# Knowledge of personal and sexual development amongst young people in Pakistan.

Monique Hennink\*, Imran Rana and Robina Iqbal

# **OPPORTUNITIES AND CHOICES WORKKING PAPER** NO. 12 JUNE 2004

Monique Hennink (Ph.D) is senior research fellow on the UK DfID funded research program, *Opportunities and Choices*, Division of Social Statistics, School of Social Sciences, University of Southampton, Southampton SO17 1BJ, UK. Tel: +44 -2380-597989, Fax: +44-2380-593846, Email: mon@socsci.soton.ac.uk

Imran Nazir Rana is clinical psychologist and Robina Iqbal is Director of the NGO *Helping Hands for Community Services*, House No. 211, Block No. 2, Sector B-II, Township, Lahore 57400, Pakistan. Tel: +92-42-5152353, Email: helph@wol.net, imrananr@hotmail.com

## Knowledge of personal and sexual development amongst young people in Pakistan.

# Abstract

Pakistan has one of the largest cohorts of young people in its history, yet research on adolescents is still relatively new in Pakistan. This study conducted 24 focus group discussions to explore young peoples' experiences of gaining knowledge on personal and sexual development. One of the most striking findings is the gendered pattern of knowledge acquisition. Young women typically gain information from a limited number of sources within the home; while young men accessed a wide variety of information sources outside the home. These findings highlight the need for gender specific information dissemination programs to young people in Pakistan. Also prominent is the event-based nature of gaining information, whereby specific events (i.e. puberty, marriage) trigger information provision to young people, however often too late to be educative. Young people were critical of the quality of information they received, which often led to confusion and stress in understanding sexual development and relations. These findings highlight a gap in formal, neutral information sources for young people in Pakistan on personal and sexual development. Although the merits of school-based information delivery were highlighted, this strategy may have little impact on young women due to their low levels of school attendance and high drop out during adolescence.

## Introduction

The period of adolescence is a powerfully formative time of transition. Adolescence in Pakistan is distinguished by a transformation of social roles, expectations and responsibilities (Durrant 2000). There exists a strong asymmetry in the experiences of young women and men growing up in Pakistan. Young women of all socio-economic statuses are often restricted to a life centred around the home, and at puberty girls are increasingly protected from the outside world with restrictions on their mobility and independent actions (Qazi 2003, Fikree and Pasha 2004); while for young men the world often expands after puberty as they gain autonomy, mobility, opportunity and responsibilities outside the home. To a large degree a young person's life in Pakistan is scripted by their gender.

The concept of adolescence as a distinct period in young peoples' lives is still relatively new in many developing country societies, particularly in research and policy terms. Girls in these societies have no period of adolescence as they are married soon after menarche, while for boys the period is traditionally longer as they need time to acquire assets before marriage (Mensch *et al* 1998, Khan 2000). However, with the increasing age at marriage this period of transition to adulthood is lengthening. While the number of demographic studies on adolescent fertility has increased in response to the HIV epidemic, many aspects of young peoples' lives remain poorly understood (Mensch *et al* 1998, WHO 2003). Pakistan has one of the largest cohorts of young people in its history, with approximately 25 million adolescents and young people aged 15 and 24 years (Government of Pakistan 2001). Yet research on adolescents is still relatively new in Pakistan, and sexuality among adolescents is under-researched, primarily due to social taboos restricting open discussion of sexuality particularly amongst unmarried youth (Kahn 2000).

There exist large gender differences in school attendance and employment levels amongst 15-24 year olds in Pakistan. Only 54% of females ever enrolled in school compared with 84% of males; these differences become more pronounced at puberty when females are more likely to drop out of school than male counterparts (Sathar *et al* 2003). The majority of young men (83%) will enter the paid labour force, while 39% of young women work by age 24 mostly in part-time home based activities (i.e. stitching, knitting) (Sathar *et al* 2003). A large proportion of young women (45%) are therefore not in school, not employed and not married and occupied with domestic chores inside the home. Only 13% of young men were in a similar situation (Durrant 2000). This confinement to the home also has implications for young women's' mobility and exposure to activities and opportunities outside the home.

In Pakistan, as in many south Asian societies, a high priority is placed on preserving the chastity of young women before marriage. Female sexuality is tightly controlled by male elders and is the foundation of many social norms and values (Khan 1998, Khan 2000). This is expressed most severely in restrictions placed on unmarried girls and seclusion norms are common from puberty onwards (Bott and Jejeebhoy 2001). As girls enter puberty they often experience increased enforcement of *purdah* (segregation) norms, such as covering the head and restrictions on their mobility and social interactions, which may lead to restricted access to employment opportunities or withdrawal from education (Mumtaz and Raouf 1996, Khan 1998). These controls are placed to preserve the family and social honour (*Izzat*). The high social cost of violating these norms by engaging in relations with men, lead to many fears amongst young women surrounding sexuality (Khan 2000). Since open discussion of sexuality is discouraged, little is also known of sexual attitudes and behaviour of young people in Pakistan (Khan 2000).

Many adolescents in south Asia are poorly informed about sexual issues, reproductive biology and health. Any information received is often incomplete and confused. Low levels of school attendance, lack of sex education and attitudes that prohibit discussion of sexual issues all confound to exacerbate ignorance on these matters (McCauley and Salter 1995, Bott and Jejeebhoy 2001). There also exists ambivalence within education systems in South Asia about sex education, although this is beginning to change in the wake of the AIDS epidemic. In countries providing sex education, it is often biological and scientific and ignores other issues of sexuality. In addition, teachers often find sex education issues embarrassing or shameful and may avoid such issues, even within schools that supposedly have a family life education curriculum (Bott and Jejeebhoy 2001, James-Traore *et al* 2004). Parents also experience difficulties in communicating with adolescents about sexual issues and may provide only limited or vague information. The net result of adults' reluctance to teach and discuss sexual issues is that young people in south Asia rely on peers and the media for information about sex and reproduction.

