



Early Marriage in Adolescence has been Linked to an Increased Risk of Hypertension and Hyperglycaemia in Adulthood, as Evidenced by Research Conducted in India

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Introduction

Adolescence, spanning from ages 10 to 19, constitutes a critical phase for both physical and psychological development, forming the bedrock for overall well-being. This transitional period encompasses a multitude of changes, encompassing physical, social, emotional, cognitive, and sexual realms. Environmental stressors during this sensitive timeframe can have enduring repercussions, potentially leading to health complications in later years [1]. However, our understanding of the varying risks of adverse health outcomes due to exposure to such stressors at different stages of puberty remains limited.

Puberty can be delineated into early (10-14 years), mid (15-17 years), and late (18-19 years) stages, each characterized by distinctive physiological and psychological milestones. Each stage presents a unique array of experiences shaping emotional and social development trajectories. Marriage occurring during early and mid-adolescence (i.e., below 18 years) is categorized as child marriage [2]. Child brides, particularly, face heightened vulnerability to familial and marital discord, enduring instances of physical, emotional, and sexual abuse. Such experiences are often compounded by emotional distress and depression, thrusting these young girls into premature adult roles like sexual activity and childbirth [3].

Globally, an estimated 650 million women and girls have been married as children, with approximately 40% of girls in developing nations wed before reaching adulthood (18 years), and 12% of these marriages occurring in early adolescence (below 15 years) [4,5]. Child brides grapple with a multitude of socio-economic disparities and various forms of physical and psychological abuse, directly impacting their health in later years. However, beyond reproductive ramifications, the long-term health implications for child brides remain largely understudied and inadequately addressed in literature. To date, only a handful of studies have delved into the risk of hypertension and other chronic illnesses among adult women who were formerly child brides. Remarkably, no research has scrutinized the disparity in risk of such consequences among adult women based on their marriage age relative to puberty stage [6].

Discussion

This study aimed to assess how exposure to stressors during different stages of adolescence, particularly early marriage, influenced the risk of developing hypertension or hyperglycemia in women later in life. Our findings revealed a significant association between marriage during early adolescence (10-14 years) and mid-adolescence (15-17 years) and a heightened risk of hypertension and hyperglycemia compared to marriage during late adolescence (18-19 years) and young adulthood (20-24 years) [7,8]. Moreover, our results indicated a dose-response relationship, suggesting that the earlier a girl gets married, the greater her risk of developing high blood pressure and elevated blood sugar levels in later years. Hypertension and hyperglycemia are recognized as major risk factors for cardiovascular disease, representing leading

causes of premature mortality globally.

Potential mediators contributing to these associations may include age disparities between spouses, intimate partner violence, and constrained decision-making autonomy among child brides regarding healthcare and fertility management. Child marriage has been linked to elevated fertility rates, recurrent pregnancies, and a higher incidence of unwanted pregnancies. Girls wed as children often possess limited control over reproductive choices, with marriage to older partners associated with reduced utilization of contraceptive measures among women [9].

Conclusion

The findings from this study underscore the potential benefits of delaying marriage during adolescence in safeguarding women's long-term health. Despite these advantages, entrenched cultural norms have perpetuated the prevalence of child marriage in recent years. To address this pressing issue, we advocate for policy interventions aimed at prohibiting child marriage and ensuring access to essential medical services for child brides. By implementing such measures, we can mitigate the disproportionately elevated risk of chronic illnesses in adulthood faced by this vulnerable population.

Acknowledgement

None

Conflict of Interest

None

References

1. World Health Organization. Adolescent Health. 2021.
2. Eiland L, Romeo RD (2013) Stress and the Developing Adolescent Brain. *Neuroscience* 249: 162-171.
3. Fagundes CP, Way B (2014) Early-Life Stress and Adult Inflammation. *Curr Dir Psychol Sci* 23: 277-283.
4. Miller GE, Chen E, Parker KJ (2011) Psychological Stress in Childhood and Susceptibility to the Chronic Diseases of Aging: Moving toward a Model of Behavioral and Biological Mechanisms. *Psychol Bull* 137: 959-997.

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Received: 30-Jan-2024, Manuscript No. tpctj-24-127514; **Editor assigned:** 02-Feb-2024, PreQC No. tpctj-24-127514(PQ); **Reviewed:** 16-Feb-2024, QC No. tpctj-24-127514; **Revised:** 23-Feb-2024, Manuscript No. tpctj-24-127514(R); **Published:** 29-Feb-2024, DOI: 10.4172/tpctj.1000232

Citation: Ahasan R (2024) Early Marriage in Adolescence has been Linked to an Increased Risk of Hypertension and Hyperglycaemia in Adulthood, as Evidenced by Research Conducted in India. *Psych Clin Ther J* 6: 232.

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5. World Health Organization. Orientation Programme on Adolescent Health for Health Care Providers. 2006. Available online: <https://apps.who.int/iris/handle/10665/42868> (accessed on 19 May 2022).
 6. United Nations Population Fund. Child Marriage. 2021. Available online: <https://www.unfpa.org/child-marriage#readmore-expand> (accessed on 20 May 2022)
 7. Abera M, Nega A, Tefera Y, Gelagay AA (2020) Early Marriage and Women's Empowerment: The Case of Child-Brides in Amhara National Regional State, Ethiopia. *BMC Int Health Hum Rights* 20: 30.
 8. Le Strat Y, Dubertret C, Le Foll B (2011) Child Marriage in the United States and Its Association with Mental Health in Women. *Pediatrics* 128: 524-530.
 9. John NA, Edmeades J, Murithi L (2019) Child Marriage and Psychological Well-Being in Niger and Ethiopia. *BMC Public Health* 19: 1029.