THE IMPACT OF CHILD MARRIAGE ON THE MENTAL HEALTH AND WELL-BEING OF GIRLS LIVING IN RURAL COMMUNITIES OF THE REPUBLIC OF SOUTH AFRICA

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Abstract

This study investigates the impact of child marriage on the mental health and well-being of girls living in rural communities of the Republic of South Africa. The research adopted a qualitative approach with an exploratory research design, utilizing a comprehensive desktop study to gather relevant data from existing literature, reports, and secondary sources. The study aims to examine how early marriage affects the psychological, emotional, and social aspects of young girls' lives, focusing on the mental health challenges they face, such as depression, anxiety, trauma, and loss of autonomy. Through thematic data analysis, the study identifies key themes, including the disruption of education, social isolation, stigmatization, physical health risks, and the negative impact of cultural and societal norms surrounding marriage. The findings highlight the multifaceted nature of child marriage, revealing how it exacerbates mental health issues and limits opportunities for personal growth, social integration, and empowerment. Additionally, the study emphasizes the lack of access to mental health support services in rural communities, making it harder for these girls to overcome the psychological effects of early marriage. By shedding light on these issues, the study calls for a greater focus on policy interventions, community awareness, and mental health services to address the challenges faced by married girls in rural South Africa.

Keywords: *Child Marriage, Mental Health, Girls, Rural communities*

Introduction

Child marriage is a widespread and complex issue affecting millions of girls worldwide. Globally, it is estimated that about 21% of girls are married before reaching 18 years, which allows for significant inequalities in health and well-being (Mkhize & Van der Merwe, 2021). This practice is deeply rooted in cultural norms, economic insecurities, and gender inequalities, which vary from region to region. Huber & Buvinić (2019) states that many rural communities, the occurrence of child marriage is significantly elevated since families frequently perceive it to ensure financials security or protection for their daughters. Such arrangements commonly disregard the psychological and emotional development of girls, resulting in significant long-term consequences (Kritzinger & Madlingozi, 2016; Wilson & Ndlovu, 2021). The impact is especially pronounced in regions like South Asia and sub-Saharan Africa, where cultural customs frequently value marriage more than education for girls (Maphalala & Ndlovu, 2020). As a result, this continues the cycle of poverty and weakens the social structure of communities. In the Republic of South Africa, child marriage within rural communities poses multifaceted issues that intersects with infectious diseases and restricted availability of mental health services. Wilson & Ndlovu (2021) indicates that the impact on mental well-being is significant, resulting in higher occurrences of depression, anxiety, and post-traumatic stress disorder among these young brides. The United Nations Sustainable Development Goals (SDGs) aim to eliminate child marriage by 2030. Despite progress, child marriage remains a significant challenge worldwide.

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Child marriage is a prevalent problem in Africa, impacting around 125 million girls and women. The practice is most prevalent in West and Central Africa, where 38% of girls are wed before the age of 18 (Kritzinger & Madlingozi, 2016; Smit & Nkomo, 2021). In Africa, child marriage is frequently associated with cultural and social standards that emphasize family reputation and financial security above girl's education and independence. Girls in countries like Chad, Niger, and Central African Republic showcase particularly alarming statistics, where over half of young girls are married off during their adolescence. According to Maphalala & Ndlovu (2020), the African Union has identified child marriage as a significant barrier to reaching the continent development objectives. Initiatives to tackle child marriage are currently in progress, such as the African Union's Campaign to end child marriage. Moreover, countries such as Ethiopia and Malawi are showing promising results by implementing legislation against child marriage, demonstrating that progress is possible (Wilson & Ndlovu, 2021). Education and community involvement are critical in these efforts, as many girls still face immense pressure from family and cultural norms.

The consequences of child marriage in Africa are far-reaching and devastating. Girls who marry at a young age are at a higher risk of facing domestic violence, sexual abuse, and issues related to reproductive health. In Africa, 41% of girls aged 15-19 who were married or in a relationship indicated that they faced physical or emotional abuse (Wilson & Ndlovu, 2021). Child marriage hampers the pursuit of gender equality and the empowerment of women in Africa. Child marriage sustains a cycle of poverty, restricts educational and economic prospects, and increases the risk of early pregnancy and childbirth complications (Nkabinde & Mahlangu, 2020). Understanding and addressing the mental health concerns linked to child marriage is vital for supporting these young girls and ensuring their overall well-being.

Child marriage continues to be a devastating concern in rural communities of South Africa, where numerous young girls are compelled to marry at an early age. Nkabinde & Mahlangu, (2020) indicated that South Africa ranks amongst the highest globally for child marriage, with about 30% of girls wed before they turn 18. This trend is especially prevalent in rural communities where poverty, insufficient education, and cultural traditions help sustain child marriage (Reddy & Naidoo, 2019; Smit & Nkomo, 2021). One community in South Africa that is greatly impacted by child marriage is Eastern Cape Province. In this area, girls as young as 12 are frequently married to older men in return for dowry or to lessen financial strains on their families (Sanders & Patel, 2017). The high occurrence of child marriage in the Eastern Cape negatively impacts the mental health and welfare of young girls, compelling them to leave school, encounter early pregnancies and suffer physical and emotional abuse within their marriages (Wabiri & Makgoba, 2017).

According to Sanders & Patel (2017) one of the areas affected by child marriage in South Africa is the Kwazulu-Natal province. In this area, longstanding customs and cultural values significantly contribute to the continuation of child marriage, as many families think that marrying their daughters early will enhance their social standing and provide financial stability (Nkosi & Gama, 2020). Nevertheless, the truth is that child marriage results in a cycle of poverty, lack of education, and adverse health results for girls, affecting their mental overall well-being over time. To tackle the underlying issues of child marriage in South Africa, it is essential to empower girls via education, ensure access to reproductive health service, and confront detrimental cultural norms and traditions (Wabiri & Makgoba, 2017).

