

RESEARCH ARTICLE

Prediction Model of Health-Related Quality of Life in Adolescents with Early Marriage Decisions in Bandar Lampung

Model Prediksi Kualitas Hidup Terkait Kesehatan pada Remaja dengan Keputusan Menikah Dini di Kota Bandar Lampung

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Abstract

Early marriage in Lampung exhibited a rate above national average, reaching 7,11%. Early marriage would impact significantly for adolescents because their quality of life in physical, mental health and social functioning aspect was decreasing. This study aimed to analyze the differences in average quality of life scores and develop a predictive model for health-related quality of life among adolescents who decided to marry early in Bandar Lampung. This research utilized a quantitative analytical observational method with a cross-sectional approach. The population and sampling technique involved 116 individuals (both males and females) who entered their first early marriage during 2021-2025 period. Data were analyzed using Anova, T Test and multiple linear regression. The results of the bivariate analysis showed that only two variables were significantly associated with the quality of life of adolescents who married early ($p < 0.05$): parenting style ($p = 0.019$) and social support ($p = 0.045$). The results of multivariate analysis obtained an R^2 value of 10.6%, which meant that the research variables affected quality of life by 10.6%. In the multiple linear regression model, the model formula obtained was Y (Quality of Life) = $44.469 - 3.036$ (Parenting pattern) - 3.497 (Social support). This meant that one-unit increase in the parenting pattern variable, with social support considered constant, would decrease the quality of life of adolescents by 3.036 units. These findings indicate that social support and parenting variables act as factors that encourage a decline in the quality of life of adolescents, not as protective factors that protect their quality of life.

Keywords: adolescents, early marriage, parenting style, quality of life, social support

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Abstrak

Pernikahan dini di Lampung memiliki angka pernikahan yang tinggi, yaitu sebesar 7,11% yang berada di atas rata-rata nasional. Pernikahan dini akan memberikan dampak yang signifikan pada remaja melalui penurunan kualitas hidup baik dari aspek fisik, psikis, kesehatan mental, hingga fungsi sosial mereka. Tujuan penelitian ini adalah menganalisis perbedaan rata-rata skor kualitas hidup sekaligus menyusun model prediksi kualitas hidup terkait kesehatan pada remaja yang memutuskan untuk menikah dini di Bandar Lampung tahun 2025. Metode penelitian menggunakan observasi analitis kuantitatif dengan pendekatan cross-sectional. Populasi dan teknik sampling yaitu perempuan atau laki-laki yang menikah dini pertama kali pada periode 2021-2025 sejumlah 116 orang. Uji Anova, uji T independen, dan regresi linear ganda digunakan untuk menganalisa data. Hasil analisis bivariat menunjukkan dua variabel yang berhubungan dengan kualitas hidup remaja yang menikah dini serta masuk ke pemodelan multivariat ($p < 0,05$) yaitu pola asuh ($p = 0,019$) dan dukungan sosial ($p = 0,045$). Hasil analisis multivariat didapatkan nilai R^2 sebesar 10,6% yang artinya variabel penelitian mempengaruhi kualitas hidup sebesar 10,6, %. Dalam Model regresi linier berganda didapatkan rumus model Y (Kualitas hidup) = $44,469 - 3,036$ (Pola asuh) - $3,497$ (Dukungan sosial). Artinya kenaikan satu satuan pada variabel pola asuh, dengan dukungan sosial dianggap tetap, maka kualitas hidup remaja akan menurun sebesar 3,036 satuan. Temuan ini menunjukkan bahwa variabel dukungan sosial dan pola asuh berperan sebagai faktor yang mendorong penurunan kualitas hidup remaja, bukan sebagai faktor protektif yang melindungi kualitas hidup mereka.

Kata kunci: remaja, pernikahan dini, pola asuh, kualitas hidup, dukungan sosial

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Highlight:

- The decision to marry at an early age is proven to exert a significant negative impact on adolescents, resulting in a diminished quality of life across physical, psychological, mental health, and social functioning dimensions.
- Among the numerous factors examined (such as education level, employment status, and income), only parenting styles and environmental social support demonstrated a statistically significant association in influencing variations in these adolescents' quality of life.
- Parenting styles (particularly the permissive type) and social support in this context acted as catalysts for declining quality of life rather than protective factors, as surrounding social support often normatively encouraged early marriage without ensuring the adolescents' post-marital mental and economic readiness.

