

**BINDURA UNIVERSITY OF SCIENCE EDUCATION**

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**FACULTY OF SOCIAL SCIENCES AND HUMANITIES**

**DEPARTMENT OF SOCIAL WORK**



**EXPLORING THE EMERGING CHALLENGES OF FEMALE VICTIMS OF CHILD  
MARRIAGE IN THE CONTEXT OF COVID 19. A CASE OF TROJAN MINE IN  
BINDURA DISTRICT**

**A PROJECT SUBMITTED IN PARTIAL FULFILMENT OF THE REQUIREMENTS  
OF BACHELOR OF SCIENCE HONOURS DEGREE IN SOCIAL WORK AT BINDURA  
UNIVERSITY OF SCIENCE EDUCATION.**

**BY**

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**JUNE 2022**

## Approval Form

Supervisor

I certify that I have supervised Nyasha Gandanhamo B1850756 for this research title ‘ Exploring the emerging challenges of female victims of child marriage in the context of covid19, a case of Trojan Mine in Bindura District’, in partial fulfillment of the requirements for the Bachelor of Social Work Honors Degree and recommended that it proceed for examination.

Supervisor

Name.....Signature.....Date

*Chairperson of Department Board of Examiners*

The Department Board of Examiners is satisfied that this dissertation report meets the examination requirements and I therefore recommended to Bindura University to accept a research project by Nyasha Gandanhamo titled ‘Exploring the emerging challenges of female victims of child marriage in the context of covid19, a case of Trojan Mine in Bindura District’’.In partial fulfillment of the requirements for the Bachelor of Social Work Honours Degree

Chairperson’s name

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## **DECLARATION RELEASE FORM**

I, **Nyasha Gandanhamo** (B1850756) studying for the Bachelor of Social Work Honors Degree are aware that plagiarism is a serious academic offense and that falsifying information is a breach of ethics in social work research, I declared that :

- 1) The dissertation titled: exploring the emerging challenges of female victims of child marriage in the context of covid19: A case of Trojan Mine is my own work and it has never been plagiarized
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- 3) I grant permission to the University to use this research project for academic purposes.

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Macheke Welcome Home A

Plot no. 12

## **DEDICATION**

I dedicate this project to my parents Mr. and Mrs. Gandanhamo, to my siblings, friends and relatives who have been a pillar of strength throughout my project, to my supervisor Mrs. Chigondo for the continued support.

## **ACKNOWLEDGEMENTS**

I would like to express my gratitude to the almighty who gave me the ability to complete my project. Also, special thanks to all the people who rendered their support to make this project a success.

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## **LIST OF ACRONYMS**

|             |   |
|-------------|---|
| ACRWC.....  | African Charter on the Right and Welfare of the Child |
| CRC.....    | Convention on the Rights of Children                  |
| ECM.....    | Early Child Marriages                                 |
| FGD.....    | Focus Group Discussion                                |
| GBV.....    | Gender Based Violence                                 |
| IGP.....    | Income Generating Projects                            |
| ILO.....    | International Labor Organizations                     |
| IPV.....    | Intimate Partner Violence                             |
| NGOs.....   | Non Governmental Organizations                        |
| UNICEF..... | United Nation International Children’s Emergency Fund |
| UN.....     | United Nations  |
| WHO.....    | World Health Organization                             |

## **ABSTRACT**

*The research study focused on exploring the emerging challenges of female victims of child marriage in the context of covid19 in Trojan Mine. Covid19 brought unique challenges to female victims of child marriage in which the study has unpacked these new emerging challenges. The objectives of the study were to explore on the emerging challenges of female victims of child marriage in the context of covid19 at Trojan Mine, to examine the social implications of covid19 to female victims of child marriage, to explore the coping mechanisms employed by female victims of child marriage, to proffer recommendations during and post era on redressing the challenges posed to female victims of child marriage. The research study was qualitative in nature and it employed a case study research design. Purposive sampling was used to select respondents. 6 women were purposively sampled to participate in the research, and 2 seniors' female workers were targeted as key informants. Data analysis was done using thematic analysis. The study findings revealed that the survivors of child marriages experienced socioeconomic challenges resulted in covid19. Some of these challenges include, gender based violence increased, social insecurity, increased poverty. The study also identified some coping strategies employed by female victims of child marriage such as social economic adjustment and traditional wisdom on sexual reproductive health. The study recommended that the government should adopt a comprehensive and national based strategy to economically empower vulnerable groups such as female victims of child marriage, and to come up with home based income generating projects to cushion themselves during the covid19 period.*

## Table of Contents

|   |     |
|---|-----|
| Approval Form.....                        | i   |
| DECLARATION RELEASE FORM.....             | ii  |
| DEDICATION.....                           | iii |
| ACKNOWLEDGEMENTS.....                     | iv  |
| LIST OF ACRONYMS.....                     | v   |
| ABSTRACT.....                             | vi  |
| CHAPTER 1: INTRODUCTION TO THE STUDY..... | 1   |
| 1.0 Introduction.....                     | 1   |
| 1.1 Background of the study.....          | 1   |
| 1.2 Problem Statement.....                | 4   |
| 1.3 Research Aim.....                     | 5   |
| 1.4 Research objectives.....              | 5   |
| 1.5 Research Questions.....               | 5   |
| 1.6 Justification of the research.....    | 6   |
| 1.7 Scope of the study.....               | 6   |
| 1.8 Possible challenges.....              | 7   |
| 1.9 Chapter outline.....                  | 7   |
| 1.10 Definition of key terms.....         | 7   |
| 1.11 Summary.....                         | 7   |



|  |    |
|--|----|
| CHAPTER 2: LITERATURE REVIEW .....                                       | 8  |
| 2.0 Introduction.....  | 8  |
| 2.1 Theoretical Framework.....   | 8  |
| 2.2 Conceptualization of child marriage.....                             | 9  |
| 2.3 Challenges of child marriage during pandemics.....                   | 10 |
| 2.3.1 Early deaths due to COVID-19.....                                  | 10 |
| 2.3.2 More harms to young mother’s children.....                         | 11 |
| 2.3.3 Increased Gender Based Violence .....                              | 11 |
| 2.3.4 Increased poverty .....  | 11 |
| 2.3.5 Sexual Reproductive Health Challenges.....                         | 12 |
| 2.4 Laws and Policy Frameworks on child marriage.....                    | 13 |
| 2.4.1 Zimbabwean laws .....  | 15 |
| 2.5 COVID 19 INDUCED LEGAL AND POLICY FRAMEWORKS. ....                   | 15 |
| 2.5.1 UN Habitat policy and engagement principles .....                  | 15 |
| 2.6 Coping strategies.....   | 16 |
| 2.6.1 Socio-economic adjustments .....                                   | 16 |
| 2.6.2 Protection of Human Rights leveling different vulnerabilities..... | 17 |
| 2.7 SOCIO ECONOMIC IMPLICATIONS .....                                    | 17 |
| 2.7.1 Cyclical child marriage .....                                      | 17 |
| 2.7.2 A Focus on the Informal Sector Globally .....                      | 18 |

|  |           |
|--|-----------|
| 2.8 Chapter summary .....                    | 18        |
| <b>CHAPTER 3: RESEARCH METHODOLOGY .....</b> | <b>19</b> |
| 3.0 Introduction.....                        | 19        |
| 3.1 Research Methodology .....               | 19        |
| 3.2 Research design .....                    | 19        |
| 3.3 Study population .....                   | 20        |
| 3.4 Sample Size.....                         | 20        |
| 3.5 Sampling techniques .....                | 21        |
| 3.5.1 Purposive sampling.....                | 21        |
| 3.5.2 Availability sampling.....             | 21        |
| 3.6 Data collection .....                    | 22        |
| 3.6.1 Data collection Methods .....          | 22        |
| 3.7 Data collection tools .....              | 24        |
| 3.7.1 In-depth interview guide .....         | 24        |
| 3.8 Data presentation and analysis.....      | 24        |
| 3.9 Ethical issues.....                      | 25        |
| 3.9.1 Confidentiality .....                  | 25        |
| 3.9.2 Anonymity .....                        | 25        |
| 3.9.3 Voluntary participation .....          | 26        |
| 3.10 Feasibility.....                        | 26        |

|   |    |
|---|----|
| 3.11 Chapter Summary .....  | 26 |
| CHAPTER 4: DATA PRESENTATION AND ANALYSIS .....   | 27 |
| 4.0 Introduction.....   | 27 |
| Table 4.1 Response rate .....   | 27 |
| 4.2 Demographic Characteristics of Respondents .....  | 27 |
| Table 4.2: Demographic Characteristics of respondents .....                                 | 28 |
| 4.2.1 Distribution of respondents.....  | 28 |
| 4.2.2 Distribution of participants by age.....  | 28 |
| 4.2.3 Distribution of participants by marital status.....                                   | 29 |
| 4.2.4 Distribution of participants by level of education.....                               | 29 |
| 4.2.5 Distribution of participants by employment status .....                               | 29 |
| 4.3 Emerging challenges of female victims of child marriage in the context of covid19. .... | 30 |
| 4.3.1 Increased Gender Based Violence .....   | 30 |
| 4.3.2 Increased poverty .....   | 31 |
| 4.3.3 Sexual Reproductive Health Challenges.....  | 33 |
| 4.4 SOCIO-ECONOMIC IMPLICATIONS OF COVID 19 INDUCED CHALLENGES.....                         | 35 |
| 4.4.1 Reduced informal activities .....   | 35 |
| 4.4.2 Increased social insecurity .....   | 36 |
| 4.5 Coping strategies.....  | 37 |
| 4.5.1 Socio-economic adjustments .....  | 37 |

|  |    |
|--|----|
| 4.5.2 Traditional wisdom on sexual reproductive health ..... | 38 |
| 4.6Laws and Policy Frameworks on child marriage.....         | 39 |
| 4.7Chapter summary .....                                     | 40 |
| 5.0 Introduction.....  | 41 |
| 5.1 Summary.....   | 41 |
| 5.1Discussion of findings.....                               | 42 |
| 5.1.2 Increased gender based violence.....                   | 42 |
| 5.1.3 increased social insecurity .....                      | 42 |
| 5.1.4 sexual reproductive health challenges .....            | 42 |
| 5.1.5 coping strategies.....                                 | 43 |
| 5.2 Conclusions.....   | 43 |
| 5.3 Recommendations.....                                     | 44 |
| 5.3.1 To the Government .....                                | 44 |
| 5.3.2 To female victims of child marriage.....               | 44 |
| 5.3.4 To the social work profession .....                    | 44 |
| 5.4 Chapter Summary .....                                    | 44 |
| REFERENCES .....   | 45 |
| .....  | 45 |
| Appendices.....  | 49 |
| APPENDIX 1: KEY INFORMANTS INTERVIEW GUIDE.....              | 49 |

|   |    |
|---|----|
| APPENDIX 2: Participant’s In-depth Interview Guide..... | 51 |
| APPENDIX 3: Focus group discussion GUIDE.....           | 53 |
| APPENDIX 4: CONSENT FORM.....                           | 55 |
| Appendix 5 Letter .....                                 | 57 |

