



Identifying Sources of Puberty Related Information and Social Support During Puberty Among A Group of Young Males and Females

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Abstract

Adolescent age group or teen agers time is a very sensitive and emotional time. The age group has a major life transition which requires significant support and education to survive positively. These young people around the globe go through the process of puberty and this transition is very important for further life and health. The following paper emphasis on important of social support and parental involvement during this transition period. The paper explains various sources of puberty related information and social support during puberty through identifying these traits among a group of young males and females, gathered during a peer education workshop/training for teen ager's health. It is very clearly identified and seen that parental involvement in our context is very less, as it should be during puberty. The common support sources identified are friends, along with identifying the common feeling experienced by these young males and females during puberty. However, we cannot either generalize it on all parents or friends or we cannot conclude that young people or teen agers of all contexts have similar or non-similar kind of experiences. It is easily comprehended that puberty is a natural process and all adolescent or teen agers go through this and it is very essential to involve parents, understand common feelings and strengthen support systems for these growing young people.

Keywords: Adolescent; Teen Age; Puberty; Experiences; Parents; Social; Support

Introduction

Adolescent age or teen age is a highly sensitive time in any human's life [1]. In this particular time the body goes through various physical, cognitive, social and emotional changes that are categorized under puberty [2]. Puberty can be an exciting experience where learning is hugely enhanced by parental support, teachers or other positive sources like siblings or friends [3]. On the other hand, it can become a guilt trip and a scary experience too [4]. It happens when adolescent children are not guided about puberty and its changes earlier to reaching puberty or while going through this stage [4,5].

Looking at puberty as a very emotional and social transformation, the passing time has a good role [6]. But it becomes scary and fearful when adolescent population faces its physical body changes without any information. Passing of semen (ejaculation) or seeping of blood (menstruation) is very difficult to understand without any prior information [5,6]. It is also very important that they must have a support from family, parents, siblings, or friends to deal with this time [7]. Unfortunately in many cases the two important steps are often seen very weak or missing [5-7].

- Puberty education early or during puberty age
- Emotional support while going through the first time bodily changes

It is seen that parental education and involvement has a significant and positive role in puberty of adolescent children [8]. Parents have been through this stage and they are more likely to educate and support children in puberty time better than any other family member or relative [9]. It is very evident that sexuality is a stereotypical theme and very difficult for parents to initiate discussion on this very sensitive topic [10]. Also, patriarchal norms essentially suppress women to talk about these issues with children and mostly men (fathers) are out of this discussion [11].

There can be various factors behind this kind of behaviors, because of which parents are very less involved in communication about puberty. These may include: lack of education of parents on this theme, poor linguistic mastery, less confidence, lack of time, poor socialization with children, strong values about sexual taboos, no information from their own parents, feeling of shame or guilt hindering communication, patriarchy, lack of resilience, lack of awareness to respond queries, lack of resources and many other [12-14].

Methods and Materials

A training of peer educators was conducted on teen agers health and sexuality. In which different concepts were taught on the duration of two days. Few of these themes and concepts were related to health of teen agers and some were related to right base approach in attaining sexuality. One significant and demanding concept was to make the peer educators understand about reproductive physiology and its relation with puberty. So, that concept and knowledge can help them to address issues of teen age children of surroundings regarding puberty and growth changes.

A pre session one exercise was done in which the participants were asked few questions (listed below) and were guided to list the responses in the given paper sheet. The exercise has some of the interesting questions (refer table no. 1) relating to puberty experience of those trainees. The objective was to relate them with their own situation and reflect that how puberty education is shared and discussed in our context. It will be a great learning for them to integrate when they will focus their work with teen age population. Also, this gave us a rough idea how our generations have different experiences relating to puberty and what were the sources of education and emotional support available for them.

1. Demographics (Age, Education, Sex)
2. Were parents (any of the parent) was involved in the discussion regarding puberty?/Did your parents discussed anything about puberty?
3. Who guided about puberty? (in the beginning or initial time)
4. What age you get into puberty? (Years)
5. What were your feeling when you were going through puberty or what you felt when you get aware about pubertal changes?
6. How you managed those feelings or emotions? / Who emotionally supported you while going through this face?

Table 1: Questions.

Results and Discussion

Total thirteen male ($n_1 = 13$) and sixteen female ($n_2 = 16$) participants ($n_1 + n_2 = 29$) consented to share the details about their puberty related experiences through these questions. Male participants were aged between 19 years to 38 years old. Female participants' age bracket was from 18 years to 29 years old. All of the participants have at least an intermediate education and most of the participants from both sexes were either enrolled or have completed their Bachelors or Masters programs.