INTRODUCTION

Adolescents who decide to marry early face substantial risks to both their psychological and physical well-being. Ranging from psychological unpreparedness (Syalis and Nurwanti, 2020; Yendork et al., 2025) to reproductive health risks (Fatimah

et al., 2021), early marriage occurs due to premature decision-making and adolescents' lack of understanding regarding the risks of marrying at a young age. Marriage Law No. 16 of 2019 stipulates that legal marriage requires individuals to be over 19 years old. This restriction is intended solely for the welfare and best interests of adolescents (JDIH BPK, 2019). On the other hand, many adolescents still apply for marriage dispensations or enter into unregistered (*siri*) marriages. The Religious Courts recorded 13,457 marriage dispensation applications caused by premarital pregnancy, while another 2,406 applications were driven by economic factors. Lampung Province recorded a child marriage rate of 7.11% in 2023, which remains above the national average of 6.92% (BPS, 2026).

The decision to marry early is influenced by various determinant factors, such as economic conditions, parental influence, environmental factors, as well as strong cultural norms and traditions (Edmeades *et al.*, 2022; McGavock, 2021; Misunas *et al.*, 2021; Syalis and Nurwati, 2020). Additionally, social environment factors leading to premarital pregnancy contribute to this issue (Sofiana, 2020), domestic violence and divorce also play significant roles in driving the occurrence of early marriage (Fatimah *et al.*, 2021). The impact of early marriage decisions on quality of life is highly significant, ranging from physical risks—such as fetal growth restriction, low birth weight (Diabelková *et al.*, 2023), premature birth, hypertension, eclampsia, and postpartum hemorrhage due to reproductive organ immaturity (Pietras *et al.*, 2024) to psychosocial impacts, including increased chronic stress, domestic violence, and reduced self-esteem (Biswas *et al.*, 2020; Karimli *et al.*, 2025).

Early marriage prevention efforts represent a critical factor influencing quality of life, requiring a comprehensive approach that encompasses education on its negative impacts, the reinforcement of family values, and targeted interventions against traditional cultural factors that perpetuate the practice. Within this prevention strategy, religious leaders play a crucial role as stakeholders possessing spiritual authority, high public trust in impoverished communities, and the capacity to influence cultural norms at the grassroots level (United Nations Development Programme, 2014). On the other hand, exposure to mass and social media can serve as a preventive instrument by fostering an unwillingness among adolescent girls to marry early due to shifts toward more egalitarian perspectives and greater openness to self-advancement (Zhang *et al.*, 2023). The ultimate effectiveness of these prevention programs and media messages is heavily determined by the adolescents' own perceptions, wherein perception toward early marriage refers to individual beliefs regarding underage marriage shaped by various underlying factors.

The impact of child marriage remains a critical issue in Indonesia, as it contributes to low family quality of life and poor mental health outcomes (Sezgin and Punamäki, 2020). Prolonged distress resulting from psychological unpreparedness can trigger severe depression and social maladaptation (Fatimah *et al.*, 2021; Syalis and Nurwati, 2020). Therefore, this study is crucial for providing an overview of the relationship between adolescents' quality of life and the underlying determinants of early marriage in Bandar Lampung City, a region characterized by diverse ethnicities, cultures, and religions. Furthermore, the author analyzes these relational trends to inform efforts aimed at improving adolescents' future quality of life.

METHODS

This study used an analytic observational design with a cross-sectional approach. It focused on male and female adolescents who had married before the age of 19, noting that an adolescent seeking a marriage certificate must have reached exactly 19 years of age, to the day and month, at the time of the marriage contract. The minimum sample size was calculated using the Slovin formula and was estimated at 105 subjects; to account for potential dropouts during data collection, 10% was added, giving a final sample of 116 participants, comprising 7 males and 109 females. The small number of male subjects should be considered when interpreting the characteristics of quality of life in the study population.

The samples in this study were drawn from the jurisdiction of the Tanjung Karang Religious Court in Bandar Lampung City using a simple random sampling technique. When selected candidates could not participate in the study, the author employed a snowball sampling approach within the same geographical region. Bivariate analysis was conducted using ANOVA and independent sample t-tests, followed by multivariate analysis utilizing multiple linear regression. This study obtained ethical clearance under official approval certificate No. 800/UN26.18/PP.05.02.00/2026, issued on February 19, 2026, by the Health and Medical Research Ethics Committee at the Faculty of Medicine, Universitas Lampung. Meanwhile, the study was conducted from February 20 to March 17, 2026.

