Characteristics of Adolescents Requiring Forensic Assessment Regarding Early Marriage: A Descriptive Study on Clinical Diagnosis and Physical Aggression

Mahmut Almbaidheen¹ , Bahadır Turan¹

¹Agri State Hospital, Department of Child and Adolescent Psychiatry, Agri, Turkey

Mahmut ALMBAIDHEEN Bahadir TURAN

Correspondence: Bahadır Turan Karadeniz Technical University, Faculty of Medicine Department of Child and Adolescent Psychiatry Universite Mah, Hastane Cad. 61000 Trabzon, Turkey

Phone: -

E-mail: bhdrturan@gmail.com

Received: 04 April 2022 Accepted: 06 July 2022

ABSTRACT

Purpose: The aim of this study is to retrospectively evaluate the clinical, sociodemographic, and physical abuse-related factors of adolescents who are referred by the court to child and adolescent psychiatry clinics for early marriage.

Methods: A total of 115 adolescent girls aged over 15 years were included in the study. Sociodemographic information was obtained with the information forms prepared by the interviewer. Participants were also subjected to psychometric evaluation by psychologists and social review by social workers.

Results: Of these children with a mean education year of 5.41±1.7, 28.7% had a psychiatric diagnosis. The most frequently diagnosed psychiatric disorder was adjustment disorder (12.2%). There was a significant relationship between the duration of the marriage and the age difference between them and having a psychiatric diagnosis. Moreover, there is a significant difference between the age of the spouse and the age difference and physical abuse.

Conclusion: To have comprehensive knowledge of the characteristics of adolescents who are married early can provide insight into the development of systems and policies such as avoiding early marriages protect against various psychosocial stressors that support the development of education, knowledge, and skills of these adolescents.

Keywords: Forensic Assessment, Child and Adolescent Mental Health, Early Marriages

Erken evliliğe ilişkin adli değerlendirme gerektiren ergenlerin özellikleri: Klinik tanı ve fiziksel şiddet üzerine tanımlayıcı bir çalışma

ÖZET

Amaç: Bu çalışmanın amacı erken evlendirilmeleri için çocuk ve ergen psikiyatri kliniklerine mahkeme tarafından yönlendirilen ergenlerin klinik, sosyodemografik ve fiziksel istismar ile ilişikli etmenlerini geriye dönük olarak değerlendirmektir.

Yöntem: Çalışmaya 15 yaş üstü toplam 115 ergen kız çocuğu dahil edilmiştir. Sosyodemografik bilgiler görüşmeci tarafından hazırlanan bilgi formları ile elde edilmiştir. Katılımcılar ayrıca psikologlar tarafından psikometrik değerlendirmeye ve sosyal hizmet uzmanları tarafından sosyal incelemeye tabi tutulmuştur.

Bulgular: Ortalama eğitim yılı 5,41±1,7 olan bu çocukların %28,7'si psikiyatrik tanı almıştır. En sık tanı konulan psikiyatrik bozukluk uyum bozukluğudur (%12,2). Evlilik süreleri ve aralarındaki yaş farkı ile psikiyatrik tanı alma arasında anlamlı bir ilişki vardı. Ayrıca eşin yaşı ve yaş farkı ve fiziksel istismar arasında anlamlı bir fark saptanmıştır.

Sonuç: Erken yaşta evlenen ergenlerin özellikleri hakkında kapsamlı bilgi sahibi olmak, bu ergenlerin eğitim, bilgi ve becerilerinin gelişimini destekleyen, çeşitli psikososyal stres faktörlerine karşı koruma sağlayan erken evliliklerden kaçınma gibi sistem ve politikaların geliştirilmesine ilişkin içgörü sağlayabilir.

Anahtar Kelimeler: Adli Değerlendirme, Çocuk ve Ergen Ruh Sağlığı, Erken Evlilik

by individuals under the age of 18 who have not yet completed their mental and physical development. Although this definition covers both genders, it is mostly girls who want or are forced to marry early in the world (1). Although early marriages are observed in every region of the world, it is much more common in underdeveloped or developing countries such as Turkey. Considering the rates of marriage under the age of 18 around the world, early marriages are higher in South-East and Mid-West Africa and South Asian countries, and almost one in two women gets married before the age of 18, while this rate is less than 2% in developed countries (2).