Although the education system in Pakistan includes population, family planning and reproductive biology modules, there exists no formal curriculum for sex education, which remains a taboo subject. The Education Policy states that secondary school curricula will include additional topics such as AIDS awareness and environmental issues, however it makes no recommendation for basic instruction on human reproduction and sexuality (Khan 2000). More recently, the global AIDS epidemic has forced the issue of sexual health education and there exist tentative efforts to introduce some elements of sexual health education, such as the development of an AIDS awareness curriculum for secondary schools in Karachi (Aahung 1999), and informing adolescents about reproductive health within the context of promoting small family norms (FPAP n.d.). However, even such efforts remain limited due to the small proportion of adolescents who complete secondary education (Sathar *et al* 2003). This gap in curricula means that there is no neutral source of information for young people about sexual issues; this together with the fact that young people do not rely on their parents for information on sexual issues means that sources of information are often unreliable and exploitative (Qidwai 1996).

Little data are available on 10-19 year olds in Pakistan, particularly unmarried or males in this age group. Only very recently have studies focussed specifically on adolescents as a distinct cohort of the population with their own issues and circumstances; however studies on

adolescents' sexual and reproductive issues remain limited. A number of key studies have contributed to this gap. The first comprehensive synthesis of information on the lives of young people in Pakistan was conducted by Durrant (2000). This study collated information mostly from the Pakistan Integrated Household Survey (PIHS) of 1991 and 1995-96. The PIHS does not specifically focus on adolescents but provides a rich source of data on living arrangements, health, education work, marriage and childbearing of young people in Pakistan. Durrant's study highlighted the urgent need to collect information from adolescents themselves in order to develop appropriate policies and programs for young people in Pakistan. An unpublished study conducted by Pakistan Voluntary Health and Nutrition Association (PAVHNA) (2000) was amongst the first studies to directly interview young people in Pakistan about personal and sexual development issues. This study explored unmarried adolescents' knowledge, attitudes, and sources of information about sexual and reproductive health. A survey of 310 unmarried young people aged 13-21 was conducted in four cities in Pakistan. Perhaps the most significant contribution to research on young people in Pakistan was conducted by Sathar and colleagues in 2001-02. This study is distinctive as the largest nationally representative survey to focus on young people aged 15-24 years in Pakistan (Sathar *et al* 2003). It was the first time that young people had been asked directly about their lives in a national survey, rather than having adults speak for them. The inclusion of both young males and females as well as unmarried youth provide new dimensions in this study. A total of 8,074 young people were interviewed. The survey explored the transition to adulthood and the social and economic forces that shape the transition; information was collected on young people's education, employment, mobility, decision-making, puberty, marriage and childbearing. This study represents the most complete data source on young peoples' lives in Pakistan.

These studies provide only limited data about puberty and sexual development. The study by PAVHNA (2000) highlights the greater awareness of puberty amongst boys than girls. More boys (90%) than girls (80%) had discussed 'bodily changes' of puberty with peers or family

members; and more boys than girls were aware of changes in the opposite sex during puberty, for example, 70% of boys had heard of menstruation, while only 30% of girls had heard of 'wet dreams'. In addition, more boys (77%) than girls (66%) were aware of how a woman becomes pregnant. The survey by Sathar *et al* (2003) showed that girls were most likely to hear about puberty from their mother, sister or a friend; while the majority of males acquired information from their male peers. However, girls are less likely to be informed about puberty before it occurs than boys (30% vs 41%), and are also less likely to be among peers at school when it occurs. There is also a suggestion that the timing of information on puberty is inadequate, as three quarters of girls and two thirds of boys felt that they should have been informed about puberty in advance (Sathar *et al* 2003).

The studies outlined above provide an important first glimpse into aspects surrounding the transition to adulthood in Pakistan using national level data from young people themselves. However, such quantitative surveys are unable to provide an understanding of the process and context of such knowledge acquisition, for example identifying young peoples' perceptions on the type, quality and timing of the information they received, the context within which the information was provided, and the cultural barriers surrounding the discussion of these issues. Survey questions can also mask misinformation and therefore overestimate knowledge, for example the question: *Do you know how a woman becomes pregnant?* Yes/ No (PAVHNA 2000), takes no account of those who believe that kissing causes pregnancy. Exploring the process and context of young peoples' knowledge of personal and sexual development is therefore an important follow on from these initial quantitative studies.

The aim of this study is to examine young peoples' experiences in gaining knowledge of personal and sexual development within the cultural context of Pakistan where the discussion of such issues is often suppressed. The specific objectives are; to identify the *process* and *context* of knowledge acquisition on personal and sexual development, including timing, sources and topics of information; to identify young peoples' perceptions about the adequacy

of information received and preferred modes of information delivery; and to identify key gender differences in the process of gaining such information.

# Methodology

This study was conducted during 2002-2003 and used focus group discussions to explore young peoples' experiences of gaining knowledge on personal and sexual development. Twenty-four focus group discussions were conducted; which were primarily stratified by marital status and gender (table 1). The groups comprised young men and women aged between 18-25 years who were; a) unmarried; or b) recently married (< 2 years). The lower age limit of 18 was selected so that participants had passed through puberty. The groups were further stratified by socio-economic status (AB or CD) and geographic location (Lahore and Faisalabad).

# [ Table 1 about here]

The study was conducted in two cities with differing socio-cultural characteristics in the Punjab province, Lahore and Faisalabad. Lahore is a major urban centre, with high levels of education and employment. In contrast, Faisalabad is a smaller industrial city, which employs many rural migrants from surrounding villages. Therefore, the socio-cultural composition of the population is somewhat reflective of nearby villages in terms of attitudes, behaviour, cultural norms and traditions. These two cities were selected so to include different types of urban participants.

Participant selection involved identifying clusters within each city which were of high or low socio-economic status. Within these clusters participants were recruited from households using systematic random sampling of every 10<sup>th</sup> house, until 8-10 participants were recruited for each group. Eligible participants were identified using a screening questionnaire to determine the age and marital status of young people in the household. Only one person from

a household was selected to avoid disclosure bias in the discussions. Given the restrictions placed on the mobility of young women in Pakistani society and the sensitive nature of the discussion topics, careful attention needed to be given to the recruitment of participants. Male and female recruiters were used, who had the endorsement of local community leaders. Recruiters were accompanied by a familiar local resident who also accompanied participant to the group venue. During household recruitment, consent for participation in the group discussions was sought from the young person themselves and also from the appropriate guardian (parent or elder) or spouse; both parties signed a consent form to partake in the discussion. At the start of group discussions participants were informed about confidentiality of the discussion and consent was sought to tape record the discussion. The group discussions were conducted within the local neighbourhood, usually in a school, meeting hall or hotel. The discussions were moderated by trained bi-lingual researchers whose characteristics matched those of the participants in terms of age and gender. Group discussion was conducted in the language preferred by participants; most were conducted in the provincial language, Punjabi, others in Urdu. The question route covered a range of discussion topics, including; young peoples' leisure activities, general health issues; knowledge of personal and sexual development issues; sources of information and preferred modes of information delivery. Each group discussion was tape recorded, transcribed verbatim and translated into English.

