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Knowledge and Attitude of Mother's Regarding Adolescence: A Study on a Selected Area of Dhaka City

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Abstract

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Original Research Article

This study is an endeavor to explore the knowledge and attitude of mother's concerning the urban adolescence of Bangladesh. Socio-economic standing specifically mother's age, education, occupation and income has been substantially considered to comprehend the attainment of mothers' as regards to adolescence. Generally, Adolescence is the transitional stage of physical and psychological human development that occurs between puberty and adulthood. Most of the mental and behavioral problems and disorders usually take their start in childhood and adolescence. A large number of adolescents in Bangladesh suffer from behavioral, emotional or developmental problems. The ratio is very high among girls. Mothers' positive and constructive role can help the girls to address the problems of adolescent girl. The prime objective of this study was to find out the knowledge and attitude of mother's regarding adolescence in Dhaka city. The present study found that a lot of mothers were insensible and evasive to discuss with daughters about adolescence and deviate to support it. Among the illiterate mothers 55.56% did not provide reproductive health and sexual issue related knowledge to her daughter but it was noteworthy that lion share of the respondent 71.67% provided knowledge regarding sexual harassment and only 28.33% of the respondent did not do so.

Keywords: Adolescence, Psychological human development, Socio-economic standing.

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Introduction

Adolescence is the period of developmental transition between childhood and adulthood. It is mainly the vital stage of human development which involvesthe multiple physical, intellectual, personality developmental changes. Technically, social adolescence is the period from the beginning of sexual maturity (puberty) to the completion of physical growth [1]. It is also a transitional stage of physical and psychological human growth generally occurring between puberty and adulthood. The duration of adolescent period is 12 to 22/25 years. The end of adolescence and the beginning of adulthood varies by country and by function, and furthermore even within a single nation state or culture there can be different ages at which an individual is considered to be (chronologically and legally) mature enough to be entrusted by society with certain responsibilities. Adolescence can be defined biologically, as the physical transition marked by the onset of puberty and the termination of physical growth; cognitively, as changes in the ability to think abstractly and multidimensionally; or socially, as a period of preparation for adult roles. During their twenties most people reach their peak of strength, agility, reaction time and manual dexterity [1]. Major pubertal and biological changes include changes to the sex organs, height, weight, and muscle mass, as well as major changes in brain structure and organization. The period of Adolescence is filled with intellectual and emotional changes in addition to other major biological and physical changes. It is a time of discovery of self and one's relationship to the world around him or her. The nature of the total adolescent span of life may be highlighted by such designations as a phase of storm and stress; an age of suffering and frustration; a time of many problems, surprises and life determining decisions and a period of frequent conflict and difficulty in adjustment [2]. Proper parental care is very necessary for the adolescent. Churoltte Buhler has termed puberty as a negative phase. There is evidence that negative attitudes and behaviour are characteristic mainly of the early part of puberty and that the worst of the negative phase is over when the individual becomes sexually mature [3].

The total population of the world is now about seven hundred crore. One fifth of the total population over the world is adolescent. Bangladesh's adolescent population (ages 15–24) was estimated at about 28 million in 2000. Due to theeffect of population momentum—through which populations can continue

to grow even as the rate of growth is declining (since ever more people are added to the base population each year) and other effects, this age group will contribute significantly to the incremental population size of Bangladesh during the next 20 years, increasing by 21 percent to reach 35 million by 2020.

Adolescence is a time for developing individuality. Usually, adolescents exercise their freedom by questioning their parents' rules, which at times leads to breaking rule. This is often a challenging time for most parents. Some parents and their adolescents clash over almost everything. In these situations, the core issue is really control adolescents want to feel in control of their lives and parents want adolescents to know they still make the rules. Children sometimes engage in physical fight. However, during adolescence, the frequency and severity of violent interactions increase. Although episodes of violence at school are highly publicized, adolescents are much more likely to be involved with violence (or more often the threat of violence) at home and outside of school. Many factors, including developmental issues, gang membership, access to weapons, substance use, and poverty, contribute to an increased risk of violence for adolescents. One of the major developmental tasksof adolescence is that of achieving control over behavior so that it will confirm to standards approved by the social group [4]. Particular concern is adolescents who, in an altercation, cause serious injury or use a weapon. Recently an adolescent girl, Ayshe, killed her parents and judged to hang for killing. Such types of occurrences are very much recognizable in our country.

