



ISSN Print: 2394-7500  
ISSN Online: 2394-5869  
Impact Factor: 8.4  
IJAR 2021; 7(1): 422-427  
[www.allresearchjournal.com](http://www.allresearchjournal.com)  
Received: 16-11-2020  
Accepted: 20-12-2020

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## Reproductive health education for adolescents: Parents' outlook

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DOI: <https://doi.org/10.22271/allresearch.2021.v7.i1f.8223>

### Abstract

Reproductive health education for adolescents is a challenge globally. Adolescence is a development period between the onset of puberty and the establishment of social independence. The present cross sectional study aimed to understand the parents' perspective on imparting reproductive health education to adolescents in schools. 60 parents of school going adolescent children were interviewed with the help of an interview guide. Findings of the study revealed that the parents favored the idea of imparting reproductive health education to adolescents in schools by the teachers. The study highlighted the requirement of specialized knowledge and module for imparting reproductive health education in conjunction with the social norms of society.

**Keywords:** Adolescence, reproductive health, education, puberty

### Introduction

The word adolescence comes from a Latin verb *adolescere*, which means "to grow" or "to grow to maturity". World Health Organization (WHO) defines adolescents as individuals aged 10-19 years. It is defined as period of growth between childhood and adulthood. Adolescence is the only time in life besides birth when velocity of growth actually increases and is one of the most dynamic and complex transitions in the lifespan. The relatively uniform growth of childhood is suddenly altered by increase in the velocity of growth during adolescence (Spear 2002) <sup>[14, 15]</sup>. The physical developmental and social and emotional changes that occur during adolescence can markedly affect their behaviors and health. Adolescents gain 30% of their adult weight and more than 20% of their adult height between 10-19 years (NNMB-1999) <sup>[16]</sup>. During adolescence, body shapes are changing with hormonal, cognitive and emotional changes. This is a time of great change in the way the adolescents look, the way they feel and think. Adolescence is an important stage of life for physical growth, mental and sexual development. Additionally for females, this is a period for preparation for mother hood.

Adolescence begins with puberty and ends with attainment of an adult life style. Sturdevant *et al.*, (2002) <sup>[14]</sup> working with adolescents has characterized the adolescence into three important phases: Early adolescence is characterized by respect for adult authority, discomfort with the physical changes of puberty, lack of future time perspective and concrete reasoning skills. Middle adolescence is characterized by recurrent challenges to family or parental authority and belief systems, reliance on peers for standards in appearance and behavior, increasing capacity for abstract reasoning and experimentation in dating and sexual behavior. Late adolescence is characterized by a great reliance on internalized values, fewer challenges to adult authority, less reliance on peer standards, future planning for career and lifestyle, increased capacity to solve complex life problems and increased capacity for intimate long term romantic relationships.

Adolescents are a heterogeneous group based on age, sex, and other social factors. Adolescents need support and right guidance to make independent decisions. They need to be protected from harm. Adolescents often have less access to information, services and resources related to reproductive health. It is realized that they need reliable source of information and knowledge at the right age. Parents have a significant role in developing good health of their adolescents. They are the primary educators in shaping the personality of adolescents. The care and concerns provided by the parents to their adolescents, no one else

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can do that. Parent child relationship is effective in maintaining respect and dignity of the adolescents. They could efficiently help the adolescents in decision making. Hence, in the growth and development of adolescents parents have an indispensable role.

Review of literature reflected that adolescence is a time of potential substantial risks (Kipke, 2001) [6]. Adolescence growth follows unpredictable pattern, it is confusing and rapid, compared to the relatively stable earlier period of childhood. Various mental and psychological problems in adulthood rooted in this period. (Moodi *et al.*, 2013) [8]. When adolescents are not informed of the changes that take place at adolescence, it is traumatic to undergo these changes and may develop unfavorable attitudes towards these changes (Sharma and Sharma, 1996) [3, 12, 13]. Lack of sufficient information, skills, and competency to overcome the traumatic state make the adolescents vulnerable. Studies found greater permissiveness towards premarital sex (Awasthi and Pande, 1998 and, Sharma and Sharma, 1995) [3, 12, 13]. Adolescents may develop myths and misconception (Bhasin *et al.*, 1997; and Acharya and Das Gupta, 2005) [1, 3]. Studies showed that good knowledge and attitudes regarding adolescence prepares adolescents not only for promoting their physical health but also for gaining more experience in coping with the struggles of puberty (Hockenberry, 2016) [5]. Literature review highlighted the fact that there is a dearth of studies on studying the perspectives of parents imparting reproductive health education to adolescents. Although many studies have suggested ensuring the participation of parents in imparting reproductive health education (Bhatia and Swami, 2000; Acharya and Dasgupta, 2005) [1, 4]. Hence, the study was undertaken with objective to know the perspectives of the parents on imparting reproductive health education to adolescents.

