



Parents' Education on Reproductive Health for Adolescents in Hanoi

^aDang Thi Lan Anh

^a University of Labor and Social Affair

ABSTRACT

During adolescence, it is crucial for individuals to receive proper education and acquire essential life skills in order to navigate the significant decisions they will face in life. The role of both parents is paramount in the personal socialization process. Specifically, educating children about physical changes, the reproductive process, marital responsibilities, parenting roles, and more is essential groundwork for their future development. Providing adolescents with reproductive health knowledge will not only promote a healthy lifestyle, but also support their physical and mental well-being, and equip them for successful career planning to ensure a stable future.

Keywords: *Family education, adolescence, reproductive health*

1. Introduction

Adolescents are currently confronted with numerous risks concerning sexual safety and reproductive health. There is a limited understanding of certain aspects related to reproductive health, particularly among young individuals residing in rural and remote areas. The inclination to accept premarital sex is on the rise among adolescents. Modern-day adolescents argue that sex does not necessarily have to be linked to marriage as traditionally perceived. Furthermore, adolescents lack the necessary skills for practicing safe sex. Although adolescents are highly likely to acquire knowledge about reproductive health, they often lack the initiative to do so. While most adolescents possess some knowledge about family planning, it is primarily acquired passively through various sources of information. It is worth noting that less than 50% of individuals actively engage in conversations about this topic.

Families who avoid reproductive health education and adolescents who do not view parents as the primary source of information on reproductive health may face various risks related to behaviors and lifestyles that impact morality and personality. These risks have the potential to influence both their future careers and the overall quality of society's population. As a result, initiating communication and conversations about sex and reproductive health within the family at an early stage is crucial to provide children with essential information and equip them for a fulfilling and healthy sexual life.

2. Some concepts

Latin for adolescence means "growing up" or "growing to maturity. Adolescence serves as the transitional phase between infancy and adulthood. It is a crucial period of transformation that necessitates personal growth and adaptation. According to psychology researcher Kuhlen, adolescence encompasses sexual, social, and ideological development, as well as career preparation and attempts to gain independence from parental control. In 1998, the World Health Organization (WHO), the United Nations Children's Fund (UNICEF), and the United Nations Population Fund (UNFPA) jointly defined adolescents as individuals aged between 10 and 19 years. Consequently, adolescents are categorized into three age groups: (i) Early adolescents, aged 10-14 years, (ii) Middle adolescents, aged 15-17 years, and (iii) Late adolescents, aged 18-19 years.

The concept of reproductive health: the International Conference on Population and Development (ICPD) in Cairo (Egypt) initiated a new program of action in 1994, shifting from a narrow focus on family planning services to a broader emphasis on the requirements of human reproductive health. At this conference, the notion of "reproductive health" was formally declared and spread to nations worldwide. *Reproductive health encompasses the physical, mental, and social well-being related to the functioning of the reproductive system, going beyond the mere absence of disease or disability. It emphasizes the importance of individuals, both men and women, having fulfilling and safe sexual lives, the ability to make informed decisions about reproduction, access to healthcare services, and the right to choose safe and effective family planning methods, including abortion when legal. This comprehensive approach aims to ensure safe pregnancies and childbirth, ultimately giving couples the opportunity to have healthy children.*

The National Strategy for adolescent reproductive health care emphasizes the importance of education, counseling, and the provision of services tailored to adolescents' needs. It outlines six key components of adolescent reproductive health, which include: (1) Recognizing puberty signs and features; (2) Understanding the psychophysiological development during adolescence; (3) Nurturing friendships and relationships; (4) Promoting healthy and safe sexual practices; (5) Addressing reproductive tract infections and sexually transmitted diseases.

3. Research methodology

The primary data for the article was gathered through a survey conducted at two high schools in Hanoi in 2023, one located in an urban setting and the other in a rural area. A total of 484 high school students aged 15-17 took part in the questionnaire survey, along with parents of children within the same age group.

