

BEYOND MARRIAGE AND MOTHERHOOD

Empowering girls by addressing adolescent pregnancies,
child marriages and early unions



Patterns and Trends in Southeast Asia and the Pacific



Contents

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About this paper

UNICEF and UNFPA have committed to addressing adolescent pregnancies, child marriages and early unions through their respective strategic plans and country offices in the region. Together with partners, they are supporting a range of interventions – particularly for adolescent girls.

This paper is the first in a series developed by the UNICEF East Asia and Pacific and the UNFPA Asia and the Pacific regional offices. It explores adolescent pregnancies, child marriages and early unions in Southeast Asia and the Pacific, by investigating their prevalence, trends, drivers, patterns and typologies. This exploration lays the foundation for the second paper, *Beyond Marriage and Motherhood: Empowering girls by addressing adolescent pregnancies, child marriages and early unions – Tailoring Programme Interventions for Southeast Asia and the Pacific*, which supports a targeted approach to programmes that seek to address these issues.

The opinions expressed are those of the authors and do not necessarily reflect the policies or views of UNICEF or UNFPA.

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Foreword

Adolescence is a pivotal period of development for girls, a time of rapid physical and psychological change. A period of transition and increasing independence, the second decade can offer exciting new opportunities and herald the realization of dreams. However, it is also a time when a girl's life course can be irrevocably altered.

For many adolescent girls across the Southeast Asia and the Pacific region, an unwanted pregnancy or child marriage can disrupt this important developmental period, limit their life choices and negatively impact their well-being. This is particularly so when violence, coercion or force are involved.

Empowering adolescent girls to reach their full potential is key to nations achieving sustainable development. However, across the region, too many girls lose life opportunities when they unintentionally become pregnant and/or are forced to marry early. UNICEF and UNFPA are committed to the Global Programme to Accelerate Action to End Child Marriage, and to prevent adolescent pregnancies which are both a driver and a consequence of child marriages and early unions.

Urgent action is essential as the COVID-19 pandemic has exacerbated gender inequalities, and reversed hard-fought gains. With limited time to achieve the Sustainable Development Goals, strategies and programmes must be better targeted. To effectively address adolescent pregnancies, early marriage and unions, interventions must be tailored to contexts as well as specific drivers and determinants.

This paper explores the interlinkages of adolescent pregnancy, child marriage and early union, in Southeast Asia and the Pacific, to lay the foundation for such a targeted approach. A second paper in this series, *Beyond Marriage and Motherhood: Tailoring Programme Interventions for Southeast Asia and the Pacific*, provides guidance for selecting strategies and interventions relevant to specific situations.

Girls' needs, aspirations and lived experiences must be central to any action that addresses early pregnancies, marriages and unions. They must be engaged and consulted in programme planning and empowered to make informed decisions about their own lives.

UNICEF EAPRO Regional Director,
Debora Comini

UNFPA APRO Regional Director,
Björn Andersson

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Acronyms

APRO	Asia and the Pacific Regional Office
CEDAW	Convention on Elimination of Discrimination Against Women
COVID-19	Coronavirus Disease 2019
CRC	Convention on the Rights of the Child
CSE	Comprehensive Sexuality Education
DHS	Demographic and Health Surveys
EAPRO	East Asia and Pacific Regional Office
FGM	Female Genital Mutilation
GBV	Gender-Based Violence
IPV	Intimate Partner Violence
Lao PDR	Lao People's Democratic Republic
MICS	Multiple Indicator Cluster Surveys
PTSD	Post-Traumatic Stress Disorder
SDG	Sustainable Development Goal
SRH	Sexual and Reproductive Health
SRHR	Sexual and Reproductive Health Rights
UDHR	Universal Declaration of Human Rights
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development

Glossary of Terms

Adolescence	The second decade of life spans the ages of 10–19 years. Young or early and late adolescence encompasses the 10–14 and 15–19 age brackets, respectively.
Arranged marriage	The bride and groom are selected by individuals other than the couple themselves, particularly by family members such as parents. Arranged marriages may be non-consensual or consent may be limited, pressured or forced.
Agency	Agency means the personal capability to act and make free and informed choices to pursue a specific goal. Agency is also considered an asset.
Autonomy	People's capacity to make free and informed decisions about their lives, enabling them to be and act in accordance with their own aspirations and desires, given a historical context that makes those possible. Women's autonomy is often conceptualized as having three dimensions: <ol style="list-style-type: none">1. Physical autonomy: the freedom to make decisions regarding sexuality, reproduction and the right to live a life free from violence.2. Economic autonomy: the right to work and earn one's own income, distribution of paid and unpaid work between women and men.3. Autonomy in decision-making: women's participation in all branches of government, signing of CEDAW optional protocol, positioning of national machineries for advancement of women.
Child marriage	Child marriage refers to any formal marriage or informal union between a child under the age of 18 and an adult or another child.
Consent	<p>"No" means No. "Yes" means Yes. Consent is an agreement between participants to engage in sexual activity or enter into marriage. It must be freely and actively given and cannot be provided by someone who is under the influence of drugs or alcohol or by someone underage. Consent is specific, meaning that consent to one act does not imply consent to any others, and reversible, meaning it may be revoked at any time.</p> <p>The right to marry with <i>full, free and informed consent</i> is enshrined in the Universal Declaration of Human Rights. A child aged under 18 years is considered unable to provide such consent. However, committees for the Convention on Elimination of Discrimination Against Women (CEDAW) and Convention on the Rights of the Child (CRC) have recognized the right of a person under 18 years to marry under specific circumstances, namely: the child is over 16 years of age and exercises full, free and informed consent; and the decision is made by a judge, based on maturity, rather than culture and tradition.</p>
Early union	An inclusive term that includes child marriage and cohabitation with intimate partner under the age of 18 years.

Empowerment

The empowerment of women and girls concerns them gaining power and control over their own lives. It involves awareness-raising, building self-confidence, expansion of choices, increased access to and control over resources and actions to transform the structures and institutions which reinforce and perpetuate gender discrimination and inequality. This implies that to be empowered they must not only have equal capabilities (such as education and health) and equal access to resources and opportunities (such as land and employment), but also have the agency to use these rights, capabilities, resources and opportunities to make strategic choices and decisions (such as is provided through leadership opportunities and participation in political institutions).

Forced marriage

Forced marriage is a marriage in which one and/or both parties have not personally expressed their full and free consent to the union.

Gender

A social and cultural construct, which distinguishes differences in the attributes of women and men, girls and boys, and accordingly refers to the roles and responsibilities of women and men. Gender-based roles and other attributes, therefore, change over time and vary with different cultural contexts. The concept of gender includes the expectations held about the characteristics, aptitudes and likely behaviours of both women and men.

Gender-based violence (GBV)

GBV is an umbrella term for any harmful act that is perpetrated against a person's will and that is based on socially ascribed (gender) differences between females and males. The nature and extent of specific types of GBV vary across cultures, countries and regions. Examples include sexual violence, such as sexual exploitation/abuse and forced prostitution, domestic violence, trafficking, forced/early marriage, harmful traditional practices such as female genital mutilation and honour killings and prevention of widow inheritance. There are different kinds of violence, including (but not limited to) physical, verbal, sexual, psychological, and socio-economic violence.

Gender discrimination

Any distinction, exclusion or restriction made on the basis of sex which has the effect or purpose of impairing or nullifying the recognition, enjoyment or exercise by women, irrespective of their marital status on the basis of equality of women and men, of human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other fields.

Gender equality

The concept that women and men, girls and boys have equal conditions, treatment and opportunities for realizing their full potential, human rights and dignity, and for contributing to (and benefitting from) economic, social, cultural and political development. Gender equality is, therefore, the equal valuing by society of the similarities and differences of women and men, and the roles they play. It is based on women and men being full partners in the home, community and society. Equality does not mean that women and men will become the same, but that women's and men's rights, responsibilities and opportunities will not depend on whether they are born female or male.

Gender norms

Gender norms are ideas about how women and men should be and act. We internalize and learn these "rules" early in life. This sets up a life-cycle of gender socialization and stereotyping. Put another way, gender norms are the standards and expectations to which gender identity generally conforms, within a range that defines a particular society, culture and community at that point in time.

Harmful practices

Harmful practices are persistent practices and behaviours that are grounded on discrimination on the basis of sex, gender, age and other grounds as well as multiple and/or intersecting forms of discrimination that often involve violence and cause physical and/or psychological harm or suffering. The harm that these practices cause to the victims surpasses the immediate physical and mental consequences and often has the purpose or effect of impairing the recognition, enjoyment and exercise of the human rights and fundamental freedoms of women and children. There is also a negative impact on their dignity, physical, psychosocial and moral integrity and development, participation, health, educational, economic and social status.

Practices are regarded as harmful if they meet the following criteria:

- a) They constitute a denial of the dignity and/or integrity of the individual and a violation of human rights and fundamental freedoms enshrined in international human rights instruments.
- b) They constitute discrimination against women or children and are harmful insofar as they result in negative consequences for them as individuals or groups, including physical, psychological, economic and social harm and/or violence and limitations on their capacity to participate fully in society or develop and reach their full potential.
- c) They are traditional, re-emerging or emerging practices that are prescribed and/or kept in place by social norms that perpetuate male dominance and inequality of women and children, based on sex, gender, age and other intersecting factors.
- d) They are imposed on women and children by family, community members, or society at large, regardless of whether the victim provides, or is able to provide, full, free and informed consent.

Informal union

Informal unions are generally defined as those in which a couple lives together for some time and intends to have a lasting relationship, but for which there has been no formal civil or religious ceremony, i.e. cohabitation.

Intimate partner violence

A pattern of assaultive and coercive behaviours – including physical, sexual, and psychological attacks, as well as economic coercion – that adults or adolescents use against their intimate partners. It includes a range of sexually, psychologically and physically coercive acts used against an adult or adolescent women by a current or former intimate partner, without her consent. Though women can be violent towards men in relationships, and violence exists in same-sex partnerships, the largest burden of intimate partner violence is inflicted by men against their female partners.

Patrilineal

Descent or inheritance through the male line.

Patrilocal

Pattern of marriage where the couple settles with the husband's family or community. Once married, a bride may not see her family again.

Participation

Participation refers to people (individually and/or collectively) forming and expressing their views and influencing matters that concern them directly and indirectly.

Power

Power involves the ability, skill or capacity to make decisions and take action, physical force or strength. The exercising of power is an important aspect of relationships. The more power a person has, the more choices are available to that person. People who have less power have fewer choices and are, therefore, more vulnerable to abuse. Several kinds of power are involved in the empowerment process:

Power over: Mutual and exclusive relationship of domination or subordination, which implies that power only exists in limited quantity. This power is exerted over someone or, in a less negative way, allows someone to “be guided.” It triggers passive or active resistance.

Power to: Is about being able to act. It can begin with the awareness that it is possible to act, and can grow in the process of taking action, developing skills and capacities, and realizing that one can effect change.

Power with: Social or political power which highlights the notion of common purpose or understanding, as well as the ability to get together to negotiate and defend a common goal (individual and collective rights, political ideas such as lobbying, etc.). Collectively, people feel they have power when they can get together and unite in search of a common objective, or when they share the same vision.

Power within: Describes the sense of confidence, dignity and self-esteem that comes from gaining awareness of one’s situation and realizing the possibility of doing something about it. This notion of power refers to how individuals, through self-analysis and internal power, can influence their lives and make changes.

Sexual activity

Physical contact of a sexual nature.

In the context of this paper, the term “sexual activity” generally refers to sexual intercourse involving an adolescent girl and a man or adolescent boy.

Sexual debut

Had first sexual intercourse.

Sexual exploitation

Any actual or attempted abuse of a position of vulnerability, differential power or trust for sexual purposes including, but not limited to, profiting monetarily, socially or politically from the sexual exploitation of another.

Social development

Development is a comprehensive economic, social, cultural and political process, which aims at the constant improvement of well-being of the entire population and of all individuals on the basis of their active, free and meaningful participation in development and in the fair distribution of the benefits resulting therefrom. Inclusive social development encompasses a wide range of issues including, but not limited to: poverty eradication, reduction of inequalities, employment generation, promotion of cooperatives, family, role of civil society, older persons and ageing, youth, disability and indigenous peoples.

Trafficking

The recruitment, transportation, transfer, harbouring or receipt of persons by means of the threat or use of force or other forms of coercion, abduction, fraud, deception, abuse of power or a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation (including, at a minimum, the exploitation of prostitution of others or other forms of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude, or the removal of organs).

Voice

Voice means the ability and confidence to articulate thoughts and emotions.

Young people

Young people are those aged 10–24 years. The term combines adolescents (10–19 years) and youth (15–24 years).

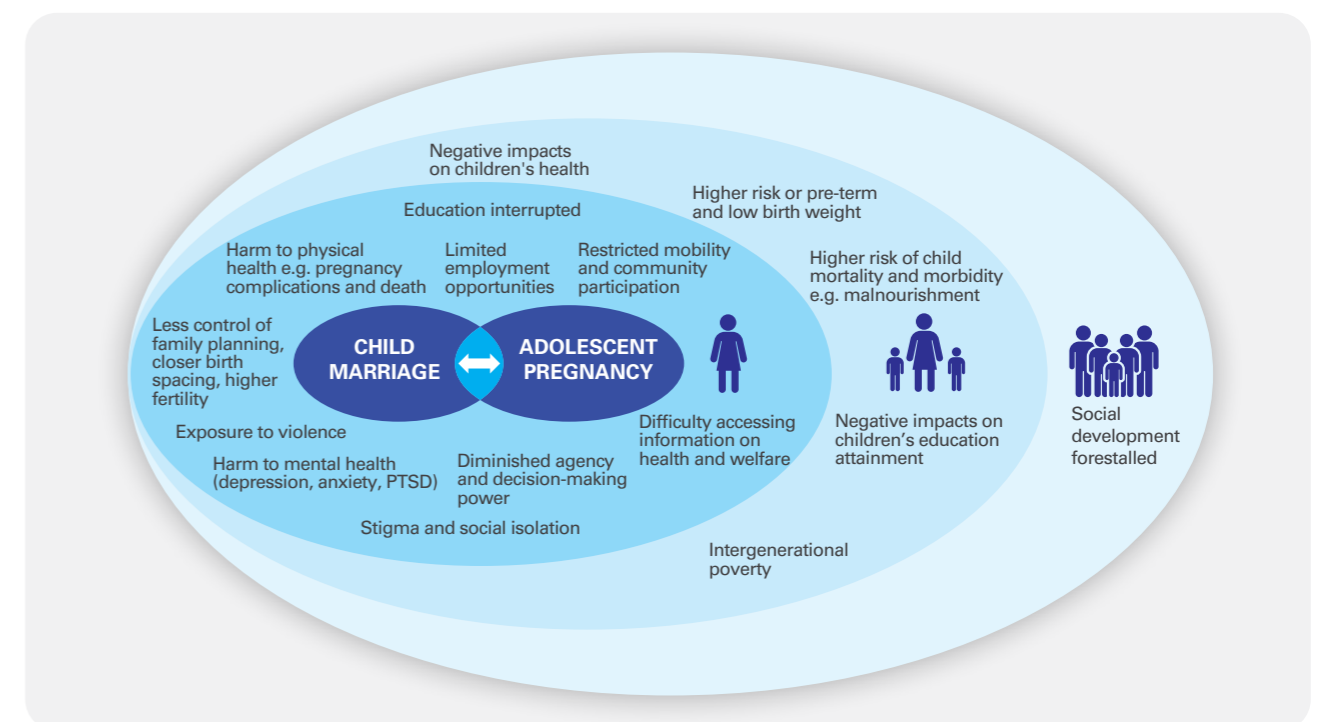
Executive Summary

This paper explores adolescent pregnancies, child marriages and early unions in Southeast Asia and the Pacific¹, by investigating their prevalence, trends, drivers, patterns and typologies. It aims to lay the foundation for a targeted approach to early pregnancy and union, so strategies can be tailored to specific situations. A second accompanying paper, *Beyond Marriage and Motherhood: Tailoring Programme Interventions for Southeast Asia and the Pacific*, provides evidence-based recommendations for interventions, depending on respective drivers and contexts. These publications have been developed, by the regional offices of UNICEF and UNFPA, to advance sustainable development through action that not only addresses child marriages, early unions and adolescent pregnancies, but also empowers girls.

Need for Action

The need for action to address the issues of adolescent pregnancy, child marriage and early union is well established. Adolescence represents the passage from childhood to adulthood: a key developmental period for socialization, internationalization of gender norms, increasing agency and independence. Pregnancy or union during this important period is life-changing and can be detrimental to the health and well-being of an adolescent girl. Adolescent childbearing or marriage can compound social disadvantages for a girl and her family: disrupt her education, restrict her role to the domestic and reproductive sphere, and limit her future employment opportunities. The economic impacts carry to the next generation and wider community, as the cycle of poverty is perpetuated and social development, including progress towards equality, is forestalled.

Potential consequences of child marriage and adolescent pregnancy for a girl, her children and society



¹ Data availability has limited this analysis to the following countries: Cambodia, Indonesia, Lao PDR, Papua New Guinea, the Philippines, Thailand, Timor-Leste and Viet Nam.

Governments across the region have committed to protect children’s rights and promote gender equality, including by addressing child marriage, early union and adolescent pregnancy. They have also made commitments to respect adolescents’ evolving capacities and support them to reach their full potential, through access to education and health services. These pledges can be found in several core human rights instruments, with agreed targets and indicators detailed in the Sustainable Development Goals (SDGs). Steps taken to address early marriage and pregnancy vary greatly between countries. Core to national strategies is legislation regarding the age of consent.

Effective legislation must balance protection with respect for adolescents’ evolving capacities. There is considerable variation in the legal ages for consent to sex and consent to marriage across the region. Most countries have a lower age of consent to sex than marriage. This is advisable as it recognizes young people’s right to increasingly make independent decisions about their sexuality and relationships. Higher ages for consent to sex and/or marriage are more common in settings where adolescent sexuality is stigmatized. Such laws risk punishing young people, by raising barriers to access of sexual and reproductive health information and services, and penalizing close-in-age, consensual sexual relationships. Legislative and policy frameworks that address adolescent pregnancy and child marriage must reflect the reality of adolescent sexual behaviour, respect and support young people in their choices, not punish them.

Patterns and Typologies

Evidence from around the world generally classifies patterns of child marriage based on four key underlying factors: 1) premarital sexual activity and/or pregnancy, 2) adolescent agency and decision-making, 3) economic or transactional incentives and 4) gender norms and power relations.

Factors underlying child marriage typologies in other contexts

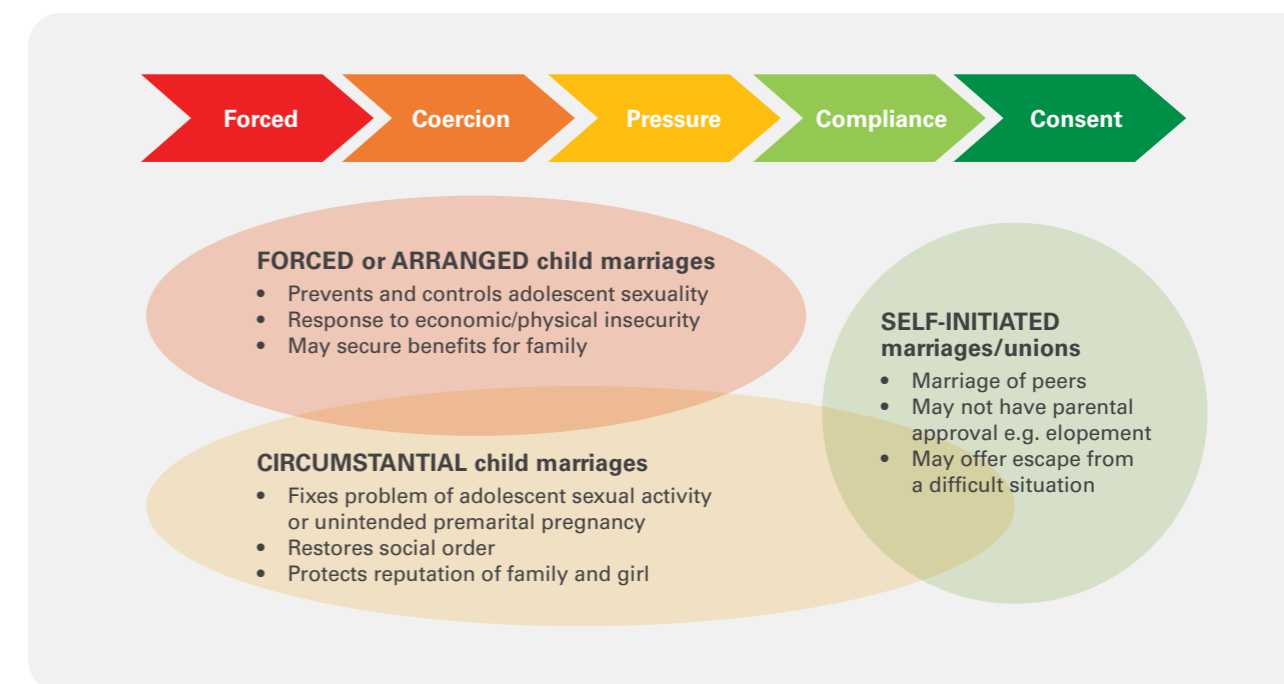
Pre-marital sexual activity and/or pregnancy	<ul style="list-style-type: none"> • Marriage as a: <ul style="list-style-type: none"> - means of controlling adolescent sexuality - protection from sexual violence - solution to premarital pregnancy, including from rape • Protects reputation and prevents shame and dishonour.
Adolescent agency and decision-making	<ul style="list-style-type: none"> • Young people decide to marry, elope or cohabit • May not have parental permission • Marriage may be: <ul style="list-style-type: none"> - seen as the best or only pathway to adulthood and independence, and/or - an escape from a difficult family situation e.g. violence.
Economic or transactional incentives	<ul style="list-style-type: none"> • Particularly relevant when there is poverty and deprivation • A girl’s marriage brings financial benefits to family • Family may benefit from bride’s/groom’s labour • Future husband may contribute to the costs of raising the girl • Shifts ‘burden’ of raising a girl to her husband or his family • Even more likely during crises, conflict and disasters.
Gender norms and power relations	<ul style="list-style-type: none"> • Young brides are perceived as more attractive and malleable • Children have a duty to respect and obey parents and elders • Power imbalances which assign girls and women less decision-making power • Lesser value of the girl child • Girls viewed as commodities • Taboos surrounding adolescent sexuality, particularly for girls • Women’s role restricted to domestic, sexual and reproductive functions • Marriage and motherhood as compulsory for women.

At a Southeast Asia and the Pacific regional level, UNICEF and UNFPA have proposed three broad patterns of adolescent pregnancy, child marriage and early union, namely:

- 1) **Forced/arranged child marriage** is generally driven by poverty, as well as by crises and shocks, and social norms that deem girls a “burden on the household”. These marriages are also a means of managing adolescent premarital sexuality and ensuring marriage precedes pregnancy.
- 2) **Self-initiated marriage** is when young people decide to marry, elope or cohabit to have a sexual or “love” relationship. Taboos around premarital sex and social pressure may encourage young people to choose to marry. Marriage may also be seen as a pathway to adulthood or an escape from a difficult family situation.
- 3) **Circumstantial child marriage** is a response to premarital pregnancy and/or adolescent sexual activity. It is a means of protecting the girl’s and family’s reputation and may also be used to resolve pregnancy resulting from sexual violence.

The extent to which there is consent is particularly important to identifying harm in child marriages. Arranged and forced marriages lack meaningful consent and violate a girl’s human rights. In contrast, a self-initiated union may represent girls’ agency and evolving capacities, although she may not always have the necessary knowledge to give full, free and informed consent. Circumstantial marriages, in contrast, can span the breadth of the consent continuum – from force to compliance and consent. These differing typologies require tailored approaches, to address their underlying drivers.

Levels of consent in differing patterns of child marriage and early union



Prevalence and Trends

In Lao PDR 1-in-3 women

(aged 20–24 years) were married before 18 years of age



1-in-4 in Papua New Guinea



1-in-5 in Cambodia and Thailand



Across Southeast Asia and the Pacific, there is considerable heterogeneity in the situation for adolescent pregnancy, child marriage and early union.² Many girls enter marriage or union before 18 years of age, but rates vary considerably between countries from 11–33 per cent. The highest rates of child marriage/early union are seen in Cambodia, Lao People’s Democratic Republic (PDR), Papua New Guinea and Thailand. In many settings, progress towards addressing child marriage is stalling. Across the two most recent surveys, child marriages and early unions have not significantly declined in Cambodia, Indonesia and Viet Nam, while rates have actually increased in the Philippines.

Rates of adolescent childbearing also vary considerably across the region: 5–18 per cent of women aged 20–24 years reported childbirth before 18 years of age, with the highest prevalence in Lao PDR and Papua New Guinea. While rates of adolescent childbearing have declined in a few countries – including Cambodia and Indonesia – over the past decade there has only been a significant reduction in Thailand.

Analysis presented in this paper indicates a significant proportion of adolescent pregnancies are conceived before marriage and appear to be driving circumstantial child marriages across the region. Most women, who conceive premaritally in adolescence, are married or in-union by the time their child is born. This first-of-its-kind analysis suggests child marriage may be being used to solve the ‘problem’ of unintended adolescent pregnancy.

Only Thailand has seen significant declines in adolescent childbearing over the past decade

In most countries rates of premarital conception are increasing

Premarital pregnancies among ever-married/in-union women (aged 20–24 years) who gave birth before 18 years of age:	
1-in-3 in Papua New Guinea, the Philippines, Thailand and Viet Nam	
1-in-4 in Indonesia and Lao PDR	
1-in-5 in Timor-Leste	
Proportion of ever-married women (aged 20–24 years) who conceived premaritally, but were married/in-union by childbirth	
9-in-10 in Indonesia	
8-in-10 in Cambodia and Timor-Leste	
7-in-10 in Papua New Guinea and the Philippines	
6-in-10 in Lao PDR and Thailand	

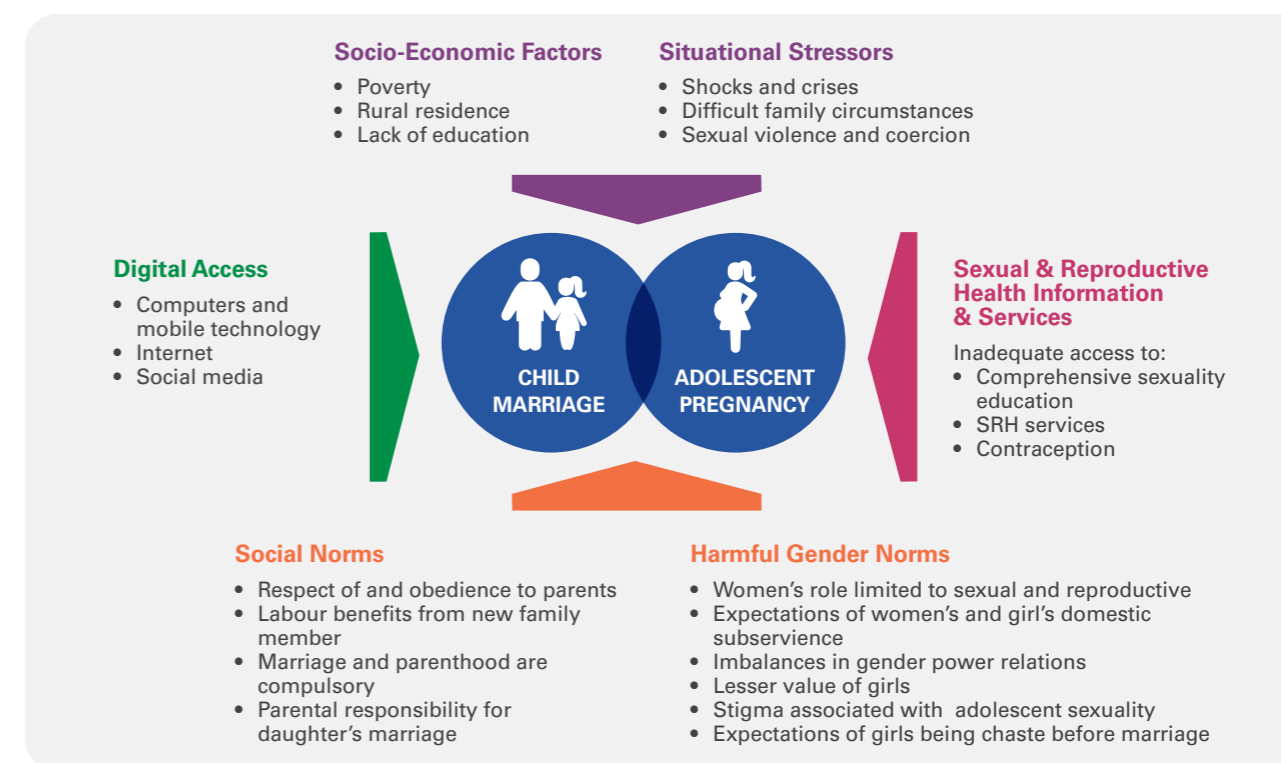
² This analysis utilizes latest data from women’s individual questionnaires in Demographic and Health Surveys (DHS) and Multiple Indicator Cluster Surveys (MICS) between 2014–2019. See Methodology for more information.

Context and Determinants

The drivers of adolescent pregnancy and child marriage are complex and inter-related. While there are universal drivers, their contributions and resulting situations vary across countries. To effectively reduce early marriages and pregnancies, strategies must be designed to meet specific drivers and patterns in each context.

Gender norms, that stigmatize adolescent sexuality and limit women to domestic and reproductive roles, underpin marriage and motherhood as central to a girl’s transition to adulthood. Developmentally normal sexual activity, combined with lack of access to sexual and reproductive health information and services, can not only result in adolescent pregnancy – but may also drive child marriage or early union. An unintended pregnancy may trigger a circumstantial marriage, to protect the honour of the girl and her family. Harmful social norms that deprive women of agency, support unequal gender power relations and gender-based violence (GBV) are also key drivers of pregnancy and marriage in the teenage years. Socio-economic factors, such as poverty and lack of education, are associated with and also perpetuated by early marriage and childbirth.

Context and determinants of adolescent pregnancy and child marriage



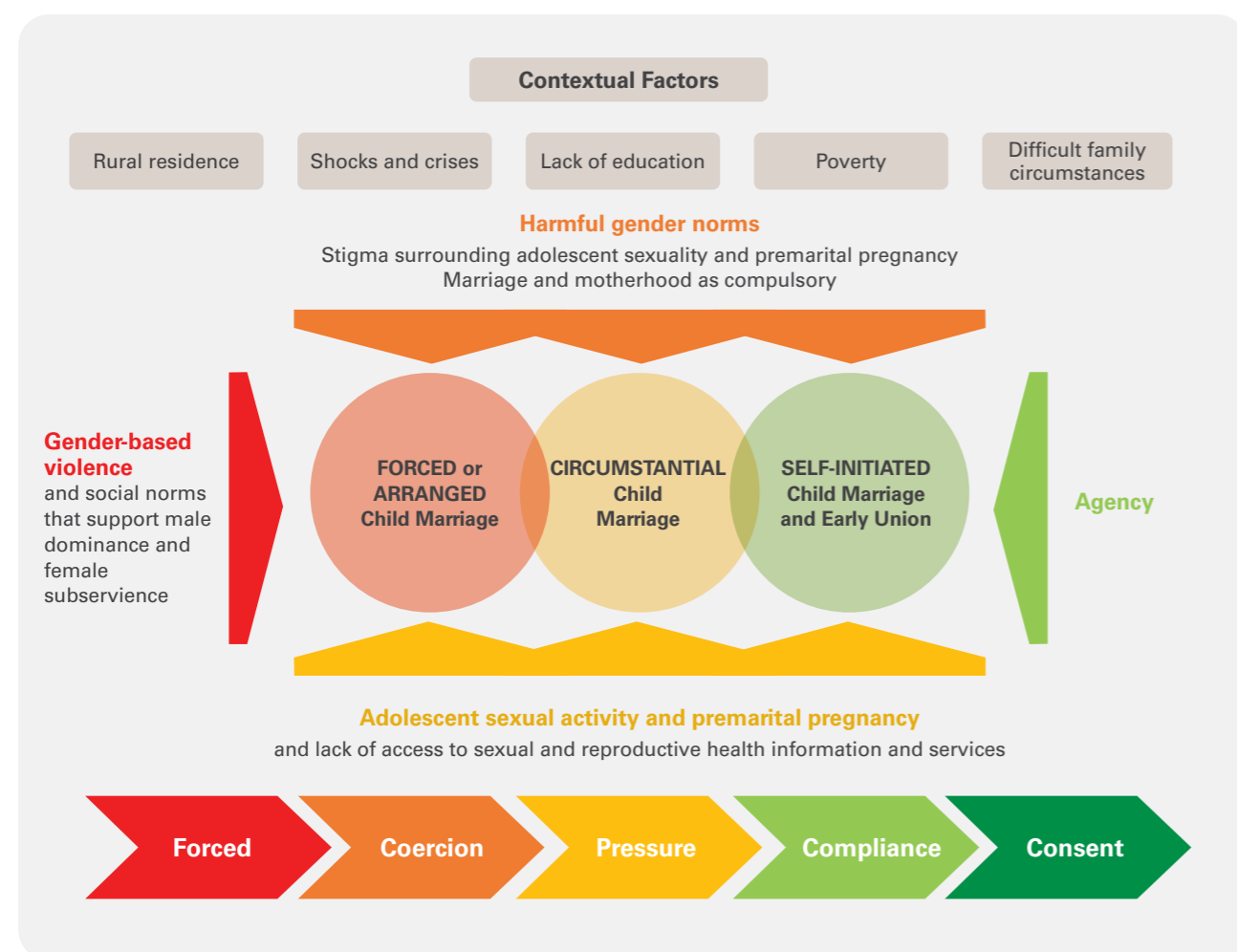
In Summary

This analysis highlights the heterogeneity in adolescent pregnancies, child marriages and early unions across the region. While it was not possible to determine the prevalence of the three proposed types of child marriages and early unions, the features and patterns of adolescent unions may provide some clues. For example, settings where spousal age gaps are large and adolescent sexuality is highly stigmatized may have a greater propensity for forced or arranged marriages. Peer relationships and consensual sexual activity among unmarried adolescents girls may be an indicator of self-initiated unions. Premarital or unintended/mistimed pregnancies, including as a result of sexual violence and coercion, followed by marriage before birth, is suggestive of circumstantial marriages/unions. Viewing the analysis through this lens provides an opportunity to reflect on the potential for differing patterns of marriages and unions in the region, at both country and sub-national levels.

The differing observed patterns of adolescent pregnancies, child marriages and early unions require different intervention strategies. There is a need for governments, health systems, communities and families to adapt to the reality of young people's lived experience. Barriers which impede young people's access to sexual reproductive health information, services and contraception must be addressed, with a focus on unmarried adolescents. Alternative pathways to adulthood, other than marriage, must be available to adolescents: investment in girls' education and employment opportunities is key. Young people need to understand their rights, options and the potential consequences of early marriage and pregnancy. For an adolescent girl to marry early, she must have options and agency in order to provide meaningful, free and informed consent.

