PARENTING QUALITIES OF ADOLESCENT AND ADULT MOTHERS IN THE SHIROMEDA AREA OF ADDIS ABABA

TIRUWORK ALMAW

A THESIS SUBMITTED TO THE SCHOOL OF GRADUATE STUDIES OF ADDIS ABABA UNIVERSITY IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE DEGREE OF MASTER OF ARTS IN DEVELOPMENTAL PSYCHOLOGY

JUNE, 2005
Addis Ababa
ACKNOWLEDGMENT

I would first and foremost like to thank God for being by my side in all my endeavors. Next, I express my sincere thanks and gratitude to my advisor Dr. Teka Zewdie for his unreserved proficient advice in the preparation of this thesis.

I wish to extend my deepest gratitude to Dr. Maza W Yohannes for editing the final draft of this thesis. I also would like to thank all my Colleagues for their advice and encouragement in the process of my study.

I am very much indebted to my parents and all members of my family whose support and encouragement has helped me through out my study. Dedication of this thesis goes to my dear father Ato Almaw Fenta.

Tiruwork Almaw
TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acknowledgment</td>
<td>I</td>
</tr>
<tr>
<td>Table of Contents</td>
<td>II</td>
</tr>
<tr>
<td>List of Tables</td>
<td>V</td>
</tr>
<tr>
<td>Abstract</td>
<td>VI</td>
</tr>
</tbody>
</table>

CHAPTER ONE

1. BACKGROUND OF THE STUDY

1.1. Statement of the Problem........................ 1
1.2. Significance of the Study........................ 5
1.3. Delimitation of the Study......................... 5
1.4. Operational Definition of Terms.................. 6

CHAPTER TWO

2. REVIEW OF RELATED LITERATURE

2.1. The Nature of Parenting.......................... 7
2.2. Factors Affecting Parenting....................... 8
2.3. Qualities of Parenting............................ 10
2.4. Qualities of Adolescent Mothers Parenting........ 11
   2.4.1. Parenting Attitudes.......................... 11
   2.4.2. Child Development Knowledge.................. 12
   2.4.3. Parental Behavior of Adolescent Mothers...... 13
2.5. Adolescent Pregnancy and Parenthood in Ethiopia.. 15
2.6. Consequences of Adolescent Parenthood 17
  2.6.1. Health Related Consequences 18
  2.6.2. Psychosocial Consequences 19

CHAPTER THREE

3. METHOD 21
  3.1. The Study Area 21
  3.2. Design of the Study 21
    3.2.1. Procedure of Selecting Respondents 21
    3.2.2. Instruments Used 22
      3.2.2.1. Measures of Parenting Attitudes 23
      3.2.2.2. Measures of Child Development Knowledge 23
      3.2.2.3. Measures of Parental Behavior 24
  3.3. Tests Try-out 24
  3.4. Data Collection Procedure 26
    3.4.1. Focus Group Discussion 28
  3.5. Data Analysis 28

CHAPTER FOUR

4. RESULTS 29
  4.1. Background Characteristics of Respondents 29
  4.2. Expectations of Children 31
  4.3. Empathically Aware of Children’s needs 32
  4.4. Beliefs in the Value of Corporal punishment 32
LIST OF TABLES

Table 1. Number of births per 1000 Women........................................ 16
Table 2. Background Characteristics of the Respondents.......................... 20
Table 3. T-test Result for Inappropriate Expectations of Children............. 31
Table 4. T-test Result for Level of Maternal Empathy Towards Children’s Needs... 32
Table 5. T-test Result of Beliefs in the Value of Physical Punishment........... 33
Table 6. T-test Result for Parent-Child Role Reversal............................ 34
Table 7. T-test Result for Oppressing Children’s Power and Independence...... 35
Table 8. T-test Result for Child Development Knowledge.......................... 35
Table 9. T-test Result for Observation of Adolescent and Adult Mother Interaction with their Infants.................................................. 36
<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.5. Parent-Child Role Reversal</td>
<td>33</td>
</tr>
<tr>
<td>4.6. Oppressing Children’s Power and Independence</td>
<td>34</td>
</tr>
<tr>
<td>4.7. Child Development Knowledge</td>
<td>35</td>
</tr>
<tr>
<td>4.8. Adolescent Parental Behavior</td>
<td>36</td>
</tr>
<tr>
<td>4.9. Focus Group Discussion(FGD) Results</td>
<td>37</td>
</tr>
<tr>
<td>CHAPTER FIVE</td>
<td></td>
</tr>
<tr>
<td>5. DISCUSSION</td>
<td>40</td>
</tr>
<tr>
<td>5.1. Differences on Parenting and Child Rearing Attitudes</td>
<td>40</td>
</tr>
<tr>
<td>5.2. Child Development Knowledge</td>
<td>42</td>
</tr>
<tr>
<td>5.3. Parental Behavior</td>
<td>43</td>
</tr>
<tr>
<td>CHAPTER SIX</td>
<td></td>
</tr>
<tr>
<td>6. SUMMARY, CONCLUSION AND RECOMMENDATIONS</td>
<td>41</td>
</tr>
<tr>
<td>6.1. Summary</td>
<td>46</td>
</tr>
<tr>
<td>6.2. Conclusion</td>
<td>47</td>
</tr>
<tr>
<td>6.3. Recommendations</td>
<td>49</td>
</tr>
<tr>
<td>7. References</td>
<td>52</td>
</tr>
<tr>
<td>8. Appendix I</td>
<td>55</td>
</tr>
<tr>
<td>Appendix II</td>
<td>61</td>
</tr>
</tbody>
</table>
ABSTRACT

The study was undertaken to explore the qualities of adolescent mothers' parenting. That is, parenting and child rearing attitudes, child development knowledge and parental behaviors of adolescent mothers as compared with adult mothers. The study covers a selected total sample of 104 adolescent and adult mothers, 52 respondents from each group at Shiromeda area. The subjects considered in the study were structurally interviewed. The obtained data in the study were analyzed by using a t- test method. This method is used to compare the parenting qualities of adolescent mothers with that of adult mothers.

Results of the final data analyses indicated that adolescent mothers have the ability to be empathically aware of their children's needs, give less value on physical punishment and encourage their children to express their opinions and feelings. The study further revealed inappropriate expectation of children and parent-child role reversal measures, where adolescent mothers scored significantly lower than adult mothers, indicating that adolescent mothers lack understanding of children's developmental capabilities and the belief in parent-child role reversal. The result indicated that adolescent mothers have less knowledge about child development than adult mothers. The analyses revealed a significant difference on parenting styles of interactions between adolescent and adult mothers and their children one to five years of age. Adolescent mothers scored higher in physical interaction than adult. That is, adolescent mothers interacted more physically with their children; and vocalized less. In addition, adolescent mothers scored higher in provocation, indicating adolescent mothers were occupied with inappropriate behaviors such as pinching, and poking.