4. Research results

4.1. Parents' education on the manifestations of puberty of sons and daughters

In the past, reproductive health education was not seen as an essential part of family upbringing in traditional societies. However, in contemporary society, parents are showing a greater inclination towards discussing the signs of puberty with their children. Out of the families that provided reproductive health education to their children, 30.2% of fathers and 69.8% of mothers took the initiative to educate and explain the symptoms of puberty to their children. This act of sharing, guiding, and teaching children about reproductive health signifies a progressive shift in the parental role within modern society.

Fathers typically prioritize educating their sons over their daughters, with a ratio of 55.3% to 44.7%. Conversely, girls are more likely to receive education in this aspect from their mothers than boys, with a ratio of 85.8% to 14.2%. This pattern suggests a change in parental educational practices, underscoring the impact of the socialization process. Socialization plays a vital role for both children and parents, emphasizing the reciprocal nature of the process.

Table 1: Parents' education on puberty manifestations by gender of children (%).

Characteristics of parents	Father		Mother	
	Son	Daughter	Son	Daughter
<i>Education level</i>				
High school	33,3	66,7	19,2	80,8
Elementary/Intermediate	44,4	55,6	15,4	84,6
College – University level	33,3	66,7	4,2	95,8
<i>Occupation</i>				
Agriculture	45,5	54,5	16,7	83,3
Non-agricultural	36,4	63,6	13,3	86,7
<i>Standard of living</i>				
Well off	37,5	62,5	12,5	87,5
Average	48,4	51,6	14,6	85,4
Difficult	33,3	66,7	10,0	90,0
<i>Region of residence</i>				
Rural	43,8	56,2	22,8	72,2
Urban	42,9	57,1	5,5	94,5

Source: Team's Survey Results 2023

Based on certain social characteristics of parents such as occupation, education level, standard of living, and region of residence, it is evident that a higher proportion of parents tend to educate their daughters more than their sons on matters related to adolescent puberty. Notably, there is a significant difference in the way mothers educate their sons compared to their daughters. This difference is partly due to the necessity of addressing the psychological challenges faced by both boys and girls. As children begin to experience physiological changes, boys seek to establish connections with both parents, while girls have a stronger inclination to bond with their mothers. Consequently, mothers play a more prominent role than fathers in imparting knowledge about puberty to their children.

According to the socialized perspective, fathers possess a singular inherent inclination, namely sexual orientation, which directs them towards females (mothers). On the other hand, mothers have two orientations: a sexual orientation that attracts them to males (husbands) and a reproductive orientation that guides them towards their children. Consequently, the bond between a mother and her child is somewhat instinctive and occurs without the need for conscious learning.

The communication level between parents and their children is evaluated based on the following categories: 1. Daily, 2. Not daily but weekly, 3. Not weekly but monthly, 4. Not monthly but quarterly, 5. No communication at all. The findings indicate that fathers engage in more discussions with their sons regarding puberty symptoms compared to girls (the average score for communication with boys was 4.54, while with daughters it was 4.68). There was also a variation among mothers in terms of discussing puberty-related issues with their sons and daughters ($t\text{-test} = 0.01 < 0.05$). The average score for communication between mothers and sons was 4.62, whereas with daughters it was 3.74. Specifically, mothers tend to have more conversations with their daughters about puberty manifestations compared to their sons. However, when it comes to embracing the physiological changes of adolescents, mothers still play a passive role. Most mothers only engage in communication, provide guidance, and offer explanations when their children have questions. They are generally not inclined to actively educate their children prior to this stage.

4.2. Parents' education on the consequences of abortion

Vietnam has one of the highest rates of teenage abortion in Southeast Asia and ranks fifth in the world. On average, there are about 300,000 abortions per year between the ages of 15 and 19 (of which 70% are students). Therefore, the consequences of abortion are also one of the contents that parents pay attention to, educate and warn their children about the risks that may occur if they do not know how to actively protect their own reproductive health.

51.4% of sons and 48.6% of daughters were educated by their fathers in this aspects. Mothers generally tend to educate their daughters more than their sons on the topic of abortion consequences. 66.7% of daughters receive education from their mothers on abortion consequences, while only 33.3% of sons are taught by their mothers.

