

Causes of Child Marriage and its Effects on Maternal Health of Teenage Mothers in Chereponi District, Ghana

John N-yelbi., Nyuiemedi Agordzo Edoh-Torgah

Department of Counselling Psychology, Faculty of Applied Behavioural Sciences in Education,
University of Education, Winneba Post Office. Box 25 Winneba, West Africa.

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ABSTRACT

The purpose of the study was to investigate child marriage and its effects on maternal health of teenage mothers in the Chereponi District in the North East Region of Ghana. The study used a quantitative approach underpinned by descriptive survey design. A sample size of 150 was selected using purposive sampling technique. Child marriage questionnaire, psychological general well-being and a demographic questionnaire were used to collect data. Data was analysed using frequency, percentage, mean and standard deviation using SPSS version 25.0. Findings revealed that child marriage is caused by poverty and economic demands, the protection of girls' sexuality as a means of strengthening family relations, socio-cultural and religious factors, and preventing premarital sex. The study also found that child marriage has profound impact on the maternal health of teenage mothers. Again, girls should be oriented to take their studies seriously and report any early signs of child marriage to Domestic Violence and Victims Support Unit and Social welfare for prompt action. The study recommended that there should stringed measures where perpetrators of child marriage will be sanctioned by law. The study further recommended that girls should be given enough psychoeducation on the effects of child marriage. Finally, it was again recommended that counsellors and psychologists should provide counselling to girls to be self-assertive and provide economic empowerment strategies to make girls less dependent and vulnerable.

Keywords: Child marriage, maternal health, psychological health, teenage mothers

INTRODUCTION

Child marriage is the legal or informal relationship in which a girl lives with a spouse before the age of 18 (United Nations Children's Fund, 2018). United Nations Children's Fund report indicate that almost 700 million women globally marry before the age of 18. It is also widespread in the Middle East, North Africa, the West, and South Africa (United Nations Children's Fund, 2023). World Health Organisation (2023) defined maternal health as the health of women during pregnancy, childbirth, and the postnatal period. It emphasises that each stage should be a positive experience, enabling women and their babies to achieve their full health and well-being potential. World Health Organisation (2022) posit that a teenage mother is a female who becomes pregnant and gives birth before the age of 20. However, according to the 1992 constitution of Ghana, a teenage mother refers to a female who becomes pregnant and gives birth before attaining the age of 18. However, the 1992 constitution of Ghana classifies any boy or girl below the age of 18 (Constitution of the Republic of Ghana, 1992).

United Nations Children's Fund Progress Report on Ending Child Marriage (2014), the total number of child brides might reach 950 million by 2030. Sub-Saharan Africa will account for around half of the world's early marriages, owing to a progressively dropping prevalence rate of early marriage combined with a fast-growing population (United Nations Children's Fund, 2023). Khan and Awan (2020) report that brides, families, and communities are at risk of poor economic, social, demographic, and reproductive health outcomes. Girls' autonomy and choice are further restricted by lack of education and resources. While the average age of first marriage is increasing globally, many girls in Sub-Saharan Africa continue to marry before the age of 18 (Hossain et al., 2016; Kamal et al., 2015).

In South Asian studies have shown a strong relationship between child marriage and increased mental health issues, including depression, and suicidality, often due to the heightened risk of gender-based violence (John et al., 2019). The authors added that girls who marry as minors are more likely to face intimate partner violence and sexual violence, which exacerbates their risk of developing mental health problems such as anxiety, depression, and suicidal thoughts. A study conducted in the United States found that people who married in their youth particularly under the age of 18, tend to experience more psychological distress compare to those who marry later (Islam, 2020). Child marriage may cause reproductive health problems as a result of early pregnancy International Center for Research on Women, 2020). In most poor countries, one out of every seven girls marry before the age of 15, and 38% marry before the age of 18 (UNFPA, 2019). UNPA-UNICEF (2020) statistics reports that Ghana has 2 million child brides. 600,000 of these individuals married before the age of fifteen. Child marriage is prominent in Ghana, with 19% of all young women marrying before the age of 18, falling short of the ambitious goal of abolishing the practice by 2030, as outlined in the Sustainable Development Goals. In many parts of African and Asia, child marriage is viewed as a means of repairing family bonds, completing property transactions, and resolving conflicts while also improving societal interactions (International Center for Research on Women, 2020).