Literature Review
Understanding of child marriage

Mokoena & Okafor (2017) indicates that girls in rural communities of the Republic of South Africa are particularly affected by child marriage, which is defined as a formal or informal union in which one or both parties are under the age of 18. According to Shisana & Labadarios (2018), marriage is seen as a means of ensuring girls' financial stability typically through dowries or family arrangements. The practice frequently stems from deeply ingrained cultural, economic, and societal beliefs. In rural regions with higher poverty rates, fewer educational options, and enduring gender norms, child marriage is occasionally viewed as a means of reducing financial strains or maintaining cultural customs (Mkhwanazi & Nxumalo, 2018). However, by forcing young girls into adulthood too soon, these marriages deprive them of their social agency, childhood, and educational opportunities. These young girls are exposed to the responsibilities of marriage and motherhood without the physical, emotional, or psychological maturity to handle these roles, and the immediate effects are often devastating (Smit & Nkomo, 2021). They are more likely to experience mental health issues such as depression, anxiety, trauma, and post-traumatic stress disorder (PTSD), primarily because of the pressures and isolation that result from early marriage (Maphalala & Ndlovu, 2020).

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According to Mchunu & Ramukumba (2021), psychological and emotional repercussions linked to child marriage, the mental health and general wellbeing of girls involved are frequently seriously jeopardized. Because they are often isolated from their peers and support systems, child brides in rural South Africa are more likely to feel helpless, have low self-esteem, and feel socially isolated. These girls' mental health issues are made worse by the increased likelihood that they will experience emotional and domestic abuse in their marriages (Mkhwanazi & Nxumalo, 2018). While the early onset of motherhood can cause significant physical and psychological strain on young girls who are unprepared for such responsibilities, the lack of access to education and the ensuing limited career opportunities also contribute to a sense of hopelessness (Smit & Nkomo, 2021). Child marriage can have long-term effects on a person's mental health, affecting their capacity to care for their children, contributing to society, and engage in economic activity (Nkosi & Mthembu, 2018). South Africa's legal skips attempt to shield children from child marriage, but cultural beliefs and lax enforcement of the law in rural areas keep this destructive practice alive, putting girls in these communities at higher risk of long-term mental health and social problems (Sihlobo & Sithole, 2017).

The prevalence and drivers of child marriage in rural South Africa.

In rural South Africa, child marriage is still a major problem even after considerable efforts to prevent it through public awareness campaigns and legal frameworks. Research shows that while the national average for child marriage has decreased over time, rates are still higher in rural areas for a variety of socioeconomic and cultural reasons (Mchunu & Ramukumba, 2021). Child marriage is very common in these communities, which is especially concerning because it feeds the cycles of gender inequality and poverty. In South Africa's rural areas, where access to economic, medical, and educational opportunities is often restricted, girls are often married off to older men at a young age sometimes as early as 15 or 16 (Mokoena & Okafor, 2017). Child marriage is more prevalent in rural areas where patriarchal values and traditional customs are deeply ingrained, and where social structures are generally more conservative than in urban areas. In these areas, it is difficult to prevent or effectively address child marriage due to a lack of educational resources, as well as a lack of social services and law enforcement (Maphalala & Ndlovu, 2020).

Poverty is one of the main causes of child marriage in South Africa's rural areas. High unemployment rates, low agricultural productivity, and poor access to essential services are problems for many families in these communities (Shisana & Labadarios, 2018). Marrying off their daughters at an early age can be seen as a tactic for families in these situations to ensure their financial future. In certain situations, dowries or bride prices negotiated during marriage negotiations offer instant access to resources or financial relief, portraying marriage as a workable way to deal with financial difficulties (Mchunu & Ramukumba, 2021). Furthermore, in a society that frequently offers scant social safety nets, some rural families see marriage as a way to ensure their daughters are supported and cared for. These economic incentives, combined with a lack of other viable options for young girls, significantly contribute to the continuation of child marriage in rural areas (Shisana & Labadarios, 2018).

In rural South Africa, cultural and traditional beliefs are also major contributors to the continuation of child marriage. In many of these communities, early marriage is viewed as a means of upholding family honor and conforming to cultural norms, and customary laws and practices have a considerable influence over formal legal systems. Mkhwanazi & Nxumalo (2018) states that these communities' patriarchal structures uphold the notion that a girl's responsibilities are mainly limited to marriage and motherhood, and that an early marriage guarantees a girl's safety and conformity to social norms. The stigma associated with unmarried girls, especially in societies where marriage is highly regarded, puts additional pressure on families to set up early marriages (Smit & Nkomo, 2021). The idea that child marriage is a normal and acceptable aspect of rural life may occasionally be reinforced by the encouragement or even facilitation of child marriages by local leaders or elders (Nkosi & Mthembu, 2018). Furthermore, young girls may not fully comprehend the risks of early marriage, such as the possibility of health complications, emotional distress, and the denial of their rights to education and personal development, in rural South Africa, where access to reproductive health services and sexual education are frequently limited (Sihlobo & Sithole, 2017). Despite laws intended to safeguard children's rights, child marriage continues to occur in rural South Africa due to these cultural norms and poverty.

Legal and policy framework in South Africa

In South Africa, the Children's Act 38 of 2005 is a crucial piece of legislation that attempts to safeguard children's rights and welfare, including preventing harmful practices like child marriage. But even with its robust

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regulations, child marriage is still a major problem in rural areas, with detrimental effects on young girls' mental health and general wellbeing (Kruger & Chikwendu, 2020). Even though the Act acknowledges the significance of a child's right to be protected from harm, child marriage still undermines these rights, especially in rural areas where laws pertaining to this topic are sometimes inconsistently enforced. Children, who are defined as people under the age of 18, have the right to grow up in an environment that supports their physical, mental, and emotional development, according to the Act (Reddy & Naidoo, 2019). However, child marriage interferes with this process by forcing young girls into adult roles too soon, depriving them of the chance to grow up in a healthy environment. Because of the overwhelming responsibilities of marriage and motherhood at such a young age, these girls frequently experience stress, anxiety, and depression, which compromises their mental health (Reddy & Naidoo, 2019).