First and foremost, there is a need for further research to better understand the differing patterns of adolescent pregnancies, child marriages and early unions observed in the region. Quantitative and qualitative studies should be undertaken, across and within countries, to understand the context, determinants and consequences of different types of marriages/unions. In particular, research should explore the decision-making processes, degree of agency and consent, circumstances and external pressures surrounding marriages/unions and how these factors impact girls' well-being. Also, it is pivotal to understand the degree to which adolescent sexuality and premarital pregnancy drive early marriages/unions in the region. This information will be key to programmatic responses to address child marriage and early union, so that efforts to protect children and adolescents are balanced with respect to their evolving capacities.

Context, determinants and level of consent for proposed typology of child marriages/early unions



To learn more about strategies to address differing patterns and types of child marriage, early union and adolescent pregnancy, please see the second paper in this series, *Tailoring Programme Interventions for Southeast Asia and the Pacific*.



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Introduction

Adolescence is a period of rapid biological, cognitive and psychosocial development and a critical time of transition from childhood to adulthood.(1,2) Yet across Asia and the Pacific, this crucial period is disrupted for many girls, by motherhood or marriage.³ A pregnancy, marriage or union during adolescence can have profound and life-long consequences for a girl, including negative impacts on her health and well-being, and that of her children.(3–6) When a girl becomes pregnant, before aged 18, she is unlikely to be physically, emotionally, or socially ready for motherhood.(6,7) Childbearing in early adolescence, in particular, risks adversely affecting a girl's development, including her physical and mental health. It is not only the adolescent girl that is affected: the negative impacts are frequently passed on to her children.(3,5,8–10) Early marriage, union and childbearing are also likely to compound social disadvantages for the girl and her family: disrupt her education, restrict her role to the domestic and reproductive sphere, and limit her future employment opportunities.(3,11,12) The economic impacts carry to the next generation and wider community, as the

cycle of poverty is perpetuated and social development⁴ including progress towards equality, is forestalled.(3,8,13)

Across Southeast Asia and the Pacific, governments have committed to addressing adolescent pregnancies, child marriages and early unions.(14–17) While many countries made significant advances at the beginning of the millennium, for most, progress over the last decade has stalled (see Chapter 3 for detailed analysis). Recent estimates suggest more than three million young women, in Southeast Asia, were married or in-union before the age of 18, with several countries having amongst the highest numbers of child marriages and early unions in the world.(18) Adolescent fertility rates in the sub-region not only exceed the global average, but are more than double that of the wider East Asia and the Pacific region (see Annex Table 1).(19) The stagnation in progress also stands in stark contrast to declines in adolescent pregnancy seen in other parts of the world, such as South Asia where the adolescent fertility rate is now 60 per cent less than that of Southeast Asia and half that of the Pacific.(6)

³ There are also negative impacts for boys from early marriage and fatherhood. However, this paper focuses predominantly on the situation, consequences and interventions for adolescent girls, as they are disproportionately affected.

⁴ See Glossary for a description of social development.

In the final decade for the Sustainable Development Goals (SDGs), ambitious action is required to close the gaps and achieve gender equality.(20) Addressing child marriages and early unions, reducing adolescent pregnancies and empowering adolescent girls are key to achieving sustainable development, as well as being SDG targets themselves. Urgent and targeted action will be required for nations to meet their goals. The imperative for action has reached a critical juncture, as the COVID-19 pandemic exacerbates gender inequality and threatens progress made in past decades to reduce early marriages and pregnancies.

Strategies and interventions are needed to address the drivers of adolescent pregnancy, child marriage and early union. Many complex and interlinked factors are involved, and their contribution will differ between settings. Gender inequality and harmful norms that deprive girls of agency, stigmatize adolescent sexual activity, and promote marriage as the main pathway to adulthood, are key drivers.(3,4,7,21) Other factors that may contribute include lack of access to sexual and reproductive health information and services, poverty, lack of education, shocks and crises. Child marriage, itself, can also be a consequence or cause of adolescent pregnancy.

Early marriage, union and childbearing are also likely to compound social disadvantages for the girl and her family: disrupt her education, restrict her role to the domestic and reproductive sphere, and limit her future employment opportunities

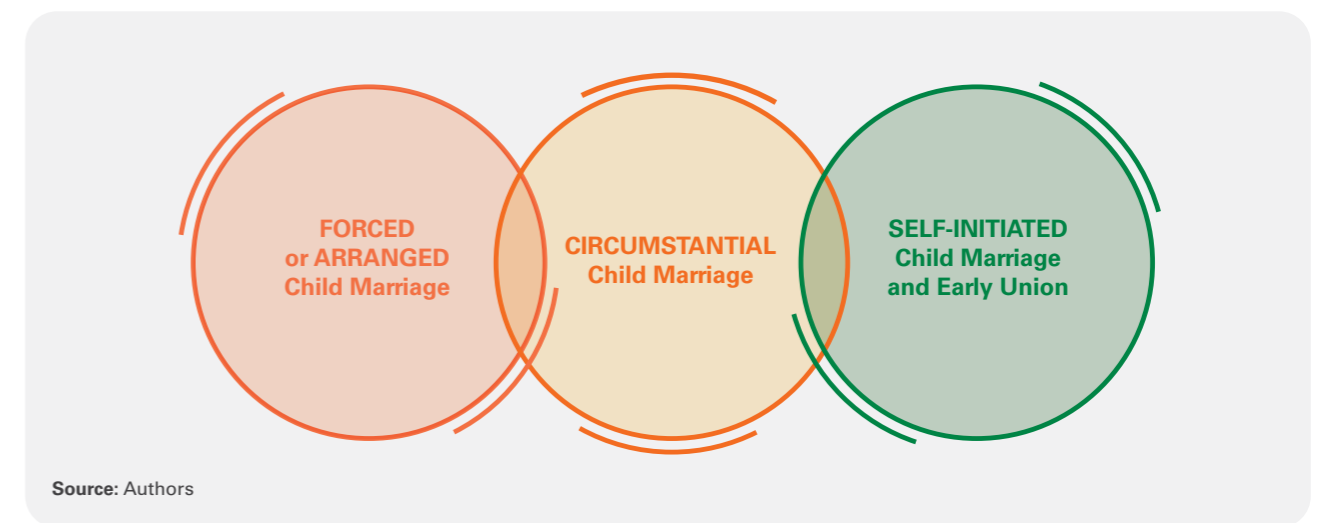


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At a regional level, UNICEF and UNFPA have proposed a typology for child marriage and early union in Southeast Asia and the Pacific (see Figure 1). Three broad types of early marriage and union, are suggested, based on key drivers:

1. **Forced/arranged child marriages** are generally driven by poverty, as well as by crises and shocks, and social norms that deem girls a “burden on the household”. These marriages are also a means of managing adolescent premarital sexuality and ensuring marriage precedes pregnancy.
2. **Circumstantial child marriages** are a response to premarital pregnancy and/or adolescent sexual activity. They are a means of protecting the girl’s and family’s reputation and may also be used to resolve pregnancies resulting from sexual violence.
3. **Self-initiated marriages/early unions** are when young people decide to marry, elope or cohabit to have a sexual or “love” relationship. Taboos around premarital sex and social pressure may encourage young people to choose to marry. Marriage may also be seen as a pathway to adulthood or an escape from a difficult family situation.

Figure 1 Typology proposed for child marriage and early union in Southeast Asia and the Pacific



This paper explores the issues of adolescent pregnancy, child marriage and early union in Southeast Asia and the Pacific, by investigating the prevalence, trends, patterns, drivers, and the proposed typology. It begins with building the case for action to address adolescent pregnancy and child marriage by: i) establishing the importance of adolescent development for well-being in life, ii) discussing the consequences of early marriage and childbearing and iii) summarizing government commitments and legislation. The next chapter examines evidence for patterns of early pregnancy and marriage,

and the typology proposed for child marriages and early unions in Southeast Asia and the Pacific. The third chapter analyzes data of adolescent pregnancies and premarital conception, child marriages and early unions for eight selected countries in the region, while the final chapter discusses the context and determinants. The goal of this paper is to lay the foundations for a targeted approach to adolescent pregnancies, child marriages and early unions in the region, so that guidance for governments and civil society on strategies and interventions is tailored to specific situations.

Methodology

The purpose of this paper is to establish the evidence for differing patterns of adolescent pregnancy and child marriage, in Southeast Asia and the Pacific, to support targeted strategies and interventions by governments and other stakeholders. It should be noted that this paper does not represent a comprehensive literature review of all consequences or drivers of child marriage, early union and adolescent pregnancy, but rather aims to provide context for the proposed typology.

The data analysis in this paper utilizes the latest findings from women's individual questionnaires in the Demographic and Health Surveys (DHS), funded by USAID, and the UNICEF Multiple Indicator Cluster Surveys (MICS), for countries from Southeast Asia and the Pacific. Country selection was based on availability of DHS and MICS data that enabled pattern analysis for premarital pregnancy and child marriage, explored later in this paper. The countries selected have: i) high rates of child marriage and early union and/or adolescent pregnancy, ii) recent data and iii) sample sizes sufficient to allow for premarital analysis. These criteria excluded many Pacific countries which lack recent survey data and/or have small sample sizes.

It should be noted that the most recent survey years vary from 2014 (Cambodia and Viet Nam) to 2019 (Thailand) (see Table 1). Where available, data from earlier surveys was used to construct trend analysis. In some, instances the lack of very recent data may limit analysis. This is particularly relevant with the current COVID-19 crisis exacerbating gender inequality around the world. The increasing rates of adolescent pregnancy, child marriage and early union, anecdotally reported in some settings, have not been captured in the following analysis, as there have been no recent surveys.(22,23)

Data was considered for adolescent girls aged 15–19 years and young women aged 20–24 years at the time of survey. Both data sets have their limitations. Surveys questioning girls, aged 15–19, about current pregnancies and previous live births, paint an incomplete picture of the situation, as they may still subsequently conceive and give birth before turning 19. Data for women aged 20–24 years, regarding live births before the age of 18, is complete – but also less recent. The following analysis will consider surveys of both cohorts, however, it should be noted that while data from girls aged 15–19 years includes childbearing

while aged 18–19 years, data from those aged 20–24 year does not. A further limitation is that these surveys captured live births, but not pregnancies that ended in stillbirths, miscarriages or abortions. For this reason, data underestimate the extent of adolescent pregnancy.

To enable easy differentiation between the two age groups, those aged 15–19 years will be described as “adolescent girls”, even though those aged 18–19 years are in fact women as they have reached the age of majority. Total sample sizes ranged from 1,398 to 7,936 for adolescent girls aged 15–19 years, and 1,338 to 6,830 for women aged 20–24 years (see Table 1). The smallest samples were from Viet Nam and the largest from Indonesia.

This analysis includes consideration of confidence intervals to determine the significance of findings. It also explores some of the underlying drivers of adolescent childbearing, such as the unmet need for contraception, fertility intentions, sexual debut and experiences of sexual violence. Where applicable, estimates of adolescent childbearing, child marriage union and premarital conception were computed and disaggregated by socio-economic characteristics for each country. Analysis was conducted using Stata version 14.0 SE and survey weights were applied to account for the complex survey designs of DHS and MICS.

Data for child marriages/early unions includes formal marriages and informal unions. Informal unions are generally defined as a couple cohabiting for a period of time, with the intention to have a lasting relationship, without a formal civil or religious ceremony.(32) Some country surveys did not differentiate between formal, legal marriages and informal unions, and categorize any union as a marriage. During the course of discussions within this paper, the terms child marriage/early union will be used interchangeably with early marriage and union. However, strictly speaking the definition of early marriage is a union below the legal age of consent to marriage, which varies between countries. In some instances, the legal age for consent to marriage may be older than the recommended age of 18 years. For example, several countries in Southeast Asia and the Pacific have a legal age of consent to marriage of 21 years.

Finally, this series will focus predominantly on the situation, consequences and interventions for adolescent girls. The authors acknowledge that early marriage and fatherhood also negatively affects the lives of boys, in some settings. Where possible, examples of the situation and impacts for boys have been included. However, more research is needed to better understand their experiences.

Table 1 Data sources used in the analysis of selected countries (24–31)

Country	Survey	Year (earlier survey years)	Latest sample size 20–24 years	Latest sample size 15–19 years
Cambodia	DHS	2014 (2010, 2005)	3,038	3,006
Indonesia	DHS	2017 (2012, 2007)	6,830	7,936
Lao PDR	MICS	2017 (2011–12)	4,121	4,662
Papua New Guinea	DHS	2016–18	2,699	2,980
Philippines	DHS	2017 (2013, 2008)	3,914	5,120
Thailand	MICS	2019 (2015–16, 2012–13)	2,953	2,847
Timor-Leste	DHS	2016 (2009–10)	2,047	3,126
Viet Nam	MICS	2013–14 (2010–11, 2006)	1,338	1,398



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1.

Action is Needed to Address Adolescent Pregnancy, Child Marriage and Early Union

The chapter builds the case for action to address adolescent pregnancies, child marriages and early unions by: i) establishing the importance of adolescent development for well-being in life, ii) discussing the consequences of early marriages and childbearing and iii) summarizing government commitments and legislation to address adolescent pregnancies and child marriages in Southeast Asia and the Pacific.

1.1 Adolescence: a Period of Rapid Development and Evolving Capacity

Adolescence represents the passage from childhood to adulthood: It is a time when physical, emotional, social and cognitive resources are laid down to form a foundation for well-being in later life.(1,33,34) This time of rapid development is accompanied by hormonal changes and puberty, new and complex emotions, heightened significance of peer friendships, as well as emerging sexual awareness and gender identity.(1,2)

Adolescence is a key developmental period for socialization and the internalization of gender norms.(34) It is a time when young people develop a greater awareness of gender roles and expectations and some may use agency to act in opposition to social forces.(34) Harmful gender norms – such as those that limit a woman’s role to the sexual, reproductive and domestic spheres – can have a profound impact on the life of an adolescent girl. Positive socialization, which encourages girls’ education and empowerment,

has the potential to improve a girl’s well-being and that of her future children.

A child’s social development has a significant impact on future relationships and family formation.(35,36) It has been suggested that adolescents with insecure attachment are more likely to have children early and to be less invested in parenting.(36) However, those with secure attachment are more likely to delay parenthood and commit to long-term relationships.

Peer relationships are an important source of well-being for adolescents and young adults.(33,37) Adolescent romances are frequently not fleeting, but often lay a foundation for adult relationships which may include cohabitation and marriage.(35) They are generally not solely based on attraction and desire, but include positive facets of attachment and caregiving that include love, closeness, bonding, feelings of security, companionship, cooperation, reciprocity and support.(35) However, to enjoy these benefits, young people need certain cognitive, emotional and behavioural skills. They must also be able to make ‘autonomous’ choices about their sexuality, independent of pressure from peers, family or partners.(38)

Child marriage and adolescent pregnancy limit girls' educational and employment opportunities, perpetuating a cycle of inter-generational poverty

Adolescence is a time of evolving capacity and increasingly autonomous decision-making. While novelty-seeking and peer influences may sometimes contribute to risky choices, the teenage years are when decision-making skills and independence develop.(1,34) The opportunity to make life decisions is an important part of adolescent empowerment and the transition to adulthood.(2,33) Empowerment represents a personal journey when an adolescent develops a greater understanding of themselves, their rights and opportunities, and makes choices through agency, voice and participation.(39) A sense of agency and being empowered to make decisions about their lives and relationships is important for well-being in adolescence.

The adolescent transition is an important contributor to health, happiness and well-being in adulthood. Many factors can derail this key period in development and alter the life course for an individual. In the case of an adolescent girl, early pregnancy, marriage or union can be particularly disruptive and potentially harmful to long-term well-being as it invariably limits empowerment, education and life opportunities.

1.2 Consequences of Adolescent Pregnancy, Child Marriage and Early Union

The consequences of adolescent pregnancy, child marriage and early union are life-changing and can be detrimental to the well-being and development of an adolescent girl. An unintended pregnancy in adolescence can result in stigma, social isolation, school expulsion, forced marriage and in some instances, violence and suicide.(6) Child marriage, in turn, is associated with increased risks of early pregnancy, social isolation, depression and GBV, as well as diminished agency, educational achievement and socio-economic opportunities.(3-6) It should be noted, however, that most research on child marriage has focused on traditional, arranged and forced marriages in Africa and

South Asia. More research is needed to determine whether the diverse types of marriage/union identified in Southeast Asia and the Pacific have similar impacts.

Education and Economic Impacts

Child marriage, early union and adolescent pregnancy can force girls to leave school and conform to traditional gender roles, making them responsible for childcare and housework.(3,11,12) Girls may question the usefulness of education when they anticipate early marriage and this can contribute to poor performance and school drop out.(4) Married girls and teenage mothers also face significant barriers to continuing their education and returning to school once they have dropped out.(6) These girls often experience restricted independence and mobility and may be discouraged from going to school or working outside the home. Lack of education also deprives girls of a voice, and can impact their social skills and support systems.(3)

Out-of-school girls miss out on acquiring knowledge and skills which negatively affects their future employment opportunities, economic participation and income potential.(3,8,40) These impacts are often passed on to the children of young mothers, who are themselves more likely to drop out of school.(3) While child marriage is often perceived as a way out of poverty and a means to defray the cost of raising and supporting daughters, child marriage actually perpetuates the cycle of poverty across generations.(3,8,13).

Child marriages are more likely to end in separation and divorce.(4,10) This is despite social norms that discourage and shame divorce, and power imbalances which make it particularly difficult for girls to leave.(4) While informal unions are considered less stable in some settings, marriages triggered by an unintended adolescent pregnancy may also flounder.(10,41) For most, divorce and separation force women and their children further into poverty.

Adolescent pregnancy can negatively impact the health and well-being of a girl and her children



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Agency and Gender Inequality

Marrying early in life can deprive girls and young women of agency: the younger girls marry, the less decision-making power they tend to have in marriage.(3,10,21,40,42) In some settings, younger brides are seen as more desirable as they are presumed to be more obedient, malleable, and accepting of male dominance in marriage.(21,43,44) These expectations support unequal power relations and harmful gender norms which entrench women's role as subservient and submissive to her husband.(21) The husband and his family may control many aspects of the young wife's life including her mobility, household spending, sexual activity, use of contraception and birth spacing (3) Unequal gender power relations also occur outside of marriage: research on adolescent pregnancy in Thailand found girls lacked negotiating power with the father of their child and this prevented use of contraception.(45) In addition, options for a pregnant girl's future were predominantly directed by her parents and those of the child's father; the girl had little decision-making power.

A very young bride is more likely to be poor, uneducated and have a considerably older spouse – factors that contribute to reduced agency.(21,46,47) Large spousal age gaps have been associated with greater sexual risk behaviour and less use of condoms and contraception.(48,49) In contrast, narrow spousal age gaps, as seen in peer relationships, are associated with more decision-making power for women and use of contraception.(49,50)

Health and Well-being

Child marriage is associated with early child-bearing, higher overall fertility, closer birth spacing and less control of family planning.(4) Early childbearing and rapidly repeated pregnancies can increase the risk of adverse outcomes, including death, for mother and child.(3,9,10,51) Young adolescent girls are at greater risk of complications such as eclampsia and systemic infections and, in some settings, are less likely to receive quality prenatal and maternal care.(7,9) Complications from pregnancy and childbirth are the leading cause of death among adolescent girls (15-19 years) in the Pacific (23 deaths per 100,000 girls) and the third leading cause in Southeast Asia (three deaths per 100,000).(6)

Children of teenage mothers are at higher risk of mortality and morbidity than those of adult mothers, including increased risk of pre-term birth and low birth weight.(3,5,8–10) Young, less educated mothers have more difficulty accessing health information, and this negatively impacts their health and that of their children as well as contributes to higher risk of childhood malnutrition and lower rates of immunization.(3,9,10,40) Poor childhood nutrition can go on to negatively impact the child’s educational attainment and health into adulthood.(3)

Abortion of an unintended pregnancy can also negatively impact girls’ health and well-being. In Asia, an estimated 65 per cent of unintended adolescent pregnancies end in abortion.(6) However, in many countries, abortion is illegal or heavily restricted. These restrictions coupled with social stigma and sanctions, drive unsafe abortions among unmarried adolescent girls. In Southeast Asia, 40 per cent of abortions are estimated to be unsafe.(6) These abortions are conducted by unskilled providers and/or using unsafe methods which increase the risk of morbidity and mortality.

An unwanted adolescent pregnancy or forced child marriage can negatively impact a girl’s mental health and may lead to attempted or completed suicide.(41) Severe isolation and mental health problems are more common among child brides, as they shoulder the burden of marital responsibilities at an early age.(3,4,10) Associated mental disorders can include post-traumatic stress disorder, emotional distress, anxiety and depression.

Child brides are at increased risk of intimate partner violence (IPV), including physical, emotional and sexual violence.(3,5,40,52,53) Younger brides, who have less agency in relationships, are particularly at greater risk of IPV.(21,42,54) Girls who experience such violence are more likely to have poor physical health outcomes: severe injury, chronic pain and sexual and reproductive health (SRH) issues such as unintended pregnancy, induced abortion, pregnancy complications and sexually transmitted infections. Added to which, a young bride may not only suffer abuse from her husband, but also his family.(3) Social norms which devalue girls and drive child marriage promote the acceptance of this violence.(3)



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Teenage Fathers and Husbands

An unplanned pregnancy also has a profound impact on the life of a teenage father. Research indicates that boys who become fathers in adolescence face negative social judgement and strong pressure to marry.(57–61) Young fathers report losing autonomy in their life decisions and feeling unsupported. While a boy’s family may provide economic, financial and nutritional support for the young couple, it is with the caveat they comply with social expectations, obey their parents and marry.(57,58,60)

Boys report experiencing guilt, shame and anxiety over impending fatherhood.(57,58,61) They also worry about their new responsibilities, particularly caregiving for the child and the expectation to financially provide for the young family.(57,59,61) Young fathers express disappointment at lost employment and education opportunities, as they often drop out of school and take on low paid work.(57,58) Circumstantial marriages following an unplanned pregnancy can also lead to arguments and abuse between spouses. Combined, these stressors likely contribute to the deterioration in mental and physical health reported by young fathers, including symptoms of depression, use of alcohol and cigarettes, and weight gain.(57)

“Now I can say it is kind of a disaster and sometimes I just get stuck because of having problems with money, jobs, her [wife], her family, my friends and even other people. They are all just giving me problems at the same time.”

18-year-old father of a three-month-old infant, Indonesia(58)

A pregnancy or marriage in adolescence can profoundly disrupt a girl’s well-being and life course. The negative impacts may be greatest when a girl lacks agency, is very young, forced to marry or has an unwanted pregnancy. There is significant stigma associated with premarital adolescent childbearing across countries, with unmarried adolescent mothers exposed to shame, exclusion and discrimination. Many girls reported regret for early unions and pregnancies, even when consensual or intended, due to lost life opportunities.(21,55,56) The potential harms of early union and pregnancy have led governments to commit to empower girls and protect their rights, by addressing child marriage and reducing adolescent pregnancies. These commitments and legislation related to legal ages of consent are discussed further in the next section. Strategies that governments and civil society may utilize, to prevent adolescent pregnancy and child marriage/early union or to address negative consequences, are discussed in an additional paper on programme interventions.

for Goal 5, to achieve gender equality and empower all women and girls. Harmful practices violate an individual’s human rights and deny them fundamental freedoms, including dignity and integrity.(62) They are often associated with serious forms of violence and can themselves constitute a form of violence against women and children. For example, child marriage can lead to IPV and, in instances where the union is forced or without consent, child marriage itself is considered a form of GBV.

Monitoring of adolescent pregnancy falls under SDG 3, to ensure healthy lives and promote well-being for all at all ages. The target ensures universal access to SRH services, information and education. Access to SRH services and information is necessary not only to protect and improve the health of adolescents, but also to respect their evolving capacity to increasingly take responsibility for decisions that affect their lives.(63,64)

Commitments relevant to child marriage are enshrined in several core human rights instruments, including the Universal Declaration of Human Rights (UDHR), Convention on the Rights of the Child (CRC) and Convention on Elimination of Discrimination Against Women (CEDAW).(15,16,63–65) The UDHR provides that “...men and women of full age...” have the right to marry with “full, free and informed consent.” CEDAW states that men and women have the “same right to enter into marriage,” with free and full consent, and that “all necessary action, including legislation shall be taken to specify a minimum age

1.3 Commitments and Legislation

Government Commitments

The Sustainable Development Goals (SDGs), agreed by all Member States, include specific targets and indicators for child marriage and adolescent pregnancy (see Table 2).(20) The elimination of harmful practices – including child, early and forced marriages – is a priority

Table 2 SDG targets and indicators for child marriage and adolescent pregnancy

5 GENDER EQUALITY ♀♂	Target 5.3 Indicator 5.3.1	By 2030, eliminate all harmful practices, such as child, early and forced marriage Proportion of women aged 20–24 years who were married or in a union before age 15 and before age 18
3 GOOD HEALTH AND WELL-BEING ⚡❤️	Target 3.7 Indicator 3.7.2	By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes Adolescent birth rate (aged 10–14 years; aged 15–19 years) per 1,000 women in that age group

Source: Adapted from the Global Indicator Framework for the Sustainable Development Goals and targets of the 2030 Agenda for Sustainable Development.(20)

Respect for young people’s evolving capacities includes their increasing right to make decisions about their health, sexuality and family life

for marriage.” (16,65) It further specifies the need for a woman to have “the capacity to understand the meaning and responsibility of marriage; access to full information about her future spouse; knowledge of the institution of marriage; and her right to exercise a choice as to whether or not to marry, who to marry and when to marry.” Early marriages undermine a number of rights guaranteed by the CRC, including the right to education, protection from violence, sexual abuse and exploitation, and the right to not be separated from their parents against their will. (15, 65) With the committees for the CEDAW and CRC having assessed children under 18 years to be generally incapable of consent, child marriage is also considered forced. (62) There are, however, exceptions to this rule.

The CEDAW and CRC committees recognize the right of a person under 18 years to marry under specific circumstances, namely: the child is over 16 years of age and exercises full, free and informed consent; and the decision is made by a judge, based on maturity, rather than culture and tradition. In this way, the committees have recognized that marriage or union of an adolescent under the age of 18 years does not always constitute a violation of child rights. Recognition of a young person’s potential for informed decision-making and consent aligns with respect for their evolving capacities.

The CRC recognizes the need to balance protection with evolving capacity (Article 5). While children are entitled to protection from harm, violence and exploitation, they also have a right to be active agents in their own lives (see Figure 2). (63,66) Young people are entitled to be listened to, respected and granted increasing autonomy in the exercising of rights in accordance with their developing capacity, including in decisions regarding their relationships, health, sexuality and family life. (67,68)

Determination of the legal age for sexual consent is an important example of balancing protection with respect for evolving capacity. Young people have a right to increasing agency in decision-making about matters that directly affect their lives, including their health, body, and relationships. (63,64) This includes the sexual and reproductive freedom to

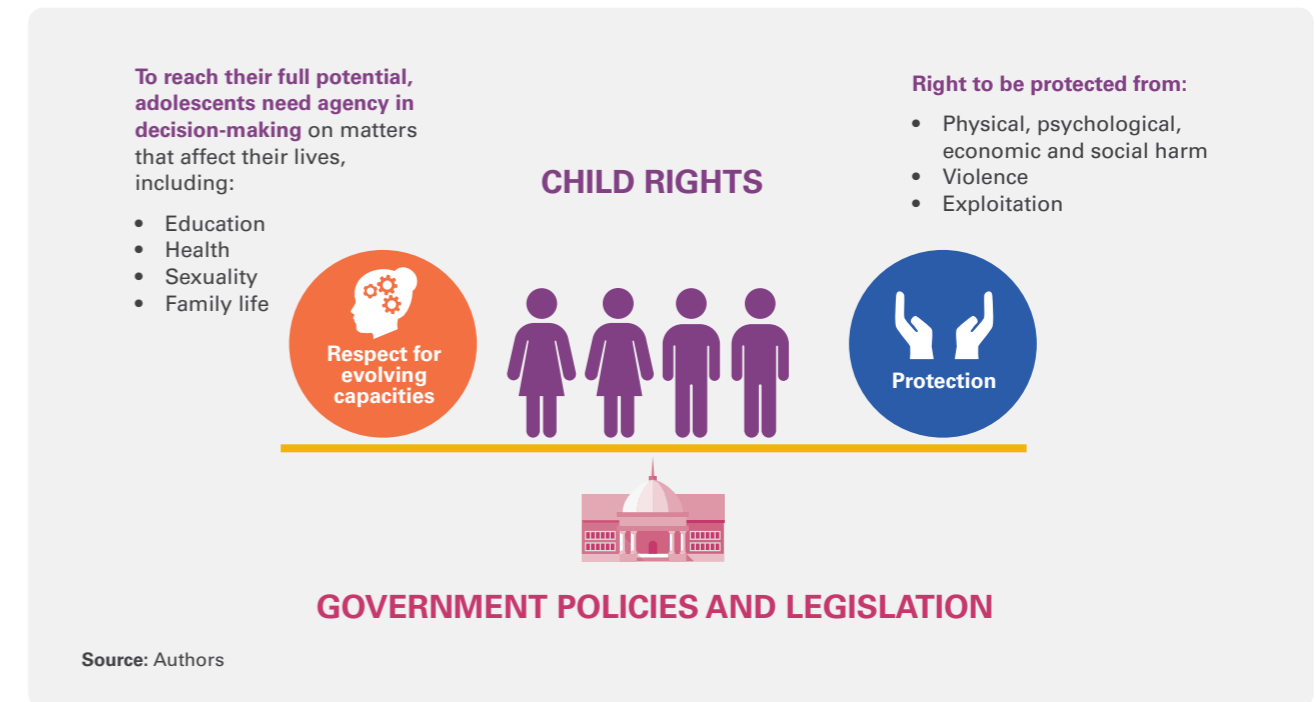
make responsible choices. (64) The CRC calls on States to “avoid criminalizing adolescents of similar ages for factually consensual and non-exploitative sexual activity.” (63) In some countries, with conservative social norms, parents may use sexual consent laws to break up own-choice marriages and stop consensual sexual activity between adolescents. (69)

CEDAW and CRC both recognize the importance of access to SRH services for adolescent girls and young women. (62) The respective committees have called on Member States to ensure that “adolescents have access to accurate information about sexual and reproductive health and rights” and access to adequate and confidential services. CEDAW has further called for adolescents to be provided SRH education by properly trained personnel, in programmes designed to respect their privacy. (70) In reference to globally high rates of adolescent pregnancy, the CRC has called on Member States to ensure young people’s access to SRH information and services, promote adolescent girls’ autonomous and independent decision-making, and ensure non discrimination in returning to school following childbirth. (63,64) The CRC has also called for access to contraception, comprehensive sexuality education, safe abortion and post-abortion services and access to SRH services information, for married and unmarried adolescents, without the requirement for parental consent. (63)

The CRC has also called for access to contraception, comprehensive sexuality education, safe abortion and post-abortion services and access to SRH services information, for married and unmarried adolescents, without the requirement for parental consent. (63)

Steps taken to address child marriage, early union and adolescent pregnancy vary greatly between countries. Some governments have developed national strategies, whilst others have focused on tightening legislation. The following section will outline age of consent legislation, for countries in Southeast Asia and the Pacific, as CEDAW and CRC specify that States have obligations for such laws. National strategies and policies are discussed further in the second paper, *Beyond Marriage and Motherhood: Tailoring Programme Interventions for Southeast Asia and the Pacific*.