In Ghana, 4.4 and 5.8% of women aged 15–49 married before the age of 15, while 22% and 21% married before the age of 18, owing in part to early marriages in traditional contexts with age limits (Ahonsi et al., 2019). Early marriage is widespread in rural parts of poor countries due to a number of causes, including school dropouts, a lack of job skills, and exposure to sexually transmitted diseases (Adedokun, 2012; Ahonsi et al., 2019). Despite the negative consequences of child marriage, it persists for a variety of reasons. While economic, cultural, structural, and societal factors make child marriage acceptable, research shows that it has major socio-economic and health consequences for girls, their families, and communities (Karam, 2015). Elyasu (2020) underscores the importance of traditional practices such as female genital mutilation in early marriage. Amoah (2017) argues that premarital sex and childbearing are unacceptable in Ghanaian Christian and Islamic traditions. Premarital sex and delivery are frowned upon in traditional communities, including betrothal (Ahonsi et al., 2019; University of Ghana Centre for Social Policy Studies, 2017), early marriages are encouraged in Ghana. In many cultures, patriarchy and related family systems legitimise child marriage by transferring a father's authority over his daughter to her future bride.

EMPIRICAL REVIEW

Parents generally believe that marrying their daughters at an early age improves their social standing, protects them from sexual abuse, and is essential for women's status in Ghanaian culture, as recognition and respect are intricately linked (Agarwal, 2016). In traditional communities where infant mortality was high and survival depended on a family's ability to generate its own food or products for sale, child marriage helped to increase the number of pregnancies and ensure enough surviving children to meet household labor needs (Mathur et al., 2003). Poverty has a significant impact on child marriage, which is influenced by the parents' socio-economic status and the children's material needs (Malhotra, 2010). Furthermore, despite the exorbitant ceremony fees, some parents and daughters marry off females simultaneously for financial gain and family security (Malhotra, 2010). Ahonsi et al. (2019) argue that child marriage gives financial stability to economically disadvantaged girls, allowing them to escape poverty and maybe collect income from their spouses to help their family. According to research, some adolescent brides can earn enough from their husbands to sustain their own families (University of Ghana Center for Social Policy Studies, 2017). Parents continue to practice child marriage as a survival strategy to escape poverty or reduce financial stress. Economic variables are also seen as important predictors of child marriage (Agarwal, 2016).

Furthermore, Ahonsi et al. (2019) identified poverty, adolescent pregnancy, and cultural norms as the primary drivers of child marriage in Ghana. Adjei (2015) conducted a study in Ghana to examine the cycle of poverty and early marriage among women in Kassena-Nankana, indicating that poverty in northern areas contributes significantly to the precarious nature of child marriage and its attendant consequences. Elyasu (2020) found that parental irresponsibility, religious attitudes, single parenting, gender imbalance, and peer influence all affect early marriage. UNICEF (2001) suggests several alternatives to child marriage, including financial help, physical and psychological well-being, education, and adherence to cultural and traditional values. Aye et al. (2018)

highlight the importance of improving girls' educational and economic opportunities, raising community awareness, establishing skill-acquisition centers, strengthening religious leaders, and asking professional women to serve as role models.

The Gender, Children, and Social Protection Ministry (2019) states that child marriage violates children's rights and has a negative impact on female health and well-being, resulting in low self-esteem and confidence (Aye et al., 2018). Parents put pressure on their daughters to marry young for cultural, personal, and economic reasons without considering the consequences for their daughters. The implementation of the 1992 Constitution and the Children's Act of 1998, Act 560, are efforts made by Ghanaian governments to end child marriage in Ghana. Also, in partnership with the UN Children's Fund, the Ghanaian government adopted a strategic framework to abolish child marriage in 2016 (Ministry of Gender, Children, and Social Protection, 2019). Despite international efforts, child marriage is still prevalent, especially in the northern part of Ghana, infringing on the human rights of the girl child and raising developmental issues (Ahonsi et al., 2019). According to the UNFPA-UNICEF global initiative to end child marriage by 2021, Ghana still has 2 million child brides, with 600,000 marrying before the age of 15.

Traditions in the North East Region prevent young people from reaching this legal age before being married. Despite the efforts of non-governmental organizations "NORSAAC and Songtaba" as part of the Power to Youth Programme, which aims to remove harmful practices such as child marriage, the situation remains unchanged. In the North East Region, girls are betrothed at birth and compelled to marry at a young age, typically between the ages of 13.