Looking at the results of age of puberty, some of the participants were not able to recall their ages when they get into puberty. But

the assumptions shared by them were that they recall the classes they were enrolled at that time and mostly their response was between classes 8th to 12th. About those who were able to recall their exact ages, males (refer table no. 2) had their puberty between 12 years old to 16 years old. Whereas, females (refer table no. 3) had their puberty between age 11 years old to 15 years old. On an average children have their puberty time between ages of 10 years to 17 years [15,16]. No doubt puberty is a global experience and all children have a similar and healthy average age to enter in puberty. But this mentioned range of age is very relevant to Asian context, until and unless children have any genetic issues or growth abnormality like precocious puberty or delayed puberty etc. [16,17].

Parents look after their children and are very concern about their lives. That is why it is important to see how often they take interest and involvement in puberty education of their children and how it can be facilitated further [18,19]. Looking towards the parental involvement, unfortunately none of the male participants had an experience of any guidance from either mother or father. In terms of female participants the scenario was quite similar but three of them had involvement of their mothers in terms of guiding them about puberty. Mothers either shared basics about puberty or menstruation or gave details about changes, discharges and hygiene as well. Looking at the scenario, it was very essential to see the common sources of guidance for these participants regarding puberty (table 2).

While reviewing the responses it was a common picture to witness about the presence of peers/ friends in terms of exchanging puberty related information or guiding about puberty related changes. Instead of parents many of them were learning or getting guidance by either siblings, relatives, friends, internet or school sources like health education sessions or teachers. Friends, relatives (like cousins) or internet were the main sources of puberty related education for male participants. On the other hand for female participants involvement of mothers, sisters or friends is common. Some of these female participants have learnt from sessions conducted at school, teacher or self learnt through observing other siblings of same sex.

It is well known that puberty itself is a time of emotional changes along with other physiologic and cognitive transformations. So, it becomes overwhelming for children when they are going through these normal changes alone and also with lack of complete or proper sex education or puberty related information [20,21]. Another main step was to gain the learning of emotions that these participants felt when they were going through puberty or what they felt when they get to know about pubertal changes? Also, we tried to explore who were main supporter or strategies of coping in this emotional time.

#	Age (Years)	Education	Parental discussion about puberty?	Who guided about puberty? (in the beginning or initial time)	What age you get into puberty? (Years)	What were your feelings?	How you managed emotionally?
1	22	B	X	Friends Internet	CRA	Excited Amazed	Friend support
2	21	B	X	Friends	13	Excited Surprised	Friend support
3	26	M	X	Relatives	CRA	Excited Satisfied	Friend support
4	38	B	X	Friends	CRA	Ambivalent (Sad/Happy)	Friend support
5	27	B	X	Friends	CRA	Excited	Help of internet/videos
6	25	B	X	Relatives	CRA	Excited Awesome	Self-managed Friend support
7	19	B	X	Friends Internet	12	Excited Surprised	Friend Support
8	26	M	X	Friends	14	Confident	Friend Support
9	38	M	X	Friends	CRA	Excited	Friend Support
10	22	B	X	Cousin	CRA	Excited	Friend Support
11	25	B	X	Friends	16	Excited Happy	Friend Support
12	25	I	X	Friends Internet	14	Excited Amazed	Friend Support
13	35	I	X	Friends	16	Natural, different, new, confident, curiosity	Friend Support

Table 2: Details of Male participants and their puberty experiences.

Key: B= bachelors, M=masters, I=intermediate, CRA= cannot recall age, X: No parental discussion.

Many of the responses were similar and the emotions in male participants were listed as feeling of excitement, amaze, surprise, satisfaction or happiness. Many had these alone or together as well, with the sense of confidence, ambivalence, awesomeness or curiosity. Feelings and emotions related to happening of natural phenomenon or happening of something new was also shared by males. However, female participants had somehow similar feelings but they had some different responses as well. The female participants felt they were surprised, afraid, nervous, irritated, confused or depressed with this experience. Some of them had a mixed feeling, a feeling of hate, sadness, worry, fear, feelings of shock, weirdness or some had a nauseated kind of feeling too. Also, we see that few of them were sad because of not getting this information and some felt the same experience what was shared with them.

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The feelings led them to a very different kind of experience which requires a support [22]. The emotional support in terms of coping from this experience and getting to learn a better knowledge about this stage. This support can of any means; by learning about puberty through any educational resources, talking to people whom you feel comfortable to discuss, or self-managed with any strategy or develop the understanding with time (table 3).

