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CULTURE, POVERTY, AND RELIGION AT A CROSSROADS: CAUSES AND IMPLICATIONS OF CHILD MARRIAGE IN THE SLUMS OF KARACHI

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Abstract: Child marriage continues to be prevalent in South Asia, including Pakistan, despite national laws and international agreements prohibiting it. This article aims to discover the causes of child marriage and its implications for child brides. We identify gaps in the implementation of laws, good practices, and program designs, and we propose necessary initiatives. Utilizing a cross-sectional design, a mix of quantitative and qualitative information was obtained from focus group discussions and from a survey of 131 early married females. We found that the cause of child marriage in Pakistan is not simply poverty: it is also deeply rooted in social customs, cultural norms, and traditional and religious beliefs. The psychological, economic, social, and physical consequences of child marriage can be excruciating for these girls, whose education may be curtailed and who are likelier than their unmarried peers to experience emotional, sexual, and physical violence. This study identifies parental decision-making, societal pressures, and entrenched gender roles as key drivers of child marriage. A lack of awareness about the legal marriage age and limited access to education further exacerbate the problem. Our recommendations include standardizing the legal marriage age at 18 years, implementing mass birth registration campaigns, and ensuring access to education for girls. Community-based awareness programs should challenge cultural norms and promote the benefits of delayed marriage. Strengthening laws and empowering local authorities to enforce them are also essential. Moreover, comprehensive poverty reduction programs, vocational training for women, and education reforms are needed if the root causes of child marriage and its often devastating consequences are to be successfully addressed.

Keywords: child marriage, early married, illiteracy, poverty, culture

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Although Muslims make up over 90% of the population in Pakistan (Pakistan Bureau of Statistics, n.d.), it is nonetheless a culturally diverse country where a traditional focus on the arts is coupled with a spectrum of strong religious feelings, with sharp, discernible, social divisions based on income and wealth (Suleman et al., 2020). Gender roles in the country are embedded in cultural practices and beliefs that support the practice of child marriage: most parents prefer their children to get married at a tender age to preserve family honor, for financial stability, or to maintain traditional social control (Karamat, 2020). Child marriage is a customary union, made under religious, social, and emotional pressure, in which either or both of the marrying couple is under the age of 18, a violation of daughters' rights that defies laws and agreements. In our view, religion is misinterpreted or misapplied with regard to early marriage.

The Child Marriage Data Portal (2023) website[1] shows that in Pakistan about 4% (5 million) of married women aged 20 to 24 had been married before the age of 15; 18% (20.5 million) had been married before age 18. Rapid urbanization in Pakistan has led to an "urban crisis" (Dua-e-Rehma Centre et al., 2020, p. 80), with more and more people living in slum environments where poverty, illiteracy, overcrowding, and minimal access to health care, education, and employment opportunities converge. The unemployment levels in the slum areas are high and social facilities are limited, as are women and girl's rights, resulting in high rates of child marriage (Zulfiqar & Malik, 2023).

Child marriage has been a long-standing practice in many cultures. The United Nation's (UN) Convention on the Rights of the Child (1989), Article 1 states that a "child means every human being below the age of eighteen years unless under the law applicable to the child, majority is attained earlier"; this applies even to children who have reached puberty (Rizvi & Qureshi, 2022). With respect to child marriage in Pakistan, Bhatti (2022) asked:

> Is a child intellectually mature enough to make a wise decision and be able to take care of themselves, let alone run a family? …When a child is not allowed to hold a Computerized National Identity Card (CNIC), cannot get her [or his] driving licence, cannot vote, cannot sign any other contract, how can she [or he] sign a contract of marriage? (para. 13)

Allowing child marriage hinders the achievement of the following UN Sustainable Development Goals (SDGs; UN Department of Economic and Social Affairs, 2016): No Poverty (SDG1), Good Health and Well-being (SDG 3), Quality Education (SDG 4), Gender Equality (SDG 5), Decent Work and Economic Growth (SDG 8), and Reduced Inequalities (SDG 10; Ullah, 2019). Regardless of gender, child marriage can have profound negative psychological, emotional, physical, and intellectual impacts, but the consequences are more severe for girls,

[1]The Child Marriage Data Portal is a non-profit website that presents data sourced from UNICEF that are relevant to child marriage. For further information, see https://childmarriagedata.org/about/.

who are disproportionately deprived of their basic rights such as health, education, and empowerment (Ullah, 2019). Although the UN Committee on the Rights of the Child (2004) strongly recommended increasing the minimum age for marriage to 18 in their General Comment No. 4, the practice of child marriage continues in Pakistan (Girls Not Brides, 2020).

According to Shabbar & Manzoor (2022), a UNICEF report in 2020 showed that child marriage is quite extensive in Asian countries; the most recent report from UN Women (2024) showed that Pakistan is home to nearly 19 million child brides today. In light of these alarming statistics, research-based evidence is required to effectively protect child rights by reforming legislation and policy, devising new strategies, and addressing the drivers that lead to child marriage (Naveed & Butt, 2020; Ullah, 2019).

The purpose of the present analysis is to explore the long-existing rationales of child marriage practice in Pakistan, and to document its socioeconomic impacts, through a cross-sectional descriptive study. Child marriage is generally believed to be more prevalent in lower-income areas, particularly in slums; to the best of our knowledge, however, no concrete evidence on this point is yet available. We therefore undertook to provide first-hand information about the prevalence, causes, and implications of child marriage in the slums of Karachi, Pakistan's largest city and the capital of the province of Sindh.

The study is aligned with and relevant to several of the UN's goals:

- SDG 1 (No Poverty): The study highlights the economic vulnerabilities of early married females and their families, emphasizing the need for targeted interventions to break the cycle of poverty and child marriage.
- SDG 3 (Good Health and Well-being): The study explores the health implications of early marriage (e.g., increased risks of maternal and child mortality, lack of health care access and reproductive health education).
- SDG 4 (Quality Education): The study shows the impact of child marriage on educational attainment, and reinforces the importance of accessible and inclusive education as a preventive measure.
- SDG 5 (Gender Equality): Most importantly, the study addresses the entrenched gender inequalities that bring about child marriage, calling for policies that empower young girls and protect their rights.

Based on Bronfenbrenner's (1979) socioecological model (SEM), our research explores how individual behaviors are influenced by interactions across multiple levels: individual, interpersonal, community, and societal. This framework is effective for examining child marriage, as it considers the interplay between personal decisions, familial influences, cultural norms, and systemic structures. By addressing these interconnected factors, the SEM offers a comprehensive approach to identifying causes and interventions. It highlights the importance of

holistic strategies, aligning with the study's aim to combat child marriage and its detrimental effects comprehensively.

Previous studies on child marriage in Pakistan have provided valuable insights, but have primarily focused on specific urban regions or limited sociocultural contexts, leaving significant gaps in the geographical and contextual understanding of the issue. For instance, Nasrullah et al. (2014) and Hamid et al. (2009) explored the prevalence and implications of child marriage in the slums of Lahore and Islamabad respectively, highlighting limited education, cultural pressures, and inadequate awareness as critical drivers. Similarly, Nasrullah et al. (2015) examined intimate partner violence among women who had been married before age 18, focusing again on Lahore's slums, while Kakal et al. (2023) investigated decision-making practices around child marriage in Sindh.