Figure 2 Legislation must balance child protection with respect for children’s evolving capacities



Age of Consent Legislation in Southeast Asia and the Pacific

Across the Southeast Asia and the Pacific region, the most common legal age for consent to sex is 15 or 16 years, ranging from 12 in the Philippines to 18 in the Federated States of Micronesia, Indonesia and Lao PDR (see Table 3). (6) Several countries have exemptions, lowering the required age, if the young people are close in age, including the Marshall Islands, Nauru and Viet Nam, or if “not taken advantage of” in Timor-Leste. In Malaysia, the age of consent to sex of 16 years requires the couple to be married, yet the legal age of marriage is 21 years. Exceptions with parental consent or for Muslim couples, Sharia court approval, are possible. However, in most nations, across the region and globally, there is a lower

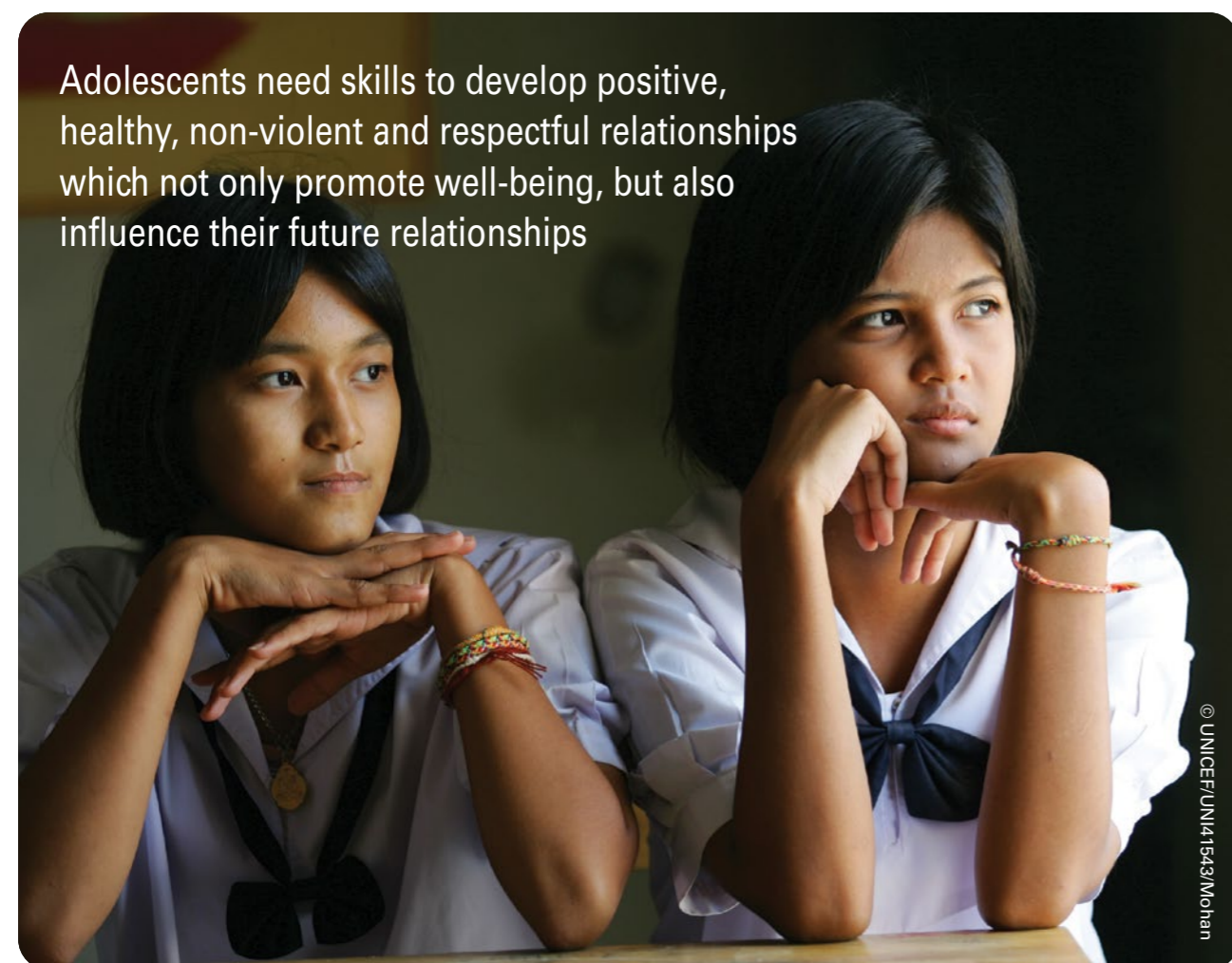
The legal age for marriage varies across the region, from 17 to 21 years, with nearly half of the countries mandating an age higher than the recommended 18 years. Gender disparities, that enable girls to be married at a younger age than boys, are notable in Papua New Guinea, Samoa and Viet Nam, and for Muslim marriages in Malaysia and the Philippines. Most nations have exemptions and exceptions for the legal age of marriage, generally with parental consent and/or court approval. In several countries – namely Federated States of Micronesia, Malaysia, Papua New Guinea,

the Philippines, Samoa and Vanuatu – the exemption specifically reduces the required age for girls to be less than that for boys. In a few nations, ages are also lower for Muslim than non-Muslim marriages. The youngest age of legal marriage permitted with an exemption is in the Philippines where Muslim girls, who have reached puberty and have permission from the Sharia court, may marry from the age of 12. However, a bill recently approved by the Philippines Government will prohibit child marriage, with those involving children aged under 18 years viewed as a “grave form of child abuse and exploitation”. (71,72)

A lower age of consent to sex than marriage recognizes young people’s right to make independent decisions about their sexuality as well as their agency to engage in consensual, close in age, sexual activity prior to marriage. (6,67,69) Higher ages for consent to sex and/or marriage risk punishing young people, by raising barriers to accessing sexual and reproductive health (SRH) information and services, and penalizing close-in-age consensual sexual relationships. (69,73–75) This can stigmatize and even criminalize sexually active unmarried adolescents and in some settings, can also place healthcare providers at risk of prosecution. Refusing young people access to SRH services diminishes their sexual agency: it denies them the right to make decisions about whether, when, how and with whom they have sex. (38,75)

Higher ages for consent are more common in contexts where adolescent sexuality is stigmatized and social norms view premarital sex as unacceptable.(69,75) In particular, family 'honour' may be linked to girls' chastity prior to marriage. These may also be settings where there are fears for girls being at greater risk of sexual violence and coercion. In these instances, it can be particularly challenging to balance the desire to protect with young people's evolving capacities. There is also tension between young people's right to make decisions about their health and body, with the free, full and informed consent to marriage.(74) When the age of consent to sex is tied to that for marriage, young people may marry to be sexually active. Deciding to have sex is very different from the decision to marry. Whilst a sexual relationship may be short-lived, marriage is understood as a life-long contract with legal obligations and responsibilities. The minimum ages of consent for sex and marriage need not, and indeed should not, align if young people's rights and evolving capacities are to be respected.(75)

Ensuring that legislative and policy frameworks are evidence-based, and reflect the reality of adolescent sexual and reproductive behaviour, is essential. An effective response to adolescent pregnancy and child marriage, must respect and support young people and their choices. The development of sexuality and relationships are key components of adolescence. However, in some settings, they may be a trigger for child marriage and/or punitive legislation. Instead, it is important governments support young people's SRH rights and prioritize action to prevent adolescent pregnancies. Adolescents need access to SRH knowledge and services to navigate their sexuality, understand the implications of sexual activity and to enable agency, responsible decision-making and informed consent. They need skills, so they can minimize the risks, refuse sex or negotiate and practice safe sex. Adolescents also need skills to develop positive, healthy, non-violent and respectful relationships which not only promote well-being, but also influence their future relationships.



Adolescents need skills to develop positive, healthy, non-violent and respectful relationships which not only promote well-being, but also influence their future relationships

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Table 3 Age of consent and age of marriage laws in Southeast Asia and the Pacific

Key Points					
Legal age of consent to sex			Legal age of marriage		
<ul style="list-style-type: none"> • Range: 12–18 years • Most common age of consent is 15–16 years • Several countries have close- in-age exemptions which permit a lower age of consent • Malaysia requires a couple to be married for consent to sex. 			<ul style="list-style-type: none"> • Range: 17–21 years • Half of countries mandate an age higher than 18 years • Legal age of marriage for girls is lower than for boys in several countries • Most countries will permit marriage below the legal age with parental consent and/or court approval • Exemptions that lower the legal age for marriage are particularly common for Muslim girls. 		
Country	Legal age of consent to sex (years)		Legal age of marriage (years)		Exemptions and exceptions to legal age of marriage (years)
	Female	Male	Female	Male	
Southeast Asia					
Cambodia	15	15	18	18	16 with parental consent and if other party is at least 18.
Indonesia*	18	18	21	21	19 with parental consent. Lower with a court order.
Lao PDR	18	18	18	18	15 under special circumstances.
Malaysia	16 (after marriage)	after marriage	21	21	Non-Muslim marriages: 18 for females and males with parental consent or 16 for girls if granted by the state Chief Minister with parental consent. Muslim marriages: 16 for girls, and under 16 for girls with permission of Sharia court.
Myanmar	16	16	18	18	
Philippines**	12	12	21	21	18 with parental consent. Muslim marriages: 15 years in Mindanao and 12 for girls who have reached puberty with order of Sharia court.
Thailand	15	15	20	20	Under 20 with parental consent and under 17 with court order.

Country	Legal age of consent to sex (years)		Legal age of marriage (years)		Exemptions and exceptions to legal age of marriage (years)
	Female	Male	Female	Male	
Southeast Asia					
Timor-Leste	16 or 14 if "not taken advantage of"	16 or 14 if "not taken advantage of"	17	17	16 with parental consent or authorization from the civil registrar.
Viet Nam	16 Sex between adolescents aged 13–15 years is not an offence.	16 Sex between adolescents aged 13–15 years is not an offence.	18	20	
Pacific Islands					
Federated States of Micronesia	16–18	16–18	18	18	16 for girls with parental consent (Chuuk, Kosrae, Pohnpei states).
Fiji	16	16	21	21	18 with parental consent or commissioner/magistrate consent.
Kiribati	15	15	21	21	17 with parental consent or licence provided by a minister.
Marshall Islands	16 or 14 close in age.	16 or 14 close in age.	18	18	
Nauru	16 or 13 close in age.	16 or 13 close in age.	18	18	
Papua New Guinea	16	16	16	18	14 for girls and 16 for boys with court order.
Samoa	16	16	19	21	16 for girls and 18 for boys with parental consent.
Solomon Islands	15	15	18	18	15 with parental consent or judge/magistrate consent.
Tonga	15	15	18	18	15 with parental consent.
Tuvalu	15	15	21	21	18 with parental consent or judge/magistrate consent.
Vanuatu	15	15	21	21	16 for girls and 18 for boys with parental consent.

* Indonesia Child Protection Law is 18. Penal Code is 15 for girls. Aceh province: Muslims can only consent to sex after marriage.

** Recently in the Philippines, new legislation was approved in principle that would ban child marriage and impose sanctions on adults who arrange and consent to child marriage as well as on adults who contract a child marriage with a minor under 18.

Key Points: Action is Needed to Address Adolescent Pregnancy, Child Marriage and Early Union

Adolescence: a Period of Rapid Development and Evolving Capacity

- Adolescence is a period of transition when physical, emotional, social and cognitive resources are laid down, to form a foundation for well-being in adulthood.
- This is also a key time for socialization, yet harmful gender norms can be internalized that limit a girl's life and future opportunities.
- Social development, including the formation of peer and romantic relationships, are important contributors to adolescent well-being and future relationships.
- The opportunity to increasingly make life decisions is an important part of an adolescent's transition to adulthood.

Consequences of Adolescent Pregnancy, Child Marriage and Early Union

- Pregnancy, marriage or union in adolescence can disrupt a girl's life course and harm her well-being.
- The consequences of adolescent pregnancy can include: negative impacts on a girls' physical and mental health, stigma and social isolation, interruption of education, socio-economic impacts, pressured or forced marriage and in some instances, violence and suicide.
- Child marriage can lead to increased risks of early pregnancy, social isolation, depression and GBV, as well as diminished agency, educational achievement and socio-economic opportunities.
- Negative impacts may be greatest when a girl lacks agency, the marriage is forced or a child unwanted.

Commitments and Legislation

- The SDG Framework sets out commitments and specifies targets and indicators to address child marriage and adolescent pregnancy rates.
- CEDAW and CRC generally consider child marriage to be a harmful practice, however, a person under 18 years is considered to have the right to marry if over 16 years and exercising full, free and informed consent.
- The need to protect the child must be balanced with respect for a young person's evolving capacities to make decisions about their health and sexuality.
- Member States have been called upon to not criminalize adolescents close in age for consensual sexual activity, but rather to provide comprehensive sexuality education and access to sexual and reproductive health services.
- The legal age for consent to sex and legal age of marriage vary across the region, with the age for sexual activity generally being lower.
- Higher legal ages for consent to sex and marriage can be punitive for young people as they may criminalize close-in-age, premarital sexual activity and restrict access to sexual and reproductive information and services.
- Legislative and policy frameworks that address adolescent pregnancy and child marriage must reflect the reality of adolescent sexual behaviour, respect and support young people in their choices, not punish them.

2.

Exploring Patterns of Adolescent Pregnancy, Child Marriage and Early Union

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The previous chapter established the need to address adolescent pregnancy, child marriage and early union. It examined how early unions and childbirth can disrupt the life course, at a pivotal point in development, and negatively impact girls' health and well-being. The first chapter also highlighted the commitments made by governments to address teenage pregnancy, child marriage and early union, eliminate harmful practices, protect girls' human rights, respect their evolving capacity and improve adolescent health.

This chapter considers evidence for different patterns of early marriage and pregnancy. It also discusses the typology for child marriage and early unions, proposed for Southeast Asia and the Pacific by UNICEF and UNFPA.

This typology was developed, based on a sociological framework, by technical experts working in the field. It was first presented at a regional forum in Bangkok in 2018, attended by more than 140 participants from governments, civil society, youth networks, women's coalitions, academic institutions and experts. The types of early marriage/union proposed differ in context and drivers, particularly on issues of consent, agency, premarital sexual activity and unintended pregnancy.

2.1 Evidence from Other Contexts

Around the world, there has been considerable research into child marriage, however, there is limited evidence describing different patterns and typologies. Studies suggesting classifications for early marriage – mainly drawn from Africa, South America and South Asia – generally group them based on drivers for entering into child marriage early union. These include factors such as premarital sexual activity and/or pregnancy, economic or transactional incentives, gender norms and power relations as well as adolescent agency and decision making (see Figure 3).



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Patterns of child marriage are generally based on factors such as premarital pregnancy, economic incentives, gender power relations and adolescent agency

Two broad patterns of family formation were identified in a study from West and Central Africa:

1) sexual debut does not coincide with marriage, and precedes union by more than a year and 2) marriage and the onset of sexual activity are closely timed, within 13 months of each other.(76) In the latter typology, when sexual debut loosely coincides with marriage, girls are married approximately two years younger and give birth more than six months earlier, than girls in first type. In this way, settings where sexual activity and marriage are closely linked, have higher rates of child marriage.

A more diverse typology for child marriage, with six different 'types', was developed based on research in Zambia(77):

- i) Traditional or 'ideal' marriage following consent from families and payment of a bride price. The decision to marry is made freely and not a result of coercion or to address adolescent pregnancy.
- ii) Self-decided peer marriage, where the decision to marry is made by young people and parental consent is not sought or given. This type of marriage includes elopement and is not socially sanctioned or considered legitimate by adults or the law. In some instances, families may eventually recognize the union, often following the birth of a child and give these marriages retroactive 'consent'.
- iii) Cohabitation-based marriage, is linked to situations where children have decided to live together. Over time these relationships come to be considered marriages among the wider community and by law.
- iv) Duty or responsibility-based marriage is undertaken to rectify a situation that may shame or dishonour families, for example to resolve the problem of a premarital pregnancy.
- v) Transactional marriages, where a girl marries an older man who can provide financial and material benefits to her and her family. These marriages are generally less socially acceptable, but more common in areas where poverty is widespread and

tolerated due to economic advantages. In some cases, a boy may marry an older woman who has the means to look after him. The adolescent girl or boy may be expected to contribute their labour, whether domestic or agricultural, as part of the transactional nature of these marriages.

- vi) Pre-arranged or promised marriages, where agreements are made for an older man to marry a girl when she comes of age (typically after she has reached puberty). These arrangements may be made before the girl is born, when they are young or when she reaches puberty. The man may contribute to the girl's education or other costs while she is growing up.

Several pathways to child marriage were also identified in a study from Brazil: i) marriage to deal with an unwanted pregnancy, protect the girl and family's reputation, and ensure the boy's/man's responsibility for the girl and baby, ii) marriage to control a girl's sexuality and limit risky/socially unacceptable behaviours associated with girls being single, iii) marriage driven by the girl and/or her family's desire for financial security, iv) marriage as an expression of a girl's agency and desire to leave her parents' home, generally within the context of limited opportunities and/or experiences of abuse or restrictions on freedom of movement and v) a prospective husband's desire to marry a younger girl as they are perceived to be more attractive and easier to control than adult women.(56)

Pathways to marriage may vary depending on context, as established in a recent study of early marriage in Ethiopia, India, Peru and Zambia. Informal unions and cohabitation, as a result of or leading to pregnancy, commonly result in child marriage in Ethiopia, Peru and Zambia, while arranged marriage continues to predominate in India.(12)

In Nepal, pathways to marriage appear to be changing.(78) A recent study of adolescent decision-making in marriage identified two main patterns of child marriage: self-initiated and forced. Self-initiated marriages involved young people choosing to marry often as a result of love relationships, but also to become independent or escape abusive family

circumstances. Young people stressed that their parents or families did not approve of their choice, including in cases of inter-caste marriage or elopement without parental or family consent. In forced marriages, young people were pressured into marrying by family members, guardians or other relatives, regardless of consent. These marriages were a response to girls dropping out of school, poverty, violence in the family, the girl's family seeking to improve her life, or the influence of the groom and his family. These marriages were within the same caste in the community. Another type of marriage, identified in this study, was arranged marriage, where young people accepted the partner chosen for them. Approximately half of young people surveyed said they had entered into self-initiated marriages (53 per cent) while a third had been forced to marry (33 per cent).

2.2 Patterns in Southeast Asia and the Pacific

There has been limited country-level research differentiating types of child marriage in Southeast Asia and the Pacific, with studies only identified from Timor-Leste and Viet Nam. (55,79) The patterns of child marriage identified from this qualitative research are in keeping with those recognized in other parts of the world, with similar underlying factors (see Figure 3).

Several patterns of early marriage were identified in qualitative country-based research in Timor-Leste and Viet Nam. In Timor-Leste, the types of child marriage identified were: i) marriage following premarital pregnancy, which may be the result of forced or

Figure 3 Factors underlying child marriage typologies in other contexts

Pre-marital sexual activity and/or pregnancy	<ul style="list-style-type: none"> • Marriage as a: <ul style="list-style-type: none"> - means of controlling adolescent sexuality - protection from sexual violence - solution to premarital pregnancy, including from rape • Protects reputation and prevents shame and dishonour.
Adolescent agency and decision-making	<ul style="list-style-type: none"> • Young people decide to marry, elope or cohabit • May not have parental permission • Marriage may be: <ul style="list-style-type: none"> - seen as the best or only pathway to adulthood and independence, and/or - an escape from a difficult family situation e.g. violence.
Economic or transactional incentives	<ul style="list-style-type: none"> • Particularly relevant when there is poverty and deprivation • A girl's marriage brings financial benefits to family • Family may benefit from bride's/groom's labour • Future husband may contribute to the costs of raising the girl • Shifts 'burden' of raising a girl to her husband or his family • Even more likely during crises, conflict and disasters.
Gender norms and power relations	<ul style="list-style-type: none"> • Young brides are perceived as more attractive and malleable • Children have a duty to respect and obey parents and elders • Power imbalances which assign girls and women less decision-making power • Lesser value of the girl child • Girls as commodities • Taboos surrounding adolescent sexuality, particularly for girls • Women's role restricted to domestic, sexual and reproductive functions • Marriage and motherhood as compulsory for women.

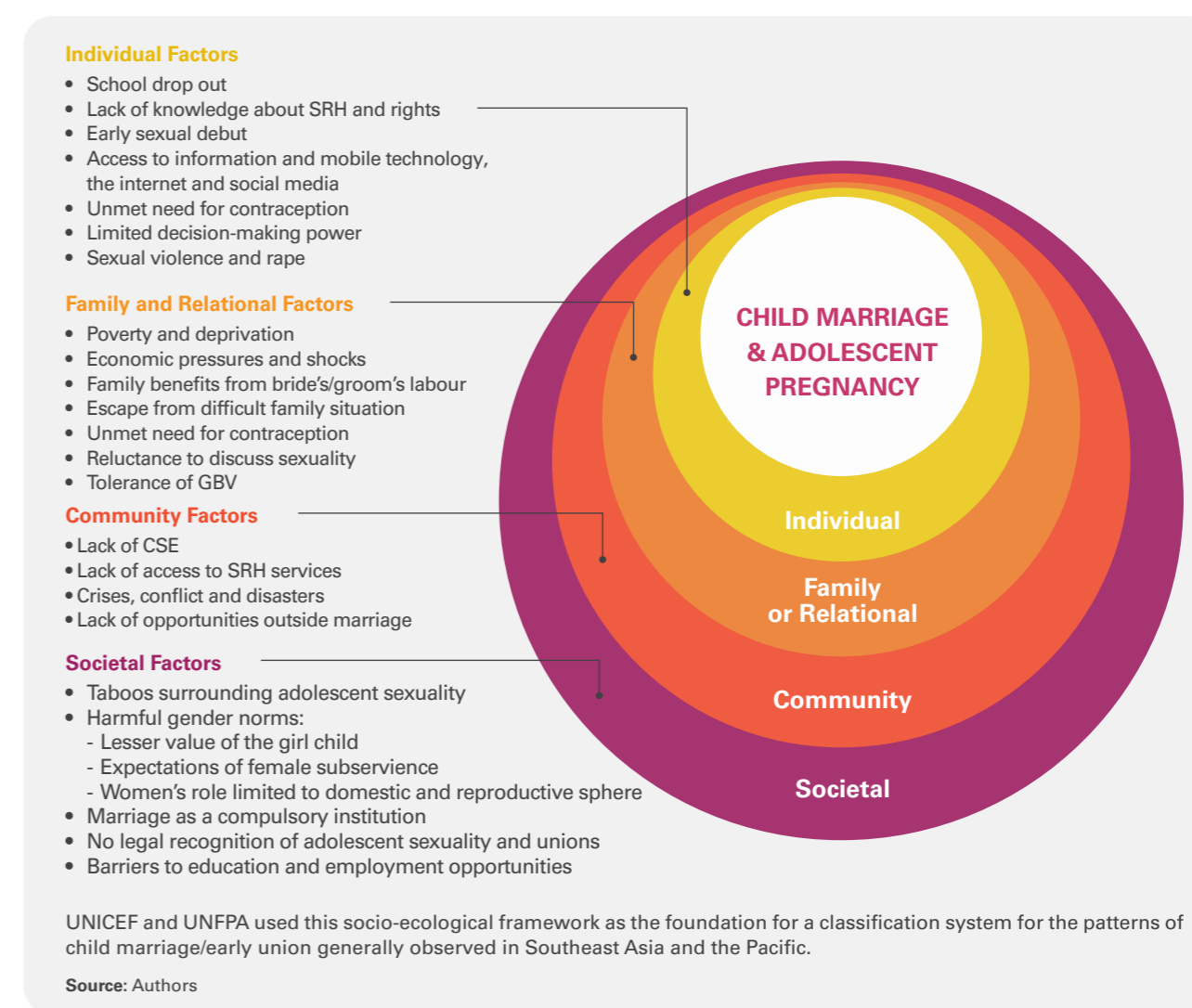
Factors underlying child marriage classifications, from other parts of the world (Africa, South America and South Asia).

Source: Authors

coerced sex, ii) arranged marriage, where the girl has no real power in the situation, iii) parental pressure to marry when in a relationship and iv) self-initiated marriage, often to escape a difficult family situation.(55) Similarly, an analysis of several qualitative studies in Viet Nam pinpointed four types of child marriage in communities: i) marriage to "resolve" pregnancy and address the shame associated with premarital sex, ii) family-arranged marriage, often linked to bringing fresh labour into the household, iii) bride abduction and kidnapping, including trafficking of girls to China for marriage and iv) love marriages, where couples drop out of school to get married or cohabit and do not register their union to avoid penalties associated with child marriage.(79)

At a regional level, UNICEF and UNFPA have proposed three broad patterns of adolescent pregnancy, child marriage and early union in Southeast Asia and the Pacific,⁵ namely: i) forced/arranged child marriage, ii) self-initiated marriage or cohabitation between peers and iii) circumstantial child marriage, often following pregnancy.(80) This classification, described further below, is built upon existing research, using a socio-ecological framework to consider the interrelated drivers⁶ of adolescent pregnancy, child marriage and early union at individual, relational, community and societal levels (see Figure 4). Key to the typology was whether pregnancy preceded or followed marriage and the varying degrees of agency and consent exercised by young people, particularly girls.

Figure 4 Socio-Ecological Framework demonstrating individual, relational, community and societal drivers for child marriage and adolescent pregnancy



⁵ This typology was first proposed at the Regional Forum on Adolescent Pregnancy, Child Marriage and Early Union: In South-East Asia and Mongolia, held in Bangkok in 2018.

⁶ For more information on the drivers of adolescent pregnancy and child marriage, see Chapter 4.

Consent

The issue of consent can be complicated and gradient. Research suggests consent is not binary (“yes” or “no”), but rather a continuum, with free and full consent at one end and force at the other (see Figure 5).^(81–83) Between these two extremes are compliance to ‘please’ or not disappoint, pressure using threats, manipulation, guilt, shame or sense of duty as well as coercion, through direct threats of harm or violence. This concept of a continuum of consent is relevant to both consent to sex and to marriage, and across life stages, from adolescence through to adulthood.⁷

Consent can be considered a continuum, with free and full consent at one extreme and force at the other

Where there is psychological pressure, coercion, violence or the threat of violence, there can be no meaningful consent. Coercion and pressure can be exerted through prevailing social norms and internalized. For example, when adolescent girls feel “responsible” for protecting their family’s reputation by marrying early, or where marriage seems like a path out of a difficult situation such as an unplanned pregnancy, girls may comply and/or reluctantly consent. And, while self initiated marriages may involve full and “enthusiastic” consent, young people may not fully understand what they are getting into, or feel they need to marry to have a sexual relationship. Even with given consent, young people may later regret marrying early.⁽⁸²⁾

Type 1: Arranged or Forced Child Marriage

Arranged child marriages are generally non-consensual, or consent is forced or limited. Girls may comply with marriage, due to family pressure, out of filial piety (dutiful respect for parents) or because they do not see other alternatives. These marriages are a means of managing adolescent sexuality, preventing premarital sexual activity, and ensuring marriage precedes pregnancy. Many parents across the region believe marriage will protect the virtue and chastity of the girl and the reputation of the family. ^(21,43,55,79,87) While an arranged marriage may prevent premarital sexual activity and be perceived to offer a girl protection from rape, it may expose her to sexual violence at the hands of her husband.

The low value placed on girls and the perception that daughters are a burden on the household, also underpin arranged marriages. Poverty, economic pressures and the desire to shift the “burden” of caring for an unmarried daughter are key drivers. In settings where dowry is practiced, arranging a marriage for a girl early in life means payments to the groom’s family are lower than if she was older.^(3,21) Where bride price is practiced, there is even greater financial incentive for a girl’s parents to marry their daughter off. A groom’s family, in turn, benefit from a young bride’s unpaid domestic labour and the family responsibilities taken on by their son, when he “settles down” upon marriage. Girls who are out-of-school are particularly at risk of arranged or forced marriage. This risk increases when natural disasters or crises cause physical and/or economic insecurities.

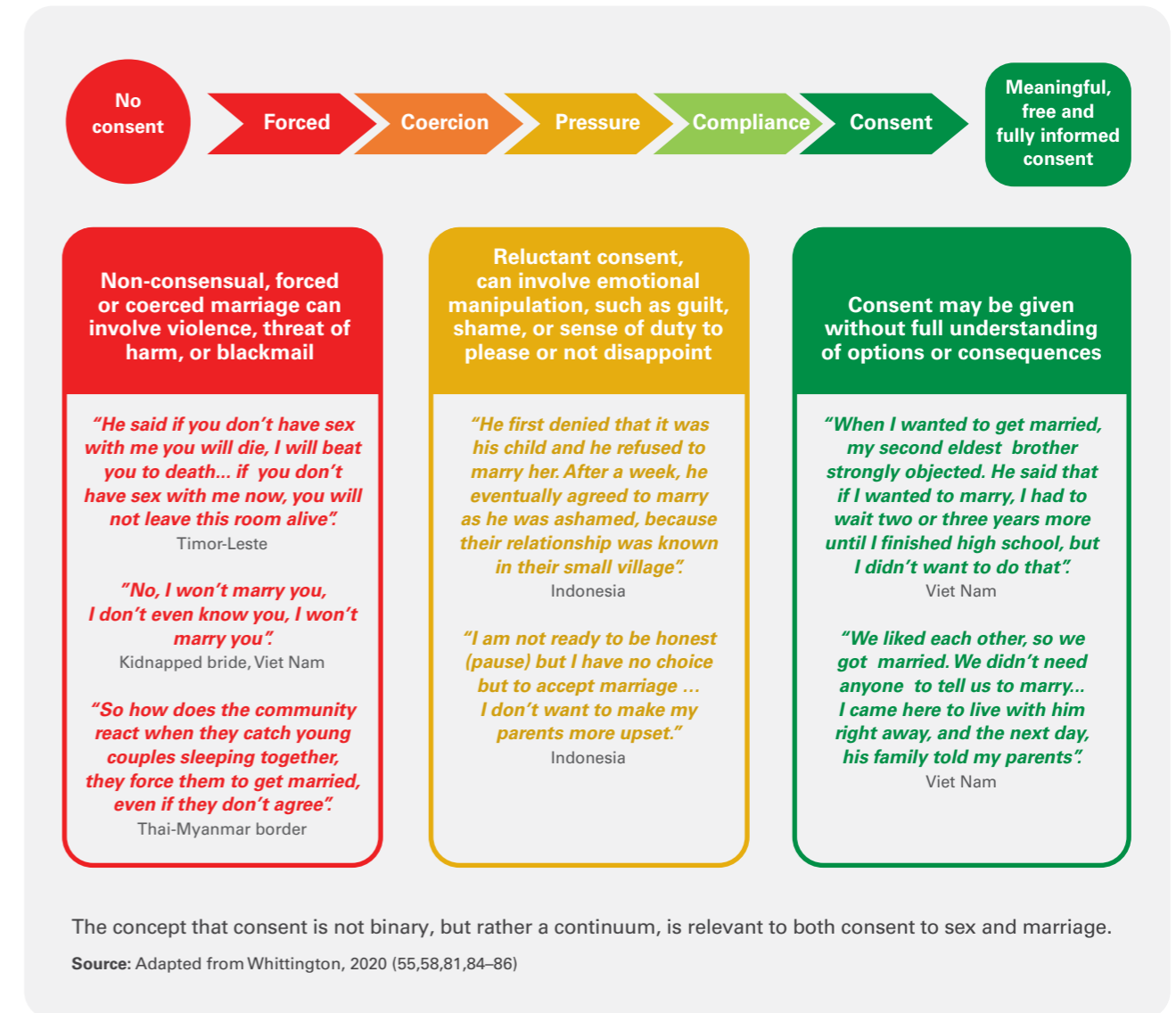
“My parents pointed at him on the street as the one I am going to marry. We met for the first time during the wedding ceremony...” Philippines⁽⁸⁸⁾

“Early marriage is considered especially beneficial for the groom’s family because it will provide them with the bride’s labour, and reduce the burden of domestic work of the mother”.

Viet Nam⁽⁸⁴⁾

“You know, we are in the mountains, away from the city, so if our parents make this decision then the man has the power and the right to do whatever he wants”. Timor-Leste⁽⁵⁵⁾

Figure 5 Continuum of Consent



Force, violence and harm

Some forms of child marriage clearly violate a girl’s right to self-determination, dignity and bodily integrity. These harmful practices often reflect traditional customs and social norms that perpetuate gender inequality. For example, in Papua New Guinea girls are still treated as commodities, with arranged marriages being used to settle disputes or debts.^(89–91) In some settings, brides may be purchased to serve as a caregiver and domestic worker, with the husband being entitled to control, discipline or rape his wife as he sees fit.^(92,93) In other instances, brides may experience multiple

forms of violence, such as kidnapping followed by forced marriage, as is reported to occur in some communities in Lao PDR and Viet Nam.^(94,95)

Forced and harmful marriages are generally imposed on a girl by her family and the community, without her free and full consent. Such unions reinforce and perpetuate gender inequality by discriminating against the girl and violating her human rights and fundamental freedoms. These unions can cause her physical, psychological, economic and/or social harm, are often associated with serious forms of violence and can themselves constitute a form of GBV.

⁷ The continuum of consent has been used to describe informed consent in a number of areas, including in sex education with children and adolescents, and in consent to participate in research for people with disabilities.

“All participants agreed that it was especially taboo for a girl to be pregnant outside of marriage. They would force their child to marry if she fell pregnant out of wedlock. A girl who is known not to be a virgin may be stigmatized and regarded as unworthy of marriage for having brought dishonour to herself and her family, even if the loss of virginity has been the result of sexual abuse”. Cambodia(41)

“Interaction between unmarried boys and girls can only take place in public or in the presence of a family member or friend. Consequently a rendezvous between two young people without a chaperone can result in a forced cover-up marriage, sometimes even within the next 24 [hours]”. Thailand-Myanmar border(85)

“There are strong incentives for young people and their families to hide the shame of teenage pregnancy by quietly ‘fixing’ it through marriage before their neighbours find out what has happened”. Timor-Leste(55)

“We were close friends. He treated me like a younger sister. People started to gossip and my family insisted that we be married to avoid tarnishing my reputation”. Philippines(96)

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Type 2: Circumstantial Child Marriage

Circumstantial child marriage is a response to premarital pregnancy and/or adolescent sexual activity. In some settings, just the perception that a girl may be sexually active or have a relationship with a boy or man can prompt parents to arrange her marriage. In these instances, marriage is seen as solving a problem and protecting or repairing the girl’s and family’s reputation.

The girl’s level of consent to marriage may vary depending on circumstances, however there is generally considerable family and societal pressure. Even when sexual activity is nonconsensual or represents sexual violence, adolescent girls may be blamed for premarital sex and pregnancy, and forced to marry the perpetrator to “resolve” the problem.

Circumstantial marriages are perceived as solving a problem by protecting honour or repairing reputations

Unintended premarital conception is likely to be the most common driver of circumstantial marriages. Data from the region indicates that 9–36 per cent of adolescent pregnancies were conceived premaritally, with most girls (57–92 per cent) being married or in-union by childbirth (see following chapter for more analysis).

Type 3: Self-initiated or Peer Child Marriage/Union

Self-initiated or peer child marriages may be more common where premarital sexual relationships and pregnancy are stigmatized

Self-initiated child marriages and unions are when young people decide to marry, elope or cohabit to have a sexual or “love” relationship. These marriages and unions may be more common in settings where premarital, sexual relationships are discouraged or stigmatized and pregnancy out of wedlock is unacceptable. Strong social pressure may encourage young people already in sexual or romantic relationships to choose to marry. In some instances, there may also be pressure from their partner to marry.(41,79) In addition, girls may accept a marriage proposal due to fear of being single, missing the opportunity to marry and becoming an ‘old maid’.(41,79)

Close-in-age adolescents may see these relationships as a pathway to adulthood, particularly when they have left school and there are limited employment

opportunities. Young people may enthusiastically consent to marry or cohabit, however, they may not be well informed or marry to please or comply with their partner.(41,55,79) Adolescents may also enter marriages or unions to escape difficult or violent family situations or avoid an arranged marriage.(11) Girls, in particular, may perceive marriage as the only real option available, for a safe and secure future.

Qualitative research, across countries in the region, suggests these self-initiated child marriages are on the rise.(80,84,97) One study in Indonesia found that the majority of respondents, married before the age of 18, reported they married out of their own volition (females 89 per cent, males 80 per cent).(87)

When marriages and unions are consensual, young people are exercising their agency in choosing a partner, despite being underage and often lacking parental consent. Increased access to information technology, the internet and social media has provided another avenue for young people to independently meet and form relationships, without family involvement. Even though these relationships are self-initiated, they often limit a young person’s future opportunities in respect to education and employment, and may still lead to regret, separation or divorce.