Data analysis involved coding the textual data by themes raised by participants and entering the coded data into the ATLAS-Ti (v. 4.2) software package. The textual data were then analysed using *thematic analysis*, which involves identifying issues, experiences and processes from group discussions; and analysing these across the whole data set to build a comprehensive picture of collective experience (Taylor and Bogdan 1984, Benner 1985, Leininger 1985). Themes are also compared between subgroups of the target population (i.e. gender, location, socio-economic status), to identify variations in behaviour or attitudes. Verbatim quotations from respondents are used to illustrate key processes or patterns of behaviour.

# Results

The results are presented by the three main topics of discussion in the focus groups, which included the process of gaining information on a) personal development, b) sexual development, and c) preferred modes of information delivery on these topics. Figure 1 summarises the process of knowledge acquisition, highlighting key events in young peoples' lives during which information on personal or sexual development was given. Although the key events are similar for both young men and women the information sources and type of information received during these events differs by gender. One of the most prominent features of the results of this study is the differing patterns in knowledge acquisition by gender; the results below are therefore described separately for young men and women to highlight these gendered differences.

# Knowledge of personal development

Personal development refers to the physical and emotional changes during puberty, including, physical development, menarche and wet dreams. Focus group participants were asked how young people gain information about personal development issues, their information sources, and the type and depth of the information received.

Many young women reported that they received little or no information about the process of puberty until they had reached menarche. Some young women had awareness about menstruation from observing older sisters with sanitary pads or that they avoided prayers at certain times (i.e. during menses), and others spoke with school peers who had started menstruating. For most young women, however, menarche represented a significant gateway to first knowledge of personal development. This event acted as a trigger for family members to provide information about menstruation or for girls to seek information. The quotations below illustrate young women's experiences of menarche.

When my menses started I did not know what has happened to me. I cried so much. My mother was not at home. When she came back, I told her I was going to die as I never knew what the real problem was. Mother told me to feel relax, there is nothing to worry about. (RH9 married women Faisalabad)

When it (menses) started with me the first time I was taking a bath, I did not know about it. My mother was washing clothes, when I threw my clothes down she came and told me to come out and briefed me all about it. I felt very strange but I also felt good, she was so caring. She asked me to take a tablet, eat egg, the pain also started. (RH3 married women Lahore).

Believe me I did not know (about menses), I was in 9th or 10th class, my elder sister already had these but I didn't know about that. I went to mama and told her and she told me it was not a problem and after seeing her face expression I also relaxed. (RH17 unmarried women Faisalabad)

Mothers were the most common source of information about menses; but other family members within the home (i.e. older sister, sister-in-law) also provided information. Young women stated that mothers were often shy in providing information on menses and personal development and it was common for mothers to deflect the responsibility of briefing their daughter to a friend, older sister or sister-in-law. This deflective behaviour was thought to be more common amongst less educated mothers. Young women also felt that mothers themselves may be ignorant about the biology of menses and therefore were unable to impart this information to their daughters. These issues are highlighted below.

...when I reached home I went to toilet to see what had happened, in the meantime my friend told my mother what had happened. My mother was so embarrassed she asked her if she knew about it (menses), when my friend said yes, my mother told her to educate me on that...My mother never discussed it. (RH5 married women Lahore)

Mothers normally hesitate to explain such things and ask the elder sisters to guide. But if a girl doesn't have any elder sister then you may be guided by the relatives. But most of the guidance comes through mothers. (RH13 married women Faisalabad)

Educated mothers easily brief us. The uneducated mothers don't have knowledge and then they feel shy discussing it with their daughters. She will say no, discuss it with some friends. Educated mothers can educate their daughters in a better way. Since my mother is uneducated, she felt shy and told my sister to brief me about it. But my sister as well as mother always felt hesitant sharing these things with me...They hold the opinion that they will automatically learn about it with the age. (RH15 unmarried women Lahore)

Young women stated that the information received about personal development largely focussed on menstrual hygiene; and neglected broader aspects of puberty, such as the physical, emotional and biological changes. In addition, great emphasis was placed on instructing young women on the expected social and religious behaviour after menarche. For example, family members instruct young women to preserve their modesty by wearing a *dupatta* (headscarf), avoiding male company and remaining accompanied outside the home. In addition, young women are informed to avoid some religious practices during menstruation (i.e. reciting the Holy Koran, prayer, fasting at Ramadan). However, the reasons for these new exclusions are not made explicit to young women, for example;

R4 The girl is told she has to keep wearing the *dupatta* (scarf) and care about shame. "You have gotten older", she is repeatedly told, "don't move around alone, keep in mind there are male members at home and sit carefully." R2 We have to be careful while sitting and standing as the dupatta will fall down...loose shirts and not tight blouses, not showing anything are the common dress of that age. (RH3 married women, Lahore) R4 We are instructed not to play outside, don't go outside. We feel that now we are different, we are mature. Don't go to market alone...do not to sit with a boy or any male cousins, and we know that we are older (grown up) now. R2 No one tells us about it exactly. I *Do they tell about changes which make it risky for you to sit with boys?* R7 They would only say that now you are older you are no more a child. (RH2 unmarried women Lahore)