This study involved parents who raised the adolescents prior to marriage as subjects to measure the parenting style variable. Meanwhile, the primary unit of observation comprised adolescents who were under 19 years old at the time of marriage and were married between 2021 and 2025, selecting either the husband or the wife. The exclusion criteria for this study included adolescents who were divorced or entering a second marriage, in order to avoid the confounding influence of divorce or prior marital experience on the subjects' quality of life.

Data were collected using several research instruments. The *World Health Organization Quality of Life–BREF* (WHOQoL-BREF) was used to obtain the mean quality-of-life score; it contains 24 questions covering four dimensions: physical health, social relationships, environment, and family. The *Parenting Style and Dimensions Questionnaire–Short Form* (PSDQ) was used to identify the dominant parenting style among the authoritarian, permissive, and democratic types. The PSDQ was completed by the subjects' parents, with items grouped according to the characteristics of the three parenting styles above. After the questionnaire was completed and coded, the total score for each group of items was averaged, and the group with the highest mean indicated the subject's dominant parenting style. The *Social Support Questionnaire* (SSQ) was used to assess the social support perceived by the subjects; this instrument comprises 24 items across six subscales: *reliable alliance*, *attachment*, *guidance*, *nurturance*, *social integration*, and *reassurance of worth* (Lahey and Cohen, 2000). A perception-of-early-marriage questionnaire captured perceptions in the subjects' surroundings, and an early-marriage-prevention culture questionnaire described the extent to which subjects interacted with mass media related to early marriage.

The collected data were subsequently categorized and entered into the SPSS version 26 software program for statistical analysis. Thereafter, the data analysis process was divided into three stages. Univariate analysis was conducted to examine the descriptive characteristics, frequency distribution patterns, and percentages of each

variable. Bivariate analysis was performed to test the relationships between each independent variable and the dependent variable (quality of life, measured on a ratio scale), following data normality testing as a primary assumption. This bivariate analysis utilized Analysis of Variance (ANOVA) for ordinal variables with more than two groups—specifically, education level (adolescents, fathers, and mothers) and parenting styles. Independent sample t-tests were applied to nominal variables, comparing subjects who were employed versus unemployed, family income below versus above the regional minimum wage (UMR), as well as variables categorized into good versus poor (perceptions of early marriage, marriage prevention culture, and mass media exposure). Pearson correlation analysis was employed for ratio-scaled variables to assess the direction and strength of linear relationships among continuous variables that met the normality assumption. Finally, multiple linear regression modeling was utilized for multivariate analysis on variables meeting the entry criteria (p -value < 0.25). This modeling aimed to predict the magnitude of effect and the direction of simultaneous linear relationships among several independent variables on the quality of life of early-married adolescents.

RESULTS AND DISCUSSION

Subject characteristics

The univariate analysis of subject characteristics covered the education of the adolescent, father, and mother; parenting style; employment; adolescent income; the adolescent's perception of early marriage; early-marriage-prevention culture and mass-media exposure; and age at marriage. The participants' data are presented in Table 1.

Table 1. Subject characteristics (n=116)

Variable	n	%
Sex		
Male	7	6.0
Female	109	94.0
Age at marriage		
Under 15 years	7	6.0
Aged 15 years and above	109	94.0
Subject education		
Primary school	28	24.1
Junior high school	68	58.6
Senior high school	20	17.2
Employment status		
Employed	90	77.6
Not employed	26	22.4
Father's education		
Primary school	43	37.1
Junior high school	53	45.7
Senior high school	20	17.2
Mother's education		
Primary school	43	37.1
Junior high school	60	51.7
Senior high school	13	11.2

Variable	n	%
Family income		
>UMP	5	4.3
<UMP	111	95.7
Social Support		
Good	63	54.3
Poor	53	45.7
Parenting style		
Democratic	22	19.0
Authoritarian	39	33.6
Permissive	55	47.4
Perception of early marriage		
Good	77	66.4
Poor	39	33.6
Early-marriage-prevention culture		
Good	34	29.3
Poor	82	70.7
Mass-media exposure		
Good	61	52.6
Poor	55	47.4
Total	116	100.0