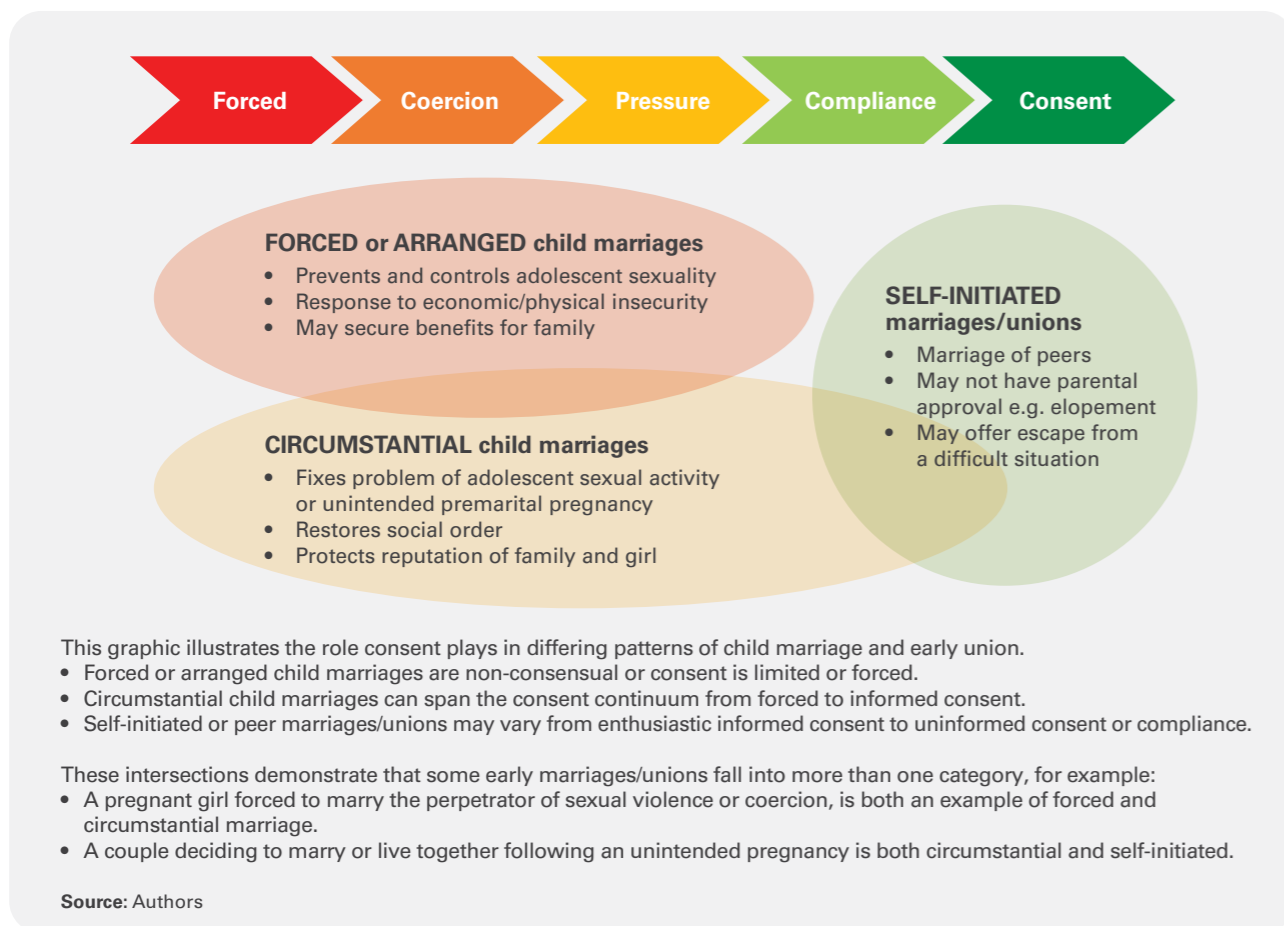
“Parents said that often it was the children who wanted to get married early because they wanted to have their own house, live separately from their parents, start a family, have some financial independence or they were concerned that their boyfriends would leave them if they did not marry early and quickly. They also did not want to be left behind as the only unmarried girl in the village”. Cambodia(41)

“Now, everything has changed. If the children love each other, the girl will voluntarily go with her boyfriend. There’s no longer pulling like before. These days, if they love each other, they get married of their own free will”. Viet Nam(84)

“For me 15 years old is good enough to marry, because girls do not go to school and I was bored of being a child”. Bali, Indonesia(98)

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Figure 6 Consent and interlinkages in the child marriage/early union typology



Research is needed to better understand and test the proposed typology for child marriages and early unions. There is a need for qualitative and quantitative studies, across and within countries, to explore consent and decision-making, circumstances and external pressures in early marriages/unions. Data will also be key to determining the prevalence

of self-initiated as compared to arranged/forced and circumstantial early marriages/unions, if this typology is confirmed. It will be particularly important to understand the degree to which adolescent sexuality and premarital pregnancy drive child marriages/early unions in the region.



Key Points: Patterns of Adolescent Pregnancy and Child Marriage

The differing patterns of child marriage identified around the world, have common features:

- Differing degrees of adolescent girls' agency and consent
- Economic and/or labour benefits to the families
- Harmful gender norms that curtail women's and girls' rights, status, opportunities in life and power in relationships
- Management of adolescent sexuality and premarital pregnancy.

UNICEF and UNFPA propose there to be three key types of child marriage/early union in Southeast Asia and the Pacific:

- 1 Arranged or forced child marriage
- 2 Circumstantial child marriage, often following an unintended pregnancy
- 3 Self-initiated marriage or cohabitation between peers.

These types of child marriage/early union are not absolute, but interlinked and overlapping. The degree of consent in marriage can vary greatly and is important to identifying to what degree these unions are harmful.

Arranged or forced child marriages:

- Generally non-consensual or consent is forced or limited
- Violate a girl's human rights
- Protect the virtue and chastity of a girl and reputation of her family
- Underpinned by gender norms that hold daughters as having less value and being a burden to her family.

Circumstantial child marriages:

- Response to premarital pregnancy and/or adolescent sexual activity
- Solves a problem and protects or repairs the girl's and family's reputation
- Level of consent varies depending on circumstances, from non-consensual to free and full consent.

Self-initiated or peer marriage/unions:

- Take place between consenting, close-in-age adolescents
- May represent agency and evolving capacity
- In some instances, consent may be uninformed or given to please or comply with a partner
- May occur more in settings where premarital sexual relationships or pregnancy are stigmatized
- Can be perceived as the pathway to adulthood, a means to escape difficult circumstances and the only way to have a "love" or sexual relationship.

Research is needed to better understand the varying patterns of child marriage and early union across and within countries, including to:

- Better understand the drivers of and circumstances surrounding child marriages and early unions
- Explore the degree of agency, decision-making power and consent in early marriages and unions
- Validate the proposed typology
- Determine the proportion of self-initiated as compared to arranged and circumstantial marriages.

3.

Understanding Pathways, Prevalence and Trends for Childbearing, Marriages and Unions in Adolescence

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The previous chapter discussed the typology for child marriage and early union proposed by UNICEF and UNFPA for Southeast Asia and the Pacific. This chapter will analyze existing data to better understand the situation of adolescent pregnancy, child marriage and early union in eight selected countries from the region. It will explore the prevalence and trends for childbirth, marriage and unions in adolescence, and investigate the role premarital conception may have in driving circumstantial marriages.

This chapter examines the current status and trends in adolescent pregnancy, child marriage and early union in selected countries in Southeast Asia and the Pacific. Country selection was based on the availability of DHS and MICS data to enable pattern analysis for premarital pregnancy and child marriage. The countries selected have: i) high rates of child marriage and early union and/or adolescent pregnancy, ii) recent data and iii) sample sizes sufficient to allow for premarital analysis. These criteria excluded many Pacific countries that lack recent survey data and/or have small sample sizes. In some instances, lack of very recent data may limit comparisons with the current situation. This is particularly relevant with the COVID-19 crisis exacerbating gender inequality around the world. The increasing rates of adolescent pregnancy, child marriage and early union, reported in some settings, have not been captured in the following analysis, due to the lack of fresh survey data.(22,23)

There are limitations in the ways surveys captured child marriage and early union data. Some country surveys differentiated between marriages and informal unions, however in other settings they are

grouped together. As there was no data available on decision-making in marriage, it is not possible to estimate the extent to which these child marriages and early unions are arranged/forced or self-initiated by adolescents. However, the timing of childbirth compared to marriages/unions provides some indication of the prevalence of circumstantial marriages that follow premarital pregnancies.

3.1 Child Marriage/Early Union

Data from the countries studied revealed considerable variations in rates of child marriage: between one-in-three and one-in-nine women, aged 20–24 years, reported being married or in-union before the age of 18 years (see Figure 7). Rates were highest in Lao PDR and Papua New Guinea, where 33 and 27 per cent of women respectively, entered marriage as children. While the prevalence of child marriage and early union under 15 years is lower, ranging from 1–8 per cent, these early unions are, once again, most common in Lao PDR and Papua New Guinea.

National rates of child marriage/early union do not capture the higher prevalence in some provinces or communities. For example, the relatively low prevalence in Viet Nam reflects the majority Kinh population, with a 7 per cent rate of early marriages/unions among girls aged 15–19 years. However, child marriages/early unions are significantly more common in ethnic minority communities, where the prevalence is reported to be 30 per cent among girls 15–19 years.(31,79)

Child marriage/early union unions have increased in the Philippines, with most being cohabitation

While most countries have seen a decline in child marriages/early unions since the earliest survey data, progress has stalled more recently for some (as reported by women 20–24 years, see Figure 8). In the Philippines, rates of child marriage/early union have risen since the earliest survey, with most unions now involving cohabitation. Declines have stalled over the last two survey periods in Cambodia, Indonesia and Viet Nam. Over the last two surveys, only Lao PDR, Thailand and Timor-Leste continue to demonstrate significant falls in child marriages/early unions. Significant drops in child marriages/early unions under 15 years (2–3 per cent) are observed in Indonesia, Lao PDR and Thailand.



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Declines in rates of child marriage/early union have stalled in Cambodia, Indonesia and Viet Nam

Figure 7 Proportion of women aged 20–24 years who were married/in-union by age 15 and 18

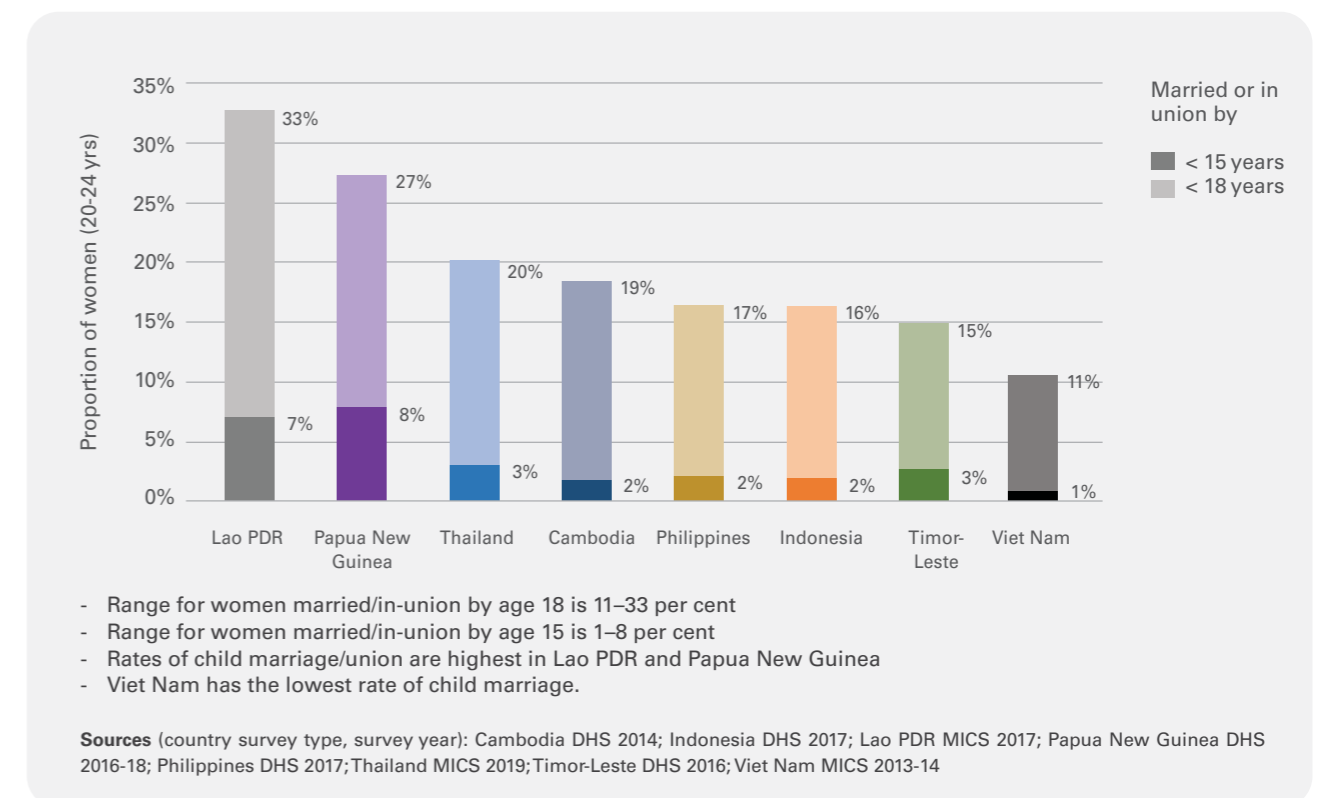
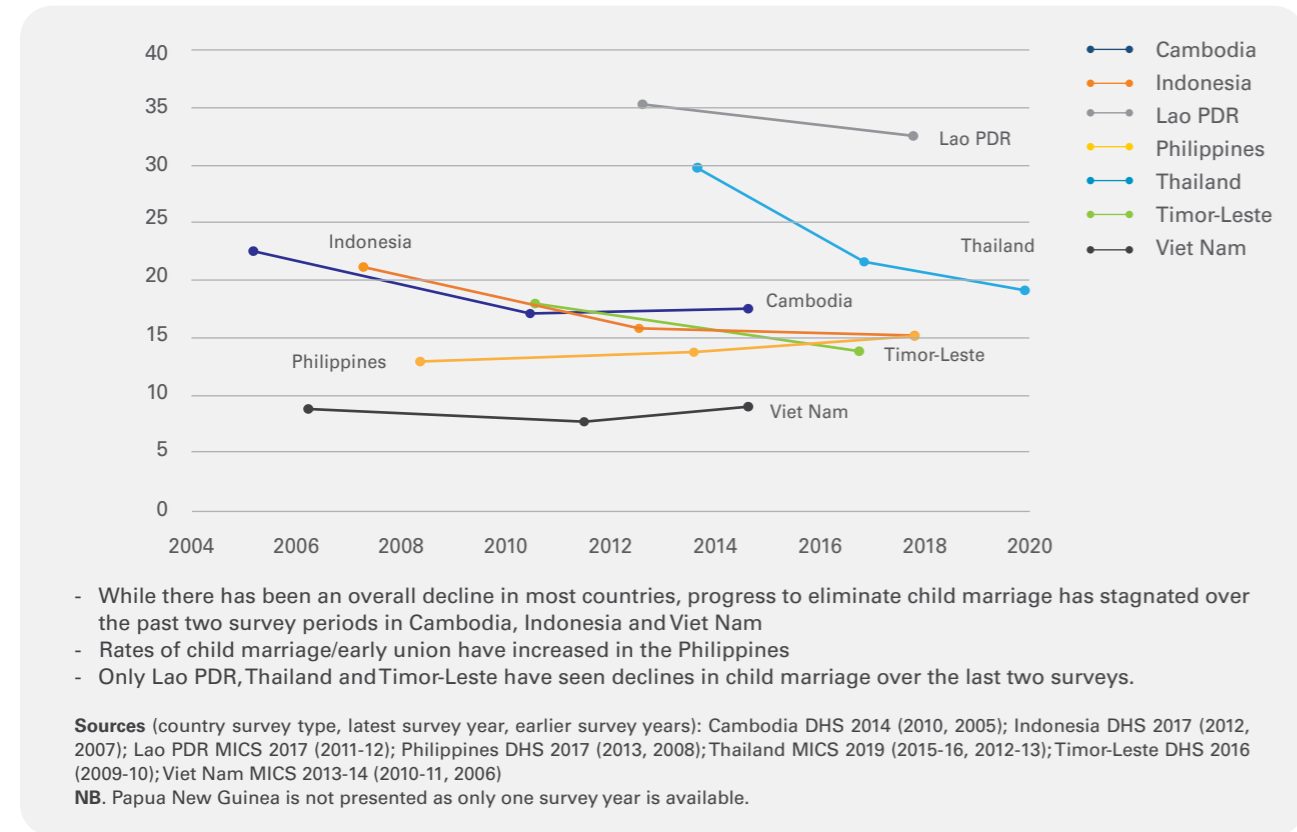


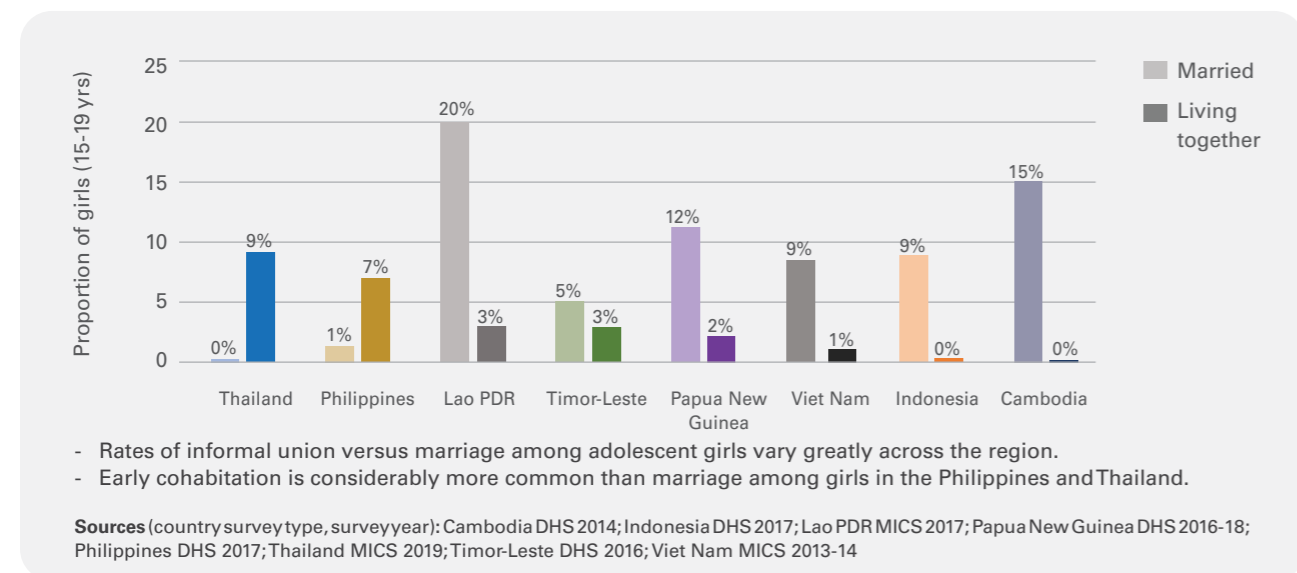
Figure 8 Trends in the proportion of women age 20–24 who were married/in-union by age 18 years



Cohabitation is reported by adolescent girls in many countries of Southeast Asia (see Figure 9). And, surveys likely underestimate the degree of cohabitation, since in some settings informal unions are reported as marriage. This is the case in ethnic minority communities in Viet Nam where cohabitation is common, but generally not captured in data collection.(31,79)

Available data does suggest considerable variations in the prevalence of informal unions across the region. Rates of cohabitation are particularly high in the Philippines (7 per cent) and Thailand (9 per cent), where informal unions are, respectively, 31 and five times more common than child marriage. These informal unions are likely to include self-initiated or circumstantial unions.

Figure 9 Prevalence of early marriage and cohabitation among adolescent girls aged 15-19 years (%)

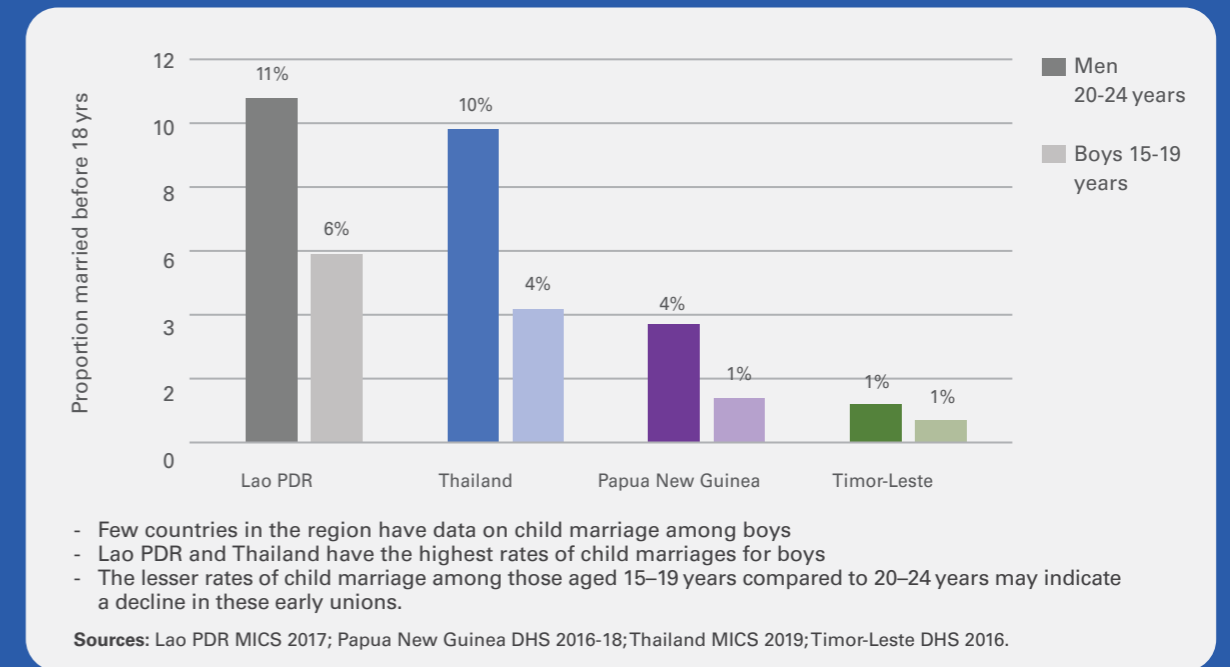


Boys married as children

Although less common than for girls, some boys in Southeast Asia and the Pacific also marry before the age of 18 years (see Figure 10). Across East Asia and the Pacific, approximately 6 per cent of boys are married before the age of 18 years.(99) While limited country data is available, Lao PDR and Thailand have the highest rates of child marriage for boys, with 10–11 per cent of men (20–24 years) reporting marriage before the age of 18 years. These countries have among the highest reported rates of child marriage for boys worldwide, ranking respectively 8th and 11th.(99) However, these child marriage rates are still only approximately 30–50 per cent of those for girls in these settings.

The proportion of boys (15–19 years) reporting marriage before 18 years, is lower than that for 20-24-year-olds, and this may represent a decline in child marriage for boys over time. Younger child marriages are also reported for boys, with approximately 2 per cent of men in Lao PDR and Thailand reporting marriage before 15 years. This is less than a third of the prevalence for girls in Lao PDR, however in Thailand the rate is similar for girls and boys. This may indicate differing patterns in early marriage in these countries.

Figure 10 Proportion of boys (15–19 years) and men (20–24 years) who report marriage before age 18 years



3.2 Spousal Age Gap

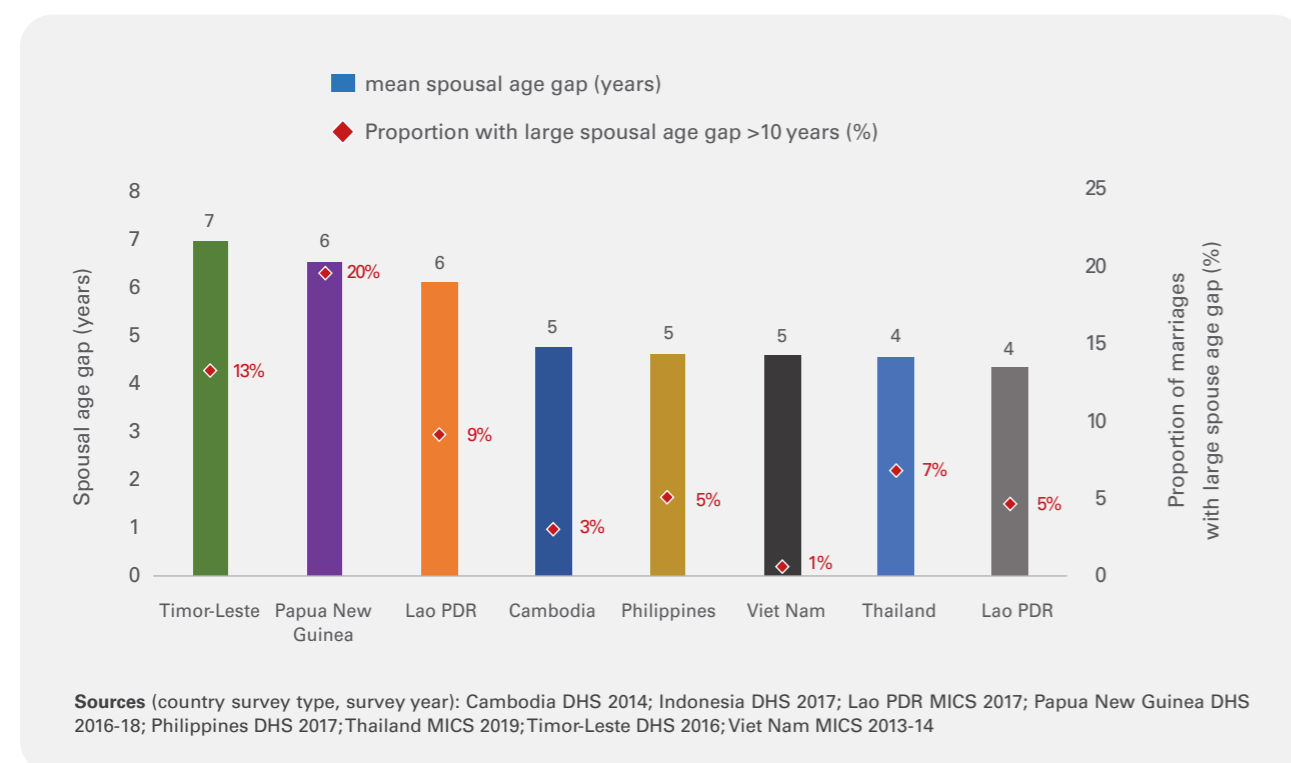
Age disparities between partners or spouses may provide important clues to the degree of agency and harm in marriages and unions. Spousal age gaps are negatively associated with girls' age at marriage: the younger the bride, the larger the age gap.(21,46,47) For example, in Indonesia a spousal age gap of more than 10 years is associated with girls' average marriage age being 4.4 years younger than with a spousal age gap of 0–2 years.(46)

The younger girls marry, the less agency and decision-making power they tend to have and the greater their risk of harm from intimate partner violence (IPV). (21,42,54) For example, in the Philippines girls married before 15 years are reported to be three times more likely to experience IPV than women aged 20–24 years, while girls married at 15–17 years are twice as likely to experience such abuse.(42) In contrast, narrow spousal

age gaps are positively correlated with women's power in relationships.(50)

Data from the region indicates variations in patterns of spousal age gaps between countries. In most nations, young women (20–24 years) married before age 18 have a husband approximately 4.5 years older (see Figure 11). However in Indonesia, Papua New Guinea and Timor-Leste spousal age gaps are higher, at six to seven years, with 43–46 per cent of women married to men six or more years their senior. Large spousal age gaps, of more than 10 years⁸, are most common in Papua New Guinea and Timor-Leste where 20 and 13 per cent of women, respectively were married to men more than 10 years their senior. In comparison, only 1–7 per cent of marriages have age gaps greater than 10 years in Cambodia, Lao PDR, the Philippines, Thailand and Viet Nam. Peer marriages, with age differences of five years or less, are most common in Lao PDR (65 per cent), the Philippines (68 per cent) and Thailand (71 per cent).

Figure 11 Spousal age gaps among ever-married women 20–24 years



⁸ Larger spousal age gaps, of greater than 10 years, are described in analysis by McQuarrie (DHS, 2016).(46)

While the average age of marriage is rising in many countries, in Cambodia and Indonesia there is evidence that these increases are greater for women and adolescent girls in close-in-age relationships (0–2 or 3–5 year age differences) rather than those with larger spousal age gaps.(46) This would suggest the persistence in marriages of younger brides to significantly older husbands, despite the increasing average age of brides at marriage.

Differing patterns of spousal age gaps may indicate variations in the prevalence of the proposed typology of child marriage/early union. Where large spousal age gaps are prevalent – such as in Indonesia, Papua New Guinea and Timor-Leste – harmful, forced or arranged marriages may be more common. In settings where many spousal age differences are five years or less, and where early union/cohabitation

is also common – such as Lao PDR, the Philippines and Thailand – self-initiated or circumstantial peer marriages/unions, may be occurring. However, this association requires testing and validation.

Close-in-age exceptions, for age of consent for sex, recognize that sexual relationships between peers are generally related to adolescents' evolving capacities, rather than exploitation. In a new approach, proposed anti-child marriage legislation in the Philippines further recognized the harm associated with large spousal age gaps by suggesting penalties for men who contract a child marriage with a minor who is 10 years or more his junior.(71) More research is needed to determine the size and extent of spousal age gaps in child marriages and early unions across the region and to establish how partner age disparities impact girls' agency and well-being in relationships.



3.3 Adolescent Pregnancy and Childbearing

Childbearing in adolescence can be measured in two ways: i) by questioning those aged 15–19 years about current pregnancies and previous live births, and ii) surveying the 20–24 year cohort about live births before the age of 18. Both datasets have their limitations. Surveys of girls aged 15–19 years paint an incomplete picture, as they may still conceive and give birth after the survey, but before they turn 19. While data for women aged 20–24 years is complete, it is also less recent. The following analysis will consider surveys of both cohorts, however it should be noted that while data from the 15–19 age bracket includes childbearing at aged 18–19 years, data for those aged 20–24 does not. A further limitation is that surveys capture live births, but not pregnancies that end in stillbirth, miscarriage or abortion. For this reason, data underestimate the extent of adolescent pregnancy.

Rates of adolescent pregnancy and childbearing are highest in Lao PDR and Papua New Guinea

Analysis of the most recent survey data, for girls and young women, indicates significant disparities in rates of childbearing across the region (see Figure 12 and Annex Tables 2, 3, 4). The proportion of women

Most adolescent girls reported their adolescent pregnancy was intentional or wanted

(aged 20–24 years) reporting childbirth before 18 years varies from 5 per cent in Viet Nam to 18 per cent in Lao PDR. Similar variations are notable for adolescent girls (15–19 years), with 6 per cent in Thailand and 17 per cent in Lao PDR reporting being pregnant or having already had a live birth (see Figure 12 and Annex Tables 2 and 3). Disparities in childbearing reported by women and girls are challenging to interpret, due to the sample differences outlined above, but may reflect trends over time. For example, there would appear to be increasing rates of adolescent childbirth in Cambodia and Viet Nam, and declining rates in Papua New Guinea and Thailand.