Finally, the finding suggests that adolescent parenting shouldn't be treated in isolation. Cooperation with sociologists, psychologists and religious leaders needs to be utilized to support these adolescent parents to combat inappropriate maternal behavior. Also a parenting education program will be successful to lower the current problems of adolescent parenting.
CHAPTER ONE

1. BACKGROUND OF THE STUDY

It is a biological fact that children do not grow up as solitary individuals. Parenting contributes to the ecology of a child’s development. Mothers and fathers as well as other family members and even non-familial day care providers guide the development of children through direct and indirect means (Papalia, Olds, & Feldman 1999; Santrock, 2001).

It is a continuing task of parents in each generation to prepare children of the next generation for the physical, economic, and psychosocial situations in which those children must survive. Many factors influence the development of children. The child’s first contact is with his mother and the rest of the nuclear family. The care giving development, adjustment and success depends on the care provider. In view of many psychological theorists e.g. Freud, 1938 (cited in Berry, Poortinga, Segall & Dasen, 1992) the child’s first relationships with parents set a base for all of the child later relationships. (P.20)

Parents influence child development both by the beliefs they hold and by the behaviors they exhibit. In addition, the age of the mother (East & Felice, 1996) and her parenting personality and associated characteristics including attitudes, motivation to become involved with children and child care knowledge and skills also influence parenting (East et al., 1996; Sommer, Whitman, Borkowski, Schellenbach, Maxwell, and Keogh, 1993). Parents in different cultures and subcultures have different understanding about the development of their children (Levine, Miller, & West, 1988).
Parents' behavior has a direct effect on parenting. Parents indirectly influence their children by such factors as, marital status (Furstenberg, Brooks Gunn, & Chase-Lansdale, 1989 cited in Cole & Cole, 1993), and education (Sommer, Whitman, Borkowski et al. 1993).

Parents will be more effective if they are knowledgeable about their own child, child development and child rearing. A parent's knowledge of child development is affected by culture, family and generation. These will on the other hand influence the parents' behavior. Culture influences the way parents think about their parenting goals and values (Levine et al., 1988).

Teenage parenthood is one of the social issues in Ethiopia. Since Ethiopia is one of the least developed countries, most people are young and uneducated. They marry at an early age and they become teenage mothers. Some teenagers lack the maturity and sense of responsibility to sufficiently nurture their children.

Hurlbut, Culp, Jambunathan & Bulter (1997) stated that when adolescents become parents they are faced with the challenge of providing for their own children while being scarcely out of childhood themselves. The outcomes of early parenthood are long lasting, affecting both adults and children.

Garcia Coll, Hoffman, & Oh (1987) cited in Shaffer (1994) stated the following:

"... Even when adolescent mothers do have a close companion that provides a social support their parenting still tends to be less sensitive and responsive than that of older
women. Part of the problem is that young mothers who are not very knowledgeable about babies usually seek advice and support from other unknowledgeable sources - namely their own adolescent peers. Teenage mothers also provide less stimulating home environments for their infants and toddlers than older mothers do." (P. 450)

The quality of human life has always been influenced by ones behavior and among this is also adolescent parenting behavior. Thus, the psychological components of parenting, such as, parenting attitudes, child development knowledge and commitment to parenting tasks influence the way they interact with their children.

The long-term consequences associated with adolescent parenting include educational loss, increased probability of single parenthood and increased dependency etc. (Hayes, 1987; Cole & Cole, 1993).

Teenage mothers compared to adult mothers lack child development knowledge and face difficulties in taking the responsibilities of being a parent (Coley & Chase-Linsdale, 1998 Jorgensen, 1993 (cited in Fabes & Martin, 2000). In addition, Furstenberg, Brooks-Gunn, & Chase Linsdale, 1989 (cited in Cole and Cole, 1993) stated that adolescent mothers tend to be less emotional to become a parent, tend to vocalize less with their babies than older mothers and are less interested and prepared to bring up their children.

According to Coley & Chase-Linsdale, 1998, Jorgensen, 1993 (cited in Fabes & Martin, 2000) teenage mothers have negative attitudes towards parenting. In addition, Coley & Chase-Linsdale,
1998 Jorgensen, 1993 (cited in Fabes & Martin, 2000) stated that adolescent mothers compared to adult mothers had little interaction with their infants. However, Flanagan, 1998 (cited in Fabes & Martin, 2000) stated that teenage mothers with adequate support and access to resources are capable of taking the responsibilities and become effective mothers.

Adolescent parenting has become a problem for both teenage mothers and their children. According to the 1994 Population and Housing Census, early child bearing appears to be common in Addis Ababa. Even so, there is no single research done in qualities of adolescent mothers parenting. The present study can assist in early identification of the teenage parents who are at great risk for parenting.

1.1. Statement of the Problem

The nature of parenting which children get from their parents or from immediate home environment plays a significant role for the later personality development of children. According to many psychologists early foundations are critical. In most of the cases, mother's contribution is very important. However the quality of parenting is affected by the age of the mother. Adolescent mothers face a problem when they become a parent, since they may not achieve the essential stage in their development in which they are mature enough to be sensitive and responsive to a child. Accordingly, the following questions were designed in this study:

1. What is the attitude of adolescent mothers towards parenting and childrearing?
2. What is the knowledge of adolescent mothers about child development?
3. How do adolescent mothers behave in their verbal and physical interaction with the child?
4. How do adolescent mothers differ from adult mothers in their parenting qualities?
5. Which groups of mothers show more verbal and physical behaviors?

1.2. Significance of the Problem

Despite the fact that adolescent parenting is not to be encouraged, the fact remains that there are several young mothers with their babies in Ethiopia. Yet, no research has been done in the qualities of adolescent mothers parenting in Ethiopia. Therefore, qualities of adolescent mothers’ parenting should be studied. This is because of the fact that adolescent parents’ knowledge about babies and attitudes about child rearing is essential. Furthermore, knowledge about child development is highly relevant. The study could have a significant effect in improving adolescent parents’ knowledge of infant and child development. The improvement of young mothers’ knowledge of child can immediately influence the reaction of developmental delays in their children.

1.3. Delimitation of the Study

The study is delimited to adolescent mothers whose age between 15 and 20 and their children ages between 1 and 5, and adult mothers between 35-40 years with their children between 1 and 5 years of age. More specifically, the study focuses on Shiromeda area of two kebeles. The ages range from (15-20) adolescents and adults (35-40) were included based on the rational that they may face greater risk of bearing a still born fetus or a baby who will fail to survive than do mothers in their twenties and early thirties (Shaffer, 1993). The variables child development knowledge, parenting and child rearing attitude, and parental behavior were studied.
1.4. Operational Definition of Terms

Adolescent mothers: - those married and unmarried mothers whose age is between 15-20 years.

Adult mothers: - those mothers whose age is between 35-40 years.

Qualities of Adolescent Mothers' Parenting: - the adolescent parenting behavior, that is the psychological components of parenting. Such as, the variables child development knowledge, parenting attitudes, and parental behavior (parenting interaction style of mothers with their children of one to five years of age).

