in our country and its ill effects;
- list the causes of early marriage in our society;
- enumerate the risks of teenage pregnancy; and
- identify the role of teachers in creating awareness about the risks and ill effects of early marriage and teenage pregnancy.
3.1 INTRODUCTION

In this unit we will be discussing about early marriage, its causes and effects and further about teenage pregnancy. Since adolescents are the major client and victims of early marriage and teenage pregnancy, we may discuss the issue in detail. Let us understand marriage especially in Indian Condition.

Marriage, as defined by the Merriam Webster online dictionary is “a legally and socially sanctioned union, usually between a man and a woman, that is regulated by laws, rules, customs, beliefs, and attitudes that prescribe the rights and duties of the partners and accords status to their offspring.” If we put this in very simple words, a marriage is a union between a man and a woman sanctioned by religious and cultural customs and law for the function of starting a family. It is primarily a relationship of love and is based on trust between partners. It involves certain responsibilities and obligations on both partners. It is therefore very understandable that the two partners should be physically, mentally, emotionally and financially capable of taking on these responsibilities.

The Child Marriage Restraint Act of 1929 – initiated a process of change but did not declare early marriage as invalid. This was followed by the Child Marriage Restraint Act of 1978 which was amended to rise the age at marriage to 18 years for girls and 21 years for boys.

The physical development of both boys and girls is complete by these ages and childbearing will not pose a health risk to the mother or a great financial burden on the father. It is also expected that the mental and emotional development of both parents will be such that together they can handle the responsibilities of a family.

The important considerations for marriage therefore should be:

- Minimum age: 18 years for girls and 21 years for boys (in India).
- Full and free consent of the partners involved.
- Maturity (physical, mental, social and economic) of partners.
- An understanding of roles and responsibilities.

However, in our country, early marriage is still a very big problem and its consequences are also serious. In this session, you will become familiar with the extent of the problem, the reasons for it and the impact of early marriage and teenage pregnancy.

3.2 DEFINITION AND MAGNITUDE

The Child Marriage Restraint Act was the result of sustained pressure by social reform groups and individuals who felt deeply about the adverse consequences of child marriage. The minimum age of marriage was upwardly revised on several occasions due to social pressure. We may see the same from the following table.
Reproductive & Sexual Health Issues

<table>
<thead>
<tr>
<th>Year</th>
<th>Age of consent under s.375, 5th clause, IPC</th>
<th>Age mentioned in the Marital Rape Exception to s.375 IPC</th>
<th>Minimum age of marriage under the Child Marriage Restraint Act, 1929</th>
</tr>
</thead>
<tbody>
<tr>
<td>1860</td>
<td>10 years</td>
<td>10 years</td>
<td>--</td>
</tr>
<tr>
<td>1891 (Act 10 of 1891) after the amendment of I.P.C.)</td>
<td>12 years</td>
<td>12 years</td>
<td>--</td>
</tr>
<tr>
<td>1925 (after the amendment of I.P.C.)</td>
<td>14 years</td>
<td>13 years</td>
<td>--</td>
</tr>
<tr>
<td>1929 (after the passing of the Child Marriage Act)</td>
<td>14 years</td>
<td>13 years</td>
<td>14 years</td>
</tr>
<tr>
<td>1940 (after the amendment of the Penal Code and the Child Marriage Act)</td>
<td>16 years</td>
<td>15 years</td>
<td>15 years</td>
</tr>
<tr>
<td>1978</td>
<td>16 years</td>
<td>15 years</td>
<td>18 years</td>
</tr>
</tbody>
</table>

Table 3.1: Minimum Age of Marriage in Adolescent Period

The Indian Penal Code considers any sexual intercourse with a wife below 15 years of age as rape.

As you can see for yourself there are certain discrepancies in the exact age at which one would call a marriage an early marriage. For this very reason a PROPOSAL TO AMEND THE PROHIBITION OF CHILD MARRIAGE ACT, 2006 AND OTHER ALLIED LAWS (Report No. 205 FEBRUARY 2008) has been submitted to the Minister of Law and Justice by the Law Commission.

But for a general definition we can say that an early marriage is one that takes place before the legal age of 18 years for girls and 21 years for boys.