# **CHAPTER 1: INTRODUCTION TO THE STUDY**

## **1.0 Introduction**

Studies prove that the challenge of child marriage accelerates more during pandemics. It is therefore pertinent to argue that the very challenge of child marriage does not come alone but is usually packaged with some evolving challenges. In this case, Covid19 being a pandemic of its kind brought with it unique challenges to female victims of child marriage. Hence, this study seeks to unpack the emerging challenges of female victims of child marriage in the context of covid19, a case of Trojan Mine in Bindura district. Most researches have been focusing on the challenges of child marriages in general, however the surgency of covid19 brought about some mystic challenges which research studies by now have not exhausted.

## **1.1 Background of the study**

Since before the Covid-19 pandemic and despite national and international laws banning child marriages and, regardless of some countries' positive efforts towards the elimination thereof (UNICEF 2015, 2018b), the global scale of child marriages has not significantly decreased to an extent where this practice no longer poses a threat to the development and growth of the girl-child. One of the biggest concerns of the consequence of the COVID-19 measures is that the pandemic is estimated to have disrupted significant efforts made thus far to end child marriages (Briggs and Ngo 2020), the resulting significance thereof is that millions more will be forced into early marriages between 2020 and 2030 (UNICEF, 2020b). The impacts of the various COVID-19-related restrictions, including disruptions to child marriage programming and wide-reaching economic crises and associated stresses on families, will further weaken planned efforts to end

child marriage. It therefore becomes imperative to prioritize opposing early marriage in policy and programme development (Parsons and McCleary-Sills 2021).

In sync with the above, the coming of Covid19 pandemic launched various other challenges attached to child marriage. On March 11, 2020, the World Health Organization (WHO, 2020) declared the outbreak of the novel corona virus disease COVID-19 a global pandemic. Subsequently most countries in the world enforced some restrictive measures to curb its spread, including social distancing, prohibiting mass gatherings, school closures and in some cases complete lockdown of people's movement. According to Lunde, (2020) the COVID-19 pandemic is likely to have detrimental effects on efforts to end harmful practices, such as child marriage. Lunde (2020) furthered that the stay-at-home orders and other measures implemented during the COVID-19 pandemic have in fact led to a shadow pandemic of child marriages. Lockdown measures have disrupted children's routines and essential prevention, protection and support services. Taruvinga and Muchinako (2016) argue that most of the girls are getting married at tender age and they have given some moral value to marriage than education, some of these girls are under educational sponsorship but they leave school.

According to UN report (2020) on child marriage, an estimated 650 million girls and women alive today married before their 18th birthday. Referred to as girl child marriage, the formal or informal union of the girl-child before age 18, the practice is increasingly recognized as a key roadblock to global health, development, and gender equality (WHO, 2020).

At regional and international levels Zimbabwe subscribes to a number of instruments intended to improve the promotion and protection of the rights of women and ensure the attainment of gender equality and it ratified the Protocol to the African Charter on Human and People's Rights on the Rights of Women in Africa in 2008 (Zimbabwe's CEDAW, 1996). In 2008 Zimbabwe

also signs the SADC Declaration on Gender and Development of 1997 which gives member states to undertake measures to incorporate gender issues in their programs. Rothman (2008) asserted that there was need for community intervention to incorporate gender issues at community level. By acceding to international conventions the state parties accept the legal duty to abide by the conventions and thereby become obliged to take steps to protect the exercise and enjoyment of human rights to investigate violations and to provide effective remedies to victims (Sagade, 2005 in Sibanda,2011). Section 78 of the 2013 Zimbabwe Constitution (Marriage Rights) sets a minimum age for marriage at 18, and prohibits forced marriage. It states that no person shall be compelled to marry against their will. Child marriage is a matter of great concern and this drives this research to look into the emerging challenges affecting female victims of early child marriage due to covid19. Ndlove (2019), the statistical data at the district shows that more than 30% of girls less than 18 years visit the maternity ward and most of them have some birth complications.

In April 2021, Mavhunga (2021) noted that Zimbabwe's government reported a major increase in teenage pregnancies in January and February. Zimbabwe's government says nearly 5,000 teenage girls became pregnant in January and February 2021 and about 1,800 entered early marriages during the same period. According to a government report, most of the girls live in poor suburbs such as Epworth, about 30 kilometers southeast of Harare (Mavhunga, 2021).

Trojan mine is located in Mashonaland central province in Zimbabwe, Bindura District. The area has a huge household population characterized by young people especially boys and girls. The mining area is associated with high incidents of child marriage, being caused by intensive vulnerability of mostly nearby household members. The area does not have economic activities that can sustain its community member's especially young people to make them busy, hence



leading them to involve in abnormal behaviors such as drug addicts as well as girls to engage in early child marriages. Some girls engage in transactional sex for money with those who conduct mining activities, resulting in early pregnancy and consequently early child marriage. The situation was accentuated by the advent of Covid19, leaving undesirable challenges most of which are not established by research.

In this case, the issue of challenges posed to female victims of child marriages has not been well scrutinized by studies in the context of Covid19, Hence this study seeks to unpack these emerging challenges. Most researches tended to present child marriage as a resultant challenge rather than as a basis on which various other challenges surfaces. This study therefore unpacks that Covid19 accentuated and brought about new challenges for the female victims of child marriage.

## **1.2 Problem Statement**

The drivers of child marriage and its effects vary within and across countries. Nevertheless, given the adverse implications of COVID-19 on the global economy, particularly for low-income countries where child marriage practice is more prevalent, and the fact that poverty is one of the drivers of child marriage worldwide, cases of child marriages were expected to increase in vulnerable and poor communities (WHO, 2020). Additionally, the impact of COVID-19 restriction measures and policies has worsened the situation, especially in access to services for prevention and response to child marriage. Given this stated rise in child marriage, a lot of speculative suggestions have been made regarding the emerging challenges of female victims of early child marriage due to the Covid19 pandemic. In fact, many researchers have only pointed that Covid19 led to increase in early child marriage without giving in-depth information on

theafter effects of child marriage in the context of covid19. This study will therefore delve into unpacking emerging challenges of female victims of child marriage in the context of Covid19.

### **1.3 Research Aim**

The research aims at exploring the emerging challenges of female victims of child marriage in the context of Covid19 pandemic.

### **1.4 Research objectives**

The research will be guided by the following objectives:

- To explore the emerging challenges of female victims of child marriage in the context of covid19 at Trojan Mine.
- To examine the social implications of covid19 to female victims of child marriage at Trojan Mine.
- To explore the coping mechanisms employed by female victims of child marriage in the context of Covid19 at Trojan Mine.
- To examine how the Covid19 induced policy frameworks relate to female victims of child marriage at Trojan Mine.
- To proffer recommendations during and post-pandemic era on redressing the challenges posed to female victims of child marriage at Trojan Mine.

### **1.5 Research Questions**

The research will be centered on these objective driven questions:

- What are the emerging challenges of female victims of child marriage in the context of covid19 at Trojan Mine?

- What are the socio-economic implications of these challenges to female victims of child marriage at Trojan Mine?
- How do female victims of child marriage cope in the context of Covid19 challenges at Trojan Mine?
- How did the Covid19 induced policy frameworks pose challenges to female victims of child marriage at Trojan Mine?
- How can these challenges be rectified during and post- pandemic era?

### **1.6 Justification of the research**

The research is of paramount importance to the academia as it adds to the literature base on the challenges faced by female victims of child marriage during pandemics. There has been little research on challenges of early child marriage during pandemics and this research seeks to cover the gap. To the policy makers, this research will provide an insight into strategic policy formulation targeting specifically the plight of female victims of child marriages during pandemics. The recommendations will also add to post pandemic strategies on redressing the challenges posed by pandemicsto female victims of child marriage.

### **1.7 Scope of the study**

This research is only limited to female victims of child marriage, exploring their emerging challenges in the context of Covid19. The study also incorporates those women who were married before the age of 18 despite the fact that they have now surpassed the age in marriage. The age limit for child marriage is informed by the 2013 Zimbabwean constitution which commends the age of 18 and above for marriage. Moreover, the research is expected to take less than 4 months for completion.

## **1.8 Possible challenges**

Some unexpected lockdown measures might affect face to face interviews with participants. However, the researcher will resort to online interviews to rectify this.

## **1.9 Chapter outline**

This study will contain 5 chapters. The first chapter is centered on introducing the entire study, the second chapter unpacks available literature related to the topic under study, the third chapter on research methodology, fourth chapter on presentation and discussion of findings and the fifth chapter will give conclusions, a summary, and recommendations to the study.