Child Development Knowledge: - is defined as the awareness of infants' physical, cognitive and social development.

Parenting Attitude: - is defined as parenting and child rearing attitudes of adult and adolescent parent. The parenting attitudes in this study include appropriateness of developmental expectations of children, empathy toward children's needs, value of physical punishment, parent-child role reversal and children's power and independence.

Parental Behavior: - parenting interaction style of mothers with their children of one to five years of age.

Parent - Child Role Reversal: - Parents need to reverse parent child roles and children are expected to be sensitive to and responsible for much of the happiness of their parents.
CHAPTER TWO

2. REVIEW OF RELATED LITERATURE

2.1. The Nature of Parenting

Every day more than three quarters of a million adults around the world experience the pleasures, the challenges and rewards of becoming new parents (Baca & Stanley, 1996) Despite the fact that most people become parents, and every one who ever lived has had parents, parenting remains an important subject about which almost every one has opinions, but about which few people agree.

As mentioned previously, it is a principal and continuing task of parents in each generation to prepare children of the next generation for the physical, economic, and psychosocial situations in which those children must survive. Many factors influence the development of children. The child’s first contact is with his mother and the rest of the nuclear family. The care giving development, adjustment and success depends on the care provider. That is, parents are very significant socialization agents in the child’s formative years.

Good parenting provides children with a warm, supportive, safe and stimulating environment that makes the child feels secure and allows him/her to reach his/her full potential as human beings (Baca & Stanley, 1996; Papalia et al., 1999). Becoming a parent also means having new and important responsibilities to one self as well as to others. Parenthood can enhance one’s psychological development and self-confidence (Brooks, 1994). Being a parent is one of the most important roles in our life. It is one of the most challenging tasks. Babies depend on parents to meet their needs. The way parents care for their baby determines how the child will develop as a child and as an adult too.
Yet parenting is under a problem because of poverty, Voinne Meloyd (1990,1998) (cited in Santrock, 2001), dual parental involvement (Papalia et al., 1999; Berns, 1993; Santrock, 2001), divorced families (Shaffer, 1994; Papalia et al., 1999) and teenage first time mothers and fathers (East & Felice, 1996) have influences on parenthood.

Parenting is a process that formally begins during or before pregnancy and continues through the balance of life span (Fabes & Martin, 2000; Papalia et al., 1999). It is obvious to say that parenthood is central to childhood, to child development and to the society as well.

So parenting is a peculiar kind of life's work, marked by challenging demands. Successful parenting has both affective components in terms of commitment, empathy, and positive regard for children, as well as cognitive component that is the how, what and why of caring for children (Shaffer, 1994; Brooks, 1994).

2.2. Factors Affecting Parenting

There are lots of factors affecting parenting some of them are stated as follows: -

1. Prenatal biological events: - factors such as, age of mothers, diet, and stress, disease and exposure to environmental toxins can affect postnatal parenting as well as child development (Papalia et al., 1999; Santrock, 2001; Shaffer, 1994; Cobb, 2001).

2. Parental personality and associated characteristics including intelligence, attitudes and motivation to become involved with children and child care knowledge and skill influence
parenting (East & Felice, 1996; Sommer et al., 1993). Other characteristics that favor good parenting include general well being, empathic awareness, predictability, responsiveness, and emotional availability (East & Felice, 1996; Levine et al., 1988; Shaffer, 1994; Papalia et al., 1999).

Perceived self-efficacy is likely to affect parenting positively since parents who feel effective with their children are motivated to engage in further interactions with their children. On the other hand, negative characteristics of personality, such as self-centeredness Erickson (cited in Hurlbut, Culp, Jambunathan et al., 1997) and depression (Downey & Coyne, 1990, Radke Yarrow & et al., 1992 (cited in Santrock, 2001) affect parenting adversely. Moreover, Colletta in (1983) stated that mothers with depression are more likely to ignore or verbally attack their children in problem solving situations.

3. Characteristics of children influence parenting and child development. Such as, age and gender of child (Hurlock, 1980; Berns, 1993). Children are at great risk when their temperaments are poor match with those of their parents. (Cobb, 2001; Elster, McAnarney, Lamb, 1983). Other individual differences affect parents’ confidence, management styles, and level of involvement and control strategies.

4. Family situation (Berns, 1993), social support (Elster et al., 1983), economic class (Papalia et al., 1999; Cobb, 2001) and culture (Levine et al., 1988) have an impact on parenting perceptions and practices. The way children are socialized depends in large part on culture and socio economic class, which influence parents’ beliefs about how children should behave Harwood et al., 1996 (cited in papalia et al., 1999).
2.3. Qualities of Parenting

In every day life, parenting children does not always go well and right. The time available for families for nurturing children has diminished and economic pressures on families cause children to gain inadequate care. Parents are usually the most caring people in the lives of their children. If parents are provided with knowledge, skills and supports they can respond more positively and effectively to their children. Parents' own psychological and physical needs must fit if they respond to their children.

The costs of inadequate parenting and failure to address problems in family life are high. Children lack appropriate care, are exposed more frequently to illness, poor nutrition, stress and unstimulating environments (Cobb, 2001; Papalia et al., 1999; Shaffer, 1994). Children need to receive deep psychological messages about how special and precious each one is. Feeding and clothing a child does not produce the kind of person who will nurture well in the next generation (Brooks, 1994).

Children are affected not only by what parents do but also by what they think. Parental attitudes toward their parental responsibilities and methods of child rearing are important factors to determine parents' relationships with their children. Super and Harkness, 1982 (cited in Levine, et al., 1988) stated that adults' belief about the nature of children differs from group to group and these beliefs affect parenting behavior.
Parent’s individual readiness to be parent is a critical factor. Individuals with a clear sense of who they are, what they like, how they relate to other people, when they can care for themselves and establish patterns of intimacy with other parents are ready to nurture a new life (Brooks, 1994).

A major determinant of individual difference in attachment is the quality of the infant mother relationship during the first year of life. A mother’s capacity to respond sensitively and appropriately to the baby’s strengths and limitations appear to be more important than the amount of contact or care giving (Shaffer, 1994; Papalia et al 1999; Berns, 1993).

In most of the cases, mother’s contribution is very important. In the development of young children, the role of mother is universal. John Bowlby in 1966, 1969, 1973 (cited in Berns, 1993) wrote that maternal love and care are the most important influences on an infant’s future development. Child abuse or neglect that is being emotionally absent in the early mother-child relationship could have severe emotional, social, and intellectual consequences. Lamb in 1981 (cited in Shaffer, 1994) stated that mothers are more likely to hold, talk to, and play with their infants. However, a women’s age influence her ability to be maternal. East & Felice, 1996; Coley & Chase Linsdale, 1998, Jorgensen, 1993 (cited in Fabes & Martin, 2000).

2.4. Qualities of Adolescent Mother’s Parenting

Qualities of adolescent mothers parenting are as follows.