According to the Children's Act, denying a child their right to an education a right that the Act expressly protects is one of the main mental health issues associated with child marriage in rural South Africa (Kruger & Chikwendu, 2020). Although the Act emphasizes that all children have the right to an education that supports their intellectual and emotional growth, child brides are frequently taken out of school early to perform their marital responsibilities. Their sense of potential and self-worth are also constrained, in addition to their intellectual development, by this denial of education (Moyo, 2017). In rural communities, girls who are married off at a young age frequently feel alone because they are cut off from their friends and support systems. This lack of social interaction can make them feel even more depressed and lonely, especially as they find it difficult to handle the adult responsibilities that have been placed on them (Ruiters, 2016). Furthermore, without education, these young girls cannot develop the skills needed for financial independence, which leads to a lack of empowerment and long-term mental health issues like low self-esteem and hopelessness (Moyo, 2017). Although the Act makes it clear how important it is to support children's development by providing them with access to education, child marriage denies these girls this basic right, which worsens the effect on their mental health.

Additionally, despite the Children's Act's protections against abuse, neglect, and exploitation, child marriage puts girls at greater risk of experiencing both physical and emotional abuse (Reddy & Naidoo, 2019). Child brides suffer an even greater emotional and psychological toll in rural areas, where access to support services like counseling, medical care, and legal aid is frequently restricted. Nkosi & Mthembu (2018) states that child marriages often expose young girls to risks related to their reproductive health, sexual exploitation, and domestic violence, all of which can lead to long-term mental health problems like depression, anxiety, and post-traumatic stress disorder (PTSD). Feelings of trauma and helplessness are made worse by the lack of agency in the marriage as well as social pressure to fit into traditional gender roles. In practice, many girls in rural South Africa lack the support networks they need to leave abusive or harmful marriages, despite the Children's Act's emphasis on the need for intervention in such cases to protect children from harm (Ruiters, 2016). The mental health consequences of these experiences, including feelings of powerlessness and emotional distress, are in direct violation of the child's right to protection from harm, as outlined in the Act. This underscores the need for better enforcement of the Children's Act in rural areas to ensure that girls are not subjected to early marriage and its associated psychological harms (Nkosi & Mthembu, 2018).

Role of Education and Community awareness

In the Republic of South Africa, education and community awareness are essential for tackling the problem of child marriage and its effects on girls' mental health and general wellbeing, especially in rural areas. Young girls can learn the fundamentals of their rights, the repercussions of getting married too young, and the value of waiting until they are emotionally and physically ready for marriage through education (Mkhwanazi & Nxumalo, 2018). A generation that is better aware of their potential, the dangers of child marriage, and the resources for support can be produced by advancing education, particularly for girls. When girls in rural areas receive education, they are better equipped to challenge societal norms that may encourage early marriage, and they are more likely to engage in conversations with their peers, families, and communities about the negative effects child marriage can have on mental health and well-being (Smit & Nkomo, 2021). In rural South Africa, where cultural customs and traditional beliefs can occasionally support child marriage, increasing community awareness is just as important. Local communities frequently have the ability to support or oppose detrimental behaviors, and raising awareness can spur change (Motswaledi & Moagi, 2019). The long-term psychological and emotional effects of child marriage, which include social isolation, low self-esteem, anxiety, and depression, can be the main focus of community education programs. These effects are frequently

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experienced by girls who are forced into early marriages (Bozalek & Ngubane, 2018). Parents who are informed about the advantages of letting girls continue their education and postponing marriage can also create an atmosphere that is more conducive to their success. By leveraging local leaders, health workers, and educators, these programs can help communities understand that empowering girls through education and delaying marriage not only benefits the individual but also improves the community's overall well-being (Bozalek & Ngubane, 2018).

According to Moyo (2017) child marriage has severe and wide-ranging effects on mental health, and systemic change is necessary to address this problem. Teaching communities to identify the symptoms of psychological distress in girls and offering coping mechanisms for trauma becomes crucial in rural areas where access to mental health services may be restricted (Mkhize & van der Merwe, 2021). Peer support groups, neighborhood health services, and counseling are examples of community-based support networks that can act as a buffer against the negative mental health effects of child marriage (Mokoena & Okafor, 2017). By providing strategies for coping with the emotional strain and building resilience, educating the girls and their families about mental health resources can help lessen the negative effects (Motswaledi & Moagi, 2019). Additionally, when communities become aware of the importance of creating safe, supportive environments for girls to voice their concerns, it can lead to a cultural shift that values the emotional and mental health of young girls, empowering them to reclaim their agency and pursue a brighter future (Mkhize & van der Merwe, 2021).

Theoretical framework

The study was informed by ecological systems theory, which highlights the connections between a person's development and the different systems in their surroundings (Bronfenbrenner, 2005; Louw & Du Plessis, 2018). The ecological systems theory, put forth by Urie Bronfenbrenner, emphasizes the various levels of influence micro, meso, exo, and macro systems that mold a person's experience. The girls involved in child marriage are at the core of these systems in this instance, and the dynamics and interactions among these different layers have an impact on their mental health (Banu & Anderson, 2019). At the micro level, the girls' immediate surroundings, including their families, friends, and the tight-knit rural communities they are a part of have a significant impact on how they feel. In many rural South African communities, marriage is viewed as an important cultural milestone, and girls may be pressured into early marriages as part of these traditional norms (Louw & Du Plessis, 2018). The expectation that girls should marry young directly impacts their psychological development, as their micro-level environment does not support their growth and mental health, leaving them vulnerable to stress, anxiety, and trauma.