### Methodology

The purpose of the cross sectional study was to examine the perspectives of the parents on imparting reproductive health education to their adolescents. A list of government and private schools providing co-educational at secondary level in Delhi was obtained from Directorate of Education. Four schools 2 each government and private school were selected using random number tables. Principles of the school were contacted and permission to conduct the study was obtained. 60 parents (15 parents from each school) whose children were studying between classes IX - XII were selected for the study by using non- probability method of purposive sampling. Qualitative method of data collection was used; an interview guide for a focused interview was developed and pilot tested on five parents not from the selected schools. Parents were interviewed on the day of PTM (Parent Teachers meeting) within the school premises. Interview guide comprised of the background information of the parents and eleven questions covering following areas related to reproductive health of their adolescent children.

- Holistic growth and development
- Reproductive health education
- Responsibility of school
- Preferred class for initiating reproductive health education
- Components of reproductive health education
- Methods and sources of imparting reproductive health education

Parents' response on reproductive health queries

### Ethical considerations

Permission to carry out the research was obtained from the principals of the schools involved. (Principals have the authority to allow cross sectional studies to be conducted in India). This complies with the Helsinki Declaration for research conducted with humans. A written consent prior to being involved in this study was also taken from the parents on the day of PTM and all results were de-identified prior to reporting.

### Results and Discussion

#### General profile of the parent

60 parents (15 parents from each school) whose children were studying between classes IX – XII were interviewed. Fifteen fathers and forty five mothers were the respondents and interviewed on the days of the PTM. Table-1 depicts the general profile of the parents on age, education and occupation.

**Table 1:** General profile of parents

Profile	Father (n = 15)	Mother (n = 45)	Total (n = 60)
<b>Age (Years)</b>			
35-40	06 (40.0)	32 (71.1)	38 (63.4)
41-46	7 (46.7)	10 (22.2)	17 (28.3)
≥ 47	02 (13.3)	03 (6.7)	05 (8.3)
<b>Education</b>			
Up to 12 <sup>th</sup>	2 (13.3)	5 (11.1)	7 (11.7)
Under-Graduate	11 (73.3)	34 (75.6)	45 (75)
Post-Graduate	02 (13.3)	06 (13.3)	08 (13.3)
<b>Occupation</b>			
Government Job	08 (53.3)	02 (4.4)	10 (16.7)
Private Job	07 (46.7)	04 (8.9)	11 (18.3)
Home-Maker	00 (0.0)	39 (86.7)	39 (65.0)

Figures in parentheses represent the percentage

Most of the respondents belonged to the age group of 35-40 years while only 8.3% were in the age group greater than or equal to 47 years. The above table also depicted that the education level of the parents was majorly under-graduate and only 13.3% were post graduate and 11.7% were not graduate. The data revealed that mostly mothers were home makers and only 13.3% of the mothers were doing jobs. Thus the data of general profile of the sample reflects that mostly respondents were educated parents and the mothers usually attend the PTM.

The results of the study are discussed with respect to adolescents' holistic growth and development, reproductive health education, responsibility of school and preferred class, components and methods for initiating reproductive health education to the adolescents. Parents' response on reproductive health queries are also discussed as result of study.

### Holistic growth and development

Adolescence is a period of rapid growth and development. It is a transitional period in which various changes take place in the mind and body of the adolescents and they have many concerns related to their reproductive health. Absences of proper guidance from the adults on reproductive health issues make them face lot of dilemmas and challenges.