2.4.1. Parenting Attitudes

The younger the parent, the less realistic the attitude toward parenthood (Hurlock, 1980). Young parents tend to take their parental responsibilities lightly and not to allow them to interfere too
much with their interests and pleasures, older parents tend to be more anxious and concerned, and this makes them place parental responsibilities ahead of their personal interests and pleasures.

As with an older mother, an adolescent mother’s attitude toward parenting influences her parenting styles. Mothers who place inappropriate expectations on the child are likely to use harsh and rejecting discipline strategies and such strategies are linked with child anger, low self-esteem, and social withdrawal (Shaffer, 1994).

Observers found that when their children are infant’s, young mothers prematurely foster independence for example, sit up too early, and scramble toys before they really can get them (Brooks, 1994). In addition, Hurlbut et al. 1997 stated that adolescent mothers found to be at risk for non-nurturing behaviors, such as, inappropriate expectations and reversal of parenting roles. Moreover, Roosa & Vaughan, 1984 (cited in Hurlbut et al., 1997) stated that adolescent mothers compared to adult mothers have more negative attitudes about parenting.

Delissovoy in 1973 (cited in Elster, et al., 1983) found that adolescent mothers overestimate the rate of child development. Moreover, Coll, Vohr, Haufman, & Oh (1986) stated that teenage mothers are perceived as less sensitive, less restricted, more physically intrusive and with more punitive rearing practices as compared with adult mothers.

2.4.2. Child Development knowledge

Mothers’ knowledge of the child development may directly affect parental sensitivity by influencing the mother’s perception, interpretation, and responsiveness to infant cues (Elster,
et al., 1983). Coley & Chase-Linsaqaude, 1998, Jorgensen, 1993 (cited in Fabes & Martin, 2000) stated that teenage mothers compared to adult mothers lack child development knowledge and face difficulties in taking the responsibilities of being a parent. However, Parks, & Smeriglio (1983) by measuring the parenting knowledge of first time adolescent mothers stated that knowledge level was high and no difference from that of adult primiparous mothers of comparable socio economic status.

2.4.3. Parental Behavior of Adolescent Mothers

Adolescent and adult mothers interact differently with their children (Elster et al., 1983). Adolescent mothers compared to adult mothers interact more negatively with infants. Culp, Appelbaum, Osofsky & Levy, 1988 (cited in Hurlbut, et al., 1997). Moreover, Coley & Chase-Linsdale, 1998, Jorgensen, 1993 (cited in Fabes & Martin, 2000) pointed out that adolescent mothers, compared with adult mothers of familiar parity and socio economic status tend to vocalize, and smile at infants less, to be less sensitive to and accepting of their infants' behavior.

Epstein in 1980 (cited in Elster et al., 1983) stated that non-verbal interaction was most commonly used by teens of young ages and those who underestimated infant needs and abilities. In addition, Osofsky and Osofsky in 1970 (cited in Elster et al., 1983) revealed that teenage mothers exhibited a fairly high level of physical interaction and warmth, but engaged in relatively little verbal interaction. Epstein (cited in Elster et al., 1983) suggested that interactions involving only physical exchanges are less nurturing than those combining
physical and verbal exchanges, which may imply that teenage mothers tend to be less sensitive to their children’s developmental needs than adult mothers.

Lawrence, McAnarney, Aten in 1981 (cited in Elster et al., 1983) reported a relationship between the chronological age of the mother and her ability to interact with the infant. The younger the mother, the less she demonstrated behaviors such as touching, the use of high-pitched voice, sympathy movements, and closeness to the infant. Moreover, Lawrence, et al., in 1981 (cited in Elster et al., 1983) stated that some adolescent mothers engaged in aggressive, inappropriate behaviors such as picking, poking, and pinching their infants, which are rarely displayed by adult mothers.

Adolescent mothers displayed higher level of parenting stress and were less responsive and sensitive in interactions with their infants than adult mothers. (Passino, Whitman, Borkowski, Schellenbach, Maxwell, Keogh, Rellinger, 1993). Moreover, Teberg, Howell, Wingert, (1983) stated that older mothers differ significantly from teenage mothers in effective eye, verbal, physical contact, and smiling behaviors.

Passion, Whitman, Borkowski, et al., (1993) stated that teenage mothers are more passive in their face to face interaction and scored lower than adult mothers in maternal affectionate stimulation, flexibility, positivity, motivation, and over all mothering. However, according to Anisworth in 1979 (cited in Berns, 1993) warm and sensitive mothers who often talk to their infants and try to stimulate their curiosity are contributing in a positive way to the establishment of secure emotional attachments.
2.5. Adolescent Pregnancy and Parenthood in Ethiopia

Adolescent pregnancy is one of the social issues in Ethiopia; since Ethiopia is one of the least developed countries most people are uneducated. They marry at an early age and they become adolescent mothers.

In a study conducted in two Woredas of Southern Tigray about knowledge, attitude and practice of reproductive health, the study revealed that the population is characterized by early marriage with mean age at first marriage of 15 years, teenage pregnancy and motherhood with 55% of mothers having given birth before the age of 18 (Solomon, 2002). With regard to the age of marriage, Ethiopia is among the countries with the lowest average age in first marriage for girls. Early marriage is practiced to a large extent in the North Western part of Ethiopia. A survey conducted in Northern part of Ethiopia revealed that the mean preferred age at first marriage is 14.2 years. The lowest marriage age in Gojjam and Gonder this was 11.6 and 12.7 years, respectively (Dawit, 2002).

Early marriage has a negative effect on the lives of the female, her children, her family and the society at large. In a study done by Hailegebriel, early marriage in Northern Ethiopia is traditional and parent centered arrangements between families. The negative consequences of early marriage for young girls include early child bearing and high rates of maternal morbidity and mortality. Young girls begin child bearing very early often long before their bodies have developed sufficiently to carry a pregnancy safely. Consequently, there is a potential risk of obstructed labor among adolescents which is not properly handled could result in the death of mother and child. Among this group one of the social and health concern is the development of
obstetric fistulae. Fistulae causes urinary and/or faces incontinence, and as a result many women become social outcasts (Hailegebriel, 1994).

The 1994 Population and Housing Census of Ethiopia reported that women age group 15-19 and their total number was 183,476 and among these 1,942 gave birth in urban Addis Ababa, and the overall rate of teenage child bearing hasn’t increased dramatically. According to Census 1994, the number of births that occur in a given year per 1000 women was as follows.

Table 1 Number of Births per 1000 Women

<table>
<thead>
<tr>
<th>Age</th>
<th>Year of Census/Survey</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>60</td>
</tr>
</tbody>
</table>

Women in Africa tend to marry at a very young age often they are married by age 16 or 17 and in some areas by age 12 or 13 (Arkutu, 1995). In most African countries adolescent constitute 50% of the population. They contribute to 10% of the continent’s overall high fertility levels. The early marriages, early sexual activity and early bearing contribute to the high fertility rate and the high population on size of Africa. In 1990, almost one-fifth of 15-19 years old girls gave birth consisting more than 20% of the total fertility rate (Kwawu, 1997). For example, in Kenya pregnancy among adolescent girls age 15-19 is very high considering their involvement in unprotected sex, non-use of contraceptives and early marriages.