## **1.10 Definition of key terms**

**Child** -Any person before the age of 18 (Zimbabwean constitution, 2013). Hence, child marriage entails to marriage that took place before reaching the age of eighteen.

**Covid19**- A disease resulting from corona virus.

**Emerging challenges**- new challenges

## **1.11 Summary**

This study seeks to unpack the emerging challenges of female victims of child marriage in the context of covid19, a case of Trojan mine in Bindura district. Most researches have been focusing on the challenges of child marriages in general, however the surgency of covid19 brought about some mystic challenges which research studies by now have not exhausted.

# **CHAPTER 2: LITERATURE REVIEW**

## **2.0 Introduction**

Literature review is an account of what has been published by other scholars and researchers in relation to the study. The previous chapter introduced the entire study while this current chapter reviews existing literature on the emerging challenges of female victims of child marriage in the context of covid19. The chapter is guided by the objectives of the study and it uses case studies from a global, regional and national perspectives. The chapter also explores a theoretical framework underpinning the study, After all, this chapter will explore gaps deduced from the presented literature, thereby giving justification to the necessity of carrying out this current research.

## **2.1 Theoretical Framework**

According to Barbour (2014) a theoretical framework is a model or set of approaches that is used in explaining and analyzing collected data in a research study. A theory helps in providing a contextual explanation and understanding of the findings in the research (Moore, 2012).

The systems theory by Bronfenbrenner will be used to unpin the emerging challenges of female victims of child marriage in the context of covid19. According to Ryan (2000), Bronfenbrenner in his systems theory divided the person's environment into five different levels notably the microsystem, the mesosystem, the exosystem, the macrosystem, and the chronosystem. The microsystem level entails the system closest to the person such as the nuclear family and the one in which they have direct contact (Ryan, 2000). This implies that the microsystem incorporates the family, peers, or caregivers inter-alia. On another level there is the mesosystem which comprises of the interactions between the diverse parts of a person's microsystem. In this case, the mesosystem is a point where a person's individual microsystems function interdependently

and are interconnected upon one another and these interactions impact an individual indirectly. The exosystem signifies a setting that does not incorporate the person to be an active participant, but the person still gets affected by them. This encompasses decisions that affect a person, but they were not part and parcel of the decision-making process. The emerging challenges of female victims of child marriage also appear in these different levels promulgated by Bronfenbrenner. This ranges from challenges posed in their immediate surroundings to the institutional and policy related challenges at macro-level. In this case, it is essential to disentangle how covid 19 induced legal and policy frameworks pose challenges to the female victims of child marriage.

## **2.2 Conceptualization of child marriage**

A plethora of ways have been taken by scholars to define the term child marriage. Child marriage and early marriage define almost the same concept, which is any legal or customary union involving a boy or girl age below 18 years (UNICEF, 2020). In international conventions and in many countries, child marriage is considered as a form of forced marriage because children under 18 are deemed incapable of expressing their full, free and informed consent (Malhotra and Elnakib 2021). Child marriage constitutes a severe human rights violation, often jeopardizing the education, health, well-being and future of millions of children in the world as well as being an extreme manifestation of GBV (Chineka & Kurevakwesu, 2021). Child marriage is a harmful practice that has a negative impact especially on girls, deeply rooted in gender inequality and stereotyped gender-based roles and discrimination. It is important to note that child marriage increases during violent conflict (UNICEF, 2020).

Child marriage is a harmful and discriminatory global practice robbing millions of girls of their human rights by destructing their health, development and well-being (Yaya, 2019). Whilst various studies have detailed the negative impact of child marriages on the health and

development of the girl-child (Briggs and Ngo 2020; Ribacke, 2016; Myers 2013), other researchers have documented the adverse economic and social effects and consequences of child marriage for the child brides themselves, their families and their communities (Villegas, 2021, John, 2019, Parsons, 2015; Vogelstein 2013; Yaya, 2019).

The definitions above acknowledge that child marriage comes with some socio-economic implications and in this case, the present study seeks to unpack such implications to female victims of child marriage in the context of Covid19 pandemic.

### **2.3 Challenges of child marriage during pandemics**

Due to limited literature on the challenges posed by Covid19 to the victims of child marriage, this section will make inferences to literature on the challenges encountered by female victims of child marriage during other pandemics such as Ebola.

#### **2.3.1 Early deaths due to COVID-19**

Literature shows that pandemics lead to untimely deaths and the victims of child marriage are not spared in this. During the 2014-2015 Ebola epidemic in West Africa, UNICEF (2015:12) reported that Guinea, Liberia and Sierra Leone collectively recorded 11 310 deaths, resulting in over 22 000 children losing one or both young parents to the Ebola epidemic. Young women were vulnerable to different forms of exploitation including sexual exploitation, forced begging, street vending among others (Human Rights Watch, HRW, 2020). During the Ebola crisis in West Africa, many young women were shunned due to stigma associated with the disease, or fears that their young children might be infected (HRW, 2020). The implications of Covid 19 need to be unpacked in relation to this aspect of early deaths.

### **2.3.2 More harms to young mother's children**

Due to lack of a viable support system, studies have documented a range of harms to children of early married mothers, including deficits in physical growth, cognitive function, neurodevelopment, and social-psychological health (Kurevakwesu and Chizasa, 2020).

### **2.3.3 Increased Gender Based Violence**

Plan International's (2020) rapid assessment of the secondary impacts of COVID-19 in Africa found that victims of early child marriage have heightened risk of multiple forms of Gender Based Violence (GBV), including domestic abuse, and sexual violence, as well as rises in transactional sex due to the adverse economic impacts of the crisis. Young women are at higher risk of Intimate Partner Violence (IPV), sexual violence and sexual coercion than older women due to intersecting inequalities related to age and gender, which are likely to be exacerbated during the current crisis (UNICEF, 2020). Pacheko (2020) noted that NGOs and service providers have reported rises in several forms of GBV against young women since the COVID-19 outbreak in Zimbabwe. This includes physical and sexual violence, resulting in many psychosocial problems (OCHA, 2020; OCHA, 2020; SAFE, 2020). In conjunction with this, World Vision Zimbabwe (2020), reported that cases of GBV against young women in Zimbabwe have more than doubled since lockdown.

### **2.3.4 Increased poverty**

Literature also shows that pandemics increase poverty levels. In Zimbabwe, it was noted that due to increasing poverty and economic insecurity since the COVID-19 outbreak, young married women felt the pressure to have transactional relationships even if they were abusive, as the transaction of money and goods for sex may be an important source of income, sometimes for the entire family. Physical abuse was the most frequently reported form of abuse, constituting



28% of the reported cases followed by sexual abuse at 26% (OCHA, 2020). In relation to this Verner, (2020) reported that when these young women are unable to meet household food needs, they are forced to adopt increasingly negative coping mechanisms: reducing the quality and quantity of meals, selling off livestock and other productive assets, and in some extreme cases, marrying off their daughters.

### **2.3.5 Sexual Reproductive Health Challenges.**

Evidence from previous researchers has indicated that victims of early child marriage are disproportionately affected by emergencies. Efforts to stop the Ebola epidemics led to a decrease in access to sexual and reproductive health information and services; a loss of livelihoods and a contraction of social support networks (WHO, 2016). These issues not only undermined strategies to end child marriage but also accentuated problems faced by victims of early child marriage. Commenting on this, Viera (2016) pointed that in the medium to long term, the challenges of child marriage are far greater when communities are affected by economic shocks and have limited access to basic services. It is on this basis that the current study seeks to unpack the emerging challenges of female victims of child marriage in the context of covid19.

WHO (2020) pointed that COVID-19 is already causing disruptions in meeting family planning needs. In Zimbabwe, the Ministry of Health and Child Care (MoHCC, 2021) pointed that clinical staff occupied with the COVID-19 response may not have time to provide services, or may lack personal protective equipment to provide SRH services safely. Health facilities in many places are closing or limiting services and women are refraining from visiting health facilities due to fears about COVID-19 exposure or due to movement restrictions (MoHCC, 2020). Also, supply chain disruptions are limiting availability of contraceptives in many places. Product shortages and lack of access to trained providers or clinics mean that women may be unable to use their

preferred method of contraception, may instead use a less effective short-term method, or may discontinue contraceptive use entirely.

Moreover, WHO (2020) pointed that some 47 million women in 114 low- and middle-income countries are projected to be unable to use modern contraceptives if the average lockdown, or COVID-19-related disruption, continues for 6 months with major disruptions to services. Colicky (2020) concurs that for every 3 months the lockdown continues, assuming high levels of disruption, up to 2 million additional women may be unable to use modern contraceptives. If the lockdown continues for 6 months and there are major service disruptions due to COVID-19, an additional 7 million unintended pregnancies are expected to occur (WHO, 2020). The number of unintended pregnancies will increase as the lockdown continues and services disruptions are extended. This projection spares not female victims of early child marriage and the current study will unravel these challenges in the Zimbabwean context.