The detrimental Impacts of child marriage are exacerbated at the meso-system level by the interactions between various systems, such as the family and educational setting (Shisana & Labadarios, 2018). One of the study's key findings, the disruption of education, emphasizes how educational opportunities and school systems are entwined with other social structures (Ruiters & Fahlman, 2018). These girls frequently stop attending school when they get married young, depriving them of the social and cognitive growth that education offers. When a girl is forced into marriage, the educational system, which should ideally be a source of empowerment becomes inaccessible, strengthening her reliance on her spouse and extending the cycle of limited opportunities (Zulu & Chikwenya, 2019). Furthermore, the lack of communication and understanding between these overlapping systems the home, school, and community prevents adequate support networks from being built. Teachers, counselors, and peers are often unaware of the trauma the girls are experiencing, further isolating them and exacerbating their mental health struggles (Davids & Dlamini, 2019).

Community resources, healthcare services, and local government policies are some of the variables that affect the exo-system level. A key finding of this study is that mental health services are frequently inaccessible in South African rural communities. The dearth of counseling resources and mental health specialists makes it challenging for child brides to get the help they need to heal from the trauma they endure (Louw & Du Plessis, 2018). Furthermore, the community's cultural customs and local laws that condone or overlook child marriage foster an atmosphere in which these young girls are not only excluded but also denied the ability to get assistance (Maphalala & Ndlovu, 2020). The problems they have with their psychological health are made worse by the lack of supportive services. The influence of exo-system factors underscores the systemic barriers that prevent the girls from accessing assistance and support that could mitigate the harmful effects of early marriage on their mental health (Ruiters & Fahlman, 2018). Girls' mental health outcomes in rural South Africa are significantly shaped by the macro-system level, which includes larger cultural and societal norms (Shisana & Labadarios, 2018). The cycle of child marriage and the mental health issues that

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accompany it are sustained by the way society views girls and marriage, especially the deeply ingrained gender norms that see girls as subservient and marriable at an early age. Patriarchal values are prevalent in many rural areas, and families, government policies, and community elders all support the idea that girls must marry young to maintain their cultural identity (Zulu & Chikwenya, 2019). The attitudes and actions of people at all levels of the ecological system are shaped by these macro-level cultural norms, which foster an atmosphere where child marriage is accepted and its detrimental effects on mental health are frequently minimized or disregarded. Because these norms continue to exist, girls are trapped in a system that denies them the chance to flourish in a secure, nurturing environment, as well as opportunities for mental health and personal autonomy (Maphalala & Ndlovu, 2020). Therefore, tackling the effects of child marriage necessitates both local solutions and larger social reforms meant to eradicate damaging cultural customs and advance gender equality on a larger scale.

Research Methodology

The study employed a qualitative research approach, which was deemed the most appropriate for exploring the complex and deeply personal experiences of girls affected by child marriage in rural South African communities. The qualitative approach allowed the researcher to delve into the nuanced, subjective aspects of mental health and well-being, recognizing that the emotional and psychological impacts of child marriage can vary significantly across individuals and cultural contexts. By focusing on personal narratives and lived experiences, this approach enabled the study to capture the voices of the affected girls, providing a more in-depth understanding of the consequences of child marriage. This method was particularly suitable for exploring sensitive issues such as mental health and well-being, where traditional quantitative methods might not effectively capture the richness of the experiences or the underlying emotional and psychological effects.

The study adopted an exploratory research design, which is commonly used when the topic is not well-defined or lacks sufficient prior research. In this case, the issue of child marriage in rural South Africa has received limited attention in academic literature, especially concerning its specific impact on the mental health of young girls. The exploratory design allowed for a flexible, open-ended inquiry, enabling the researcher to investigate the subject matter from various angles. It provided the opportunity to explore the various dimensions of mental health, Including anxiety, depression, trauma, and a sense of agency, while also considering how these issues are shaped by cultural and societal norms in rural communities. The design facilitated the discovery of new insights and perspectives, and its open-ended nature was essential for capturing the voices of individuals who might otherwise be overlooked in traditional research.

This study was conducted as a comprehensive desktop study, which involved gathering and analyzing existing literature, reports, and documents relevant to the topic. Sources consulted included academic journal articles, government reports, non-governmental organization (NGO) publications, and policy documents. A variety of sources was necessary to gain a holistic understanding of the issue and to ensure that the findings were grounded in existing knowledge while also allowing for the exploration of gaps in the literature. Thematic data analysis was employed to analyze the collected information, which is particularly effective for qualitative data where patterns, themes, and meanings need to be identified from complex, unstructured data. Thematic analysis was chosen because it offers flexibility and depth in identifying key themes related to the psychological impacts of child marriage. It allowed the researcher to organize and interpret the data around themes such as trauma, social isolation, and resilience, providing a structured yet flexible framework for understanding how these factors affect the mental health and well-being of the girls. The approach also facilitated the identification of recurring patterns across different sources, allowing for the development of a comprehensive, multi-faceted understanding of the issue.