Substance abuse is a common cause of behavioral problems and often requires specific therapy. Behavioral problems may take place mental health disorders. Such disorders naturally require treatment with drugs as well as counseling. In extreme cases, some adolescents may also need legal intervention in the form of probation which is not so common in Bangladesh. A number of problems arise in adolescent period. Mothers are the best friend and finest guide of the teenagers. Their positive and friendly attitude can prevent offensive behavior and misconduct as well as can contribute sound mental development. It also helps their children to overcome the complications of adolescence. But, in the countries of third world like Bangladesh, the adolescent don't get proper support from their family members. Still now discussion about adolescence is a matter of shy for many parents. In such socio-economic situation study regarding the problems of adolescent is very necessary.

Problem Statement

An enormous number of children and adolescents in Bangladesh suffer from behavioral, emotional or developmental problems. Many adolescents today have problems and are getting into trouble. In fact, for the complexity of contemporary

living, there are a lot of pressures for children to deal with among friends and family. For some adolescents, pressures include poverty, violence, parental problems, and gangs. Children may also be concerned about significant issues such as religion, gender roles, values, or ethnicity. Some children are having difficulty dealing with past traumas they have experienced, like abuse. Parents and their teenagers are struggling between the youth's wanting independence while still needing parental guidance. Sometimes all these conflicts result in behavior problems. Several number of isolated behavior problems can characterize adolescent problems and delinquency-shoplifting, truancy, a fight in school, drug or alcohol ingestion. Sometimes, children can't easily explain why they act the way they do. They may be just as confused about it as the adults, or they simply see delinquent behaviors as appropriate ways to deal with what they experience. Mothers and loved ones may feel scared, angry, frustrated, or hopeless. They may feel guilty and wonder where they went wrong. All these feelings are normal, but it is important to understand that there is help available to concerned children and their families.

So, more effective prevention and intervention of these problems may be achieved through understanding the role of parents, especially mother. But many of the mothers in Bangladesh cannot play appropriate role to overcome the problems of their child in adolescent period because of not having proper primordialsocio-cultural knowledge or for the environment. A large number of studies have documented the fact that for certain groups of children, conduct problems in childhood tend to continue across development as well as predict later delinquency in adolescence and adulthood [5]. Most of the mental health problems and deviance usually take their start in childhood and adolescence. Approximately one fifth of children and adolescents in Europe and the United States of America suffer from behavioral, emotional or developmental problems [6]. In Bangladesh there have no concrete data about the issue. Recently some efforts have been taken to address the development of behavioral and emotional problems of adolescents but it is not enough as required. This study investigates the knowledge and attitude of urban mothers regarding adolescent adjustment problems, with a focus on the role of mother who have adolescent girl.

Objectives of the Study

The main objective of the study was to know the knowledge and attitude of the mothers regarding adolescence. There were some specific objectives which are as follows:

- To know the knowledge and attitude of mother's regarding adolescence;
- To understand the role of mother what are they playing during adolescence; and
- To generate awareness regarding adolescence among parents.

METHODOLOGY

This study was carried out using an exploratory social survey. The present study was based on primary data. Data had also been collected in required fields from secondary sources. Both qualitative and quantitative data were used in the present study. The present study was carried out in Mogbazar area of Dhaka city. The researchers selected the area purposively for the study. All the mothers of the study area who had adolescent girl were considered as the population of the research and each mother was considered as the unit of analysis. As it was an exploratory research and the universe of study was very large, so the researcher used sampling procedure for conducting the study conveniently. He used purposive sampling method and sample from the universe.A total of 120 respondents were considered as the sample of the study in accordance with the method of purposive sampling. Data for the present study were collected from the respondents through face to face interview. Interview schedule was used for conducting interviews with different categories of respondents. Interview schedules were used for primary data collection, where both open-ended and close-ended questions were incorporated. questionnaire was pre-tested. The researcher appointed twofemale field investigators for collecting data from the field level who were experienced in this field. They were trained by the researcher and worked under the close supervision of the researcher. Field investigation was carried out in the month April 2015. After collecting data, design for analysis and tabulation was developed by the