## **2.4 Laws and Policy Frameworks on child marriage**

Several international conventions are committed to eradicating child marriage by detailing states' responsibilities for protecting children from marriage, defining a minimum age of marriage and requiring free and full consent in any marital decision (Rivera 2011). Amongst them, the Universal Declaration of Human Rights (1948) (UDHR), of which Zimbabwe is a signatory, recognizes the right to free and full consent to marry and states that a person must be suitably mature to make an informed decision. Several other legal instruments recognize the marriage of a girl or boy before the age of 18 as a violation of the child's human rights, including the right to education, to express their views freely, to protection from all forms of abuse and to be protected from harmful traditional practices. In addition to the UDHR, the two other major international agreements that have been ratified by Zimbabwe and that aim to protect the rights of children are

the 1989 United Nations Convention on the Rights of the Child (CRC) and the 1990 African Charter on the Rights and Welfare of the Child (ACRWC). The CRC does not specifically mention child marriage. However, it does obligate state parties to take measures to abolish all traditional practices prejudicial to the health of children. The ACRWC is more comprehensive since it addresses the unique factors that the African child faces such as traditional customs (ACRWC, Art. 21(2)). If one has regard to the harmful consequences of child marriage on a child bride's physical, mental and sexual health, it is clear that the harmful traditional practices referred to in the CRC therefore also include child marriages. In addition, the CRC obligates State parties to ensure that children attain the highest attainable standard of health by taking measures to, among others, ensure appropriate pre-natal and post-natal health care for mothers and basic knowledge of child health and nutrition, to diminish infant and child mortality and to provide medical assistance and health care to all children (Article 24 of the CRC). The CRC therefore specifically recognizes that the health of children is determined by adequate and appropriate pre-natal and post-natal care for pregnant women. It will be shown how most young do not access appropriate and adequate pre-natal and post-natal care during their pregnancies, endangering their lives as well as the lives and health of their babies.

Additionally, the rights to equality and non-discrimination are set forth in the 1979 Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), which prohibits child marriages and sets 18 as the minimum age for marriage. In this case, child marriage is a manifestation of discrimination against women and girls, a violation of their rights and an obstacle to the girl child's full enjoyment of her rights (Arthur, 2018). The practice is further perpetuated by entrenched adverse customs and traditional attitudes that discriminate against women or place women in subordinate roles to men, or by women's stereotyped roles in society

(CEDAW, Art. 16–17). More recently, the global community has agreed to the SDG targets, which comprise a key initiative to advance gender equality, education and health (Ayebare, 2020; UN 2015; UNICEF 2019). Zimbabwe has committed to eliminate child marriage by 2030, in line with the SDGs, which are the blueprint to achieve a better and more sustainable future for all.

#### **2.4.1 Zimbabwean laws**

In 2013, Zimbabwe adopted a progressive constitution which enshrines gender equality and which provides for justifiable rights. Section 78 of the Constitution sets a minimum age for marriage at 18, and prohibits forced marriage. It states that no person shall be compelled to marry against their will. Section 26(1) of the Constitution requires the State to take appropriate measures to ensure that no marriage is entered into without the free and full consent of the intended spouses. Section 26(2) of the Constitution requires the State to take measures to ensure that children are not pledged in marriage. Section 56 governs gender equality and nondiscrimination, including that all persons are equal before the law and have the right to equal protection and benefit of the law, and that women and men have the right to equal treatment. Child marriage is thus constitutionally not permissible, as recently found by the Constitutional Court of Zimbabwe. This compendium of rights provided in the constitution provides the benchmark for which these emerging challenges of female victims of child marriage are discussed.

### **2.5 COVID 19 INDUCED LEGAL AND POLICY FRAMEWORKS.**

#### **2.5.1 UN Habitat policy and engagement principles**

The Secretary-General's Report on shared responsibility, global solidarity responding to the socioeconomic impacts of COVID-19 is the guiding document for UN-Habitat's own COVID-19

Policy and Programme Framework (UN, 2020). This complements the global appeal launched by the Inter-Agency Standing Committee which focuses on the COVID response in ongoing humanitarian crisis situations. The SG Report is a call to action, for the immediate health response required to suppress transmission of the virus to end the pandemic; and to tackle the many social and economic dimensions of this crisis, while focusing on the most vulnerable such as victims of child marriage (ISC report, 2020). The report establishes three key parallel steps which directly inform UN-Habitat's own policy and programme framework. The first one is to mount the most robust and cooperative health response the world has ever seen, do everything possible to cushion the knock-on effects on millions of people's lives, their livelihoods and the real economy, learn from this crisis and build back better and seize the opportunity of this crisis to strengthen our commitment to implement the 2030 Agenda and the Sustainable Development Goals. UN-Habitat's COVID-19 Policy and Programme Framework provides guidance for global, regional and country-level action.

## **2.6 Coping strategies**

Research has shown a plethora of coping strategies that can be employed or that have already been in use to combat the challenges faced by victims of early child marriage during pandemics. These strategies are presented in the following sub themes.

### **2.6.1 Socio-economic adjustments**

In the context of Kenya Verner, (2020) reported that when these young women are unable to meet household food needs, they are forced to adopt increasingly negative coping mechanisms: reducing the quality and quantity of meals, selling off livestock and other productive assets, and in some extreme cases, marrying off their daughters.

### **2.6.2 Protection of Human Rights leveling different vulnerabilities.**

According to UNICEF (2020), the protection of the human rights of all especially those in situations that make them most vulnerable must be central to all aspects of the COVID-19 response, from crisis to recovery. Governments should take steps to mitigate the unintended impacts of public health measures implemented to bring case numbers down, such as lockdowns and quarantine. Also, authorities should implement telemedicine to deliver home-based care, and integrating SRH into other COVID-19 mitigation actions such as immunization and food delivery programmes (WHO, 2020).

Moreover, there is need to provide economic relief for the poorest households who are most affected by stay-at-home orders through one-off or regular cash payments to offset loss of daily earnings (WHO, 2020). All those involved in the humanitarian response and recovery period should ensure their activities do not perpetuate discrimination, abuse, violence, neglect or exploitation of female victims of child marriage. Governments and those involved in the COVID-19 response must take the needs of victims of child marriage into account. Programming should be comprehensive and cross-sectoral and address both lifesaving, immediate needs and promote long-term resilience, including of young women (IFRC, 2020).

## **2.7 SOCIO ECONOMIC IMPLICATIONS**

### **2.7.1 Cyclical child marriage**

Current research show that Covid19 Yang (2021) pointed that while it is too early to assess the full impact of COVID-19 on young women eight months into the COVID-19 pandemic, it is becoming clear that many predictions on the impact of the pandemic on young women are likely to be confirmed. According to global estimates by UNFPA (2021), the COVID-19 pandemic may result in 13 million extra child marriages in the years immediately following the crisis, with

at least 4 million more girls married in the next two years, as family livelihoods evaporate and economic crises ensue, pushing families to identify other forms of income that harm children. New analysis released by UNICEF (2020) also shows that the number of children living in poor households could increase by 15 per cent by the end of 2020 as a result of the global pandemic.

### **2.7.2 A Focus on the Informal Sector Globally**

The majority of the employed population works in the informal economy in unregistered micro enterprises or in jobs with no formal employment contracts, avoiding tax obligations but receiving no job entitlements, including social security and unemployment benefits (ILO, 2017). Informal employment is particularly prevalent in low-income countries and for employed women in these countries. They are street vendors, home-based workers in global or domestic value chains, waste pickers, domestic workers, short term wage workers, and subsistence level micro entrepreneurs. The most recent ILO estimates show that 61 percent of the globally employed population earn a living in the informal economy and that in lowincome countries 92 percent of women workers (versus 87 percent of men workers) are informally employed (ILO and WIEGO 2018:16). These large numbers mean no protection floor for the majority of workers when confronted with a global pandemic such as Covid19.

### **2.8 Chapter summary**

In conclusion, this chapter is guided by the objectives of the study to unpack literature relating to the study. It uses case studies from global, regional and national perspectives. The chapter also explores a theoretical framework underpinning the study. The chapter also explores gaps deduced from the presented literature, thereby giving justification to the necessity of carrying out this current research.

# CHAPTER 3: RESEARCH METHODOLOGY

## 3.0 Introduction

The previous chapter unpacks literature relating to the study. This chapter outlines the research methodology that was embarked on whilst carrying out this research. It articulates the research approach, research design, research methods, data collection techniques, data collection tools, target population, sample size, ethical considerations to mention but a few.

## 3.1 Research Methodology

According to Wilson (2013), research methodology refers to the strategies and overall approach used in gathering data. To buttress this, Rajasekar (2013) opined that research methodology refers to the study of methods by which knowledge is gained. This research was qualitative in nature to get in-depth and open responses on the challenges of female victims of child marriage in the context of covid19. In one way or the other, Qualitative research does not limit responses and it enabled the researcher to unravel underlying socio-economic challenges apparently bedeviling female victims of child marriage in the context of covid19.

## 3.2 Research design

The study utilized a case study design because the research was empirical which aimed at exploring the emerging challenges of female victims of child marriage in the context of covid19 at Trojan Mine in Bindura district. Creswell (2014) defines a case study as a method of investigation used in qualitative research whereby the researcher develops an in-depth analysis of a case, often a project, event, process, activity, an individual or a group. The researcher selected a case study because it is more flexible and it permitted for mutual interaction between the researcher and the study participants. Moreover, it gave the researcher more insight into exploring the emerging challenges of female victims of child marriage in the context of covid



19.To add on, another rationale for using this research design is that the researcher is able to use several data collection techniques in the data collection process such as in-depth interviews and focus group discussions.

### **3.3 Study population**

Barbour (2014) defines a target population as a complete set or collection of components whereby one opts to make some inferences during the research study. The study targeted female victims of child marriage at Trojan mine in Bindura district. Also, senior female workers who were married before the age of 18 at Trojan mine are targeted. Approximately, more than 20 women at Trojan mine are victims of child marriage and have experienced challenges in this covid19 pandemic era. Zim stats results in 2019 pointed that more than 100 women in Mashonaland central were victims of early child marriage and this has been aggravated by the covid 19 pandemic due to increased poverty levels.

### **3.4 Sample Size**

Coghlan and Brannick (2014) note that a sample is a section of respondents chosen from the target population. 6 women were purposively sampled to participate in this research. 2 senior female workers who were married before the age of 18 at Trojan were targeted as key informants. They were selected on the basis of their experiential knowledge on the challenges encountered by victims of early marriage during a crisis or pandemic. Hence, they were expected to give in-depth detail on emerging challenges of female victims of child marriage in the context of covid19 at Trojan Mine in Bindura district.