Furthermore, the high levels of teenage sexual behavior and multiple partners exposes the girls especially to risks of STDs and HIV/AIDS infections for themselves as well as their off springs.
should pregnancy occur. With regard to HIV/AIDS it is becoming evident that men prefer young girls as sex partners because of the myth that they are AIDS free (Arkutu, 1995). Because of this, in Kenya over 35,000 cases of AIDS had been reported by Ministry of Health in 1993. In addition, estimates 800,000 are infected with HIV (Kwawu, 1997).

Each year more than a million U.S. teenage will become pregnant, four out of five of them unmarried. More and more are becoming pregnant at earlier age under age fifteen Wallis et al., Children’s Defense Fund (cited in Berns, 1993). In the United States, every 26 seconds adolescent becomes pregnant and every 56 seconds an adolescent gives birth. Campaign for our children in 1997 (cited in Fabes & Martin, 2000). These rates are the highest among developed nations, although the rate of U.S. teen pregnancy has dropped since 1990 fear of HIV/AIDS and STDs are the likely reasons for this decrease [CDC, 1998b (cited in Fabes & Martin, 2000. US Department of Health and Human Services, 2000 (cited in Papalia et al., 1999).] The U.S. teen birth rate is seven times the rate in France, fourteen times the rate in Japan, and twice the rate United Kingdom Alan Guttmacher Institute, 1997 (cited in Fabes & Martin, 2000). The physical, emotional and economic costs of premature parenting are great, to the young mother and father as well as their child and the society at large.

2.6. Consequences of Adolescent Parenthood

In recent years, increased concern has been registered about the psychological, social, health related and economic consequences of early childrearing. Having a child always carries a certain risk and complications regardless of the age of the mother. However, the risk of having serious complications during pregnancy or childbirth is much higher for girls in their early teens than for
women aged 20-24 years or older. The major differences between girls in their early teens and older women are that girls aged 12-16 years are still growing (Dawit, 2002).

2.6.1. Health Related Consequences

The adolescent mother faces serious health problems for themselves and their children. Such as, pre-eclamptic, toxaemia, anaemia, malnutrition, vesico vaginal, difficult delivery, maternal mortality and morbidity (Arkutu, 1995; Kwawu, 1997; Berns, 1993). Infants born to adolescent mothers are more likely to be premature and to have low birth weight, birth defects, cognitive deficiencies, and impaired social emotional development (Santrock, 2001; Papalia et al., 1999; Shaffer, 1994). A major contributor to these problems is lack of prenatal care [Alan Guttmacher Institute in 1997 (cited in Fabes & Martin, 2000)].

Many of the victims of early pregnancy and child bearing are from the lowest socio economic status. To this group, health facilities may be out of reach as a result of non-availability, and social or geographical inaccessibility. In addition, if the pregnancy is unwanted or if the girl is too young and embarrassed by her condition this may result in non-utilization of available health facilities (Dawit, 2002).

2.6.2. Psychosocial Consequences

Most adolescent mothers are still children themselves with incomplete affective needs. They cannot therefore give what they have not had. The proper development of the mother herself is interrupted or deformed by the excessive responsibilities of motherhood imposed on her. In
addition, most adolescent girls are not yet capable of fulfilling all the responsibilities of an adult. In particular, they are not yet ready to have children themselves.

Girls who marry young and start child bearing early tend to lack social and survival skills. They may become completely dependent on their husbands for their needs. Such women may have low self-esteem and tend to believe that the only useful contribution they can make in life is to have many children (Arkutu, 1995). The main psychological risk to the baby is abuse and neglect [McHenry, Walters, & Johnson, 1979; Furstenberg, Brooks-Gunn, & Chase-Lingsdale, 1989 (cited in Berns, 1993)].

The adverse long-term consequences associated with adolescent parenting have been the loss of educational and job opportunities than their peers and the tendency to remain in poverty level (Manlove, 1998; White & Deblasi, 1992 (cited in Shaffer, 1994). In today's world, if an adolescent girl doesn't want to have an abortion, she usually plans to keep the baby and less likely to give up her baby for adoption (Santrock, 2001). Early childhood has critical implications for the children of young mothers than children of older parents (Fabes & Martin, 2000; Shaffer, 1994).

Children's Defense Fund in 1995 (cited in Papalia et al., 1999) pointed out that some teenage mothers seem to profit less from their life experiences because of lower educational attainment, diminished intellectual ability, absence of social supports (Dukewich, Borkowski, Whitman, 1996) and socio-emotional immaturity, with the consequences that teenage mothers are less cognitively ready to parent (Sommer, et al, 1993).
Hurlbut et al., (1997) studied that the age of the mother was an important factor influencing maternal readiness. The older the mothers the more responsive they were to their newborn infants than were the younger mothers regardless of the race and socio-economic or marital status. The cognitive readiness of adolescent mothers depends both on the information they have received from their formal and informal social support systems and on their ability to assimilate this information and subsequently use it in specific situations.

Adolescent mothers face a problem when they become a parent, since they may not achieve the essential stage in their development in which they are mature enough to be sensitive and responsive to a child. They are struggling with their own crises and searching for their personal identity. They are less likely to have interest in being a parent as they are developmentally immature. Adolescent mothers may have less knowledge about child development and appropriate parenting practices, increasing the risk of child neglect or maltreatment. Levine, Coll, & Oh (1985) stated that maternal age is not only factor accounting for the differences in maternal behavior between adolescent and non-adolescent mothers. Other factors, such as, less schooling and lower ego development, combined with the stress of teenage motherhood and less social support were significant with these behavioral differences. However, the seventeen-year studies in Baltimore stated that many adolescent mothers have overcome the problems (Brooks, 1994).
CHAPTER THREE

3. METHOD

3.1 The Study Area

The Study covered only Shiromeda area. The reasons for selecting this area are that:

- It is an area of:
  1. Culturally homogenous.
  2. Families with low socio economic status.
  3. Scarce time and resources for adequate child care.

Many ethnic groups are living in the Kebele 20 and 21 of Shiromeda, out of which some are Amhara, Oromo, Dorze, etc. These areas are known by most as ‘Dorze Sefer’ and considered among the most crowded urban slums in the city of Addis Ababa. The dwellers of this community are self employed and culturally homogeneous, and almost every household earns their income by weaving, petty trade, small handicrafts and the like. Besides, they have large family size, which is negatively correlated with their income.

3.2 Design of the Study

The procedure of selecting respondents, the development of measuring instruments, data collection, and analyses are described in this chapter.

3.2.1 Procedure of Selecting Respondents

The population for this study consists of adolescent and adult mothers and their children one to five years of age.
How to identify the target population and how to select the sample cases for the present study was not an easy task since it was suspected that matters related to adolescent parenting are very personal for adolescents in our society. Thus, identifying those cases were exercised with much care and skill.