According to UNICEF 2020 report, 15% of females were married by the age of 18 and 2% were married by the age of 15 in our country (3). This rate was not updated in 2021, it was only stated that this rate could be higher for refugees living in the country (4). Although there are legal regulations on early marriage in many countries, the preventive level of these legal regulations remains low due to basic reasons such as poverty, the need to strengthen social ties and beliefs. In favor of these regulations, the rates have seemed to be decreased all over the world, however, a significant proportion of girls are still being married off at a young age. Still, approximately 650 million girls and women alive today were married before their 18th birthday (2).

Although there are restrictions on the age of marriage in the Turkish legal system, it is possible to say that the definition of "early marriage" changes according to the law. The Child Protection Act defines a child as "a person who has not completed the age of 18. Accordingly, those under 18 should be considered as "children" and marriages made before this age as "early marriages" (5). Accordingly, those under 18 should be considered as "children" and marriages made before this age as "early marriages". According to the Turkish Civil Code, the age of marriage has been determined as 17 for men and women, and 16 by the judge's decision in extraordinary cases (6). When it is determined that girls under the age of fifteen are married, the person to whom they were married is tried and punished for the crime of "sexual abuse of the child", and the parents of these individuals consider as accomplices for this crime (7). In the Turkish legal system, men and women who are 17 years of age but not yet 18 years old can marry only with the permission of their parents. There is also a separate situation for people over the age of 16. From the letter of the law, it is understood that the age range that is 16 years old but not 17 years old is determined as the

"extraordinary marriage age". In a state of emergency or provided that there is a very important reason, a 16-year-old man and woman can marry with the permission of the judge (7). The existence of an extraordinary situation or a very important reason will be appreciated by the judge who made the decision on the permission to marry. According to the law, minors who have not yet reached the age of 15 cannot get married in any way. The law also prohibits those who do not have discrimination power from getting married.

The marriage of girls before completing their biopsychosocial development brings along many problems. Early marriage interrupts girls' childhood and it impedes fundamental rights such as freedom of expression, education, entertainment, play, and protection from sexual abuse (8, 9). These children are given responsibilities such as family, home, and childcare at an early age. In addition, they are separated from their peers and deprived of education. As a result, girls who were married at a young age feel excluded, isolated, and unhappy. All these lay the groundwork for serious mental health problems. Early marriages have been reported to cause more marital problems and divorces. Early marriage often means early pregnancy and motherhood. All pregnant adolescents are considered as a medically risky group which increases girls' risk of adverse health outcomes (10, 11).

There are many studies on this subject in the literature, and the interest in this field continues in our country as well with a few studies. In studies conducted in our country, there are determinations that this group is a disadvantaged group and is at risk in terms of psychopathology (12-17). In this paper with the largest sample in the country to support the existing data, we aimed to retrospectively examine the sociodemographic characteristics, psychiatric evaluations, and physical-abuse related factors of girls who married younger than 17 years and referred by the court to our outpatient clinic for criminal and forensic evaluation.

MATERIALS AND METHODS

A total of 115 adolescent girls aged over 15 years were included in the study. Sociodemographic information was obtained with the information forms prepared by the interviewer. Participants were also subjected to psychometric evaluation by psychologists and social review by social workers.

The study sample consisted of 115 cases under the age of 17 who were referred to Ağrı State Hospital Child and Adolescent psychiatry outpatient clinic for psychiatric assessment by the court for marriage permission between 2018-2020. Ethical approval was obtained from the Ataturk University Clinical Research Ethical Committee (B.30.2.ATA.0.01.00/227). In addition to the sociodemographic data of the cases, for the psychopathological screening of the cases, KSADS (The Kiddie Schedule for Affective Disorders and Schizophrenia) and clinical interviews based on DSM-5 were applied to all cases to prepare forensic reports. In order to exclude intellectual disability, the Porteus Maze test and Kent EGY intelligence test were applied to all cases (18, 19). The individuals who were determined with psychiatric disorders were started on treatment and were under follow-up, and some of them are still being followed.

The data were analyzed using the Statistical Program for Social Sciences-SPSS for Windows, 25.0). Descriptive statistics were given as mean, standard deviation, number, and percentage. Mann-Whitney U test was applied for continuous variables in the comparison between groups. The level of significance was accepted as p<0.05 for all analyzes.

RESULTS

Table 1 shows the clinical and sociodemographic characteristics of the adolescents. Accordingly, the most common "Way of appearance of the marriage" is to make the marriage official (%69.5). 54.8% of these people were pregnant at the time of admission, 36.5% of them had experienced physical abuse at least once, and 71.3% of them did not have any psychiatric disorder.