Young men reported a greater variety of sources from which they gained information about personal development than did young women; this is partly reflective of boys' greater freedom of movement and social exposure outside the home. The information sources identified by young men included; friends and family members; religious sources; hakeems and the media. Friends were the most commonly reported source of information about the experiences of puberty, especially regarding acne, bodily hair growth, 'wet dreams', masturbation and girls physical development. However, young men recognised that information from friends could be incomplete or inaccurate. For example; R6 When it is all learnt from friends then there is negative effect. R4 From the friends also it all is blind information, the friends also don't know the facts. Everyone just tells his own experiences. (RH19 married men Faisalabad). Information was also received from family members, in particular a cousin, uncle or brother. These family members typically provided advice on personal hygiene and hair removal in response to observing boys growth of bodily hair. Information from family members is often provided within the context of religious practices, for example, When I was at home and I use to roam around without shirt. Then my parents saw me, that my hairs under the arms are too long. Then one of my uncles told me that these are against the teaching of Islam this (hair) should be shaved. But if I did not go without shirt then nobody will come to know about it. (RH1 unmarried men Lahore). Young men reported that the majority of fathers were unlikely to discuss personal development issues with their sons due to socio-cultural taboos; this contrasts with young women who mostly received this information from their mothers. In addition, young men stated that fathers expected boys to

learn about such issues from sources outside the home or they instructed a cousin or uncle to provide advice about personal development issues, in the same way as mothers deflect the discussion with daughters. These issues are illustrated below.

Ours is an Islamic country the parents can't tell you that you have become adult and this will happen with you. (RH8 unmarried men AB Lahore)

R1 An elder brother or father will hesitate... R2 Yes it may be that a father tells the boys cousin to go and educate his child about such and such. If the father doesn't tell himself he does make arrangements. (RH23 married men CD Faisalabad)

I think that 80% of people cannot share with father due to embarrassment, respect and fear. Parents generally guide about cleanliness, hygiene keeping in mind the Islamic point of view and Islamic teachings. (RH6 married male AB Lahore)

Young men received some personal development information from *madrassas* (Islamic schools), *moulvis* (religious leaders) and religious books. The information received from these sources was more detailed than other sources, but largely focussed on personal hygiene in relation to religious practices (i.e. hair removal, washing after 'wet dream'). Some information was received about menses, but only in relation to cultural / religious practices (e.g. refraining from sex during a woman's menses). Young men felt that the information imparted from religious sources was fragmented and provided no understanding of the process of puberty. For example;

If we ask a moulvi he will tell, but moulvi remains in the circle of Islam, he will not go out of it. He will explain these things according to the Islamic code of life...I have never asked any religious person so far. (RH1 unmarried men Lahore)

When I attended the madrassa...the standard of cleanliness of body was such that hair of body was cut at least once a week, and there used to be discussions about the issues and hence the children would learn what is required of them... (RH23 married men Faisalabad)

There are small booklets available in the market that guide about these processes, for example if this thing (wet dream) happens, you have to take a shower in order to keep yourself clean. These booklets give details of everything and guide about personal hygiene in the light of Islamic teachings. (RH12 unmarried men Faisalabad)

It is also clearly communicated in Islam and in our "Holy Book" that during the menstruation period don't go even close to a woman. (RH11 married men Faisalabad)

*Hakeems* (herbal clinics) were identified as another source of information on personal development, either from viewing advertising on *hakeem* clinics or through consulting a *hakeem*. Young men recognised that *hakeems* are a major source of misinformation about sexual processes, (e.g. wet dreams were promoted as a disease requiring a cure) and that *hakeems* often manipulate common misunderstandings about sexual processes to sell their products. For example; *One of the friends had a wet dream*. We went to a hakeem and he said "Oh wet dream is no problem. You just get one month's medicine and it will be okay. I have cured the patients who have wet dreams." (RH6 married men AB Lahore). Finally, young men also gained an awareness of menstruation from media advertisements of sanitary products for women.

Young people in this study felt that the information they received about personal development was inadequate in a number of areas. First, information received from parents and family members was often fragmented and superficial; and provided no detailed understanding of the events of puberty. Second, the focus of information was largely on personal hygiene related to menses, wet dreams or bodily hair growth or on expected socio-cultural behaviour after puberty; little information was provided on the process of personal development within a context of puberty or on the biological and emotional changes during puberty. Third, young men reported that information often came from unreliable sources, such as friends, media and hakeems. They perceived that young women gained information from more reliable sources such as mothers. Fourth, little information was received about personal development of the opposite sex. These issues were identified in all focus group discussions, examples are shown below;

It is the mother who guides. But my mother did not tell me other details as to how many days it (menses) will last. My mother didn't share with me all of it, then I had to go to my cousin. (RH17 unmarried women Faisalabad)

The information needs more detail and depth. The info is in vague form and indirect, we assume in our mind it means this or it would be like that. The information should be explained to us properly. (RH2 unmarried woman Lahore)

The development may start at 8-10 years, the periods start at 13-14 but no one even knows the reasons for periods, does anyone here know? (RH17 unmarried women Faisalabad).

Girls start having periods, and we didn't know about what happens to boys until our husbands told us... Obviously we can't have this information through our father, brothers and cousins. (RH13 married women Faisalabad)

By the way in this meeting, we have realized, nobody educated us. We have learnt it on our own from friends etc. No one educates in our country. In foreign countries there is special classes and education about sex. Here the person learns a little information from society and friends and spends his life based on that knowledge. (RH21 married men AB Lahore)

# [figure 1 about here]

# Knowledge of sexual development

Sexual development referred to sexual behaviour, conception and pregnancy. Young people were asked about the sources and type of information received on sexual development, and the context of information provision. The results show that young people largely acquire sexual development information independently in a haphazard manner from a range of sources outside the home. Figure 1 highlights the absence of family members as a source of information between puberty and marriage. They felt that the process of acquiring information led to fragmented and incomplete information about sexual development.

Young people highlighted the socio-cultural taboos in discussing sexual issues, particularly with parents or amongst those who are unmarried. While mothers played a central role in providing information about personal development to young women; parents do not play a role in imparting information on sexual development to their children. Participants reported that society expects young people will learn about sexual relations automatically after their marriage.