Despite there being laws to prevent early marriage, it is a troubling fact that in our country marriages are still taking place at relatively early ages and that teenage pregnancy rate is also high. The CMRA law remains ineffective for a variety of reasons. In a study by UNICEF in 2001 it was found that the number of prosecutions did not exceed 89 in any one year. According to the National Crime Bureau Records 2005, 122 incidences were reported in the country under the Child Marriage Restraint Act in 2005, compared to the 93 cases that were reported in 2004. These statistics are obviously not an accurate reflection of the number of cases of child marriage which are occurring in the country.
Most cases of child marriage are not being reported and/or being ignored by the police and government authorities. Even from the reported 122 cases, only 45 resulted in conviction.

We can see the magnitude of this from the data collected by the National Family Health Survey (NFHS) that is done by the Ministry of Health and Family Welfare (MoHFW).

**Activity 1**

Regularly scan newspaper and collect stories relating to early marriage for one month. Discuss the cases with the colleagues and find out the causes leading to early marriage.

### 3.2.1 NFHS data for Early Marriage and Teenage Pregnancy

NFHS III data shows the following facts:

- 45% of women in the age group of 20-24 years were married before the minimum legal age of 18.
- 16% of the women interviewed within the age of 15-19 years were already mothers or pregnant at the time of the NFHS survey.

According to UNICEF’s “State of the World’s Children-2009” report, 47% of India’s women aged 20-24 were married before the legal age of 18, with 56% in rural areas. The report also showed that 40% of the world’s child marriages occur in India.
Though, fertility in 15-19 age group is decreasing, still, substantial proportion of teenagers have begun childbearing.

- 12% of women 15-19 are already mothers
- 4% of women 15-19 are pregnant with their first child
- In total, 16% women 15-19 have begun childbearing

NFHS-3, India, 2005-06

In 2006 the Hindustan Times reported that 57% of girls in India are married off before they are 18 as per the International Centre for Research on Women. As can be seen from the above data, nearly half the women in our country are still getting married at an early age and a large number of them become mothers before their bodies and brains are fully grown. It is a serious issue and needs to be addressed urgently.

3.2.2 NFHS data for Maternal Mortality Ratio (MMR) and Infant Mortality Rate (IMR)

The WHO estimates that the risk of death following pregnancy is double that for girls aged 15-19 as compared with those aged 20-24 years. The MMR (Maternal Mortality Ratio) can be five times higher for girls aged 10-14 years as compared with women aged about 20 years.

IMR (Infant Mortality Rate) is 77 if the mother’s age is <20 years, and falls to 50 in a mother who is 20-29 years of age.

Perinatal mortality is also very high for very young mothers (67) and for first pregnancies (66).

Table 3.2: Maternal Mortality Ratios (MMR) in Asia: (Maternal deaths per 100,000 live births.)

<table>
<thead>
<tr>
<th>Country</th>
<th>Sri Lanka</th>
<th>China</th>
<th>Thailand</th>
<th>Pakistan</th>
<th>Indonesia</th>
<th>India</th>
<th>Bangladesh</th>
<th>Nepal</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>30</td>
<td>115</td>
<td>200</td>
<td>340</td>
<td>390</td>
<td>437</td>
<td>850</td>
<td>1500</td>
</tr>
</tbody>
</table>


Although the Infant Mortality Rate (IMR) in India has decreased from 146 per 1000 births in 1951 to 72 per 1000 births (1997), we still need to improve it further.

Fig. 3.2: Infant mortality rate in Asia

(Deaths before 1 year of age per 1000 live births.) (Source : NHFS – 3)
The above information makes it very clear that the risk to life becomes very high if a young girl becomes pregnant. Even the survival of the newborn is at risk. These factors affect us as a country and as a society. No society that wishes to progress can afford such young deaths. The adolescent population of any country is its strength and future. If the current adult generation cannot look after its future, then there can be no progress.

3.3 CAUSES FOR EARLY MARRIAGE

Look around you and in your own family. What was your grandmother’s age when she got married? How old was your grandfather? You will find that they got married very early – perhaps when they did not even understand what ‘being married’ means. The government realized the ill effects of this and made laws that would reduce the incidence of early marriages. You have read about the Child Marriage Restraint Act in section 3.2. The phenomenon of child marriage can be attributed to a variety of reasons.