This study addresses a gap in the literature by focusing on the slums of Karachi, which are characterized by unique socioeconomic and cultural dynamics. These include high ethnic diversity and distinct religious interpretations, which may influence the prevalence and drivers of child marriage. By investigating this neglected area, the study contributes to a broader understanding of child marriage in Pakistan, offering insights that can inform targeted interventions and policy reforms. An added consideration in the selection of the Karachi slums was the ready access of the researchers to these areas, making the research objective achievable.

Method

The research was conducted in two phases, starting with a survey of early married females. Ethical clearance for the research was obtained from the Institute of Business Management's internal review board. The target population for the survey included married, divorced, or separated females older than 16 who had been married before 18. Initially, purposive sampling was used to identify cases of early married females through records of local hospitals and through NGOs working on child marriage. In addition, a snowball sampling approach was utilized. Initial participants referred potential participants, which assisted in reaching individuals who might not have been accessible otherwise. Through this combined approach, responses from 131 early married females were collected. This sample size is considered reasonable despite occasional instances in which, given the sensitive nature of the subject, a participant was unwilling to provide information. In some cases, participants were recruited with assistance from local authorities.

In the second phase, the results were triangulated through focus group discussions (FGDs) involving various stakeholders to obtain localized context regarding the issues surrounding child marriage, and its associated challenges and implications. Using a participatory approach, we obtained in-depth insights from key stakeholders, including health care professionals and residents. FGDs gave qualitative information to support the quantitative part of the research. The details of the participants in the FGDs are shown in Table 1.

Table 1. *Focus Group Composition and Participants*

Group	No. of participants	Profession
1	1	Female doctor
2	4	Health care staff
3	1	Midwife
4	3	Local community residents (e.g., mothers and fathers)
5	2	Staff nurses
6	4	Female health care workers

The survey and subsequent FGDs aimed to assess participants' conceptions, knowledge, and attitudes concerning child marriage, as well as to analyze their perceptions of society's views on child marriage and of what their roles and duties were in regard to making decisions about child marriage. The purpose and nature of the research was explained to the participants, who gave their informed written consent. Participants'confidentiality was ensured by coding. The questionnaires were filled in on the spot, and translation to Urdu was provided to all participants as most were not able to understand the English terms used.

SPSS version 24 was used for data entry and analysis. Descriptive statistics, cross-tabulation, percentages, and frequencies were used to obtain the results. Qualitative data analysis was done by identifying common patterns in the collected data.

Results

Sociodemographic information regarding the participants is reported in Table 2. Survey responses were obtained from 131 early married females living in slum areas in Karachi; more than half (59.5%) of whom were in the lowest two brackets for household income. The youngest participants surveyed were 16 and the oldest over 45. Almost 80% of participants were living in joint families[2]. In terms of residential status, 54.2% of households owned rather than rented their dwellings. Most respondents (91.6%) were Muslim.

Poverty was examined in terms of self-reported monthly household income levels, living conditions, and access to basic needs such as education, health care, and nutrition. When asked how many months the income from the household's regular earnings would fulfil basic needs (e.g., food, shelter, clothing, health), 51.5% of respondents' said 12 months, and one fourth (25.3%) said it would last only six months or less. Overall, 46 participants (35%) identified their monthly household income as less than PKR 15,000. At the exchange rate of 283.63 PKR/USD that was current at the time of writing, this was equivalent to 52.89 USD per month, or about 1.74 USD per day. The World Bank (Foster et al., 2025) has recently updated its extreme poverty

[2] Merriam Webster defines "joint family" as "a consanguineal family unit that includes two or more generations of kindred related through either the paternal or maternal line who maintain a common residence and are subject to common social, economic, and religious regulations". https://www.merriam-webster.com/dictionary/joint family

line to less than 3.00 USD per day; thus, many of our participants were living far below this level. It is important to note that poverty was measured at the household level. This means that the total financial capacity of the whole family was taken into account, not just the resources available to the child bride. This approach mirrors relations in the households, where available resources are pooled.

Table 2. *Socioeconomic and Demographic Information by Household (N = 131)*

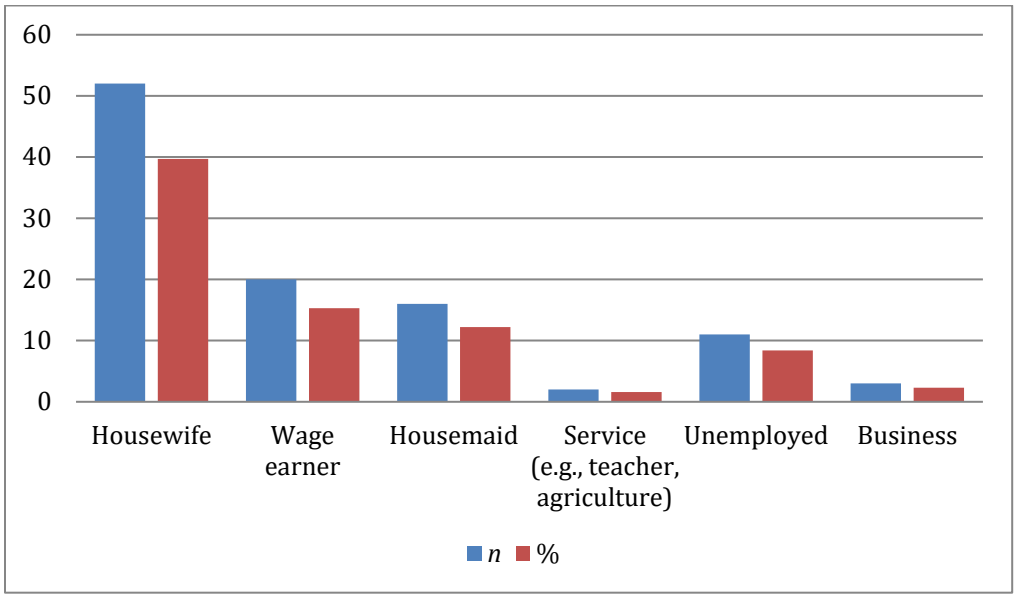
Variable / Dimension	*N*	%
Household income level (PKR)		
< 15,000	46	35.1
16–25,000	32	24.4
26–35,000	21	16.0
36–45,000	12	9.2
> 45,000	17	12.9
Age (years)		
16–25	31	23.6
26–35	47	35.8
36–45	31	23.6
> 45	22	16.7
Family structure		
Nuclear	27	20.6
Joint	104	79.4
Household income source		
Wage earner	45	34.4
Service employee	57	43.5
Other (e.g., agriculture, business, foreign employee)	29	8.4
Residential status		
Own	71	54.2
Rental	56	42.7
Basic needs fulfillment		
< 12 months	67	51.5
< 6 months	33	25.3
Religion		
Islam	120	91.6
Hindu	4	3.1
Christian	7	5.3

Respondent's Occupation and Education

Figure 1 shows that housewives — women mostly confined at home and limited to performing domestic work only — were the largest subgroup of respondents (39.7%). The second highest proportion were wage earners, followed closely by those working as housemaids.

