YES I DO. BASELINE STUDY IN ZAMBIA

Prevalence, causes and effects of child marriage and teenage pregnancy in Eastern Zambia

In Zambia, child marriage and teenage pregnancy have gained significant attention in recent years because of the high rates. Poverty, gender inequality, lack of education and cultural customs and traditions have been highlighted as key drivers. The YES I DO programme aims to contribute to enhancing the decision making space of young women about if, when and whom to marry as well as about if, when and with whom to have children. The research component of the programme focuses on the interlinkages between child marriage and teenage pregnancy.



MAP OF ZAMBIA EASTERN REGION IN RED

The baseline study provides a picture of the factors that cause child marriage and teenage pregnancy in Eastern Zambia, the main

effects on young women and men's lives, and the prevalence of both problems in the areas were the YES I DO programme is implemented. The study also explores how these problems are entrenched in local culture and young people's involvement in decision making processes around sexual and reproductive health. The findings are used to optimize the YES I DO intervention strategies and provide context-specific knowledge for advocacy and policy purposes.



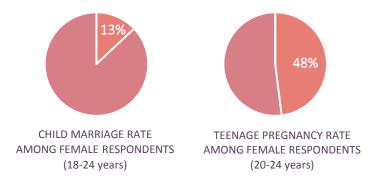
A mixed methods study in the Eastern region

The baseline study had a mixed methods research design where both quantitative and qualitative data were collected using household surveys, focus group discussions, in-depth and key informant interviews. Data were collected in three districts in Eastern Zambia: Chadiza and Petauke as the intervention area, and Katete as a control area for the study. Data were analysed through descriptive statistics and thematic content analysis.

- 1,434 household questionnaires among randomly selected young people aged 15-24 years; 75% female and 25% male respondents, 50% in the intervention and 50% in the control area
- 10 focus group discussions; 80 participants: young women, young men and parents/caregivers
- 20 in-depth interviews with young women, young men, parents/caregivers, grandmothers, religious and traditional leaders, teachers, health social workers, and representatives of community-based and youth organizations
- 8 key informant interviews which included five representatives of non-governmental organizations and three policy makers

Results

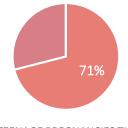
The study shows that in Eastern Zambia, child marriage mainly affects young women. The baseline data indicate a child marriage rate of 13% among female respondents, and 3% married under the age of 15. Among male respondents, no cases of child marriage were found. The teenage pregnancy rate was higher than the child marriage rate, and it was also more common among female respondents (48%) to have their first born child under the age of 20. Therefore, sex appeared significantly related to both child marriage and teenage pregnancy.



Child marriage as a "solution" to teenage pregnancy and as an alternative to limited future perspectives

Poverty and teenage pregnancies were mentioned as main drivers of child marriage. Many respondents attributed child marriage to a lack of education and jobs (72%). The study found that young people's difficulties to continue studying and finding a job led to a general feeling of no future perspectives, and a perception of marriage as the best alternative. In addition, limited economic resources were also found to be a contributing factor to teenage pregnancy, by limiting young people's access to sexual and reproductive health services and contraceptive methods.

Teenage pregnancy appeared as a key driver of (child) marriage. Participants argued that child marriage was generally seen as a "solution" to teenage pregnancy. In cases of teenage pregnancy, marriage was seen as an economic gain that facilitated access to food and health care. In addition, through marriage, young women were also relieved from the stigma and shame related to teenage pregnancy. Baseline data reveal that pregnancies often occurred before (21%) or in the same year (50%) as marriage. Moreover, young people tended to agree that marrying young women might resolve family disputes (78%).



TEENAGE PREGNANCIES THAT OCCURRED BEFORE AND IN THE SAME YEAR AS MARRIAGE

Initiation ceremonies and early sexual debut

Early sexual debut was highlighted as the main cause of the high prevalence of teenage pregnancy and, in turn, child marriage. Participants related early sexual debut (12-16 years) to peer pressure, the exchange of sex for money or goods, and initiation ceremonies. These ceremonies were referred to as a tradition meant to teach young women about marriage life, and various participants saw them as a driver of young women's sexual desires which led to teenage pregnancies.