researcher himself.Data were inputted by the researcher in computer. The researcher himself analyzed and interpreted the data. Several statistical tools and tests like averages, percentages, summation, median, mode, chisquare test etc.

Conceptual Model of the Study

To understand better the knowledge and attitude of mother's concerning the urban adolescence of Bangladesh the researchers have developed a conceptual model which has served as a tool for sustaining and designing the study and analyzing the study findings. The conceptual model is comprised of key ideas that have emerged from the researcher's experience in working with the adolescence students. their mothers' and from the review of existing literature. The researchers have also searched Social learning theory (SLT) of Bandura & Walters:1963, Problem behavior theory (PBT) of Jessor & Jessor: 1977, Theory of planned behavior (TPB) of Fishbein & Ajzen: 1975, Social norms theory (SNT) of Perkins: 2003, Transitional teens theory (TTT) of Voas & Kelley-Baker: 2008, Cognitive-behavioral therapy (CBT) of Kazdin: 1978, Acquired preparedness model (APM) of G. T. Smith and Anderson: 2001 and Social and community responsibility theory (SCRT) of Colby & Kohlberg: 1987. This model had become a road map for conducting the study and conceptualizing the elements of the knowledge and attitude of mother's concerning the adolescence in a systemic process.

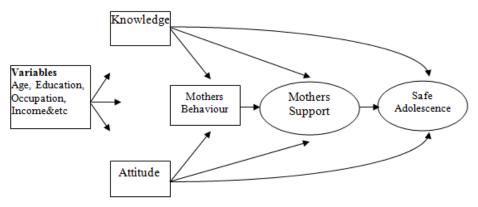


Fig-1: Conceptual Model of the Study

STUDY FINDINGS

Socio-economic and Demographic Features of the Respondents

Socioeconomic status is generally conceptualized as the social standing or class of an individual or group. It is often measured as a combination of age, education, income, occupation, etc. In every investigative research work, the socioeconomic and demographic information of the respondents are very crucial. Analyzing the demographic information of the respondents, it was

found that mothers of different professions, ages and status were included in this study.

Age of the Respondents

To understand the mothers' age and their prime of life, respondents have been categorized in different strata. Table 1 shows that 65.83% of the respondents is in the age range of 35 to 40 years, whereas 20.83% of the respondents are in the age range of 40 to 45 years. Here it is also significant that, 11.67% of the respondents are in the age range of 30-35 years. It is remarkable that only 1.66% respondents are above 45

years. The average age of the mothers those who encompasses one or more adolescent girls is about

38.17 years.

Table-1: Age Distribution of the Mothers'

Age of Category	Respondents	Percentage (%)		
30-35	14	11.67		
35-40	79	65.83		
40-45	25	20.83		
45-50	1	0.83		
50-55	1	0.83		
Total	120	100		
Mean Age: 38.17				

Source: Field survey by the Researcher

Educational Qualification of the Mothers

Searching the in-depth information about the knowledge and attitude of mothers concerning adolescence, educational qualification of mothers has been measured as one of the degrees. So, analyzing the educational status of the respondents, it if found that a major part of the respondents were educated (85%), rest of them (15%) were illiterate. As the study was carried

out in the urban area so the prevalence of educated mother was far above the ground.

Table 2 shows that among the respondents, 10% completed only primary education, 30.83% completed secondary education, 22.5% of the respondents completed higher education, 13.33% completed graduation and only 8.33% respondent completed post-graduation degree.