Across the region, most adolescent girls (15–19 years) reported their pregnancy or birth was wanted or intended (see Figure 13). However, there are still many unintended/unwanted or mistimed adolescent pregnancies across the region – 35 to 59 per cent of girls in Papua New Guinea, the Philippines and Thailand having reported their pregnancy was unwanted or preferred later. Unintended pregnancies were most common in Papua New Guinea (14 per cent) and Thailand (12 per cent). It should be noted, that in some settings adolescent girls may be reluctant to report children as being unwanted, preferring instead to describe them as mistimed.(100)



Figure 12 Adolescent childbearing among women (20–24 years) and adolescent girls (15–19 years)

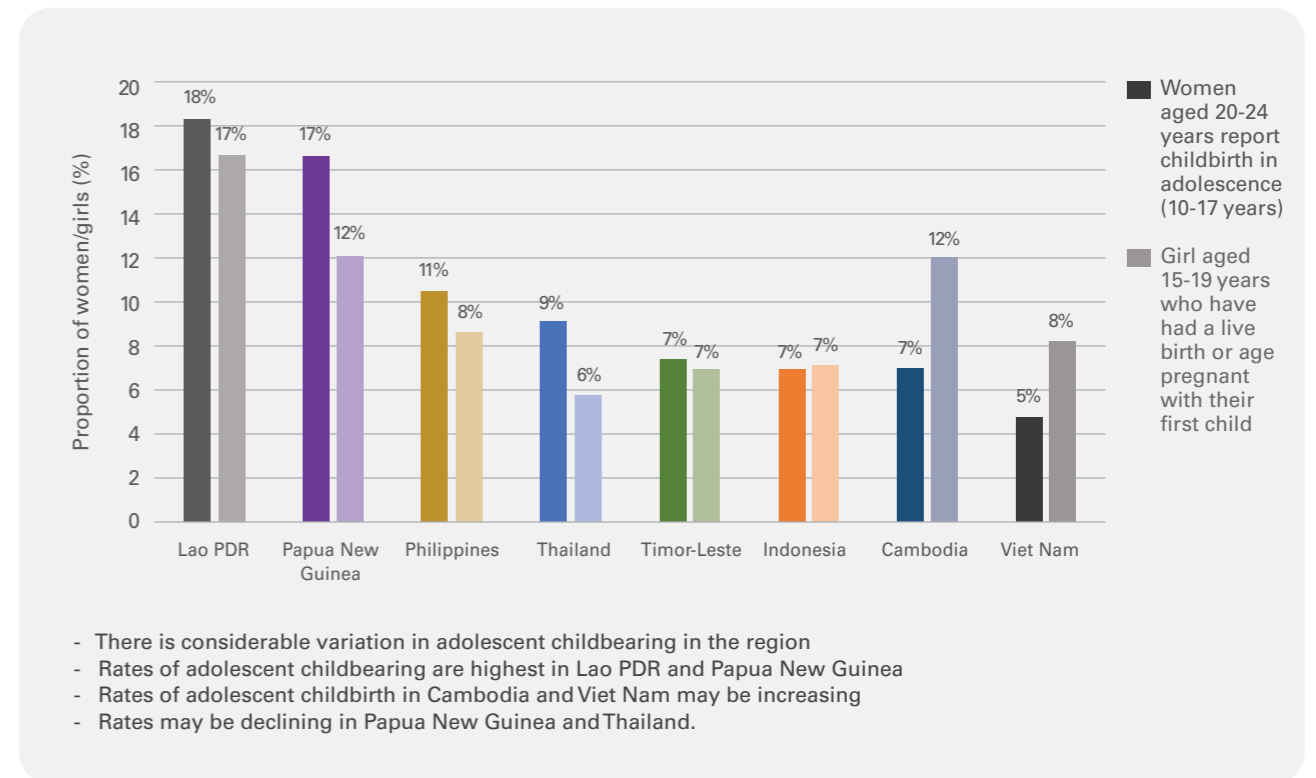
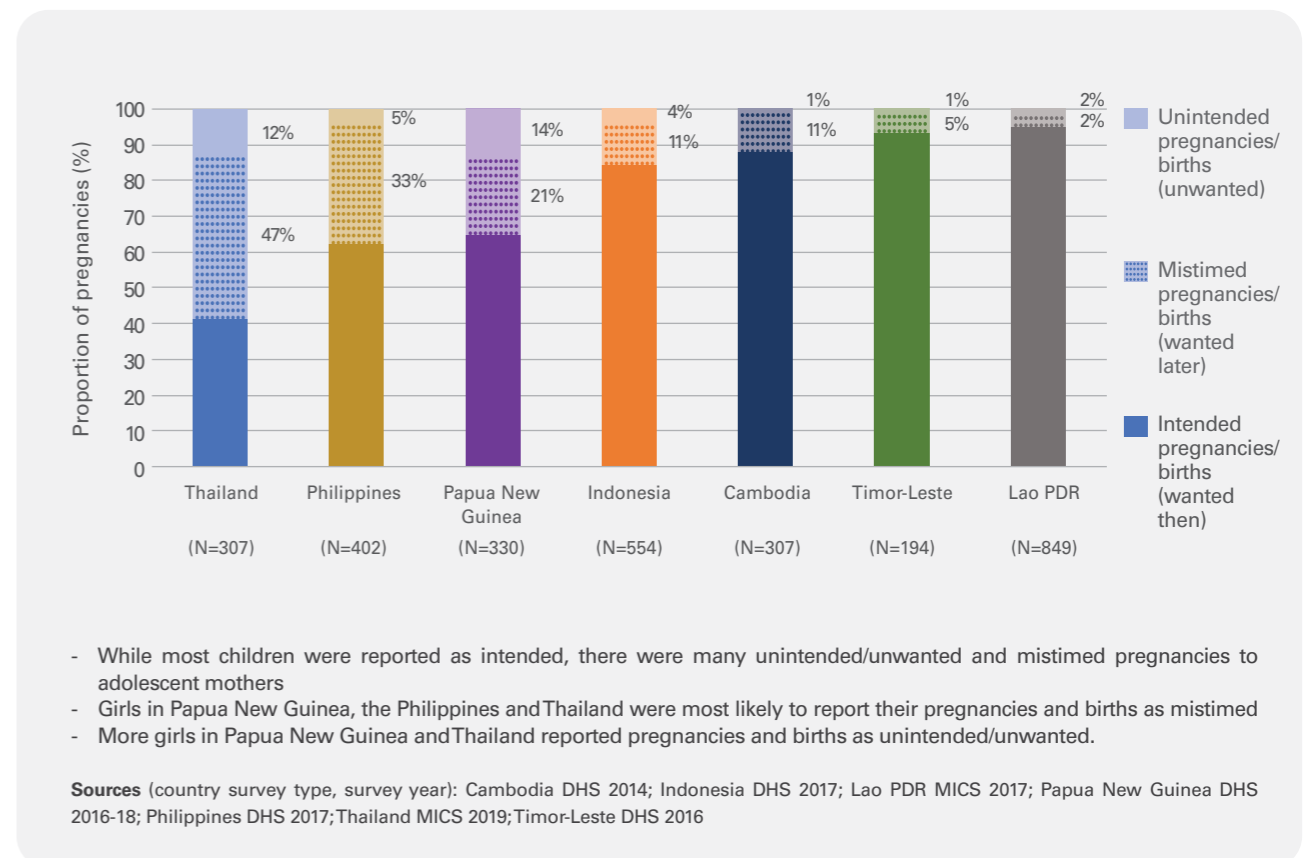


Figure 13 Adolescent pregnancies and births intended, mistimed or unwanted for adolescent girls aged 15–19 years



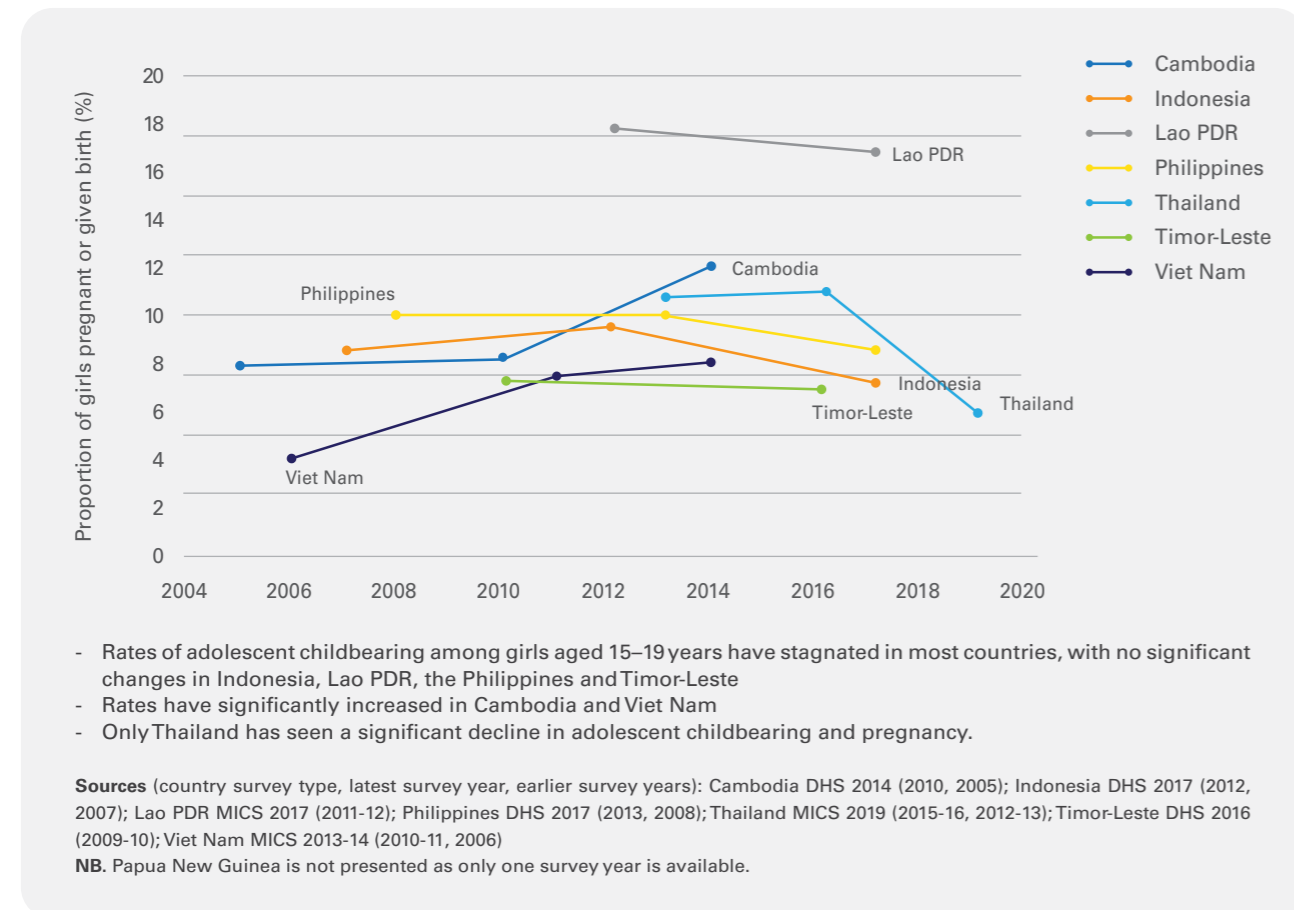
Progress to reduce adolescent childbearing has stalled in most countries

Analysis of trends in adolescent childbearing suggest progress is stalling in many countries. Reports by women (20–24 years) suggest a significant decline in adolescent births in Cambodia, Indonesia and Thailand, no significant change in rates in Lao PDR, Timor-Leste and Viet Nam, and a rise in births in the Philippines (see Annex Figure 1). However, more recent data from the younger cohort (aged 15–19), indicate only Thailand is making significant headway in reducing teenage childbirth (see Figure 14). In Indonesia, Lao PDR, the Philippines and Timor-Leste there is no significant difference between most recent and baseline rates of adolescent childbirth. However, in Cambodia and Viet Nam there has been a significant increase in teenage births.



Thailand has made the most headway in reducing adolescent childbirths

Figure 14 Trends in childbearing and pregnancy for adolescent girls aged 15-19 years (currently pregnant or have had a live birth)

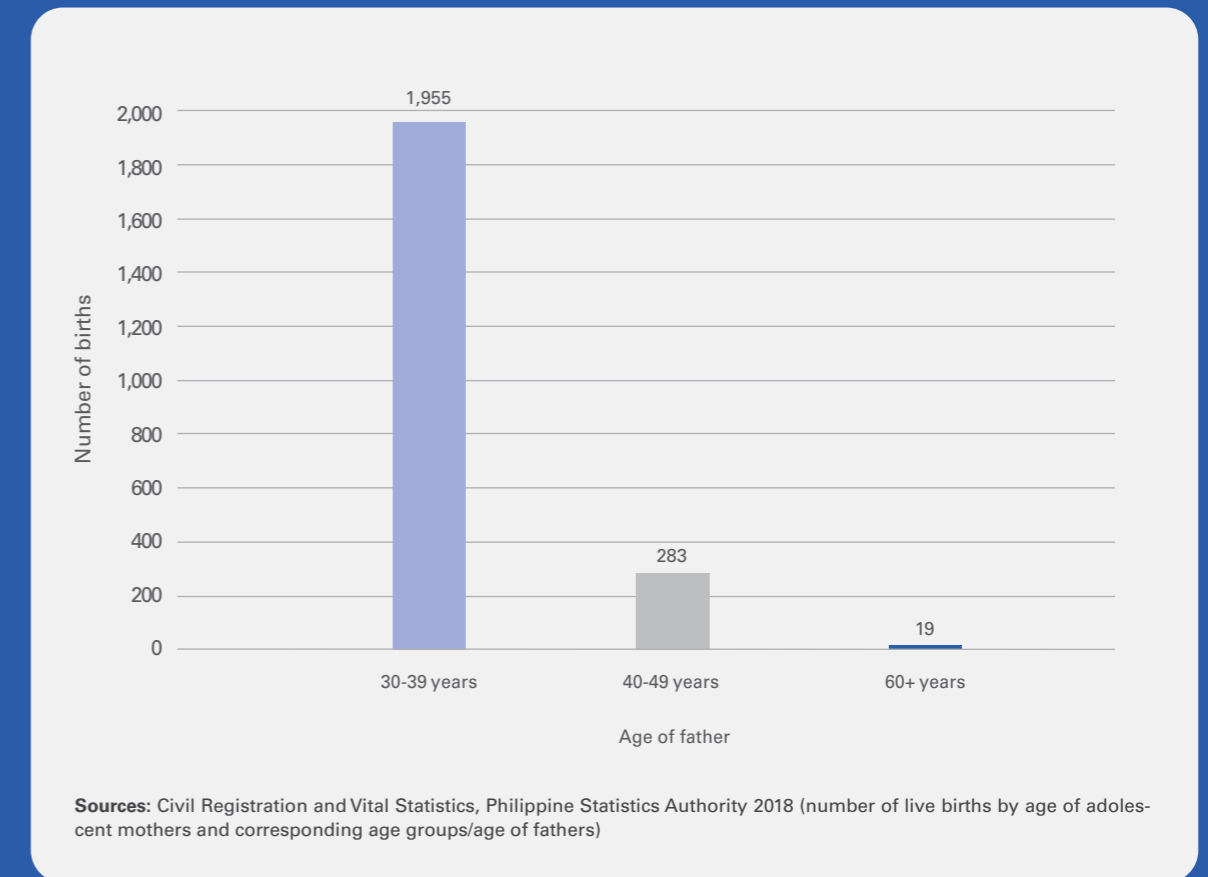


Father ages for adolescent childbirth in the Philippines

Childbirth data from 2018, for nearly 45,970 adolescent mothers (10–19 years), provides insights into parental age gaps in adolescent pregnancies in the Philippines. Adolescent boys fathered more than a third of teenage pregnancies (36 per cent).⁽¹⁰¹⁾ However, most fathers (59 per cent) were aged 20–29 years. Many of these fathers were not close in age, particularly with early adolescent mothers, with age gaps of 11–16 years. Five per cent of fathers were aged over 30 years, including more than 300 fathers over 40 (see Figure 15). Large partner age differences have been associated with greater sexual risk behaviour, including less use of condoms and contraception.^(48,49)

Age of father	Total	10–14 years	15–19 years	20–29 years	30–39 years	40–49 years	50–59 years	60–69 years	70+
Mother aged 10–14 years	1,277	12	606	590	57	7	4	1	0
Mother aged 15–17 years	44,688	36	16,088	26,379	1,898	217	55	14	1

Figure 15 Number of births to adolescent Filipina mothers, with fathers aged 30 years or older



3.4 Patterns of Premarital Conception

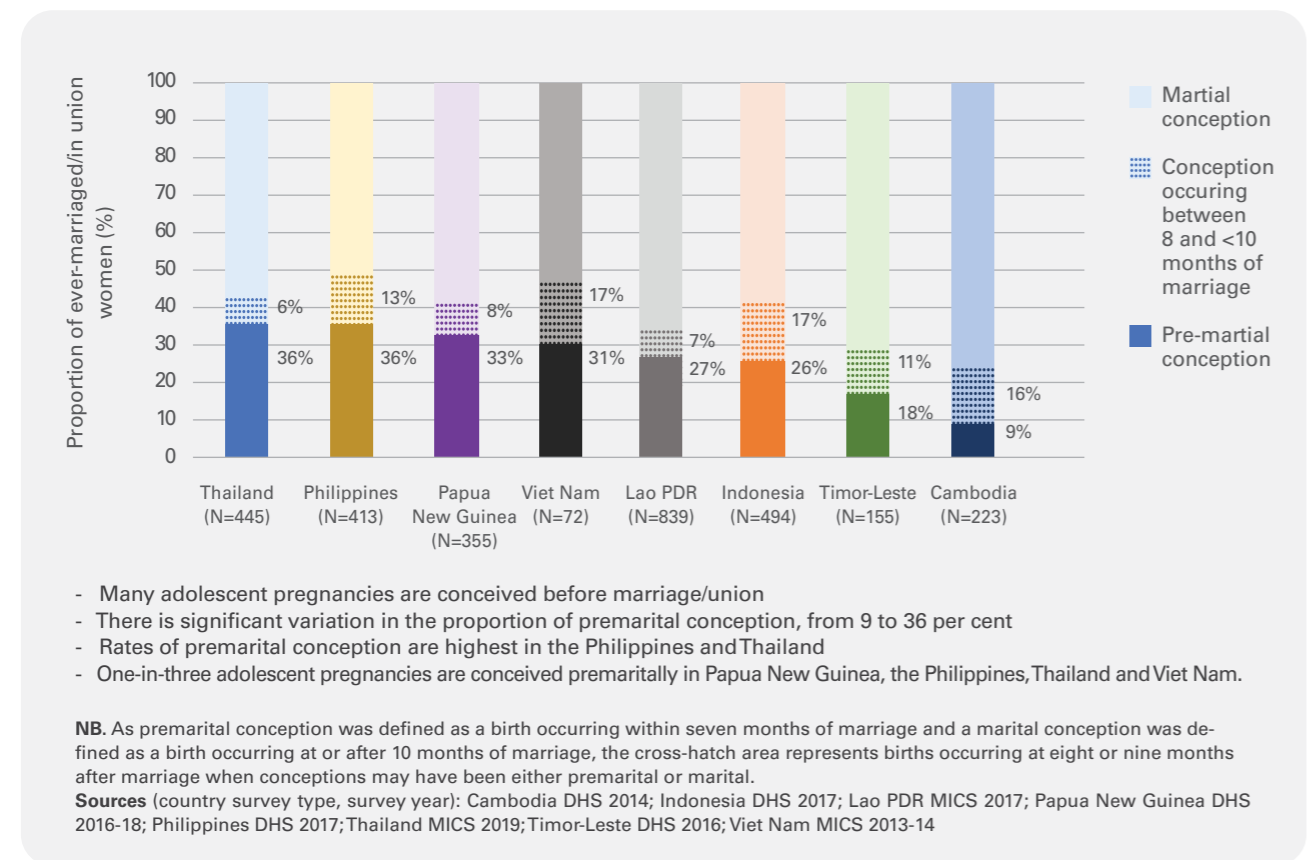
New data analysis shows that across the region, a significant proportion of adolescent pregnancies are conceived before marriage (see Figure 16). In several countries – Papua New Guinea, the Philippines, Thailand⁹ and Viet Nam – one-in-three adolescent pregnancies were conceived before marriage/union, as reported by ever-married/in-union women (20–24 years).

Timing of adolescent conception varies considerably between countries. In Cambodia, where the rate of premarital conception is lowest at 9 per cent, three-quarters of pregnancies were conceived within marriage. This is very different to the situation in the Philippines, where half of adolescent pregnancies were conceived within marriage and 36 per cent were conceived before. However, in all countries, data from women aged 20–24 years indicates the vast majority

of girls who conceive during adolescence do ultimately get married or enter union. Indeed, most adolescent girls who conceive premaritally were married by the time they gave birth (see Figure 17). This is particularly the case in Indonesia where 92 per cent of women who conceived premaritally in adolescence were married by the time of birth, suggesting these child marriages were circumstantial: they took place as a result of and in order to manage premarital adolescent pregnancy. Conversely, in Thailand only 57 per cent of women reported being married at the time of birth, suggesting greater acceptance of adolescent motherhood outside marriage. However, as the sample sizes for this data are relatively small, these findings should be interpreted with caution.

Most girls who conceive premaritally during adolescence enter marriage or union before childbirth

Figure 16 Timing of conception among ever-married/in-union women (20–24 years) who gave birth before aged 18 years



⁹ As data for Thailand lacked the month of marriage for half of women in the latest MICS when the date of marriage was imputed, this data should be treated with caution.

Figure 17 Marital status at time of birth for ever-married women (aged 20-24 years) who conceived premaritally (%)

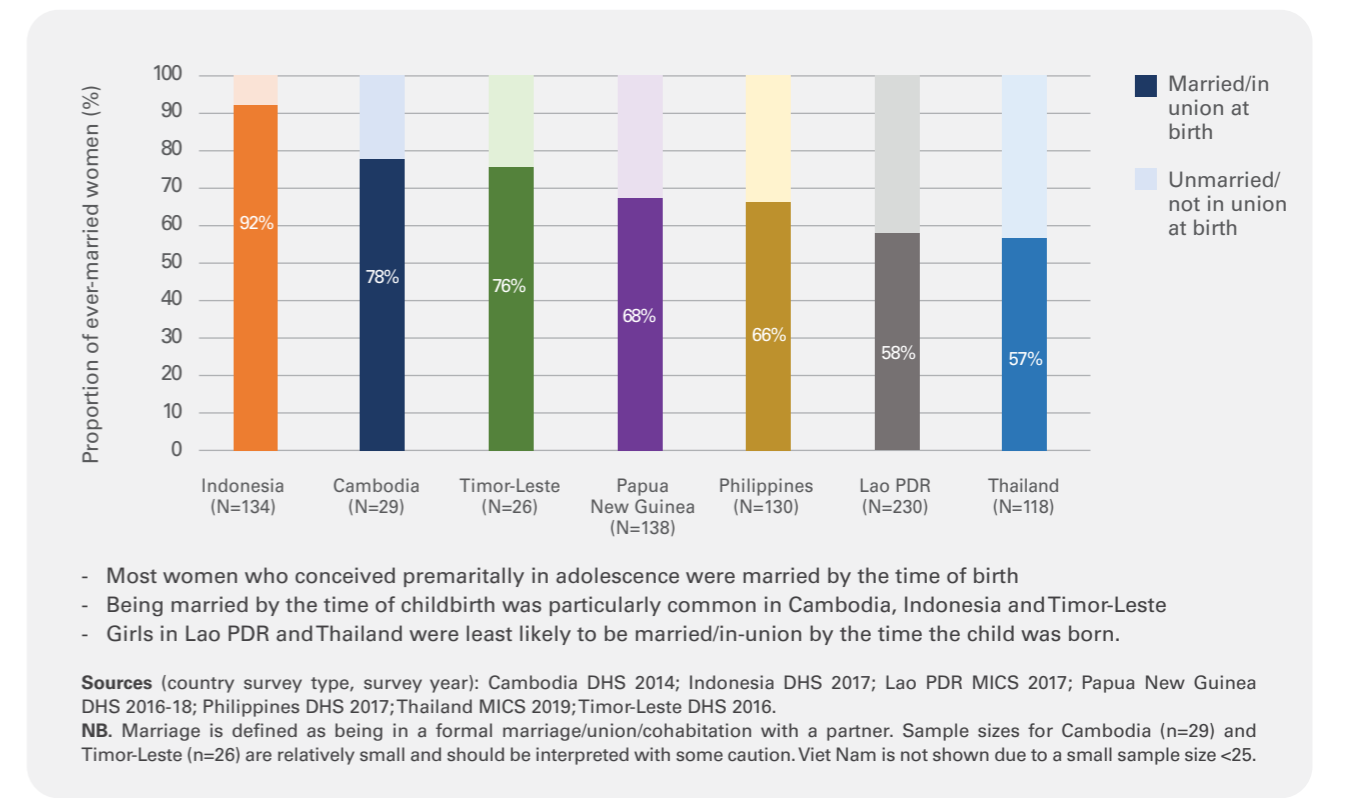
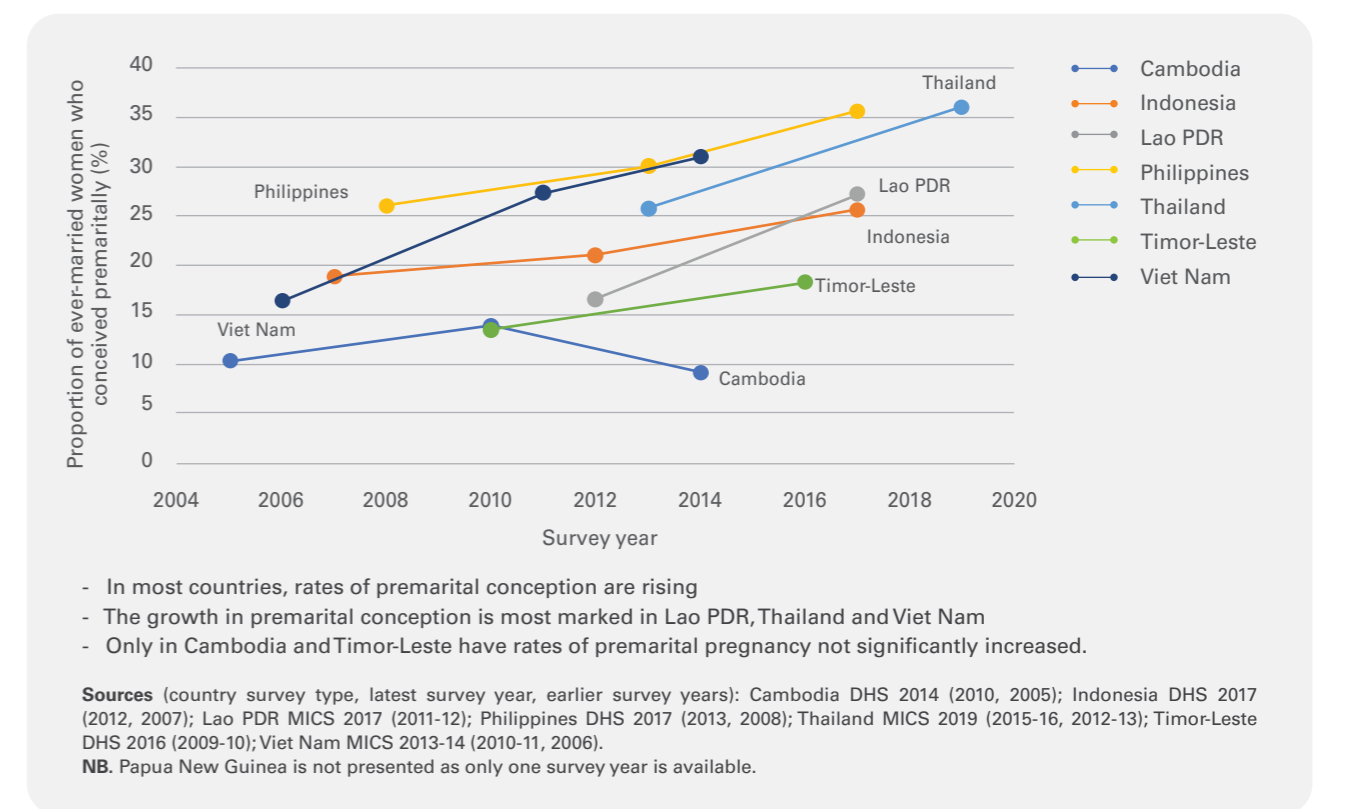


Figure 18 Trends in premarital conception among ever-married/in-union women (aged 20-24 years) who gave birth before 18 years of age



The rising rate of adolescent premarital conception in most countries is particularly striking (see Figure 18). Only Cambodia and Timor-Leste do not demonstrate significant increases over time. The greatest growth in premarital conception can be seen in Lao PDR, Thailand and Viet Nam, where rates have increased 64, 40 and 90 per cent respectively, since the first available

survey. These increasing rates of premarital conception stand in stark contrast to the stagnation and declines in overall adolescent childbearing found in most countries. It is possible, that circumstantial marriages and unions may be increasing in these nations as a result of unintended pregnancies. However, more data is required to determine this.

Key Points: Understanding the Prevalence and Patterns of Childbearing, Marriage and Union in Adolescence

Child Marriage and Early Union

- Rates of child marriage and early union vary greatly across the region, from 11–33 per cent.
- Rates are highest in Lao PDR and Papua New Guinea, where one-third and one-quarter of girls, respectively, are married or in-union before the age of 18 years.
- Child marriages and early unions under the age of 15 years are uncommon (1–8 per cent).
- Recently, progress to eliminate child marriages/early unions has stalled in Cambodia, Indonesia and Viet Nam.
- Lao PDR, Thailand and Timor-Leste demonstrate declines in the rates of child marriage/early union.
- In the Philippines, child marriages/early unions are on the rise, with most unions being cohabitation.
- Available data underestimates the proportion of adolescent girls in informal unions in some countries.
- Cohabitation is more common than child marriage in the Philippines and Thailand.
- Spousal age gaps are negatively associated with girls' age at marriage: the younger the bride, the larger the age gap.
- The younger girls marry, the less agency and decision-making power they tend to have and the greater their risk of IPV.
- Spousal age gaps are wider in Indonesia, Papua New Guinea and Timor-Leste.
- Peer marriages/unions are more common in Lao PDR, the Philippines and Thailand.

Adolescent Pregnancy and Childbirth

- Rates of adolescent childbearing also show considerable variance across the region, from 5–18 per cent.
- Rates are, once again, highest in Lao PDR (18 per cent) and Papua New Guinea (17 per cent).
- Rates of adolescent childbearing have stagnated in most countries over the past decade.
- Only Thailand demonstrates a significant decline in adolescent pregnancies.

Patterns of Premarital Conception

- While the situation varies considerably between countries, a significant proportion of adolescent pregnancies are conceived before marriage.
- The highest rates of premarital conception equate to one-in-three adolescent pregnancies in Papua New Guinea, the Philippines, Thailand and Viet Nam.
- Most girls with premarital adolescent pregnancies were married or in-union by the time of birth.
- Being married by the time of childbirth, following a premarital conception, was particularly common in Indonesia, Cambodia and Timor-Leste.
- Girls in Lao PDR and Thailand were least likely to be married/in-union by childbirth.
- In all countries, except Cambodia and Timor-Leste, rates of premarital conception are increasing.
- The greatest rises in premarital conception are seen in Lao PDR, Thailand and Viet Nam.
- Circumstantial marriages and unions may be climbing as a result of unintended premarital pregnancies. However, more data is required to confirm this.

4.

Context and Determinants of Adolescent Pregnancy and Premarital Conception, Child Marriage and Early Union

The previous chapter provided evidence that, in many settings, rates of adolescent pregnancy and child marriage/early union are not declining in Southeast Asia and the Pacific. Further, it demonstrated that premarital conceptions are rising in many countries, likely driving circumstantial marriages. The need for action and governments' commitment to address these adolescent pregnancies, child marriages and early unions has been established previously. However, in order to develop effective strategies and interventions that address early pregnancies, marriages and unions, there is a need to understand the underlying and contributing factors.

The context and determinants of adolescent pregnancy and child marriage/early union are complex, interrelated and well-documented, both globally and regionally (see Figure 19). (3,4,10,11,18,21,40,41,44,52,55,73,84,102-110) Gender norms that stigmatize adolescent sexuality and limit women to domestic and reproductive roles, underpin marriage and motherhood as central to a girl's transition to adulthood. Harmful social and gender norms that deprive women of agency, support unequal power relations between women and men and perpetuate GBV are also key drivers of pregnancy and marriage in teenage years.

Socio-economic factors, such as poverty and low education levels, are not only contributors but are also perpetuated by early marriage and childbirth. Crises, such as conflict and natural disasters, exacerbate difficult family circumstances and poverty, further driving early marriages and pregnancies. In some contexts, adolescents' physical development and evolving capacities may also motivate intimate relationships, and a desire for marriage and parenthood.

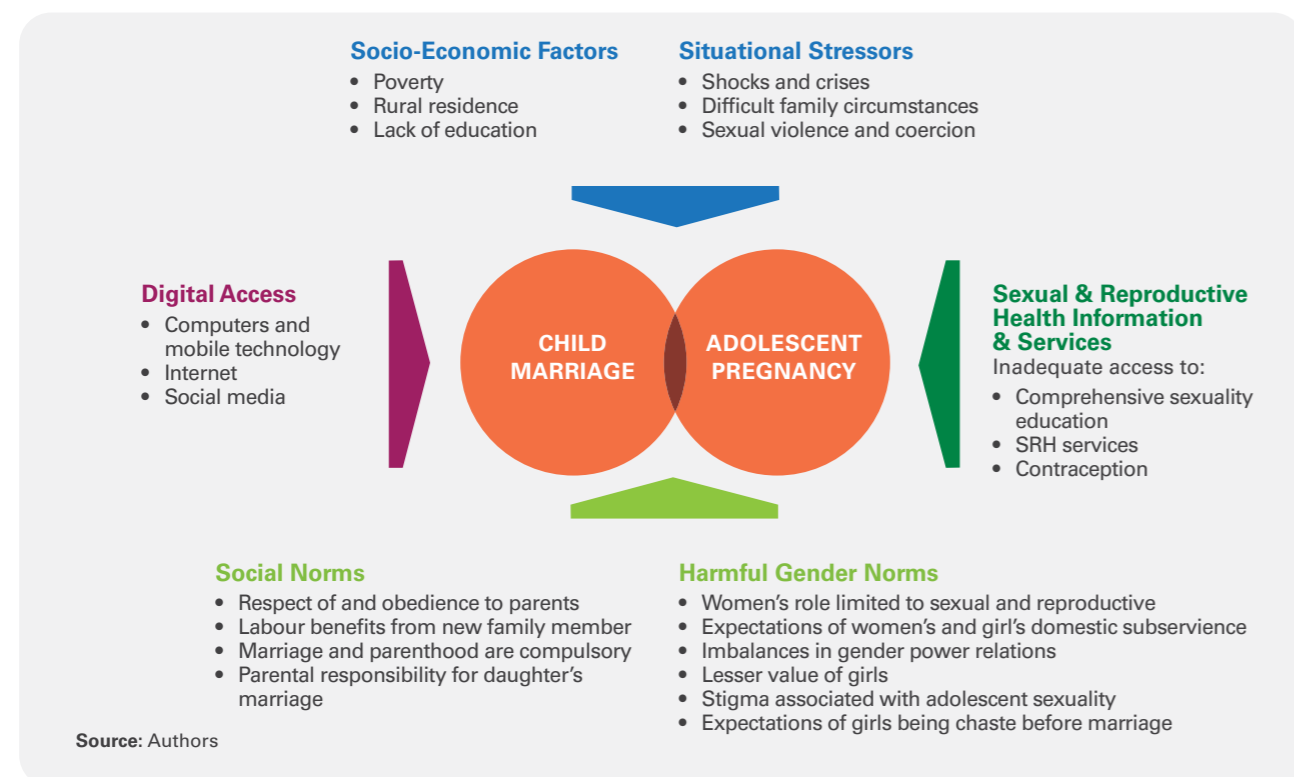
The following analysis will explore evidence from the region and beyond, regarding the factors associated with and driving child marriages/early unions, adolescent pregnancies and premarital conceptions.

4.1 Adolescent Sexuality and Agency in Relationships

Adolescent Sexuality and Sexual Behaviour

Adolescent sexual activity may not only result in pregnancy, it can also be a driver for child marriage or early union. (12,87,104) Development of sexuality is a normal part of the transition to adulthood, however inadequate knowledge about sexual and reproductive health and lack of access to contraception may lead to an unintended pregnancy. This in turn may trigger a circumstantial marriage to protect the honour of the girl and her family. Even the perception an unmarried girl being sexually active may be sufficient for her to be pressured to marry. (41,85,98,111)

Figure 19 Context and determinants of adolescent pregnancy and child marriage



There are considerable variations across the region in reported rates of sexual activity among adolescents. According to DHS data for Southeast Asia, 14 per cent of adolescent girls and 9 per cent of adolescent boys, aged 15–19, have ever had sex. In Pacific countries, with data, a greater proportion of adolescents report ever having had sex: 29 per cent of girls and 35 per cent of boys.⁽⁶⁾ However, as the average age of marriage rises in the region and social norms regarding sexuality become increasingly permissive, a growing proportion of young people report premarital sex.⁽⁶⁾ Premarital sex tends to be more common among less religious, middleclass, urban young people.^(112,113)

Data from selected countries confirms substantial differences in the proportions of adolescent girls (15–19 years) who report ever having had sex (see Figure 20). Rates were highest among adolescent girls in Lao PDR and Papua New Guinea, with one-in-three or four girls reporting ever having had sex. Adolescent girls in Indonesia and Timor-Leste were least likely to report ever having had sex, with the rate closer to one-in-10 (see Figure 20). However, it should be noted that in some settings, stigma associated with adolescent sexuality may lead to social desirability bias,

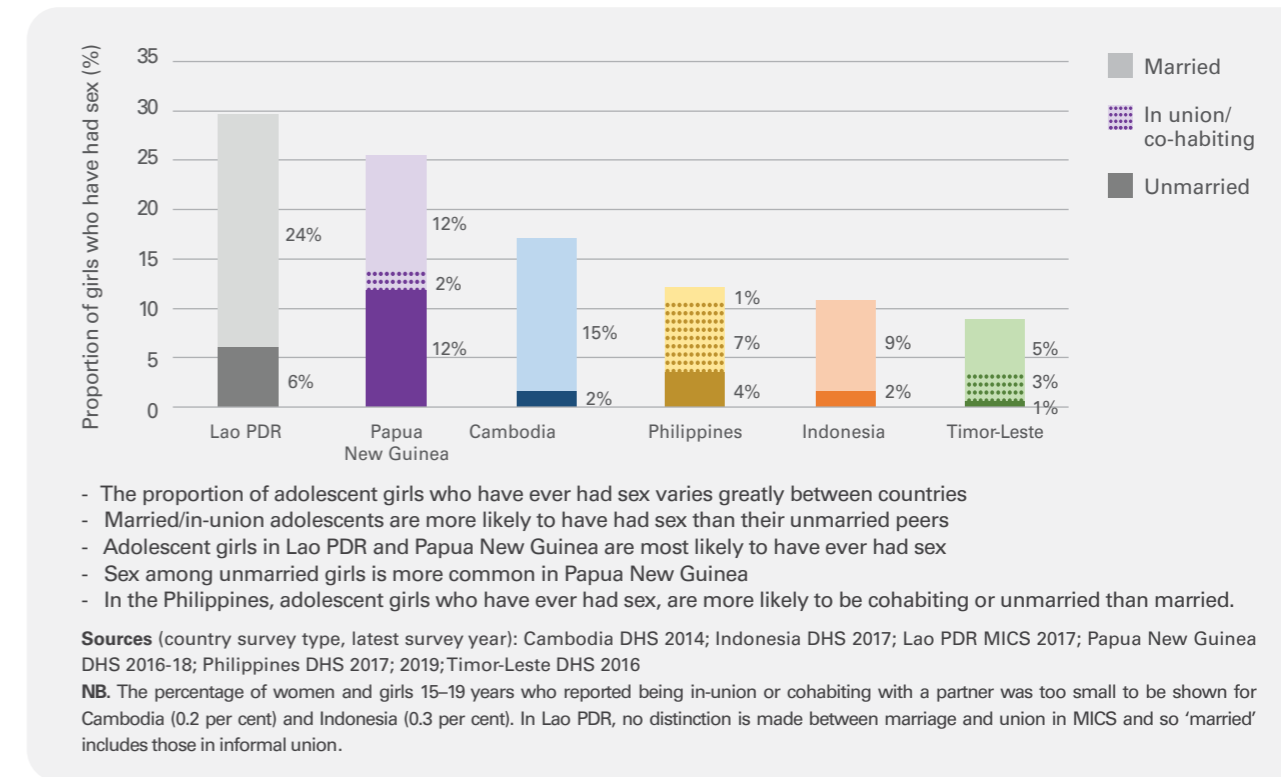
impacting the accuracy of young people's responses to questions about sexual behaviour.