The household survey was employed to list out the adolescent (15–20) and adult (35–40) mothers in two kebeles of Shiromeda. In order to identify the samples, purposive sampling was employed using the adolescent mothers in the kebele 21 and adult mothers in kebele 20 to avoid contamination of these groups.

As a whole, in each group equal number of respondents ranging in age from (15–20) fifty-two adolescent and (35–40) years fifty-two adult mothers and their one to five years children were included.

3.2.2. Instrument Used

Respondents were interviewed through two parenting structured interview that assessed the parenting attitudes, and child development knowledge. A checklist was used to measure parental behavior. In addition, mothers rated their parenting attitudes and child development knowledge through focused group discussion. All instruments are described below.
3.2.2.1. Measures of Parenting Attitudes

Parenting attitude was assessed by the Adult-Adolescent Parenting Inventory (AAPI-2). The AAPI-2 is a validated and reliable inventory. The AAPI-2 is the revised and re-normed version of the original AAPI first developed in 1979 (Bavolek & Keene, 2001). AAPI-2 is a 38 item questionnaire adapted to index the following five parenting attitudes and values (a) developmental expectation of children (“children should be thought to obey their parents at all times”), (b) empathy towards children’s needs (“Children who feel secure often grow up expecting too much”), (C) value of physical punishment (“sometimes spanking is the only thing that will work”), (d) Parent child role reversal (“Children should be aware of ways to comfort their parents after a hard days work”), and (e) power and independence (“Parents who encourage their children to talk to them only end up listening to Complaints”).

Response options ranged from 1 (Strongly agree) to 5 (strongly disagree) with high scores reflecting, appropriate developmental expectations of children, high empathy towards children’s needs, low value of physical punishment, low expectations of the child taking a parenting role, and parents place a strong value on children feeling empowered, respectively. Thus, high scores reflect favorable parenting attitudes and low scores reflect unfavorable parenting attitudes, or those found to be correlated with child abuse and neglect (Bavolek & keene, 2001).

3.2.2.2. Measures of Child Development knowledge

The Knowledge of child development inventory was developed to assess mothers’ knowledge of
infant and child development. Twenty two representative questions in the areas of developmental milestones in infant physical, cognitive and social development were developed, possible responses were disagree, uncertain and agree, response options were coded as 1 was to "disagree" 2 to "uncertain" and 3 to an "agree" response. The possible score range for the total instrument was 22 to 66 with higher scores indicating greater knowledge.

3.2.2.3. Measures of Parental Behavior

Mother's involvement in their children care taking was assessed via observation. An observation took place with which the adolescent participated in physical (kissing, holding, showing affectionate face, tickling and bouncing) and verbal (laughing, calling name of objects or things etc.) and other verbal and physical provocation (giving or taking objects from the infant, punishment etc.) in a normal situation. Mothers' interactions with their children were observed through a checklist when the target child was between 1 and 5 years. The observation was in their place of residence by telling the mothers to do things for the baby as usual. The observation was for three sessions of morning, afternoon and evening and with duration of 10 minutes for each session.

3.3. Tests Try- out

A final step in the development of the final version of the instruments consisted of giving the inventory to selected respondents before they were made ready for final use. Pilot testing was made for the purpose of revising and determining the clarity, specificity; comprehensibility and relevance of the items, and for determining the reliability of the tests.
Thus, the 38 adapted parenting and child rearing attitude items and the 22 developed child development knowledge items and the parental behavior through check list (translated in to Amharic) were tried on 20 adolescents and 20 adult mothers at the Kerkos community based on the rational that they had the same characteristic with the respondents at Shiromeda area. The mean values of the age of the adolescent and adult mothers were included in the test try-out were found to be 17.5 and 38.8, respectively. No time limit was made for the completion of the interview. Finally, the responses were scored for all tests.

Based on the response of the pilot group the reliability of the instruments was assessed by computing Cronbach alpha. The five subscales in the parenting and child rearing attitudes proved to be reliable with $\alpha = 0.73$ (developmental expectation of children), $\alpha = 0.68$ (empathy), $\alpha = 0.82$ (corporal punishment) $\alpha = 0.71$ (parent child role reversal) and $\alpha = 0.75$ (power and independence). And $\alpha = 0.83$ for knowledge of child development inventory.

After interviewing the respondents’ the inventory were revised if only one response has been marked for each item and that it was clearly marked and any form that shows obvious response patterns such as alternating agree and disagree responses or all items in one column was rejected. Finally, two items from AAPI-2 were discarded. A total of 38 items for the final form of AAPI-2 were used.

Accordingly, respondents’ response to the subscales (expectations, empathy, punishment, role reversal and power Independence) item were summed to field a total scale score that could range from 7 to 35, 9 to 45, 11 to 55, 6 to 30, and 5 to 25 respectively. Higher score reflecting favorable
attitudes. Also, given 22 items each on one to three scale subjects score on child development knowledge measures could range from 22 to 66 with a higher score indicating having knowledge about child development.

3.4. Data Collection Procedure

Before the onset of data collection, locations of the study were visited and potential respondents were identified.

Two assistant researchers were employed on a part time basis. A criterion for the selection of enumerators was to be females who completed grade 12 and known to be honest and showing successful performance during the training and pre test. The principal investigator main task was coordinating the activities of the enumerators, checking the structured interview that were filled each day and giving feedback to the enumerators before going to the next day's work so that, they do not commit the same mistakes again.

Then, the assistant researchers were given a short training on how to gather the data, to familiarize the interviewers with the objectives of the study, the questions sequences and guidelines. The main researcher then briefs the purpose of the study to the target groups, kebele chairperson and this helped to get permission and assistance from the kebele chairperson. After getting the consents of the respondents, they were informed about the purpose of the study. The following interviewing procedures and guidelines were closely adhered to the respondents:

1. The assistant researchers took care to establish rapport with the respondents completing the interview. The purpose of the interview was explained to the respondents.
2. When an individual didn’t know the meaning of an item, the interviewer assisted in explaining any item. Care was taken to ensure the interviewer didn’t provide information in discussion, which would modify the person’s value or attitudes. Reading the inventory took place in a private setting.

3. The respondents were assisted in understanding how to respond to the inventory item. The instructions were read appearing on the front of the structured interview, on when to respond with a strongly agree, agree, uncertain, disagree, or strongly disagree questions. How to respond to the inventory was addressed prior to beginning of the interview. For parenting attitude inventory, respondents were told that there are no right or wrong answers, just to tell what they had in their mind.

4. When an individual completed the structured interview, the interview was scanned quickly to make sure that all questions were answered and that only one answer was given for each question. This helped to assist the respondents in making sure her responses were what she intended.

There was no time limit for a person to complete the inventory. However, the average time to complete the test was between 20 to 25 minutes.

