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Culture of silence: A brief on reproductive health of adolescents and youth in Pakistan

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Culture of Silence
By Munawar Sultana

Introduction
Previous research on the reproductive health of adolescents and youth in Pakistan has not addressed the diversity of adolescent experiences based on social status, residence and gender. To understand the transition from adolescence to adulthood more fully, it is important to assess social, economic, and cultural aspects of that transition. This brief presents the experience of married and unmarried young people (males and females) from different social strata and residence regarding their own attitudes and expectations about reproductive health.

Puberty
The onset of puberty, a physical marker of maturity, brings gender-defined changes in the lives of adolescents. In general, these changes increase the opportunities for boys and limit avenues available to girls. On average, young women experience puberty at age 13.5 while young men attain puberty later, at about age 15. Today, in Pakistan, there is a fairly long gap between puberty and marriage for both boys and girls, about 4.2 years for boys and 4.4 years for girls.
Traditionally, there is little conversation about puberty. Only 34 percent of adolescents know about puberty before they experience it. Girls are significantly less likely than boys to be informed about the event in advance (31 versus 41 percent for girls and boys, respectively). Young people would like to break this silence: almost 70 percent of them would like to be informed about puberty in advance. While girls would want to rely on mothers and their friends for information on puberty, inadequate communication inhibits boys from discussing puberty and reproductive health with their fathers. A majority of boys rely on their friends to obtain information on puberty and reproductive health.

**Persons from whom young people heard about puberty by gender**

Most girls want their mothers to impart information about puberty to them. Since so many Pakistani mothers are illiterate, they are less able to give their daughters accurate information on puberty, hygienic practices during menstruation and related reproductive health issues. This hampers young girls in making an informed transition into marital life and motherhood.

**Marriage and Parenthood**

The gap between puberty and marriage is widening, as age at marriage is rising in Pakistan. However, girls still continue to marry at significantly younger ages than boys. Among married 20-to-24 year olds, around 14 percent of young men and 50 percent of young women married before the age of 20. The mean age at marriage for females is 17.9 and 19.2 for boys (among 20-24 year old married youth). Girls in rural areas are more than twice as likely as their urban peers to be married before the age of 20 (58 versus 27 percent).

**Percent married before the age of 20 (married 20-24 years olds) by place of residence and gender**

Age at marriage varies significantly across provinces. Balochistan has the highest percentage of both young women and men marrying before the age of 20 (62 and 21 for women and men respectively). Sindh and NWFP are not far behind in terms of women's early marriage. Fewer young women in Punjab, 42 percent, marry in their teens.
Age at marriage is strongly associated with educational attainment. Over 60 percent of girls who never attended school were married before the age of 20. Some attendance of primary school reduces adolescent marriages from 68 to 49 percent for girls. The same applies to boys, although the effect is not as dramatic. Early marriage also makes it difficult for girls to stay in school.

The ideal age at marriage for girls was highest among respondents in rural and urban Punjab and lowest among those in rural Sindh and urban Balochistan. A majority of boys and girls reported that by age 22, men are expected to attain financial means/jobs to manage the household. Respondents reported that girls become mentally mature and are able to manage a household by the age of 19.

Reasons that young people should be married at a given age, by gender

<table>
<thead>
<tr>
<th>Reasons for marriage</th>
<th>Boys Reasons for males</th>
<th>Girls Reasons for females</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental maturity</td>
<td>65</td>
<td>65</td>
</tr>
<tr>
<td>Physical maturity</td>
<td>45</td>
<td>45</td>
</tr>
<tr>
<td>Able to manage HH</td>
<td>45</td>
<td>43</td>
</tr>
<tr>
<td>Financial means/jobs</td>
<td>66</td>
<td>66</td>
</tr>
</tbody>
</table>

In general, girls reported a higher ideal age to marry for both boys and girls than did boys. Girls expect boys to marry at age 22.4, and they think girls should marry at age 19.3.

Ideal age of marriage for boys and girls

<table>
<thead>
<tr>
<th>Ideal age at marriage for:</th>
<th>Reported by boys</th>
<th>Reported by girls</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boys</td>
<td>21.5</td>
<td>22.4</td>
</tr>
<tr>
<td>Girls</td>
<td>18.2</td>
<td>19.3</td>
</tr>
</tbody>
</table>
Childbearing

Most marriages in Pakistan tend to be followed very shortly by a pregnancy and birth of a child. By age 19, 30 percent of girls report being pregnant or are already mothers. Adolescent motherhood is widespread in rural areas among girls with little or no schooling, and among those with low socioeconomic status. Among rural girls, Sindhi residents report the highest level of pregnancies before the age of 20 (60 percent), followed by Balochistan (54 percent). There are very slight rural and urban differences in Balochistan. Punjab has the lowest level of teenage pregnancies in both urban and rural areas.