Source: Primary data, 2026

Table 1 demonstrates that the majority of subjects married at a mean age of 17.12 years, with the youngest age recorded at 13 years. The vast majority of participants were female (94%), and a substantial proportion of adolescent subjects completed junior high school education, totaling 68 individuals (58.6%). Within the subjects' families, 90 individuals were employed (77.6%), while 111 individuals (95.7%) earned incomes below the Provincial Minimum Wage (UMP). Furthermore, 63 subjects (54.3%) reported good social support, 77 subjects (66.4%) demonstrated favorable perceptions toward early marriage, 82 subjects (70.7%) perceived early marriage prevention culture as poor, and 61 subjects (52.6%) experienced good mass media exposure. Regarding parental education, 53 fathers (45.7%) and 60 mothers (51.7%) held a junior high school education. Data collection on parenting styles applied to early-married adolescents revealed that permissive parenting was the most predominant style, accounting for 55 subjects (47.4%).

Table 2. Analysis of quality-of-life dimensions

Variable	Minimum	Maximum	Mean	Standard deviation
Physical dimension	7	39	27.06	8.570
Psychological dimension	13	67	36.09	12.988
Social dimension	8	75	36.72	16.617
Environmental dimension	0	50	30.13	12.506
Overall quality of life	16	50	32.44	8.643

Source: Primary data, 2026

Table 2 reveals that the mean age at marriage was 17.12 years. Furthermore, the

quality of life variable was delineated into four distinct dimensions, yielding the following mean scores for each component: the physical domain mean score was 27.06; the psychological domain mean score was 36.09; the social domain mean score was 36.72; the environmental domain mean score was 30.13; and the overall quality of life mean score was 32.44.

Table 3. Univariate analysis of independent variables against quality of life

Variable	Number (n)	Mean	Standard deviation	<i>p-value</i> ¹
Age at marriage	116	17.12	1.089	0.827
Subject education				
Primary school	28	31.00	8.228	0.431
Junior high school	68	33.31	8.537	
Senior high school	20	31.50	9.605	
Father's education				
Primary school	43	32.00	8.269	0.706
Junior high school	53	33.15	8.674	
Senior high school	20	31.50	9.605	
Mother's education				
Primary school	43	31.29	8.789	0.446
Junior high school	60	33.43	8.489	
Senior high school	13	32.91	8.871	
Income				
>UMP	5	35.60	4.930	0.406
<UMP	111	32.30	8.760	
Parenting style				
Democratic	22	36.64	7.410	0.019*
Authoritarian	39	32.69	9.423	
Permissive	55	30.58	8.032	
Social support				
Good	63	33.89	9.298	0.045*
Poor	53	30.72	7.520	
Perception of early marriage				
Good	77	32.53	8.206	0.872
Poor	39	32.26	9.558	
Early-marriage-prevention culture				
Good	34	33.32	7.646	0.481
Poor	82	32.07	9.043	
Mass-media exposure				
Good	61	32.34	10.211	0.901
Poor	55	32.55	6.574	

Note: *p-value*¹ was obtained from a combination of bivariate tests according to the number of groups in the data: independent t-test for variables with two groups, ANOVA for variables with more than two groups, and Pearson correlation for ratio-scale variables; * = indicates eligibility for multivariate modeling ($p < 0.25$).

The bivariate analysis (Table 3) identified two main variables significantly associated with the quality of life of adolescents who married early: parenting style ($p = 0.019$) and social support ($p = 0.045$), both with $p\text{-value} < 0.25$, indicating an association with quality of life. Parenting style comprised three categories (democratic, authoritarian, and permissive). To determine which parenting style groups differed most sharply in quality-of-life scores, a *post hoc* test using Fisher's Least Significant Difference (LSD) was performed, as shown in Table 4. These two variables were then treated as candidates for the multiple linear regression in Table 5.

Based on the ANOVA test and subsequent post-hoc testing using Fisher's Least Significant Difference (LSD) in Table 4, there was a statistically significant difference in mean quality of life scores between adolescents receiving democratic parenting and those receiving permissive parenting, with a significance value ($p\text{-value}$) of 0.005 ($p < 0.05$). The mean quality of life score under democratic parenting was 6.055 points higher than under permissive parenting.