Discussion and Findings
Theme 1: Psychological trauma

The study discovered that child marriage-related psychological trauma in South African rural communities is a complicated, multidimensional problem that is ingrained in the sociocultural and economic fabric of these communities. Smit & Nkomo, 2021) indicates that young girls who are married off are frequently deprived of their childhood, education, and a secure setting in which to develop emotionally. They are exposed to extreme stress and burdensome responsibilities because of this sudden shift from childhood to adult roles, such as those of a wife and occasionally even a mother (Hodes, 2018). In their marriages, these young girls are often subjected to physical abuse, sexual abuse, and

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emotional neglect, which can cause long-lasting psychological damage. These girls frequently suffer from serious mental health conditions like post-traumatic stress disorder (PTSD), severe anxiety, and depression because of the trauma they endure (Mokoena & Okafor, 2017). In addition to frequently being cut off from their peer groups, many of these girls lack the coping skills needed to handle these difficulties, which makes them feel even more alone and hopeless. Being a child bride is stigmatized in many rural areas, which further isolates them and keeps them from confiding in others or seeking support, which exacerbates their suffering (Shisana & Labadarios, 2018).

Wilson & Ndlovu (2021) indicates that child marriage is closely associated with high rates of anxiety, depression, and emotional instability, among other mental health conditions. Their ongoing fear of violence or abuse, coupled with their lack of autonomy and control over their lives, causes chronic stress reactions that show up as a variety of psychological disorders (Maphalala & Ndlovu, 2020). Due to the pressures of carrying out adult responsibilities without the necessary emotional or social preparation, many young girls in child marriages suffer from elevated anxiety levels. These fears frequently turn into depression because the girls feel stuck in a vicious cycle of hopelessness and helplessness (Mkhize & van der Merwe, 2021). The physical and emotional abuse they endure within these unions can lead to PTSD, a condition characterized by flashbacks, nightmares, and heightened emotional responses to triggers related to past trauma. This makes it difficult for these girls to experience any form of psychological relief or healing, and they often find it challenging to re-enter society as functional, mentally healthy individuals (Jones & Maphosa, 2019). As a result, they are left in a constant state of mental distress, which hinders their ability to engage with education, work, or other aspects of life that could improve their well-being.

According to Maphalala & Ndlovu (2020) the lack of adequate mental health resources for these girls in rural South Africa further exacerbates the negative effects of child marriage on their mental health. Wilson & Ndlovu (2021) indicates counseling, therapy, and psychiatric care are essential for meeting the psychological needs of young girls impacted by child marriage, but they are frequently inaccessible in rural areas. For these girls, getting the help they require is challenging because, even in cases where these services are available, they are frequently stigmatized and mental health issues are not widely known. Jones & Maphosa (2019) states that mental health issues are sometimes not acknowledged as such and are instead written off as moral failings or personal shortcomings. These girls are at risk for a lifetime of untreated mental health disorders as a result of society's disdain for mental health concerns. An intergenerational cycle of trauma results from the psychological trauma becoming normalized over time, with many girls thinking that their suffering is a normal part of their situation (Mkhwanazi & Nxumalo, 2018). These women's unresolved mental health issues may influence their worldview and interactions as they age, making it difficult for them to build healthy relationships with their spouses and kids. Because these girls are denied the resources they require to succeed, the long-term effects of this cycle not only impair their personal well-being but also impede the general social and economic advancement of their communities (Huber & Buvinić, 2019).

Theme 2: Social isolation and Stigmatization

Wilson & Ndlovu (2021) indicates, girls who are the victims of child marriage in South African rural communities face major obstacles such as social isolation and stigmatization, which have a negative impact on their general and mental health. Smit & Nkomo, 2021) states that early social ties that are essential to a girl's emotional and psychological development are frequently severed in these communities because of child marriage. To isolate these young girls from the social support networks that normally offer them emotional support, company, and a sense of normalcy, many of them are taken away from school and their peer groups (Chirwa & Nyirenda, 2016). These girls are thrown into adult roles as wives and occasionally mothers, which can cause severe social alienation, rather than engaging in school activities, friendships, and leisure time with other kids their age (Mkhwanazi & Nxumalo, 2018). They have little to no opportunity to socialize with their peers because their daily lives are centered on taking care of their spouses and the house, which makes them feel even more alone and cut off from society (Jones & Maphosa, 2019).

Many child brides in rural South Africa experience stigmatization because of their early marriages, which exacerbates the negative effects of social isolation (Shisana & Labadarios, 2018). In certain societies, child marriage is considered normal, but when young girls start to feel the psychological and emotional effects of their circumstances, they are frequently viewed as breaking social norms. This stigmatization can occur through verbal and physical abuse, exclusion from community events, or even disparaging labeling (Mchunu & Ramukumba, 2021). The girls' families are also stigmatized by child marriage, as others may criticize them for permitting or enabling these kinds of unions. A

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vicious cycle is created by social exclusion and stigma, which further excludes these girls from support systems and social circles, preventing them from getting the help they need (Hodes, 2018). The emotional toll of child marriage can be exacerbated by the lack of acceptance from peers and the community, making it more difficult for these girls to regain their sense of self-worth and belonging (Banu & Anderson, 2019).The psychological difficulties of child brides are also closely linked to the long-term consequences of stigmatization and isolation. Chirwa & Nyirenda (2016) states that the negative opinions that society has of these girls may eventually be internalized by them, resulting in feelings of guilt, shame, and unworthiness. Depression, anxiety, and low self-esteem can all be exacerbated by this, and these conditions frequently last into adulthood (Kruger & Chikwendu, 2020). Being stigmatized as a child bride can also have a negative psychological impact on adults, making it difficult for them to trust people or feel deserving of love and respect. Banu & Anderson (2019) states that these young women may unintentionally transfer the trauma and loneliness to their offspring as they become mothers and continue these harmful patterns within their own families. In this sense, social exclusion and stigmatization affect not just the child bride but also the dynamics of the larger community, which hinders the social and emotional development of the following generation (Kruger & Chikwendu, 2020). As a result, the stigma attached to child marriage in rural South Africa hinders the normal growth of both individuals and communities, necessitating immediate attention and action to end the destructive cycle of social exclusion (Wilson & Ndlovu, 2021).