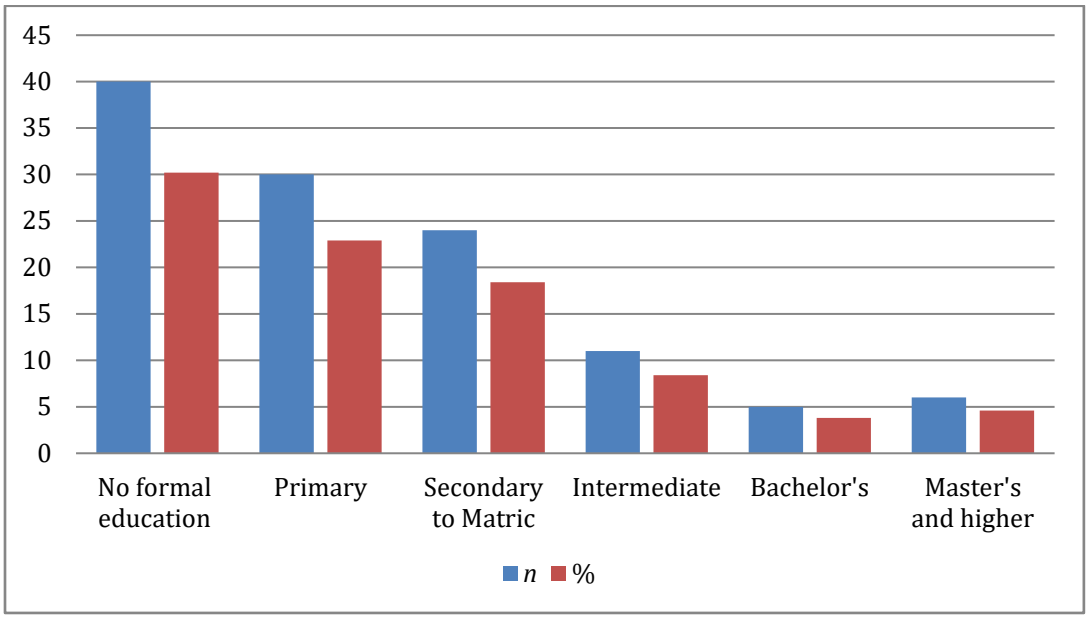
This range of occupations indicates a lack of opportunities to pursue education. In interviews, a majority of participants stated that males were usually the family's breadwinners.

Figure 1. *Major Occupation of Respondents*



Education is an important influence on an individual's attitudes, behaviors, personal development, and knowledge about numerous aspects of life, including marriage. However, almost all of the 131 respondents (98.5%) were not currently receiving any academic education. Most (53.1%) had either not gone to school or had left school at the primary level (Figure 2).

Figure 2. *Educational Status of Respondents*



Respondent's Marital Age and Status

Respondent's marriage age, type of marriage, and status are reported in Table 3, which shows that 59.5% were in an arranged marriage. Some participants stated that they had no choice in the matter: the boy's family visited the girl's residence, after which the girl's parents presented all of their unmarried daughters, and the boy's parents chose their son's bride without seeking the girl's approval. For marital status, 11.5% reported they were currently not married, 3.1% were separated from their husbands, and 2.3% indicated they were divorced. However, upon probing, all of these participants said that it is solely the husband's decision whether to live with

Table 3. *Respondents' Marriage, Age, and Status (N = 131)*

Variable/Dimension	*N*	%
Type of marriage		
Arranged marriage	78	59.5
Love marriage	19	14.5
Others (*pait likhi*[a], *watta satta*[b])	9	6.8
No response	25	19.1
Marital status		
Currently not married	15	11.5
Separated	4	3.1
Divorced	3	2.3
Widow	10	7.6
Living with husband	99	75.6
Age at time of marriage		
10–11 yrs	5	3.8
12–13 yrs	19	14.5
14–15 yrs	41	31.3
16–17 yrs	37	28.2
> 17 & < 18 yrs	29	22.1
Early marriage decision-maker		
Father	39	29.8
Mother	15	11.5
Self	10	7.6
Others (e.g., friend)	5	3.9
Attitude towards child marriage		
Good	27	20.6
Bad	37	28.2
Indifferent	11	8.4
Very bad	53	40.5
Agent responsible for eradicating child marriage		
Community	18	13.7
Parents	86	65.6
Father	9	6.9
Self	3	2.3
Government	12	9.2

[a]*Pait likhi* means the girl has been promised in marriage before birth. [b]*Watta satta* is an exchange marriage, which involves simultaneous interfamily marriage from two households.

his wife or not; the wife, on the other hand, is obligated to continue her marriage in any circumstance. Almost 50% of respondents were married between the ages of 10 and 15, and 28.2% were married when they were 16 or 17, showing the prevalence of early marriage in these slums. Regarding who usually decides the marriage should take place, 38.2% of those who responded said parents usually decide. When individuals who married at a young age were questioned about who had made marriage decisions in their families, 65.5% said parents alone and 29.8% said fathers were more involved in making the marriage decision in their families.

When early married females were asked their opinion of child marriage, 40.5% said that child marriage is a very bad practice, and 28.2% considered it a bad practice. As for who is responsible for abolishing child marriage, 61.8% said parents, and only 9.2% thought the government should be the responsible agent.

Birth Registration Status

Proper documentation is required to legally challenge a child marriage. We therefore asked the respondents to indicate their birth registration status. About 55% stated that they were registered but did not show their birth registration certificates when getting married; 31.3% were not registered. Only 13% of respondents were able to produce their birth registration certificates (see Table 4). This indicates the non-uniformity of the birth registration system in Pakistan. When young people lack birth certificates, it is difficult to prevent their marriage on the basis of age, as neither *Nikahkhwans* (who solemnize Muslim marriages) nor *Nikah registrars* (government officials legally authorized to perform and register marriages) are then able to confirm their age through legal documents. Instead, these officials must rely solely on the word of parents or relatives to ascertain the ages of the couple. The early married females in our sample were well aware of the fact that their parents may have lied about their ages to effect the solemnization of their marriages.

Table 4. *Birth Registration Status*

Participants	*n*	%
Registered (certificate shown)	17	13.0
Registered (certificate not shown)	72	55.0
Not registered	41	31.3

Knowledge About Efforts to Abolish Child Marriage

Early married females said they did not know of any organization working to eradicate child marriage. In addition, almost all of them were unaware of the legal age for marriage in Pakistan (see Table 5).

Table 5. *Knowledge About Child Marriage Activities*

Characteristic	*n*	%
Early married female's knowledge of an organization working?		
No	131	100.0
Legal age of marriage with or without parental consent by early married females		
Yes	1	0.8
No	129	98.5
No response	1	0.8

Causes of Child Marriage

During the survey, early married females were asked the reason that they were married before 18. It was found that 45.9% got married because of social, cultural, and traditional beliefs, including religious precepts. Only about 23% reported that poverty had been the factor pushing their parents to marry them off at an early age.