Table 4. Post hoc analysis of overall quality of life and parenting style

	Parenting style	Parenting style	Mean Difference	Std. Error	$p\text{-value}$
	Democratic	Authoritarian	3.944	2.245	0.082
		Permissive	6.055*	2.124	0.005*
LSD	Authoritarian	Democratic	-3.944	2.245	0.082
		Permissive	2.110	1.763	0.234
	Permissive	Democratic	-6.055*	2.124	0.005*
		Authoritarian	-2.110	1.763	0.234

Note: *Post hoc test using Fisher's Least Significant Difference (LSD)

Multivariate analysis using multiple linear regression was performed to determine a predictive model while identifying the independent variables with the strongest relationship to the quality of life of early-married adolescents. The detailed results of this analysis are presented in Table 5.

Based on Table 5, a coefficient of determination (R^2) of 0.106 was obtained. This indicates that variations in parenting styles and social support simultaneously contribute 10.6% to the quality of life of early-married adolescents, while the remaining 89.4% is influenced by other factors outside the research model.

Table 5. Results of the multivariate analysis

Model	B	$p\text{-value}$	R^2
Constant	44.469	$<0.001^*$	0.106
Parenting style	-3.036	0.003*	
Social support	-3.497	0.025*	

Note: *Multiple linear regression; significant if $p < 0.05$

Multivariate modeling

Social support was the variable most strongly associated with quality of life (Table 5): Each one-unit increase in the social support score was associated with a 3.497-point decrease in the quality-of-life score, a larger association than that of parenting style (3.036). The multivariate model is presented below.

The resulting regression equation was:

$$Y \text{ (quality of life)} = 44.469 - 3.036 \text{ (parenting style)} - 3.497 \text{ (social support)}.$$

This study provides a broad picture of the factors related to the quality of life of adolescents who married early in Bandar Lampung. Overall, the subject characteristics show that the mean age at marriage was 17 years, with the youngest participant marrying at age 13. Which is below the minimum marriage age set by Law No. 16 of 2019. This confirms that early marriage remains a substantial phenomenon requiring attention from various stakeholders.

Association between education and quality of life among adolescents who married early

The results show that most subjects had only a basic level of education: 82.7% had attended only primary and junior high school. In line with this profile, the sample was predominantly female (94.0%). Female adolescents are often placed in a more vulnerable position because of limited access to education and cultural pressure that emphasizes the domestic role of wife and mother (John *et al.*, 2019). This finding is consistent with Rahayu and Wahyuni (2020), who reported that most female adolescents who married early do not complete the nine years of basic education and face limited access to health services and legal protection. Low education is one of the factors frequently linked to early marriage and lower quality of life. Education plays an important part in strengthening an individual's capacity to obtain decent work and improve well-being (Shrestha and Khanal, 2023). In this study, however, no significant relationship was found between the subjects' education level and quality of life ($p = 0.431$). Table 1 shows the relatively low and homogeneous education level of the subjects: 28 had completed primary school and 68 had completed junior high school. The participants population can therefore be described as predominantly low-educated. The scarcity of higher education (only 20 senior-high-school graduates, or 17.2%) may explain why the benefit of education for quality of life was not clearly apparent. This finding differs from other studies reporting that higher education is associated with better quality of life, particularly in the mental-health dimension (Gil-Lacruz *et al.*, 2020).

Association between employment status, family income, and quality of life

Employment status and family income showed no significant relationship with quality of life. Although most subjects were employed (77.6%), often under contract or as salaried staff, Table 1 shows that 95.7% of the families earned below the Lampung provincial minimum wage. This suggests that being employed is not always accompanied by better quality of life, especially when work is combined with low family income, high economic pressure, and financial instability. Child marriage tends to leave couples more vulnerable to stress, anxiety, and dissatisfaction in the household. These psychological conditions are worsened by economic constraints and by lost educational and employment opportunities, which ultimately produce financial powerlessness (John *et al.*, 2019).

Association between parental characteristics and quality of life among adolescents who married early

Family characteristics such as the father's and mother's education showed no significant relationship with the quality of life of adolescents who married early. This is likely because the parents shared a similar, mostly low, educational background, which limited the variation in social resources able to affect quality of life. Other studies have found that the influence of education on quality of life becomes more apparent once an individual or family reaches a higher level of education (Gil-Lacruz et al., 2020). Moreover, once adolescents enter married life, the direct link between parental education and the subject's quality of life tends to weaken.