For adolescent girls, globally, an early sexual debut¹⁰ is most common in countries with high rates of child marriage.⁽⁷⁾ Analysis of data from women (20–24), in the region, finds that those reporting first sex by 18 years were generally also married/in-union at this age (see Annex Table 5 and Annex Figure 2). This is confirmed by data for 15–19 year-olds which indicates that most adolescent girls, who report having had sex, are married or in-union (see Figure 20). This is particularly the case in Cambodia, Indonesia and Lao PDR.

The proportion of unmarried adolescent girls who reported ever having had sex varied from 1–12 per cent, and was highest in Papua New Guinea (see Figure 20). Women in this nation who first had sex by 18 were also less likely to be married at 18 than in other countries, adding to the evidence for a higher prevalence of premarital sex. Unmarried adolescent girls in other nations were much less likely to report ever having had sex (1–6 per cent). In the Philippines, adolescent girls who reported ever having had sex were more likely to be in-union (7 per cent) or unmarried (4 per cent), than married (1 per cent).

¹⁰ Sexual debut is defined as the timing of first sexual intercourse.

Figure 20 Proportion of adolescent girls (aged 15–19 years) who have ever had sex, by marital status (%)



"So how does the community react when they catch young couples sleeping together, they force them to get married, even if they don't agree. Once they're married, then the issue is over, the people don't talk about it anymore. You will be dead if you don't get married after you've slept together!" Migrant and refugee community on Thailand-Myanmar border (85)

Technology and Changing Social Norms

Across the region, increasing urbanization, access to digital technology and mass media is leading to tensions between traditional, cultural and religious values and modern, western ideals.^(86,43) Exposure to attitudes and norms, more permissive of adolescent sexuality and a heavy orientation towards consumerism, individuality and western beauty is leading to cultural shifts among young people across the region. This includes perceptions of being "sexy" as "cool" rather than immoral, and an increasing acceptance of premarital sex.^(173,174,175) Reduced parental influence is seeing young people explore feelings of intimacy, sexual desire and curiosity to pursue sexual relationships.⁽¹⁷⁴⁾ There is also a more romantic interpretation of marriage, as compared to traditional views of marriage as a social and economic institution.⁽¹⁷⁴⁾ For example, adolescents in Indonesia are reported to defy social expectations and engage

in premarital sexual relationships because they are 'in love'.⁽⁵⁸⁾ In the Philippines, there has been a move away from formal courtship and introductions by parents, to more informal or casual encounters with friends.⁽¹¹²⁾

Increasing use technology has also been suggested to contribute to adolescents forming sexual relationships, which may lead to early pregnancy and/or marriage. Young people's access to and use of mobile phones, computers and social media allows them to make connections and form relationships that may otherwise not be permitted or sanctioned.^(80,84,97) Adolescents can independently develop new romantic relationships and communicate with 'love interests' online. In Viet Nam, increased access to telecommunication technologies is reported to have changed dating practices, enabling adolescents to develop relationships more easily, driving premarital pregnancies and contributing to child marriage, by allowing young men to "find a wife faster".⁽⁷⁹⁾

"Premarital sexual intercourse, being aib (disgrace) and dosa (sin) – 'it is salah (wrong) according to Hindu.' That's what our parents say. We are the generation of millennials, globalization, and such. For us, it is okay to have sex (sex boleh aja). We know about those things." Bali, Indonesia (98)

Adolescent Agency in Marriages and Unions

It is challenging to determine girls' agency in child or early marriages, as well as the proportion of self-initiated unions, as data on decision-making is largely unavailable. DHS and MICS surveys do not generally collect data about decision-making in marriage/unions. Only a few country-based studies were identified that provide some measure of agency in child marriage decision-making. A study of indigenous communities in the Philippines found that 26–49 per cent of respondents indicated they had been betrothed by parents, with 8–18 per cent forced into marriage by parents, and only 30–45 per cent stating early marriage was their personal choice.(114) A dedicated DHS youth survey in Indonesia found that 71 per cent of unmarried adolescent girls and 76 per cent of adolescent boys (15–19 years), said they would make their own decisions about when and who to marry in the future (see Figure 21).(115) Only one-in-10 adolescent girls said their parents or family members would decide. This reflects a considerable increase in young people's agency in decision-making from the previous decade, where only half of girls and young women (aged 15–24 years) indicated they would make this decision. Another study from Indonesia of young people married early, reported 89 per cent of female respondents and 80 per cent of male respondents made the decision to marry their own choice.(87) This data would suggest most Indonesian girls have agency in deciding to marry. However, it is important to understand the circumstances and context, social

dynamics and quality of consent, to determine whether these decisions were freely made, and marriages truly selfinitiated.

Making the decision to marry is not as simple as saying “yes, I do”. As discussed earlier, consent can be complicated and the circumstances surrounding a marriage are key to determining agency in decision-making. When the marriage is arranged by others, a girl has not exercised her free will in selecting a husband. While theoretically she may be able to reject the arrangement, there may be great social pressure to comply.(11,85,98) Children and young people are strongly influenced by social norms and the beliefs of their parents. For example, research from Indonesia found positive perceptions of the benefits of child marriage remain prevalent among parents and adolescents, with one-in-four agreeing a girl is ready for marriage once she reaches menarche.(116) Social norms which shame and stigmatize a pregnant, unmarried girl may make her situation untenable, particularly if she faces rejection from the community. Decisions made under threat of violence, coercion and undue pressure do not reflect free will. In these instances, adolescent girls may perceive they have no other choice but to marry, to remain safe and secure, and the decision is not made freely. It should also be noted that the meaningful, free and fully informed consent required for marriage may also be lacking in the marriage of an adult woman – age does not necessarily guarantee agency.

“When I was young, I had premarital sex, so we had to get married. Our parents told us to get married, so it was better to get married. My husband’s mother told us to get married because of premarital sex. My father’s side of the family told me that instead of letting a bad thing [premarital sex] continue, it’s better to get married”.

Malaysia (11)

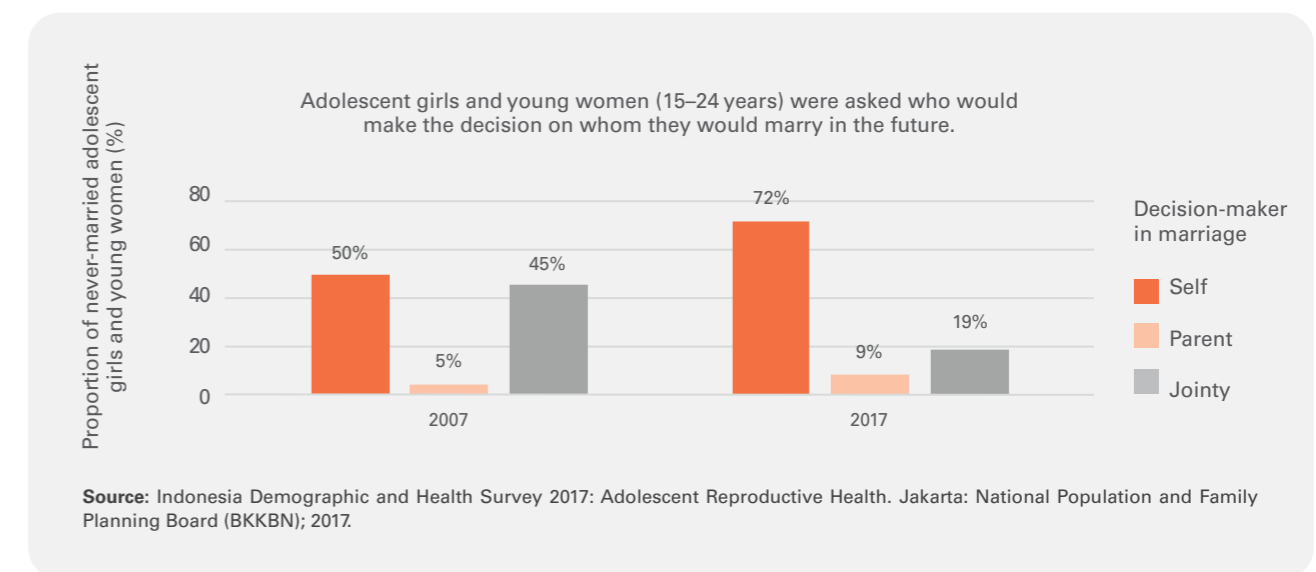
© UNICEF/UN074029/Pirozzi

Qualitative research, from several countries in the region, suggests adolescent girls do make independent decisions to marry.(41,79,84,98) For example, studies of ethnic communities in Viet Nam provide examples of ‘love’ relationships between young people.(84) These couples often meet at work, school, outings or local festivals, and follow a pattern of courting and dating. Courtship and agency in the decision to marry, is also reported among adolescent girls in Bali, Indonesia.(98) In Cambodia, parents reported that that young people generally make the decision to get married early, with reasons including the desire to have their own home, children and financial independence.(41) Young people reported the advantages of being married early to be ‘eternal companionship’, love, sex without guilt and starting families. Often young people marry in secret to not get

into trouble with commune leaders. In the Philippines, elopements provide another example of ‘run-away’ love-matches.(117) Couples elope to avoid the need for parental approval – they may intend to get married formally, but choose to cohabit first.

These self-initiated unions appear to indicate that some young people exercise their evolving capacities to make decisions about their relationships and family lives. Relationships can be an important source of well-being for adolescents and young adults and can include many positive facets including attachment, caregiving, love, feelings of security, companionship, cooperation and support.(35,37) As long as these life decisions to marry or cohabit are made freely, by mature young people who fully understand their options, consent can be as meaningful as that given by someone over 18 years.

Figure 21 Predicted decision-making in marriage, according to never-married adolescent girls and young women in Indonesia (115)



“No one told me to get married. I just wanted to have a family.”

Cambodia (41)

“I guess why I got married early is because it is my fate. We loved each other. Some of my friends asked me why I decided to get married too early. They said that I was young and my future’s still long; that I needed to enjoy myself. But it’s fate; that’s all I can say.”

Malaysia (11)

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Making the Decision to Cohabitate

In the Western world, cohabitation is generally self-initiated by young people and associated with changing social norms, and the delay of marriage and children in favour of education and careers. (168) However, evidence from Southeast Asia – particularly the Philippines and Thailand where these unions are more common – indicates cohabitation among young people may be as much linked to disadvantage as to self-determination.(64)

Research from the Philippines indicates that cohabitation is more common among young people and low-income populations.(117,154,169, 170) While informal unions were linked to higher levels of premarital sex, increasing individualism and secularism, economic concerns are reported to be a key driver. The decision to cohabit rather than marry has been attributed to the cost of the marriage ceremony, celebration, legal fees and license. Other reasons for cohabitation, reported by young people, included being “too young” to formally marry, parents refusing permission to marry and unintended pregnancy.(154,169) Urban residence, instability and absent parents, low and medium levels of education, and lack of engagement in work have also been linked to informal unions.(169) One study found adolescent pregnancy to be the key driver of cohabitation, with the father of the child and not the girl or her family, having the decision-making power regarding marriage or union.(170)

Informal union was also reported to be a trial for marriage and more acceptable when there was a plan to marry in the future.(154). The inability to divorce in the Philippines may contribute to a desire to test the relationship through cohabitation prior to marrying, or may prevent a previously married spouse from tying the knot again.(154,169)

In Thailand, informal unions are also more commonly associated with poverty.(171) Research suggests that increasing cohabitation is not necessarily reflective of changing social norms, but rather that circumstances may trigger informal unions.(172) In urban settings, it was easier for young people to cohabit as it removed social stigma regarding premarital sex and pressure to marry. Female informants generally indicated they only told their family after moving in with their boyfriends, and that they still wanted to marry at a later point to satisfy their parents.

In summary, while some young people do self-initiate informal unions based on a “love” relationship, cohabitation in the Philippines and Thailand is often driven by circumstances. Stigma surrounding adolescent sexuality is still a push factor for informal unions and they can be a solution to unplanned pregnancy. In the latter instance, the girl may have little power in the decision-making process. In addition, poverty, lack of education and employment opportunities also appear to be contributing factors for these unions, which in many instances may be an intermediary step to marriage.



4.2 Sexual and Reproductive Health Information and Services

Comprehensive Sexuality Education

Evidence shows that young people who attend school and receive quality comprehensive sexuality education (CSE) are more likely to delay sexual activity.(7,108,109,119,120) However, school drop-out rates are often higher in contexts where adolescent pregnancy and child marriage are more common, and CSE is poorly implemented or skipped.(6,7,43) Gaps in CSE implementation can be found in many countries in the region. For example, there is no secondary school CSE curriculum in Timor-Leste and implementation is optional in Lao PDR and Viet Nam.(6) Research from Indonesia found that few adolescents aged 10-14 years had received any school-based information on family planning, and many suffered guilt, misconceptions and uncertainty about sexuality and very low self-efficacy to prevent pregnancy.(121) Sexuality education is also generally unavailable for married girls, who are not in school.(6,7)

“Sometimes teachers teach us about reproductive stages, a female’s thing and a male’s thing. We don’t get to learn about sex and pregnancy or family planning. We only know that from neighbours”

Malaysia (11)

“Young women and men alike know very little about their own bodies but nearly all had heard of sex. They just didn’t know what would put them at risk of pregnancy, HIV or STIs, how their reproductive system worked or what were signs of pregnancy. Young people and parents alike seemed to be unaware of the health risks associated with teenage pregnancies.” Timor-Leste (55)

people generally avoid talking about puberty and sexuality as these topics are perceived to be taboo and irrelevant.(121) Where they exist, out-of-school CSE programmes such as peer education tend to be resource intensive and face many implementation challenges, including community stigma and difficulties in recruiting, training and retaining educators.(7) Increasingly, young people look online for information on sexuality and health, however, little is known about what they find when searching digital spaces for answers to personal questions.

Sexual and Reproductive Health Services

Sexual and Reproductive Health (SRH) services are challenging for young people to access in many countries.(6,7,43,74) Improved access to quality SRH services can reduce the risk of adolescent pregnancy and acceptability of child marriage.(6,43) However, young people face numerous barriers to access, including shame and stigma.(6,7,45) SRH services may not be adolescent-friendly, affordable, private or have convenient hours or location.(6,7,43,74) Health providers may be judgmental, indiscrete or have poor communication skills.(6) For example, girls in Indonesia reported being unaware of SRH clinics, which were oriented towards married couples.(58,122) They also indicated they may not attend such services, as people “will start to talk”.(58)

Young people cannot always access SRH services independently and may lack the power to make decisions about contraception. In the Philippines, adolescents under 18 require consent of a parent or guardian to access family planning services.(122) In some settings, married girls may require spousal consent, and even be prevented from making decisions about contraceptive use or birth spacing. (3) Public SRH clinics in Indonesia only provide contraception to a married woman with the consent of her husband, with family planning services unavailable to unmarried couples.(122,123) For countries with data, between 57 per cent (Papua New Guinea) and 81 per cent (the Philippines) of married women (aged 15–49 years) reported making their own informed decisions on sexual relations, contraceptive use and reproductive health care.(124) Adolescent girls likely have less decisionmaking power than mature women and there may be expectations that a young bride will fall pregnant shortly after marriage.(43)

There are many barriers to accessing quality CSE outside of school. Parents in the region generally do not teach their children about sexuality for multiple reasons, including discomfort, lack of knowledge and social taboos.(7) In Indonesia, parents and young

Unmet Need for Contraception

There is a significant unmet need for contraception, as reported by unmarried and married adolescents.(22) Young married women suggested a higher unmet need for contraception than older women in most countries considered, with the difference being most notable in Papua New Guinea, the Philippines and Thailand (see Figure 22). The relatively stable rates of unmet need for contraception seen in Cambodia, Indonesia and Lao PDR may be linked to high rates of intentional adolescent childbirth reported in these countries.

Adolescents encounter numerous barriers to accessing and effectively using contraception.(6,7,125–127) Supply-side factors, related to health services, were discussed in the previous section. Demand-side factors include social and/or partner pressure, and adolescents' lack of knowledge about contraceptive methods, including misconceptions about side effects. For example, young people in Thailand reported that barriers to accessing contraception included stigma, disinterest, cost and lack of anonymity and convenience.(45) Even when contraception is accessible, lack of knowledge may contribute to incorrect or inconsistent use. Side effects and poor quality of care also help drive high rates of contraceptive discontinuation among young people (128) In Indonesia, adolescents

reported entering premarital “love” relationships with limited knowledge about and access to contraception, and this contributes to premarital pregnancies.(58,87)

In all countries explored, except Thailand, most married girls (15–19 years) do not use contraception (see Figure 23). Where contraception is used, effective modern methods – such as condoms, intrauterine devices (IUDs), diaphragms, contraceptive pills, injections, implants and patches – are significantly more common than traditional methods, such as periodic abstinence, the rhythm method and withdrawal. Married adolescent girls in Thailand are considerably more likely to use modern methods of contraception than those in other countries. Rates of usage are lowest in Cambodia, Papua New Guinea and Timor-Leste. In Timor-Leste only one-in-12 married adolescent girls use modern methods of contraception (see Figure 23). In the Philippines, traditional methods, such as withdrawal, are still reportedly used due to limited side effects, partner acceptability, ease of use, no cost or need for prior planning.(129)

Use of contraception is particularly low among unmarried, sexually active girls.(6) In Thailand, only 1 per cent of unmarried girls reported using modern methods and in Lao PDR, Papua New Guinea and the Philippines it was only 13–14 per cent.

Figure 22 Currently married adolescent girls and women (15–49 years) with unmet need for contraception (%)

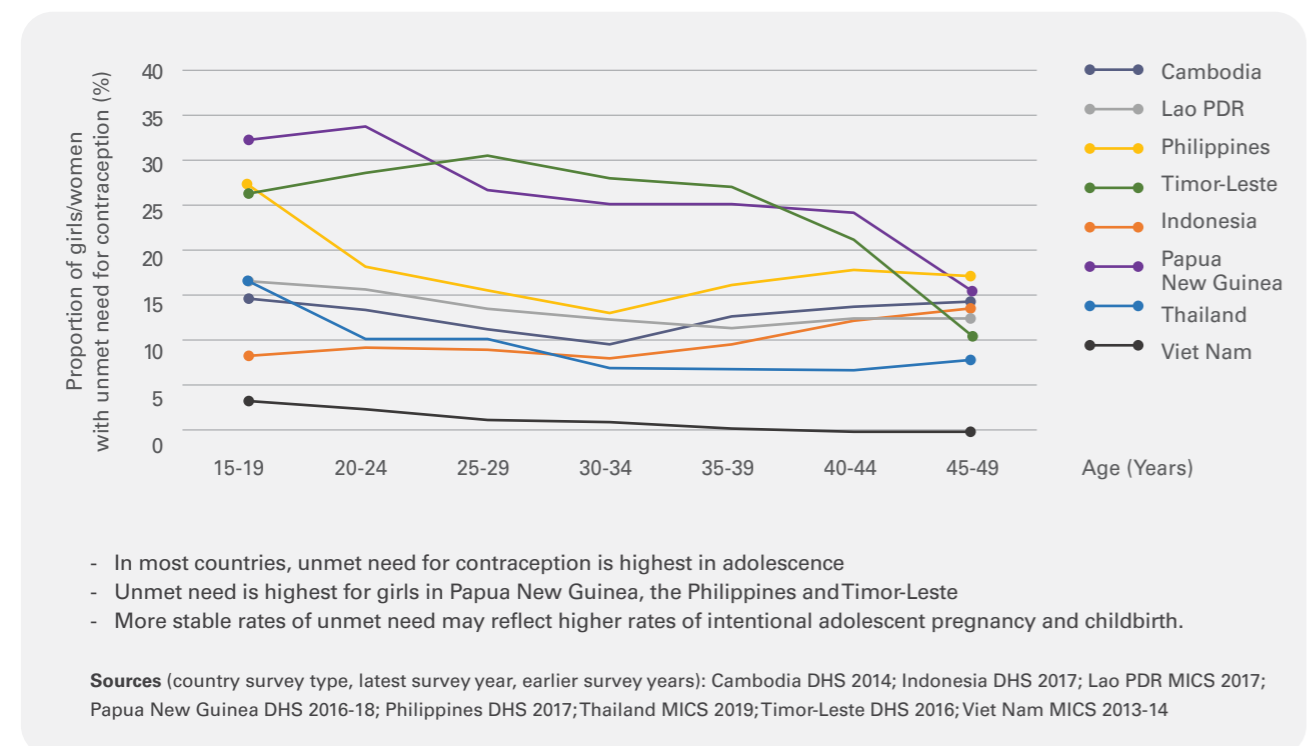
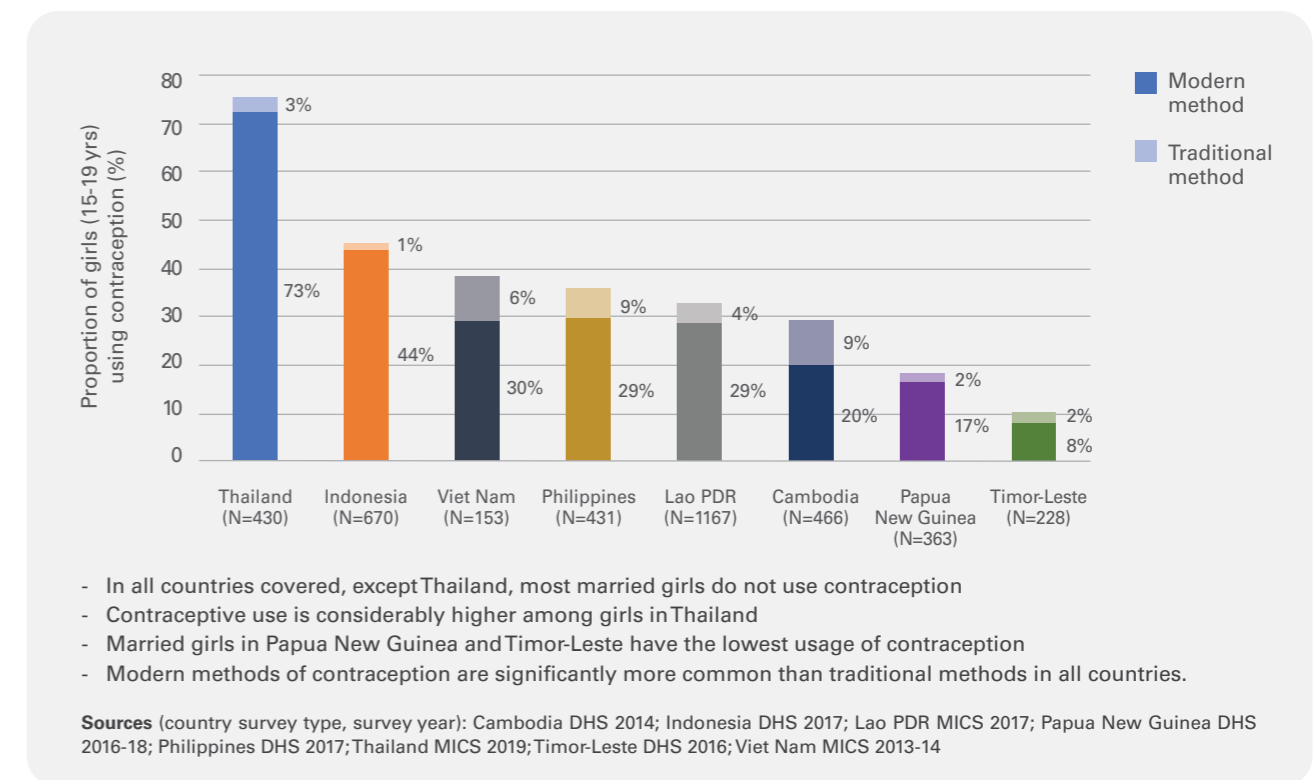


Figure 23 Contraceptive use by method for currently married adolescent girls aged 15-19 years (%)



4.3 Harmful Gender Norms

Harmful gender norms are a key driver of adolescent pregnancies, marriages and unions. They include gender norms that stigmatize adolescent sexuality and premarital pregnancy as well as define marriage and motherhood as necessary for the transition to adulthood. In addition, harmful social norms that reinforce male sexual and social dominance underpin sexual and intimate partner violence, and can drive early sexual debut, unintended pregnancy and child marriage. In fact, child marriage itself can represent a harmful practice, particularly when forced, which further perpetuates male dominance and gender inequality.

Stigma Surrounding Adolescent Sexuality and Premarital Pregnancy

Attitudes and practices around adolescent sexuality vary across and within countries. In a few communities, including ethnic minority ones in Lao PDR, adolescent sexual activity is normalized and encouraged.(52) In Timor-Leste, sexual activity also often precedes marriage and in some instances young people are encouraged to begin a sexual relationship, and then feel social pressure to marry.(55) However, unmarried

adolescents in these communities still face barriers to accessing SRH information and services, including shyness, limited awareness and knowledge, and the associated stigma.(52,105)

In most settings adolescent premarital sex is taboo or strongly discouraged, and pregnancy outside marriage is stigmatized.(52,55,79,86, 87,112,130) In Viet Nam, communist and Confucian ideologies strongly oppose premarital sex, considering it immoral and ruinous to a girl's future.(131) In the Philippines, conservative social and religious norms take a dim view of sexual activity before marriage.(112) And, in Cambodia the traditional code of conduct, Chbab srey, teaches girls they should remain virtuous, demure and pure “like cotton wool”.(18,132)

Harmful gender norms, that stigmatize adolescent sexuality and shame premarital sex, drive early marriage and pregnancy

Social norms that limit women's role to the domestic and reproductive sphere also drive early marriage and pregnancy

Harmful gender norms underpin the stigma and shame associated with sexual activity outside marriage, particularly for women and girls.(4,7,104,133) As a result, adolescent girls' mobility and freedoms are often curtailed to "protect" them from consenting sexual activity, as well as sexual violence and abuse.(4,21,104) Girls are expected to take responsibility for maintaining their chastity and families' "honour" or reputation, by refraining from premarital sex and preventing boys' sexual behaviour.(4,12,21,43,44, 55,104,134) In many societies, girls are often blamed for premarital sexual activity, even when sex is non-consensual or pregnancy occurs as a result of rape.(41,74) Men and boys, on the other hand, are expected to be sexually active outside of marriage, however they too may be shamed for premarital sex and pressured to marry, if a pregnancy occurs.(41,55)

The stigma associated with adolescent sexuality is an underlying driver of child marriages and early unions across the region. Early marriage is a strategy to control and contain adolescent sexuality and sexual expression, whether perceived or real (12,87,104) Young people are married off to prevent adolescent sexual expression and premarital sexual activity, and to ensure sexual "purity" for marriage.(12,21,104) Marriage can also be seen as a solution to legitimize premarital sex and pregnancy.(21,87) Taboos and shame associated with adolescent sexuality, premarital sex and pregnancy also prompt young people to marry early by choice to be sexually active.(1,12,75,104) Even rumours of a sexual or premarital relationship can be enough to drive couples to marry or parents to seek an arranged marriage. For example, in Malaysia, girls have been forced to marry when their parents suspected them of having premarital sex, or discovered they were pregnant.(11) During research in Cambodia, participants agreed premarital pregnancy was taboo.(41) They indicated they would force a daughter to marry if she conceived outside of marriage, since a girl known to not be a virgin would be stigmatized, considered unworthy of marriage and bring dishonour to herself and her family. This was reported to be the case even if the pregnancy was the result of sexual abuse.(41)

Societal disapproval and stigmatization of adolescent sexuality are also drivers of teenage pregnancy.(1) Adolescents are often denied access to SRH information and services, including CSE, due to fears they will promote early sexual debut and greater sexual activity. (7,52,104) Yet, young people's risk of adolescent pregnancy is significantly increased by lack of information and inadequate access to SRH services.(6) In communities where abstinence is expected of young people, they may have little or no knowledge or understanding of the risks of unintended pregnancy, or how to protect themselves from STIs and HIV.(7,55) For example, young people in Timor-Leste are reported to have little knowledge about SRH, risks for pregnancy or STIs.(55)

"A 12-year-old girl was permitted to marry a 19-year-old boy, a union that the victim described as a marriage of love. It was revealed a year later, by the girl's father, that he permitted the said union as the 19-year-old had raped his daughter. No charges were made against the then husband as the father retracted the police report made."

Malaysia (111)

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Gender Expectations of Marriage and Motherhood

Entrenched social norms that define a woman's role in terms of her sexual and reproductive function, underpin and reinforce marriage as "compulsory." Traditional, cultural and religious perspectives may consider a woman's life incomplete unless she marries and has children.(3,21,43,74,84) Early marriage and pregnancy may be considered the best way to maximize childbearing, particularly where child mortality rates are high.(73,114,135) Once married, there is often significant pressure on girls to prove their fertility and have children.(21)

Marriage is seen as a significant and necessary life step, and not marrying is viewed as abnormal. (21,52,106,136)

The transition to adulthood requires a girl to pass from the "protection" of her father, brothers or other male relatives, to that of her husband. Both parents and young people themselves consider marriage as conferring adult status and responsibilities.(41) Parents may believe they have a duty to ensure their children are married.(43) For girls, marriage may be desirable because it appears to be the only option for protection and support outside the family. In Indonesia, for example, cultural beliefs are reported to hold a woman's life as incomplete unless she is married, while her husband is seen as her "savior, protector and provider".(137) In Timor-Leste, young women are said to believe marriage will improve their lives, even when their husbands have no employment or limited education.(55) Early marriages and unions may offer an escape from difficult family circumstances, such as family breakdowns and violence, and a girl may seek comfort in a peer relationship that may result in pregnancy and/ or child marriage.(11,21,52,84)

"They will laugh at you and say you are the leftover if you do not get married. I have never seen anyone like that. Only crazy people do not get married. No normal person would stay single."

