

Early Menarche on Mother-Daughter Communication

Sample Student

BEHS 343 7984 Parenting Today

University of Maryland University College

Commented [w1]: This paper meets the excellent criteria for all areas of the rubric. **60 points**

Early Menarche and Mother-Daughter Communication

Menarche is defined as the first occurrence of menstruation. As cited by Cabrera, Bright, Bright, et al., (2014), the mean age of menarche among U.S. girls differs by race. Caucasian and African American girls experience menarche on average at 12.77 and 12.17 years of age respectively. Menarche can be a dramatic and shocking signal of physical development for many girls, especially for girls who experience early menarche. Early menarche is menarche that happens before a girl is eleven years old (Wu, Mendola, & Buck, 2002). Compared to other racial/ethnic groups, African American girls are more likely to experience early menarche (Wu, Mendola, & Buck, 2002).

Several challenging issues may arise for a girl at menarche including, but not limited to: 1) an increase in parent-child conflict; 2) adolescent sexual experimentation; 3) adolescent depression; 4) and poor adolescent body-image. These issues may be exacerbated for girls who experience early menarche. Consequently, parents may need additional support and guidance from family, friends, and pediatricians to help them successfully shepherd their daughters through early menarche. This paper examines the aforementioned key issues and how parents can facilitate successful communication with their daughters about menarche.

Parent-child conflict

According to Holden (2009), conflict between parents and children increases during adolescence. Adolescence occurs between the ages of 11 – 21. Pre-adolescence is the stage of development that occurs prior to adolescence. Children aged 9-11 are considered to be preadolescents. Just as parent-child conflict may arise for children during adolescence, it may also arise during the preadolescent stage for girls who are experiencing early menarche. Many hormonal changes arise as a result of menarche. During this time, girls are more prone to

Commented [w2]: Key parenting issues are clearly stated and identified in the text. **20 points**

Commented [w3]: Key issues are all supported with research. **15 points**

experiencing depression and the inability to express their feelings regarding body changes and sexuality. As a result, many girls may lash out at those closest to them, particularly their mothers as they try to cope with pubertal changes. According to Pickhardt (2010), over the course of adolescence, issues of 'attachment versus separation' and issues of 'similarity versus differentiation' are contested by the young person to establish independence and individuality. In essence, daughters may be trying to establish their independence from their mothers while still needing their mothers to provide guidance.

It is also important to note that conflict may arise among mothers and daughters around daughters' menarche because mothers may feel like they have to enforce stricter rules on their daughters in order to protect them from sexual experimentation. However, this increased strictness may lead daughters to feeling a sense of shame and fear related to their reproductive health (Warren-Jeanpiere, 2006). As a result communication regarding menstruation may be non-existent and can lead to disagreements about how menstruation is experienced (Kissling, 1996; Costos, Ackerman, & Paradis, 2002). For instance, not all women experience pre-menstrual syndrome (PMS). If a daughter complains of PMS symptoms that her mother never experiences, the mother may communicate a lack of empathy for her daughter. This lack of maternal empathy may lead to mother-daughter conflict.

Adolescent sexual experimentation

Menarche can lead many girls to explore their new found feelings regarding sexuality. Early sexual initiation is linked to risky sexual behaviors including multiple sex partners and unprotected sex (Holden, 2009). Research indicates that sexual experimentation may arise during preadolescents. However, parents who communicate openly with their children about sex and sexuality are less likely to have children who engage in sexual behaviors during pre-adolescence

and beyond. It also important to note that daughters who report that their mothers did not talk with them about their changing bodies and sex, were more likely to engage in risky sexual experimentation at a young age (Warren-Jeanpiere, 2006). Another study notes that daughters whose mothers did not speak openly with them about menarche and sexuality also reported feeling uncomfortable later in life speaking openly with health care providers about their sexual health (Warren-Jeanpiere, Miller, & Warren, 2010).

Adolescent depression

Puberty is a time many adolescents are at increased risk of developing depression. Girls who experience early menarche may be especially prone to developing depression. Holden (2009) notes that adolescents who think they look older than their peers are more prone to emotional distress. Mendel, Turkheimer, and Emery (2007), state that girls who experience early menarche are also more at risk for committing suicide compared to girls who experience later menarche. For instance, preadolescent girls who are very physically developed and menstruating may receive unwanted sexual attention from their male peers (Holden, 2009). This unwanted negative attention can lead girls to feelings of low self-worth. In addition, girls during this time may develop body-image issues that can cause them to engage in a myriad of negative health behaviors including: eating disorders; promiscuity; and aggression. The next section discusses in more detail how girls' body-image perceptions may be negatively impacted by early menarche.