#	Age (Years)	Education	Parental discussion?	Who guided about puberty? (in the beginning or initial time)	What age you get into puberty? (Years)	What were your feelings?	How you managed emotionally?
1	21	I	X	Friends	13	Surprised Ambivalent	Friend support
2	21	M	X	Teacher	CRA	Afraid Nervous	Mother
3	20	I	X	A session at school	15	Irritated Nervous	Mother
4	28	M	X	Sister	12	Irritated	Self-managed
5	24	B	X	Self-assumptions by observing other siblings	CRA	Hate	Self-managed
6	23	M	X	Friends	15	Afraid "why my mother did not shared this"	Sister
7	21	I	X	Friends	CRA	Sad, depressed, worried, scared	Sister
8	18	B	X	Sisters	CRA	Shocked, confused, nervous, afraid	Sister
9	21	I	Mother shared about puberty and menstruation	Mother Sister	12	Nervous Depressed	Mother Sister
10	21	M	X	Friends Internet	CRA	Scared, con- fused, weird	Mother Sister
11	24	B	Mother discussed briefly not in detail	Mother Sister	15	Confused	Self-managed
12	23	B	X	Friends	15	Weird	Mother
13	29	B	X	Sister	14	Sad Nauseated	Sister Friend support
14	20	I	Mother shared about puberty and menstruation Shared details about vaginal discharges and hygiene	Mother	11	Scared Felt the same as mother de- scribed about the process	Brother Friends support
15	20	B	X	Sister Friends	13	Afraid	Sister
16	18	I	X	Teacher	11	Afraid	Mother

Table 3: Details of Female participants and their puberty experiences.

Key: B= bachelors, M=masters, I=intermediate, CRA= cannot recall age, X: No parental discussion.

Our participants shared the support systems they had or they referred in order to have a positive time of puberty when they get aware about this natural transformation. The involvement of friends as support system was a common response in all male participants. Other had either self-managed or used internet and educational videos to get a positive time during puberty. For female participants friends, sisters and mothers were common support system. However, one participant mentioned brother as a support system as well. Other tried to self-manage the puberty time period.

It was not clear from their responses that either self-management was done through any strategy or coping skill, or they have left on time to get over it.

Recommendations

As working with adolescent we all have to understand the reality that many of the young people enter into puberty when they are very young. They are not mature enough to understand and maintain themselves calm by dealing with their emotions like an adult, during the puberty experience. So, it is very important to train the common sources of guidance like peers, siblings, teachers etc. to provide these young children a proper platform of sex education and learnings about puberty

Developing socio culturally relevant audio or video material, comics, reading materials and online resources that are positive, healthy and user friendly so that children can easily access them and learn. Training parents and developing their knowledge and level of comfort to initiate these talk earlier with children. Empowering more healthcare providers with sensitivity who are dealing with adolescent children including nurses, doctors, physiotherapist, psychologists and students of medicine and nursing [23]. Improvement in their attitudes and knowledge will provide a healthy learning environment for children and families.

Strengthening social support system which is very important [24]. Providing specific sexuality related courses to child psychologists, training nurses, empowering school teachers, working with parents and most important young adolescent children who will become a significant source of learning and support for these kids in future.

Investing finances in young advocates for sexuality education is another necessary strategy. Parents should use puberty education as a tool of initiating discussion so that other important themes like gender, contraception, harassment, diseases etc. can also be discussed with comfort.

Both qualitative and quantitative research are necessary to be done in this sensitive theme. People are aware but not fully competent in this area which is much related to their routine lives. The

research will establish sense of how people are perceiving these themes and what better interventions are there to be implement in families or adolescent to improve communication and education on puberty and sexuality [25-27].

Conclusion

In conclusion, parents can offer clear and accurate information to their young adolescent children about puberty if they are trained and emphasized to do this so. Strengthening other power systems for adolescent children is key strategy. Empowering children to deal with the natural changes of body and life in an organized manner so that they can be stable in experiencing this rather having guilt trips or emotional instability. Underrating the age bracket of both sexes and initiating puberty related information earlier is very healthy for adolescent. Adolescent age is very sensitive and require parental involvement and social support system to have better learning experience and a positive and healthy puberty.

