Perceived Parental Relationships and the Awareness Level of Adolescents Regarding Menarche

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KEYWORDS Parental Relationship. Menarche. Perception. Adolescents

ABSTRACT The present study aims to know the perceived relationships and the awareness level of adolescents regarding menarche. The sample consists of 400 adolescent girls in the age group of 10-19 years from both the urban as well as rural areas of Jammu district. Random sampling technique was used to select the sample. Questionnaire and parent child relationship scale (PCRS) was used to collect the data. Chi-square values reveal that there is a significant difference in the awareness level of adolescent girls of urban and rural areas of Jammu, regarding menarche and related issues, but urban adolescent girls have comparatively better knowledge regarding these issues than rural adolescent girls. Urban adolescent girls perceive their parents more protecting, loving and believe in object reward, where as rural adolescent girls perceive their parents to be more symbolically punishing, rejecting, believing in object punishment. The perception of adolescent girls(R/U) towards their mothers varies significantly on dimensionsprotecting, demanding, indifferent, symbolically reward, loving, object reward favoring urban mothers whereas, the perceptions for fathers are equally favorable for rural as well as urban on few dimensions. So it seems that perceived relationships of adolescent girls with their mothers play an important role in the transfer of knowledge regarding issues in family life education. Hence, parental involvement for providing proper knowledge should be enhanced during adolescent years as fathers are still not seen as a source of information. Also it was found that Friends/peers were very important source of information in this regard. So there is a need to teach adolescents about their body organs and their functions since ignorance perpetuates myths and mis-belief. In societies such as ours where parents don't normally discuss such matters with their children, this could be achieved by incorporating family life education/ sex education in school curricula.

INTRODUCTION

WHO has defined adolescence as the age group of 10-19 years. It is characterized by physical, psychological, and social change, transformation and maturation that take place during this period. The term adolescence literally means to emerge, to achieve identity. According to estimates, adolescents represent 1/3rd of the global population with 84% of them residing in developing countries. These young people are not only present in larger numbers than before, but their proportion is rising relative to other age groups. Many research studies have revealed that adolescent girls generally lack adequate knowledge about sexual matters and contraception which results in early pregnancy, increased pre-marital sexual activity, increased risk of STD infections including HIV/AIDS, maternal morbidity and mortality and unsafe abortions. They are growing up in the world in which they experiment more, make more choices and take risks and learn by their own experiences than by those of others.

In a study conducted by Hovell (1994) on Family Influences on Adolescents Sexual Behavior, it was revealed that conservative maternal attitudes about sex delay the development or sex behavior. Other study was done by Savara and

Sridhar (1992) and they noted that parents and teachers act as a source of providing sex knowledge in only 16.30% of urban, educated Indian men. Generally they avoid any mention to sex in their day-to-day relationships with their children. This is because it is still treated as a taboo subject in Indian society, and secondly as they themselves lack scientific knowledge about it. The result is that many teenagers turn to their peers or media for related information, which is often inaccurate and insufficient. Also WHO estimates that 1 in 20 teenagers worldwide acquires an STD each year (Coonly and Koontz, 1994).

Looking at the above, it is clear that adolescents have to be given a specific support that is intended for them alone. There is a need to work out for them to provide essential knowledge in important aspects of life such as Health, Nutrition, Hygiene, Reproductive system and organs, HIV/AIDS, Family Planning and Birth Control Methods through Family Life Education Program which will make the adolescents more responsible towards sexual attitudes. Family Life Education (FLE) is defined as Education for Human Development FLE is concerned with learning about living, family and social relationships and personal development. The curricula of FLE should therefore encompass information content to promote understanding of reproductive health, inculcation of positive value and healthy attitude towards sexuality, improved interpersonal relationship and skill building for good reproductive health. Against this background, the present study attempts to examine the perceived relationship of adolescents with their parents and their awareness regarding menarche.

