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# A study on early marriages and pregnancy health in the South-Eastern region of Türkiye

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## Abstract

**Background** The study was conducted to determine the attitudes of women who were married at an early age in their region towards such marriages and their experiences related to pregnancies.

**Methods** The data for the study were collected through the implementation of a semi-structured interview form, and the “deductive content analysis technique” was used to analyze the data. The study was conducted using a phenomenological design from qualitative research methods.

**Results** Four main themes were obtained in the study. Theme 1 The process leading to early marriages: Women are married off with the decision of the family and the support of their relatives, and mostly without having met each other. Theme 2 The course of marriage: The first day of marriage is considered frightening, and the responsibilities of the house are burdened on a girl child. Theme 3 Pregnancies: Women report health problems due to the fact that they are still children themselves, and their bodies are not suitable for a pregnancy. Theme 4: Childcare: Women experience problems related to their inexperience and financial problems in caring for children, and at the same time, they do not want their children's future to be like theirs. Theme 5: Cultural process leading to early marriages: Women state that early marriage is a traditional and cultural problem and that this situation is considered normal and should be.

**Conclusion** The factors that influence the decision to enter into early marriage include family decisions and cultural norms. In addition to the challenges associated with marriage, women express a desire for their children to have access to more advantageous educational opportunities.

**Keywords** Early marriage, Culture, Tradition, Women, Geography

## Introduction

Early marriage, defined as marriage before the age of 18, constitutes a significant human rights violation. Despite the prohibition against such practices established by international human rights treaties, early marriage persists as a pervasive global issue [1]. To date, more than 650 million girls worldwide have been married before the age of 18 [2]. According to data from ninety-eight countries, the rate of marriage before the age of 18 for women between the ages of 20–24 in 2020 was reported to be 19% [3]. In recent years, there has been a downward trend in early marriages, with the proportion of girls

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married at an early age falling from 25 to 21% in the last decade. However, it is clear that these marriages are still occurring. Girls at risk of early marriage continue to face problems such as negative gender perceptions, exclusion from education, poor health conditions, violence, and poverty [2, 3].

Although early marriage is a serious problem in Türkiye, the legal age of marriage is set at 18. However, in exceptional cases and with court orders, children as young as 16 can also be married [3]. In Türkiye, the prevalence of early marriages has declined over the past two decades; however, they remain a salient social phenomenon [4]. According to UNICEF (2022), it is estimated that approximately 20% of women between the ages of 18 and 45 in Türkiye are married at an early age. However, it is important to note that the statistical data on official marriages does not fully reflect the prevalence of early marriages in Türkiye, particularly those performed through religious ceremonies [5]. These marriages, which are carried out through religious marriages, lead to the fact that early marriages are not seen as a problem in society. Families accept and continue these marriages as a cultural necessity and adherence to traditions [6].

In societies characterized by a traditional and patriarchal structure, early marriage is regarded as both legitimate and normative [7]. Girls, positioned at the base of the patriarchal order, are expected to adopt traditional roles, such as bride, wife, and mother, at the earliest possible opportunity. A seminal study underscored the predicament of girls caught between the roles of womanhood and childhood, highlighting their instrumentalization in perpetuating traditional roles [8]. This phenomenon underscores the notion that societal and cultural factors, including geographical and sociocultural structures, play a pivotal role in shaping the roles and responsibilities individuals assume within their families [9]. In a different study, traditions and social customs are reported to have the highest rate as one of the main reasons for early marriage [10].

In some parts of Türkiye, due to cultural values and religious practices, early marriages are not perceived as a problem and are accepted as part of tradition [11]. Families that maintain their traditional structure approach the upbringing of their daughters with the idea that they will eventually get married and marry them off to their closest relatives or acquaintances before they even meet the world [12]. Society's perception of morality is largely influenced by its perception of women. Consequently, girls are often married off by family elders for the purpose of protection. These marital arrangements with relatives are driven by the desire to ensure the safety and well-being of the young female, as well as to maintain order and protect her from potential threats [12]. Conversely, these unions are also perpetuated for reasons

such as the girl child not being taken in by a foreigner, ensuring her continued presence within the family unit, and the preservation of inheritance rights [5]. It is evident that marital arrangements may vary depending on economic, cultural, religious, and regional traditions.

