

Nursing Students' perception about the Risk Factors Associated With Early Marriage

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Abstract

Background: Despite the alarming trend of increased marriage age in many societies, early marriage is still a serious issue and a form of violence against girls. **Aim:** Assess nursing students' perception about the risk factors associated with early marriage. **Setting:** Nasser Institute Nursing School, Cairo, Egypt. **Sample:** Purposive sampling was used in this study, it includes (120) students all presented in Nasser Institute Nursing School Cairo, Egypt, their age under 18 yrs. **Tools:** Self administered questionnaire: It designed by the investigator in simple Arabic language to collect the following data: Socio-demographic data of the nursing students, nurses' knowledge as regard to early marriage and reproductive health and nursing students' perception of adverse physical, psychological and social health consequences of early marriage. **Results:** More than half of the nursing students were between age 16-17 years old with mean age 14.6 ± 1.2 , as regarding ranking on the family, about half of them were ranking as a second child. Also, more than half of them were not working. Regarding social status, more than two thirds of them were not engaged. More than half of the nursing students were live in a rural area. More than two thirds of the nursing students were had enough monthly income. More than two thirds of the studied nursing students had unsatisfied knowledge about early marriage and reproductive health. Also, more than two thirds of them had negative perception regarding early marriage. **Conclusion:** There was a highly statistically significant relation between age, occupation and marital status of the nursing students and their knowledge regarding early marriage. Moreover, there were a highly statistically significant relation between nursing students' socio-demographic characteristics and their perception regarding early marriage. There is a positive correlation between knowledge and perception of the nursing students regarding early marriage. **Recommendations:** Further research studies are needed for ongoing assessment of students including large sample for generalization of results.

Key Words: Early marriage - Nursing students' perception.

Introduction:

A marriage is a legally recognized union between a man and a woman in which they are united sexually; cooperate economically, and may have children through birth or adoption. Throughout the literature reviews, early marriage is either one or both of the married couple being under the age of 18 years old or in high school (Vue, 2014). Marriage is a social activity entered into through a public act, religious or traditional ceremony and it reflects the purpose, character, and customs of the society in which it is found. It unites people in a special form of mutual dependence for the purpose of founding and maintaining a family (Adamu et al., 2016).

These days, the devastating impact of female child marriage continues to be ignored in the developing world. Millions of child brides, some only just past puberty, are denied access to health, education and economic opportunities. The majority of them are burdened with the roles and responsibilities of wives and mothers without adequate support, resources or capabilities. Students are either seen as an economic burden or valued as capital for their exchange value in terms of goods, money or livestock that is for economic and social reasons, controlling students' sexuality which is directly linked to family honor and status for strong social pressure on families to either conform or face ridicule, disapproval or family shame for traditional practices (Bayisenge, 2014).

Female child early marriage is a public health concern that violates international human rights laws and seriously compromises the development and health of individuals, households, community and countries. Female child marriage has a direct effect on realizing at least six of the Millennium Development Goals (MDGs) such as causes for poverty, denies to access education, against gender equality and empowerment, increase child mortality and maternal health problems. It has also a risk factor in the spread of HIV and other STIs and erodes the health and well-being of students and the overall welfare of communities (*Myers & Harvey, 2014*).

Among the factors for female child early marriage are socio – cultural, religious, economic security and dependency are some that contribute for the practices of female early child marriage: In many communities, child marriage is a long-standing tradition, since a delayed “ marriage would not be acceptable in the eyes of the community. Getting a daughter married early may be seen as a means of ensuring her and families safety, sexual abstinence and virginity are also considered important values that if not protected will affect the family honor. Moreover, in families where parents cannot provide daughters “ a safe space to live, child marriage is considered to be a protection from risks such as abuse than giving prioritizes for education (*Uncef, 2016*).

Forcing children, especially students, into early marriages can be physically, emotionally and socially harmful. It violates their rights to personal freedom and growth, curtails students' education, increase maternal and infant morbidity and mortality. Child marriage and lesser age of effective marriage create negative psychological impact on thinking of a student. She is in state of distress, anxiety and insecurity at time of consummation of marriage. If she does not get any emotional support from in-laws, it totally ruins her overall development and self esteem. Also, married students have limited social networks (*Narang & Vaishnav, 2017*).

Significance of the Study

Female child early marriage has numerous challenges both at global and regional level. It denied access to education and economic opportunities and has a big impact on the health of the child with its complex problem on maternal and child mortality. In the world 10 million students under the age of 18 marry each year that is around 833,333 a month 192,307 a week 27,397 a day 19 every minute or, around one student every three seconds (*Kibret et al., 2014*). In Egypt, 17% of students are married before their 18th birthday. While the rate of child marriage in Egypt is declining, religious and traditional ideals and customs have stalled this progress. Child marriage mainly affects students living in poorer rural areas and is on the rise in some locations, including Upper Egypt (*Students Not Brides, 2015*).