The results of the study showed that the parents recognized the importance of imparting knowledge on reproductive health issues to their adolescent children. They reflected on the fact that adolescents should be aware of physical changes taking place in their body, importance of healthy eating and personal hygiene. Hockenberry (2016) [5] also indicated in his study on puberty health program with adolescents, that good knowledge regarding puberty prepares them to cope up with the pubertal changes and promotes their physical health too. The parents stressed on the necessity of appropriate guidance on various issues related to reproductive health as they do not have adequate knowledge related to adolescents' health concerns and they apprehend that the adolescents too lack proper understanding on several issues related to physical and biological changes occurring in their body. Parents also showed their incapability to talk on many issues related to adolescent's health and behavioral changes. 25% parents reported that the anxiety, frustration, irritation and other emotional changes faced by the adolescents require parental care and support for the essence of holistic growth of their children. 60% respondents conveyed concerns related to appropriate age for imparting reproductive health knowledge related to menstruation, emotional changes and required support. Girls are at an advantage as they get information on reproductive health from their mother, and only 15% reported that mothers too may not have sufficient scientific knowledge on body development. Boys are at a disadvantage as they have no guidance and they too need knowledge and awareness on biological concerns.

Parents opined that adolescence is a period of special care from their parents. 20% parents reflected that, there is a need to handle adolescents' issues carefully and to keep an eye on the content adolescents' are watching on the television, mobile phones as well as their peer group activities. They reported that proper guidance and knowledge on reproductive health is essential. 22% parents felt that they should stay in touch with the teachers and take proper feedback of their adolescent's school performance and progress. 25% parents reported that adolescents need to be encouraged and given freedom for decision making too.

### Reproductive health education

Review indicates that reproductive health education should be provided by the school to adolescents and is a necessity of the hour, to improve the awareness regarding puberty (Veena, 2019) [17]. Adolescent possess some knowledge about reproductive health but still effective educational intervention is required to encourage more sensible and healthy behavior and results of the study shows health education sessions are very effective in increasing knowledge (Moodi *et al.*, 2013) [8]. The data obtained by the researcher in the study indicate that, parents have collective opinion on imparting reproductive health education in the school like other subjects. Their opinion are listed below-

- Family being the primary unit has a responsibility to impart reproductive health education. But students learn in a better way in school atmosphere.
- Adolescents share their concerns with their peer mates. If the peers get proper education than chances of misconceptions can be avoided to a great extent.
- School should provide opportunity to their students to interact with the experts of adolescents' health concerns. Adolescents can freely interact with the counselors and psychologists. Also, sessions can be arranged for the teachers and parents on dealing with the adolescents' health issues.
- With proper training teachers and parents can be very effective in imparting on reproductive health education.

### Responsibility of school

School plays a significant role in overall growth and development of adolescents. Majority of the respondents agreed that school has a vital role in personality development of adolescents and teachers being the best mentor for various issues related to behavior and lifestyle changes. Table-2 depicts respondents' views on adolescents reproductive health responsibility sharing.

**Table 2:** Respondents view on adolescents reproductive health responsibility sharing

Respondents views	School (%)	Parents (%)	Both (%)
Overall guidance responsibility	82	8	10
Role model	61	27	12
Primary agents of socialization	60	29	11

Respondents were also in the opinion that teachers and parents shared an equal responsibility to monitor and mentor the adolescents. The respondents also emphasized that role of peer group and mass media too plays an important role in reproductive health knowledge among adolescents. 20% parents responded that adolescents feel comfortable with their peer mates and they share all their concerns with their friends. Prasad (2006) [10] in his study with adolescents too states that 39% acquired reproductive health knowledge directly through discussion with the peers group. Hence it will be good if education along with peer group is encouraged. 15% parents feel incapable of dealing with the reproductive health issues of their adolescents; hence it will be good if school trained the parents too in dealing with adolescents' health concerns. Sahoo (2004) [11] in his study on adolescent health related issues also emphasizes on the necessity of making parents aware of reproductive health issues. The researcher also reports that parent teacher association should effectively be involved in dealing adolescents reproductive health issues.

### Preferred class for initiating reproductive health education

The age and class to initiate reproductive health education should be at early adolescence. The respondents cited various reasons of preferred class for initiating reproductive health education. The below table-3 highlights the responses obtained on preferred class for initiating reproductive health education in school-

**Table 3:** Preferred class for initiating reproductive health education

S. No.	Class	No. of respondents (n=60)	Parents' response
1	VI	38 (63.3)	If the curiosity of adolescents regarding the physical changes experienced by them is not dealt properly, it will lead to myths and misconceptions.
2	VII	10 (16.7)	Adolescents are not aware of about reproductive health issues. Education on reproductive health will help them in understanding growing up issues.
3	VIII	5 (8.3)	Adolescents need appropriate knowledge as it is an experimental age. Girls should know about reproductive health issues before the beginning of menstruation.
4	IX	7 (11.7)	Puberty period brings physical and emotional changes. Reproductive health education should be started at this level.