An interview conducted by TV3 news agency on July 18, 2023, revealed that most of the girls got married off at the age of 15 and narrated her story as follows:

"I was forced to marry when I was 15 and in Primary 6. I was opposed at first, but it was our routine, and I could not stop it. My aim was to become a teacher or a nurse, but now that I am a mother of two, that will not be possible."

According to United Nations Children's Fund (2021), child marriage is not limited to any particular religion, but it affects all religions, communities, and ethnic groups. Ahonsi et al. (2019) employed a mixed methods technique to investigate child marriage in Ghana and the results revealed that two out of every ten girls marry as youngsters due to poverty, teen pregnancy, and cultural norms.

Ayimaa (2021) carried out a qualitative study in Kasoa on the effects of child marriage on a girl's well-being and future, and the findings revealed that teenage girls experience maltreatment and frequently drop out of school as a result of forced marriage, a cultural tradition rooted in a desire to mimic their forefathers. This study addresses a population gap in the literature by expanding investigations to the North-East Region of Ghana, where child marriage is prevalent. Additionally, previous research used qualitative and mixed-methods approaches, leaving a methodological gap that was filled by this study, which presents empirical evidence-based conclusions using a quantitative approach to research. It is in view of this that this study was set out to investigate the effects of child marriage on the maternal health of teenage mothers in the Chereponi District in the North East Region of Ghana.

Research Questions

1. What are the factors causing child marriage in the Chereponi District?
2. What are the effects of child marriage on psychological health of teenage mothers in the Chereponi District?
3. What are the measures to curb child marriage among teenage mothers in the Chereponi District?

Conceptual Framework

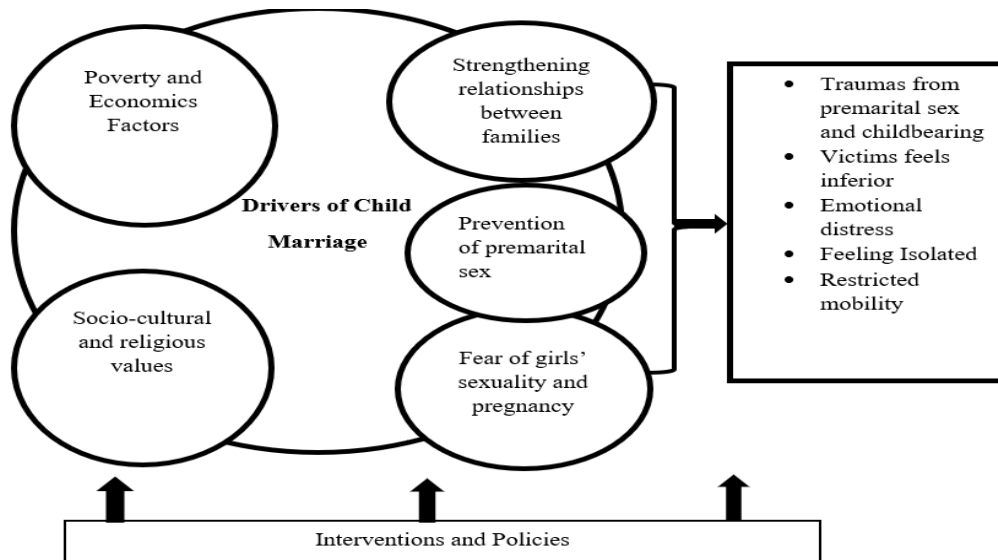


Figure 1. Conceptual framework adapted from Psaki et al. (2021) showing the hypothesised drivers of child marriage.

Figure 1 above depicts each individual circle as a core underlying driver of child marriage. The drivers are the causes of child marriage are poverty and economic factors, socio-cultural and religious values, fear of girls' sexuality and pregnancy, prevention of premarital sex, and strengthening relationships between families. However, the drivers of child marriage lead to traumas from premarital sex and childbearing, victims feels inferior, emotional distress, feeling isolated, and restricted mobility of the victims. Thus, social norms and attitudes, poverty and economic factors, preceding the other drivers because they are part of the larger social context in which marriage decisions are made (Psaki et al., 2021). The large circle in the center represents the critical interactions between these five drivers, with arrows pointing in different directions. Interventions and regulations may also target the drivers themselves or their relationship, including the age at which they marry. These factors may have short-, medium-, and long-term effects on females and their families.