Body Image

As noted previously, puberty is a time that is linked to increased risk for poor body image and resulting eating disorders including, anorexia nervosa (AN), and bulimia nervosa (BN) (Klump, 2013). Research (Klump, 2013) finds that girls who are at more advanced stages of

pubertal development have increased rates of AN and BN. In essence, early menarche has been found to increase girls' risk for developing an eating disorder. A very significant symptom of an eating disorder is poor body image or body dissatisfaction. It is important to note that girls who have eating disorders are often also depressed.

According to researchers at Bradley University (2016), the shape of a woman's body, such as large breasts and round hips, is explicitly sexualized in our society; and young girls are not mature enough to shoulder this societal burden. As a result, young girls may develop a poor body image. Bradley University researchers also note that early exposure to excessive body-consciousness has a tendency to stick with premature developers, even years after their peers catch up with their physical development. In other words, younger girls may be less emotionally and socially equipped to handle the body changes associated with puberty compared to older girls.

Conclusion

Research regarding mother-daughter communication about menarche reveals that mothers are the primary source of menstrual learning for daughters (Cooper & Koch, 2007; Warren-Jeanpiere, Miller, Warren, 2010). However, many mothers, especially African American mothers are reluctant to speak openly with their daughters about menstruation and sexual development. This reluctance to communicate can lead to mother-daughter conflicts. Parents, especially mothers need to understand the important role that they play in helping their daughters have a positive menarche experience. Mothers should be encouraged to speak openly and early with their daughters about menarche. There are tools available to help mothers to feel knowledgeable and comfortable with talking about menarche. The Mayo Clinic (n.d.), provides excellent insight on how to talk to daughters about their changing bodies. They offer several tips

including: being positive about menarche; offering practical suggestions on what to do while menstruating (i.e. wear dark clothing); and not giving up on communication. Although early menarche may present some significant challenges for parents, these challenges can be overcome if parents remain knowledgeable about menarche and committed to giving firm guidance and emotional support to their daughters during this sensitive time.

References

- Bradley University. (2016). The Body Project. Retrieved from <http://www.bradley.edu/sites/bodyproject/sexuality/puberty/>
- Cabrera, S., Bright, G., Frane, J., Blethen, S., & Lee, P. (2014). Age of thelarche and menarche in contemporary US females: across-sectional analysis. *J Pediatr Endocrinol Metab*, 27(0), 47–51.
- Cooper, S., & Koch, P. (2007). “Nobody told me nothin”: Communication about menstruation among low-income African American women. *Women & Health*, 46(1), 57-78.
- Costos, D., Ackerman, R., & Paradis, L. (2002). Recollections of menarche: communication between mothers and daughters regarding menstruation. *Sex Roles*, 46(1/2), 49-59.
- Holden, G. (2009). Parenting : A dynamic perspective. Thousand Oaks, CA.: Sage Publications.
- Kissling, E. (1996). Bleeding out loud: Communication about menstruation. *Feminism Psychology* , 6(4), 481-504.
- Klump, K., (2013). Puberty as a critical risk period for eating disorders: A review of human and animal studies. *Horm Behav*, 64(2), 399–410.
- Mayo Clinic. (n.d.). Tween and teen health. Retrieved from <http://www.mayoclinic.org/healthy-lifestyle/tween-and-teen-health/in-depth/menstruation/art-20046004?pg=1>.
- Mendel, J., Turkheimer, E., & Emery, R. (2007). Detrimental psychological outcomes associated with early pubertal timing in adolescent girls. *Dev Rev*, 27(2), 151–171.
- Pickardt, C. (2010). The challenge of mothering an adolescent daughter. *Psychology Today*. Retrieved from <https://www.psychologytoday.com/blog/surviving-your-childs-adolescence/201012/the-challenge-mothering-adolescent-daughter>
- Warren-Jeanpiere, L. (2006). From mothers to daughters: A qualitative examination of the

Commented [w4]: There are more than 10 references throughout. The majority of them are from peer reviewed sources. **15 points**

Commented [w5]: All references are cited correctly in the text **5 points**

reproductive health seeking behavior of African American women. *Women's Health and Urban Life*, 5(2), 42-61.

Warren-Jeanpiere, L., Miller, K., & Warren, A. (2010). African American women's retrospective perceptions of the intergenerational transfer of gynecological health care information received from mothers: Implications for families and providers. *Journal of Family Communication*, 10, 81-98.

