

## **Reproductive-Sexual Health Communication Between Mother and Adolescent Girls: Association of Familial Patterns and Mothers' Education**

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This study is an empirical attempt to understand parental communication about reproductive and sexual health with adolescent girls. This paper examines the nature, pattern, and barriers to communication from the parental perspective. Adolescence is considered one of the significant milestones in the life span as it determines the future life of an individual. The reproductive and sexual health of teenagers depends on healthy practices during adolescence. In this view, parents play a vital role in the adolescence phase by whom knowledge and information will be shared with adolescent girls through communication.

The present study was carried out in two blocks of the Ballari District, namely Sandur and Hospet. To achieve the study's objectives, it was adopted a Descriptive Research Design employing quantitative and qualitative methodologies. The data was gathered from the respondents using the interview schedule. The total number of 260 respondents was covered in this study by adopting random sampling methods. The respondent's mean age was 33.20 years, which is considered *as* an early adulthood phase in the human life span. It was found that type of family and educational level impacts communication with adolescent girls about reproductive and sexual health.

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## Introduction

Adolescence is marked by many significant bio-psycho-social shifts that profoundly affect adolescents' lives. Sexuality and reproductive health are primary developmental concerns during this time. As a result, parents must assist and guide their children to enhance their reproductive and sexual health knowledge through effective communication (Offer, 1989). Unfortunately, adolescents are rarely given adequate information in this regard. Thus, they must strengthen their ability to communicate, plan, and make decisions during a period of life where their autonomy is growing (UNISEF, 1998).

WHO. (2011) states that early adolescence is considered as a "juncture" in the life-course. It is considered by a series of interconnected processes that underlie the physical, social, and emotional changes of puberty. Six processes are highlighted here; each of these courses influences the sexual and reproductive health of adolescent girls and boys positively or negatively, and their capacity to make secure, informed, and voluntary decisions regarding their sexuality and other aspects of their lives.

## Reproductive Health:

Reproductive health is a broad term defined by the ICPD in Cairo as a state of total physical, psychological, and social well-being in all issues pertaining to the reproductive cycle and its functions and processes, not only the absence of sickness

or medical conditions. As a result, reproductive health implies that people

may have a fulfilling and safe sex life, as well as the ability to reproduce and the choice to choose if, when, and how frequently they do so. (From the 1994 International Conference on Population and Development.)

Reproductive health is a fundamental feature of healthy human development and general health. It is an implication of a healthy childhood, and it is crucial during adolescence and paves the stage for health in adulthood and beyond the reproductive years (United Nations Population Fund, 2010).

## Sexual Health

Sexual wellbeing is a condition of physical, emotional, mental, and social wellbeing; it is not just the nonappearance of disease, dysfunction, or infirmity. Sexual health needs a positive and polite perspective on sexuality and sexual interaction, as well as the opportunity to have a pleasurable and secure sexual experience, free of oppression, prejudice, and aggression. For sexual wellbeing to be reached and maintained, the sexual privileges of all people must be respected, protected, and fulfilled. " (WHO, 2006).

Sexual and reproductive growth and development are some of the remarkable changes during this period, and it is when parents are expected to socialize their children, in which parent-adolescent sexual and reproductive health (SRH) communication is vital (Dessie et al., 2015).

## Parental Communication on Reproductive and Sexual Health:

Information is passed between groups of two or more individuals through communication, which is defined as a "common manner of experiencing and interpreting each other." It is at the heart of all types of communication. Although language is the most common mode of communication, it is far from the only one. Expressions, listening, touch, hearing, silences, gestures, and other non-language signals and hints used by individuals in delivering and receiving information are all examples of non-verbal communication (Koerner and Fitzpatrick, 2002).

Mothers are the preferred source of sexual and reproductive health knowledge, information, and conversation, according to research (National Adolescent Sexual and Reproductive Health Policy Republic of Kenya Ministry of Health, 2015).

When it comes to reproductive health concerns, communication within the family appears to be especially important among teens. Adolescent identification and role-taking abilities are influenced by family communication, and adolescents who get family support may feel more free to explore identity issues (Cooper et al., 1983).

### Objectives of the Study:

- To assess the relationship between mothers' education and their communication with adolescent girls.
- To Study the Patterns of Reproductive and Sexual Health

### Results and Discussion:

Communication between joint families and nuclear families.

### Statement of the Problem:

Adolescent sexual and reproductive health is one of the major focus areas of research to understand the various problems and to adopt appropriate interventions to address and prevent adolescent problems. In this view, it is very important to understand the role of parent-child communication in sexual and reproductive health during adolescence.

**Study Area and Target Population:** The data was collected from the mothers of adolescent girls aged between 28 and 39 who live in Sandur and Hospet in Ballari District of Karnataka.

**Research Design:** A descriptive design has been adopted in the present study.

**Universe and Sample:** The parents of the adolescent girls were the universe for the present study. The random sampling method was administered in this study, and the total sample for the study was 260.

**Tools and Methods of Data Collection:** Quantitative data has been collected from the respondents directly by using the Semi-Structured interview schedule. The schedule contained variables such as demographic details, nature, patterns of communication.

**Data Analysis:** The data analysis has been done by using the software named Statistical Package for Social Sciences (SPSS, Version 20) for Windows.