Pakistani environment is such that you have to have respect for father, elder brother. You can't talk with them on these topics. We have the opportunity to talk to friends and there are many other ways, since we have these ways, we do not discuss with father or elder brother. (RH19 married male Faisalabad)

If you talk to your elders about it they would snub. They would not clarify. If you ask an elder sister she would say, never ask such things. If she herself told us, that's okay but we cannot ask her. (RH unmarried woman Lahore) Family members are therefore not a source of information on sexual development for young people. Young women identified friends and the media as the most prominent sources of information on sexual development. Films and cable television were cited as sources where young women observed romance and kissing; advertisements for contraceptive products; and documentaries which featured pregnancy, child delivery and breastfeeding. Magazines and newspapers provided some information about relationships and personal/ sexual health. In addition, Islamic books contained some information about marital relations and motherhood. Girls who attended science classes at secondary school gained some knowledge about the biology of animals, but not about human development or reproduction. Some information was also inferred from observing married relatives at home, for example; *If one brother is married* in home, they have a sister-in-law, this gives them a way of information. Though they don't know about actual procedure...when a couple come home after marriage even children know that now this couple will have a baby after some time. (RH16 married woman Faisalabad). However, the only source of more detailed information about sexual relations was from married friends who shared their own experiences. Some information was also received from boys who impart information seen in films. Much of the information was suggestive rather than educative about sexual development.

Some women reported having no information on sexual relations prior to their marriage. These were typically married women who explained that there was no cable television during their adolescence; hence they had no exposure to films with suggestive sexual scenes. These women learnt about sexual relations from their husband.

Young men also reported friends and the media as prominent sources of information about sexual development. However, the media accessed by young men was different to that for women and included; electronic media (such as pornographic internet sites, CDs, videos and cable TV) and print media (such as pornographic books and magazines). The second source of information about sexual behaviour was through discussing these issues with friends,

especially married friends. The topics discussed included; pleasure and sexual techniques; masturbation, wet dreams and bodily hygiene; pregnancy, contraception and women's bodies. Other less prominent sources of information include *hakeems*, gyms instructors, television adverts and radio discussions about contraception. Examples of these sources are shown below.

Usually video is available in every home. Video films (porn) are easily available, rent is very low 10-20 rupees per 24 hours. Those who do not have video can hire the video as well. Video films also circulate amongst friends. Friends see these films in groups. (RH22 unmarried male Faisalabad)

One source is internet... It's one of the major forces regarding this kind of information - films and pornography. People are not using the internet for the sake of information...rather they see sexy films and sights to get pleasure. (RH10 unmarried male Faisalabad)

The shops with cheap, sexy books have every kind of information with photographs and illustration. Similarly, when we see drama, suddenly ad of *Sathi* or *Hamdam* (condoms) appears. Though we feel embarrassed at the same time everyone comes to know about these. (RH22 unmarried men Faisalabad)

Marriage is an event which may trigger family members to provide information about sexual relations to young people. Often close family members, but not parents, will provide such information just prior to marriage. The type and sources of information differ by gender, as summarised in figure 1. Most young women reported that they had no detailed information about sexual relations prior to their marriage; but that they were briefed on these issues from an older sister, sister-in-law, married cousin or aunt when the marriage was imminent. Some were provided with information at the time of their engagement or, more commonly, immediately prior to the wedding day, at henna day (*rasm-i-mehendi*) when women gather

one to two days prior to the wedding. The information received at this time is often focussed on marital relations (i.e. responsibilities of a wife, mother and daughter-in-law), little is told about sexual relations. As a result many women still felt naïve about sexual relations before their marriage. For example;

Yes, in many homes they tell (about sexual relations) to the boys and girls to be married. They brief a little bit about it to both of them, usually the elders of home. It is told a day or two before the marriage. (RH2 unmarried woman Lahore)

Mothers and sisters don't tell but when the friends gather before marriage they do inform, but it's not in detail. This thing will happen, that will happen. But the detailed information about nature of relations is not available. (RH15 unmarried woman Lahore)

About a mother's role we are told but regarding the sexual role, it is never told. In our society it is difficult that anyone ever told such a thing. (RH married woman Lahore)

In contrast, young men felt they had already gained some knowledge about sexual behaviour prior to marriage from their exposure to pornographic media. When marriage is imminent it was felt to be socially acceptable for young men to seek information about sexual relations and to be provided with advice from family members. Young men therefore reported intentionally seeking information about sexual behaviour from married friends, books and videos prior to their marriage. In addition, a married cousin or uncle will typically brief young men about sexual relations prior to the wedding night. At this time young men stated they were seeking information about sexual techniques. For example;

They don't ask in early age because they know that family members will stop them from such acts. But now they are about to marry they can ask, and come to know before marriage. (RH22 unmarried male Faisalabad) Cheap novels, you go to the corner and find novels like "suhag ki pehli raat" (nuptial night) and "shadi key bad kaya ho ga" (what happens after marriage) etc. These kinds of books are sold on footpath for only 20 or 30 rupees. (RH19 married male Faisalabad)

Take the example, you are married, a friend of yours is getting married, he will ask you what to do and what not to do, obviously you will brief him. Any one elder in the house, uncles etc someone will definitely tell him. But obviously father will not tell. (RH7 unmarried male Lahore)

The wedding day represented another opportunity for young people to be briefed about sexual relations by close family members (figure 1). However, young people felt that information provided on the wedding day was often ambiguous, indirect and lacked sufficient detail to fully understand sexual relations. Young women, in particular, remained confused about what was going to happen on the nuptial night and the provision of incomplete information simply instilled fear about the event. While young men felt that their knowledge of sexual behaviour prior to marriage lacked depth, so that they were not fully aware of the Islamic practice of sex or were confident about their sexual performance. By the time of the nuptial night young people, especially young women, experienced enormous fears, confusion and apprehensions about imminent sexual relations. Examples of this are shown below.