Therefore, assessment of nursing students' perception about the risk factors associated with early marriage is deemed important in improving quality of care.

Aim of the study

This study aimed to assess nursing students' perception about the risk factors associated with early marriage through the following:

- Assessing nursing students' knowledge regarding early marriage & reproductive health.
- Assessing nursing students' perception according to their socio-cultural factors.

Research question:

- 1) Is there a relation between nursing students' socio-demographic characteristics and their knowledge regarding early marriage?
- 2) Is there a relation between nursing students' perception and their socio-cultural factors?

Subjects and Methods

Research design: A descriptive research design has been utilized to conduct this study.

Setting: The study was conducted at Nasser Institute Nursing School, Cairo, Egypt.

Subjects: Purposive sampling was used in this study, it includes (120) students all presented in Nasser Institute Nursing School Cairo, Egypt, their age under 18 yrs.

Tools of data collection

Data collected through used the following tools:

The self administered questionnaire prepared and designed by the investigator after reviewing the recent related literatures, it consisted of 3 parts as follows:

- **Part 1:** Nursing students' socio-demographic characteristics, such as, age, sex, educational level of father and mother, occupation of father and mother, monthly income, family size ... etc (Q1-Q12).
- **Part 2:** Assess nursing students' knowledge regarding female reproductive system, early marriage, suitable age for marriage, meaning and causes concerned with early marriage. Total number of questions was (28) it was classified as the following:
 - Female reproductive system (Q13 – Q26)
 - Reproductive health (Q27 – Q36)
 - Early marriage (Q37 – Q43)
- **Part 3:** Assess nursing students' perception of adverse physical, psychological and social health consequences of early marriage and its' preventive procedures include physical health consequences such as physical health problems, social health consequence such as continuing conflict with spouse and domestic violence and psychological health consequences such as tension and stress (Q44-Q46).

Ethical considerations

Approval was obtained from ethical committee to conduct this study. The investigator explained the study aim in a simple and clear manner to be understood by eligible students. Verbal consent was obtained by each participant before collecting any data. Participants were informed about their right to withdraw from the study at any time without giving any reason. Data were considered confidential and not be used outside this study without parents approval.

Content and Face Validity and Reliability:

Content validity was ascertained by a group of the experts in field of community nursing to test its content validity and applicability, Reliability was don used test-retest (0.87).

Pilot study

A pilot study was carried out on 10% of the study subjects for testing clarity and applicability of the tools and necessary modifications was done. Pilot sample was excluded from the current study subjects.

Field work

To carry out the study, an approval was obtained from the director of Nasser Institute Nursing School Cairo, Egypt. A letter was issued to them from the Faculty of Nursing, Ain-Shams University, explaining the aim of the study in order to obtain their permission and cooperation. The investigator was available on 3days (Sunday, Monday& Tuesday) per week from 12AM to 2PM for 2 months in the previously mentioned place (class) for data collection till complete the sample.

Administrative design

An official letter requesting permission to conduct the study was submitted from the Dean of Faculty of Nursing, Ain Shams University to obtain permission from the director of Nasser Institute Nursing School, Cairo, Egypt, to collect the data of the study. The agreement of each relative was obtained after explaining the aim and nature of the study

Statistical design

The collected data was statistically analyzed and presented in tables and graphs, using appropriate reliable and valid statistical methods and tests.

Results:

Table (1): shows that, More than half of the studied nursing students (50.8 %) were between age16-17 years old with mean age 14.6±1.2, as regarding ranking on the family, about half of them (49.1%) were ranking as a second child. Also, more than half of them (50.8%) were not working. Regarding social status, more than two thirds of them (64.2%) were not engaged.

Table (2): indicates that, more than one third of the studied nurses (45.0 %) were live in nuclear family, one third of the studied nurses' mothers (30.0%) had technical education, more than one third of them (48.3%) were housewives, more than one quarter of the

studied nurses' fathers (26.7 %) had university education. Also, more than one third of them (40.8%) were working in private sector.

Figure (1): clarifies that, more than two thirds of the studied nurses (64.2%) had total unsatisfied knowledge about early marriage and reproductive health. Meanwhile, more than one third of the studied nurses (35.8%) had total satisfied knowledge about early marriage and reproductive health.

Figure (2): reveals that, more than two thirds of the studied nurses (72.5%) had negative perception regarding early marriage. Meanwhile, more than one quarter of the studied nurses (27.5%) had positive perception regarding early marriage.