Table 6. *Causes of Child Marriage (Multiple Responses)*

Category	*n*	%
Cultural and traditional beliefs		
Sindhi and Balochi cultures marry off girls before 14	21	16.1
Watta satta	6	4.6
Found good husband	6	4.6
Economic factors		
Bride price	4	3.1
Difficulty in raising many girl children	2	1.5
Poverty	21	16.1
Father arranging daughter's marriage to settle debts	3	2.3
Social prestige		
To save family honor	4	3.1
Social acceptance	2	1.5
Religious beliefs		
Parents' desire to organize daughter's marriage at onset of menstruation	21	16.0
Family issues		
Parental desire to remarry	4	3.1
To fulfil a need for human resources at home	3	2.3
Lack of love for girl child	1	0.8
Parental pressure	5	3.8
Peer pressure	14	10.7
Personal preference		
Love marriage	12	9.2

Young Girls' Problems After Marriage

Child marriage causes problems according to 84.0% of the early married females in our sample. The respondents reported numerous negative effects: rashes around the vaginal area and vaginal discharge were both reported by 59.5%, 53.4% expressed a sense of meaninglessness in their lives, and 32.8% expressed a dislike for social activities.

Table 7. *Early Married Female's Problems After Marriage (Multiple Responses)*

Characteristic	*N*	%
Child marriage causes problems		
Yes	110	84.0
No	17	13.0
No response	4	3.1
Physical problems		
Vaginal discharge	78	59.5
Bleeding from the vagina after intercourse	72	55.0
A foul-smelling vaginal discharge	63	48.1
Abnormal bleeding from the vagina	68	51.9
Rashes around the vagina	78	59.5
Irregular menstruation	56	42.7
Other	12	9.2
Psychological problems		
Like to stay alone	40	30.5
Do not like to participate in social activities	43	32.8
Increase in heart rate	38	29.0
The feeling that life is meaningless	70	53.4
Not feeling like working	26	19.8
Loss of appetite	36	27.5
Don't know	28	21.4
Antenatal care utilization (ANC)		
Did not obtain ANC	75	57.0
Obtained ANC	56	43.0
Illness frequency (first year of marriage)		
Never	18	13.7
1–2 times	34	26.0
3–5 times	29	22.1
6–8 times	37	28.0
> 8 times	13	9.9

A correlation analysis (see Table 8) was also performed for the identified variables to assess the relationships among three variables: child marriage bringing problems, physical factors, and psychological factors. A positive correlation of .65 suggests that experiencing problems due to child marriage is moderately associated with experiencing physical health issues, while a correlation of .72 indicates that psychological challenges are even more closely linked to problems resulting from child marriage. A correlation of .68 shows these two categories of issues often co-occur, suggesting interconnected impacts.

Table 8. *Correlation of Female's Problems After Marriage*

Variable	1	2	3
1. Child marriage brings problems	-		
2. Physical factors	.65	-	
3. Psychological factors	.72	.68	-

Table 9. *Negative Consequences of Child Marriage*

Category	Codes
Health aspects	
High-risk pregnancies and childbirth	Hepatitis, infant mortality, frequent pregnancies, tumors, fibroids, postpartum hemorrhage, reproductive infections, delayed physical growth, uterine prolapses, miscarriage, hepatitis, sexually transmitted infections, stillbirth, poor fertility, unwanted pregnancies, acute renal failure
Physical illnesses	Anemia, iron deficiency, backache, delayed physical growth
Emotional health	Poor mental health, marital rape, depression (emotionally disturbed, not ready to be separated from parents)
Educational aspects	
Lack of access to educational opportunities	No support for girls education as they are not breadwinners of home No support for girls education as they are someone else's property
Lack of financial resources	Costly to educate girls
Intergenerational educational consequences	Uneducated mothers struggle to support children's learning
Dropping out of school	No schooling provided for daughter-in-law Not being able to study (due to child birth)
Social aspects	
Immature mothers	A child mother is not prepared for raising a child
Social isolation	Husband imposes restrictions Leaving relationships with peers due to marriage Little or no participation in social activities
Lack of access to social/health services	Lack of access to necessary health and social services such as counselling centers
Lack of social support in society	Higher dependency on husband Lack of social prestige
Economic aspects	
Dissatisfaction with married life	Polygamy, divorce Economic, physical, psychological, and sexual violence Poor understanding between husband and wife Child birth causes vulnerability by husband and in-laws Hatred by husband in later life
Increased workload	Child bride experienced having a lot of responsibilities as a wife and child mother
Low autonomy in decision-making	In-laws interference in birth control decisions Little decision-making authority at husband's house
Increased population	Large family size with less income
Financial dependency	Lack of money, jobless
Underemployment	Can get only low-paying jobs due to low literacy and lack of skills

Consequences of Child Marriage

The present research also examined the negative and positive impacts on society created by the custom of child marriage. Early marriage affects girls' health and education, thus producing social and economic instability as illustrated in Table 9. The responses highlight a severe physical and psychological toll on young brides, including complications during pregnancy, exposure to reproductive health risks, and stress-related disorders. A significant portion of respondents reported that child marriage interrupts education. This reflects the societal and familial pressures that prioritize marriage over education, limiting future opportunities for personal and economic growth for young girls. Respondents also felt that there were some positive externalities, as reported in Table 10.

Table 10. *Positive Consequences of Child Marriage (as Perceived by Respondents)*

Category	Codes
Health aspects	
Early pregnancy	Early pregnancy is good
Improving health conditions	Child bride would be healthier at husband's home
Educational aspects	
Gaining support	Husband may assist in education
Social aspects	
Perceived religious merit	Allah may give a reward to parents if they arrange their daughters' marriage as soon as possible once she gets her first menstruation It is Muhammad's (S.A.W) way of life, and we are obliged to follow it otherwise we are responsible for sins
Cultural notions of responsibility transfer	The daughter is *paraya dhan* [someone else's property], so best to transfer this responsibility to the husband as soon as possible
Perceived life-planning advantage	Early parenting is good as being a father you fulfil all your family responsibility in your middle age
Economic aspect	
Release economic burden	Daughters are an economic burden; it is very costly to feed, educate, and clothe them
Financial assistance	Parents can pay less dowry money when the bride is a child

The correlation analysis presented in Table 11 highlights significant associations between problems related to child marriage and demographic and contextual factors such as age, education level, type of marriage, and household size (joint or nuclear). A negative correlation (−.45) between age and reporting problems after child marriage suggests that younger individuals are more vulnerable to the adverse consequences of child marriage. Similarly, the strong negative correlation (−.60) with education level emphasizes the protective role of education, where higher levels of education significantly reduce the likelihood of reporting problems. Conversely, a positive correlation (.50) with type of marriage indicates that traditional or arranged marriages might exacerbate issues related to child marriage. Additionally, household

size shows a moderate positive correlation (.30), suggesting that early married females who marry into larger families may face greater challenges, possibly due to financial or resource constraints impacting the family's ability to address the needs and well-being of young brides. These findings collectively show the multifaceted nature of problems associated with child marriage, highlighting the importance of targeted interventions that focus on enhancing education, delaying marriage age, and addressing sociocultural norms.