Mothers parenting attitudes and child development knowledge were assessed via structured interview and the targeted child was between 1 and 5 years of age. The respondents were interviewed at their convenience and in their place of residence. A total of 52 adolescent and 52 adult mothers were successfully interviewed.
3.4.1. Focus Group Discussion (FGD)

A focus group discussion was conducted. The focus group discussion (FGD) questions were designed to get information on parenting and child rearing attitudes and child development knowledge of adolescent and adult mothers. The FGD was conducted in the house of one of the respondents. A group of eight adolescent mothers and another group of eight adult mothers were participated in the discussion. The principal investigator was a facilitator and one of the enumerators participated as a note taker. In order to gain the confidence of the discussants, an explanation was made that the study is for academic purpose only. The FGD aimed at getting adolescent and adult mothers views on parenting attitudes and child development knowledge.

3.5. Data Analysis

As mentioned earlier, the subjects in this study constituted two comparison group i.e. adolescent and adult mothers. To determine whether there is a mean difference between adolescent and adult mothers on parenting attitudes, child development knowledge and parental behavior, an independent t-test was used.
CHAPTER FOUR

4. RESULTS

4.1. Background Characteristics of the Respondents

Some selected background characteristics of the respondents are presented in Table 2 below.

Table 2. Background Characteristics of the Respondents

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>Adolescent Mothers</th>
<th>Adult Mothers</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Ethnicity</strong></td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>Amhara</td>
<td>5</td>
<td>9.62</td>
</tr>
<tr>
<td>Dorze</td>
<td>28</td>
<td>53.85</td>
</tr>
<tr>
<td>Gurage</td>
<td>5</td>
<td>9.62</td>
</tr>
<tr>
<td>Tigre</td>
<td>2</td>
<td>3.85</td>
</tr>
<tr>
<td>Oromo</td>
<td>8</td>
<td>15.38</td>
</tr>
<tr>
<td>Others</td>
<td>4</td>
<td>7.69</td>
</tr>
<tr>
<td><strong>Religion</strong></td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>Orthodox</td>
<td>41</td>
<td>78.85</td>
</tr>
<tr>
<td>Catholic</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Protestant</td>
<td>4</td>
<td>7.69</td>
</tr>
<tr>
<td>Muslim</td>
<td>5</td>
<td>9.62</td>
</tr>
<tr>
<td>Others</td>
<td>2</td>
<td>3.85</td>
</tr>
<tr>
<td><strong>Marital Status</strong></td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>Married</td>
<td>25</td>
<td>48.08</td>
</tr>
<tr>
<td>Unmarried</td>
<td>17</td>
<td>32.69</td>
</tr>
<tr>
<td>Divorced</td>
<td>5</td>
<td>9.62</td>
</tr>
<tr>
<td>Widow</td>
<td>1</td>
<td>1.92</td>
</tr>
<tr>
<td>Others</td>
<td>4</td>
<td>7.69</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>Can read and write</td>
<td>6</td>
<td>11.54</td>
</tr>
<tr>
<td>Illiterate</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>1-8</td>
<td>34</td>
<td>65.38</td>
</tr>
<tr>
<td>9-12</td>
<td>12</td>
<td>23.08</td>
</tr>
<tr>
<td>Higher education</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Others</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Occupational Status</strong></td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>House wife</td>
<td>19</td>
<td>36.54</td>
</tr>
<tr>
<td>Petty trade</td>
<td>13</td>
<td>25</td>
</tr>
<tr>
<td>Job less</td>
<td>7</td>
<td>13.46</td>
</tr>
<tr>
<td>Others</td>
<td>13</td>
<td>25</td>
</tr>
</tbody>
</table>
Table 2 shows ethnic composition for adolescent mothers: Amhara 9.62 %, Dorze 53.85 %, Gurage 9.62 %, Tigre 3.85 %, Oromo 15.38 %, and others ethnic group comprised 7.69 %. And adult mothers ethnic composition: Amhara 11.54 %, Dorze 55.77 %, Gurage 13.46 %, Oromo 5.77 %, and others 13.46 %.

Seventy eight point eighty five percent of the adolescent mothers group is followers of Orthodox-Christianity, followed by Muslim 9.62 %, Protestant 7.69 %, and others 3.85 %. The majority (75 %) of the adult mothers group are followers of Orthodox-Christianity, followed by Muslim 17.31 %, and Protestant 7.69 %.

In this study, data on marital status for two groups were obtained. Forty eight points zero eight percent of adolescent mothers and 67.31 % of adult mothers are married. About 32.69 % of adolescent mothers and 1.92 % of adult mothers are unmarried, while the remaining marital statuses for two groups are listed in Table 2.

The educational background of adolescent mothers group is that 11.54 % can read and write only, 65.38 % of adolescent mothers had reached grade 1-8, and 23.08 % had reached 9-12. In adult mothers group 19.23 % of the respondents can read and write, 34.62 % illiterate, 38.46 % had reached 1-8, 7.69 % had reached grade 9-12, and no respondents who attend higher education from two groups.

The respondents are engaged in a wide variety of occupations. About 36.54 % of adolescent mothers are housewives, 25 % petty trader, 13.46 % job less and 25 % comprised to others occupational status of adolescent mothers. The majority (53.85 %) of adult mothers are housewives, 21.15 % petty trader and 25 % comprised to other occupational status of adult
mothers.

This chapter presents the results of the main study in terms of the basic questions, which the study has put out to test. In the following analyses, parenting and child rearing attitudes of adolescent and adult mothers were examined with a five subscales as follows: adolescent and adult mothers group were first compared on inappropriate expectation of children. Next, groups were compared on empathy towards children needs, beliefs in the value of corporal punishment, parent child role reversal and oppressing children's power and independence. In addition, difference in child development knowledge was examined. Finally, the parental behavior i.e. mother infant interaction was examined to determine the difference between the two groups. In all instances the homogeneity of variance was checked.

4.2. Inappropriate Expectations of Children

To determine whether adolescent mothers reported inappropriate expectations of children, adolescent and adult groups were compared on the t-test.

Table 3. T-Test Result for Inappropriate Expectations of Children.

<table>
<thead>
<tr>
<th>Variable</th>
<th>Respondent</th>
<th>N</th>
<th>Mean</th>
<th>SD</th>
<th>df</th>
<th>T-value</th>
<th>T-critical</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inappropriate</td>
<td>Adolescent</td>
<td>52</td>
<td>13.42</td>
<td>3 1.258</td>
<td>102</td>
<td>4.26</td>
<td>1.98</td>
<td>0.000*</td>
</tr>
<tr>
<td>expectation</td>
<td>Adult</td>
<td>52</td>
<td>15.212</td>
<td>2.754</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

P* < 0.05
As presented in Table 3, the t-test result indicates that the inappropriate expectation of children is significantly different for the two groups (t = 4.26, df = 102, P < 0.000). Adolescent mothers scored less than adult mothers, indicating that adolescent mothers lack of misunderstanding children's developmental capabilities.

4.3. Mothers Empathy Level with Children's Needs

To determine whether adolescent mothers reported less empathy with children's needs than adult mothers, the two groups were compared on t-test.