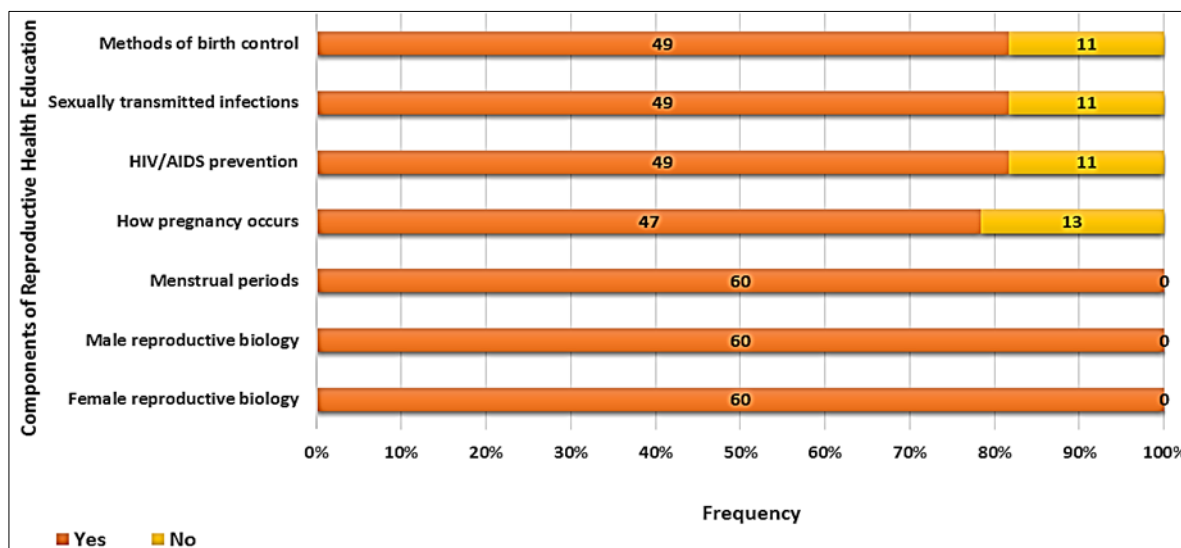
Figures in parentheses represent the percentage

Parents' responded that reproductive health education should be started from sixth class onwards (63.3%). The data of the study reveals that adolescents experience lot of physical and emotional changes, thus they require guidance. Hence it is important to begin reproductive health education in schools from sixth class onwards. The findings of the present study is also supported by the results of study with school going adolescents in Iran by Moodi *et al.*, 2013<sup>[8]</sup> that continuous training in secondary schools is necessary to improve adolescents' knowledge and attitudes toward puberty. Moreover, more training is required to change the

dominant avoidance-oriented coping strategy to a task-oriented approach, especially at the first-grade level (11-12 years) in secondary school.

**Components of reproductive health education**

Components of reproductive health education should include topics on reproductive biology, menstruation, pregnancy, methods of birth control, Sexually Transmitted Infections (STIs) and HIV/AIDS. Following figure-1 depicts responses of respondents with respect to the above components.



**Fig 1:** Components of reproductive health education

Respondents felt that all the components reflected in the figure-1 should be added in the reproductive health education module for the adolescents. Respondents also indicated the need of adding life skills education, gender sensitization, parent child relationships, sibling bonding and sexual harassment along with above mentioned reproductive health education components in the educational module.

**Methods and sources of imparting reproductive health education**

Respondents were asked about the preferred methods of imparting reproductive health education. They stressed on the methods of communication like using audio-visual aids, discussion, lecture, problem solving methods, etc. All the respondents felt that combination of various methods should be used for communicating with the adolescent students on reproductive health issues. Some of their responses are as follows-

- The most preferable method to impart reproductive health education by the respondents was discussion as

the adolescents have lots of questions in their mind. Adolescents need someone who could listen to them and help them in understanding various reproductive health issues.

- Case studies can be highlighted to make the adolescents understand the sensitive issues.
- Counseling can be done in case if someone needs help.
- Audio visual aids should be used as it is very effective way to explain and understand.
- Documentary movies on reproductive health issues can be shown to adolescents.
- Experiences sharing sessions can be organized and problem solving methods can be adopted.
- Talk shows, sessions by the specialized persons can be organized.

Adolescents' access varied sources of information to gain knowledge on reproductive health issues. It is important that the sources adolescents' access should be reliable. Many studies highlighted that peer group, media, and internet are



the main source of information regarding reproductive health (Nirankar *et al.*, 2011, and Lal *et al.*, 2008)<sup>[7, 9]</sup>.