- The chief amongst these reasons is poverty and culture, tradition and values based on patriarchal norms.

- The marriage of a minor girl often takes place because of the poverty and indebtedness of her family. Dowry becomes an additional reason, which weighs even more heavily on poorer families. The general demand for younger brides also creates an incentive for these families to marry the girl child as early as possible to avoid high dowry payments for older girls.

- The girl in our patriarchal set up is believed to be somebody else’s property and a burden. These beliefs lead parents to marry the girl child. In doing so, they are of course relieving themselves of the ‘burden’ of looking after the child.

- The girls are considered to be a liability as they are not seen as individuals who can contribute productively to the family. Unfortunately, the patriarchal mindset is so strong that the girl has no say in decision making.

- Texts like Manu Smriti which state that the father or the brother, who has not married off his daughter or the sister who has attained puberty will go to hell are sometimes quoted to justify child marriage.

- Child marriages are also an easy way out for parents who want their daughters to obey and accept their choice of a husband for them.

- There is also a belief that child marriage is a protection for the girls against unwanted masculine attention or promiscuity. In a society which puts a high premium on the patriarchal values of virginity and chastity of girls, girls are married off as soon as possible.

- Furthermore securing the girl economically and socially for the future has been put forth as a reason for early marriage.

- The institution of marriage in communities or societies can be used to serve or strengthen economic and social ties between different families and even communities. Also a young girl may be offered to a family in order to improve the financial and social standing of the girl’s family.
Other reasons that have been listed for the high prevalence of child marriages in India are lack of education and knowledge, shortcomings in the law, and the lack of will and action on part of the administration.

### Activity 2

Organize a Role play on the theme of early marriage and discuss the causes for early marriage.

### Check Your Progress 1

a) What problems do the data collected by the NFHS, UNICEF point to? What are the effects of these problems on our society?

b) What factors are responsible for early marriages in our country?

c) What is the legal age of marriage in our country?

### 3.4 IMPACT (ILL EFFECTS) OF EARLY MARRIAGE

Over 50 per cent of girls marry below the age of 18, the minimum legal age of marriage, resulting in a typical reproductive pattern of “too early, too frequent, too many”. Around 33 per cent births occur at intervals of less than 24 months, which also results in high Infant Mortality Rate (IMR). (NFHS III). Child Marriage stunts the growth and development, particularly of the girl child who is the more vulnerable partner. Child marriage results in child labour at home and young girls have very little decision making powers. Child marriage makes girls more vulnerable to domestic violence and sexual abuse. It also deprives the girl child of her right to obtain education and live a life of freedom and dignity.

In actuality, child marriage is a violation of human rights. Young married girls are a unique, though often invisible group. They required to perform heavy amounts of domestic work, under pressure to demonstrate fertility, and responsible for raising children while still children themselves, married girls and child mothers face constrained decision making and reduced life choices. Boys are also affected by child marriage but the issue impacts girls in far larger numbers and with more intensity.

Where a girl lives with a man and takes on the role of caregiver for him, the
assumption is often that she has become an adult woman, even if she has not yet reached the age of 18.

- Young brides face the risk of sexual and reproductive ill health because of their exposure to early sexual activity and pregnancy.
- Complications and mortality are common during childbirth for young pregnant girls.
- Girls who come from poor backgrounds and who are often married at an early age have little or no access to health care services.
- Risks associated with young pregnancy and childbearing include an increased risk of premature labour, complications during delivery, low birth-weight, and a higher chance that the newborn will not survive.
- Young mothers under age 15 are five times more likely to die than women in their twenties due to complications of pregnancy.

Young brides who run away from early marriages may end up as sex workers or eventually resort to use sex work as a way of earning additional income. Young brides also run the risk of catching diseases from their respective spouses, as older husbands often engage in sexual relations with other women outside the marriage. Young married girls do not have bargaining power in the marriage and therefore cannot negotiate safe sex and are deemed vulnerable. It has also been found that young girls are physiologically more prone to contracting HIV/AIDS, as her vagina is not well lined with protective cells and her cervix may be more easily eroded. As husbands are often much older than their brides, girl brides are likely to be widowed at an early age. A child bride who is widowed can suffer discrimination including loss of status and they are often denied property rights, and other rights. Child widows have little or no education or other skills to be able to take care of themselves. The impact to child marriage can be summarized as follows:

### 3.4.1 Family Problems

- The young bride is burdened with all the domestic work
- Domestic violence starting with dowry
- Unequal power dynamics
- Child widows
- Running away from a failed marriage and entering prostitution to support themselves
- Economic burden on the family due to health problems.