Theoretical Underpinning

This study is afrocentric in nature and is supported by an ethno-cultural theory of pedogamy developed in the context of indigenous cultural societies (Banlanjo, 2022). Pedogamy refers to the concept of marriage in which one of the spouses is a minor under the law because he or she is under the age of 18. This hypothesis is based on four fundamental cultural assumptions. Cultural determinants have a significant impact on a girl's survival and social development, especially in terms of cognitive and social components (Banlanjo, 2022). These factors shape her existential beliefs and expectations, particularly in terms of marriage. Besides, the third assumption is that the girl child is primarily valued extrinsically, with a strong emphasis on conformity and adherence to socio-cultural norms. The fourth assumption is that because priming is primarily for social tasks, early marriage traditions place a girl's social selfhood ahead of her own selfhood (Banlanjo, 2022). In light of these views, the culture of early marriage appears to be a form of socio-cultural conditioning or determinism.

METHODOLOGY

Research Design

The researchers adopted a descriptive survey design to investigate teenage mothers' perceptions of causes, effects, and potential solutions to reduce child marriage in the Chereponi District in the North East Region of Ghana. As alluded to by Landburg and Greener (2000), descriptive research projects allow researchers to gather reliable information about the existing state of affairs. This design was chosen because it aimed at describing the experiences of teenage mothers who got married before their 18th birthday without manipulating their responses.

Population and Sample Size

Chereponi District has a population of 87,176, with 42,834 males and 44,342 females (Ghana Statistical Service Report, 2021). The District was chosen owing to the high frequency of child marriage reports in the news. It is bounded to the west by Gushegu District, to the north by Bunkprungu-Yunyoo District, to the south and south-west by Saboba and Yendi Districts, and to the east by the Oti River. The majority of the population is a farmer, with only a handful involved in crop farming and animal keeping. Purposeful sampling method was used to select Chereponi District because it has, over the years, recorded the most prevalent cases of child marriage. The study used a simple random sampling technique to sample 150 adolescent girls who married before their 18th birthday since they were considered key informants and information-rich participants who could provide credible information about the causes, impacts, and solutions to prevent child marriage in the District. The population of interest was all teenage mothers from Chereponi District in the North East Region. Purposive sampling was employed to select the sample of 150 participants to participate in the study. The 150 teenage mothers were those who had married before their 18th birthday.

Instruments for Data Collection

Three instruments, namely; Impact of Child Marriage Questionnaire, Psychological General Well-Being Index, and a demographic questionnaire, were employed for the data collection. The Impact of Child Marriage Questionnaire (Aye et al., 2018) and Psychological General Well-Being Index (Chassany et al., 2004) were adapted for data collection, while a demographic questionnaire was self-designed. The closed-ended questions of the Impact of Child Marriage Questionnaire and Psychological General Well-Being Index had responses ranging from strongly disagree (1) to strongly agree (4). The three questionnaires were pre-tested on 20 randomly selected teenage mothers in the Saboba District, and the Cronbach's alpha values yielded 0.89, 0.84, and 0.77, respectively. The collected data were analysed using the mean and standard deviation to answer research questions 1, 2, and 3. A criterion mean of 2.50 was used as a benchmark for decision-making. Any item rated 2.50 and above was accepted, while any item below 2.50 was not accepted. Any item rated 2.50 and above was accepted, while any item below 2.50 was not accepted. Table 1 shows the frequency, percentage, and age distribution of participants. The result from the table shows that the majority of the participants (42.7%) got married within 12–14 years. Similarly, 34.0 % got married below the age of 12 years, and 23.3% got married within the age range of 15–17 years as presented in Table 1 below.

Table 1. Age Distribution of Participants

Age Range	Frequency	Percentage (%)
Below 12 years	51	34.0
12 - 14 years	64	42.7
15 - 17 years	35	23.3
Total	150	100

Source: Field Data (2024)

Ethical Consideration of the Study

After obtaining permission, establishing consent, and assuring confidentiality with the teenage mothers, the goal of the study was vividly explained to them, and those who were lettered were given questionnaires to complete. To maintain confidentiality, participants were told that their identities would be kept anonymous. To achieve this goal, teenage mothers were given numbers to write on their questionnaire papers rather than their names, making it impossible for people to identify the participants. Individual participants were given the option to withdraw from the study at any time as the study progressed.