When I got married, no one told me anything. They only said "Don't get scared". Whatever husband asks or does, you don't get scared. We will be alone in a room and it will be a new thing. But this "don't get scared" is not enough? We remain worried, what is it from whom we don't have to be scared? (RH3 married woman Lahore)

I was married in summer, my sister in law told me. It was the night of *barat* (marriage). She told me the whole story about after marriage... believe me I had such

a high temperature and that in heat of summer, I had two blankets on me. My father would say "What happened to her she was all right?" How could I say they have made me afraid of all of this (sex)? (RH5 married woman Lahore)

I think everyone is a little confused. I think that 80% or 90% are confused. How will I perform, because he has no knowledge and guidance. (RH6 married man AB Lahore)

There is a boy in our mohallah (street) who got married and did not know anything about it (sex). The girl's mother told the girl, he does not know anything and you have to tell what is to be done. We don't know what happened, the boy became unconscious. There were hot words in their home, what did she do to our child...There is so much confusion on marriage day. What is to be done and how. He did not know that is why. (RH21 married male AB Lahore)

Four aspects of information provision on sexual development were criticised by young people. First, the lack of formal sources of information on sexual development was highlighted. As a result, young people relied on information from friends and the media. Young women felt that the sources of information on sexual development were fragmented and provided incomplete information; while young men felt that friends provided unreliable information and the media sources were limited to sexual pleasure rather than educative information. Second, the informal sources of information provided no instruction on the biological processes related to sexual behaviour such as menses, conception, pregnancy and childbirth. For some women this information remained unclear until after their first pregnancy when they learnt about these processes from medical professionals; while some men never fully understood these biological processes. Third, young women, in particular felt that information provided by family members was given too late (i.e. just prior to marriage) and too suddenly, without the opportunity for a gradual understanding of sexual processes. Fourth, the information provided by relatives prior to marriage was ambiguous, superficial and

suggestive, and lacked sufficient detail to understand sexual relations. These information quality issues are highlighted in the following extracts.

I would tell you the truth, as far as the word sex is concerned, no one is imparting any education, and there is no teacher, no institute. (RH19 married male Faisalabad)

If we take it in negative sense (pornography), there is more than enough. But if we talk about training, information, defending behaviour, in then this is not at all adequate. (RH11 married male Faisalabad)

Yes we know about pregnancy, but <u>how</u> it happens, the process etc that was not known...that is not in our knowledge. We have this impression that while kissing pregnancy occurs. And I thought the doctor makes this (pregnancy). (RH5 married woman Lahore)

They only know about kissing etc. They don't know about that thing (sex). They may have seen the intercourse in movies but still they don't <u>know</u> about it. (RH5 married woman Lahore)

How the child is born this we don't know even after marriage, the woman may know it but we are sitting outside (during delivery). How the child is made, how it's born, these are medical questions. (RH 21 married man Lahore)

#### Preferred modes of information delivery

Young people were asked whether there was a need to receive information about personal and sexual development and the preferred modes of receiving such information. Due to the inadequacies in information provision identified in earlier sections, many participants felt that there is a strong need for educative information from reliable sources; this was evident in all discussion groups, regardless of socio-economic background, location or gender. Three issues

related to the preferred modes of information delivery were raised by participants, a) timing of information delivery, b) school-based delivery and c) community-based delivery of information.

The timing of information delivery on personal and sexual development was a critical point raised by participants. Young people highlighted that information is only given at certain events, such as menarche or nuptial night, however it was felt that this strategy meant that the information was often provided too late. Young people preferred that information on personal development should be provided during puberty and before adolescents experience the physical changes, so as to prepare them for this process. Young people also felt that it was important to provide information about sexual behaviour well ahead of marriage to avoid the undue anxiety, stress and fear on the wedding night when such information is typically given. The quotations show the issues of timing of information delivery.

R4 By the time he reaches college he already has gone through it, it is late. It's important to educate him at the time when the changes are taking place...in the age of 9th the changes are already there in a child, be it a girl or boy. (RH21 married males Lahore).

If a girl knows about it beforehand then on the golden night (nuptial night) she will not keep running around...if she does not know she will weep and run around. But if she knows she will be mentally ready for the (sexual) union. (RH3 married woman Lahore)

Should be before 13 or 14 years because it is the time when girls usually have their first menstruation cycle... they should know about the nature of periods, why the menstruation period starts in females, how they can handle it. And also what will be the consequences if they don't take care. (RH9 married woman Faisalabad)

# School-based information

Young people identified the absence of any formal instruction on personal and sexual development and raised the issue of formal classes in schools. While school biology classes describe animal reproduction, human sexual development is not included. Furthermore only science pupils will have exposure to these topics. School-based information delivery was seen as particularly appropriate for girls as it would receive fewer objections from parents or society if the information was delivered in an educational setting; while if girls were seen to seek such information from a centre individually they may get a bad reputation. The demand for school based sexual development education was raised in every group discussion. For example;

There should be lectures available to students. Regular training should be in schools... All the children should be made to sit and listen to a lecture on it. They should be guided that you have reached this stage that you should know about these things. (RH21 married male Lahore)

For girls it should be in school and colleges. That is the best way, you are going for studying and education, and parents will have no objection. (RH18 unmarried woman Faisalabad).

R4 College is the best source. There should be a class for it. R2 It should be in schools also. All girls of our age group certainly need it. (RH2 unmarried women Lahore)

R4 This is only in the knowledge of a person who has biology subjects. At least when a person does his B.Sc. then he knows about these things. R7 Those who have studied biology they know, but how will the illiterate know about all these things? (RH8 unmarried men Lahore) Young people highlighted the benefits in providing personal and sexual development through the school curriculum. They stated that providing school-based instruction would mean;

- all school pupils would receive the information within regular education.
- less reliance on informal and unreliable sources (e.g. friends, media).
- an alternative to discussing such issues with parents.
- a formal, structured system of education.
- information is provided at appropriate stages of personal development.
- information is provided in step-by-step manner in regular classes.
- an interactive format to address questions.
- positive and negative aspects of sexual processes and practices (e.g. nocturnal emission, masturbation) can be presented within a socio-cultural context.
- information can be easily imparted in single sex Government schools.
- information is regulated and delivered within the context of Islamic teaching.