### **3.5 Sampling techniques**

The study utilized two non-probability sampling techniques which are; purposive and availability sampling. Kothari (2013) defines a sampling technique as a definite method planned and used in data collection for getting a sample from a given population. These sampling techniques are clearly explained below:

#### **3.5.1 Purposive sampling**

Purposive sampling is a non-probability sampling technique that is selected based on the specific features or characteristics of a population and on the objectives of the study (Sharma, 2017). Purposive sampling is also known as subjective sampling meaning that the sample has to be chosen on the basis of specifically judged characteristics. The researcher utilized the purposive sampling technique to select 6 women in Trojan mine area to participate in this research. The key informants were purposely selected based on their professionalism and knowledge of child marriage and associated challenges.

#### **3.5.2 Availability sampling**

The study also employed availability sampling. Creswell (2014) defines availability sampling as a non-probability sampling method that relies on data collection from members of a target population who are conveniently available to participate and engage in the study. In the study, this sampling method involved getting participants wherever was convenient to find them at the Trojan mine area. In convenience sampling, there is usually no criteria for participant inclusion that is used prior to selecting the subjects. The researcher adopted availability sampling to select a sample of women to participate in this research. Therefore, the major reason the researcher used this sampling technique was because the subjects for the study were readily available within

the proximity of the study area. Therefore, the researcher would not have to perform any extra effort to gather information.

### **3.6 Data collection**

Creswell (2014) asserts that data collection is the methodical approach used to collect and measure data from different sources in order to help the researcher answer relevant questions and to assess the results in the study. The research adopted data collection techniques to gather data from participants and these include; in-depth interviews, key informant interviews and focus group discussions.

#### **3.6.1 Data collection Methods**

##### ***3.6.1.1 In-depth interviews***

The researcher conducted in-depth interviews with the selected respondents. An in-depth interview is a dialogue between an interviewer and an interviewee characterized by extensive probing (Coghlan and Brannick, 2014). The rationale for using an in-depth interview is that they helped to promote a situation whereby there was carefully listening to responses, experiences and feelings of participants to understand the meaning being conveyed. Another reason for using in-depth interviews is that it gives the research a wider opportunity for follow-up questions, to probe for additional information, and refer back to key questions later in the interview so as to generate a rich understanding of attitudes, perceptions, motivations from participants concerning the emerging challenges of victims of early child marriage in the context of Covid 19 (Coghlan, 2005). The in-depth interview helped the researcher to establish rapport with participants to make them feel more comfortable and at ease, which generated more insightful responses.

### ***3.6.1.2 Key informant interviews***

The researcher will conduct interviews with key informants. According to Sharma (2017) key informant interviews are one on one dialogue that involves interviewing people who have particularly informed perspectives on an aspect of the program being evaluated. Creswell (2013) argues that the researcher can conduct face-to-face interviews with key informants that involve loosely structured and generally open-ended questions that are few and intended to elicit views and sentiments from the key informant. The rationale for using key informant interviews was that they are easier and less expensive than focus group discussion since they involve only one respondent and one interviewer and do not require payment of participatory incentives, refreshments, or special facilities. Another reason for choosing key informant interviews was that they help in addressing the sensitive topics and issues on the emerging challenges of victims of child marriage in Trojan Mine. The key informants also provided in-depth information and clarity on certain issues of concern on the study. Another reason for using key informant interviews was that they help to establish rapport with the respondents, and this enhanced the respondents to clarify their answers further.

### ***3.6.1.3 Focus group discussions***

Neuman (2014) argues that focus group discussions are an exploratory tool used to explore people's thoughts and feelings to obtain detailed information about a topic or issue while they are a group of 6-12 people. The researcher made use of focus group discussions with one group of women (6) who are victims of child marriage in Trojan mine area. The women were chosen based on whether they are victims of early child marriage. The rationale for using focus group interviews was that they help in discovering the different perspectives about the topic and why they hold certain opinions, therefore providing a broader range of information. The researcher

also found the focus group discussions to be relevant because they save time as compared to individual interviews.

### **3.7 Data collection tools**

#### **3.7.1 In-depth interview guide**

In in-depth interviews the researcher made use of an in-depth interview guide to gather data from the selected respondents. The researcher finds the in-depth interview guide to be relevant because it has open ended questions to allow the participants to explain in detail the emerging challenges of early child marriage in the context of covid19.

#### ***3.7.2 Key informant interview guide***

In key informant interviews the researcher made use of a key informant interview guide with open-ended questions to collect information from the selected participants. The key informant interview guide was relevant because it allowed the key informants to explain in detail their professional experience in relation challenges of child marriage during pandemics.

### **3.8 Data presentation and analysis**

Data analysis is the process of systematically searching and evaluating the interview and data transcripts, observed notes, or any other textual materials that the researcher collects to increase the comprehension of the phenomenon being researched (Sharma, 2017). The demographic data was collected and presented in a table to ensure that the information is properly presented for clarity and for the purpose of clearer analysis. Thematic analysis was used because it emphasized pinpointing, examining, and recording patterns or themes within data collected. Thematic analysis suited questions relating to people's experiences, or people's views and perceptions.

### **3.9 Ethical issues**

Ethical issues refer to morally upheld standards in research that distinguish what one ought or ought not to do during research (Coghlan and Brannick, 2014). This section focuses on identifying and explaining the ethical issues that will be upheld in the research study.

#### **3.9.1 Confidentiality**

The researcher was confidential to the participants through assuring them that their information will be kept in confidence. Creswell (2014) posits that one issue to anticipate about confidentiality is that some participants may or may not want to have their identity to remain confidential. The justification for using confidentiality was to let the participants retain ownership of their voices in issues pertaining the emerging challenges of child marriage in the context of covid 19. Confidentiality made the respondents more confident and enabled them to trust the researcher and this made them feel more comfortable sharing their information. Israel (2013) points out that in social science research, participants might not be at liberty to give out sensitive self-information when they suspect that their information can be shared openly to third parties. Thus, confidentiality was crucial as it helped in building the participants trust to the researcher and therefore the participants gave more details about the topic of the study.

#### **3.9.2 Anonymity**

Anonymity is the process through which the identity of the participant is kept in secret or hidden to avoid identification (Hollway and Jefferson, 2013). Anonymity was used to hide the identities of respondents so that the data they provide could be tracked back to them. The researcher made use of this ethic to protect the identity of the participants in the research. Anonymity assured the respondents of privacy and protection as their identities were coded within the broad

categories and not the participants' actual names. This gave the participants the confidence and freedom to respond to questions asked without their identity ever being revealed.

### **3.9.3 Voluntary participation**

Voluntary participation refers to a research participant's exercise of free will in deciding whether to participate or not to in a research study (Sharma, 2017). Voluntary participation entails the researcher's ability to allow the participants to freely and in an uncoercive manner, respond to the questions asked. The researcher used this ethic in order to make the participants more comfortable and willing to participate in the study. The participants participated in the study within a self-preferred timeframe. The other rationale behind using the ethic of voluntary participation was so that the researcher can gain trust and integrity with the participants. The participants therefore, felt freer to answer the questions in the study without being coerced during the interviews.

### **3.10 Feasibility**

Neuman (2014) defines feasibility as something with the capability of being done, effected, or accomplished. The research was doable considering the availability of resources and the researcher was familiar with victims of early child marriage in Trojan Mine area.

### **3.11 Chapter Summary**

This chapter has outlined the research methodology that was embarked on whilst carrying out this research. It articulates the research approach, research design, research methods, data collection techniques, data collection tools, target population, sample size, ethical considerations to mention but a few.

# CHAPTER 4: DATA PRESENTATION AND ANALYSIS

## 4.0 Introduction

This chapter focuses on data presentation, analysis and the discussion of findings of the research on the emerging challenges of female victims of child marriage in the context of covid19. This is guided by the questions of the research generated from research objectives. 8 participants were interviewed. 6 women and 2 seniors' female workers were selected as the study participants.

**Table 4.1 Response rate**

| Expected number of participants |   | R e s p o n s e r a t e |   |   |   |
|---------------------------------|---|-------------------------|---|---|---|
| In-depth interviews             | 6 | 1                       | 0 | 0 | % |
| Key informant interviews        | 2 | 1                       | 0 | 0 | % |

N=8

This research targeted a sample size of 8 respondents. 6 of them were for in-depth interviews and 2 for key informant interviews. All the respondents participated in the research hence a 100% response rate was realised.

## 4.2 Demographic Characteristics of Respondents

It is very significant to understand the demographic characteristics of participants since they help in analyzing data and enable the researcher to draw conclusions that are attributable to specific genders or age groups of respondents. Demographic characteristics are classifiable features of a population (Sharma, 2017). The demographic characteristics of the respondents were explored as follows:

The findings are summarized in table 4.1 below.



**Table 4.2: Demographic Characteristics of respondents**

| V a r i a b l e s          |                     | Key informant interviews | In-depth interviews | Frequency | P e r c e n t a g e |   |     |
|----------------------------|---------------------|--------------------------|---------------------|-----------|---------------------|---|-----|
| Age range                  | 1 5 - 2 4           | 0                        | 3                   | 3         | 3                   | 8 | %   |
|                            | 2 5 - 3 4           | 0                        | 2                   | 2         | 2                   | 5 | %   |
|                            | 3 5 - 4 4           | 1                        | 1                   | 2         | 2                   | 5 | %   |
|                            | 4 5 - 5 0           | 1                        | 0                   | 1         | 1                   | 2 | %   |
|                            | 5 0 +               | 0                        | 0                   | 0         | 0                   |   | %   |
| Marital status             | M a r r i e d       | 2                        | 6                   | 8         | 1                   | 0 | 0 % |
|                            | S i n g l e         | 0                        | 0                   | 0         | 0                   |   | %   |
| Economic activity          | E m p l o y e d     | 2                        | 4                   | 6         | 8                   | 0 | %   |
|                            | U n e m p l o y e d | 0                        | 2                   | 2         | 2                   | 0 | %   |
| Level of education reached | P r i m a r y       | 0                        | 0                   | 0         | 0                   |   | %   |
|                            | S e c o n d a r y   | 0                        | 5                   | 5         | 6                   | 3 | %   |
|                            | T e r t i a r y     | 2                        | 1                   | 3         | 3                   | 7 | %   |
|                            |                     |                          |                     |           |                     |   |     |

N=8

#### 4.2.1 Distribution of respondents

The above table shows the disaggregation of participants by age, marital status, economic activity and level of education. This is classified and explained below.