Conventionally, the expectation for girls who are married at an early age is that they should conceive and care for their children [5, 11]. Concurrently, these women are compelled to assume the responsibility of the household and the elders of the family [13]. They also assume the heavy responsibility of becoming parents at a very young age [14]. However, these girls are coerced into marriage at a premature stage of life, which can lead to adverse consequences. These include negative sexual experiences, a lack of knowledge regarding family planning, and pregnancy and birth complications [15]. In these early marriages, girls often face reproductive health problems such as vesico-vaginal fistula, increased susceptibility to sexually transmitted infections, pregnancy complications, and maternal mortality [16]. The cumulative burden of domestic responsibilities, including care for spouse, family, and children, exerts a significant detrimental influence on the mental and physical well-being of young women [17].

Every marriage at an early age causes girls to work on their future and take away their right to make decisions about their lives [5]. While there are studies on the early marriage of girls in the relevant literature, it has been observed that there is a lack of regional studies [6, 13, 14]. The present study sets out to examine the experiences of early marriage in the Southeast region of Türkiye, with the aim of fostering a more profound comprehension of the regional disparities and cultural influences that characterize this specific area. While extant literature frequently addresses broader geographical areas or different cultural contexts, this study focuses on local dynamics. It is known that these marriages continue due to the continuation of regional traditions. This study sheds light on how traditions work from a geography where early marriages are still active. In this context, the present study aims to understand and reveal the traditional and cultural experiences of women married as children in the context of gender. In line with this general objective, two main research questions were sought to be answered: (1) What are women's experiences of early marriage? (2) What are the reflections of the region and traditions on their experiences of early marriage?

## Method

This study was conducted between December 2024 and January 2025 through a series of in-depth, face-to-face interviews, employing a phenomenology design from the qualitative research methods framework.

The population of the study included women who were married under the age of 18 in the Diyarbakır province of Türkiye. The researchers published a statement detailing the study's criteria via the social media platforms they utilized to identify eligible participants. Women who had married at an early age and resided in the relevant province were considered part of the study sample. The final sample included women over the age of 18, women who were married under the age of 18, and women who had undergone pregnancy and childbirth. The participants were selected employing a criterion-based sampling technique, which is a purposive sampling method. The women were informed about the study, and those who agreed to participate were interviewed via video conference. The determination of the number of samples was based on achieving data saturation. The analysis of the interviews with 15 women included in the study led to the determination that increasing the number of samples further was unnecessary, as saturation had been reached, and the creation of new codes in line with the themes was no longer possible.

Data were collected using a semi-structured questionnaire developed by the researchers based on the literature [6]. The questionnaire was designed for this study and was not used in any other study. The questionnaire comprised 18 questions concerning demographic characteristics, marital status, pregnancy, childcare, and cultural traditions. Women who were married at an early age were asked nine semi-structured open-ended questions about their marital initiation, familial structure, pregnancies, childcare experiences, and perspectives on the impact of culture and societal influences on the phenomenon of early marriage. Following the conclusion of the interviews, it was determined that no modifications were necessary to the questionnaire. The participant form is divided into two sections. The first part of the form includes questions designed to collect demographic information such as age, gender, marital status, education level, income, employment status, age at marriage, age and education of the spouse, and number of children. The second part of the form consists of semi-structured questions. A preliminary study was conducted to determine the clarity of the semi-structured questionnaire, which included open-ended questions. Moreover, three pilot interviews were conducted via videoconference with women who had consented to participate in the study. Preliminary findings were used to revise the inquiries to enhance their clarity. The participants were not informed about the purpose of the study. The interviews were not subject to any time constraints. The duration of the interviews ranged from 25 to 30 min. All interviews were audio recorded and transcribed verbatim for subsequent analysis.