METHODOLOGY

The sample group of the study consists of 400 adolescent school - going girls in the age group of 10-19 years both from rural as well as urban areas of Jammu. Random sampling technique was used to select the sample. Questionnaire for adolescent girls and Parent child relationship scale (PCRS) were used as tools for the collection of data. The questionnaire was used to know the awareness level of adolescent girls regarding the menarche. The self- administered Questionnaire (in Hindi) consisted of 2 sections; Section 1- it contained general information on the demo-graphic profile of the respondent. And Section 2 it included some open ended questions related to menstruation-age at menarche, prior knowledge, restrictions imposed during mens-truation their sources of information regarding these issues. Data Analysis: Data was systematically coded and tabulated under different headings. Coding was done on the basis of Sample. For data analysis the statistical method i.e. Chi square values were calculated which revealed that there is a significant difference in the awareness level of rural and urban adolescent girls regarding menarche.

RESULTS

The table 1 reveals the mean age of either of the parents of urban was 36-40 years and in rural sample, it was 46-50 years; mean of religion in

Table 1: Background information about parents

Variables (mean)	$Rural\ (n=200)n$	$Urban\ (n=200)$
Age group (in yrs)	46-50	36-40
Religion	Hindu	Hindu
Mean no of children they have	3	2
Mean Age at marriage	20	17
Mean Qualification of the parents	Under Matric	Matric

both the communities was Hindu; mean no. of children in urban areas was 2 and in rural, it was 3; mean age of getting married in urban area was 19 and in rural area, it was 17 and mean educational status of urban parents were Matric passed and rural parents were under Matric. The educational status of parents is low. Awareness Regarding Menarche: Table 2(a) reveals that majority (38.5%) of the girls from urban areas considered menstruation as youth age with 9% saying that menstruation means becoming sensitive. Rural sample on the other hand showed that 28% of them felt it was the youth age and 3% of them think that it is an ability to conceive. None of them gave any scientific reply for this though they are studying this in their course.

Table 2a: View about menstruation

Responses	Urban	%	Rural	%
Dirtiness	31	15.5	29	14.5
Youth age	77	38.5	58	28
Physical change	14	7	17	8.5
Become sensitive	9	4.5	8	4
Ability to conceive	31	15.5	6	3
Natural phenomenon	13	6.5	26	13
Not aware	25	12.5	56	28

 $\chi^2 = 169.205*$

Table 2 (b) shows that 85% of the urban sample came to know about menstruation after experiencing it where as in rural sample 93% of the respondents become aware of it only on experiencing it.

Table 2(b): Come to know about menstruation

Responses	Urban	%	Rural	%
After	170	85	186	93
Before	30	15	14	7

 $\chi^2 = 243.360*$

It is clear from the table 2 (c) that 79% of urban sample revealed some apparent changes after experiencing menarche with 3-4% of them being not aware of it at all. 68% of the rural

Table 2(c): Find any change after menarche

Responses	Urban	%	Rural	%
Yes	159	79.5	136	68
No	31	15.5	53	26.5
Not aware	7	3.5	11	5.5

 $\chi^2 = 526.80$ *

sample responded to the fact that some changes were there on experiencing menarche where as 5-6% were still unaware of it.

Table 2(d) shows that 46.5% of the urban girls believe in avoiding worship during these days (periods) where as 9% of them said that they should resist from household chores. In case of rural girls, 50.5% had the same perception of not going to religious places while 8% believed in resisting from any routine work

Table 2(d): Kind of work should be avoided during these days

Responses	Urban	%	Rural	%
Should not run	26	13	24	12
Avoid worship	93	46.5	101	50.5
Should not eat sour food	20	10	16	8
Should not do heavy work	19	9.5	21	10.5
Should do her routine wor	k 18	9	16	8
Should not do kitchen wor	k 24	12	22	11

 $\chi^2 = 295.932*$

Table 2(e) shows that 40.5% of the urban girls are not allowed to worship during these days (periods) where as 9% of them said that they do their routine household work. In case of rural girls, 42.5% of them are not going to religious places while 8% of them do their routine work.

Table 2(e): Kind of work you are not allowed to do during these days

Responses	Urban -		% K	Rural	%
Not to run	2	0	10	18	9
Not to worship	8	1	40.5	85	42.5
Can't eat sour food	3	2	16	26	13
Not allowed to do heavy	work 1	3	6.5	16	8
Do our routine work	1	8	9	22	11
Not to do kitchen work	3	6	18	33	16.5

 $\chi^2 = 194.248*$

Table 2 (f) shows that 100% of the urban girls believe in prior knowledge regarding menstruation where as 86.5% of the rural sample favored the same with 12.5% saying no to it.