Seventy-two point one (72.1%) of their mothers were illiterate, 65.3% of their fathers were primary school graduates, and only 2.7% of their spouses were university graduates. The age difference between them and their spouses was 7.96±2.68, and 25.2% of them were related to their spouses. (Table 2)

Table 3 shows the comparison of these people with the variables according to whether they have a psychiatric diagnosis or not. Accordingly, a significant relationship was found between the age difference between their spouses and the duration of the marriage. (p<0.05). The spouses of the physically abused group were older, the age difference was larger, and this difference was found to be significant as well. (p<0.05). (Table 4)

Table 1. Clinical and Sociodemographic Characteristics of Adolescents		
Age (mean +sd), years	16.0±0.08	
Marriage duration (mean+sd), months	6.82±6.27	
The way of appearance of the marriage, (%)		
Applying to court to make the marriage official	80 (69.5)	
Pregnancy follow-up	14 (12.2)	
Reflection of spousal conflict on judicial units	6 (5.2)	
Adolescents denunciate	4 (3.5)	
After suicide attempt	4 (3.5)	
Denunciate by one of the parents	4 (3.5)	
Routine police check	3 (2.6)	
Level of education (mean+sd), years	5.41±1.7	
Pregnancy and birth history, (%)		
Pregnant	63 (54.8)	
Gave birth	7 (6.1)	
None	45 (39.1)	
Sexual education given by parents %, yes	24 (20.9)	
Housewife %, yes	115 (100.0)	
Smoking %, yes	22 (17.6)	
Alcohol use %, yes	7 (2.8)	
Substance use %, yes	0 (0.0)	
Chronic physical illness* %, yes	2 (1.7)	
Exposure to physical abuse by spouse %, yes	42 (36.5)	
Psychiatric Diagnosis		
Anxiety disorder	7 (6.08)	
Depressive disorder	10 (8.69)	
Post-Traumatic Stress Disorder	2 (1.73)	
Adjustment disorder	14 (12.2)	
None	82 (71.3)	
*Epilepsy, Sd: standard deviation		

DISCUSSION

The present study was designed to determine the effect of sociodemographic characteristics, clinical diagnoses, and factors that may be related to these diagnoses and factors associated with physical abuse of 115 adolescent girls who were older than 16 and younger than 17 who were referred for forensic evaluation. The most obvious finding to emerge from the analysis is that gives us an idea about the sociodemographic data of these children and their families, such as their education level and household income level, and that the age difference is significant in both psychiatric diagnoses and physical abuse.

Table 2. Sociodemographic Characteristics of Parents and Spouses		
Mother's Education (%)		
Illiterate	83 (72.1)	
Primary Education	32 (27.9)	
High School	0 (0.0)	
University	0 (0.0)	
Father's Education (%)		
Illiterate	37 (32.2)	
Primary Education	75 (65.3)	
High School	2 (1.7)	
University	1 (0.8)	
Total Household Income of Parents (%)		
Below poorment limit	81 (70.4)	
Above poorment limit	34 (29.6)	
Age (spouse) (mean +sd), years	23.9±2.5	
Age difference with her spouse (mean +sd), years	7.96±2.68	
Spouse Education (%)		
Illiterate	8 (6.9)	
Primary Education	92 (80.0)	
High School	12 (10.4)	
University	3 (2.7)	
Consanguineous marriage %, yes	29 (25.2)	
Post-marital lifestyles (%)		
Nuclear family	44 (38.2)	
Extended family	71 (61.8)	
Residence (%)		
Rural	55 (47.8)	
Urban	60 (52.2)	

Table 3. Comparison of Variables According to Psychiatric Diagnosis			
	psychiatric diagnosis (+) n=33	psychiatric diagnosis (-) n=82	
Age (mean +sd), years	16.04±0.31	16.12±0.73	
Age (spouse) (mean +sd), years	24.7±1.3	23.3±2.7	
Age difference with her spouse (mean +sd), years*	8.56±2.34	5.19±2.51	
Marriage duration (mean+sd), months*	8.02±4.59	6.12±4.09	
Level of education (mean+sd), years	5.44±2.1	5.47±1.3	

^{*}p<0.05, Mann-Whitney U test was applied for continuous variables, Sd: standard deviation