Respondents conveyed about the various sources of imparting reproductive health education. Teachers are most preferred source of information followed by school counselor and then parents. Study conducted by Jain and Anand, (2016) conveyed that adolescents can be made better

citizens by communicating and educating parents, teachers, family members and other influential person who act as resource persons educating and spreading the correct knowledge among adolescents. Table-4 depicts the preferences of respondents on sources of imparting reproductive health education.

**Table 4:** Sources of imparting reproductive health education

S. No.	Sources	Number of respondents (n=60)	Explanations
1	Teachers	17 (28.3)	Teachers are always considered the most respectable persons. They can easily explain the adolescents.
2	Parents	9 (15.0)	Mothers are the best source of information as she spends good amount of time with their adolescents.
3	Siblings	2 (3.3)	Elder siblings can help the younger siblings. Although they have limited knowledge.
4	School Counselor	14 (23.3)	School counsellors are the best as adolescents do not have fear to be judged.
5	Doctor	5 (8.3)	Doctors explain scientifically.
6	Peers	1 (1.7)	Most convenient source is peers. Though they may have myths and misconceptions.
7	T.V./Radio	5 (8.3)	Programmes, advertisements air on T.V. and radio are very informative.
8	Internet	5 (8.3)	All kinds of information is available on internet. One needs to keep an eye on adolescents on use of internet on reproductive health issues.
9	Print Media (Books/Magazines/ Newspaper)	2 (3.3)	Books are good source of information and selective reading should be encouraged.

Figures in parentheses represent the percentage

#### Parents' response on reproductive health queries

Adolescents' are in need of a responsible person to seek information on reproductive health issues. Respondents of the study were asked how they respond to adolescents' questions related to the reproductive health issues.

Majority of the respondents were not comfortable in answering the queries of their adolescents. They revealed that they generally avoid discussing on such issues. Very few number of parents accepted that they explain each and every query of their adolescents and make the adolescent understand all the aspects of their queries. Parents stressed on the fact that their queries should not be left unaddressed. If they will not get satisfactory response, they will try to search the information through other sources. Hence it is better to develop a healthy and friendly relationship with our adolescents.

#### Conclusion

The study concludes that reproductive health is a key component of life that may be influenced by a variety of experiences. It is realized that school-based comprehensive reproductive health education for adolescents, teachers and parents is required. It will help in providing education and services designed to support the healthy emotional and physical development of adolescents. The study focuses on developing an open, transparent attitude toward imparting reproductive health education to adolescents. Parents feel that adolescents can be supported by the schools in generating awareness related to reproductive health through participatory discussions. The focus should be on imparting a culture sensitive education according to prevailing social norms on reproductive health. Parents suggested that adolescents can be educated using uniform content module on reproductive health. It will reduce the scope of developing myths and misconceptions. Teachers are the key

contributors in the education process and programs. They can inculcate a positive attitude on reproductive health education in adolescents. Teachers should be encouraged to talk on reproductive health issues in order to enhance competence for their students. Capacity building sessions should be arranged for the teachers so that they could facilitate sensitization training for the adolescents as well as parents. Adolescents, teachers and parents should interact on a regular basis. It will also motivate the parents to cooperate with the school in their attempts to encourage healthy lifestyles. If parents and teachers understand the adolescents concerns and are approachable, adolescents will surely feel comfortable in discussing reproductive health issues with them.

#### Implications for practice

It can be suggested from the results of the study that school should invite the experts in the field of reproductive health to conduct information sharing sessions, discussions and workshops for the adolescents, teachers, and parents. School counsellors should be appointed in all the schools. In fact there should be a team of professionals to conduct awareness generation sessions and to provide counseling to the stressed adolescents. Therapeutic conversation sessions can be organized by the experts in the field of reproductive health of the adolescents. So that adolescents will feel competent in discussing and sharing their health concerns with the parents and teachers. Parents' accepted that they may not have much knowledge on reproductive health issues thus; it is a necessity that parents should be capable of answering the queries of the adolescent. Parent Teacher Meetings (PTM) can be utilized to discuss on issues and problems faced by the adolescents on reproductive health and promote parent-child relationship. A comprehensive reproductive health education module should be developed

inclusive of life skills education, gender sensitization, parent child relationships, sibling bonding and sexual harassment along with components of reproductive health education.

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