Bibliography

1. Goddings AL, et al. "The influence of puberty on subcortical brain development". *Neuroimage* 88 (2014): 242-251.
2. Dorn LD and Biro FM. "Puberty and its measurement: A decade in review". *Journal of research on adolescence* 21.1 (2011): 180-195.
3. Holder MK and Blaustein JD. "Puberty and adolescence as a time of vulnerability to stressors that alter neurobehavioral processes". *Frontiers in neuroendocrinology* 35.1 (2014): 89-110.
4. Santa Maria D, et al. "Parent-based adolescent sexual health interventions and effect on communication outcomes: a systematic review and meta-analyses". *Perspectives on sexual and reproductive health* 47.1 (2015): 37-50.
5. Byers ES, et al. "Parents' reports of sexual communication with children in kindergarten to grade 8". *Journal of Marriage and Family* 70.1 (2008): 86-96.
6. Crichton J, et al. "Mother-daughter communication about sexual maturation, abstinence and unintended pregnancy: Experiences from an informal settlement in Nairobi, Kenya". *Journal of Adolescence* 35.1 (2012): 21-30.
7. Morawska A, et al. "Parental confidence and preferences for communicating with their child about sexuality". *Sex Education* 15.3 (2015): 235-248.
8. Widman L, et al. "Parent-adolescent sexual communication and adolescent safer sex behavior: a meta-analysis". *JAMA paediatrics* 170.1 (2016): 52-61.
9. Flores D and Barroso J. "21st century parent-child sex communication in the United States: A process review". *The Journal of Sex Research* 54.4-5 (2017): 532-548.

10. McLean KC and Breen AV. "Processes and content of narrative identity development in adolescence: gender and well-being". *Developmental psychology* 45.3 (2009): 702-710.
11. Tseng YH., et al. "Gender Differences? Internet use and parent-child communication about sex toward sexual attitudes among early adolescents in Taiwan". *Journal of Nursing Research* 23.2 (2015):125-134.
12. Kamangu AA., et al. "Barriers to parent-child communication on sexual and reproductive health issues in East Africa: A review of qualitative research in four countries". *Journal of African Studies and Development* 9.4 (2017): 45-50.
13. Malacane M and Beckmeyer JJ. "A review of parent-based barriers to parent-adolescent communication about sex and sexuality: Implications for sex and family educators". *American Journal of Sexuality Education* 11.1 (2016): 27-40.
14. Pariera KL. "Barriers and prompts to parent-child sexual communication". *Journal of Family Communication* 16.3 (2016): 277-283.
15. Sawyer SM., et al. "The age of adolescence". *The Lancet Child and Adolescent Health* 2.3 (2018): 223-228.
16. Simmons RG. "Moving into adolescence: The impact of pubertal change and school context". *Routledge* (2017): 457.
17. Graber JA. "Pubertal timing and the development of psychopathology in adolescence and beyond". *Hormones and behaviour* 64.2 (2013): 262-269.
18. Sawyer SM., et al. "Adolescence: a foundation for future health". *The Lancet* 379.9826 (2012): 1630-1640.
19. Megan KB., et al. "Timing of Parent and Child Communication About Sexuality Relative to Children's Sexual Behaviors". *Pediatrics* 125.1 (2010): 34-42.
20. Costa R., et al. "Psychological support, puberty suppression, and psychosocial functioning in adolescents with gender dysphoria". *The journal of sexual medicine* 12.11 (2015): 2206-2214.
21. Rueger SY., et al. "A meta-analytic review of the association between perceived social support and depression in childhood and adolescence". *Psychological Bulletin* 142.10 (2016):1017-1067.
22. Morris AS., et al. "The impact of parenting on emotion regulation during childhood and adolescence". *Child Development Perspectives* 11.4 (2017): 233-238.
23. Santa Maria D., et al. "Nurses on the Front Lines: Improving Adolescent Sexual and Reproductive Health Across Health Care Settings: An evidence-based guide to delivering counseling and services to adolescents and parents". *The American journal of nursing* 117.1 (2017): 42-51.
24. Wentzel KR., et al. "Emotional support and expectations from parents, teachers, and peers predict adolescent competence at school". *Journal of Educational Psychology* 108.2 (2016): 242-255.
25. Shire SY., et al. "Increasing responsive parent-child interactions and joint engagement: Comparing the influence of parent-mediated intervention and parent psychoeducation". *Journal of autism and developmental disorders* 46.5 (2016): 1737-1747.
26. Namisi F., et al. "Adolescents' communication with parents, other adult family members and teachers on sexuality: effects of school-based interventions in South Africa and Tanzania". *AIDS and Behavior* 19.12 (2015): 2162-2176.
27. Grossman JM., et al. "Do as I say, not as I did: How parents talk with early adolescents about sex". *Journal of Family Issues* 37.2 (2016): 177-197.

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