Table 4. Comparison of Variables According to Exposure to Physical Abuse			
	exposure to physical abuse (+) n=42 (36.5%)	exposure to physical abuse (-) n=73 (64.5%)	
Age (mean +sd), years	16.02±0.04	16.0±0.12	
Age (spouse) (mean +sd), years	27.9±2.3	23.1±1.7	
Age difference with her spouse (mean +sd), years*	8.12±3.04	6.93±1.28	
Marriage duration (mean+sd), months*	6.49±2.22	6.81±4.13	
Level of education (mean+sd), <i>years</i>	5.39±3.2	5.41±1.5	

*p<0.05, Mann-Whitney U test was applied for continuous variables, Sd: standard deviation

The literature indicates that sociodemographic factors stand out among the reasons why people get married at an early age (16, 20-22). Especially for girls, poverty, limited educational opportunities, households' livelihood problems, the perception that marriage will provide a kind of "protection" in terms of sexual relations and family honor, social norms, marriage life for girls who marry early, and the belief that it will be easier to adapt to the extended family facilitate early marriage (15, 23, 24). UNICEF states that poverty increases the risk of early marriage 2.5 times in its report on child marriages (1). In our study, it was determined that the incomes of the parents of these children were mostly below the poverty line and that the adolescents mostly had no education at all. Similarly, it was determined that the education level of the parents was low, especially most of the mothers had no education and were illiterate. Based on these data, it was thought that focusing on parents with low socioeconomic status, early identification of adolescents who did not continue their education and planning appropriate education for these cases would contribute to the prevention of early marriages while taking precautions regarding early marriages.

In papers on early marriage, it is seen that the average age difference varies between 4 and 9 years (15, 25). The fact that this rate was 8 years on average in our study is consistent with the literature. It has also been revealed that one out of every three to five marriages is consanguineous, and the rate of consanguineous marriage is 22.8% in the Northeastern Anatolia Region, which covers the province of Ağrı (26, 27). The fact that one out of every four

marriages was consanguineous in our study supports this data.

There are limited number of studies in terms of relationship between early marriages and psychiatric diagnosis in these population. Le Strat et al. (2011) stated that even when the sociodemographic characteristics and parity number of women who were married before the age of 18 were controlled, the rates of being diagnosed with psychiatric disorders and the health system applications in this field were still high (8). It has also been reported in various studies that there is an increased prevalence of psychiatric disorders in adolescents who married before the age of 18 in Turkey. These rates vary between 24.7% and 45.8% (12, 15, 16, 28). The fact that our study is the study with the largest sample size in country so far is a situation that might be taken into account when interpreting these data, as the reason for this difference may be the number of samples. These disorders were mostly noted as adjustment disorder and depressive disorder. Post-traumatic stress disorder was detected in only two cases. It is stated in formal reports that early marriage is traditionally supported in the society, and this type of marriage at a young age is usually realized by social agreement (29). For this reason, marriage at a young age may not be perceived as trauma by some cases. In these cases, rather than sexual abuse, depressive disorder and adjustment disorder are thought to be more developed due to reasons such as taking responsibilities such as family, home and child at an early age, separation from parents and peers, low social support, economic difficulties and conflicts with the mother-in-law, sister-in-law. Our results suggest that it would be controversial to focus only on sexual abuse in early marriages and that all psychosocial problems that are thought to affect mental health should be evaluated together. However, it was thought that these cases and their families were resistant to psychiatric assessment in order not to experience legal problems, and therefore the rate of mental disorders might be higher than that found. Our data support the view that early marriage brings with it an increased risk of mental disorders in children. In addition, even if the psychiatric disorder was not present in these children at the time of current application, this does not change the fact that early marriage poses a risk for the lives of the children in the future. It was thought that these children, who have not yet completed both their physical and mental development, should be monitored in terms of current risks. Likewise, the fact that there is a significant difference between the age difference and the increase in the marriage duration, which obtained from the study, and the psychiatric diagnosis, appears as a data supporting this information.

Physical abuse is any intentional act causing injury or trauma to another person or animal by way of bodily contact. In most cases, children are the victims of physical abuse, but adults can also be victims, as in cases of domestic violence or workplace aggression, 36.5% of the cases stated that they were subjected to physical violence/abuse by the person they were married to. It is seen that the frequency of domestic violence in these cases is consistent to the data in the literature. There are studies in the literature reporting that girls who are married at a young age are more frequently subjected to physical violence by their spouses (30, 31). The prevalence of depressive symptoms was found to be higher in women who experienced domestic violence (32). Moreover, emotional problems, suicide attempts, alcohol and substance abuse, and aggressive behavior towards their children are also cooccurring conditions (33). There was also a significant difference between the age of the person to whom she was married and the age difference between them and physical abuse in the study. In societies where the patriarchal structure is dominant, the fact that families intervene more in the marriage decision and marry their daughters at an early age puts adolescents in a more disadvantageous position in their relations with their spouses and their spouses' families.