Table (3): illustrates that, There were highly statistically significant relation between age, occupation and marital status of the nursing students and their knowledge regarding early marriage, ($p < 0.01$). Meanwhile, there were statistically insignificant relation between the level of education and ranking of the nursing students and their knowledge regarding early marriage ($p > 0.05$).

Table (4): shows that, there were a highly statistically significant relation between nursing students' socio-demographic characteristics and their perception regarding early marriage ($p < 0.01$).

Table (5): reveals that, there was a statistically significant positive correlation between knowledge and perception of the nursing students regarding early marriage ($r = 0.73$ & $p < 0.05$).

Table (1): Distribution of the studied nurses according to their socio-demographic characteristics (N=120).

| Items | No | % |
|---------------------------------------|----|----------------|
| Age | | |
| 16 years | 38 | 31.7 |
| 16 : 17 years | 61 | 50.8 |
| 17 : 18 years | 21 | 17.5 |
| Mean \pm SD | | 14.6 \pm 1.2 |
| Student arrangement | | |
| First | 29 | 24.2 |
| Second | 59 | 49.1 |
| Third | 32 | 26.7 |
| Occupation | | |
| Working | 33 | 27.5 |
| Not working | 61 | 50.8 |
| Working and studying at the same time | 26 | 21.7 |
| Engaged status | | |
| Engaged | 43 | 35.8 |
| Not engaged | 77 | 64.2 |

Table (2): Distribution of the studied sample according to their family characteristic (N=120).

| Items | No | % |
|---------------------------------|----|------|
| Family type | | |
| Nuclear | 54 | 45.0 |
| Extent | 34 | 28.3 |
| Single | 32 | 26.7 |
| Mother educational level | | |
| Illiterate | 22 | 18.3 |
| Basic | 25 | 20.8 |
| Secondary | 26 | 21.7 |
| Technical | 36 | 30.0 |
| University | 11 | 9.2 |
| Master | 10 | 8.3 |
| Mother occupation | | |
| Governmental employee | 38 | 31.7 |
| Private employee | 24 | 20.0 |
| Housewife | 58 | 48.3 |
| Father educational level | | |
| Illiterate | 14 | 11.7 |
| Basic | 19 | 15.8 |
| Secondary | 24 | 20.0 |
| Technical | 22 | 18.3 |
| University | 32 | 26.7 |
| Master | 9 | 7.5 |
| Father occupation | | |
| Governmental employee | 39 | 32.5 |
| Private employee | 49 | 40.8 |
| Not working | 32 | 26.7 |

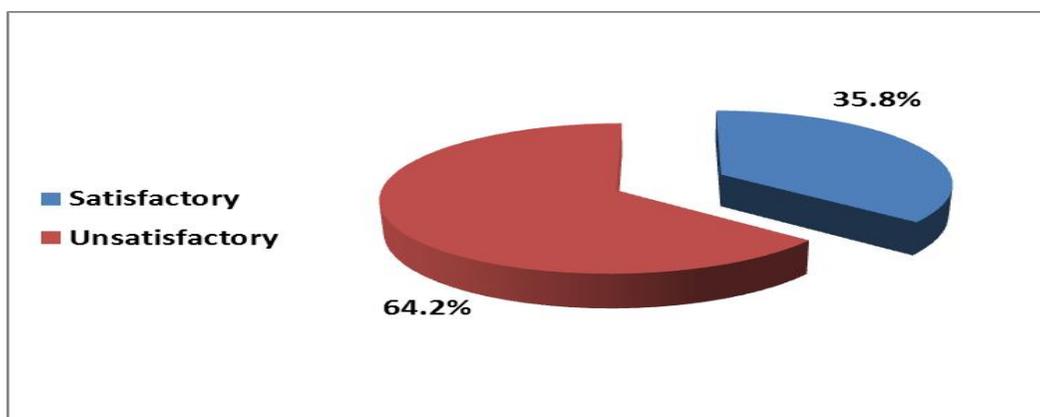


Figure (1): Distribution of the studied sample according to their knowledge about early marriage (N=120).