### 3.4.2 Health Problems

- Stunted growth and development of girls
- Early pregnancy and childbirth
- Sexual ill health
- No access to healthcare facilities
- Higher infant and maternal mortality and morbidity
- Increased risks of STIs and HIV
- Risk of infertility
3.4.3 **Education and Career Problems**
- Discontinuation of education due to responsibility of household chores
- Reduced career options
- Reduced employment opportunities
- Overdependence on spouse and lack of confidence hampers her ability to become economically independent.

3.4.4 **Emotional Problems**
- Loss of adolescence
- Loss of freedom
- Low or no decision making powers
- Sexual abuse
- Social isolation
- Pressure to demonstrate fertility
- Hampered social and personal development
- Psychosocial effects of patriarchal exogamy
- Harassment from in-laws and spouse
- Dependence on spouse
- Poor development of life skills.

**Activity 3**
Identify a case of early marriage from your locality and prepare study highlighting the problems involved in it. Discuss with your colleagues on the findings of the study.

3.5 **CAUSES OF TEENAGE PREGNANCY**

Now we may discuss about teenage pregnancy.

There are a number of reasons that lead to an adolescent pregnancy. Let us divide them into the following factors:

3.5.1 **Biological Factors**
These include causes related to the body. The most important factor here is the decrease in age of menarche (start of the menstrual period) thereby increasing the fertile period in a girl’s life.

3.5.2 **Social and Cultural Factors**
- Early marriage continues to be one of the biggest social ills leading to a teenage pregnancy. A young married girl is under social pressure from family members to prove her fertility. The access and availability of contraceptives is poor.
- Adolescents are very vulnerable and do not have sufficient negotiation skills. They are often subjected to sexual assaults. These can lead to a pregnancy. Teenage pregnancy by age is shown in figure 3.1.
Proportion of women who are pregnant or already mothers

Age
15 16 17 18 19
3 6 13 24 36

Fig. 3.3: Teenage Fertility by age

- Poverty often forces young girls into prostitution and this can result in an unwanted early pregnancy.
- Increased media exposure mixed with natural curiosity, often leads to experimentation and this may result in an unwanted pregnancy.
- Peer pressure is another factor leading to young people becoming sexually active at an earlier age.
- The use of alcohol and other drugs is associated with unprotected sexual activity and a possible pregnancy.

3.5.3 Service Delivery Factors

Most adolescents in our society do not have any access to safe reproductive and sexual health services. There is a lack of correct information and difficulty in accessing these services. As a result, they do not know about safe sex practices and are unaware of the risks that they are exposing themselves to. Services for adolescents should be:
- Available – in the community
- Accessible – located at a place that can be reached easily and timings that suit the adolescent
- Approachable – comfort levels should be high
- Acceptable – services should be adolescent friendly
- Affordable – cost should be affordable

Check Your Progress 2

a) What are the ill effects of an early marriage?

b) Why do teenage pregnancies occur?
Adolescence is a period of growth, during which all the organs and the body are developing and growing. Adolescent pregnancy therefore increases the burden on the body, with a baby fighting for the nutrients needed by the mother. Adolescent pregnancy and breastfeeding puts both the mother and the child at higher risks of ill health; especially, if the mother is stunted or undernourished. Early pregnancy exposes mother and the baby to risk owing to the potential competition for dietary energy and nutrients. Additionally, the young mother is physiologically immature. Because adolescent girls (below 18 years) have not reached physical maturity, and their pelvis is not fully developed, pregnancy could lead to problems in labour, which in turn leads to complications such as bleeding, and even death for both the mother and child if the mother does not get proper medical care. Maternal death in girls under 15 is much higher (2-5 times) than in women above 20 (WHO).