Viet Nam (84)

4.4 Gender-Based Violence and Harmful Practices

Sexual Violence and Coercion

Male sexual violence and control over female sexuality contributes to child marriage, early sexual debut and unintended pregnancy. (7,43,110) Sexual violence against women is commonplace across the region and is often motivated by a male sense of sexual entitlement.(139) Several studies have highlighted how sexual violence, rape and coerced/pressured sex result in sexual debut for some girls. (55,140–143) For example, in the Philippines approximately 10 per cent of girls aged 15–19 years reported a forced sexual debut.(141) Adolescent girls who fall pregnant, from nonconsensual sex, may be forced or pressured into marrying the perpetrator.(94) In the Philippines and Thailand, laws allow for the victim to be married to their rapist, so the perpetrator can avoid criminal punishment and a premarital pregnancy can be 'resolved'.(6,18)

Child marriage is often viewed as a way to protect girls from rape and sexual violence. Such violence is perceived to jeopardize a girl's reputation, her family honour and future marriage prospects.(3,5,21,43) However, marriage does not always ensure girls' safety and they often experience physical or sexual violence from their husband. Reported rates of IPV are higher for women married before 18 years, than for those married as adults.(42) For example, a study in Viet Nam found that young women who married before the age of 18 were nearly twice as likely to experience IPV, compared to those who did not.(53)

Limited data is available on girls experiences of sexual violence however rates appear to be highest in Papua New Guinea, where 14 per cent of girls (aged 15–19 years) report ever experiencing sexual violence, 8 per cent in the last 12 months (see Figure 24 and Annex Table 6). Reported rates of sexual violence were lower in Cambodia, the Philippines and Timor-Leste, with 1–3 per cent of girls reporting having experienced such abuse. Analysis of data for age of first sexual violence, indicates risk increases with age, with considerably more girls reporting sexual violence at age 18, particularly in Papua New Guinea. Sexual violence is uncommon among young girls aged less than 12, except in Timor-Leste where rates are relatively consistent from 10–15 years, indicating

abuse is experienced from a young age (see Figure 25 and Annex Table 7). The higher prevalence of sexual violence among young girls in Timor-Leste is supported by research which found younger sexual debut was associated with greater likelihood of forced or coerced sex: 37 per cent of women who had sex before aged 15 years said their first sexual experience had been forced, compared to 19 per cent of those who were 15–19 years.(144)

Non-consensual sex can also occur within marriage and a woman's ability to refuse sex with her partner provides an indication of her agency and power in an intimate relationship. There is considerable variation in

the proportion of married girls, aged 15–19, who can refuse sex (see Figure 26). Nearly half of married girls in Timor-Leste (44 per cent) reported they could not refuse sex with their partners, compared to one-in-five in Papua New Guinea (21 per cent), and one-in-nine in Cambodia (11 per cent). Sexual intimate partner violence is reported to be common among women (15–49 years) in Timor-Leste, with 41 per cent reporting having experienced such violence in their lifetime, and 31 per cent in the previous 12 months.(144) In many nations, the law does not protect married girls and women from sexual violence: marital rape is not explicitly a crime in Cambodia and Papua New Guinea, and is expressly decriminalized in Indonesia and Lao PDR.(145)

Figure 24 Proportion of adolescent girls (15–19 years) who have experienced sexual violence (see Annex Table 6 for data)

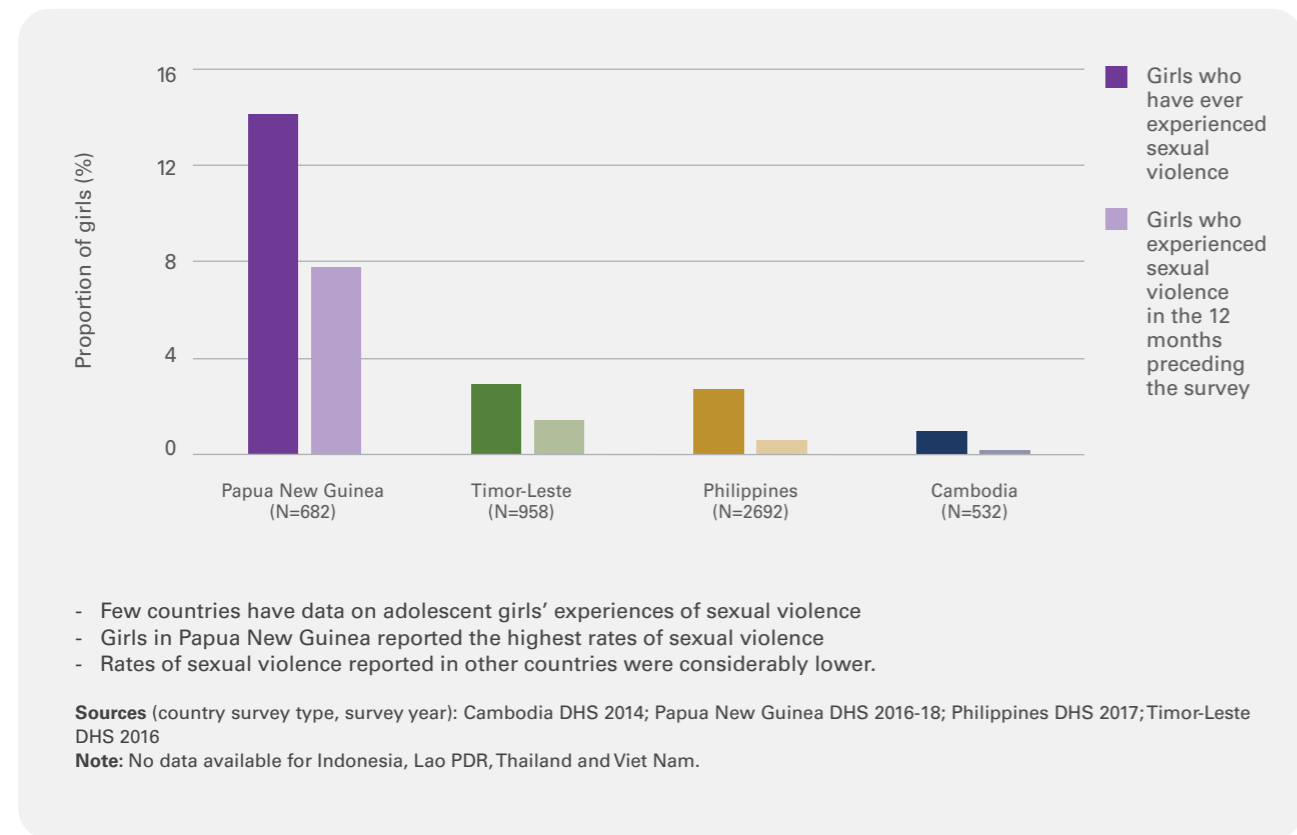


Figure 25 Age at first experience of sexual violence, as reported by adolescent girls (15–19 years) and young women (20–24 years)

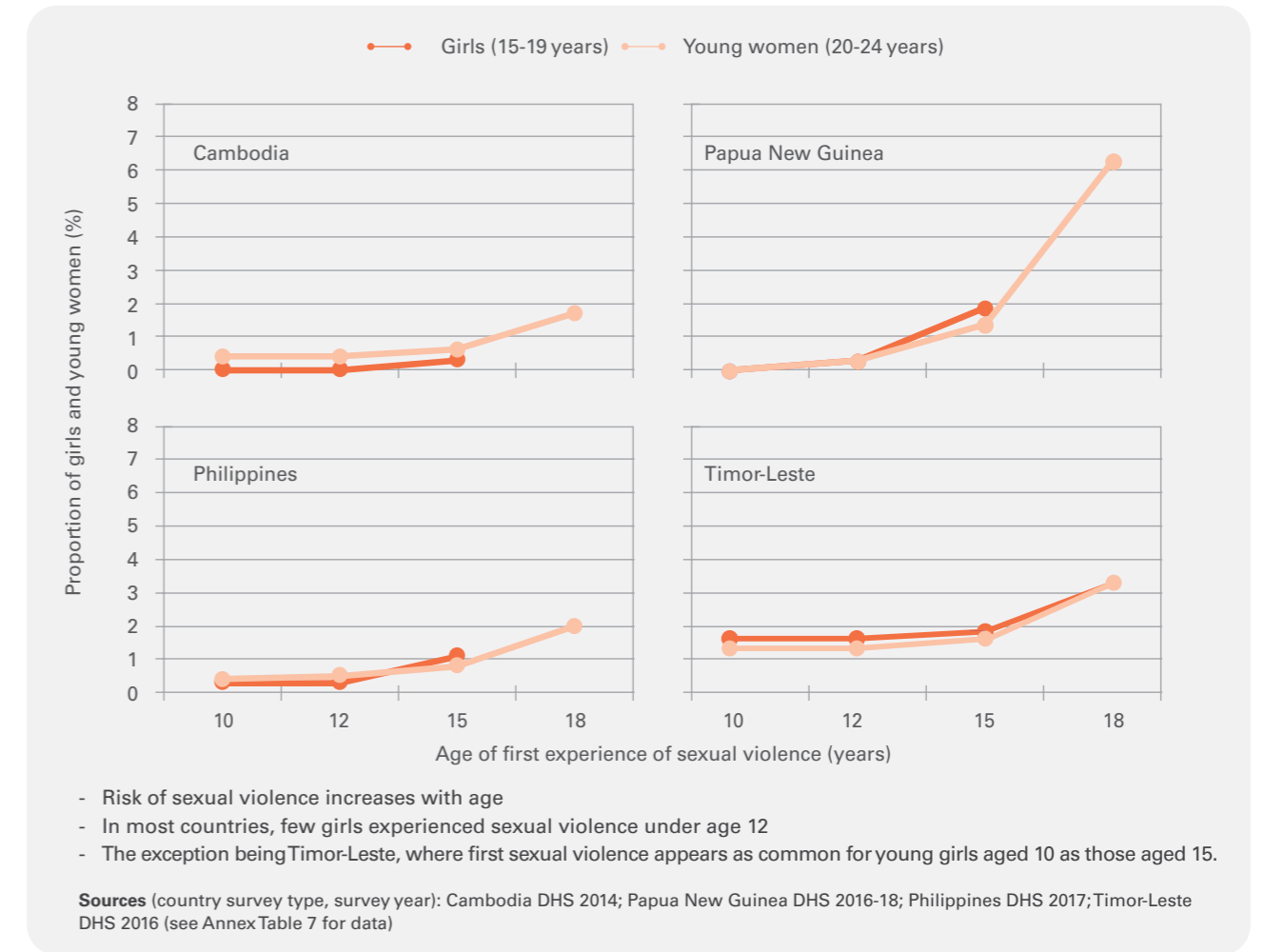
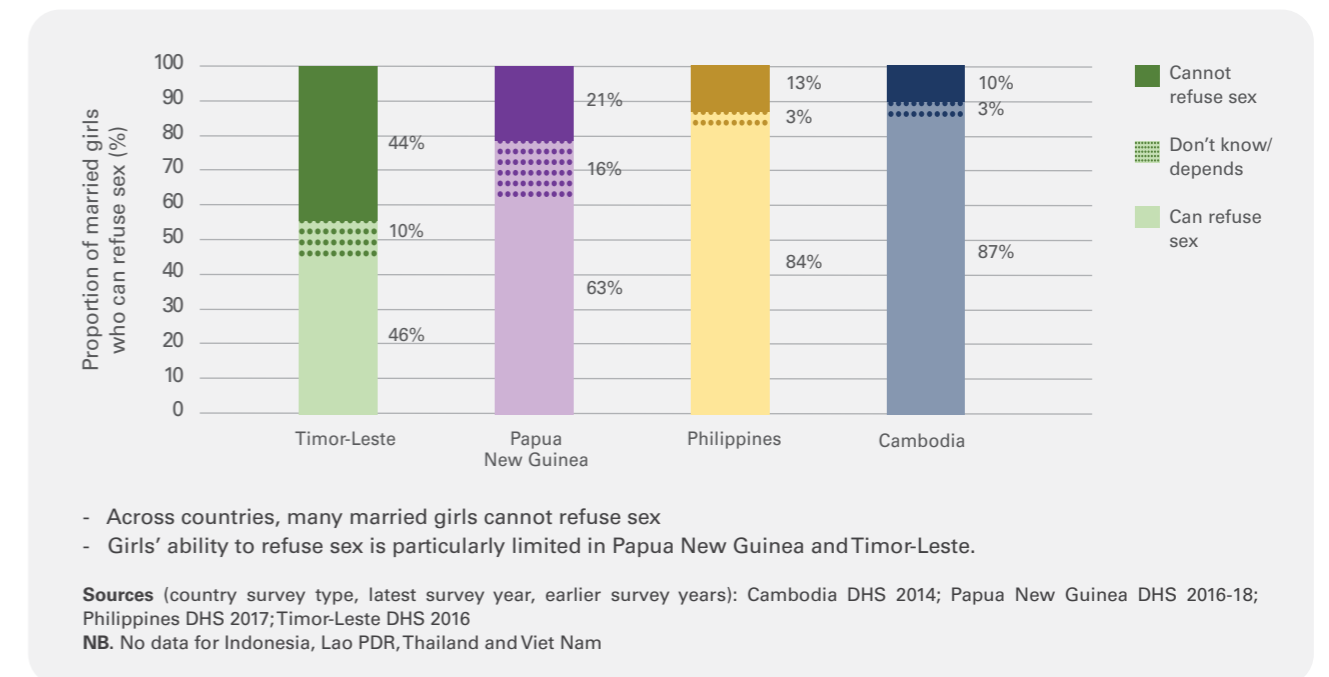


Figure 26 Proportion of married adolescent girls (15–19 years) who can refuse sex



Domestic Violence

Harmful gender and social norms supporting male sexual and social dominance, and girls as submissive, are also drivers of early marriage.(4) In some settings, norms may accept men's use of violence to control and discipline their wives. Evidence indicates that women's acceptance of wife-beating, in any scenario, is associated with a lower mean age at marriage.(46) For example, in Indonesia, women who accept wife-beating were married 1.2 years earlier than those who rejected such violence.(46) Acceptance of wife-beating varies greatly across the region, with girls and women in Papua New Guinea and Timor-Leste being most likely to consider a husband justified to hit or beat his wife in certain circumstances (see Figure 27). This may be indicative of settings where forced or arranged marriage of girls is also more common or accepted.

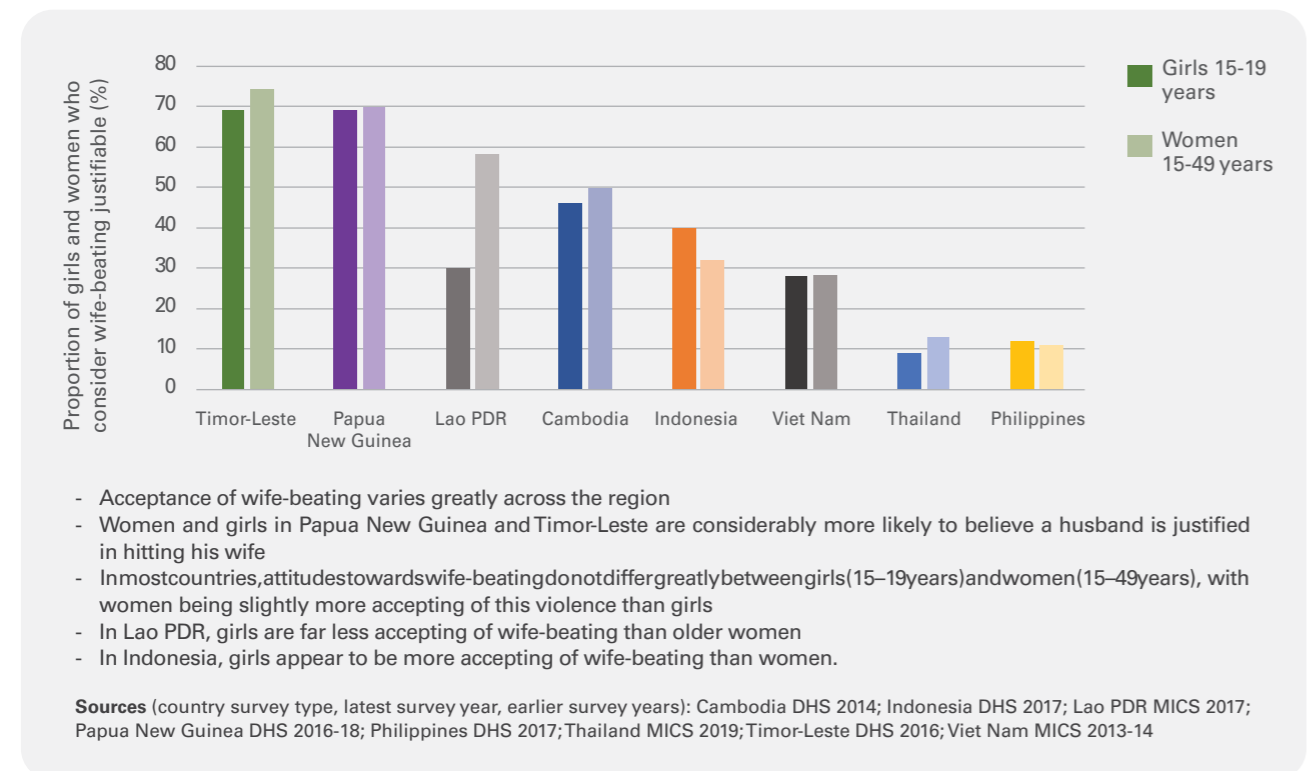
The younger girls marry, the greater their risk of intimate partner violence (IPV).(21,42) One study, with survey data from 34 countries, found the prevalence of physical and or sexual IPV to be almost 50 per cent higher among women who married as children, than those who married as adults.(42) In Viet Nam, adolescent girls and young women married before

18 years had nearly twice the risk of lifetime exposure to IPV, compared to those aged at least 18 when married.(53) In the Philippines, girls married before 15 years are reported to be three times more likely to experience IPV than women aged 20–24 years, while those married at 15–17 years are twice as likely to experience such abuse.(42)

Harmful Practices

Traditional harmful practices, which perpetuate male dominance and inequality of women and girls, persist in many countries – particularly those with high rates of child marriage. Children, particularly girls, are expected to obey their parents, including in decisions about the timing and choice of marriage partner, even if it goes against their own personal wishes.(4,43) In Lao PDR, these practices are more common among ethnic minority populations, and include a 'bride price' (where the groom's family pays the bride's family), 'bride theft' (kidnapping of girls as young as 12–13 years) and offering brides as payment to settle a dispute.(94) In some communities of Papua New Guinea, girls may be treated as belongings and sold-off for bride prices in exchange for cash or goods or married-off to settle a dispute.(89,146)

Figure 27 Proportion of adolescent girls and women who consider a husband to be justified hitting or beating his wife (%) for at least one of the following reasons: if his wife burns the food, argues with him, goes out without telling him, neglects the children or refuses sexual relations.



In some settings, other harmful practices are associated with child marriage and share underlying harmful gender norms. For example, Female Genital Mutilation (FGM) seeks to control girls' and women's sexuality by curbing sexual desire, to ensure they remain 'pure' and chaste for marriage.(147–149) FGM is practiced among Muslim populations in Indonesia, Malaysia, and the southern regions of the Philippines and Thailand, and in some settings may be a precondition for marriage.(147–149) Research from Indonesia in some provinces discovered that 42–51 per cent of young women 15–24 years were married before 18 years, and 65–69 per cent had also experienced FGM.(149) Gender-biased sex selection, in favour of boys, is another example of a harmful practice, which like child marriage, is associated with lower perceived value of daughters.(150–152) Practiced in Viet Nam, prenatal sex selection is driven by a strong preference for sons and associated with patrilocal marriage and inheritance along the male lineage. The resulting surplus of men can negatively impact their ability to marry, increase pressure on women to marry at a younger age, and raise the risk of GBV.(151,152)

4.5 Education

Education levels have a strong negative correlation with child marriage, early union and adolescent pregnancy, but not premarital conception. Parents' education levels impact their daughter's age of marriage: less educated parents are more accepting of child marriage.(4) In contrast, just one generation of education for women considerably reduces child marriage among their daughters.(21) Women with no or only primary level education are also more likely to report entering into marriage or union before the age of 18 years, compared to those who complete secondary or higher education.(21) Data from the eight selected countries highlights this intersection (see Annex Tables 8 and 9 and Annex Figure 5). For example, in the Philippines and Lao PDR nearly half of women, aged 20–24 years, who had no or primary level education were married by the age of 18. Rates of adolescent childbirth are also highest among women with little or no education (see Annex Figure 5). However, there is no clear association between education and premarital conception (see Annex Figure 6). School drop-outs are both a cause and consequence of child marriages, early unions and adolescent pregnancies.(23,41,52,137) Girls

who stay in school longer, tend to enter unions later.(21,43,103) However, plans for an early marriage may shift a girl's focus away from education, contributing to poor performance and drop-outs.(4) Girls who drop out are more likely to be sexually active and those who become pregnant may be expelled.(87,104) Being out-of-school may further contribute to risks of early pregnancy and/or decisions to marry.(4,87) Families may encourage or arrange marriage for a girl who is no longer in school to protect her "honour" and that of the family, and to shift the economic burden of her care.(87)

In settings, where gender norms limit a woman's role to caring for the family and home, schooling may not be considered desirable or necessary.(41,52,87) An educated woman may be perceived as more likely to challenge the authority of her husband and his family, and cause marriage problems.(43) Less educated girls may be considered more malleable and easier to control. Poor-quality schooling and limited employment opportunities may further support negative perceptions of education as being a waste of time and resources, encouraging drop-outs and early marriage.(4,21) In some instances, schools and teachers themselves may reinforce harmful gender norms that devalue girls' education and limit women's role to the domestic and reproductive sphere.(4,43) Studies in Thailand and Timor-Leste have highlighted teachers' negative attitudes towards premarital adolescent pregnancy as a barrier to adolescent mothers staying in or returning to school.(45,55)

"I was in the middle of Form 4 (at 16 years old) and then I quit school. Because, um, pregnant. Because I was pregnant, I could not finish my studies. Ah, after I found out I was pregnant, I quit immediately. We married. If I hadn't been pregnant, I wouldn't have wanted to marry. I would have continued studying."

Malaysia (11)

"I didn't want to go to school anymore because I feel embarrassed about me getting married earlier. Some of my friends seem a bit different, looking down at me like 'oh, you're a married man now.' They tease me like that. And it is the same for the girls"

Migrant and refugee camp on Thailand-Myanmar border (85)

"I did not finish studying because we only lived a simple life; my parents were unemployed, my brothers worked, but were not so rich, and then I decided to quit school when I was in Form 1 (at 13 years old). After I left, I wanted to continue, but then I pitied my parents, so I didn't. My parents were okay with me quitting school; they didn't really care. Then, my marriage was arranged by our parents when I was 16 years old"

Malaysia (11)

"It is our culture that when we grow up, we work and then we love and get married. We don't go to school, we work for money farming or as labours (sic) since we are 14 years old. When we are thinking that we are ready, we can get married"

Husband, Lao PDR (52)

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4.6 Socio-Economic Context

Poverty

Child marriage, early union and adolescent pregnancy are strongly correlated with socio-economic status in the eight countries studied. In every country, the proportion of women (20–24 years) married by age 18 is highest among the poorest households (Annex Tables 8 and 9 and Annex Figure 3). For example, in Lao PDR, 56 per cent of women from the poorest households were married by 18, compared to just 13 per cent from the richest households. In Viet Nam, higher poverty rates among ethnic minorities put girls at higher risk of child marriage.(79,153) While in the Philippines, higher rates of cohabitation, or a "poor man's marriage", are related to economic constraints.(154)

Child marriage is driven by poverty, and also perpetuates deprivation. Rates of child marriage and early union are higher among lower socio-economic groups and in rural areas across nations.(3–5,10,21,43,102,103) In country settings, poorer households may arrange marriages for their daughters to shift the 'financial burden' to the husband's family. For example, financial difficulties during the COVID-19 pandemic have forced parents in Indonesia to remove daughters from school and arrange marriages so the 'burden' of care becomes the responsibility of the husband and his family.(155) Financial incentives may be greater in settings where a bride price is paid, by the groom's family to the bride's in exchange for marriage, as has been reported in some communities in Cambodia, Papua New Guinea, the Philippines and Viet Nam.(41,114,146) While families may gain economically in the short term, child marriage further entrenches the cycle of poverty in the longer term, as discussed previously.(3,103)

Poverty is also a driver of child labour. A groom's family may utilize child marriage to capitalize on their daughter-in-law's unpaid work, as has been reported in some parts of Lao PDR and Viet Nam.(52,79,84,97,135) In other settings, early marriage and union may offer an escape from difficult, family circumstances associated with poverty.(11,21)

Rural Residence

Women and girls living in rural areas are also more likely to be married or in-union under the age of 18 compared to those in urban areas (see Annex Tables 8 and 9 and Annex Figure 4). This is particularly evident in Lao PDR and Papua New Guinea where the majority of the population (64–87 per cent) live in rural areas.(156) In some provinces of Lao PDR, nearly half of women aged 20–24 years were married by 18, with child marriage being most prevalent in the rural, remote areas.(26)

Rural areas typically have less access to schools and formal employment opportunities, which impacts the perceived value of education compared to marriage.(4) Compounding this, traditional social norms are generally slower to change in rural than urban areas.(4) The more limited access to technology, mass media and the internet, found in rural and remote settings, likely plays a role in adherence to traditional beliefs and slower changes in social norms. In these smaller communities, an unplanned pregnancy out of wedlock may also be difficult to conceal, bring great shame to the family, and even result in expulsion of an unmarried mother from the village.(52,131)

Premarital Conception and Socio-Economic Factors

The relationship between adolescent premarital conception and socio-economic status is not consistent (see Annex Figure 6). This stands in contrast to the strong correlations between child marriage and adolescent pregnancy, described in the previous sections. In Indonesia and Lao PDR adolescent conception before marriage is more common among richer families, whilst in Papua New Guinea and Thailand it is more typical among the poor. However, adolescent pregnancies out of wedlock are slightly more common in urban settings in all countries. While the small sample sizes may limit this analysis, it suggests that factors other than socio-economic status and education are driving premarital adolescent pregnancies.

4.7 Shocks and Crises

Crises, natural disasters and economic shocks can lead to increases in child marriage, early union and adolescent pregnancy.(4,21,44) An early marriage serves to shift the 'financial burden' of a girl's care to her husband and his family. Emergencies may also raise barriers to access of SRH services and supplies, including contraception and safe abortion.(107) Risks for child marriage are particularly high when protracted crises lead to displacement, and physical and economic insecurity.(44) Displacement, including in camp settings, may raise parents' concerns about physical security and the threat of sexual violence and rape.(44)

Child marriage offers a solution to economic insecurity and lack of safety.(21,104)

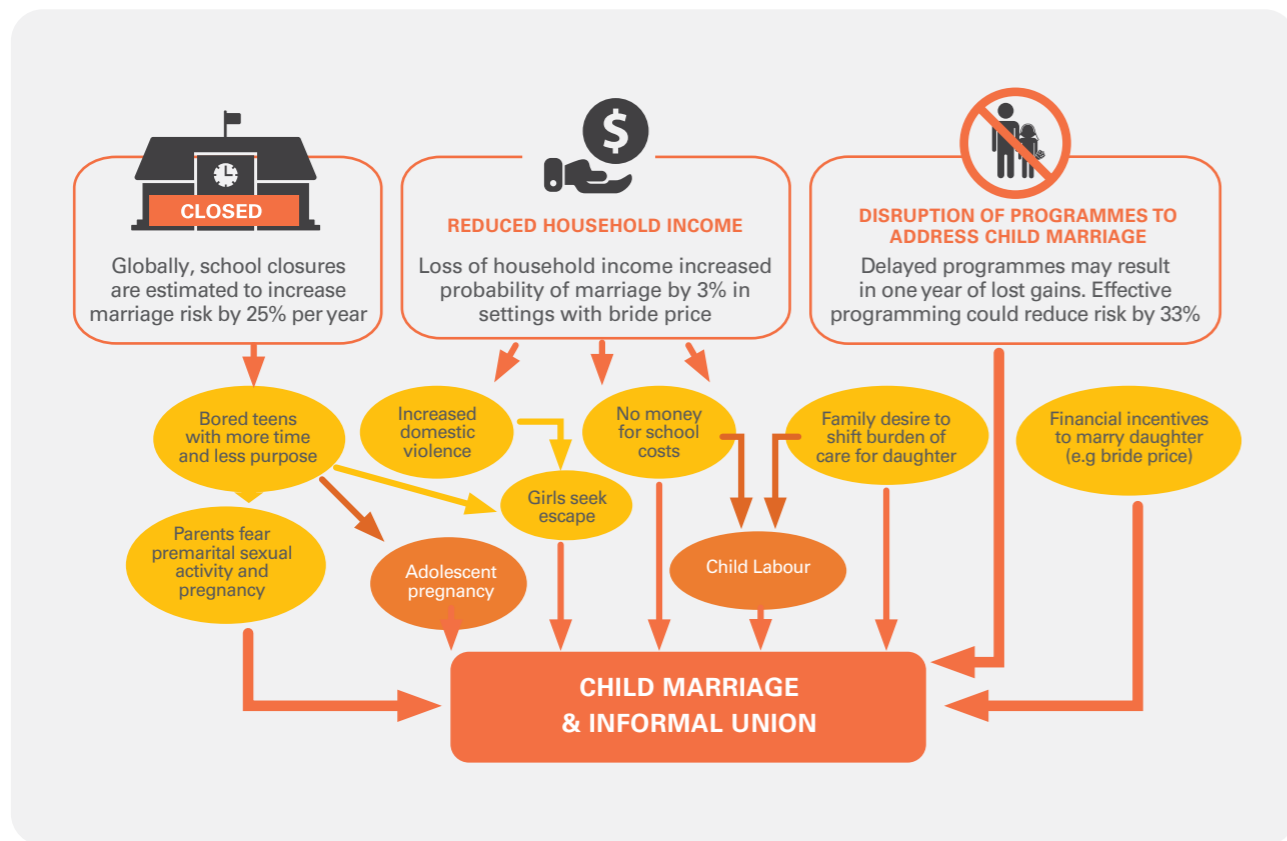
The COVID-19 pandemic is driving an increase in child marriages (see Figure 28). Financial hardship, school closures and increased family demands for young people's labour (paid and unpaid) are key contributors. Data from Indonesia indicates a doubling in the rate of child marriages, with 24,000 in the first half of 2020 compared to 23,000 for the previous full year.(22,23) Increased sexual activity among unsupervised adolescents and parental anxiety about unintended pregnancies, are also reported to be driving early marriages in Indonesia.(22)

The pandemic is also interrupting access to SRH services, raising the risk of unwanted pregnancies. Health workers have reported problems with the supply and provision of contraception, post-abortion care and wider sexual health services, including clinic closures and reduced operating hours.(162) Added to this, are the barriers to service access, posed by financial hardship and mobility restrictions.(158) In Thailand, recent research indicates that the number of youth reporting difficulties accessing SRH services – including contraception, counselling and abortion – has doubled from about 20 to 40 per cent since the pandemic, with 10 per cent of respondents reporting increased opportunity for unprotected sex and unwanted pregnancy.(163) In the Philippines, rates of birth to mothers under the age of 20 are predicted to more than double as a result of community quarantines, with approximately 200,000 young Filipinos becoming parents.(164)



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Figure 28 How COVID-19 raises risks for child marriage



Sexual and Reproductive Health Information and Services

- Young people who attend school and receive quality comprehensive sexuality education (CSE) are more likely to delay sexual activity.
- There are numerous barriers to accessing quality CSE, both in- and out-of-school.
- Sexual and Reproductive Health (SRH) services are challenging for young people to access in many countries.
- There is a significant unmet need for contraception reported by unmarried and married adolescents.
- Even when contraception is available, lack of knowledge may contribute to incorrect or inconsistent use.
- Use of contraception is particularly low among unmarried sexually active girls.

Harmful Gender Norms and Gender-Based Violence

- In most settings, adolescent premarital sex is taboo or strongly discouraged and pregnancy outside marriages stigmatized.
- Adolescents are often denied access to SRH information and services, including CSE, due to fears they will promote early sexual debut and greater sexual activity.
- The stigma surrounding adolescent sexuality is an underlying driver of child marriages and early unions.
- Entrenched social norms that define a woman's role in terms of her sexual and reproductive function, underpin and reinforce marriage as "compulsory".
- Male sexual violence and control over female sexuality also contributes to child marriage, early sexual debut and unintended pregnancy.
- Child marriage is often seen as a way to protect girls from rape and sexual violence.
- Brides are younger in settings where social norms support a husband's use of violence to control his wife.
- Traditional harmful practices, which perpetuate male dominance and inequality of women and girls – such as bride kidnapping or female genital mutilation, are more prevalent in settings with high rates of child marriage.

Education

- Education level, of a girl and her parents, is inversely related to rates of child marriage, early union and adolescent pregnancy, but not premarital conception.
- School drop-outs are both a cause and consequence of child marriage, early union and adolescent pregnancy.
- Where gender norms limit a woman's role to caring for the family and home, schooling may not be considered desirable or necessary.

Socio-Economic Context

- Child marriage, early union and adolescent pregnancy are strongly correlated with overlapping factors: poverty, rural residence, and lower levels of education.
- However, the relationship between adolescent premarital conception and socio-economic status is not consistent.

Shocks and Crises

- Crises, natural disasters and economic shocks can lead to increases in child marriage, early union and adolescent pregnancy.
- The COVID-19 pandemic is driving an increase in child marriages and interrupting SRH services, raising the risk of unwanted pregnancies.

Key Points: Drivers and Consequences of Child Marriage and Adolescent Pregnancy

Adolescent Sexuality and Agency in Relationships

- Development of sexuality is a normal part of the transition to adulthood.
- In Southeast Asia and the Pacific there is considerable variation, between countries, in the proportion of adolescents who report ever having had sex.
- Most adolescent girls who reporting ever having had sex are married or in-union.
- The proportion of unmarried adolescent girls who report ever having had sex varies from 1 per cent in Timor-Leste to 12 per cent in Papua New Guinea.
- Increasing access to digital technology and mass media, as well as changing social norms, are contributing to increasing adolescent premarital sexual relationships.

Adolescent Agency in Marriages and Unions

- There is a lack of data on girls' agency in child marriages and early unions.
- The circumstances surrounding a marriage, such as social pressure and opportunities for education and employment, are key to determining agency in decision-making.
- Qualitative research from several countries suggests adolescent girls do make independent decisions to marry.
- While some young people do self-initiate informal unions based on a "love" relationship, cohabitation in the Philippines and Thailand is also often driven by circumstances.



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Discussion

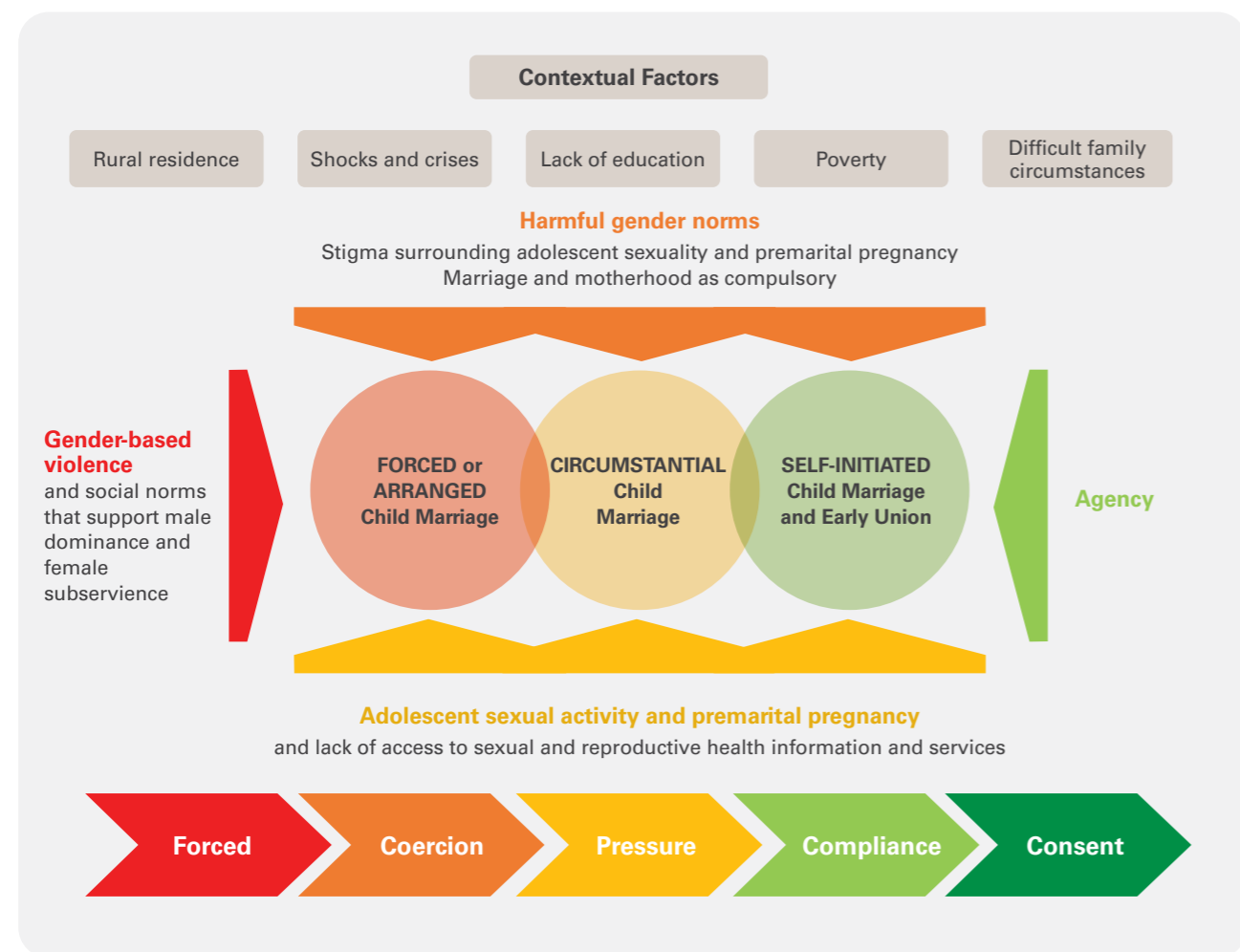
There is a clear need for action to address the issues of adolescent pregnancy, child marriage and early union in the region. The potential negative impacts are well established, affecting not only the adolescent girl, but also her family. The consequences are particularly harmful when girls lack agency in decision-making, a pregnancy is unwanted, a bride is very young or is forced to marry. The economic impacts can carry to the next generation and wider community, perpetuating the cycle of poverty, and forestalling social development and progress towards equality. Governments have recognized the need for action, and committed to not only protect adolescent girls and address child marriage, but also to reduce adolescent pregnancies and empower girls through access to sexual and reproductive health services. However, to be effective, strategies must be built on a solid understanding of the context and determinants, as the situation varies considerably, between and within countries.

