Introduction
Child marriage is a well-recognized problem to the socio-economic development. India has one of the highest number of child brides in the world. Nationally, two in five women aged 20-24 are already married by age 18 years (NFHS, 2005-06). The objective of this factsheet is to synthesize evidence concerning the prevalence and magnitude of child marriage, and its consequences from the reliable data sources that provide information at district level. This would support decentralized planning, prioritizing policy actions and resource allocations at the district level. The factsheet provides information on 15 key indicators directly or indirectly related to child marriage which has been prioritized to include the above said key issues. The data presented in this publication uses sources including District Level Household Survey (2007-08), Annual Health Survey (2010-11) and Census of India (2011). In few cases, sample may be less while estimating certain indicators for the age group 15-19 years.

About Betul District
Betul is a part of Narmadapuram division with the district headquarters located at Betul. According to Census 2011, Betul has a population of 1,575,362 with a population density of 157 inhabitants per square kilometre. Despite of efforts in the last few decades to stabilize population growth, the district’s population continues to grow at a faster rate (12.9%). However, the growth rate in the district has declined since 2001. Census data shows that the sex ratio has increased from 965 in 2001 to 971 in 2011. The literacy rate for women has increased since 2001; however a noticeable disparity is seen between male and female literacy rates, which is 60.9% for female as compared to 76.7% for male (Census 2011). Around 12.3% of population fall in lowest 20% wealth index as compared to 15.7% in the highest category (AHS 2010-11). In terms of health outcome, the Total Fertility Rate for the district is 3.0 which is above the desired level of 2.1; and the Infant Mortality Rate is 68 per 1000 live births, which is 60 in the state (AHS 2010-11). With regard to HIV prevalence, NACP III lists the district’s priority under category ‘C’ (NACO, 2006).
### Prevalence of Early Marriage

**Marriages below legal age at marriage* among men (AHS 2010-11)**

- **Betul**
  - Total: 6
  - Rural: 7
  - Urban: 1

- **Madhya Pradesh**
  - Total: 19
  - Rural: 26
  - Urban: 1

**Marriages below legal age at marriage* among women in the districts of Madhya Pradesh (AHS 2010-11)**

- **Betul**
  - Total: 3
  - Rural: 3
  - Urban: 2

- **Madhya Pradesh**
  - Total: 13
  - Rural: 17
  - Urban: 4

### Mean age at marriage* among men (AHS 2010-11)

- **Betul**
  - Total: 26
  - Rural: 25
  - Urban: 28

- **Madhya Pradesh**
  - Total: 26
  - Rural: 23
  - Urban: 26

### Mean age at marriage* among women (AHS 2010-11)

- **Betul**
  - Total: 22
  - Rural: 21
  - Urban: 23

- **Madhya Pradesh**
  - Total: 23
  - Rural: 22
  - Urban: 22

* Based on marriages taken place during 2007-2009

**Currently married women age 20-24 who were married before age 18 by household wealth index^ (DLHS 2007-08)**

- **Betul**
  - Poor: 39
  - Non Poor: 65

- **Madhya Pradesh**
  - Poor: 18
  - Non Poor: 41

**Currently married women age 20-24 who were married before age 18 by literacy (DLHS 2007-08)**

- **Betul**
  - Illiterate: 47
  - Literate: 71

- **Madhya Pradesh**
  - Illiterate: 20
  - Literate: 41

**Currently married women age 20-24 who were married before age 18 by caste (DLHS 2007-08)**

- **Betul**
  - SC / ST: 37
  - OBC: 61
  - Other: 53

- **Madhya Pradesh**
  - SC / ST: 17
  - OBC: 23
  - Other: 38

^ Wealth index is a composite measure of household's living standard, which includes household amenities, assets and durables. Poor consists of the bottom two quintiles and non poor consists of top three quintiles.
Causes and Context of Child Marriage

**Percentage of boys age 6-17 years who ever attended school but are dropped out (AHS 2010-11)**

- Total: Betul: 11, Madhya Pradesh: 9
- Rural: Betul: 12, Madhya Pradesh: 10
- Urban: Betul: 6, Madhya Pradesh: 8

**Percentage of girls age 6-17 years who ever attended school but are dropped out (AHS 2010-11)**

- Total: Betul: 9, Madhya Pradesh: 10
- Rural: Betul: 10, Madhya Pradesh: 7
- Urban: Betul: 3, Madhya Pradesh: 7

**Unmarried women age 15-24 years who have knowledge about minimum legal age at marriage for boys and girls (DLHS 2007-08)**

- Boys: Betul: 86, Madhya Pradesh: 87
- Girls: Betul: 85, Madhya Pradesh: 88

**Currently married women age 15-19 years who are already mothers or pregnant at the time of survey (AHS 2010-11)**

- Total: Betul: 58, Madhya Pradesh: 46
- Rural: Betul: 60, Madhya Pradesh: 47
- Urban: Betul: 46, Madhya Pradesh: 43

**Currently married women age 15-24 years by institutional delivery and complications at the time of delivery (DLHS 2007-08)**

- Institutional delivery: Betul: 46, Madhya Pradesh: 54
- Delivery complications: Betul: 38, Madhya Pradesh: 67

**Currently married women age 15-24 years who received different types of ANC (DLHS 2007-08)**

- Three or more ANC visits: Betul: 42, Madhya Pradesh: 36
- At least one TT injection: Betul: 70, Madhya Pradesh: 63
- Consumed IFA for at least 3 months: Betul: 23, Madhya Pradesh: 13

**Current contraceptive use among currently married women age 15-24 years (DLHS 2007-08) and unmet need for family planning practice among currently married women age 15-49 years (AHS 2010-11)**

- Current contraceptive use: Betul: 22, Madhya Pradesh: 21
- Unmet need for family planning: Betul: 19, Madhya Pradesh: 22
- Unmet need for spacing: Betul: 11, Madhya Pradesh: 14
- Unmet need for limiting: Betul: 8, Madhya Pradesh: 9
Key messages

1. Betul is among the districts with moderate prevalence of marriages below legal age. Concentration of early marriage among women is mainly in rural areas, poor households, illiterate, SC/ST and OBC population subgroups.

2. Teenage pregnancy is very high in the district as more than half of the teenage married girls are either pregnant or mothers.

3. Utilisation of essential obstetric services by young women such as ANC and consumption of IFA remains low. Also, more than half of the young women do not go for institutional delivery.

4. Addressing issues such as teenage pregnancy, utilisation of obstetric services and improving institutional delivery could reduce infant deaths in the district.

5. Women education remains poor in the district. Literacy rate of male and female shows a huge disparity in female literacy. Further, school dropout among girl children remains low in rural areas.

About MAMTA

MAMTA Health Institute for Mother and Child, New Delhi, is a national level NGO committed to integrated health and development in context of poverty, gender and rights with a ‘life cycle approach’. Core areas of MAMTA’s work include maternal, child health and nutrition, young people’s sexual and reproductive health and rights, HIV and TB, and non-communicable diseases. Over the years, MAMTA has diversified as an institution for advocacy, research and evidence generation, capacity building and community mobilisation. At present, MAMTA works in 18 states in India and is reaching out as technical support institute beyond borders in South-East Asia region and Africa.

For more detail on MAMTA, visit at www.mamta-himc.org and www.yrshr.org.

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