Table 11. *Correlation of Child Marriages and Associated Problems*

Variable	1	2	3	4	5
1. Child marriage brings problems	-				
2. Age	−.45	-			
3. Education level	−.60	.40	-		
4. Type of marriage	.50	−.25	−.35	-	
5. Household size	.30	−.10	−.20	.25	-

Incidences of Miscarriage and Stillbirth

Respondents were asked about the number of miscarriages or stillbirths they had had. It was found that 56.5% of respondents reported having had miscarriages; among respondents who became pregnant between the ages of 10 to 14, 58.2% had experienced miscarriages. The incidence of miscarriage was lower (12.1%) among respondents who had been older (15–17) when they were married. Among respondents (32.8%) who had had a stillbirth, 58.1% had given birth between the ages of 10 and 14. In an international review of child marriage, Nour (2006) stated that girls who give birth before 18 have a 35% to 55% risk of delivering preterm babies and infants of low birth weight.

Table12. *Incidence of Miscarriage and Stillbirth*

Characteristic	*n*	%
Has experienced miscarriage		
Yes	74	56.5
No	55	42.0
No response	2	1.5
Age at time of miscarriage		
10–14yrs	43	58.2
15–17yr	9	12.1
No response	22	29.7
Has experienced stillbirth		
Yes	43	32.8
No	88	67.2
Age at time of stillbirth		
10–14yr	25	58.1
15–17yr	2	4.65
20–39yr	16	37.2

Table 13 shows that the relationship between income and the incidence of miscarriages and stillbirths is very weak. The correlation of miscarriages to stillbirth is moderate at .27; there could be a common predisposing condition or factor that links the two, albeit not very strongly.

Table 13. *Correlation Analysis of Income and Incidence of Miscarriage and Stillbirth*

	1	2	3
1. Income	-		
2. Miscarriage	−.010	-	
3. Stillbirth	.038	.270	-

Focus Group Discussion

To obtain localized context regarding the issues, challenges, and implications of child marriage we conducted FGDs. These were held in a rural health center in the town of Ibrahim Hyderi,which is now part of the Malir District of Karachi and has a predominantly Sunni Muslim population. Although it is recognized as one of the city's main areas for commercial fishing, Ibrahim Hyderi is also a prominent slum known for its large size. Our FGDs revealed that child marriage has deep roots in the communities here: it is a traditional and cultural norm that has been practised for many generations. We were told that in every Friday prayer, the imam emphasizes that parents are obliged to arrange marriages for girls soon after their first menstruation; not to do so is regarded as a sin. The life expectancy of this population is lower than 50 years. Parents expressed a wish to have their children settled early in their own lives in order to have a chance to see their grandchildren. Based on our findings, poverty is not the only driver of child marriage in this community.

According to participants in the FGDs, many of whom were health care workers (see Table 1), child brides tend to neglect their health, and their general health is poor. For pre- and postnatal examinations, they usually attend traditional healers and a midwife, visiting a clinic only if the midwife sends them for blood transfusions and intravenous iron therapy. They prefer to have their babies at home. Hepatitis B and C are both frequent among child mothers. Their nutritional intake is inadequate, and 90% of people in Ibrahim Hyderi were reported to have dangerously low hemoglobin levels. FGD participants reported seeing higher incidences in early married females of frequent pregnancy, renal failure, fibroids, tumors, urinary tract infection (UTI), fistula, vaginal and uterine prolapse, unsafe abortion, miscarriage, mouth cancer, dilation and curettage (D&C), stillbirth, and tuberculosis. They felt that there was no way to prevent child marriage in this community due to deeply rooted cultural norms and limited access to education and community awareness programs.

Discussion

This study explores the causes and consequences of child marriage in the slums of Karachi. Our findings reveal that child marriage is a multidimensional issue, driven by sociocultural norms, economic constraints, and certain religious interpretations, and that it results in severe health, educational, and social consequences for child brides. By applying the social ecological model (Bronfenbrenner, 1979), this discussion contextualizes the findings across individual, interpersonal, community, and societal levels, while comparing them with insights from prior research.

At the individual level, respondents demonstrated limited awareness of the legal marriage age and the negative consequences of child marriage, consistent with findings by Nasrullah et al. (2015) in urban Lahore. Other studies have also highlighted that awareness and advocacy on this critical issue are limited. Shahab-ud-Din (2020) discussed the inconsistencies in the Child Marriage Restraint Act 1929[3] and how legal frameworks have failed to increase awareness among the public. Similarly, Feroz (2023) found low levels of knowledge among families, particularly in rural and underprivileged areas, about the minimum legal age for marriage and the implications of child marriage. This lack of awareness underscores the need for targeted educational campaigns.

At the interpersonal level, familial pressures, driven by financial constraints and cultural norms, play a pivotal role. The most common reason given for imposing early marriage was religious precepts (which we consider to be cultural norms) supported by society, but no case of child marriage specifically for religious reasons was found. That is, our research did not find any correlation between child marriage and religion, although long-held beliefs, traditions, and cultural norms (religious precepts) were found to be more common among Sindhis, Balochis, Punjabi, Pushto, and Urdu speakers, and among others with lower educational backgrounds. Parental decisions were influenced not just by these cultural expectations, but also by financial constraints, aligning with Kakal et al.'s (2023) findings in Sindh, which highlighted how economic pressures often override children's welfare in marriage decisions.

Although early married females may have given their consent to the binding union in the eyes of custom, tradition, and law, in reality, others — usually fathers — had given consent on their daughters' behalf. In 1948, article 16 of the Universal Declaration of Human Rights (UN, 1948) announced that "Marriage shall be entered into only with the free and full consent of the intending spouses". Various subsequent instruments of human rights declared that "consent can never be free and full if at least one person (girl or boy) is underage".

[3] The Child Marriage Restraint Act 1929 set the minimum marriage age at 16 for girls and 18 for boys, but its implementation has historically been weak due to vague enforcement mechanisms, low penalties, and lack of institutional clarity regarding age verification. Inconsistencies also arise because marriage laws differ across provinces: Sindh has raised the minimum age to 18 for both genders, while other provinces continue to follow the 1929 Act. This results in uneven protection for children across Pakistan.

The community level findings reveal deeply entrenched cultural norms and religious misinterpretations that perpetuate child marriage, echoing Hamid et al.'s (2009) observations in Islamabad. However, unlike previous studies, this research highlights the ethnic diversity and unique socioeconomic challenges of Karachi's slums, which exacerbate the practice.

At the societal level, weak enforcement of child protection laws and inadequate advocacy were identified as significant barriers to ending child marriage, similar to the critiques of policy frameworks discussed by Qudrat et al. (2021).