This analysis highlights the extent and complexity of child marriage, early union and adolescent pregnancy in the region. While prevalence varies, child marriage and early union remain common in many countries, particularly in Cambodia, Lao PDR, Papua New Guinea and Thailand. Higher rates of pregnancy and childbirth, among adolescent girls, are evident in Cambodia, Lao PDR, Papua New Guinea and the Philippines, with only Thailand demonstrating a significant decline over the last decade. While stalling rates of adolescent pregnancy and child marriage are a common feature for most nations, the underlying drivers and patterns of early pregnancy, marriage and union vary between and within countries.

Three broad categories of patterns of child marriage and early union are proposed for Southeast Asia and the Pacific: 1) arranged or forced marriages, 2) circumstantial marriages and 3) self-initiated marriages and unions. The underlying drivers and quality of a bride's consent, are key to differentiating between these types of marriage/union (see Figure 29). Arranged and forced marriages are driven by sexual taboos, poverty and the perceived low value of girls; they lack meaningful consent and violate a girl's human rights. Circumstantial marriages are a response to adolescent sexual activity or premarital pregnancy, and can span the consent continuum from forced to compliance and consent. However, a selfinitiated marriage or union may represent girls' agency and evolving capacities even though they may not have had access to the knowledge necessary to provide full, free and informed consent.

To date, surveys have not captured data on decision-making in marriages and unions. Hence, it is not possible to validate the typology or determine the prevalence of differing types of child marriage and early union in each country setting. However, data regarding features and patterns of early marriage/union may provide some clues. For example, settings with large spousal age gaps, and where child marriage is a strategy to manage/avoid premarital sexual activity, may have a greater propensity for forced or arranged marriages. Peer relationships and sexual activity among unmarried adolescent girls may be an indicator of self-initiated unions. Premarital or unintended/mistimed pregnancies, including as a result of sexual violence and coercion followed by marriage before birth, is suggestive of circumstantial marriages/unions. Informal unions may reflect either agency or pressure from circumstances. Viewing the analysis through this lens provides an opportunity to reflect on the potential for differing patterns of marriage/union for countries of the region (see Table 4).

Figure 29 Context, determinants and level of consent for proposed typology of child marriages/early unions



Clear evidence of differing patterns of adolescent pregnancy and child marriage/union can be seen in Lao PDR and Papua New Guinea. While both countries have among the highest rates of early childbearing and marriage/union in the region, their characteristics vary considerably. In Papua New Guinea, premarital sex and conception is relatively common as are unintended/mistimed pregnancies. However, violence

against women and large spousal age gaps are also prevalent. This would appear to indicate that unions are more likely to be arranged/forced or circumstantial in nature, with some likely driven by sexual violence and coercion. However, in Lao PDR the prevalence of close-in-age spouses and intentional pregnancies suggests many unions may be self-initiated between peers.

Table 4 Prevalence of factors associated with patterns and types of child marriage/early union
Figure is indicative, representing relative rather than absolute prevalence. Absence of a prevalence dot indicates data was unavailable for this factor.

	Cambodia	Indonesia	Lao PDR	Papua New Guinea	Philippines	Thailand	Timor-Leste	Viet Nam
Informal union	●	●	●	●	●	●	●	●*
Unmarried girls ever had sex	●	●	●	●	●		●	
Unintended & mistimed pregnancies	●	●	●	●	●	●	●	
Premarital conception	●	●	●	●	●	●	●	●
Premarital conception & married by birth	●	●	●	●	●	●	●	
Spousal age gap < 5 years			●		●	●		
Large spousal age gap	●	●	●	●	●	●	●	●
Sexual violence	●			●	●		●	

● Higher prevalence ● Moderate prevalence ● Lower prevalence

* Surveys in Viet Nam generally do not distinguish between informal unions and formal marriages in ethnic minority communities, where early marriage/union is most prevalent.(31,79)

Circumstantial marriages are likely to be common in settings where premarital pregnancy is highly stigmatized and premarital conception leads to marriage before childbirth. This is likely the case in Indonesia, and possibly also in Cambodia and Timor-Leste. The high prevalence of peer unions/marriage and cohabitation seen in the Philippines and Thailand may indicate more self-initiated, as well as circumstantial unions. However, the moderate prevalence of sexual violence and large spousal age gaps, also seen in the Philippines, appears to indicate that forced/arranged marriages persist in some communities. This is confirmed by qualitative research from tribal and Muslim areas, particularly in Mindanao.(88,114,167) Indeed, understanding sub-national analyses of patterns of child marriage/early union and adolescent pregnancy will be key to ensuring effective strategies for specific population groups. This is particularly relevant for ethnic and religious minority communities, including those in Lao PDR and Viet Nam.(41,84)

Research is essential to better understand the varying patterns of adolescent pregnancy and child marriage/early union, and to validate the proposed typology. There is a need for qualitative and quantitative studies, across and within countries, to explore the decision-making processes in marriages unions, the degree of agency and consent as well as the circumstances and external pressures surrounding marriage/union. It will be important to determine whether these factors drive differing types of marriage which have differential impacts on girls' well-being. Data will also be key to determining the prevalence of selfinitiated marriages/unions compared to arranged/forced and circumstantial ones, if this typology is confirmed. In particular, it is important to understand the degree to which adolescent sexuality and premarital pregnancy drive early marriages/unions in the region. This information will be essential to shape policies and programmatic responses to address child marriages/unions, so efforts to protect children are balanced with respect for their evolving capacities.

This analysis highlights the heterogeneity in adolescent pregnancy, child marriage and early union across the region. While there are universal drivers, their degree of contribution and the resulting situation varies between countries. What they do have in common, is that despite governments having agreed to eliminate child marriage and reduce early pregnancy, in most instances progress has stalled. Whether forced, coerced or consensual, marriage and childbearing in adolescence can have profound consequences for adolescent girls and their children. However, investment in action at this key period of development, has the opportunity to yield a 'triple dividend' of benefits: improvements to the health and wellbeing for adolescents today, for their future adult life, and future generations.(1)

To effectively reduce early marriages and pregnancies, strategies must be designed to meet specific drivers and patterns in each context. There is a need for governments, health systems and communities, and families to adapt to the reality of young people's lived

experience. Barriers which impede young people's access to sexual reproductive health information, services and contraception must be addressed, with a focus on unmarried adolescents. Alternative pathways to adulthood, other than marriage, must be available to adolescents: investment in girls' education and employment opportunities is key. Young people need to understand their rights, options and the potential consequences of early marriage and pregnancy. For an adolescent girl to marry early, she must have options and agency in order to provide meaningful, free and informed consent. To develop effective strategies to address adolescent pregnancy, child marriage and early union, setting-specific research is needed to better understand the complex and inter-related determinants. Because, like wedding dresses, one size will not fit all.

To learn more about strategies, to address differing patterns and types of child marriage, early union and adolescent pregnancy, please see the second paper in this series, *Tailoring Programme Interventions for Southeast Asia and the Pacific.*



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Annex Table 1 Adolescent Fertility Rates (6,19)

Region	Adolescent Fertility Rates (births per 1,000 girls aged 15–19)
East Asia	7
East Asia-Pacific	21
Pacific	51
South Asia	26
Southeast Asia	43
World	42

Annex Table 2 Percentage of girls age 15–19 years who have begun childbearing

Country	Survey (year)	% of girls who have had a live birth	% of girls who are pregnant with their first child	Unweighted sample size
Cambodia	DHS (2014)	7.4	4.6	3006
Indonesia	DHS (2017)	5.0	2.1	7936
Lao PDR	MICS (2017)	13.4	3.3	4662
Papua New Guinea	DHS (2016–18)	9.6	2.5	2980
Philippines	DHS (2017)	7.0	1.6	5120
Thailand	MICS (2019)	5.4	0.4	2847
Timor-Leste	DHS (2016)	5.2	1.7	3126
Viet Nam	MICS (2013–14)	6.3	1.9	1398

Note: Sample includes both unmarried and married women

Annex Table 3 Percentage of all women age 20–24 years who gave birth before 18 years

Country	Survey (year)	Percentage	Lower Bound	Upper Bound	Unweighted sample size
Cambodia	DHS (2014)	7.0	6.0	8.1	3038
Indonesia	DHS (2017)	6.9	6.2	7.7	6830
Lao PDR	MICS (2017)	18.3	16.7	19.9	4121
Papua New Guinea	DHS (2016–18)	16.6	14.1	19.6	2699
Philippines	DHS (2017)	10.5	9.0	12.2	3914
Thailand ⁱ	MICS (2019)	9.1	7.3	11.2	2953
Timor-Leste	DHS (2016)	7.4	6.1	8.9	2047
Viet Nam	MICS (2013–14)	4.7	3.5	6.3	1338

ⁱ 26 per cent of ever-married women age 20–24 years who gave birth during adolescence had missing data on month of first marriage. Date of marriage has therefore been imputed and results should be interpreted with caution.

Annex Table 4 Percentage of ever-married/in-union women aged 20–24 who gave birth before 18 years

Country	Survey (year)	Percentage	Lower Bound	Upper Bound	Unweighted sample size
Cambodia	DHS (2014)	10.8	9.3	12.6	1870
Indonesia	DHS (2017)	13.2	11.9	14.6	3345
Lao PDR	MICS (2017)	27.2	25.2	29.3	2918
Papua New Guinea	DHS (2016-18)	25.3	21.5	29.4	1647
Philippines	DHS (2017)	22.6	19.5	26.0	1851
Thailand ⁱ	MICS (2019)	19.3	15.7	23.5	1988
Timor-Leste	DHS (2016)	15.1	12.6	18.0	1001
Viet Nam	MICS (2013-14)	8.7	6.5	11.4	708

[†] Births during adolescence is defined as those women who gave birth between the ages of 10 and <18 years.

ⁱ 49 per cent of ever-married women age 20–24 years who gave birth during adolescence had missing data on month of first marriage. Date of marriage has therefore been imputed and results should be interpreted with caution.

Annex Table 5 Percentage of women age 20–24 years reporting first sex by age 18, who were also married/in-union by age 18

Country	Survey (year)	Percentage	Lower Bound	Upper Bound	Unweighted sample size
Cambodia	DHS (2014)	99.0	97.7	99.6	507
Indonesia	DHS (2017)	93.4	91.6	94.8	1053
Lao PDR	MICS (2017)	72.6	69.9	75.2	1626
Papua New Guinea	DHS (2016-18)	63.8	58.2	69.1	860
Philippines	DHS (2017)	71.8	67.3	75.8	899
Thailand ⁱ	MICS (2019)	na	na	na	na
Timor-Leste	DHS (2016)	76.1	70.8	80.7	345
Viet Nam	MICS (2013-14)	na	na	na	na

Annex Table 6 Percentage of girls age 15–19 years who have experienced sexual violence

Country	Survey	Percentage of girls who have ever experienced sexual violence	Lower Bound	Upper Bound	Percentage of girls who experienced sexual violence in the 12 months preceding the survey	Lower Bound	Upper Bound	Unweighted Sample Size*
Cambodia	DHS (2014)	1.0	0.4	2.5	0.2	0.1	1.0	532
Papua New Guinea	DHS (2016-18)	14.1	10.7	18.3	7.8	5.4	11.1	682
Philippines	DHS (2017)	2.7	1.9	3.7	0.6	0.4	0.9	2692
Timor-Leste	DHS (2016)	2.9	1.8	4.6	1.4	0.7	2.8	958

Note: Sample uses all girls age 15–19 years. No data for Thailand, Indonesia, Lao PDR and Viet Nam.

Annex Table 7 Percentage of women (aged 20-24) and girls (aged 15-19) who experienced sexual violence by exact age

Country	Survey (year)	Age Group	Percentage who first experienced sexual violence by exact age				Unweighted sample size
			10	12	15	18	
Cambodia	DHS (2014)	15-19	0.0	0.0	0.3	na	532
		20-24	0.4	0.4	0.6	1.7	650
Papua New Guinea	DHS (2016-18)	15-19	0.0	0.3	1.9	na	682
		20-24	0.0	0.3	1.4	6.3	817
Philippines	DHS (2017)	15-19	0.3	0.3	1.1	na	2692
		20-24	0.4	0.5	0.8	2.0	2603
Timor-Leste	DHS (2016)	15-19	1.6	1.6	1.8	na	958
		20-24	1.3	1.3	1.6	3.3	727

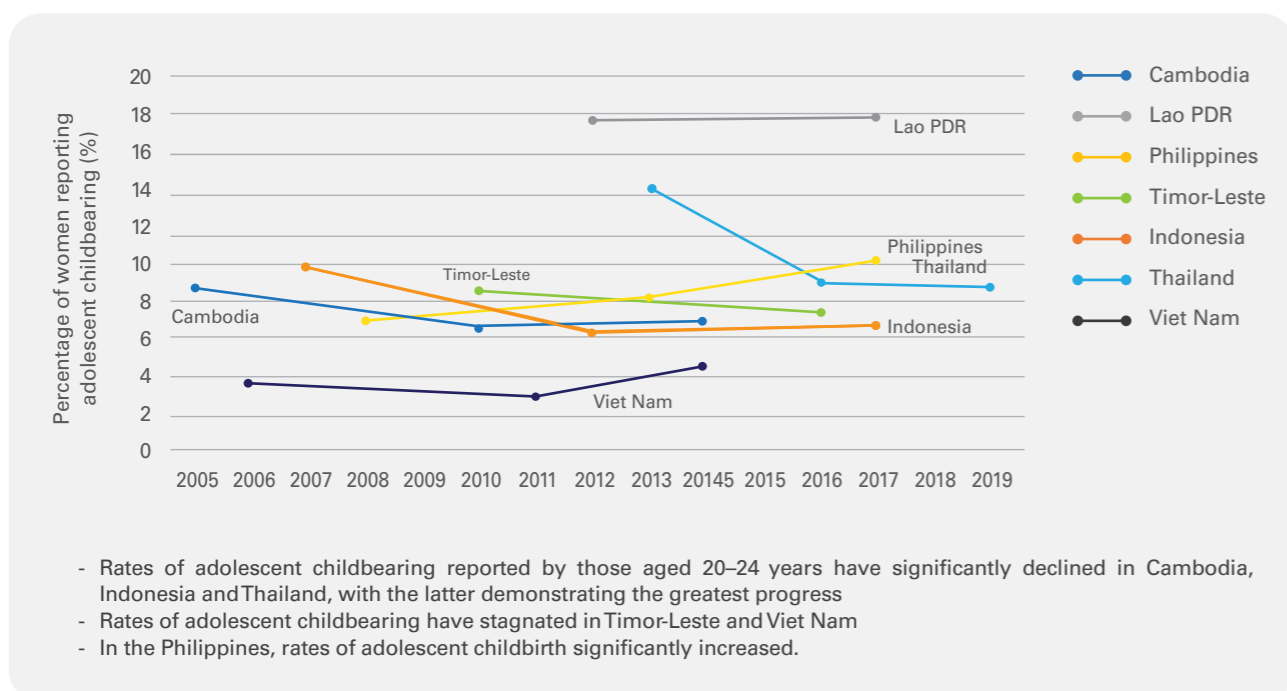
Annex Table 8 Percentage of women aged 20–24 who were married/in-union by age 18 years, disaggregated by socio-economic factors

Characteristic	Cambodia DHS (2014)	Indonesia DHS (2017)	Lao PDR MICS (2017)	Papua New Guinea DHS (2016-18)	Philippines DHS (2017)	Thailand MICS (2019)	Timor-Leste DHS (2016)	Viet Nam MICS (2013-14)
Urban	9.0	10.1	20.9	17.2	12.1	16.9	7.1	5.3
Rural	21.1	23.6	38.5	29.0	21.3	24.8	20.3	13.2
Wealth quintile								
Poorest	30.3	32.7	55.6	31.6	41.8	29.7	25.6	27.4
Poorer	19.3	24.6	40.4	33.5	24.4	24.1	23.0	15.1
Middle	20.1	16.7	33.2	29.8	14.7	25.3	16.7	6.5
Richer	16.5	9.6	25.8	27.7	9.3	20.8	11.0	5.6
Richest	11.4	3.7	12.9	19.8	3.8	5.8	6.3	1.0
Education level								
No education	37.5	32.8	58.8	42.3	17.6	31.2	23.7	49.4
Primary	26.2	45.6	46.2	35.7	51.6	33.0	36.4	41.5
Secondary/Higher	11.9	12.6	21.5	11.9	13.6	19.2	10.9	7.2

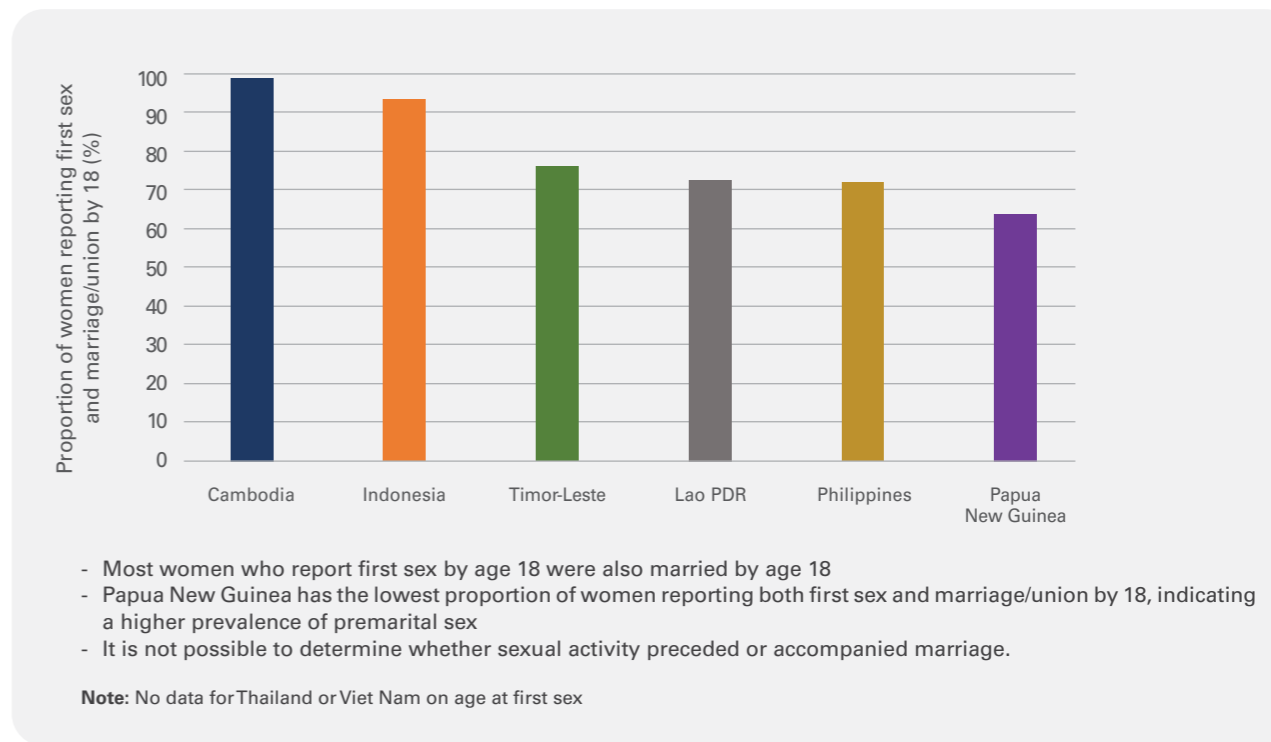
Annex Table 9 Percentage of all women aged 20–24 who gave birth before 18 years, by socio-economic factors

Characteristic	Percentage of all women 20–24 who gave birth during adolescence (before 18 years)							
	Cambodia DHS (2014)	Indonesia DHS (2017)	Lao PDR MICS (2017)	Papua New Guinea DHS (2016-18)	Philippines DHS (2017)	Thailand MICS (2019)	Timor-Leste DHS (2016)	Viet Nam MICS (2013-14)
Total	7.0	6.9	18.3	16.6	10.5	9.1	7.4	4.7
Area of residence								
Urban	3.6	4.0	10.1	8.6	8.8	7.8	3.1	3.2
Rural	7.8	10.3	22.3	18.0	12.2	10.8	10.3	5.5
Wealth quintile								
Poorest	13.5	15.2	36.2	21.3	21.3	13.9	16.5	15.3
Poorer	7.4	9.8	23.8	20.7	15.8	13.4	12.4	5.3
Middle	5.9	6.6	17.8	15.7	10.0	11.2	6.3	0.7
Richer	5.2	3.6	12.5	18.0	6.4	7.4	3.3	2.9
Richest	4.8	1.8	4.2	11.3	4.4	1.9	3.7	0.8
Education level								
No education	17.9	28.3	42.5	33.1	14.5	8.9	11.4	26.5
Primary	9.9	21.0	27.0	20.1	32.1	16.1	24.5	18.7
Secondary/Higher	4.1	5.0	9.8	6.0	8.6	8.6	4.6	3.1

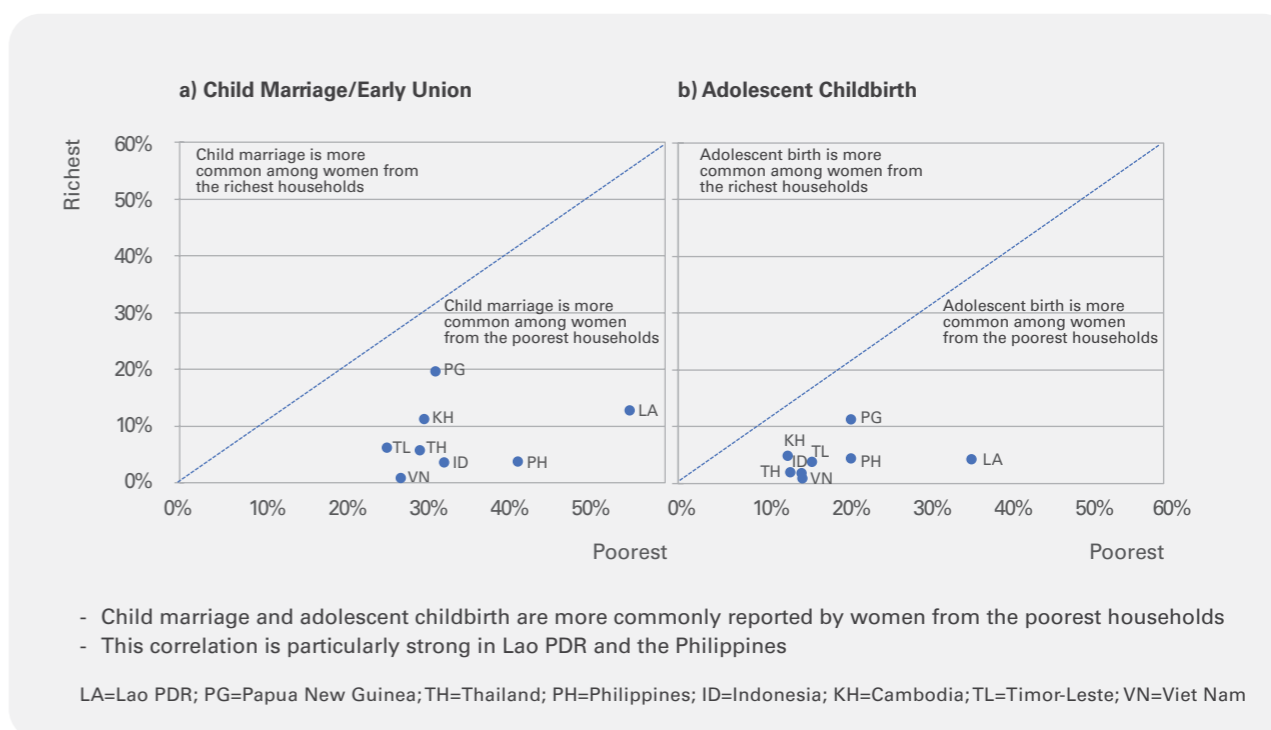
Annex Figure 1 Trends in adolescent childbearing as reported by women aged 20-24 years



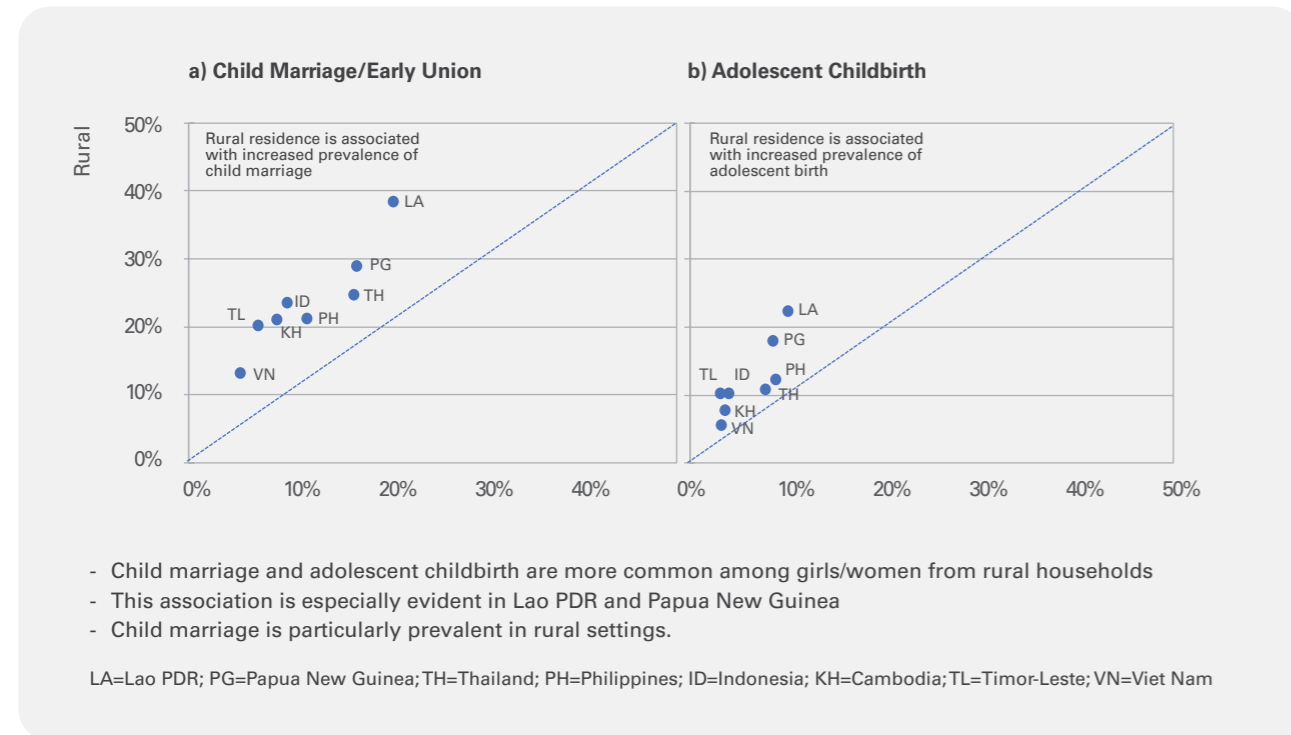
Annex Figure 2 Proportion of women (20–24 years) reporting first sex and marriage/union by age 18 (%)



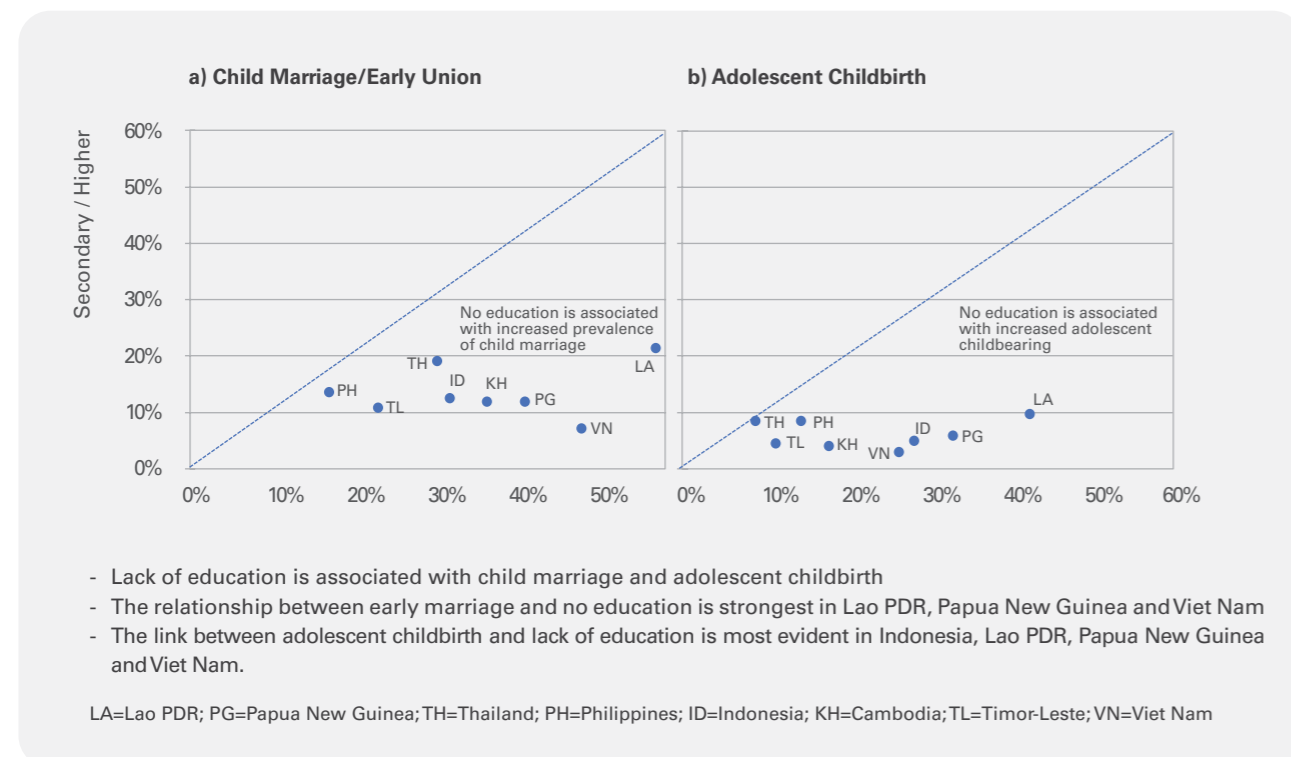
Annex Figure 3 Women, aged 20–24 years, by wealth quintile a) married/in union and/or b) childbearing, by age 18 (%)



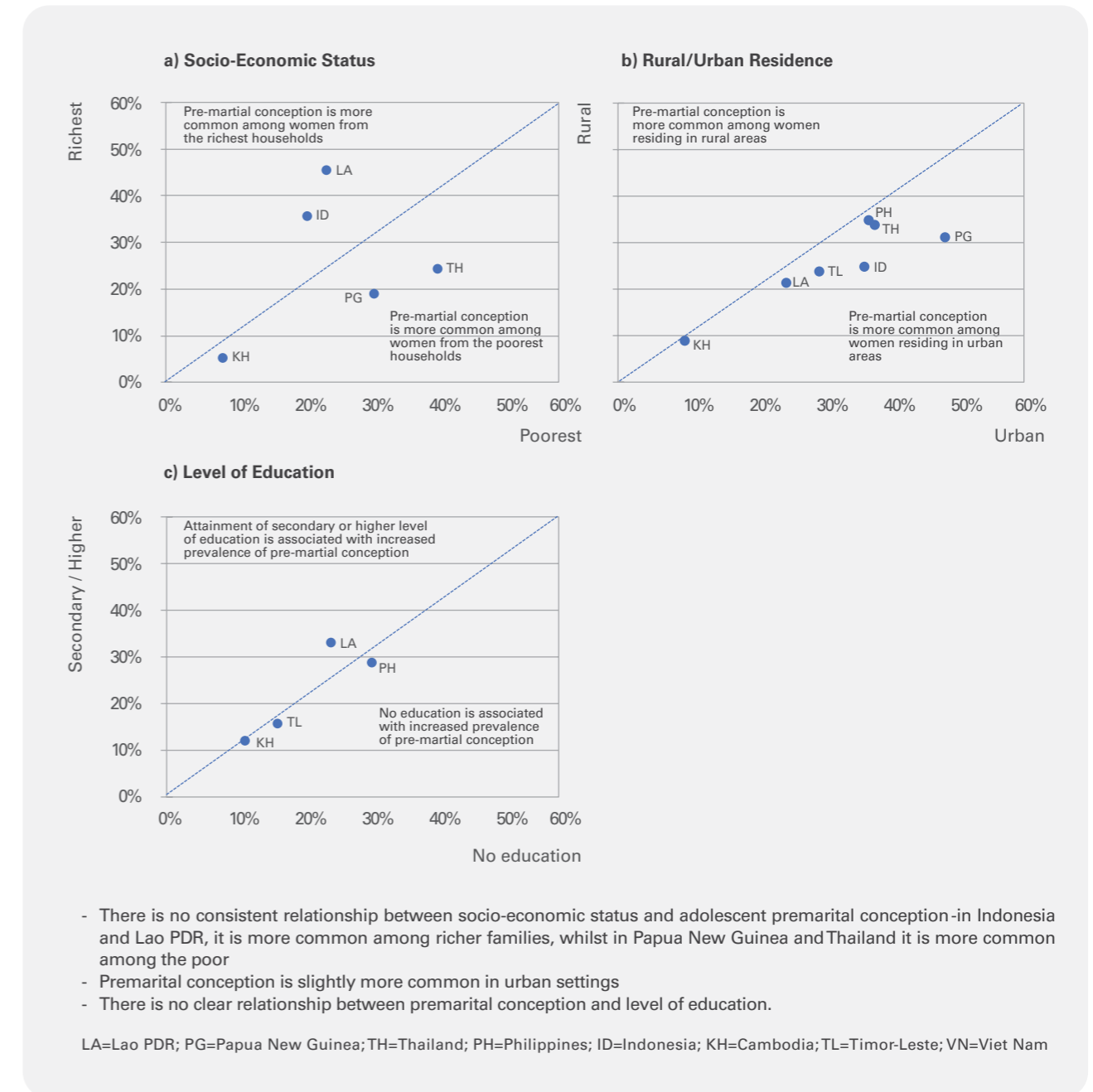
Annex Figure 4 Women, aged 20–24 years, by urban/rural residence who were a) married/in union and/or b) childbearing, by age 18 (%)



Annex Figure 5 Level of education attained for women (aged 20–24 years) a) married/in union by age 18, and b) childbearing by age 18



Annex Figure 6 Ever-married women (20–24 years) who conceived premaritally and gave birth before age 18 years, by a) socio-economic status, b) rural/urban residence and c) level of education





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UNICEF East Asia and Pacific Office

19 Pra Athit Rd, Chana Songkhram,
Pra Nakhon, Bangkok, 10200, Thailand
E: asiapacificinfo@unicef.org

<https://www.unicef.org/eap>



UNFPA Asia Pacific Office

4th Floor, United Nations Service Building,
Rajdamnern Nok, Bangkok 10200, Thailand
E: apro@unfpa.org

<https://asiapacific.unfpa.org>