Table 2: Parents' education on the consequences of abortion by gender of their children (%)

Characteristics of parents	Father		Mother	
	Sons	Daughters	Sons	Daughters
<i>Education level</i>				
High school	40,0	60,0	35,7	64,3
Elementary/Intermediate	33,3	66,7	30,0	70,0
College – University	42,9	57,1	7,1	92,9
<i>Occupation</i>				
Agricultural	50,0	50,0	33,3	66,7
Non-agricultural	44,4	55,6	31,7	68,3
<i>Standard of living</i>				
Well-off	28,6	71,4	33,3	66,7
Average	60,0	40,0	32,5	67,5
Difficult	25,0	75,0	33,3	66,7
<i>Region of residence</i>				
Rural	47,8	52,2	43,3	56,7
Urban	46,2	53,8	20,7	79,3

Source: Team's Survey Results 2023

In general, parents tend to educate girls more than boys about the potential outcomes of abortion. From a socialization perspective, children acquire their social values through interactions within their families. They learn how to fulfill specific social roles that they will later assume. Unwanted and teenage pregnancies can significantly impact the process of assuming the role of a mother in the future. Therefore, it is considered essential to provide daughters with information about the consequences of abortion, enabling them to consciously prioritize and safeguard their reproductive health. Consequently, the discrepancy in parental education regarding abortion's consequences for sons and daughters reflects the gradual accumulation of experience and social values specific to daughters, aligning with societal expectations of their social roles.

Mothers in families with different standards of living have higher rates of education for their daughters. The father in the family is well-off and has difficulty educating his daughter more than the son. Conversely, rural fathers tend to prioritize educating their daughters about the repercussions of abortion more than their sons. On the other hand, urban fathers focus on educating their sons to a greater extent. In both rural and urban settings, mothers play a crucial role in educating their daughters more than their sons, although urban areas witness a significant disparity in educational opportunities (boys: 20.7%, girls: 79.3%).

The girls' average score for this level of content exchange was 4.61, while the boys' average score was 4.86. The t-test result of 0.01 is less than the significance level of 0.05. Hence, it can be concluded that the level of communication between parents and daughters regarding the potential consequences of teen pregnancy and abortion is higher than that between parents and sons. This difference can be attributed, in part, to the influence of gender socialization on parents of adolescents. A girl may be unfairly stigmatized for their sexual behavior, whereas men often escape such judgment. This imbalance stems from the prevailing male dominance in societal perceptions and attitudes towards sex. Consequently, many parents hold the belief that the repercussions of abortion and unwanted pregnancy primarily affect girls. As a result, daughters are often at a disadvantage and may suffer these consequences if they lack knowledge on self-care and reproductive health protection.

The frequency of communication regarding the consequences of abortion with children is limited, occurring only a few times a year. However, this communication does serve as a partial demonstration of the importance of educating mothers about reproductive health. In terms of gender socialization, mothers play a significant role in the lives of adolescents during the initial stages of puberty, when they undergo both psychological and physiological changes. Huber argued that since men cannot conceive or nurture children, the responsibility of raising children often falls to women. This is one of the reasons why mothers tend to have a closer relationship with their children and why they are often the preferred choice for both sons and daughters during the early stages of adolescence, when they experience various changes.

4.3. Methods of reproductive health education of parents

Education in the family refers to how parents teach their children about specific topics. When it comes to educating sons and daughters about reproductive health, it involves more than just sharing information; it also involves effectively communicating with adolescent children.

Reproductive health education typically adheres to a set of fundamental principles. One such principle is self-discipline, wherein parents firmly believe in the correctness and necessity of their education, approaching it with the same level of conscientiousness as any other aspect of social life. Other principles include relevance, initiative, trust, authenticity, systematicism, and openness. Consequently, without employing suitable educational methods and skills, it becomes challenging to effectively accomplish reproductive health education.