Theme 3: Education disruption and cognitive development

The study revealed that young married girls frequently must drop out of school to deal with the demands of their new roles as mothers and wives. Their ability to acquire essential knowledge and skills for both their professional and personal development is hindered by this disruption in their education (Banu & Anderson, 2019). Without formal education, these girls are denied the chance to raise their socioeconomic standing, which restricts their options for the future and keeps them trapped in poverty cycles. Not only does the loss of education hinder their intellectual development, but it also severely impairs their capacity to make wise choices in their marriages and other spheres of their lives (Jones & Maphosa, 2019). In rural South Africa, where educational resources and opportunities are already limited, early marriage exacerbates the disparities in education between boys and girls, further marginalizing young girls in these communities (Chirwa & Nyirenda, 2016).

Williams & Patel (2016) states that early marriage causes psychological stress and emotional burdens that have a detrimental impact on the cognitive development of young girls. The period between childhood and adulthood is crucial for cognitive development, during which girls are expected to discover their identities, solve problems, and explore the world. However, these chances for cognitive development and mental stimulation are limited by the immediate demands of marriage, childrearing, and household responsibilities (Huber & Buvinić, 2019). Child marriage frequently places girls in settings that restrict their capacity for critical thinking, artistic endeavors, and intellectual challenges. Davids (2017) indicates that the psychological stress they endure such as anxiety, depression, and trauma further deteriorates their cognitive functioning, making it harder for them to focus, remember information, or participate in educational activities (Hodes, 2018). Lack of formal education and this mental overload cause intellectual growth to be stunted, which persists in adulthood and leaves them unprepared to deal with the complexity of the outside world.

Mchunu & Ramukumba (2021) states that young brides' children frequently experience similar difficulties, the disruption of education and its detrimental effects on cognitive development have an impact on generations to come. The lack of access to good healthcare, education, and employment opportunities for many child brides in rural South Africa limits their capacity to offer these resources to their own offspring (Jones & Maphosa, 2019). Because of this, there is a generational cycle of cognitive underdevelopment and educational disadvantage. Additionally impeding these girls' capacity to make significant contributions to their communities and economies are their lack of education and the cognitive impairment brought on by early marriage. Long-term, the disruption of education brought on by child marriage affects not only the socioeconomic development of rural South Africa but also the personal aspirations of these girls. Davids (2017) states that interventions that prioritize giving girls access to education, fostering cognitive development, and tackling the underlying causes of child marriage in rural communities are desperately needed to end this cycle.

Theme 4: Physical health and psychological consequences

Williams & Patel (2016) indicates that child marriage has serious and varied effects on young girls' physical health in rural South Africa. Early sexual activity, childbirth, and inadequate healthcare put many of these girls at risk for both short-term and long-term health problems. For girls whose bodies are still developing, early marriages

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frequently lead to early pregnancies, which present serious health risks (Koen & Best, 2017). During pregnancy and childbirth, child brides are more likely to suffer from conditions like obstetric fistulas, eclampsia, and pre-eclampsia, which can cause physical disabilities or even death. Due to a lack of knowledge about sexual health, limited access to contraceptives, and an inability to negotiate safe sex in a marriage with an unequal power dynamic, these girls are also more vulnerable to STIs, including HIV (Banu & Anderson, 2019). A lack of appropriate prenatal and postnatal care, coupled with the physical strain of childbearing at such a young age, increases the risk of health complications and compromises the girls' general wellbeing (Huber & Buvinić, 2019).

Child marriage has equally disastrous psychological effects because it forces young girls in rural South Africa into adulthood too soon, frequently without the emotional development necessary to handle the demanding demands of marriage and motherhood (Huber & Buvinić, 2019). A number of mental health conditions, such as anxiety, depression, post-traumatic stress disorder (PTSD), and suicidal thoughts, can arise as a result of the ongoing emotional and physical stress they experience. The trauma of being compelled to live in an environment where they are separated from their peers, lack autonomy, and experience emotional and physical abuse is the root cause of these psychological problems. Many of these girls' report feeling trapped in their marriages, with limited opportunities to seek help or escape due to cultural stigma, fear of reprisal, or lack of resources (Davids, 2017). This ongoing emotional distress can have long-term effects on their mental health, leading to feelings of hopelessness, low self-esteem, and a lack of agency in their lives.

According to Lemessa & Smit (2018), physical and mental health problems interact to producing a vicious cycle in which the physical effects of child marriage worsen mental health conditions and vice versa. For instance, emotional trauma may result from physical complications from early pregnancies or marital violence, and untreated mental health conditions may make it more difficult for these girls to seek or receive medical care (Lemessa & Smit, 2018). Due to a lack of proper medical facilities, especially in rural areas, these young girls frequently endure silent suffering and have little access to the support services required to address their mental and physical health issues (Nkabinde & Mahlangu, 2020). The mental and physical health of these girls affects their productivity, social integration, and overall contribution to societal well-being, the trauma of child marriage and the health issues that accompany it can sometimes last into adulthood, impairing the individual's capacity to function in society, form healthy relationships, and care for their children (Lemessa & Smit, 2018). This issue necessitates a comprehensive approach that includes enhancing access to healthcare, mental health support, and laws to prevent child marriage.

Theme 5: Loss of Autonomy and power

Leclerc-Madlala (2017) indicated that the mental health issues that girls in child marriages in rural South Africa face are largely caused by the loss of their autonomy and power. Child brides in these societies are frequently under the authority of their husbands and other family members, meaning they have little to no control over their own lives (Kritzinger & Madlingozi, 2016). Without the chance to follow their own ambitions or goals, they are expected to take on caregiving and household duties as soon as they get married. They are severely limited in their ability to make decisions regarding their future, health, and education, which frequently leaves them feeling helpless and powerless (Nkabinde & Mahlangu, 2020). This lack of control over their own lives contributes to emotional distress and a diminished sense of self-worth, which are common psychological consequences of early marriage.