In discussing the appropriate personnel to deliver personal and sexual development information, young women stated that regular teachers would be appropriate as they were trusted and familiar persons. However, young men felt that receiving information from regular teachers would cause embarrassment due to the familiarity teachers have with pupils and their parents; therefore a separate team of educators was preferred. In addition, young men reported that when teachers have attempted to impart information about sexual development, even that of animals, pupils often ridicule them. For example;

R7 Sometimes there is hesitation with teacher...if some teachers discuss it at all, they became famous that so and so talks about sex. But it is taken as a negative thing. We have names for such teachers, so and so is very sexy. R2 The teachers don't take a risk, if he does, he will become famous in the whole of Faisalabad. One teacher became famous in Faisalabad as sexy, though he merely taught from the chapter about the union of egg and sperm. (RH19 married men Faisalabad)

R4 Very few teachers do tell, teachers who are liberal minded, they tell in detail. I do remember one of our teachers told us about menses. R5 Some teachers discuss the anatomy of human being in the chapters of science related to the frog! R2 But there is hardly one teacher of such kind in a school who tells you... (RH22 unmarried men Faisalabad)

#### Community-based information

Participants also highlighted the need to provide personal and sexual development information to young people who do not attend school. A range of strategies were suggested to target young men in the community or at their workplaces. For example, providing information through community based institutions (e.g. scout gatherings), pamphlets, peer education and workplace meetings, especially for young male labourers. Young men felt that it was important to involve religious scholars in such community endeavours, particularly to overcome anticipated objections from these sources, for example; *R8 In fact this education should be given to unmarried youth...no one else is doing this. There are NGOs which could do so, they should visit every street and Mohallah and educate 4 or 5 boys who could tell others. R3 The moulvis would treat those NGOs in such a way that they cannot survive. R6 Religious scholars should be given this task, the people listen to them, they should be motivated. There is hold of religion in our lives, if these scholars convey it, then it would be a different thing. (RH19 married men Faisalabad)* 

In contrast, there were mixed feelings about community-based information provision for women. Young people highlighted that such strategies may be problematic if women were seen to attend centres where sexual issues were discussed. They would risk a negative influence on their reputation and face social and familial restrictions in participating in community based initiatives. Others felt that information could be passed in community groups with parental endorsement if parents were involved in the process. These issues are expressed below;

When such institution or training centres are made and the girls go there, how those girls would be looked at, our society is such if the girls go for such training there will be remarks passed at her. It is best at schools, a period allotted... (RH6 married male Lahore)

I Do you think that such meetings and centres to provide information about sexual issues would be acceptable in our society? R4 I think that our elders would not like it. They feel bad about this thing. When we go home and discuss it they (parents) would say oh you went for this kind of discussion, they will not like it. But it is useful for us... (RH2 unmarried woman Lahore)

First give classes for them (parents), to educate them about such kind of issues and change their attitude and later on for their children. If they themselves don't know about the importance of such issues, then how would they allow their children to go to such centres? (RH3 married woman Lahore)

In mohallahs (streets) small centres be made and there the girls gather to get the information...and since there are ladies there, the parents also may allow us to visit such places in our neighbourhood. Every one will be able to go without any problem and no one will mind it. (RH2 married woman Lahore)

# Discussion

This study provides a greater understanding of the context in which young people gain information about personal and sexual development. While the results of this study cannot be generalised to all young people in Pakistan, such contextual information provides valuable new information on the process of knowledge acquisition and the issues of young people. The key findings of this research are discussed below.

Perhaps the most striking feature of this study is the gendered pattern of knowledge acquisition; few patterns were evident by other strata used in the study (e.g. socio-economic status, location, marital status). The differences in mobility of young men and women are reflected in their patterns of knowledge acquisition. Young women typically gain information from a limited number of sources within the home, extended family and media. In contrast young men accessed a wide variety of information sources outside the home. In addition, the type of information gained differs by gender; young men were more likely to be exposed to sexually explicit pornographic media while women receive vague and superficial sexual information from family members. A second prominent finding of this study is the context in which personal and sexual development information is received by young people. Figure 1 highlights the event-based nature of information delivery, whereby specific events trigger family members to provide information, often too late to be educative. Furthermore, between these events young people are left to seek information independently, which often leads to a haphazard and fragmented knowledge of personal and sexual development by the time of marriage. These findings highlight the gap in formal, neutral information sources for young people on personal and sexual development. The strong gender differences have critically important implications for any program of information dissemination to young people in Pakistan. Such programs will need to be gender specific to target young women in the home or familial environment, while young men can be accessed in through social and community networks.

Although there were gender differences in the process of gaining information, young men and women were equally critical of the quality of information they received, which often led to confusion and stress in understanding sexual development and relations. Much information was focussed either on social and religious behaviour after puberty, personal hygiene or was sexually explicit rather than educative. Therefore, there exists a gap in knowledge on the biological, emotional and physical changes during puberty and the process of sexual development which links puberty, fertility, conception and pregnancy. Information was also provided too late to enable a gradual understanding of sexual development and lacked sufficient detail to fully understand sexual relations. Any program of sexual education would need to consider the balance of socio-cultural information with fundamental reproductive biology, giving prominence to the latter. In addition the timing of such information delivery would be critical.

Young people in this study highlighted the benefits of school-based provision of personal and sexual development information. It was felt that those attending schools would benefit from a reliable, neutral and regulated source of information, which was delivered at appropriate ages. Delivery within the Government's school curricula was also less likely to receive criticism from parents or society and was seen as an effective way to inform young women. In addition the curriculum could be designed to reflect the socio-cultural context of Pakistan; while providing the biological aspects of puberty currently absent from any other source. However, a number of issues were raised that have importance for the delivery of sexual education curricula in schools; in particular whether the classes would be provided by regular school teachers or outsiders; these preferences differed by gender, suggesting different modes of delivery may be appropriate for young men and women. Classes also need to be placed in the curriculum so that all pupils receive the information not only those in science electives. Furthermore the single sex delivery of classes is critical, and easily achieved through the single sex composition of Government schools in Pakistan.

Although the merits of school-based information delivery were highlighted, this strategy may have little impact on young women due to their low levels of school attendance and high drop out during adolescence. Many young women are engaged in activities within the home and are not linked to any social institutions; they therefore remain out of reach of many social programs. Accessing these young women with personal and sexual development information is of critical importance and remains a particular challenge. Mothers are shown to play an important role in imparting information about personal development to adolescent girls; however their discomfort in discussing these issues often meant they deflected the role to other family members. Parental embarrassment in discussing sexual issues, including menstruation, with adolescent children is not uncommon in Asia (Bott and Jejeebhoy 2001). Parental concerns for the chastity of daughters often dominates parental relationships with adolescent girls; and parents fear that discussing sexual issues with adolescents will imply approval for pre-marital activity (Bott and Jejeebhoy 2001). Supporting mothers in the provision of information may be one strategy to inform young women. One issue, however, is the low education level of women in Pakistan, which may mean that mothers themselves do not have adequate vocabulary and knowledge to discuss the biological aspects of puberty. This implies that mothers may require some education as well as support and encouragement on ways to discuss these issues with daughters. However, even with such support the sociocultural norms which discourage discussion of sexual issues may remain. A further alternative to inform young women on personal and sexual development is through community based initiatives, such as community centres, meetings or within activities of youth clubs (i.e. girl guides, red crescent youth societies). Certain NGOs have enormous potential to provide reproductive information within the community, as they have access to a broad spectrum of youth and currently provide information on health and nutrition (Khan 2000). However, the constrained mobility of women and the negative community perceptions of girls attending centres to discuss sexual issues may impact the effectiveness of community strategies. Any strategy to access young women needs to recognise that their activities are often controlled by others (i.e. parents, community leaders) and including these gatekeepers in community based initiatives may be the most effective way to receive endorsement for the attendance of young women.