RESULTS

Research Question 1

What are the factors causing child marriage in the Chereponi District?

This research question sought to find out the causes of child marriage among teenage mothers in the Chereponi District. It was analysed using means and standard deviation and the result is presented in Table 2 as follows.

Table 2. Mean and Standard Deviation on the Causes of Child marriage among Teenage Mothers

Item	N	Mean	SD	Decision
Poverty and economic factors.	150	3.33	.84	Agreed
Socio-cultural and religious values.	150	3.32	.64	Agreed
Fear of girls' sexuality and pregnancy.	150	3.30	.90	Agreed
Prevention of premarital sex.	150	3.28	.78	Agreed
Strengthening relationship between families.	150	3.24	.87	Agreed

Source: Field Data (2024)

Table 2 showed that participants agreed with all the listed items as the factors causing child marriage. Thus, participants agreed to the item that poverty and economic factors cause child marriage. This had a mean score of 3.33 and a standard deviation of .84. This was followed by socio-cultural and religious values, with a mean score of 3.32 and a standard deviation of .64. Fear of girls' sexuality and pregnancy also had a mean score of 3.30 and a standard deviation of .90. Also, it was found that prevention of premarital sex had a mean score of 3.28 and a standard deviation of .78 while strengthening relationships between families had a mean score of 3.24 with a standard deviation of .87.

Research Question 2

What are the effects of child marriage on psychological health of teenage mothers in the Chereponi District?

This research question aimed at finding out the effects of child marriage on psychological health of teenage mothers in the Chereponi District. In order to achieve this, means and standard deviation were employed for data analysis. Table 3 below presents the results of the analysis.

Table 3. Mean and Standard Deviation on the Effects of Child Marriage on Psychological Health of Teenage mothers.

Item	N	Mean	SD	Decision
Teenage mothers suffer traumas from premature sex and childbearing.	150	3.38	.79	Agreed
Victims feel inferior and low self-esteem in the community.	150	3.18	.81	Agreed
They suffer emotional distress due to repeated pregnancies.	150	3.13	.89	Agreed

They are isolated, unhappy and have no one to share their concerns with.	150	1.82	.57	Disagreed
Girls are confined to the home and household roles which make them loose mobility.	150	1.16	.84	Disagreed

Source: Field Data (2024)

It emerged from Table 3 that participants agreed with the item that teenage mothers suffer trauma from premature sex and childbearing. This had a mean score of 3.38 and a standard deviation of .79. Furthermore, the table showed that victims feel inferior and have low self-esteem in the community. It has a mean score of 3.18 and a standard deviation of .81. Also, the assertion that they suffer emotional distress due to repeated pregnancies was agreed upon by the participants, with a mean score of 3.13 and a standard deviation of .89. From the table, it was also realised that participants disagreed with the items that they are isolated, unhappy, and have no one to share their concerns with ($M = 1.82, SD = .57$), and girls are confined to home and household roles, which make them lose mobility ($M = 1.16, SD = .84$) respectively.

Research Question 3

What are the measures to curb child marriage among teenage mothers in the Chereponi District?

This research sought to investigate the measures to curb child marriage among teenage mothers in the Chereponi District. In view of this purpose, mean and standard deviations were employed for data analysis and the results presented in Table 4 as seen below.

Table 4. Mean and Standard Deviation on the Measures to Curb Child Marriage among Teenage Mothers.

Item	N	Mean	SD	Decision
Provision of economic opportunities to teenage mothers to expand their employment and entrepreneurial skills.	150	3.46	.79	Agreed
Sensitisation and education of young girls on the consequences of child marriage.	150	3.32	.84	Agreed
Create supportive network to empower young girls to be able to negotiate on marriage.	150	3.30	.90	Agreed
Women who are role models should be invited to talk to young girls.	150	3.18	.81	Agreed
Girls should be counselled to be self-assertive and self-confident.	150	3.14	.77	Agreed

Source: Field Data (2024)

Table 4 showed that participants agreed to all the listed items as measures to curb child marriage among teenage girls. In view of that, participants agreed to the item that there is a need for the provision of economic opportunities for young girls to expand their employment and entrepreneurial skills. This had a mean score of 3.46 and a standard deviation of .79. Similarly, participants alluded to the fact that there is a need for sensitisation and education of teenage mothers on the consequences of child marriage, with a mean score of 3.32 and a standard deviation of .84. Moreover, it emerged from the table that creating a supportive network to empower teenage mothers will enable them to negotiate marriage. This had a mean score of 3.30 and a standard deviation of .90. It was further revealed that women who are role models should be invited to talk to young girls ($M =$

3.18, $SD = .81$), and finally, girls should be counselled to be self-assertive and self-confident ($M = 3.14$, $SD = .77$).