Wu, T., Mendola, P., & Buck, G. (2002). Ethnic differences in the presence of secondary sex characteristics and menarche among US girls: The third National Health and Nutrition Examination Survey, 1988–1994. *Pediatrics*, 110, 752–757.

Part 1: The Effects of Early Menarche on Mother-Daughter Communication

Sample Student

BEHS 343 7984 Parenting Today

Commented [w6]: Correct submission format: The paper has a cover sheet, reference list. Part 1 is attached, it is the correct page length and correct spacing and font is throughout. **5 points**

The Effects of Early Menarche on Mother-Daughter Communication

Description of what happened

Dear Diary,

Today has been very eventful. It is a day I will never forget. On this hot summer day, my oldest daughter who is 9 years and 11 months old started her period. As I was in the kitchen preparing lunch, she came out of the powder room and said, "Guess what Mommy? I started my period just now!" She was so proud and I was proud of her for handling the situation with so much positivity. I am so thankful that we were at home for this momentous event because I know that being at school when this happens could be very embarrassing.

We were not unprepared for this day. I have been talking with her for approximately a year about what to expect regarding her period. In the event that she had been at school during this time, I packed her a little "emergency kit" to place in her backpack. In the kit I placed a sanitary napkin, new panties, and a starlight mint. Despite being only in the fourth grade when she started carrying the kit, she seemed to be very proud. I think we are off to a good start!

I do know that that she is young for this transition but I was too. I know that the median age of menarche for girls in the United States is 12.4, but the mean age for African American girls is younger (Holden, 2009). I remember feeling totally unprepared for what was happening to me. I also remember feeling very ashamed and embarrassed about menstruation. Based on how I felt when I started menstruating three days after my 10th birthday, I did not want my daughter to begin her journey into womanhood feeling the same way that I did.

Identification of parenting issues

Nonetheless, I am still concerned about many of the issues that parents may face in helping their very young adolescent daughter transition into a new stage of development. These issues include: 1) an increase in parent-child conflict; 2) adolescent sexual experimentation; 3)

adolescent depression; 4) and poor adolescent body-image. I am taking a course in parenting and I believe that it is going to give me excellent insight into ways that I can help my daughter overcome any obstacles related to early menstruation. I am eager to research and learn more about how I can successfully avoid and/or manage some of the issues that may arise as a result of her early menarche.

Plan of action

In addition to the plan of action that I initiated prior to the start of her period, I am going to continue to encourage her to speak openly with me about how she feels about her body. I am also going to continue to talk with her about what the biological changes in her body mean. For instance, we will talk in more detail about ovulation, pre-menstrual symptoms (i.e. cramps, backache, nausea, moodiness, ect.). I want her to know and understand that menstruation is just a normal part of life that women experience. Although I want to speak openly with her, it is not always easy for us to talk. Sometimes she just does not seem interested in talking about her feelings. Sometimes I am also at a loss of words when she comes to me to discuss some of the social issues that she is facing as a result of her early development. For instance, she told me that she feels boys are staring at her chest when they talk to her. That makes her feel very awkward. It is easy for me to tell her not to worry about those silly boys but my words seem to offer her little comfort.

My course readings (Holden, 2009) provide some excellent suggestions on how I might be able to encourage more open communication with my daughter. Some of the tips include: 1) choosing a good moment to talk (i.e. car ride); 2) being a good listener and accepting her feelings; 3) being positive and giving praise; 4) remaining calm and honest during discussions; and 5) not forcing her talk when she is not ready. After reading these tips, I realize that I have

more work to do to help us to have better mother-daughter communication. The communication tip that stands out the most to me is to accept that sometimes she will not want to talk about her feelings. I think I have been guilty of trying to make her talk about how she feels when I want her to talk. This is not a good strategy and if I continue to do this, I will only make her more unwilling to communicate with me about her body, friends, sexuality, etc.

Another action that I can engage in to help my daughter deal with all of the changes she is experiencing is to continue to monitor her behavior and interactions with her peers. She understands that I and her father can access her phone and social media pages at any time. Although we let her know that we respect her privacy, she also understands that if it is not something she would want her parents to see or read, then she should not post the information. This action is also supported by what I have read in my class. Holden (2009) states that good communication is important but not enough. Parents must monitor their teens, especially in the early years.

Diary I am going to end my letter today by letting you know that I feel encouraged about how I have handled my daughter's menstruation experience so far. Although things are off to a good start, there is always room for improvement. In my next entry, I hope to let you know what progress we are making towards improving our communication.

Reference

Holden, G. (2009). Parenting : A dynamic perspective. Thousand Oaks, CA.: Sage Publications.