Ethical approval was obtained and verbal consent was obtained from the women who voluntarily participated in the study. The women were informed that the interview could be interrupted at any time and that no identifying information would be included in the data collection. The study was conducted in accordance with the principles of the Declaration of Helsinki.

The data were analyzed using the theoretical thematic analysis technique commonly used in qualitative research. This analysis was conducted in six stages [18]. (1) Following each interview (within 24 h), the audio recordings from the in-depth interviews were meticulously reviewed and transcribed. Fifteen separate Word documents were produced, one for each participant. The printed documents were then subjected to a thorough analysis. Each document was meticulously reviewed on multiple occasions, and preliminary analytical notes were systematically recorded alongside pertinent statements. This process was repeated until saturation was achieved, at which point the goal of achieving familiarity with the data was met. (2) Subsequent to the transcription process, data items from all documents were coded. (3) The relevant codes were then grouped into categories, and preliminary themes were generated. (4) The comprehensibility of the generated themes was assessed. A descriptive analysis, also known as code mapping, was conducted using MAXQDA. (5) In the final stage, the researchers interpreted the participants' perceptions of the topic based on the generated themes. To protect the privacy and confidentiality of the participants, they were assigned code names, such as P1, P2, and so on.

## Results

The mean age of the women who participated in the study was 45.73 years ( $\pm 14.63$  years, min-max: 22–73 years). The mean age at marriage was 15.66 years ( $\pm 1.17$  years, min-max: 13–17 years). The data indicated that 40.66% of the participants had received primary school education, 73.33% had lived in the city for the longest time, and 86. Furthermore, 66% of the women were not employed, 80% had moderate incomes, and 60% had spouses with primary school education or less. The mean age of the spouses was  $49.84 \pm 10.65$  (min-max: 22–73), and the mean number of children was  $5.06 \pm 3.75$  (min-max: 31–66). The characteristics associated with the descriptive information of the women are presented in Table 1.

The main themes and sub-themes determined after the thematic analysis of the data obtained are presented in Table 2.

**Table 1** Women's descriptive information (n = 15)

Case no	Age	Age at marriage	Education level	Place of residence	Employment status	Income status	Spouse education	Age of spouse	Number of children
1	55	14	Primary School	City	Not working	Middle	No	56	4
2	49	17	Primary School	City	Not working	Middle	Middle School	Died	5
3	47	15	Primary School	City	Not working	Middle	Primary School	57	7
4	73	15	No	City	Not working	Middle	Primary School	Died	11
5	60	16	Primary School	City	Not working	Good	Primary School	62	4
6	47	17	Primary School	City	Not working	Middle	Primary School	50	4
7	23	15	Middle School	District	Not working	Middle	High School	34	2
8	22	17	High School	Village	Not working	Middle	Primary School	31	2
9	44	16	Middle School	City	Working	Middle	Middle School	50	3
10	37	17	University	City	Not working	Bad	University	47	2
11	38	15	Primary School	City	Not working	Bad	High School	43	3
12	48	16	No	District	Not working	Middle	Middle School	50	4
13	26	16	Middle School	Village	Not working	Middle	Primary School	41	2
14	56	16	Primary School	City	Working	Middle	Primary School	61	3
15	61	13	No	City	Not working	Middle	No	66	10

**Table 2** Main theme and sub-themes

Main themes	Sub-themes
1. The process leading to early marriage	1.1. Family decision 1.2. Meeting
2. The course of the marriage	2.1. First day 2.2. Household burden
3. Pregnancies	3.1. Still being a child herself 3.2. Problems related to pregnancy 3.3. Difficulties in access to health services
4. Child care	4.1. Challenges of child care 4.2. Children's future
5. Cultural process leading to early marriages	5.1. A cultural situation 5.2. Attitudes towards early marriages in the region of residence

### The process leading to early marriage

Participants' views on the process leading to early marriage were categorized under two headings (family decision, and meeting).

#### Family decision

Women stated that they did not meet their husbands before marriage and that they were usually found suitable and married through family members and relatives.