Young adolescent girls, especially those below 15 years, are also likely to experience premature labour, spontaneous abortion and still-births than older adolescents and women. Pregnancy-related illnesses such as hypertension and anaemia are also more common among adolescents than among adult women. Pregnant adolescents with HIV are at particularly high nutritional risk. Their babies may also be at risk of HIV through maternal to child transmission (MTCT). The child of an adolescent girl has a higher risk of being low birth weight which in turns predisposes them to higher infant death.

It is estimated that 25% of women have their first child before the age of 20 years. Adolescent girls often enter pregnancy with a lower nutritional status and are therefore, at increased risk of nutritional deficiencies.

Young mothers are also likely to have a higher incidence of poor childcare and poor child feeding practices and they are less likely to breastfeed their babies. Thus the intergenerational consequences of poor nutrition are perpetuated.

### 3.6.1 Unsafe Abortion

Adolescents often resort to abortion at a later stage of pregnancy. Unsafe abortion could result in complications such as bleeding, infection, injuries, infertility, and death. Abortion also has psychological consequences such as depression. Adolescent abortions are estimated globally at between 1 million and 4.4 million per year. Most of them are performed illegally or under hazardous circumstances. You will be reading more about unsafe abortions and their impact in later chapters.

An adolescent pregnancy carries a number of risks to the health of the mother as well as the baby. However, the impact on an unmarried adolescent is different from a married adolescent. Let us see how these are similar and what are the differences.

### 3.6.2 Risks Associated with an Adolescent Pregnancy

Early pregnancy has a major long-term impact on the girl’s life.

- Pregnancy and childbirth carry more risks in adolescents than in adults because the adolescent girl is not yet physically and emotionally mature for motherhood. The risks are high throughout the antenatal period, labour, childbirth and the postpartum period. A young girl’s hips (pelvis) are not as wide as a mature
woman’s pelvis. The labour might be a difficult one. If left unattended it can result in obstructed labour with loss of lives.

- **Anaemia** is very common in pregnant women and is more common in adolescents. Health problems – hard on girls body especially if the pregnant girls has not achieved her own growth. The growing baby needs a lot of energy and nutrients, which it will take from the pregnant girl even if she herself needs them.

- **Babies** born to adolescent mothers have a higher risk of being of low birth weight and born prematurely. This makes them predisposed to higher morbidity and mortality.

- Pregnancy and the **responsibility** of child rearing could reduce the ability of the girl to continue with her education and with exploring employment opportunities. Both girls and boys may not have the opportunity to finish school, thus putting them at a disadvantage.

- There is higher risk of the woman **dying** due to pregnancy related causes if pregnancy occurs in young age. The risk is 3-5 times for a woman below 15 years than in a woman of more than 20 years.

### 3.6.3 Unmarried Adolescent

In addition to the above mentioned problems, the unmarried adolescent is exposed to more risks.

**a) Emotional and Social Problem**

The **social stigma** attached with becoming an unwed mother is a great emotional trauma for a young adolescent. She is likely to suffer from low self-esteem, guilt and depression. She may even contemplate suicide at such a time to save herself and her family from disgrace. Unwanted pregnancy in unmarried girls may stigmatize them. The burden of the pregnancy becomes the sole responsibility of the adolescent girl as the father will usually not even try to accept responsibility.

**b) Family Problems**

A pregnant unmarried teenager can be the source of conflicts and fights in the family. The parents may blame each other for not having provided enough information to the girl or may even throw her out of the house. At a time when she needs more support, the young adolescent may find herself all alone.

**c) Health Problems**

These are the same as for the married adolescent but an additional problem of an unsafe abortion arises here and with that all the associated complications. Death may occur either due to the delivery or due to an illegal and unsafe abortion. The health risks are therefore much more than for the married adolescent. The chances of this adolescent receiving any additional nutrition or any other antenatal care is miniscule and so the outcome is definitely worse.

**d) Education Problems**

An unexpected pregnancy puts an end to the educational future of the girl. She may get expelled from school due to the associated stigma or she may drop out
herself as she is unable to face anyone. Inability to complete her education leads to a lack of career opportunities for the girl.

