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# **MOTHER-DAUGHTER**

COMMUNICATION ABOUT SEXUAL AND REPRODUCTIVE HEALTH IN RURAL AREAS OF ALEXANDRIA, EGYPT

In many parts of the world, adolescents are poorly informed about their health, bodies, sexuality, and physical well-being. Adolescent girls in particular are often kept from learning about sexuality and reproductive health (SRH) issues because of cultural and religious sensitivities. This is particularly true in Egypt, where adolescents are often reluctant to ask for SRH information from adults in their families, communities, or in professional settings.<sup>1</sup>

International studies show that parents are among the preferred sources of SRH education for adolescents around the world, and improving the quality of communication between parents and adolescents can protect adolescents from risky behavior.<sup>2</sup>

This working paper presents key findings from a study conducted in Egypt in the spring of 2011 on the frequency and quality of communication about SRH issues between mothers and adolescent daughters. The findings suggest that communication between mothers and daughters and knowledge about these sensitive topics is poor; however, both mothers and daughters are eager for more information on SRH matters.

This study is part of a series of studies on the same topic sponsored by the Population Council and conducted in several countries using similar research methodologies. The study presented here was conducted in a rural slum area in Alexandria Governorate. Adolescent girls (ages 13 to 16) and their mothers (132 participants total) took part in 14 focus group discussions. This age group was chosen because it is a time when girls undergo major physical and emotional changes, and communication between mothers and daughters is crucial. The focus group discussions with mothers and daughters covered topics including knowledge of puberty, attitudes about discussing SRH topics between mothers and daughters, barriers to effective motherdaughter communication, and sources of information on SRH.

It should be noted that conducting research on youth SRH is challenging and has its limitations due to cultural and religious barriers and the age and characteristics of the study population; this study was no exception.

# Mothers and Daughters Are Eager for More Information

The study showed that many girls faced adolescence without any information or formal education on puberty or SRH. The content and quality of their communication with their mothers about these subjects was found to be poor, contributing to the girls' lack of understanding. Additionally, misinformation about SRH topics was high among all participants. Yet, the study revealed that both mothers and daughters are eager for more information, particularly more factual information about SRH.

During focus group discussions, the girls agreed that they had insufficient knowledge regarding many aspects of SRH. The majority of girls preferred to have their mothers be the most important source of information about SRH. Mothers and daughters claimed to be equally comfortable talking with each

YASMINE Y. MUHAMMAD participated in a joint PRB-Assiut University training on policy communication held in Assiut in 2009. She is an assistant lecturer of Maternal and Child Health at the Family Health Department in the High Institute of Public Health at Alexandria University, Egypt. This paper is based on key findings of her research conducted in collaboration with **HEBA M. MAMDOUH**, her colleague at the High Institute. Their research was supported by the Population Council office in Cairo. Ms. Yasmine Muhammad can be reached at yasmine.yousri@gmail.com. other about certain topics, including changes during puberty and menstruation. One daughter said, *"We should tell our mothers everything. They should be our friends, our sisters and everything. They would teach us what's right and what's wrong."* 

But despite their reported level of comfort talking with each other, many mothers and daughters had not discussed puberty and menstruation, and many girls had experienced the onset of menstruation without any previous background on the event. These and other findings suggest that a gap exists between the information the daughters need and what they actually received from their mothers. Even mothers and daughters who considered their relationships close and their communications good admitted that there were many taboo subjects that they could never discuss together. These topics included marriage, sexuality, sexually transmitted diseases, and pregnancy.

Further, it was clear from the focus group discussions that both mothers and daughters had misinformation and many misconceptions about SRH topics. Both, however, expressed interest in acquiring more accurate and complete information on these subjects. One mother said, *"We don't have enough knowledge about such things and also we don't know what to tell our daughters concerning these issues… We want you to teach us, so that we can teach our daughters and talk with them."* 

A daughter stated her desire for more information this way, "We wish to get all that you know concerning these issues. We want to know everything about love, marriage, and pregnancy."