There was also a significant difference between the age of the person to whom she was married and the age difference between them and physical abuse in the study. In societies where the patriarchal structure is dominant, the fact that families intervene more in the marriage decision and marry their daughters at an early age puts adolescents in a more disadvantageous position in their relations with their spouses and their spouses' families (34, 35). Adolescents, who have a larger age gap with their spouses, are in a weaker position within the family and are exposed to more violence (35, 36).

The study was conducted with a retrospective chart review method, and it has limitations such as not being able to use the scale, not having a control group, and conducting the psychiatric assessment in the forensic process. Although there is no control group, as far as we know, the study has the largest sample in the country. We assume that it will contribute to the literature by providing data on psychiatric diagnosis and factors related to physical abuse with the current sample as well.

CONCLUSION

Early marriage is a serious social issue that needs to be evaluated in all its aspects. This problem has many psychological, sociological, economic, and legal dimensions. In the study, the socioeconomic and clinical characteristics of these adolescents and their parents were defined, and attention was drawn to the age difference between the spouses, which may be associated with physical abuse and psychiatric diagnosis. Although some of the cases we have been able to identify are only cases that apply to us for forensic assessment, there is a need to establish special networks that support the development of education, knowledge, and skills for these adolescents.

DECLARATIONS

Funding

This research received no specific grant from any funding agency in the public, commercial, or not-for-profit sectors.

Conflicts of Interest/Competing Interests

No conflicting relationship exists for any author.

Ethics Approval

All procedures performed in studies involving human participants were in accordance with the ethical standards of the institutional and/or national research committee and with the 1964 Helsinki declaration and its later amendments or comparable ethical standards. 26.03.2020/B.30. 2.ATA.0.01.00/227.

Availability of Data and Material

Not applicable.

Authors' Contributions

MA: Designed the study, collected the data, performed the analysis. BT: Designed the study, collected the data, wrote the paper.

REFERENCES

- Unicef. Early marriage a harmful traditional practice a statistical exploration: UNICEF; 2005.
- Unicef. Child marriage is a violation of human rights, but is all too common. https://data.unicef.org/topic/child-protection/ child-marriage/#:~:text=Child%20marriage%20is%20a%20 violation,fundamental%20violation%20of%20human%20rights.
- 3. Unicef Turkey Country Office. UNICEF Turkey country office annual report. https://www.unicef.org/reports/country-regional-divisional-annual-reports-2020/Turkey
- Unicef Turkey Country Office. UNICEF Turkey country office annual report. https://www.unicef.org/reports/ country-regional-divisional-annual-reports-2021/Turkey
- 5. Child Protection Act. In: T.C. Resmi Gazete, ed.; 2005.