**K3:**...My father asked me, my father knew these people, they were good people. I didn't think about it; I mean, if my father said it was okay, we would listen to him, we would follow what he said. You have doubts, but thank God my husband was fine.'

**K8:**... I met my husband through a distant relative. He showed me a photo of my husband at that time. We met through an arranged marriage.'

**K14:**...My wife's two aunts were married to my brothers, and my husband's father came to ask for

*me. That is how the families met between the two villages. Would I have taken her if I had known her?*

#### Meeting

Women stated that they had met their husbands for a very short period of time just before marriage or that they got married without meeting them at all.

**K10:**...Before we got married, although we were relatives, we didn't know each other because we lived in different cities. We got married on recommendation. My wife's mother suggested it, and we met, we saw each other for six months, and then we decided to get married.'

**K12:**...I never saw my husband; I never met him. My father decided. My consent was not taken; I didn't even have the right to see...'

**K15:**...I saw it on the day I got married. It was not possible for us to meet or love as we do now before marriage.'

#### The course of the marriage

Participants' views on their initial experiences after marriage were grouped under two headings (first day, relationship with spouse).

#### First day

All women reported feelings of fear, excitement, and uncertainty on the first day of marriage.

**K1:** 'Fear stress. Excitement. Yes, the more dominant one is fear...'

**K6'**...There was no excitement but fear. It was foreign; I didn't know the language. I was having a hard time. I didn't know anything, and I was having a little difficulty. They were Zaza, we were Kurdish.'

**K8'**...I was anxious and stressed the day I got married. I mean, such curiosity and fear was difficult.'

### Household burden

Women generally stated that they were uncomfortable with the excessive burden of responsibility in marriage, but they accepted it.

**K3'**...At that time, I was both financially and single, taking them to school, bringing them to school, home cooking, this and that, home stress, I was inevitably having difficulties. I mean, I was both outside and inside; my husband was working outside, he was not at home, and I was having difficulties. There was no one from the outside that I could leave the children with, you know, to take care of them, and when my older daughter grew up, they helped me. The girls caught up with me...'

**K5'**...I mean, even if there were problems, I don't raise my voice; I was on my own, and I was young; for example, my husband was not as good to me as they were to me, my husband was young, and he didn't have such a responsibility because I was married and had children. I took all the responsibility on myself...'

**K12'**...Very bad. I didn't know what marriage was; I didn't know what to do or where to go. His family... he didn't have a mother; he had a stepmother, and she treated me very badly. She put all the burden of the house on my shoulders.'

### Pregnancies

Participants' views on their experiences during their first pregnancy and subsequent pregnancies were grouped under three headings (being a child herself, problems related to pregnancy, and difficulties in accessing health services).

#### Still being a child herself

Women reported that they were still children during their first pregnancy and, therefore, had no awareness of pregnancy.

**K11.** '...It was hard in the first months; it was a bit difficult, but then it was fine. I had family problems, and I was sad. I was ignorant; I was a child. How was I supposed to know that sadness affected the baby? I didn't know.'

**K13'**...My first pregnancy was very difficult. I was already pregnant right away; my belly was on my nose, I was not used to the family, it was a crowded family, and I couldn't stand the noises. I was overwhelmed. I had much difficulty; I was pregnant despite my young age, and I was trying to catch up with the housework. I was still a child...'

**K14'**...I didn't understand what pregnancy was. I was very ignorant. You had no one around you, and the man was looking after you and beating you... I was a child; I would not interfere with her now...'

### Problems related to pregnancy

Women reported physical difficulties and illness during their pregnancies.

**K7'**...My first pregnancy was painful, and I already had a miscarriage. It was scary for me. I didn't know much, so I didn't even realize that I had a miscarriage. That way, I only had pains; I didn't know much about it...'

**K12'**...Because I got married at a young age, I could not feed myself enough, I could not take care of myself. My pregnancy was worse because I was going through sad things. No one supported me, and I don't recommend it to anyone.'