**Case Study I**

Ria was 16 years old and in class 11. She had many friends, both boys and girls, at school. Her best friend, Payal, had a boyfriend since class 10 and she used to encouraged Ria to go out with someone. Ria’s friend Rishabh came to Ria one day and told her that he liked her very much and wanted to go out on a date with her. They went for a movie and Ria realized that she also liked Rishabh very much. Six months later, they were still a ‘couple’. One day, Rishabh and Ria were watching an adult movie. After they came out of the theatre, Rishabh was a bit rude to Ria and they had a small fight. The next time when they met, Ria asked Rishabh what was wrong and he replied that he was upset that they were not as close as he wanted them to be. He said that he wanted to take their relationship to the ‘next level’. At first, Ria was very confused. She didn’t think she was ready to take such a big step, but then Rishabh told her that he loved her, and that if she loved him, then she would need to prove it to him. Ria believed that she loved Rishabh and decided to take the risk. A month later, Ria realized that she was pregnant. She remembered what she had read and heard about using protection, and that she and Rishabh hadn’t used any protection. She was very scared, and didn’t know whom to go to or what to do.

a) What problems is Ria likely to suffer?

b) What options are available to her?

c) How could she have avoided getting into this situation? Are such situations common in adolescents?

d) As a teacher, what could your role be in such a scenario?

### 3.6.4 Intergenerational Effect

The [Population Policy Manual](#) from MHFW studied the effects of the adolescent pregnancy on the already malnourished mother and her baby. It concludes that if the mother’s health can be improved, the baby’s health improves naturally – the **intergenerational effect**.

When an undernourished adolescent girl, gets pregnant, she gives birth to a stunted, low birth weight baby. If this is a female child, she will again not receive her fair share of nutrition due to gender discrimination and will remain stunted. Early marriage followed by an early pregnancy will once again lead to the birth of another stunted, malnourished generation. This vicious cycle of malnourishment just goes on and on.

**Check Your Progress 3**

a) What are the major risks associated with teenage pregnancy?

................................................................................................................
................................................................................................................
................................................................................................................
.............................................................................................................
3.7 ROLE OF TEACHERS

Your role as a teacher is very important in handling both the issues i.e. early marriage and teenage pregnancy that have been discussed in this Unit.

First and foremost is that you have to make adolescent aware and informed regarding ill effects of early marriage and teenage pregnancy.

**Awareness**

Very often, marriages take place at an early age because there is a lack of information about the legal and health aspects. As a teacher, you can be the source of this information. If more and more young adolescents are made aware of their rights, and helped in developing life skills, they will be able to make informed decisions and negotiate with their parents. The adolescents also need to know the risks associated with a pregnancy so that they do not allow this to happen to them. **It is important for adolescent boys to understand the serious consequences of early pregnancy for both the girl and the boy.**

It is also important to know ways in which these ills can be prevented.

1) **Delay marriage:** In our country the law provides that minimum age of marriage is 18 years for girls and 21 years for boys. Raise awareness about this, make the adolescents realize that they have the right to say ‘No’ to an early marriage.

2) **If someone does get married at a younger age:** The first pregnancy should be delayed by using suitable family planning methods till at least 20 years of age.

3) **Minimum gap** between two pregnancies should be three years.

4) It is best that people have **1 or 2 children** (boy or girl).

5) Promote **Life Skills** in the adolescents to prevent an early pregnancy.

**Care and Support**

Even the best information may at times not be able to prevent an early marriage or a teen pregnancy. In such a situation, your role as a teacher becomes even more important because here, the adolescent will require all the care and support that she can get. As a teacher you are well suited to provide this. Even if an early marriage does take place, it is possible to delay the first pregnancy and to space out the others. If a pregnancy does occur, you can help the young mother take proper care of herself by ensuring adequate antenatal visits so that the outcome of the pregnancy is not as poor as would be expected.

Check Your Progress 4

a) What is the role of the teacher in handling the issue of early marriage and teen pregnancy?

............................................................................................................................................................

............................................................................................................................................................

............................................................................................................................................................

............................................................................................................................................................
3.8 LET US SUM UP

In this unit you have learnt about the magnitude of early marriage and the ongoing impact of ‘early marriage and teenage pregnancy, pregnancy’. The risks associated with a teenage pregnancy and the consequences of this on the health of the young mother and newborn have also been discussed. You have been made aware of your role in preventing these situations from arising in adolescents.