Table-2: Educational Qualification of the Respondent

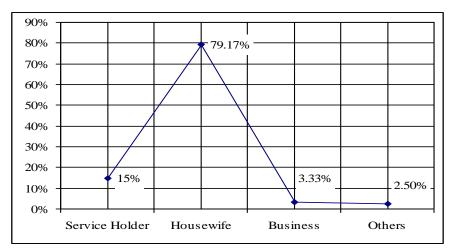
Level of Education	Respondents	Percentage %
Illiterate	18	15.00
Primary Education Completed	12	10.00
SSC	37	30.83
HSC	27	22.50
Graduate	16	13.33
Post Graduate	10	8.33
Total	120	100.00

Source: Field survey by the Researcher

Occupation of the Respondent

Graph 1 has presented the occupational status of the respondents. The graph reveals that lion share 79.17% had no occupation except house hold chores and only 20.83% respondent were involved in different types of occupations.

Table 3 shows that among the respondents 15% was service holder, 3.33% was involved in business and 2.5% of the total respondents were involved in others occupation that was not entirely mentionable.

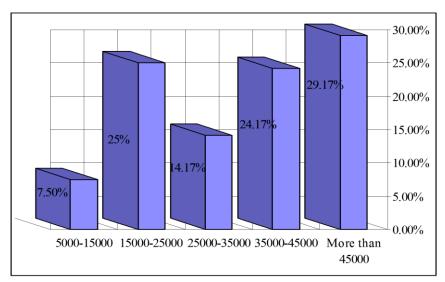


Graph-1: Occupation of the Respondents

Monthly Family Income

In the following table monthly family income of the respondent has been analyzed. From the table it is revealed that a member of different economic background were included in the study. In terms of combined family income, 7.5 % of these respondents'

families had monthly incomes of Taka 5,000-15,000. A good number of them (29.17%) respondents monthly family income had more than 45000 Taka. Among them 24.17% of these families had a total monthly income of 35000 - 45000 Taka and 25% families had a total monthly income around 15000 -25000 Taka.



Graph-2: Monthly Family Income of the Respondent (Taka)

Attitude towards Free-frank Discussion with Daughter about Adolescence

The more judgmental, rigid and demanding a mother is, the more problems that adult will choose to have with the adolescent. According to Pickhardt, 2010, the more accepting, flexible and adaptive a mother is, the fewer problems that adult will choose to have with the adolescent. If the mothers of the adolescent frankly discuss about the changes and difficulties of adolescent period, their daughter can easily overcome the problems. But in Bangladesh still today a lot of mothers do not like to be free and frank with their daughtersand

do not do frankly discuss with their daughters about adolescent and even most of them do not support it.

From the table 5 it is seen that lion share (60%) of the respondent support free-frank discussion with their daughters about adolescence and they also discuss about it with their daughters. On the other hand a significant number (40%) of the respondent do not support free-frank discussion with their daughters about adolescence and they were not interested to discuss about the complications of adolescences period with their daughter.

Table-5: Whether Support Free Frank Discussion with Daughter about Adolescence

Whether support free frank discussion	Respondents	Percent (%)
with daughters about adolescence		
Yes	72	60.00
No	48	40.00
Total	120	100.00

Source: Field survey by the Researcher

Peer Support in the Adolescence

Problems that occur during adolescence (particularly external problems, such as substance use and violence behaviours) may continue throughout adulthood, associated to social non-adaptation, substance abuse and conflicts [7]. The peer group may on one hand, serve as a model and influence behaviors and attitudes, whilst on the other hand, it may provide easy access, encouragement and an appropriate social

setting for consumption [8]. So peer group can play positive role in the adolescent period.

Adolescent girls can overcome many problems during adolescent period with consultation with their friends and peer groups. But from the study findings it is found that lion share (72.5%) of the respondent do not support free-frank discussion of adolescent girls on the subject of the problems of adolescent period with their peer groups.