DISCUSSION

The study revealed that child marriage is caused by poverty and economic demands, the protection of girls' virginity or sexuality, strengthening relationships between families, socio-cultural and religious values, and the prevention of premarital sex. The current study's findings are consistent with those of Ahonsi et al. (2019), who asserted that child marriage gives financial stability to girls from economically disadvantaged families, as some young brides marry to escape poverty. Furthermore, the findings corroborate the argument that some child brides can collect enough wealth from their husbands to maintain their own families (University of Ghana Centre for Social Policy Studies, 2017). Relatedly, the findings support Nour's (2006) claim that young parents are not necessarily heartless but may use child marriage to escape poverty and protect their daughters from sexual abuse, unwanted pregnancies, and sexually transmitted infections. Besides, Jain and Kurz (2007) and Nour (2009) substantiated the assertion that parents may believe that marrying their daughter at a young age will protect her from sexual abuse, unwanted pregnancies, and the danger of sexually transmitted infections.

Furthermore, the findings demonstrated that premarital sex and childbearing cause trauma in young girls, that victims feel inferior and have low self-esteem in the community, and that they experience emotional anguish as a result of multiple pregnancies. These findings support the hypothesis that teenage mothers may suffer from low self-esteem and self-confidence (Aye et al., 2018). Consistent with the current study's findings, Aye et al. (2018) stated that child marriage not only violates a child's rights but also has a negative influence on the health and psychological well-being of the teenage mothers. This makes teenage females feel inadequate and isolates them from significant people in society.

Moreover, the study suggests reducing child marriage among teenage mothers through sensitisation and education of teenage mothers about the consequences of child marriage, providing economic opportunities to teenage mothers to expand their employment and entrepreneurial skills, creating a supportive network to empower teenage mothers to be able to negotiate on marriage, inviting women who are role models to speak to young girls, and counselling teenage mothers to be self-assertive and self-confident. The findings are consistent with the findings of a UNICEF (2001) study, which stated that economic support and opportunities for teenage mothers, physical well-being support, education for empowerment and intellectual development, psychological well-being support, and addressing cultural and traditional values and norms that support child marriage are all important. Aye et al. (2018) advocate for promoting girls' education and economic opportunities, raising community awareness, establishing skill centers, empowering girls to be able to negotiate with parents on marriage, and inviting professional women to serve as role models.

CONCLUSION AND RECOMMENDATIONS

The study found that child marriage is caused by poverty and economic demands, the protection of girls' sexuality as a means of strengthening family relations, socio-cultural and religious factors, and preventing premarital sex. It was therefore recommended that there should be stringent measures where perpetrators of child marriage will be sanctioned by law. Moreover, the study revealed that child marriage has profound impact on the maternal health of teenage mothers. In view of this the study recommended that girls should be given enough psychoeducation on the effects of child marriage. Girls should be oriented to take their studies seriously and report any early signs of child marriage to Domestic Violence and Victims Support Unit and Social welfare for prompt action. Finally, the study discovered that women who have gone through the educational ladder from time to time should be invited to give talks to girls as a way to encourage and motivate them. Finally, it was again recommended that counsellors and psychologists should provide counselling to girls to be self-assertive and provide economic empowerment strategies to make girls less dependent and vulnerable.

Implications for Education and School Guidance

Education is a right that every Ghanaian child of school age is entitled to, regardless of gender. Many procedures have been put in place by state agencies and non-governmental organisations to ensure that quality and accessible

education are delivered at all levels of the Ghanaian education system. This ambition can only be realised if girls are given the same opportunities as boys and are no longer treated as brides. Based on the study's findings, school counsellors and psychologists can devise efficient methods of organising counselling sessions to educate and sensitize parents and girls about the effects of poverty and environmental variables, as well as socio-cultural and religious values. Education for girls can only be improved if they are mentally prepared while in school. In addition, school counsellors should establish supportive networks for females to boost their possibilities for satisfying their everyday needs.

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