The categorization of our findings into themes, such as cultural norms, economic pressures, health impacts, and educational disruptions, aligns the results with broader theoretical frameworks. The use of the SEM further demonstrates that addressing child marriage requires interventions at all levels, from improving individual knowledge and empowering families to challenging community norms and strengthening societal institutions. Educational initiatives, family engagement, community mobilization, and stronger legal enforcement are necessary. Future policies and programs should prioritize comprehensive strategies that address these intersecting factors, ensuring a more effective response to child marriage in Pakistan.

Our study demonstrates that child marriage is the result of a complex interplay of social issues, including the girl's desire to be married, the need to perform household duties, peer pressure, the father or mother wanting to free themselves of the responsibility of raising a daughter, and the desire to simultaneously arrange two marriages (*watta satta*). Most of the early married females said that parents played a paramount role in making marriage decisions in their family: daughters were married as soon as possible, without their consent being asked. Therefore, although the government, community, and girls themselves can play a part in eliminating the custom of child marriage, parents must bear the prime responsibility. We need to make parents aware of the adverse consequences of child marriages.

The patriarchal norms and rigid gender inequalities that define sons as family breadwinners and confine girls to reproductive and domestic work encourage parents to marry off their daughters as soon as possible. Consequently, education of daughters is not given priority. Almost a third of respondents reported that they had never attended school, while less than a tenth reached university, often because of limited financial resources. Although changes to laws and raising awareness of the consequences of early marriage could lead to more girls staying in school, that will happen only if there are schools for them to attend. An article on the Girls Not Brides website (2019) reported that:

> Mujahid Torwali, from Idara BarayeTaleem-o-Taraqi[4], noticed that girls in his community had nowhere to go to school. In 2017 he wrote a report about "ghost

[4]Idara Baraye Taleem-o-Taraqi (IBT) conducts research and training in North Pakistan communities, focusing on preserving Indigenous cultures and endangered languages. They also advocate for more schools for girls and promote women's rights. See https://ibtnorthpakistan.org/

> schools" — schools that exist only on paper. "After publishing my report in almost all the newspapers in Swat, the authorities took action and the schools were opened," he says. "Now there are more than 250 girls getting primary education." (Section 3, para. 2)

In Pakistan overall, approximately 60% of women aged 20 to 24 with no education were found to have been married before age 18 (Javed & Mughal, 2021). One study found that each year of additional secondary education reduces the number of child marriages in Pakistan by 3.4% (Girls Not Brides, 2019). In our research, 31% of respondents who had dropped out of school before 18 (some before marriage and some after) stated that their career opportunities and earning potential were limited. Without higher education, they were unable to pursue a professional career. Lack of education also reduced their chances of entering the labor market and their access to certain types of job: 34 (26%) were underemployed and 19 (14.5%) were unemployed. Most respondents were confined to the home and to household work; only 52 (40%) were involved in income-generating activities. In places like the Karachi slums, where the income level is low, where labor market settings tend to be informal, and where a large number of women facing poverty must take work outside the household to survive, a woman's lack of education may not have much effect on her prospects in the labor market, although it is likely to mean decreased earnings throughout her adult life. In any case, returning to school after marriage is difficult for most early married females. Other household members usually perceive them as physically and mentally ready to carry out household chores and as responsible for caring for their husband and family. Going to school while pregnant is difficult, as women are expected to hide their pregnancy in public settings. Wodon et al. (2017) found that, at the national level, child marriage has a large economic impact.

The medical consequences of child marriage can be severe. In our study, 32% of early married females had had their first child at the age of 15, and over 80% had experienced strong pressure to prove their fertility in the first year of marriage, typically before they turned 18. When health care services are limited, early pregnancy results in high maternal, infant, and prenatal mortality rates (Nasrullah et al., 2014). In Nasrullah et al.'s (2013) study, most participants explained that they had delivered their first baby at home. Our findings from an FGD were similar: participants reported that, out of 43 maternal deaths in their communities, 29 had occurred during pregnancy, for reasons that included obstructed labor, eclampsia, postpartum hemorrhage, HIV infection, and fistulas. Because their pelvic bones are not fully developed, girls between the ages of 10 and 15 are especially vulnerable to obstructed labor, and the risk of fistula is about 88%; these girls have limited opportunities for bearing children and living life normally (Nour, 2006).

The findings from FGD groups further disclosed the reason that participants were not benefiting from health care services. Participants felt that such services were unattainable and unaffordable. Some went to low-cost *hakeems* (traditional healers) and homeopaths for treatments that they believed were safer than those provided by physicians, and some visited

faith healers. Some said they visited traditional birth attendants (midwives) whom they felt provided safe, accessible, and approachable care that was aligned with the cultural beliefs of their female elders and their husbands. Poor utilization of medical services may also have been due to the poor quality of health facilities in the public sector (Datta et al., 2022). Many midwives are not well educated or properly trained in the services they provide, and thus they may contribute to needless maternal mortality and morbidity (Avais et al., 2023).

In addition, 28% of respondents reported that they had been sick between 6 and 8 times in the first year of marriage. These child brides had been disempowered when it came to accessing antenatal services: 57% of respondents had not obtained such services at all. Participants attributed this to limited financial resources, their husband not allowing them to visit the hospital, the perception that midwives are cheaper and more reliable than doctors, girl children not being allowed to leave the home, and dependence on home remedies. The 43% of respondents who had obtained antenatal services had been able to do so only three or four times, as the services were considered overpriced.

The burden of excessive and early childbearing, with its attendant mortality, illnesses, and disorders, is exacerbated in Pakistan by pervasive gender inequity (Arshad et al., 2016). In our study, it was often the men in the household and the respondents' in-laws who decided where and when child mothers should seek health care, as well as whether they should be allowed to visit health care facilities or spend money on their care. Respondents (61%) complained about the problem of leadership in their husbands' houses, particularly when they had been married at a very early age. Early married females have limited authority to make decisions about matters such as their children's health, how many children they will have, finances and resource allocation, and their own education and training. More than 85% said that husbands and other family members had the authority to make decisions regarding domestic and social activities, with 42% complaining that their participation in social activities had been curtailed.

Pakistan has inequitable laws against child marriage: the minimum legal marriage age is not uniform across provinces. The Sindh Child Marriage Restraint Act, which set the minimum age to 18 for both genders, was passed by the Sindh Assembly in 2014 (United Nations Population Fund, 2025), but failed to achieve passage in the National Assembly. In 2015, the Punjab Assembly passed a bill that introduced harsher punishments for marriage under the age of 16 (Mustafa, 2015). According to Mahpara Shakil Ghauri, a senior official at the pro-equality Aurat Foundation, people need to be aware of human rights in order to also be aware of their own rights and the rights of their children (Supriyanto & Eleanora, 2025). Only then will society, parents, and the community be motivated to affirm the right of children to enjoy their childhood, and to work towards ending child marriage before the age of 18 (Aditya & Waddington, 2021). Some NGOs have focused on increasing awareness regarding child marriage through an educational agenda that includes disseminating information on reproductive health and the negative health effects of child marriage. These efforts have reached parts of Pakistan, but fall short of meeting the needs of the country as whole.