In many rural communities, traditional gender norms place girls in subordinate roles, further entrenching their lack of power within the household and community. As young wives and mothers, these girls are expected to comply with the demands of their husbands and in-laws, often without the ability to voice their opinions or challenge abusive behaviors (Nkosi & Gama, 2020). This dynamic results in a situation where girls are often economically dependent on their husbands, unable to escape abusive relationships or seek help because they fear social ostracism or retaliation (Davids, 2017). This loss of autonomy is also reflected in the power dynamics that exist within child marriages, where young girls are frequently subjected to gender-based inequality. Their voices and needs are ignored, and they are systematically denied by the agency to make critical decisions about their own lives, further reinforcing their feelings of disempowerment (Lemessa & Smit, 2018). Nyangoni & Makusha (2018) states that the loss of Independence and authority influences child brides' long-term psychological development in addition to their immediate mental health. The inability to take charge of their own lives can eventually cause anxiety, depression, and a pervasive feeling of inadequacy. It can be challenging for them to break free from the cycle of child marriage when they feel stuck in a marriage with no way out or way to better their circumstances (Sanders & Patel, 2017). Furthermore, young girls who

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feel helpless in these relationships may later reproduce similar dynamics in their own families, demonstrating the intergenerational impact of the power imbalance in these relationships (Nkosi & Gama, 2020). In addition to influencing the girls directly, this generational cycle of disempowerment also feeds larger social injustices by preventing the girls from taking an active role in their communities and economies (Nkabinde & Mahlangu, 2020). Systemic reforms that advance gender equality, legal safeguards for young girls, and support systems that enable these girls to regain control over their and choices are all necessary to address the loss of autonomy and power in child marriages (Nyangoni & Makusha, 2018).

Theme 6: Cultural and Societal norms surrounding marriage

The study found that child marriage is considered a cultural norm, where families see it as a rite of passage or a way to secure their daughters' future. These societal expectations pressure families to marry off their daughters at a young age, sometimes to resolve financial or social challenges, or to maintain perceived social status (Kritzinger & Madlingozi, 2016). Because of these traditional customs and beliefs about the role of women and girls in society, the study found that marriage frequently takes precedence over education or personal development in many rural areas (Van der Merwe & Smit, 2019). The pervasive belief that marriage is the goal for young girls forces them into roles for which they are not prepared, leading to emotional distress, social isolation, and a lifetime of limited opportunities (Nkosi & Gama, 2020).

Leclerc-Madlala (2017) states that girls who oppose or attempt to avoid early marriage are stigmatized and isolated because of the social norms that normalize child marriage. Girls who do not marry young may be seen as violating cultural norms in societies where child marriage is pervasive, which could result in social rejection or mockery (Sanders & Patel, 2017). This cultural pressure not only affects the mental health of those who are forced into early marriages but also perpetuates the cycle of vulnerability for future generations (Van der Merwe & Smit, 2019). Girls who are married early are often subjected to abuse, whether emotional, physical, or sexual, within a marriage where their voices are disregarded and their needs are unmet. Long-term psychological effects like depression, low self-esteem, and a skewed sense of self-worth result from these girls internalizing cultural expectations and learning to accept their circumstances as normal (Yawa & Mthembu, 2018). As child brides learn to accept their diminished status as a part of who they are, the normalization of gender inequality and power disparities within marriage exacerbates the psychological trauma they endure (Huber & Buvinić, 2019).

Wabiri & Makgoba (2017) indicates that marriage customs in rural South Africa have wider ramifications for social advancement and community development in addition to their personal effects. Because these norms still exist, girls are unable to fully pursue their education and personal growth, which limits their ability to contribute to the economy and society. Because these girls grow up to be women without the skills needed to raise their socioeconomic standing, societal attitudes that place little value on their education or empowerment help to keep them trapped in a cycle of poverty (Nkosi & Gama, 2020). Furthermore, these conventions help to perpetuate child marriage across generations, increasing the likelihood that the daughters of child brides will suffer the same fate. Addressing these problems requires a change in cultural and societal attitudes that oppose child marriage and support gender equality, education, and girls' rights to choose their own paths in life (Sanders & Patel, 2017). Breaking these ingrained norms and enhancing the mental health and general well-being of girls in rural South Africa requires educating communities about the negative impacts of child marriage and offering them alternative career paths (Yawa & Mthembu, 2018).

Theme 7: Access to mental health support services

According to Leclerc-Madlala (2017), many young girls in these areas lack the support they need to deal with the psychological trauma they endure because mental health services are either extremely scarce or nonexistent. There are few mental health resources available in rural areas, and there aren't many qualified individuals available to offer psychiatric, counseling, or therapy services (Koen & Best, 2017). Furthermore, because mental illness is sometimes seen as a taboo or a sign of weakness, the cultural stigma associated with mental health issues frequently keeps these girls from getting help (Yawa & Mthembu, 2018). Girls who endure the trauma of early marriage are consequently left to handle their mental health issues on their own, which frequently results in deteriorating anxiety, depression, and PTSD that can persist for years.

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Further complicating the lack of access to mental health services are practical obstacles like cost, accessibility, and distance. Families in many South African rural communities find it challenging to get to the closest medical facilities, let alone specialized mental health services, due to their remote location (Koen & Best, 2017). Even when services are offered in larger towns or urban areas, the expense of transportation and treatment frequently renders them unaffordable for low-income families. The significance of mental health is also generally underappreciated, and many communities overlook the unique needs of girls who have been traumatized by child marriage (Zulu & DeLuca, 2020). This results in a situation where girls are not only deprived of emotional support but also lack the opportunity to receive appropriate interventions that could help mitigate the long-term effects of their trauma (Yawa & Mthembu, 2018).