"When a girl here reaches puberty they are taught on how to take care of their husbands and the home. After learning these traditions most of them go out to experiment and may end up getting pregnant." (Teacher, Chadiza District)

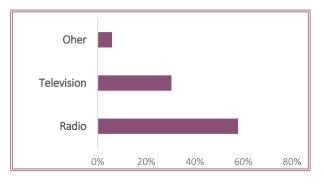
"It is easier to communicate with your grandparents than it is with your parents, because with your parents you may be shy, but with your grandparents you can say anything you have in mind." (Young man, FDG 20-23 years, Petauke

Participants argued that as initiation ceremonies are led by elderly women, young people generally approach grandparents for sexual and reproductive health information. The baseline data reveal that grandparents (24%), together with mothers (28%) were the family members with whom young people talked the most about feelings, hopes and worries; more than with brothers (5%), sisters (12%), or fathers (4%). Thus, grandparents appeared as an important actor to provide information on sexual and reproductive health and rights to youth.

Low use of contraception and radio as the main source of sexual and reproductive health information

Most female and male respondents had ever received any type of information on sexual health and sexuality (67% and 63%). Most respondents agreed that access to sexual and health information was easy (57%), and acknowledged the existence of sexual and reproductive services. However, contraceptive use among female and male respondents was low; 78.5% of all respondents were not using any contraceptive method at the time they were surveyed and 70% had never used one.

MAIN SOURCES OF SEXUAL AND REPRODUCTIVE HEALTH INFORMATION



Radio was reported to be the main source from which young people got information on sexual and reproductive health (58%), followed by television (30%). The baseline data indicate that, particularly for young men, it was not easy to talk about marriage or related topics with their parents.

Lack of education as cause and consequence of child marriage and teenage pregnancy

Young people's knowledge on policies and laws regarding child marriage was low, but they were aware of the negative consequences. Participants saw both child marriage and teenage pregnancy as problematic and highlighted school drop-out as the main consequence, especially for young women. The baseline study shows a significant association between school drop-out and both child marriage and teenage pregnancy. Most respondents stated that marrying women at young age does not provide family security (66%), neither does it protect family honour (64%). Moreover, respondents agreed that young women and men should have autonomy in the choice of partner (95% and 96%).

Education was mentioned as the key solution to prevent child marriage and teenage pregnancy. Participants identified various advantages of young women's education, such as higher employment opportunities, increased knowledge on sexual and reproductive health and related services, stronger empowerment to make informed decisions on their bodies and futures, and less time and pressure to engage in sexual relationships. Participants argued that young women often did not go back to school after giving birth because of shame and new household responsibilities.

To recap, in Eastern Zambia, child marriage was common among young women. A lack of education and job opportunities and teenage pregnancy appeared as the key drivers. Child marriage was seen as a solution to teenage pregnancy, which was highly prevalent and linked to early sexual debut. Initiation ceremonies and grandparents were playing an important role in young people's sexuality education. School dropout appeared as the main consequence and young women's education as the key solution to prevent both teenage pregnancy and child marriage.

Recommendations

Recommendations for the YES I DO intervention strategies:

- Together with community members, particularly grandparents, discuss how initiation ceremonies can complement and support awareness raising on prevention of teenage pregnancy and child marriage
- Besides health workers and teachers as sources of sexual and reproductive health information for youth, use the radio for dissemination of comprehensive information to youth and other stakeholders
- Address social and gender norms together with traditional and religious leaders, teachers, parents and caregivers, and young people themselves
- Promote youth-friendly sexual and reproductive health services and make them more acceptable among young people
- Introduce interventions to empower young people to be economically active outside home.
- Improve the dissemination of policies and laws regarding child marriage

Recommendations for further research:

- Further explore the content and quality of the sexual and reproductive health information that young people receive in school and from other sources, such as the radio
- Further explore the influence of initiation ceremonies on young people's preferences around marriage and family formation, and how sexuality and sexual health information can be best integrated in these ceremonies
- Identify, together with young people, possible sources of income; and investigate whether improved economic activity contributes to different choices regarding childbearing and marriage
- Explore how gender (in)equality plays out in young people's life and in which ways this influences child marriage and teenage pregnancy