Table-6: Whether Support Discussion with Friends about Adolescence

Whether support discussion	Respondents	Percentage (%)
with friends about adolescence		
Yes	33	27.50
No	87	72.50
Total	120	100.00

Source: Field survey by the Researcher

Sharing Knowledge regarding Reproductive Health and Sexual Issues

In most families mothers are primary caregivers of adolescent girls. So it is one of the major responsibility of a mother to provide knowledge regarding reproductive health and sexual issues to her daughter.

From the findings of the study it is seen that a lion share (80.83%) of the respondent provide

knowledge regarding reproductive health and sexual issue to her daughter and 19.17% respondent do not provide knowledge regarding reproductive health and sexual issue to her daughter. The rate of not providing knowledge regarding reproductive health and sexual issue to her daughter was very high among illiterate mother and it was 55.56%. The ratio of providing knowledge regarding reproductive health and sexual issue was lower in graduate and postgraduate mother in comparision to undergraduate mother.

Table-7: Respondents Education Level and Sharing Knowledge regarding Reproductive Health and Sexual Issues

Educational	Whether provide Knowledge regarding Reproductive			Total	
Qualification	Health and Sexual Issues				
	Ye	S	No		
	Respondents	Percentage)	Respondents	Percentage	
Illiterate	8	44.44	10	55.56	18
Primary Education	5	66.67	7	33.33	12
Completed					
SSC	31	83.78	6	16.22	37
HSC	22	81.48	5	18.52	27
Graduate	10	62.50	6	37.50	16
Post Graduate	7	70.00	3	30.00	10
Total	97	80.83	23	19.17	120

Source: Field survey by the Researcher

Provide Sexual Harassment Related Knowledge

Sexual harassment of adolescent girls is very common. They become victim of sexual harassment in school, college, workplace, bus, train and even in at home by close relatives. Sexual harassment ofadolescent girls can increase likelihood of missing school and withdrawing from school, suicidal tendency, confusion and upset and many others problems. So it is the duty of every mother to provide knowledge regarding sexual harassment to her issues during adolescent.

From the study findings it is observed that though lion share (71.67%) of the respondents provided knowledge regarding sexual harassment to her issues but a good number (28.33%) of the respondent did not provide knowledge regarding sexual harassment related issues to her adolescent girl. Among the service holder 83.33% respondent provided knowledge regarding sexual harassment to her issues, the ratio was 69.47%, 75% and 66.67% in the category of housewife, business person and others respectively.

Table-8: Provide Sexual Harassment Related Knowledge

Occupation of	Whether provide Sexual Harassment Related				Total
the Respondent		Knov	vledge		
	Ye	Yes s]	No	
	Frequency	Percent (%)	Frequency	Percent (%)	
Service Holder	15	83.33	3	16.67	18
Housewife	66	69.47	29	30.53	95
Business	3	75.00	1	25.00	4
Others	2	66.67	1	33.33	3
Total	86	71.67	34	28.33	120

Source: Field survey by the Researcher

Provide Knowledge about the Development of the Adolescence

Generally the patterns of adolescent development begins with viewing adolescence in the context of physical, social and emotional, cognitive, and moral domains of growth and change. It is widely believed that adolescence is inevitably a period of so many developments of human nature. The present study had searched the arena of development of the adolescents where a mother can share her awareness and knowledge. The findings of the study shown that

32.50% of the mothers provided knowledge about cognitive and brain development, 27.50% of the mothers provided knowledge about physical development, 18.33% of the mothers provided knowledge about moral development and reasoning and 18.33% of the mothers provided knowledge on the subject of emotional and social development. So, from the table it is significant that more or less mothers were aware about the transitional development of the adolescence.

Table-9: Provide Knowledge about the Development of the Adolescence

Segments of Development	Respondents	Percentage
Physical Development	33	27.50
Emotional and Social Development	22	18.33
Cognitive and Brain Development	39	32.50
Moral Development and Reasoning	26	21.67
Total	120	100.00

Source: Field survey by the Researcher

Influences of Monthly Income regarding Doctors Suggestions

It is well established that parental monthly income is positively associated with virtually every dimension of adolescence well-being that social scientists measure. This research advances beyond simple analyses of the influences between monthly income and doctors' suggestions by measuring the knowledge and attitude of mothers' on the subject of adolescence. This study has found that too many modest influences were there on monthly income regarding doctors' suggestions on the subject of irregular menstruation of the adolescences.