#### 4.2.2 Distribution of participants by age

Participants were disaggregated by age. Those within the ages ranging 15-24 years were 3, constituting 38% and those within 25-34 years were 2 representing a percentage share of 25%. Again, those within ages ranging 35-44 years were 2 representing 25% and finally in the age category of 45-50 years was 1 respondent comprising of the percentage share of 12%. Diverse views were gathered relating to the emerging challenges of female victims of child

marriage. The age differences culminated into in-depth and complex data on the emerging challenges of female victims of child marriage in the context of covid19.

#### **4.2.3 Distribution of participants by marital status.**

The participants were also disaggregated by marital status. All the 8 participants were married, constituting 100%. In this case, the participants were relevant to the topic under study in the context of covid19. The researcher gathered rich data on the emerging challenges of female victims of child marriage from those who are involved in the circumstances.

#### **4.2.4 Distribution of participants by level of education**

The table above also shows the distribution of participants by level of education. Those who completed secondary level were 5 representing 63% and those who completed tertiary level were 3 and they had a percentage share of 37%. This shows that the larger percentage share of the respondents was able to understand and to answer research questions appropriately.

#### **4.2.5 Distribution of participants by employment status**

6 of the respondents were employed and they constituted 80% percentage rate. This widened the scope of challenges they are encountering to the context of employment and economic activity. Only 2 respondents were not formally employed and they comprised of 20%. As they noted, some of the challenges they encountered incorporate cut offs to their salaries, living them exposed to increased vulnerability.

### **4.3 Emerging challenges of female victims of child marriage in the context of covid19.**

#### **4.3.1 Increased Gender Based Violence**

The participants were asked on the emerging challenges of early child marriage in the context of Covid19. Most participants from in-depth interviews noted that the Covid19 pandemic resulted in increased patterns of gender-based violence. One of the participants had the following to note:

*“The covid19 pandemic resulted in the home confinement of people and the probability of intimate partner violence increased especially for those who got married to each other before the required age. This is because of lack of financial stability in the household”*

Another in-depth interview participant noted that:

*“The fact that one gets married before the age of 18 is reason enough that she can be easily manipulated and it so worsened due to the advent of the covid 19 pandemic.. This comes as a result of lack of resilience in the prematurely established marriages”.*

Also, the key informant pointed that:

*“The victims of child marriage are far more disadvantaged in this covid 19 era. They have witnessed a sudden rise in Intimate Partner Violence and generally abuse relating to sexual abuse, physical abuse and emotional abuse among others. This is because victims of child marriage especially girls lacked stamina to challenge or report incidents of abuse. They fear to be labelled as having rushed to get married”*

The above responses show that gender-based violence increased with the advent of Covid19 especially for those who got married before the stipulated age of marriage. Because they fear to be labeled wrong initially for getting married early, they also remain silent when incidents of

gender-based violence culminate. This implies that Covid19 came to worsen an already dire plight of the survivors of early child marriage. In the same line, Plan International's (2020) rapid assessment of the secondary impacts of COVID-19 in Africa found that victims of early child marriage have heightened risk of multiple forms of Gender Based Violence (GBV), including domestic abuse, and sexual violence, as well as rises in transactional sex due to the adverse economic impacts of the Covid19 crisis. Concurrently, UNICEF, (2020) pointed that young women are at high risk of Intimate Partner Violence (IPV), sexual violence and sexual coercion than older women due to intersecting inequalities related to age and gender, which have exacerbated during the current crisis. Pacheko (2020). Substantially also, World Vision Zimbabwe (2020), reported that cases of GBV against young women in Zimbabwe have more than doubled since lockdown.

In tandem with the systems theory by Bronfenbrenner, the Covid19 pandemic modeled the environmental surrounding of female victims of child marriage in so much that it became a breeding ground for gender-based violence. Due to lockdown confinement coupled with increased household stressors, the close by environment (micro-level system) of the survivors of child marriage was conducive for gender-based violence. Having said this, it is clear that the covid19 pandemic culminated into increased gender-based violence for female victims of early child marriage.

#### **4.3.2 Increased poverty**

The in-depth interview participants also pointed that the covid19 pandemic resulted in increased poverty levels for the survivors of early child marriage. One of the participants had the following to note:

*“The level of vulnerability increased for us the survivors of early child marriage. The number of meals we were now eating was reduced to rarely 2 meals a day. This is because most of us were not finding opportunity to go out and do our usual livelihood activities because of lockdowns”*

Another in-depth interview participant pointed that:

*“Poverty strangled us the more during the covid19 period due to limited economic activities. We are not formally employed since some of us did not even dare completing ordinary level. Therefore, our sources of income are not dependable and we lived a hand to mouth life style”.*

The 2 key informant also pointed that the level of vulnerability with the advent of Covid19. One of them noted that:

*“Most of these survivors of early child marriage had no stable source of income and with the culmination of covid19 pandemic, the situation was further accentuated”.*

The above responses shows that Covid19 affected the sources of income of the survivors of early child marriage. In relation to this Verner (2020) reported that when these young women are unable to meet household food needs, they are forced to adopt increasingly negative coping mechanisms: reducing the quality and quantity of meals, selling off livestock and other productive assets, and in some extreme cases, marrying off their daughters. In line with the systems theory by Bronfenbrenner, the Covid19 pandemic ravaged the surrounding systems through which female victims of child marriage were interacting to acquire income for livelihood. As a result, poverty levels among female victims of child marriage increased based

on the assumption that they had recently got married and were yet to establish tangible sources of income.

#### **4.3.3 Sexual Reproductive Health Challenges.**

It was also found from the responses of the in-depth interview participants that Covid19 propelled sexual reproductive health challenges. 4 of the participants noted that there were challenges relating to accessing clinical services related to maternal health. One of the participants noted the following:

*“It was really difficult for us to regularly attend immunization and MUAC assessments for our children due to the lockdown”*

The other participant pointed that:

*“I could not regularly attend scale because I was terrified to contact Covid 19. Also, because I was new to this, I did not know even the community platforms which I could use for immunizing our children.”*

A key informant also pointed that:

*“Issues to do with regular checks for pregnancy, developmental milestones tracking were really difficult for the early victims of child marriage since most of them were doing it for the first time.”*

From the above responses, it is clear that the coming in of covid19 affected access to sexual reproductive health services by survivors of early child marriage. Evidence from previous researches shows that victims of early child marriage are disproportionately affected by

emergencies. Efforts to stop the Ebola epidemics led to a decrease in access to sexual and reproductive health information and services; a loss of livelihoods and a contraction of social support networks (WHO, 2016). Viera (2020) pointed that in the medium to long term, the challenges of child marriage are far greater when communities are affected by economic shocks and have limited access to basic services. In conjunction with the systems theory by Bronfenbrenner, when the environment is affected, the individual also gets affected (person in environment concept). Therefore, the lockdown led to the closure of normal functioning in health institutions and access to sexual reproductive health services. The female victims of child marriage were the most affected as insinuated in their responses that they were not even aware other accredited avenues to get themselves helped.

In the same line, WHO (2020) also pointed that COVID-19 is already causing disruptions in meeting family planning needs. In Zimbabwe, the Ministry of Health and Child Care (MoHCC, 2021) pointed that clinical staff occupied with the COVID-19 response were not having time to provide services, and they lacked personal protective equipment to provide SRH services safely. Health facilities in many places were closing or limiting services and women are refraining from visiting health facilities due to fears about COVID-19 exposure or due to movement restrictions (MoHCC, 2020). Also, supply chain disruptions are limiting availability of contraceptives in many places. Product shortages and lack of access to trained providers or clinics mean that women may be unable to use their preferred method of contraception, may instead use a less effective short-term method, or may discontinue contraceptive use entirely.

## **4.4 SOCIO-ECONOMIC IMPLICATIONS OF COVID 19 INDUCED CHALLENGES**

The participants were also asked on the socio-economic implications of covid19 induced challenges and they noted the following.

### **4.4.1 Reduced informal activities**

The 6 in-depth interview participants noted that Covid19 resulted in reduced informal activities yet that's where most of them are anchored on for survival. Interestingly, one of the participants underscored the following:

*“We were no longer selling our commodities in the streets. Some of us we earn income from selling various goods such as tomatoes, vegetables, second hand clothes among others.”*

The other participant postulates that:

*“Our means of survival was hindered by a continuous spell of lockdown. We could not go for our normal income generating projects”*

A key informant also noted that:

*“The informal sector which encompasses many including female survivors of early child marriage was heavily dwindled by indefinite lockdown measures”*

The above responses highlight that the means to living of the female survivors of early child marriage was affected by the advent of Covid19. This according to the systems theory implies that the meso-level economic systems of female victims of child marriage was affected by the Covid19 pandemic. The majority of the employed population works in the informal economy in unregistered micro enterprises or in jobs with no formal employment contracts, avoiding tax



obligations but receiving no job entitlements, including social security and unemployment benefits (ILO, 2017). Hence, covid19 had dire economic consequences to female victims of early child marriage.