The survey results focus on the main form that parents can take as follows:

Table 3: Reproductive health education methods of parents (%)

Methods	Father	Mother
<i>Specific instructions</i>	42,5	57,5
<i>Private communication</i>	38,2	61,8
<i>Supply books, newspapers</i>	39,4	60,6
<i>Hinting</i>	60,0	40,0
<i>Warning of bad consequences</i>	54,0	46,0

Source: Team's Survey Results 2023

Fathers commonly employ the techniques of "hinting" and "Warning of bad consequences" when teaching their children about the importance of maintaining and safeguarding reproductive health. Conversely, mothers adopt various approaches of "private communication" with their children and "supply books" to encourage active learning on the subject.

Gender factor plays a significant role in the implementation of educational methods concerning reproductive health for children. Private communication often serves as a means to explain and answer children's inquiries regarding puberty, romantic behavior, basic knowledge about pregnancy, contraceptives, and the consequences of abortion, particularly among adolescents. This communication is accompanied by specific instructions tailored to each situation or aimed at providing psychological relief for children. Many parents believe that engaging in one-on-one conversations with their children fosters better understanding between them. It presents an opportunity to address and clarify topics that children may fear or struggle to comprehend. However, parents typically engage in private communication only when their children express a need to confide in them. Unfortunately, many parents have not taken the initiative to discuss matters related to reproductive health.

With the advancement of science, technology, and information technology, the contents of reproductive health, particularly adolescent reproductive health, has become more widespread in society. Hence, many parents opt to offer books and newspapers to their children for independent learning. Providing educational materials on reproductive health for self-study, along with private discussions and explanations from parents, can help prevent uncomfortable situations in parent-child relationships. This approach allows children to gain insights from others' experiences and gradually develop perspectives, attitudes, and behaviors related to friendships, love, and marriage. Parents play a crucial role in guiding and monitoring the information that influences their children.

Table 4: Reproductive health education methods of parents by gender of their children (%)

Education methods	Father		Mother	
	Sons	Daughters	Sons	Daughters
<i>Warning of bad consequences</i>	32,4	21,6	15,0	23,5
<i>Specific instructions / Private communication</i>	21,6	18,9	12,5	28,6
<i>Supply books, newspapers</i>	13,8	10,8	22,5	17,3
<i>Ask others to explain</i>	12,1	8,1	12,5	8,2
<i>Hinting</i>	19,3	28,4	27,5	17,3
<i>Parents and children participate in club</i>	4,3	8,1	10,0	5,1

Source: Team's Survey Results 2023

32.4% of fathers opt for the approach of issuing a "Warning of bad consequences" when educating their sons about the importance of preserving and safeguarding reproductive health. On the other hand, when it comes to daughters, fathers predominantly resort to "hinting" (28.4%). This preference can be partly attributed to the sensitive and delicate nature of reproductive health-related discussions, which are best avoided in crowded settings and particularly inappropriate within the context of family culture. Consequently, individuals of the opposite sex find it challenging to openly communicate

with each other on this topic. Hence, when educating or addressing this subject with their daughters, many fathers tend to choose the method of "hinting". Conversely, the approach of issuing a "warning of bad consequences" is more commonly employed by fathers when educating their sons. Fathers typically adopt a permissive style of parenting, displaying less concern and being reserved. However, when it comes to teaching, they adopt a tough, strict, and authoritative demeanor, often resorting to shouting. In their teaching approach, fathers often employ concise and general language, providing only guiding thoughts.

Based on the socialization perspective, fathers and mothers differ in their approach to reproductive health education for their children not only due to biological factors like gender similarity, but also due to intellectual, moral, and emotional differences. This variation is a result of cultural influences. Gender poses a complex challenge for parents as they navigate educating their children during puberty. Overcoming embarrassment and shyness stands as the primary obstacle for parents [9]. The quality and impact of children's education is evident not just in its duration, but also in the methods and depth of coverage. It encompasses not only factual knowledge but also ideological guidance. Parents today still pay little attention to reproductive health education and there are still gender differences in choosing reproductive health education methods for sons and daughters in the family.

As previously mentioned, the impact and influence of gender factors on the implementation of reproductive health education methods by parents is noteworthy. When it comes to daughters, mothers primarily utilize "specific explanatory instructions", while "hinting" is employed towards their sons.