**K5'**...I had a health problem. I have always had anemia. I used to faint all the time when I was pregnant, and during the birth, I used to get up and sit down. For example, if I went to a market, I would sit in a few places and rest and rest...'

### Difficulties in access to health services

Women reported difficulties in going to hospitals alone and covering their expenses.

**K1'**...I was pushing my husband very hard to take me to the hospital. In our place, women cannot go out alone. I used to go for a check-up a month and a half after a week, and I still do...'

**K2'**...We had no insurance, we had no security. I was having trouble going to the hospital because I didn't have insurance. My father-in-law was already helping me when I was going to the hospital...'

**K8'**...When I found an appointment, I mean, I used to go with my husband once every 3 months. We couldn't find an appointment, and we couldn't go much because of my husband's workload.'

### Child care

Participants' problems related to childcare were categorized under two headings (difficulties of childcare and children's future).

### Challenges of child care

Women expressed their experiences due to their inexperience in childcare, fatigue, and financial constraints.

**K2:**...*In the care of the children, you know, it was not a four-four-four care. At that time, your husband was working and not working. You know, we couldn't go to the hospital.*

**K9:**...*We couldn't take care of the children; we didn't have the means to buy formula and diapers.*

**K1:**...*In terms of care, I did not have any difficulties in taking care of my children, but we had a lot of economic difficulties.*

### Children's future

The women said they wanted to ensure that their children completed higher education and were strongly opposed to early marriage.

**K13:**...*I was very angry with my children. I took all my anger from them, but now I would do anything for them to go to school. Even though my daughter is 5 years old now, I send her to kindergarten so that she can see the outside and not stay at home too much. My son is still young, but I try to instill education in them in every way.*

**K14:**...*I did everything so that my children could study and not be victimized in public so that their fate would not be like mine...*

**K15:**...*We couldn't study, but thank God we educated them all and made them have a profession...*

### Cultural process leading to early marriages

Participants' views on the cultural process leading to early marriages were categorized under two headings (the reaction of families and the situation in the region of residence).

### A cultural situation

Women stated that early marriage of girls is a traditional and cultural phenomenon.

**K5:**...*This is tradition culture, I swear. But if they have a good job, if they have money, they give it to them and they leave. For example, they don't ask how he is. They ask what his job is...*

**K12:**...*Today's young girls can say that we don't get married now, for example, we don't want this, we don't want that, we are too young. But back then, there was nothing like that. We couldn't say it not because of bullying but because of shame. It was a cultural situation, but that doesn't continue now.*

**K7:**...*They have definitely made it a way of life. They see it as normal tolerable. And anyone who opposes this is seen as ignorant. Women should serve men in every way. They think that the earlier we make her bow her neck, the better. I wish I hadn't gotten married at such an early age. When I look at other girls and women, I feel very sad. I spend days trying, but I think it's okay, it's cultural.*

### Attitudes towards early marriages in the region of residence

Women stated that this situation used to be more common in the region but is still not practiced.

**K4:**...*It used to be like that in the past, but now families don't do that anymore. Now they can't give them to anyone at the age of 15 because the law doesn't allow it now.*

**K12:**...*They look at it as a positive thing...they still marry at a young age. I think it has become a tradition, so they see it as normal.*

**K13:**...*Anyway, this is seen as normal in our place. If their mothers give permission, they get married. It is seen as normal in our country because the less developed the woman is, the better it is for them.*

### Discussion

This study investigates the role of family decisions and cultural norms in shaping early marriages within the Southeast region of Türkiye. Early marriage is a problem that profoundly impacts not only the lives of individuals but also the social structure. The research findings indicate that women face challenges in marriage that are compounded by their desire for improved educational opportunities for their children. In light of these findings, the development of policies grounded in gender equality emerges as a pivotal solution to prevent early marriage.