#### **4.4.2 Increased social insecurity**

The participants also noted that Covid19 resulted in increased social insecurity for the female survivors of early child marriage. One of them had the following to note:

*“Covid19 increased our insecurity in marriage. This is because of increased vulnerability and we feared that our husbands might run away from responsibility.”.*

Another participant added that:

*The pandemic rendered us insignificant to the household and we even felt like we are increasing burden to our husbands.*

In the same line, a key informant responded pointed that:

*“The covid19 pandemic led to increased social insecurity for especially the female victims of early child marriage. This is because their households might not yet be regarded as stable during the time this novel pandemic culminated”.*

From the responses above, it is clear that covid19 threatened the existence of the households of female victims of early child marriage. In sync with the systems theory, the micro-level environment was no longer conducive for the continuous enjoyment of marriage by the female victims of child marriage. This was necessitated by increased levels of poverty.

## **4.5 Coping strategies**

The participants were asked the coping strategies they are employing to rectify the challenges posed by Covid19 to their existence and the following were their responses.

### **4.5.1 Socio-economic adjustments**

Four of the in-depth interview participants noted that they had to adjust their livelihood costs due to the changing patterns of income. One of them had the following to note:

*“We had to reduce the number of meals we used to eat per day and to cut other luxurious costs like airtime in order for us to survive during the Covid19 pandemic era”.*

Another in-depth interview participant said:

*“We had to send back our relatives to their respective homes as a means to cope up with the challenging consequences of Covid19”*

A key informant had the following to note:

*“Some of the survivors of early child marriage were now surviving on borrowing food from neighbors and relatives”*

From the responses above, it is clear that Covid19 heavily strangled the socio-economic lifestyles of victims of early child marriage. As a result, they resorted to some means of reducing their socio-economic expenditures. This however was a temporary means of cushioning themselves during the Covid19 period. In the context of Kenya Verner, (2020) reported that when these young women were unable to meet household food needs, they are forced to adopt increasingly negative coping mechanisms: reducing the quality and quantity of meals, selling off livestock and other productive assets, and in some extreme cases, marrying off their daughters. In tandem with the systems theory, they exhaust surrounding avenues from which they can get

help and after this they resorted to micro (household) strategies such as reducing meals and other livelihood expenses.

#### **4.5.2 Traditional wisdom on sexual reproductive health**

All the in-depth interview participants noted that they resorted to traditional wisdom to help themselves on sexual reproductive health issues. This include consulting midwives and old women in the community for what they called ‘*kukweshanhova*’ in shona. The same also applies for preparations to labour during pregnancy. These survivors of early child marriage adopted the traditional midwifery systems and also got wisdom for what they call ‘*kugadziranzira*’(preparing for child birth) to ensure a smooth flow during delivery. One of the participants had the following to note:

*“We were left with no option than to adopt our old traditional systems related to maternal health issues”*

Another participant said the following:

*“The traditional means to maternal health though risky temporarily helped us to cope with the increasing demands of sexual reproductive health”*

The key informants also connoted that most of these survivors resorted to traditional means when it comes to maternal health issues. One of them noted that:

*“Traditional modes of service such as the midwifery system, traditional pregnancy preparatory systems among others became the new norm with the advent of Covid19 which limited people’s movement to health facilities such as the clinic and hospitals”*

In this case, it is clear that traditional methods took the center stage in addressing maternal health related issues which were now bedeviling female survivors of early child marriage in the

Covid19 period. According to UNICEF (2020), the protection of the human rights of all especially those in situations that make them most vulnerable must be central to all aspects of the COVID-19 response, from crisis to recovery. Governments should take steps to mitigate the unintended impacts of public health measures implemented to bring case numbers down, such as lockdowns and quarantine. Also, authorities should implement telemedicine to deliver home-based care, and integrating SRH into other COVID-19 mitigation actions such as immunization and food delivery programmes (WHO, 2020).

Moreover, there is need to provide economic relief for the poorest households who are most affected by stay-at-home orders through one-off or regular cash payments to offset loss of daily earnings (WHO, 2020). All those involved in the humanitarian response and recovery period should ensure their activities do not perpetuate discrimination, abuse, violence, neglect or exploitation of female victims of child marriage. Governments and those involved in the COVID-19 response must take the needs of victims of child marriage into account. Programming should be comprehensive and cross-sectoral and address both lifesaving, immediate needs and promote long-term resilience, including of young women (IFRC, 2020).

#### **4.6 Laws and Policy Frameworks on child marriage**

The participants were also asked on the impact of various legal and policy frameworks underpinning child marriage in the context of Covid19. Most of the in-depth interview participants noted the Zimbabwean constitution 2013 as a binding document which shuns child marriage and is relevant in the context of Covid 19. One of the in-depth interview participants noted the following:

*“The human rights approach insinuated in the constitution of Zimbabwe is a legally binding instrument that is necessary to combat the infringement of rights during the covid*

*19 period. Especially female victims of child marriage, they faced differential exposure to circumstances and confinement to homes due to the lockdowns subjected them to a plethora of infringements”*

Another in-depth interview participant pointed that:

*“Had it not been for the binding constitution of Zimbabwe which guaranteed protection against violence, cases of gender-based violence would have immensely rocked our communities in Zimbabwe and the ones most vulnerable to this are female victims of child marriage”*

A key informant respondent also noted that:

*“The legal frameworks such as the constitution of Zimbabwe are empowering instruments which protect the vulnerable from being oppressed. The female victims of child marriage are not an exclusion.”*

The sentiments echoed by the respondents is noted in section 76 of the 2013 Zimbabwean constitution which provides for the right to health care. It states that every citizen and permanent resident of Zimbabwe has the right to have access to basic health-care services, including reproductive health-care services, every person living with a chronic illness has the right to have access to basic healthcare services for the illness.

#### **4.7 Chapter summary**

This chapter focuses on data presentation, analysis and the discussion of findings of the research on the emerging challenges of female victims of child marriage in the context of covid19. This is guided by the questions of the research generated from research objectives.

# CHAPTER 5: SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

## **5.0 Introduction**

This chapter summarizes, and gives conclusions and recommendations to the study based on the findings of the study. The recommendations intend to address researched themes in the study in order to help address the emerging challenges of female victims of child marriage in the context of Covid19.

## **5.1 Summary**

The study aimed at exploring the emerging challenges of female victims of child marriage in the context of covid19, a case of Trojan mine in Bindura District. The objectives of the study were to explore the emerging challenges of female victims of child marriage in the context of covid19 at Trojan Mine, to examine the social implications of covid19 to female victims of child marriage in the context of covid19 at Trojan Mine, Bindura and also to proffer recommendations during and post era on redressing the challenges posed to female victims of child marriage .8 participants were interviewed comprising of 6 female victims of child marriage and 2 senior female workers as key informants. The research study employed a case study research design and was qualitative in nature. Purposive and availability sampling were utilized to select the respondents. The study came out with a wide range of findings and these are summarized below.

## **5.1 Discussion of findings**

It was found that Covid19 propelled sexual reproductive health challenges, poverty and increased social insecurity for the female victims of early child marriage. Below are some of the findings gathered from participants and coping strategies employed by participants.

### **5.1.2 Increased gender based violence.**

The study revealed that covid19 resulted increased patterns of gender based violence. From the findings respondents revealed that the covid19 pandemic resulted in the home confinement of people and the probability of intimate partner violence increased especially for those who got married to each other before the required age and this is also because of lack of financial stability in the house. It shows that that gender based violence increased with the advent of covid19 especially for those who got married before the stipulated age of marriage.

### **5.1.3 increased social insecurity**

From the research findings it is clear that covid19 threatened the existence of the households of female victims of early child marriage. Majority of respondents stated that covid19 increased insecurity in marriage and because of increased vulnerability they feared that their husbands might run away from responsibility.

### **5.1.4 sexual reproductive health challenges**

It was found from the respondents of in-depth interview participants that covid19 propelled sexual reproductive health challenges .It was really difficult for them to attend immunization assessments for their children due to lockdown. Some of the respondents were alluded that issues to do with regular checks for pregnancy , developmental milestones tracking were really difficult

for the early victims of child marriage since most of them were doing it for the first time. In this case it is clear that the coming of covid19 affected access to sexual reproductive health services.

### **5.1.5 coping strategies**

The participants were asked about the coping strategies they are employing to rectify the challenges faced by covid19 to their existence. The female victims of child marriage are employing coping strategies such as traditional wisdom to sexual reproductive health, livelihoods adjustments among others. Also, it was found that the patriarchal nature of society is affecting the full operation of laws underpinning child marriage in that the participants feel shameful to report incidents of gender-based violence of which due to Covid19 these cases increased according to research.

### **5.2 Conclusions**

The female victims of child marriage are experiencing a lot of challenges as a result of the Covid19 pandemic. Covid19 added to a pile of previously encountered challenges and as such, they are facing accentuated difficulties relating to patriarchy, sexual reproductive health, economic hardships, increased gender-based violence among others. The coping strategies being employed are not sustainable and sufficient to meet the dire needs of female victims of child marriage in the context of Covid19. Due to financial and social instability, it can be concluded that the female victims of child marriage had differential exposure and differential vulnerability to Covid19 pandemic.



## **5.3 Recommendations**

The findings garnered in this research propelled the researcher to come up with the following recommendations

### **5.3.1 To the Government**

Government ought to adopt a comprehensive and national based strategy to economically empower vulnerable groups such as female victims of child marriage in a bid to relieve them of the challenges they are currently facing culminating from the Covid19 pandemic.

### **5.3.2 To female victims of child marriage**

To come up with home-based income generating projects to cushion themselves during the covid19 pandemic period. Female victims of child marriage should establish nutritious gardens at a large scale to sustain themselves.

### **5.3.4 To the social work profession**

There is need to intensify individual based strategies to help clients and to increase psycho-social support services through counseling, making initial linkages and referrals to help these clients who had covid19 induced challenges.