Marriage should take place only after a girl and boy have attained the minimum legal ages, are emotionally ready and financially capable of starting a family. The birth of the first child should take place only when the parents are ready to accept the responsibility of taking care of the newborn. Pregnancy occurring in an adolescent has adverse effects on the health of both the mother as well as the baby and both face the risk of death. As a teacher you can make adolescents sensitive regarding this issue.

3.9 KEY WORDS

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>NFHS</td>
<td>National Family Health Survey</td>
</tr>
<tr>
<td>STI</td>
<td>Sexually Transmitted Infections</td>
</tr>
<tr>
<td>HIV</td>
<td>Human Immunodeficiency Virus</td>
</tr>
<tr>
<td>MoHFW</td>
<td>Ministry of Health and Family Welfare</td>
</tr>
<tr>
<td>Perinatal</td>
<td>the period occurring “around the time of birth”, specifically from 22 completed weeks (154 days) of pregnancy (the time when birth weight is normally 500 g) to 7 completed days after birth.</td>
</tr>
<tr>
<td>Neonate</td>
<td>A human infant less than a month old</td>
</tr>
<tr>
<td>Morbidity</td>
<td>State of being unhealthy or diseased</td>
</tr>
<tr>
<td>Mortality</td>
<td>Refers to death</td>
</tr>
</tbody>
</table>

3.10 ANSWERS TO CHECK YOUR PROGRESS

Check Your Progress 1

a) Data collected by these agencies points to the magnitude of the problem of early marriage and teenage pregnancy in India. These problems are leading to high MMR and IMR. The more young deaths there are, the slower progress our country makes.

b) There are various reasons why parents get their children married early. A girl child is considered a burden, lesser dowry to be paid for a younger girl, protection of the girl specially during times of conflict and war, social customs and religious beliefs etc.

c) 18 years for girls and 21 years for boys
Check Your Progress 2

a) Early marriage leads to early pregnancy, reduced education and career opportunities, loss of freedom, financial burden etc.

b) Teenage pregnancies occur due to early marriage, early initiation into sexual activity by the unmarried adolescent due to media exposure, peer pressure, unprotected sexual encounter under influence of alcohol or drugs, as a result of sexual assault etc.

Check Your Progress 3

a) A teenage pregnancy is associated with a number of health risks related to nutritional requirements, growth of the mother, delivery of the baby and carries the risk of death for both the mother as well as the baby. All indicators point to higher frequency of deaths for both mother and baby if the age of the mother is less than 20 years.

b) An unmarried adolescent faces more risks because she has to bear the burden of a social stigma that may push her towards suicide or even an unsafe abortion with all its associated risks. There is no one who is willing to look after the unmarried pregnant adolescent as parents may throw her out of the house and the father of the baby is not willing to take responsibility.

Check Your Progress 4

a) The role of a teacher is in spreading awareness and giving correct information to the adolescents and creating a safe and supportive environment for them.

Answers of Case Study 1

a) Ria is an unmarried pregnant adolescent. She faces the problem of tackling a pregnancy without any information and help. If someone else comes to know about this she may face social rejection. She will also go through the emotional trauma of making the choice of whether to abort the baby or raise it. Her relationship with Rishabh will be tested as he may refuse to take any responsibility.

b) Ria can inform an elder person about the situation and seek help from a proper facility for a safe abortion. She can take care not to get into a similar situation again. Ria can also approach her parents and get married to Rishabh. He is equally responsible for this pregnancy.

If she chooses to keep the baby without getting married, she will probably be disowned by her family or her society.

c) She could have avoided this situation by practicing self-control and abstinence. Otherwise, she could have used any of the various contraceptives such as birth control pills or condoms.

d) As a teacher, it is your responsibility to educate your students of the dangers of unsafe sex and on the use of various contraceptives. You should also be supportive of any students who are in any uncomfortable situations and should help them make the right decisions.
3.11 REFERENCES

- Course Manual for Adolescent health by IAP – ITPAH (Indian Academy of Paediatrics International Training Programme on Adolescent Health)
- Population Policy Manual from MoHFW

Web resources:

Merriam Webster online dictionary

http://lawcommissionofindia.nic.in/

http://en.wikipedia.org/wiki/Pregnancy