Early marriage constitutes a serious social problem that hinders individuals, particularly women, from exercising their fundamental rights to education, careers, and personal development. The perpetuation of this phenomenon is attributed, in part, to the normalization it engenders within cultural norms and traditions, which limits the social roles available to women and perpetuates a cyclical pattern that often transcends generations [10]. Research has demonstrated that familial influences,



particularly decisions made by parents or relatives, play a pivotal role in the decision-making process regarding early marriage [19]. This phenomenon can be attributed to the cultural perception of a direct association between a girl's sexual purity and the honor of her family. The practice of early marriage is also understood to serve as a means of safeguarding the social standing of families [20]. Furthermore, early marriage is frequently endorsed by parents' aspirations to ensure economic stability for their offspring [21]. A local community's perspective, as outlined in a particular study, perceives early marriage as a means of providing labor, ensuring psychological well-being, and fortifying familial bonds [22]. Another study posits that partial and textual interpretations of religious texts (Quran and Hadith) support the continuation of early marriage [23]. A similar study in India found that religious affiliation was associated with early marriage and motherhood, with marginalized groups exhibiting a higher prevalence [24]. In a meta-analysis, it was reported that it is common to see marriage as a commandment of God [20]. Another study reported a lower rate of early marriage among non-Muslim women [25]. While the women in this study emphasized that the early marriage of girls is determined by deep-rooted traditions and cultural norms, it can be said that religious beliefs have an indirect effect on the formation of these cultural norms. Religious values may contribute to the normalization of early marriage practices by shaping social behaviors and expectations. In this context, it can be said that religious norms combined with cultural practices create a framework that limits women's social roles. The interviews clearly show how this situation is internalized and normalized in society. K7 states that early marriage is accepted as a normal way of life in society.

The consequences of child marriage are twofold, both limiting women's personal development and social roles, thereby creating an intergenerational cycle. This phenomenon is attributed to the fact that early marriage often results in girls dropping out of school, thereby hindering their ability to achieve educational goals [26]. The present study found that the women had low levels of education. However, the data reveal a notable shift in priorities, with the participants expressing a strong emphasis on ensuring a robust educational foundation for their offspring (K13, K14, K15). Conversely, studies have demonstrated that girls' attainment of secondary and higher levels of education significantly reduces the risk of early marriage [5]. However, in this study, the women's prioritization of their own children's education emerged as a significant positive factor, demonstrating the potential to disrupt the intergenerational cycle. This finding underscores the transformative potency of education on both individuals and societies. A study conducted in the eastern province of Türkiye further underscores the

potential repercussions of early marriages, highlighting adverse consequences such as child abuse, educational abandonment, failure to assume parental roles, violence, and divorce [11]. The absence of educational opportunities has been shown to impede women's acquisition of the necessary knowledge and skills for childcare and child development. This, in turn, can have adverse consequences for the physical and psychological well-being of children [22]. The absence of educational attainment among mothers can impede their capacity to fulfill children's fundamental needs and foster their optimal development. This predicament endangers the physical and psychological well-being of children. This phenomenon can be particularly burdensome for women, often leading to a combination of neglect and deficiencies in their children's care. Consequently, fundamental elements such as love, attention, and care—which are indispensable for children to flourish and develop healthily—may become deficient. As illustrated by the statement, “I was very angry with my children. I took all my ambition from her, but now I would do anything for her to study,” the emotional burdens of early motherhood and the inadequacies caused by a lack of education are also reflected in the children. The role of educated and empowered women in the progress of societies is critical. Consequently, the implementation of social awareness initiatives and educational programs is imperative to prevent early marriages and empower women [27].

Early marriages, particularly those occurring before the age of 18, have been demonstrated to have a detrimental impact on the health of young people, as well as on maternal and infant mortality rates, and to hinder the educational progress of the youth [28]. This phenomenon is further exacerbated by the concurrent challenges of limited contraceptive access and utilization [27]. In another study, early marriage was identified as a strategy to enhance the probability of reproduction before the occurrence of death or physical deterioration [29]. This study sheds light on the challenges faced by women who enter pregnancy at an early age. The participants' statements indicate that early pregnancies can lead to significant physical and psychological challenges (K11, K13, K14). Women's being still children, their low awareness of pregnancy and childbirth processes, and the difficulties they experience in accessing health services stand out as the main problems. Women's testimonies show that early pregnancies have serious impacts on physical health. For example, K7's statement that she experienced a miscarriage in her first pregnancy and that this situation was not recognized clearly reveals women's lack of knowledge about the pregnancy process and the problems experienced in accessing health services. Similarly, K12's statement that “I could not feed myself adequately because I got married at a young age” shows that early