## **5.4 Chapter Summary**

Summarily, this chapter provides a summary, and gives conclusions and recommendations to the study based on the findings of the study. The recommendations intend to address researched themes in the study in order to help address the emerging challenges of female victims of child marriage in the context of Covid19.

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## **Appendices**

### **APPENDIX 1: KEY INFORMANTS INTERVIEW GUIDE**

My name is Nyasha Gandanhamo. I am a fourth-year student at Bindura University of Science Education, studying Social Work. As part of completing the degree programme, students are required to conduct individual research. Therefore, I am conducting research on the topic ‘Exploring the emerging challenges of female victims of child marriage in the context of covid 19. A case of Trojan mine in Bindura district’.

The research focuses on exploring the emerging challenges of female victims of child marriage in the context of covid 19, to examine the social implications of covid19 to victims of child marriage. You are kindly requested to be one of the key informants in this research study. Be reminded that your responses will be kept confidential and anonymous and will be used strictly for academic purposes. Also, your participation in this study is voluntary. I am going to engage you in an interview which will not last for more than 30 minutes as part of data collection. You may choose to excuse yourself at any part during the interview.

Start Time: .....

Date: .....

### **QUESTIONS**

#### **Section A: Biographic Information**

Respondent.....

Institution .....

Job title.....

Age .....

Marital Status .....

Educational Level.....

## **SECTION B. Emerging challenges of victims of child marriage in the context of covid 19**

1. What are the emerging challenges of female victims of child marriage in the context of covid19?
2. What are the social implications of these challenges to female victims of child marriage?
3. How did Covid19 reinforce challenges to maternal health services by female victims of child marriage?

## **Section C. How the Covid19 induced policy frameworks posed challenges to female victims of child marriage.**

4. Explain the various policy frameworks underpinning child marriage in the context of covid19?
5. How does the legislative and policy frameworks on child marriage affect female victims of early child marriage?

## **Section D: Recommendations**

6. Explore the coping mechanisms being employed by female victims of child marriage in the face of Covid19 induced challenges.
7. What recommendations do you give to female victims of child marriage pertaining the challenges they are facing?
8. What recommendations do you give to policy makers to rectify these challenges?

## **APPENDIX 2: Participant’s In-depth Interview Guide**

### **INTRODUCTION**

My name is Nyasha Gandanhamo. I am a fourth-year student at Bindura University of Science Education, studying Social Work. As part of completing the degree program, students are required to conduct individual research. Therefore, I am conducting a research on the topic ‘Exploring the emerging challenges of female victims of child marriage in the context of covid19. A case of Trojan mine in Bindura district.

The research focuses on exploring the emerging challenges of female victims of child marriage in the context of covid19, to examine the social implications of covid19 to victims of child marriage. You are kindly requested to be one of the key informants in this research study. Be reminded that your responses will be kept confidential and anonymous and will be used strictly for academic purposes. Also, your participation in this study is voluntary. I am going to engage you in an interview which will not last for more than 30 minutes as part of data collection. You may choose to excuse yourself at any part during the interview.

Start Time: .....

Date: .....

### **Section A: Biographic Information**

Respondent.....

Age 15-19 [ ] 20-24 [ ] 25-29 [ ] 30-34 [ ] 35-39 [ ] 40-44 [ ] 45-49 [ ] 50+ [ ]

Marital status Married [ ] Single [ ] Divorced [ ] Widowed [ ]

Level of education reached.....



**SECTION B. Emerging challenges of victims of child marriage in the context of covid19**

1. What emerging challenges are you facing in the context of covid19?
2. What are the social implications of these challenges to victims of child marriage?
3. How do you think the Covid19 pandemic affect access to maternal health services?

**Section C. How the Covid19 induced policy frameworks posed challenges to female victims of child marriage.**

4. Explain the various policy frameworks underpinning child marriage in the context of covid19?
5. How did the legislative and policy frameworks affect female victims of early child marriage?

**Section D: Recommendations**

6. What coping mechanisms are you employing to deal with the challenges you are facing?
7. What recommendations do you give to female victims of child marriage during and post pandemic era?
8. What recommendations do you give to policy makers to rectify these challenges?

## **APPENDIX 3: Focus group discussion GUIDE**

### **INTRODUCTION**

My name is Nyasha Gandanhamo. I am a fourth-year student at Bindura University of Science Education, studying Social Work. As part of completing the degree programme, students are required to conduct individual research. Therefore, I am conducting a research on the topic 'Exploring the emerging challenges of female victims of child marriage in the context of covid19. A case of Trojan mine in Bindura district.

The research focuses on exploring the emerging challenges of female victims of child marriage in the context of covid19, to examine the social implications of covid19 to victims of child marriage. You are kindly requested to be one of the key informants in this research study. Be reminded that your responses will be kept confidential and anonymous and will be used strictly for academic purposes. Also, your participation in this study is voluntary. I am going to engage you in an interview which will not last for more than 30 minutes as part of data collection. You may choose to excuse yourself at any part during the interview.

Start Time: .....

Date: .....

### **SECTION B. Emerging challenges of victims of child marriage in the context of covid19**

1. What are the emerging challenges of female victims of child marriage in the context of covid19?
2. What are the implications of these challenges to female victims of child marriage?

3. How did Covid19 affect the provision of maternal health services by female victims of child marriage?

**Section C. How the Covid19 induced policy frameworks posed challenges to female victims of child marriage.**

4. Explain the various policy frameworks underpinning child marriage in the context of covid19?
5. How did the legislative and policy frameworks affect female victims of early child marriage?

**Section D: Recommendations**

6. What recommendations do you give to female victims of child marriage pertaining the challenges they are facing?
7. What recommendations do you give to policy makers to rectify these challenges?

## **APPENDIX 4: CONSENT FORM**



**BINDURA UNIVERSITY OF SCIENCE EDUCATION  
FACULTY OF SOCIAL SCIENCE AND HUMANITIES  
DEPARTMENT OF SOCIAL WORK**

### **INTERVIEW CONSENT FORM**

#### **Introduction**

Dear Participant,

My name is Nyasha Gandanhamo. I am a fourth-year student at Bindura University of Science Education pursuing a Bachelor of Science Honors Degree in Social Work. As part of the requirements of the degree, the student is required to carry out a research project, which I kindly invite you to participate in. Before you decide to participate in the research, you are free to talk to anyone you feel comfortable about the research. If there may be some words, you do not understand you are free to ask, and I will explain. I am therefore kindly asking you to help me in carrying out my research by taking a few minutes of your time to respond to the following questions as openly and freely as you can. Your cooperation and support are greatly appreciated.

#### **Title of the study**

‘Exploring the emerging challenges of female victims of child marriage in the context of covid19.

#### **Purpose of the study**

To explore the emerging challenges of female victims of child marriage in the context of Covid19 pandemic.

#### **Ethical considerations; privacy, confidentiality and voluntary participation**

Be reminded that your participation in this study and in this interview is confidential. Your responses will be treated with confidentiality and will **ONLY** be used for the purposes of this research. Your participation is based on a voluntary basis. Therefore, you have the power to decide whether you feel comfortable or not to be interviewed. You may decide to withdraw from the interview at any moment.

**Contact details**

If you have any other questions, you can contact me on the following details

Email; Nyashagandanhamo2@gmail.com

Phone number; +263783297385

If you are willing to partake and contribute to and in the study, you can kindly fill your details in the spaces below.

Participant signature (pseudonym) .....

Signature of researcher.....

Date.....

With thanks

Nyasha Gandanhamo

**Appendix 5 Letter**

**DEPARTMENT OF SOCIAL WORK**



P. Bag 1020  
BINDURA, Zimbabwe

Tel: 263 - 71 - 7531-6, 7621-4

Fax: 263 - 71 - 7534

[socialwork@buse.ac.zw](mailto:socialwork@buse.ac.zw)

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**BINDURA UNIVERSITY OF SCIENCE EDUCATION**

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Date 10/12/21

**TO WHOM IT MAY CONCERN**

Dear Sir/Madam

**REQUEST TO UNDER TAKE RESEARCH PROJECT IN YOUR ORGANISATION**

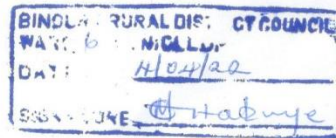
This serves to advise that Nyasha Gandanhamo Registration No.

B. 1850756 is a **BACHELOR OF SCIENCE HONOURS**

**DEGREE IN SOCIAL WORK** student at Bindura University of Science Education who is conducting a research project.

May you please assist the student to access data relevant to the study and where possible conduct interviews as part of the data collection process.

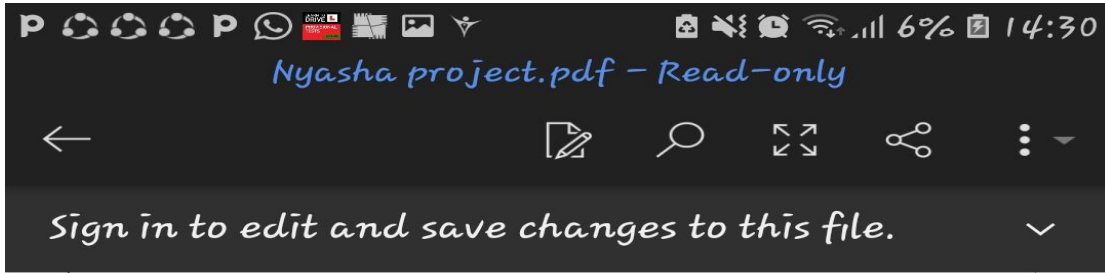
Yours faithfully



0773 177286 @habuye

pp **Dr. M. Zembere**  
**A/CHAIRPERSON – DEPARTMENT OF SOCIAL WORK**

Approved



## Nyasha project

### ORIGINALITY REPORT

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