Registration of birth is a fundamental right of all children as it provides legal proof of a child's identity and existence, yet only 34% of children in Pakistan under age 5 are nationally registered at the time of birth (UNICEF, 2025). A dependable birth registration system can facilitate the ending of child marriage and child labor by allowing accurate proof of age; it also protects children from being treated as adults in the justice system. According to respondents, 72 (55%) of households had registered family members before age 18, but certificates were not shown to the researchers. Registration of both marriages and births helps women and girls seek legal and financial redress if the marriage ends.

Ensuring birth registration of all adolescents and children would help solve a major problem: neither religious (*Nikahkhwans*) nor civil (*Nikah* registrars) officials performing marriages are able to verify the ages of the couple. Instead they must rely on the word of relatives and parents. The *Nikah* registrars' understanding of the relevant legislation and their capacity to implement it must be strengthened, including training them to verify documentary proof of age rather than relying solely on information provided by parents and relatives. By raising the marriage age for both boys and girls to 18 years, the Child Marriage Restraint Act could be applied uniformly across the country. At the same time, the current cultural norms and values that favor child marriage must be challenged and, ultimately, discarded. By involving communities, youth, and families in raising awareness of the negative consequences of child marriage, decision-makers in society can provide a countering influence that diminishes the acceptance of underage marriage (Warner, 2015).

Policy Recommendations and Enabling Interventions

The findings of this study suggest that, to eliminate the problem of child marriage in Pakistan, relevant authorities and concerned societal stakeholders at the federal and provincial levels must act: child marriage mitigation necessitates efforts from all levels and sectors. Pakistan should make it a priority to standardize the legal age of marriage for girls at 18 years across all sectors, in accordance with the UN Convention on the Rights of the Child. Emergency measures are required to eliminate cultural practices like *swara*[5], *pait likhi, watta satta*, and *adla badla* [6]. Resourcing, implementing, and strengthening policies and laws that end child marriage is an important action towards upholding and recognizing women's rights and ending gender discrimination. All possible efforts to enrol girls in school, and to support their education through and beyond the primary level, are required to enhance their capabilities and skills, to allow their voices to be heard, and delay their marriage.

Poverty reduction programs, which are likely to reduce the number of child marriages, require government commitments. Parents' financial positions could be improved by offering training in financial literacy, making employment services available, and providing loans to start

[5] The practice of giving a girl in marriage or servitude to settle a debt.

[6] A form of reciprocal or exchange marriage similar to watta satta.

entrepreneurship activities. Furthermore, a campaign of mass birth registration, ensuring that every child is registered immediately after birth, would provide a means of verifying age at the time of marriage and thus could help decrease the number of child marriages. The birth registation also serves as documentation that an early married female could use in seeking legal and financial help if her marriage ends.

Recommendations for further possible interventions include: (a) provide regular training sessions in family law for *Nikahkhwans* (officiants) to make them aware that before the marriage can take place the bride and groom must each produce a copy of the National Identity Card (CNIC) to prove they are 18 or older; (b) proactively initiate mass education programs promoting information about the rights of women and girls, the legal age of marriage, and legal remedies for child marriage; (c) design campaigns to overturn misconceptions regarding child marriage, including those with a religious basis; and (d) at the community level, create education sessions and campaigns about the positive impacts of delaying marriage and the negative impacts of child marriage, utilizing a variety of modalities.

Conclusion

The present research found that child marriage is intrinsically associated with low levels of education and a high level of gender inequality, exacerbated by the exercise of old traditions and customs combined with religious misinterpretation and misperception. The study successfully addressed its objective by identifying these multifaceted causes of child marriage — low education, gender inequality, entrenched cultural beliefs — while emphasizing the need for tailored, region-specific, approaches. Through comprehensive analysis, this article has highlighted the necessity of persistent policy interventions and significant investments to challenge societal norms and protect the rights of female children, especially in cultural settings where women are traditionally seen as dependent on men. Furthermore, while it may be impossible to make generalizations about the underlying causes of child marriage across cultures, we argue that one must be conscious of unique circumstances in specific regions. Comprehensive and persistent policy and planning with adequate financial support are required to identify and eliminate causes of child marriage wherever they arise. Child marriage has risen to prominence on national and international development agendas in recent years. We now have the opportunity to step up our efforts and capitalize on this momentum to better the lives of female children around the world.

References

Arshad, S., Waris, H., Ismail, M., Iqbal, J., & Naseer, A. (2016). Health care system in Pakistan: A review. *Research in Pharmacy and Health Sciences*, *2*(3), 211–216.

Aditya, R. I., & Waddington, L. (2021). The legal protection against child marriage in Indonesia. *Bestuur, 9*(2), 126–134. https://doi.org/10.20961/bestuur.v9i2.55144

Avais, M. A., Narijo, H., Parker, M., & Bilal, M. (2023). Maternity health workers' views on the effect of social conditions on the maternal mortality rate in Hyderabad district, Pakistan. *Pakistan Journal of Humanities and Social Sciences, 11*(1), 364–372. https://doi.org/10.52131/pjhss.2023.1101.0356

Bhatti, N. F. (2022, February 20). Society: Pakistan's child brides. *Dawn News.* https://www.dawn.com/news/1675775

Bronfenbrenner, U. (1979). *The ecology of human development: Experiments by nature and design.* Harvard University Press.

Child Marriage Data Portal. (2023). *Pakistan* [Online]. https://childmarriagedata.org/country-profiles/pakistan/

Datta, B., Pandey, A., & Tiwari, A. (2022). Child marriage and problems accessing healthcare in adulthood: Evidence from India. *Healthcare*, *10*(10), Article 1994. https://doi.org/10.3390/healthcare10101994

Dua-e-Rehma Centre, Manzoor, S., & Barrech, S. (2020). Community development and awareness raising in selected slum areas of Karachi regarding education, health and nutrition. *Pakistan Journal of Applied Social Sciences*, *11*(2), 79–100. https://doi.org/10.46568/pjass.v11i2.525

Feroz, T. (2023, September 15) *Menace of child bride* [Online]. *Daily Times.* https://dailytimes.com.pk/1132573/menace-of-child-bride/

Foster, E. M., Jolliffe, D. M., Lakner, C., Lara Ibarra, G., & Tetteh-Baah, S. (2025). *Global poverty revisited using 2021 PPPs and new data on consumption* [Policy research working paper 11137]. World Bank Group. http://documents.worldbank.org/curated/en/099503206032533226

Girls Not Brides. (2019, July 31). *The side of Pakistan you don't see.* https://www.girlsnotbrides.org/the-side-of-pakistan-you-dont-see/

Girls Not Brides. (2020). *Child marriage and the law*. https://www.girlsnotbrides.org/child-marriage-law/#what-does-international-law-say-about-child-marriage

Hamid, S., Johansson, E., & Rubenson, B. (2009). "Who am I? Where am I?" Experiences of married young women in a slum in Islamabad, Pakistan. *BMC Public Health*, *9*(1), Article 265. https://doi.org/10.1186/1471-2458-9-265