<b>Table No: 01 Association of Parents Education with Reproductive-sexual health Communication</b>			
<b>Education of the mother</b>	<b>Communication from the mothers</b>		
	<b>Yes</b>	<b>No</b>	<b>Total</b>
Illiterate	32	19	51
	12.3	7.3	19.6
Literate	35	24	59
	13.5	9.2	22.7
Primary Education	37	31	68
	14.2	11.9	26.2
Secondary Education	18	08	26
	6.9	3.1	10.0
Pre University Education	17	09	26
	6.5	3.5	10.0
Under Graduate	14	05	19
	5.4	1.9	7.3
Post Graduate	07	04	11
	2.7	1.5	4.2
Total	160	100	260
	61.5	38.5	100.0
Chi Squire Value: 4.993      SL: .025      Results: Significance			

Data Source: Field Survey (Respondents: Mothers).

The above table depicts the association between a mother's educational attainment and communication with their adolescent daughters, as well as the three-part interplay between a mother's educational attainment, reproductive and sexual health communication; according to the findings, there is a direct relationship between a mother's education and communication. Mothers who are educated are more likely to discuss sexual and reproductive issues with their daughters.

<b>Table No:02 Association of Parents Education with Reproductive-sexual health Communication</b>							
<b>Education of the mother</b>	<b>Communication from the mothers</b>						
	<b>Joint Family</b>		<b>Nuclear Family</b>		<b>Extended Family</b>		<b>Total</b>
	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	
Illiterate	12	08	17	11	03	00	51
	4.6	3.1	6.5	4.2	1.2	0.0	19.6
Literate	07	06	28	18	00	00	59
	2.7	2.3	10.8	6.9	0.0	0.0	22.7
Primary Education	06	07	28	24	03	00	68
	2.3	2.7	10.8	9.2	1.2	0.0	26.2
Secondary Education	06	03	12	05	00	00	26
	2.3	1.2	4.6	1.9	0.0	0.0	10.0
Pre University Education	05	01	10	08	02	00	26
	1.9	0.4	3.8	3.1	0.8	0.0	10.0

Under Graduate	04	00	09	05	01	00	19
	1.5	0.0	3.5	1.9	0.4	0.0	7.3
Post Graduate	02	00	05	04	00	00	11
	0.8	0.0	1.9	1.5	0.0	0.0	4.2
<b>Total</b>	<b>42</b>	<b>25</b>	<b>109</b>	<b>75</b>	<b>09</b>	<b>00</b>	<b>260</b>
	<b>16.2</b>	<b>9.6</b>	<b>41.9</b>	<b>28.8</b>	<b>3.5</b>	<b>0.0</b>	<b>100.0</b>
Chi Square Value: 4.993      SL: .025      Results: Significance							

Data Source: Field Survey (Respondents: Mothers).

The study showed that over two-fifths of parents in nuclear families had a conversation with their children regarding reproductive and sexual health. When comparing the parents of nuclear families to the parents of joint families, the findings of the chi-square test show that the parents of nuclear families are more likely than the parents of joint families to communicate with their adolescent daughters.

### Discussion:

Communication with their daughters is directly related to a mother's education and communication with her own daughters. When it comes to their daughters' sexual and reproductive health, educated mothers are more inclined to bring up the subject. According to the survey, more than two-fifths of parents in nuclear families had a discussion with their children about their reproductive and sexual health.

### Suggestions:

- The mother is a core source of exchanging information on sexual and reproductive health to their adolescent girls; therefore, awareness building among mothers on Reproductive and sexual health matters is significant, this can be done through micro-level strategies.

- It is essential to reduce fear and discomfort about reproductive and sexual matters among mothers by adopting Social Work Intervention.
- The local level of government machinery needs to frame programs related to reducing the communication gap with their adolescent daughters.
- The local level messengers such as ASHA Workers and Anganwadi workers need to be trained on RSH matters to create mothers as a healthy communication channel for their daughters.
- The ICT intervention is much required to enhance the Reproductive and sexual health knowledge and convert that knowledge into practice, and the same can be delivered to their daughters.
- The Higher educational professional can organize awareness camps and adopt some specific localities to implement community-based activities to enhance the knowledge of RSH and also making them a good source of knowledge to their daughters.
- As the government is focusing more on enhancing the

Reproductive and Sexual Health of Adolescents in India through various programs and Schemes, under these programs, the communicational aspect can be addressed.

- Non-Governmental Organizations need to focus on communicational gaps and fills by which necessary information can be shared from the mothers to their daughters.

### Conclusion:

Many factors influence healthy adolescence; among them, the most important is getting the right and essential information on reproductive and sexual health matters. In this regard, the mother is the primary source of information for every adolescent girl. Communication between mothers and their adolescent daughters depends on several things, such as the educational status, type of the family, and age of the mother. Promoting communication and passing essential information will help adolescents cross the barriers they face during adolescence. Because of many factors, the quality and quantity of communication between mothers and their adolescents are restricted. This may create a wide range of problems for adolescents. Therefore, mothers must understand the communication needs of their daughters and fulfill them to avoid developmental hazards that may occur during adolescence. An integrated approach is required to enhance communication between mothers and their adolescent girls to create a happier and barrier-free stage of adolescence.

Because of many factors, the quality and quantity of communication between mothers and their adolescents is restricted. This may create a wide range of problems for adolescents. Therefore, mothers must understand the communication needs of their daughters and fulfill them, so they can avoid developmental hazards which may occur during adolescence. An integrated approach is required to enhance communication between mothers and their adolescent girls to create a happier and barrier-free stage of adolescence.

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