pregnancies combined with factors such as malnutrition and lack of physical development make the pregnancy process even more difficult. In South Asia, early marriage has also been associated with teenage pregnancy and related adverse pregnancy outcomes [30]. Factors such as age, education level, and urban or rural residence are reported to have a significant impact on modern contraceptive use [31]. In addition, it is emphasized that strong social norms and taboos in the Middle East make it difficult for humanitarian organizations to provide reproductive health services to adolescents [32]. One study reported that early marriage was not significantly associated with low birth weight babies but was significantly associated with pregnancy complications [33]. In another study, child marriage was found to have a positive and significant relationship with the infant mortality rate [34]. In a study conducted in Indonesia, it was stated that early marriage leads to various problems, such as increased abortion rates, high maternal mortality rates, and infant mortality rates [35]. With this study, we can say that early marriages negatively affect individuals' lives in many ways.

Women's difficulties in accessing health services also negatively affected their pregnancy processes. K1's statement, "I was forcing my husband to take me to the hospital," shows that women were dependent on access to health services, and this situation led to the disruption of health checks. In addition, K2's statement, "we had no insurance, no security," reveals that economic inadequacies prevented access to health services and made pregnancy processes more risky. In a similar study, it was reported that young women and those married at an early age have limited authority in domestic decisions and are often dependent on the decisions of their mothers-in-law. This situation negatively affects health service seeking and health outcomes [30].

## Conclusion

This study aimed to reveal the attitudes of the geography where women who were married at an early age live towards such marriages and the experiences of individuals. The findings show that the decision of the family and cultural norms are the determining factors in early marriage. While women expressed the difficulties and responsibilities they experienced during the marriage process, they also expressed their desire to provide a better education for their children's future. It is concluded that policies based on gender equality should be developed and implemented to prevent early marriages. In this context, it is important to raise social awareness and strengthen education programs to prevent early marriages.

## Strengths and limitations of the study

Although there are studies on early marriages, studies on reproductive health are limited. The strengths of this study are that it was conducted in a region where early marriages continue and that it sheds light on reproductive health. On the other hand, the qualitative design of the study enabled women to convey their problems in a way that was not foreseen by the researchers.

Limitations of the study include the fact that only 15 women were interviewed, and these were older individuals. This suggests that the views of the participants may not fully reflect the current situation due to the passage of many years. In addition, the interviews made it difficult to generalize to the general population and only covered women in the Southeast region of Türkiye, which means that experiences in other regions are not adequately reflected. As participants' views are shaped by specific cultural and social norms, it may be difficult to represent experiences that fall outside of these factors adequately. In addition, conducting interviews at a specific point in time may increase the likelihood that participants' moods at the time may influence their views. Although confidentiality and anonymity were ensured, social pressures may have prevented some women from fully expressing their experiences.

## Author contributions

All authors contributed to the study data collection and analysis. Study conceptualization, design, fund acquisition, material preparation, data collection, and analysis were performed by EYA. The first draft of the manuscript was written by EYA and all authors commented on previous versions of the manuscript. All authors read and approved the final manuscript.

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## Data availability

The data that support the findings of this study are available at a reasonable request from the corresponding author. The data are not publicly available due to their containing information that could compromise the privacy of research participants.

## Code availability

Not applicable.

## Declarations

### Ethical approval

This study was performed in line with the principles of the Declaration of Helsinki. IRB approval was granted by the Ethics Committee of the University of Dicle on December 22, 2024, under protocol number 815972.

### Consent to participate

Informed consent was obtained from all individual participants included in the study.

### Consent for publication

Not applicable.

### Competing interests

The authors declare no competing interests.



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