Javed, R., & Mughal, M. (2021). Girls not brides: Evolution of child marriage in Pakistan. *Journal of Public Affairs, 21*(3), e2582. https://hal.science/hal-03038355v1/file/Girls Not Brides Evolution of Child Marriage in Pakistan.pdf

Kakal, T., Kok, M., & Jawad, M. (2023). "You are a child and this is not your business": Decision-making on child marriage in Sindh, Pakistan. *PLoS ONE, 18*(9), Article e0266865. https://doi.org/10.1371/journal.pone.0266865

Karamat, I. (2020). *Poverty-early marriage nexus: Evidence from slum areas of Sheikhupura* [Doctoral dissertation, Pakistan Institute Of Development Economics]. https://thesis.pide.org.pk/thesis/poverty-early-marriage-nexus-evidence-from-slum-areas-of-sheikhupura/

Mustafa, W. (2015, March 10). Second Pakistan province cracks down on child marriage. *Reuters.* https://www.reuters.com/article/us-pakistan-law-child-marriage/second-pakistan-province-cracks-down-on-child-marriage-idUSKBN0M619F20150310

Nasrullah, M. (2015). Child marriage and its impact on maternal and child health in Pakistan [Doctoral dissertation, University of Bielefeld]. https://d-nb.info/1077605277/34

Nasrullah, M., Zakar, R., Zakar, M. Z., Abbas, S., & Safdar, R. (2015). Circumstances leading to intimate partner violence against women married as children: A qualitative study in urban slums of Lahore, Pakistan. *BMC International Health and Human Rights*, *15*, Article 23.

Nasrullah, M., Zakar, R., Zakar, M. Z., Abbas, S., Safdar, R., Shaukat, M., & Krämer, A. (2014). Knowledge and attitude towards child marriage practice among women married as children-a qualitative study in urban slums of Lahore, Pakistan. *BMC Public Health*, *14,* Article 1148. https://doi.org/10.1186/1471-2458-14-1148

Naveed, S., & Butt, K. M. (2020). Causes and consequences of child marriages in South Asia: Pakistan's perspective. *South Asian Studies*, *30*(2), 161–175.

Nawaz, S., Koser, M., Bilal, K., Shabbir, M. S., & Latif, R. (2021). The conceptual framework of early child marriage in Pakistani society. *PalArch's Journal of Archaeology of Egypt/Egyptology*, *18*(9), 1762–1776.

Nour, N. M. (2009). Child marriage: A silent health and human rights issue. *Reviews in Obstetrics and Gynecology*, *2*(1), 51–56. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2672998/

Pakistan Bureau of Statistics. (n.d.). *Population by religion.* https://www.pbs.gov.pk/sites/default/files/tables/population/population by religion.pdf

Qudrat, S. H., Qudrat, S. M., Khalid, A., & Ayub, A. (2021). Analysis of child marriages in Pakistan in the year 2019-2020. *Children Rights Journal of Rawalpindi Medical University*, 1(1), 14–18.

Rizvi, A., & Qureshi, H. I. A. (2022). Causes and consequences of child marriages: A Pakistani perspective. *AL-QAWĀRĪR*, *3*(2), 43–54. https://www.researchgate.net/profile/H-Imran-Qureshi/publication/369763169_Causes_and_Consequences_of_Child_Marriages_A_Pakistani_Perspective/

Shabbar, S. Z., & Manzoor, A. (2022). An analytical study on early marriage in Pakistan: Impact on education and health. *Pakistan Journal of Educational Research*, *5*(2), Article 515. https://doi.org/10.52337/pjer.v5i2.515

Shahab-ud-Din, M. (2020, January 12). Alarming situation of child marriages in Pakistan [Online]. *Daily Times.* https://dailytimes.com.pk/537875/alarming-situation-of-child-marriages-in-pakistan/

Suleman, N. (2020). *A case of several jeopardies: A study on the intersecting inequalities in the everyday lives of poor minority Christian women and girls in Pakistan*. Coalition for Religious Equality and Inclusive Development. https://opendocs.ids.ac.uk/articles/report/A_Case_of_Several_Jeopardies_A_Study_on_the_Intersecting_Inequalities_in_the_Everyday_Lives_of_Poor_Minority_Christian_Women_and_Girls_in_Pakistan/26429755/1/files/48078691.pdf

Supriyanto, E., & Eleanora, F. N. (2025). Prevention of child marriage through efforts to improve public awareness. *Formosa Journal of Sustainable Research, 4*(3), 561–568. https://doi.org/10.55927/fjsr.v4i3.145

Ullah, R. (2019). *A qualitative study of identification of the influencers and drivers of child marriage in Khyber Pakhtunkhwa (KP), Pakistan*. Blue Veins. https://www.girlsnotbrides.org/documents/923/A-Qualitative-Study-of-Identification-of-the-Influencers-and-Drivers-of-Child-Marriage.pdf

UNICEF South Asia. (2017). *Child marriage: Child marriage is a violation of human rights*. https://www.unicef.org/rosa/what-we-do/child-protection/child-marriage

UNICEF. (2025). *Child protection: Protecting all children in Pakistan from all forms of violence, neglect and exploitation*. https://www.unicef.org/pakistan/child-protection-0

United Nations Committee on the Rights of the Child. (2004). CRC general comment no. 4: Adolescent health and development in the context of the Convention on the Rights of the Child (para. 16). https://www.ohchr.org/sites/default/files/Documents/Issues/Women/WRGS/Health/GC4.pdf

United Nations Convention on the Rights of the Child, November 20, 1989, https://www.ohchr.org/en/professionalinterest/pages/crc.aspx

United Nations Population Fund. (2025). *Child marriage.* https://pakistan.unfpa.org/en/topics/child-marriage-4

United Nations Universal Declaration of Human Rights, December 10, 1948, https://www.un.org/en/about-us/universal-declaration-of-human-rights

United Nations Department of Economic and Social Affairs. (2016). *Sustainable development: The 17 goals*. https://sdgs.un.org/goals

United Nations Women. (2024) *Child marriage robs girls of education, freedom and opportunities.* https://www.unwomen.org/en/news-stories/feature-story/2024/11/breaking-tradition-to-end-child-marriage-in-pakistans-remote-village

Warner, A. (2015). *How empowering girls can help end child marriage*. https://www.girlsnotbrides.org/empowering-girls-can-help-end-child-marriage

Wodon, Q., Savadogo, A., & Kes, A. (2017). *Economic impacts of child marriage: Work. earnings, and household welfare* [Brief]. The World Bank and International Center for Research on Women. http://documents.worldbank.org/curated/en/312761498512784050/pdf/116835-BRI-P151842-PUBLIC-EICM-Brief-WorkEarningsHousehold-PrintReady.pdf

Zulfiqar, H., & Malik, R. A. (2023). A contextual analysis of the feminization of poverty in urban slums of Pakistan. *Journal of International Women's Studies*, *25*(7), Article 13. https://vc.bridgew.edu/jiws/vol25/iss7/13