Percent of 20-24 year old girls who became pregnant before age 20, by province and place of residence

![Graph showing percent of 20-24 year old girls who became pregnant before age 20, by province and place of residence]

Since early pregnancy can be a health risk to young women, pregnant adolescents face higher risks and complications. Unfortunately, only 40 percent of rural adolescents reported receiving antenatal care for their first child, compared to over 70 percent of urban girls.

The utilization of antenatal services increases with socioeconomic status and educational attainment. The lowest level of antenatal care is among those who never attended school.

Overall, more than 70 percent of young women delivered their first baby at home. In rural areas, home births are more widespread (76 versus 54 percent in rural and urban areas, respectively). Delivery at home can be safe if attended by a midwife, nurse or doctor. However, only 30 percent of first deliveries were attended by trained medical personnel, while the rest were assisted by relatives or traditional birth attendants. Young women in rural areas are less likely than urban residents to have their first delivery attended by medical personnel.

Percent of mothers aged 20-24 by place of delivery and residence

<table>
<thead>
<tr>
<th>Place where the first baby was born</th>
<th>Rural</th>
<th>Urban</th>
</tr>
</thead>
<tbody>
<tr>
<td>At home</td>
<td>75.9</td>
<td>54.3</td>
</tr>
<tr>
<td>At medical facility</td>
<td>24.1</td>
<td>45.3</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Person who assisted the first delivery</th>
<th>Rural</th>
<th>Urban</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relative/Friend</td>
<td>28.7</td>
<td>21.6</td>
</tr>
<tr>
<td>Traditional practitioner</td>
<td>61.6</td>
<td>41.1</td>
</tr>
<tr>
<td>Medical person</td>
<td>25.3</td>
<td>52.6</td>
</tr>
</tbody>
</table>

*Multiple responses possible

Fertility Preferences and Contraceptive Use

Married boys reported that they would like to have 4 children, while married girls would like to have 3.9 children. There is little difference between them with regard to their preferences for sons and daughters. Unmarried boys and girls desire a slightly smaller family than married equivalents.
Mean desired number of children among 20-24 year olds, by gender and marital status

Since childbearing starts soon after marriage, few married adolescents report any contraceptive use. Only 5 percent of married 15-19 year old girls report current use of contraception, while 4 percent of married men and 12 percent of women aged 20-24 report current use. However, over half of married women intend to use some form of contraception in the future.

Percent of currently married young people who are current, ever, or future users of contraception, by age and gender

Conclusions and Recommendations

Puberty occurs earlier for girls than for boys, however, girls are less likely to be informed about the event in advance. The majority of boys rely on their friends to obtain information on puberty while girls mostly obtain information through their mothers. The majority of girls want their mothers to impart information on puberty in advance, while boys want their friends and fathers to provide information on puberty.

The gap between puberty and marriage is widening due to rising age at marriage in Pakistan. It is even more necessary to inform young people about their reproductive health. There is also the potential to utilize the period between puberty and marriage for skill enhancing activities, through formal and informal training.

Despite the rising age at marriage in Pakistan, a substantial proportion of girls still get married during their teens. This practice is widespread in Balochistan and throughout rural areas in all provinces. There is a variation between the ideal and desired age at marriage reported by young people. Overall, girls prefer later ages at marriage for both boys and girls than do boys.

Most marriages in Pakistan are followed by a pregnancy and a birth. About 30 percent of young women reported being pregnant or mothers before age 20. Early marriage and childbearing is most prevalent in rural Sindh and Balochistan. Antenatal care varies greatly by place of residence.

Only 40 percent of young women in rural areas sought health care during their first pregnancy. The majority of births take place at home, and in most cases are attended by non-medical persons (relative or traditional birth attendant). Efforts are required to ensure improved availability and accessibility of health services during the antenatal, natal and postnatal periods to make motherhood safer for young mothers.

Since cultural norms expect young couples to bear a child soon after marriage, the majority are not likely to use contraceptives. However, a
considerable proportion of young couples intend using some form of contraception in the future. Keeping in account their fertility intentions, it is vital to devise culturally sensitive strategies that offer adequate information and services that help young couples meet their reproductive intentions.

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