Mothers employed the highest proportion of "hinting" (27.5%) while educating reproductive health education to their sons, whereas they predominantly utilized "precise explanations/instructions" techniques for their daughters. Similar to fathers, mothers also employ "hinting" as the main approach to educate their sons about love, sexuality, and the reproductive aspects of the mother. This is partly due to cultural barriers that hinder easy communication between individuals of the opposite sex. However, when it comes to teaching daughters (same gender), mothers opt for a "specific explanation/instructions" approach to facilitate better understanding. Mothers are often perceived as having a flexible, gentle, and affectionate teaching style, being close to their children and providing thorough and detailed guidance. By guiding and explaining matters specifically, mothers can foster a better understanding between themselves and their daughters, enabling them to discuss sensitive topics that are otherwise difficult to address.

5. Conclusions

The family serves as the initial educational setting where adolescents are provided with the opportunity to adapt, live, learn, and engage in play, while also communicating within a new society, in accordance with societal needs. The behavior exhibited by parents in educating their children reflects the process of socialization for both parties involved. For children, it's acceptance, and for parents, it's education. In the past, discussing topics such as puberty, sex, pregnancy, and abortion with children was considered inappropriate, as it was believed to "draw deer running". However, in today's society, although parental education regarding reproductive health is not yet widely practiced, there is a noticeable shift in parents' perception of adolescent reproductive health care.

There exist differences in gender roles when it comes to imparting knowledge about reproductive health. In comparison to fathers, mothers tend to play a more assertive role in educating and instructing their children about reproductive health. Both sons and daughters tend to confide in their mothers more than their fathers. Daughters frequently engage in more conversations with their mothers than with their fathers.

Mothers tend to educate their daughters more than their sons when it comes to matters concerning reproductive health. Likewise, the level of communication between a mother and her daughter regarding these issues is typically higher compared to the communication with her son.

The father tends to educate his daughter at a higher rate than his son regarding the manifestations of puberty and the consequences of abortion. On the other hand, sons receive more education from their fathers on topics such as safe sex and physical hygiene. Therefore, parents focus on educating both boys and girls about puberty manifestations and physical hygiene because these topics are closely related to the characteristics of adolescence. During this age, individuals undergo physiological maturity, psychological changes, and strive to assert themselves in social relationships.

Gender characteristics in parent-child relationships can be observed in the education provided on reproductive health matters. Both parents typically share information with their sons and daughters who are displaying signs of puberty, covering topics such as puberty symptoms and personal hygiene practices.

There are differences in gender roles when parents use different methods to educate sons and daughters about reproductive health in the family. While fathers use "hinting" to teach their daughters about reproductive health, to his son, the father uses the techniques of "warning of risks as well as mentioning bad consequences" to guide his own thoughts and regulate his behavior. Similarly, the mother also uses "hinting" to her son, but to her daughter it is a specific way of guiding/explaining to her about reproductive health. It is evident that the father's approach to education leans more towards rational aspects, while the mother's approach is characterized by a gentler and emotionally-driven style.

REFERENCES

1. Dang Quoc Bao (1999) *Population education for students with the depth of sex education, reproductive health is a necessary issue.* Proceedings of the workshop "Policy Makers on Adolescent reproductive health" Central Committee of the Communist Youth Union of Ho Chi Minh City, Da Nang.
2. Mai Huy Bich (2003) *Journal of Sociology*, Vol. 2, p.15
3. Do Thi Binh (2005), *Family studies: methodological issues.* Family and Gender Institute.

-
4. John Coleman (2002), *Talk to your child about gender* (translator: Nguyen Dai). Women's Publishing House.
 5. Dao Xuan Dung (2010) *SAVY2 Thematic Report on Puberty – Sexual Health – Reproductive Health in Vietnamese Adolescents*.
 6. Vu Manh Loi (1999), *Social ecology, history and contemporary issues*. Journal of Sociology No. 1. 1999.
 7. Catherin Scornet (2012), *Gender, sexuality and reproduction in Viet Nam*. Summer course in Tam Dao.
 8. National Survey on Vietnamese Adolescents and Youth (SAVY2) 2009.
 9. WHO (1975), *Educacion and treatment in human sexuality: The training of health professional*, Geneva: World Health Organization.