Table 9 has significantly presented the influences of monthly income regarding doctors' suggestions in case if irregular menstruation of the

daughters. From the table it is found that 83.3% of the respondents having monthly income between 15000-25000 taka were entirely positive regarding doctors suggestions in case if irregular menstruation of their daughters and only 16.7% were negative about comparable issues. The table also shows that respondents having income within the range of 35000-45000 taka and more than 45000 taka were 82.7% and 77.2% reasonably affirmative and 17.3% and 22.8% desolately negative as regardsto the doctors' suggestion about irregular menstruation of the adolescence daughters. It is noteworthy that respondents having monthly income at least 5000-15000 taka which constitutes 77.8% were necessarily positive and only 22.2% more or less than equal monthly income was negative as regardsto the doctors' suggestion about irregular menstruation of their daughters.

Table-9: Influences of Monthly Income regarding Doctors Suggestions in case if Irregular Menstruation of the Daughters

Daughters					
Family Monthly	Whether takes Doctors Suggestions in case if Irregular				Total
Income (Tk.)	ľ	Menstruation of Their Daughter			
	Ye	Yes N No o			
	Respondents	Percent (%)	Respondents	Percent (%)	
5000-15000	7	77.8	2	22.2	9
15000-25000	25	83.3	5	16.7	30
25000-35000	13	76.4	4	23.5	17
35000-45000	24	82.7	5	17.3	29
More than 45000	27	77.2	8	22.8	35
Total	96	80	24	20	120

Source: Field survey by the Researcher

Conclusion

On an average, human life completes its journey through various stages and one of the most vital stages is adolescence. It is the period of transition from childhood to adulthood and plays a crucial role in the formation of pro-social or antisocial adult. All of us undergo this period which poses many challenges and is full of excitement. At the same time it demands adjustment on many fronts. It is beyond discussion that adolescents experience many more problems that

wehave not discussed here due to time constraints. However, we have highlighted the knowledge and attitudes of mothers' who can play the foremost responsibilities at the adolescence. Findings of the study suggestthat parenting training programs for mothers might be more effective to overcome the problems of adolescent girls in Bangladesh. It is seen that a lot of mothers still today do not share adolescent related problems with their daughter and they do not give prior idea about it. It was the scenario of the urban area of Bangladesh. So it can be assumed easily that the scenario of the rural area will be more pitiful. So, in this ground, researchers are suggesting to conduct future research focusing the role of mothers in the adolescent period and to disseminate knowledge through mass media on the subject of the issue.

REFERENCES

- 1. Morgan CT. *Introduction to Psychology*, 7th ed. 1999.
- 2. Justin Pikunas and Engence J. Allbrecht. *Psychology of Human Development,* McGraw-Hill Book Company, New York. 1961:171.
- 3. Parker E. *The Seven Ages of Women*, Johns Hopkins Press. 1978.
- 4. Hurlock EB. *Developmental Psychology*, 4th ed. McGraw-Hill Publishing Company Ltd. 1978; 154.
- Broidy LM, Nagin DS, Tremblay RE, Bates JE, Brame B, Dodge KA. "Developmental trajectories of childhood disruptive behaviors and adolescent delinquency: a six-site, cross-national study" Developmental Psychology. 2003; 39 (2), 222-245.
- Department of Health and Human Services US. Mental Health: A Report of the Surgeon General. Rockville: U.S. Department of Health and Human Services. 1999.
- 7. Bongers IL, Koot HM, Van der Ende J, Verhulst FC. Predicting young adult social functioning from developmental trajectories of externalizing behaviour. Psychological Medicine. 2008 Jul:38(7):989-99.
- 8. Glaser B, Shelton KH, van den Bree MB. The moderating role of close friends in the relationship between conduct problems and adolescent substance use. Journal of Adolescent Health. 2010 Jul 1;47(1):35-42.