- 6. Turkish Civil Code. In: T.C. Resmi Gazete, ed. 4721: 2001.
- 7. Turkish Penal Code. In: T.C. Resmi Gazete, ed.; 2004.
- Le Strat Y, Dubertret C and Le Foll B. Child marriage in the United States and its association with mental health in women. Pediatrics. 2011;128:524-30.
- 9. Asadullah MN and Wahhaj Z. Early marriage, social networks and the transmission of norms. Economica. 2019;86:801-31.
- Petroni S, Das M and Sawyer SM. Protection versus rights: age of marriage versus age of sexual consent. The Lancet Child & Adolescent Health. 2019;3:274-80.
- Windiarti S and Besral B. Determinants of Early Marriage In Indonesia:
 A Systematic Review. Proceedings of the International Conference on Applied Science and Health; 2018. p. 287-93.
- Eyüboğlu D and Eyüboğlu M. Küçük yaşta evlendirilmek istenen çocuklarda psikiyatrik bozukluklar ve sosyodemografik özellikler. Klinik Psikiyatri Dergisi. 2018:21:122-9.
- 13. Yüksel-Kaptanoğlu I and Ergöçmen BA. Çocuk gelin olmaya giden yol. Sosyoloji Araştırmaları Dergisi. 2012;15:128-61.
- Güler Ö and Küçüker H. Early Marriages Among Adolesencent Girls in Afyonkarahisar, Turkey. European Journal of General Medicine. 2010;7:365-71.
- 15. Poyraz Fındık O, Gökalp Özcan B, Arman A, et al. Erken evlendirilmeleri için adli rapor talebi ile çocuk psikiyatri polikliniğine yönlendirilen ergenlerin sosyodemografik ve ruhsal özelliklerinin değerlendirilmesi. Turk J Child Adolesc Ment Health. 2019;26.
- Soylu N and Ayaz M. Adli değerlendirme için yönlendirilen küçük yaşta evlendirilmiş kız çocuklarının sosyodemografik özellikleri ve ruhsal değerlendirmesi. Anatolian Journal Of Psychiatry/Anadolu Psikiyatri Dergisi. 2013;14.
- 17. Özşahin A, Zencir M, Gökçe B, et al. Adolescent pregnancy in West Turkey. Cross sectional survey of married adolescents. 2006.
- 18. Porteus SD. The Porteus Maze Test and intelligence. 1950.
- Gynther M and Mayer AD. The prediction of mental deficiency by means of the Kent-EGY. American Journal of Mental Deficiency. 1960.
- 20. Nour NM. Child marriage: a silent health and human rights issue. Reviews in obstetrics and gynecology. 2009;2:51.
- Raj A. When the mother is a child: the impact of child marriage on the health and human rights of girls. Archives of disease in childhood. 2010;95:931-5.
- 22. Saleheen AaS, Afrin S, Kabir S, et al. Sociodemographic factors and early marriage among women in Bangladesh, Ghana and Iraq: An illustration from Multiple Indicator Cluster Survey. Heliyon. 2021:7:e07111.
- Duran S and Tepehan Eraslan S. Socio-demographic correlates of child marriages: a study from Turkey. Community mental health journal. 2019;55:1202-9.
- 24. Ali A, Ibrahim I, Abdelgbar S, et al. Socio-demographic factors affecting child marriage in Sudan. J Women's Health Care. 2014;3:2167-0420.1000163.
- Kasım B, Cem U, Mustafa K, et al. Evaluation of the early age married girls applying to our department. Open Journal of Pediatrics. 2015;5:334.
- Enstitüsü HÜNE. 2013 Türkiye Nüfus ve Sağlık Araştırması. Hacettepe Üniversitesi Nüfus Etütleri Enstitüsü, TC Kalkınma Bakanlığı ve TÜBİTAK, Ankara, Türkiye. 2014;1.
- Aile T. Türkiye Aile Yapısı Araştırması: Tespitler, Öneriler. TC Aile ve Sosyal Politikalar Bakanlığı, İstanbul. 2014.
- Nasiroğlu S and Semerci B. Mental assessment of girls consulting for early marriage and identifying risk factors. Anatolian Journal of Psychiatry/Anadolu Psikiyatri Dergisi. 2017;18.

- 29. Komisyonu TKEFE. Erken yaşta evlilikler hakkında inceleme yapılmasına dair rapor. Ankara, TBMM. 2009.
- 30. Speizer IS and Pearson E. Association between early marriage and intimate partner violence in India: a focus on youth from Bihar and Rajasthan. Journal of interpersonal violence. 2011;26:1963-81.
- 31. Raj A, Saggurti N, Lawrence D, et al. Association between adolescent marriage and marital violence among young adult women in India. International Journal of Gynecology & Obstetrics. 2010;110:35-9.
- 32. Özyurt BC and Deveci A. Manisa'da kırsal bir bölgedeki 15-49 yaş evli kadınlarda depresif belirti yaygınlığı ve aile içi şiddetle ilişkisi. Türk psikiyatri dergisi. 2010;21:1-7.
- 33. García-Moreno C. World Health Organization Multi-country Study on Women's Health and Domestic Violence Against Women: Initial Results on Prevalence, Health Outcomes and Women's Responses: World Health Organization (WHO); 2005.
- 34. Choe MK, Thapa S and Mishra V. Early marriage and early motherhood in Nepal. Journal of biosocial science. 2005;37:143-62.
- 35. Gupta MD. Life course perspectives on women's autonomy and health outcomes. Health Transition Review. 1996:213-31.
- 36. Clark CJ, Silverman JG, Shahrouri M, et al. The role of the extended family in women's risk of intimate partner violence in Jordan. Social science & medicine. 2010;70:144-51.