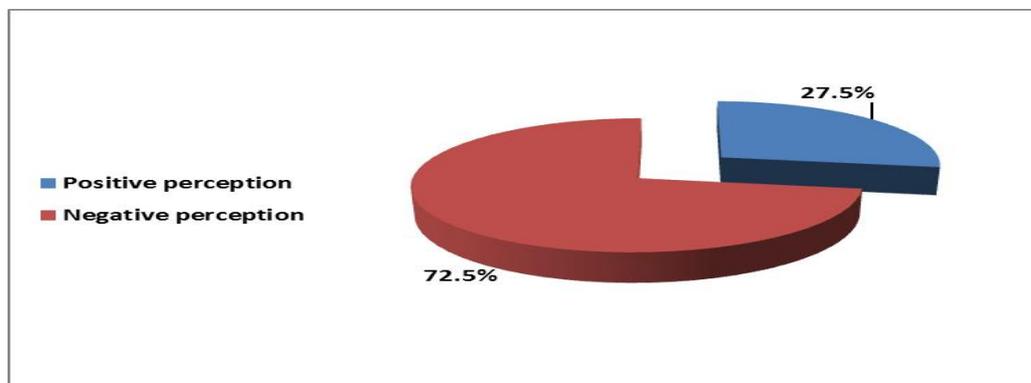


Figure (2): Distribution of the studied sample according to their total perception score regarding consequences of early marriage (N=120)

Table (3): Relations between nurse student's socio-demographic characteristics and their knowledge regarding early marriage.

| Items | Level of knowledge | | | | X ² | P Value |
|---------------------------------------|---------------------|------|-----------------------|------|----------------|-----------------|
| | Satisfactory (n=43) | | Unsatisfactory (n=77) | | | |
| | No | % | No | % | | |
| Age | | | | | | |
| 16 years | 8 | 6.7 | 30 | 25.0 | | |
| 16 : 17 years | 15 | 12.5 | 46 | 38.2 | 39.19 | **0.0001 |
| 17 : 18 years | 20 | 20.8 | 1 | 0.8 | | |
| Level of education | | | | | | |
| Diploma | 15 | 12.5 | 30 | 25.0 | | |
| technical institute | 28 | 23.3 | 47 | 39.2 | 0.06 | 0.81 |
| Student ranking | | | | | | |
| First | 6 | 5.0 | 23 | 19.2 | | |
| Second | 17 | 14.2 | 34 | 28.3 | 3.03 | 0.39 |
| Third | 13 | 10.8 | 19 | 15.8 | | |
| Fourth | 2 | 1.7 | 6 | 5.0 | | |
| Occupation | | | | | | |
| Not working | 18 | 15.0 | 66 | 55.0 | 23.22 | **0.0001 |
| Working and studying at the same time | 25 | 20.8 | 11 | 9.2 | | |
| Marital status | | | | | | |
| Engaged | 31 | 25.8 | 22 | 18.4 | 10.43 | **0.001 |
| Not engaged | 12 | 10.0 | 55 | 45.8 | | |

(**) High statistically significant at $p < 0.01$

Table (4): Relations between nurse student's socio-demographic characteristics and their perception regarding early marriage.

| Items | Level of perception | | | | X2 | P Value |
|-----------------------------------|---------------------|------|------------------|------|-------|-----------------|
| | Positive (n=33) | | Negative (n= 87) | | | |
| | No | % | No | % | | |
| Age | | | | | | |
| 16 years | 1 | 0.8 | 37 | 30.8 | 61.99 | **0.0001 |
| 16 : 17 years | 12 | 10.0 | 49 | 40.8 | | |
| 17 : 18 years | 20 | 20.8 | 1 | 0.8 | | |
| Level of education | | | | | | |
| Diploma | 3 | 2.5 | 42 | 35.0 | 14.05 | **0.0002 |
| Technical institute | 30 | 25.0 | 45 | 37.5 | | |
| Student arrangement | | | | | | |
| First | 3 | 2.5 | 26 | 21.7 | 29.20 | **0.0001 |
| Second | 7 | 5.8 | 44 | 36.7 | | |
| Third | 20 | 20.8 | 12 | 10.0 | | |
| Fourth | 3 | 2.5 | 5 | 4.2 | | |
| Occupation | | | | | | |
| Not working | 7 | 5.8 | 77 | 64.2 | 52.23 | **0.0001 |
| Working and studying in same time | 26 | 21.7 | 10 | 8.3 | | |
| Marital status | | | | | | |
| Engaged | 29 | 24.2 | 14 | 11.7 | 50.55 | **0.0001 |
| Not engaged | 4 | 3.3 | 73 | 60.8 | | |

(**) High statistically significant at $p < 0.01$

Table (5): Correlation between knowledge and perception of the nurse students regarding early marriage.

| Item | Knowledge | |
|-------------------|-----------|--------------|
| | r | P Value |
| Perception | 0.73 | *0.04 |

(*) Statistically significant at $p < 0.05$

Discussion

The present study results revealed that, more than half of the studied nurses were between age 16-17 years old with mean age 14.6 ± 1.2 . Concerning social status, more than two thirds of them were not engaged (**Table 1**).