The mothers and daughters identified barriers to initiating communication. Many mothers stated that they should only initiate discussions about SRH topics with their daughters on certain occasions, such as a life change or an event, or when girls seek certain information or ask for advice. Daughters' reported that they were reluctant to ask their mothers for this type of information because of embarrassment; fear of judgment; and perceived lack of their mother's interest or willingness, time, and trust. A significant factor that prevented many girls from initiating such a discussion was fear that their mothers would be suspicious of them and question their morals and behavior. One daughter said, "Sometimes when I feel that I want to know more about a certain issue I heard about or something I don't understand... I want to ask my mother. So as not to make her suspicious of me and ask me where I learned about the topic. I tell her I heard about it from the Turkish television series."

Both mothers and daughters mentioned television programs as an entry point for communication. Sensitive topics could be broached by discussing them in regard to a television plot line rather than in relation to personal needs or desires for information.

## PRB's Middle East and North Africa (MENA) Program

PRB's MENA program, initiated in 2001 with funding from the Ford Foundation, responds to the region's need for timely and objective information on population, socioeconomic, and reproductive health issues. The project explores the linkages among these issues and provides evidence-based policy and program recommendations for decisionmakers in the region. Working closely with research organizations in the region, the project team produces a series of policy briefs (in English and Arabic) on current population and reproductive health topics, conducts workshops on policy communication and makes presentations at regional and international conferences.

In 2008, PRB invited researchers from the MENA region to participate in its summer policy communication workshop. Later, PRB and Assiut University, Egypt, held joint policy communication workshops in Assiut (December 2009) and in Hurghada (October 2011). The workshops (conducted in English) helped researchers identify the policy implications of their research findings, understand how research can influence the policy process, and communicate findings. Selected participants from the workshops summarized the results of their research findings as part of PRB's MENA Working Paper Series. The papers are available in English and Arabic at www.prb.org:

- Mother-Daughter Communication About Sexual and Reproductive Health in Rural Areas of Alexandria, Egypt, by Yasmine Y. Muhammad and Heba M. Mamdouh
- Quality Sexual Education Needed for Adolescents in Egyptian Schools, by Fatma El Zahraa Geel
- Minding the Gap in Alexandria: Talking to Girls in Schools About Reproductive Health, by Sara A. Hanafy
- "Are Imams in Egypt Prepared to Help Stop the Spread of HIV/AIDS?" by Omaima El-Gibaly and Khaled Hemeyda
- "Domestic Violence High in Egypt, Affecting Women's Reproductive Health," by Eman M. Monazea and Ekram M. Abdel Khalek
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- Marriage Patterns in Palestine, by Yara Jarallah, Birzeit University
- 10 Years After Introducing Mobile Clinics in Assiut Governorate, by Ghada Salah El-Deen T. Al-Attar, Assiut University

# A Need for Greater Knowledge and Support

The high level of misinformation on SRH among both mothers and daughters is a source of concern. This suggests that **sources of accurate information about SRH for adolescent girls must come from outside the home,** strengthening **the argument for quality SRH education programs in both formal and nonformal education programs.** 

As mentioned earlier, the study also revealed that mothers and daughters, though willing, had difficulty initiating and having conversations about SRH. A noteworthy finding is that **television and other forms of media can serve as valuable entry points** for these conversations. This suggests an opportunity for **researchers and health experts to work with media to ensure** that when these topics are included as storylines, **factual information is portrayed** to avoid perpetuating misinformation.

Despite the many communication barriers that emerged, the study findings demonstrate that both mothers and daughters were willing to talk and listen to each other. Addressing the lack of information, misconceptions, and the barriers to effective communication with their mothers can lead to improved knowledge for adolescent girls. With greater knowledge about SRH issues and a feeling of support from within the family, girls will be better able to face puberty and adolescence in healthy and empowered ways.

### References

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