Association between parenting style and quality of life among adolescents who married early

Unlike the other variables, parenting style and social support were significantly related to quality of life. Adolescents raised with a democratic parenting style had the highest mean quality of life compared with the authoritarian and permissive styles. This finding is in line with Baumrind's theory (1966), which holds that a democratic style balances demands and responsiveness and thereby supports optimal psychosocial development; other studies likewise report that a democratic style is associated with better psychological well-being, stronger emotion regulation, and higher life satisfaction (Heng et al., 2020; Pérez-Fuentes et al., 2019; Santrock, 2019).

The multivariate analysis showed a negative association between parenting style and quality of life ($B = -3.036$). This suggests that although a democratic style is theoretically protective, in the context of early marriage its positive contribution may be offset by more dominant social-environmental factors. An adolescent's social environment plays an important part in shaping behavior and well-being, so good parenting does not always guarantee higher quality of life when the adolescent faces the pressures of married life at an immature age (Sarni et al., 2024).

Social support was also significantly related to quality of life, but in a negative direction ($B = -3.497$). Conceptually, social support is defined as the presence of people who provide attention, esteem, and a sense of security (Drevland et al., 2025). In the context of early marriage, however, this support is often normative, taking the form of encouragement to marry as a way of avoiding social risks such as dropping out of school or community stigma (Biswas et al., 2020). Support oriented toward hastening marriage, without accompanying psychological, social, and economic readiness, can harm adolescents' quality of life after marriage.

Association between perceptions of early marriage, culture, and mass-media exposure and quality of life among adolescents who married early

Perception of early marriage, culture, and mass-media influence showed no significant relationship with quality of life. This lack of significance may be explained by the homogeneous social conditions of the subjects and the complexity of the factors affecting quality of life. Cultural beliefs and values are not always directly linked to subjective well-being, because individuals can adjust to social demands without any improvement in quality of life (Lebni et al., 2023). Likewise, mass media contribute more to knowledge and awareness than to well-being itself (Musfiroh et al., 2025).

The coefficient of determination (R^2) of 0.106 indicates that parenting style and social support explain only 10.6% of the variation in quality of life among adolescents

who married early. This underlines that quality of life is a multidimensional construct closely related to other factors not examined here, such as mental health, marital relationship quality, emotional readiness, and social environment.

Parenting style and social support were strongly related to quality of life, but in a negative direction. Together, the independent variables explained only 10.6% of the variation in quality of life among adolescents who married early. These individual-level factors of the adolescents involved in the marriage accounted for 10.6% of the dependent variable, while the remaining 89.4% was influenced by factors that were not examined. This opens the way for further research into that remaining 89.4%. Family or environmental tendencies that push or permit adolescents to marry early, that support them afterward yet also keep them from maturing through family intervention, and other external factors affecting the individual are interesting variables with the potential to shape adolescents' quality of life.

This suggests that even when parenting is appropriate and perceived social support is sufficient, these two factors still fail to raise adolescents' quality of life; indeed, the decision to marry early tends to lower it. The effect is compounded when adolescents who marry early face post-marital challenges, such as lost employment opportunities, fewer chances to build the skills needed to support the family economically, and family interference in the internal problems of the young couple. These results confirm that the quality of life of adolescents who married early is shaped not only by individual factors but also by family dynamics and the social environment. Interventions that focus on preventing early marriage, improving adolescents' psychosocial readiness, strengthening family functioning, and engaging families, community figures, and educational institutions in prevention are therefore important steps toward improving the quality of life of this group in the future.

CONCLUSION

This study concludes that parenting style and social support are statistically significantly related to the quality of life of adolescents who decided to marry early in Bandar Lampung. The multivariate model showed that each one-unit increase in the parenting-style score, with social support held constant, was associated with a 3.036-point decrease in the quality-of-life score, and the same pattern held for an increase in social support. Both variables were therefore inversely associated with quality of life in this study. The prediction model explained only 10.6% of the quality of life of these adolescents, which means that other, unexamined variables are also important influences. It should be acknowledged that the variables studied tended to capture marriage-related factors from within the adolescents themselves and could not yet measure whether parenting style or social support leaned toward discouraging early marriage or, conversely, made adolescents more inclined to marry early when sufficiently supported by those around them.

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