In rural South Africa, the absence of mental health support services for girls impacted by child marriage has far-reaching effects, many of these girls suffer from untreated mental health disorders, which can severely impair their capacity to function in daily life, attend school, or sustain relationships; the psychological scars from early marriage, exacerbated by the lack of support, frequently result in long-term emotional and cognitive challenges (Zulu & DeLuca, 2020). The implementation of community-based interventions that are accessible and culturally sensitive, the expansion of the pool of qualified mental health professionals, and increased awareness of the value of mental health care are all critical steps in closing this gap (Sanders & Patel, 2017). An essential first step in enhancing these girls' general wellbeing and assisting them in escaping the traumatizing cycle that child marriage feeds would be to offer them comprehensive mental health support (Nkosi & Gama, 2020).

Discussion

Child marriage has a significant and complex effect on the mental health and general wellbeing of girls in South African rural communities. The prevalence of psychological trauma and mental health disorders among young married girls is one of the study's most alarming findings. Girls who marry young are frequently exposed to violent relationships, domestic abuse, and severe emotional distress. A variety of mental health conditions, such as depression, anxiety, PTSD, and suicidal thoughts, can result from these experiences. The girls' sense of safety and self-worth are undermined by the trauma of forced marriage, which is frequently exacerbated by early sexual experiences and a lack of emotional support. The psychological scars from these experiences are often carried into adulthood by these girls, resulting in a recurring cycle of untreated mental health issues. In rural South Africa, child brides frequently experience social exclusion and stigmatization in addition to psychological trauma. As a result of their early marriages, these girls frequently experience rejection from their communities and peers. Their childhood surroundings are frequently taken away from them, their friends and family are cut off, and they are assigned to strange roles in their husband's family. In addition to making them more susceptible to mental health problems, this social isolation exacerbates feelings of loneliness. Their frequent marginalization in their communities feeds into feelings of shame and worthlessness. The stigma attached to being a child bride further exacerbates their emotional distress and social exclusion, making it more difficult for them to seek help or reintegrate into social networks.

The disruption of education and cognitive development is one of the study's other important findings. A girl's schooling is frequently interrupted by child marriage, which has long-term effects on her intellectual and emotional development. Early marriage increases a girl's likelihood of dropping out of school, which limits her access to chances for both career and personal growth. These girls are more likely to experience limited autonomy and financial dependence if they do not receive an education, which can worsen their mental health. The marriage of these girls before they reach a stage of maturity that encourages healthy intellectual engagement stunts their cognitive development, which is essential for developing resilience and coping mechanisms. The lack of educational opportunities also limits their social and economic mobility, leaving them trapped in cycles of poverty and psychological distress.

Young brides' mental health issues are also significantly influenced by the physical health risks connected to child marriage. Early pregnancy is associated with major health issues like maternal mortality, obstetric fistulas, and other chronic illnesses. It is frequently the result of child marriage. The girls' physical health issues exacerbate their psychological distress because they believe their bodies are failing them. Furthermore, the physical toll that early childbirth takes on a girl's body can result in depression and feelings of powerlessness. In addition to the lack of proper healthcare, young brides' already precarious mental health is made worse by the emotional strain of knowing they are at

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risk. In rural South Africa, child marriage is deeply ingrained in cultural and societal norms that frequently perpetuate gender inequality. Many communities see marriage as a rite of passage for girls, reinforcing patriarchal systems that place girls as commodities rather than individuals with their own rights. This loss of autonomy and power is a major factor in the mental health issues that young brides face, as girls who marry young frequently lose their voice in decisions that impact their lives, such as those pertaining to their reproductive health, careers, and personal goals. This systemic disenfranchisement contributes to feelings of powerlessness and mental anguish. Furthermore, the lack of access to mental health support services in rural areas compounds these issues. With limited availability of mental health professionals, counseling, or community support systems, these girls are left to navigate their psychological trauma alone. The scarcity of mental health resources further deepens the mental health crisis for child brides, leaving them vulnerable to continued suffering without avenues for recovery or support.

Conclusion

In conclusion, this study highlights the deeply troubling impact of child marriage on the mental health and well-being of girls living in rural communities of South Africa. The psychological trauma and mental health disorders experienced by these young girls, including depression, anxiety, and PTSD, are critical concerns that demand urgent attention. Early marriage exposes these girls to physical, emotional, and sexual abuse, significantly affecting their mental health and overall well-being. The lack of a safe and supportive environment further compounds their emotional distress, leaving many without the tools to cope with the challenges they face. Consequently, the mental health consequences of child marriage in these communities are severe, with long-lasting effects on the girls' ability to lead fulfilling, healthy lives. Furthermore, the social exclusion and stigmatization that child brides face are major factors in the decline of their mental health: The removal from their communities and schools causes these girls to feel extremely alone and marginalized, and the stigma associated with child marriage, especially in rural areas, further isolates them and makes it difficult for them to get the help they need.

The disruption of education and cognitive development that comes with early marriage also prevents these girls from growing intellectually and emotionally, which limits their future opportunities and reinforces negative mental health outcomes, like low self-esteem and hopelessness. These girls' loss of autonomy and power is exacerbated by the serious physical and psychological effects of child marriage, according to the study's findings. These girls are denied autonomy over their own lives and forced into marriages at an early age, which exacerbates their emotional and mental suffering. This condition has its roots in cultural and societal norms that restrict girls' autonomy by enforcing gendered expectations and viewing them as inferior. In addition, the absence of mental health support services in rural areas hinders these girls from getting the help and support they sorely require. Addressing this issue requires not only a shift in cultural attitudes toward marriage but also a significant investment in mental health resources and services in rural communities to provide these vulnerable girls with the support they need to heal and thrive.

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