These findings were in accordance with *İşgüven et al. (2015)* who found that, in a study on Educational Needs of Adolescents Regarding Normal Puberty and Menstrual Patterns, Turkey, the mean age of students was 14.7 ± 2.0 . Also, these findings were in the same line with *Mattebo et al. (2015)* who stated that, in a study on Knowledge and Perceptions regarding Sexual and Reproductive Health among high school students in Kathmandu, Nepal, the most of the students were not engaged.

The current study results clarified that, more than one third of the studied nurses were live in nuclear family, one third of the nurses' mothers had technical education and more than one third of them were housewife. More than one quarter of the nurses' fathers had university education and more than one third of them were working in private sector (**Table 2**).

These findings were consistent with *Yazıcı et al. (2014)* who revealed that, in a study on The Level of Knowledge and Behavior of Adolescent Male and Female Students in Turkey on the Matter of Reproductive Health, the majority of students lived with their nuclear families. Meanwhile, these findings contradicted with *İşgüven et al. (2015)* who found that, more than two thirds of students' mothers and fathers were primary school

graduates. Also, these findings disagreed with *Adamu et al. (2017)* who clarified that, in a study on Perception and Factors Influencing Early Marriage in a Semi-Urban Community of Sokoto State, North-West Nigeria, all parents had a business.

The current study results revealed that, more than two thirds of the studied nurses had unsatisfied knowledge about early marriage and reproductive health (**Figure 1**). These findings were supported by *Kibret et al. (2014)* who confirmed that, in a study on Perceptions and Practices of Early marriage of female child from 2009 to 2013 in Sinane district Northwest Ethiopia, knowledge about early marriage and reproductive health was low.

The present study results clarified that, more than two thirds of the studied nurses had negative perception regarding early marriage (**Figure 2**). This finding was consistent with *Mardi et al. (2018)* who indicated that, in a study on Perceptions of teenage women about marriage in adolescence in an Iranian setting: A qualitative study, Iran, students had negative perception regarding early marriage. Also, *UNICEF, (2014)* confirmed that, the loss of adolescence, the forced sexual relations, and the denial of freedom and personal development attendant on early marriage have profound physical and psychosocial and emotional consequences. The impact can be subtle and insidious and the damage hard to assess.

In investigator's point of view, negative perception of student nurses regarding early marriage could be explained as early marriage destroyed their dreams and limited their capabilities and decision-making power.

There are highly statistically significant differences between age, occupation, and marital status of the students nurses and their knowledge regarding early marriage whereas, satisfactory knowledge is more prevalent in the age of $17 \leq 18$ years, nurses who working and studying at the same time, and engaged ones (**Table 3**) (**Research question no1**). These findings were consistent with *Zhang et al. (2014)* who clarified that, knowledge scores

were statistically significant between different socio-demographic factors.

There are highly statistically significant differences between students nurses' socio-demographic characteristics and their perception regarding early marriage whereas, positive perception is more prevalent in the age of $17 \leq 18$ years, nurses who had technical education, third in ranking in the family, nurses who working and studying at the same time, and engaged (**Table 4**) (**Research question no2**). These findings were in accordance with *Kibret et al. (2014)* who illustrated that, statistically significant relation were found between participants' perception and socio-demographic data.

There is a statistically significant positive correlation between knowledge and perception of the student nurses regarding early marriage (**Table 5**). This finding was supported by *Nasrullah et al. (2014)* who confirmed that, in a study on Knowledge and attitude towards child marriage practice among women married as children-a qualitative study in urban slums of Lahore, Pakistan, statistically significant positive correlation between knowledge and perception of the participants regarding early marriage were found.

Conclusion

On light of the current study results, it can be concluded that, more than two thirds of the studied nursing students had unsatisfied knowledge about early marriage and reproductive health. Also, more than two thirds of them had negative perception regarding early marriage. There were a highly statistically significant relation between age, occupation and marital status of the nursing students and their knowledge regarding early marriage. Moreover, there were a highly statistically significant relation between nursing students' socio-demographic characteristics and their perception regarding early marriage. There is a positive correlation between knowledge and perception of the nurse's student regarding early marriage.

Recommendations

- ✓ Educational programs should be conducted for students to increase their knowledge and perception regarding the risk associated with early marriage.
- ✓ There is need to improve the accessibility of reproductive health services through strengthening of services provided at health clinics.
- ✓ Educational programs should be developed for students and their parents to increase students' perception regarding negative consequences of early marriage.
- ✓ Further research studies are needed for ongoing assessment of students including large sample for generalization of results.

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