Table 2(f): Do you think that a girl should know about menstruation before she experiences it?

Response	Urban	%	Rural	%	
Yes	200	100	173	86.5	
No	-	-	25	12.5	
Not aware	-	-	2	1	

 $\chi^2 = 861.70*$

Chi-square values reveal significance difference between the attitude of urban and rural adolescent girls.

Parent Child Relationship Scale (PCRS): In order to find out the kind of relationship the adolescents have with their parents, Parent-child relationship scale was applied on these girls. They rated their parents on 5 point scale. This scale has 100 statements pertaining to parent-child relationship. Every statement has to be scored from both the father's as well s mother's point of view.

Table 3 reveals that majority (36.5%) of rural father's believe in giving symbolic reward for their children, while rural mothers showed protecting attitude towards their children. On the other hand, maximum urban fathers and mothers found to be protective (36.1%).

Table 3: Parent child relationship scale

Dimensions			attitude Urban	Mother's attitude Rural/Urban		
	Med	an	t-test	Me	an	t-test
Protecting	35.4	36.1	-1.425	35.1	37.3	-3.659
Symbolic punishment	29.9	28.5	2.291	30.3	30.3	-0.042
Rejecting	24.7	22.5	2.752	22.6	23.6	-0.042
Object punishment	23.0	21.9	1.497	23.1	23.2	-0.242
Demanding	31.2	32.0	-1.180	31.6	33.0	-2.120
Indifferent	23.7	32.0	-13.08	24.5	27.7	5.537
Symbolic reward	36.5	31.5	6.99	31.9	36.7	-7.808
Loving	31.6	35.2	-5.396	32.4	35.7	-5.141
Object reward	25.8	31.2	-7.750	26.0	30.9	-7.362
Neglecting	21.6	24.1	-3.418	22.4	23.2	-1.145

Minimal responses in case of rural fathers and mothers revealed a neglecting attitude towards their children where as urban fathers believed in object punishment. In case of urban mothers, it was found that they favored object punishment as well as found to be neglecting since both the dimensions scored equal mean values.

DISCUSSION

The overall knowledge about menarche was poor among the rural as well as urban adolescent girls. The significance of this finding becomes apparent when one considers the fact that these girls are studying science subjects in their course.

^{*} Chi-square values reveal significance difference between the attitude of urban and rural adolescent girls.

However, urban adolescent girls were having relatively more awareness on the subject (as chisquare values reveal a significant difference between urban and rural adolescent girls).

Majority of the girls evaluated their knowledge as adequate but in fact after research, it was found that they were quite ignorant about these facts. None was able to give any scientific explanation for menarche. This further complicates the scenario because such an attitude may lead to pseudo-confidence among such girls which could have a negative effect on their reproductive health. There is enough evidence to suggest that appropriate knowledge regarding sex and sexual issues influences the reproductive behavior of adolescents' teenagers (Russel et al., 1992). A study was conducted in 6 metropolitan cities of India and found that 40% of the prostitutes were induced when they were less than 18 years of age (CSWB, 1991 as cited in Thapar, 1998). Adolescent marriages and subsequent teenage pregnancies are still common in the area under study, as well as in many other parts of India (Sharma and Sharma, 1992).

It is evident from this study that even urban adolescent girls in Jammu do not possess sufficient knowledge regarding menarche. Although this topic is there in their curricula still they are not aware of it. After interviewing some of these girls, they said that their teachers do not teach them this topic. Also schools are inadequately equipped to meet the challenge. So they should be provided with unbiased, unmoralistic information so that they are better informed and better adjusted to their changing physical, biological and emotional needs.

In societies, such as ours where parents hesitate from discussing such matters with their

children as it is still considered a taboo, this could be achieved by incorporating family life education or sex education in school curricula. Both parents and teachers play an important role in bringing about this desirable change and socially acceptable approaches to sex education for the dissemination of scientific knowledge about sexuality and related issues.

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