# Conclusion

Adolescents are generally recognised to have sexual and reproductive health needs that differ from those of adults; however, these are still poorly understood and under researched in Pakistan. Although many NGOs are eager to develop programs for adolescents, there exists only a limited evidence base from which to develop programs and policies targeted at young people (Sathar *et al* 2003). This study provides a greater understanding of how young people acquire knowledge of personal and sexual development in a context that discourages the open discussion of such issues. The most prominent finding remains the strong gender differences in information acquisition, and the need to develop gender specific information delivery strategies to most effectively inform young people on sexual development issues. Strategies to inform young women need to explore home and community-based initiatives in addition to delivery within schools. While the majority of young men will be reached by school-based initiatives, out of school males should not be ignored.

Any initiative to provide information on personal and sexual development to young people in Pakistan is unlikely to be successful without the involvement of a range of gatekeepers. In particular little is known of the views of parents, teachers, religious leaders or community organisations on the acceptance of sexual education or on appropriate modes of delivery of this information. Further in-depth research is required to identify the views and issues of these various stakeholders. Future policy and program initiatives that are based on an appropriate understanding of young peoples' requirements and include the concerns of various gatekeepers will be vital.

## Acknowledgements

This study was conducted under the small grants scheme of the United Kingdom DFID Knowledge Programme, *Opportunities and Choices*, based at the University of Southampton.

## References

Aahung (1999) AIDS awareness programme: knowledge, attitudes and practices. Survey Report. Aahung AIDS Awareness Programme, Karachi.

Benner, P. (1985) Quality of life: A phenomenological perspective on explanation, prediction, and understanding in nursing science. *Advances in Nursing Science*, 8 (1), 1-14.

Bott, S. and S. Jejeebhoy (2001). Adolescent sexual and reproductive health in south Asia: an overview of the findings from the 2000 Mumbai conference. UNDP/UNFPA/WHO/World Bank Human Reproduction Programme, Indian Society of Research on Reproduction and Fertility and Institute for Research in Reproduction.

Durrant, V. (2000). Adolescent girls and boys in Pakistan: opportunities and constraints in the transition to adulthood. Research Report No 12. Population Council: Islamabad, Pakistan.

Family Planning Association of Pakistan (FPAP) (no date) Youth programme. Family Planning Association of Pakistan, Lahore, Pakistan.

Government of Pakistan (2001). 1998 Census report of Pakistan. Population Census Organization Statistics Division, Islamabad, Pakistan.

James-Traore, T., Finger, W., Ruland, C. and Savariaud, S. (2004) Teacher Training: Essential for school-based reproductive health and HIV/AIDS Education. Focus on sub-Saharan Africa. Youth Issues Paper 3, Family Health International, YouthNet Program, USA.

Khan, A. (1998) Female mobility and access to health and family planning services. Islamabad: Ministry for Population Welfare and London School of Tropical Hygiene and Medicine. Khan, A (2000) Adolescents and reproductive health in Pakistan: A literature review. Research report No. 11. Islamabad: Population Council and UNFPA.

Leininger, M. 1985 *Qualitative Research Methods in Nursing*. New York: Grune and Stratton Inc.

Mensch, B., Bruce, J. and Greene, M. (1998). *The uncharted passage: girls' adolescence in the developing world*. New York: Population Council.

Mumtaz, K and Raouf, F. (1996) Woman to woman: Transfer of health and reproductive knowledge. (Lahore: Shirkat Gah).

McCauley, A. and Salter, C. (1995) Meeting the needs of young adults. Population reports, series J, 41:1-43.

Pakistan Advertisers Society (PAS) (1998) Urban Socio-Economic Classifications for Pakistan. Pakistan Advertisers Society, Islamabad, Pakistan

Pakistan Voluntary Health and Nutrition Association (PAVHNA) (2000) Adolescent reproductive and sexual health: an exploration of trends in Pakistan. PAVHNA, Pakistan.

Qazi, Y. (2003) Adolescent Reproductive Health in Pakistan. In: Bott, S and Jejeebhoy, S. (eds) *Towards adulthood: exploring the sexual and reproductive health of adolescents in south Asia (2001)*. Geneva: World Health Organisation, 78-80.

Qidwai, W. (1996) Assessment of sexual knowledge, attitudes and practices in young males presenting to general practitioners in Karachi, Pakistan. Dissertation. Karachi: College of Physicians and Surgeons.

Sathar, Z., ul Haque, M., Faizunnissa, A., Sultana, M., Lloyd, C., Diers, J. and Grant, M. (2003) *Adolescents and youth in Pakistan 2001-02: A nationally representative survey*. Islamabad/ New York: Population Council.

Taylor, S. J. and Bogdan, R. (1984). *Introduction to Qualitative Research Methods: The search for meanings*. (New York: John Wiley & Sons).

World Health Organisation (2003) Adolescent reproductive health in south Asia. Progress in Reproductive Health Research 64: 3. Geneva: WHO.

	Lahore		Faisalabad	
Unmarried	2 Male CD	2 Female AB	2 Male AB	2 Female CD
	1 Male AB	1 Female CD	1 Male CD	1 Female AB
<b>Recently Married</b>	2 Male AB	2 Female CD	2 Male CD	2 Female AB
(<2 years)	1 Male CD	1 Female AB	1 Male AB	1 Female CD

Note: AB refers to higher and CD to lower socio-economic status of the respondent's household. Socio-economic classifications were determined using standard education & employment variables for Pakistan (PAS 1998).

Figure 1: Process of Knowledge Acquisition on Personal and Sexual Development.