Table 4. T-Test Result for Level of Maternal Empathy towards Children's Needs

<table>
<thead>
<tr>
<th>Variable</th>
<th>Respondents</th>
<th>N</th>
<th>Mean</th>
<th>SD</th>
<th>df</th>
<th>T-value</th>
<th>T-critical</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Empathy</td>
<td>Adolescent</td>
<td>52</td>
<td>23.365</td>
<td>3.106</td>
<td>102</td>
<td>12.393</td>
<td>1.98</td>
<td>0.000*</td>
</tr>
<tr>
<td></td>
<td>Adult</td>
<td>52</td>
<td>17.673</td>
<td>1.149</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

P * < 0.05

As indicated in Table 4, a t-test result reveals a significant difference in empathy of children's needs (t = 12.393, df = 102, P < 0.000). Adolescent mothers scored higher than adult mothers in empathy toward children's needs, indicating that adolescent mothers are more empathetic towards their children needs than adult mothers.

4.4. Beliefs in the Value of Corporal Punishment

Beliefs in the value of corporal punishment were another parenting attitude studied between the
two groups. Accordingly, there is statistically significant difference in corporal punishment between the two groups ($t = 17.844$, $df = 102$, $P < 0.000$) as shown in Table 5, below.

**Table 5. T-Test Result of Beliefs in the Value of Corporal Punishment**

<table>
<thead>
<tr>
<th>Variable</th>
<th>Respondents</th>
<th>N</th>
<th>Mean</th>
<th>SD</th>
<th>df</th>
<th>T-value</th>
<th>T-Critical</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Corporal Punishment</td>
<td>Adolescent</td>
<td>52</td>
<td>35.269</td>
<td>2.865</td>
<td>102</td>
<td>17.844</td>
<td>1.98</td>
<td>0.000*</td>
</tr>
<tr>
<td></td>
<td>Adult</td>
<td>52</td>
<td>27.365</td>
<td>1.415</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

$P * < 0.05$

Adolescent mothers scored higher than adult mothers in the value of corporal punishment. According to the interpretation of the inventory, higher score in corporal punishment indicates adolescent mothers give less value to physical punishment, while adult mothers have a more reliant physical means of discipline than adolescent mothers.

4.5. Parent - Child Role Reversal

To determine the two groups' difference in parents' need to reverse parent-child roles a $t$-test result is presented below.
Table 6. T-Test Results for Parent-Child Role Reversal

<table>
<thead>
<tr>
<th>Variable</th>
<th>Respondents</th>
<th>N</th>
<th>Mean</th>
<th>SD</th>
<th>df</th>
<th>T-value</th>
<th>T-critical</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Role Reversal</td>
<td>Adolescent</td>
<td>52</td>
<td>13.786</td>
<td>1.474</td>
<td>102</td>
<td>4.71</td>
<td>1.98</td>
<td>0.000*</td>
</tr>
<tr>
<td>Adult</td>
<td>52</td>
<td>15.731</td>
<td>2.583</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

P* < 0.05

As Presented in Table 6, t-test result revealed that there is a significant difference in parent-child role reversal, (t = 4.710, df = 102; P < 0.000). Adolescent mothers scored less than adult mothers in parent-child role reversal. That is, adolescent mothers misunderstand the role of the parent and child apparently; they believed that children exist to meet the needs of the caregiver, while a higher score of adult mothers indicate they had an attitude of appropriate role clarification that is children permitted to be children rather than pseudo caregivers.

4.6. Oppressing Children’s Power and Independence

To find out the difference in power and independence between the two groups a t-test was conducted. Table 7 presents a t-test result.
Table 7. T-Test Result for Oppressing Children’s Power and Independence

<table>
<thead>
<tr>
<th>Variable</th>
<th>Respondents</th>
<th>N</th>
<th>Mean</th>
<th>SD</th>
<th>df</th>
<th>T-value</th>
<th>T-critical</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Power</td>
<td>Adolescent</td>
<td>52</td>
<td>16.808</td>
<td>1.415</td>
<td>102</td>
<td>13.079</td>
<td>1.98</td>
<td>0.000*</td>
</tr>
<tr>
<td>Independence</td>
<td>Adult</td>
<td>52</td>
<td>13.077</td>
<td>1.135</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

P* < 0.05

As indicated in Table 7, the t-test indicated that there is significant difference (t=13.079, df = 102, P < 0.000). Adolescent mother scored higher than adult mothers, indicates adolescent mothers believed in allowing children to express their feeling and opinion.

4.7. Child Development Knowledge

The research questions handled in this section are examining the difference in child development knowledge between the two groups. Table 8 presents the mean difference between the two groups.

Table 8. T-Test Result for Child Development Knowledge

<table>
<thead>
<tr>
<th>Variable</th>
<th>Respondents</th>
<th>N</th>
<th>Mean</th>
<th>SD</th>
<th>df</th>
<th>T-value</th>
<th>T-critical</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child</td>
<td>Adolescent</td>
<td>52</td>
<td>44.577</td>
<td>4.904</td>
<td>102</td>
<td>-16.527</td>
<td>1.98</td>
<td>0.000*</td>
</tr>
<tr>
<td>development</td>
<td>Adult</td>
<td>52</td>
<td>58.385</td>
<td>3.499</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

P*<0.05
As Presented in Table 8, the t-test reveals a significant difference in child development knowledge. \((t = -16.527, \text{df} = 102, P < 0.000)\). Here, adolescent mothers have less knowledge about child developmental milestones than adult mothers.

**4.8. Adolescent and Adult Mothers Parental Behavior**

To determine whether adolescent mothers showed unique parental behavior, which parents interact with their infant, was examined through observation. Table 9 presents the result of this test. In order to examine the difference in parental behavior the behaviors were divided into three groups, namely, physical, verbal and provocation.

<table>
<thead>
<tr>
<th>Interactive Behavior</th>
<th>Adolescent</th>
<th>Adult</th>
<th>T-value</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Physical</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>N</td>
<td>20</td>
<td>20</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mean</td>
<td>11.25</td>
<td>9.1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SD</td>
<td>2.05</td>
<td>1.41</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Verbal</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>N</td>
<td>20</td>
<td>20</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mean</td>
<td>4</td>
<td>5.35</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SD</td>
<td>1.59</td>
<td>.189</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Provocation</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>N</td>
<td>20</td>
<td>20</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mean</td>
<td>2.75</td>
<td>1.55</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SD</td>
<td>1.21</td>
<td>0.51</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table 9 indicates that the mean frequency of physical interaction between adolescent and their children (11.25) were slightly greater than that of adult mothers and their infants (9.1). The
difference is statistically significant ($t = 3.866$, $df = 38$, $P < 0.000$). The mean occurrence of verbal interaction between adolescent and their child (4) is slightly less than that of adult mothers and their children (5.35). The difference is statistically significant ($t = -2.438$, $df = 38$, $P < 0.020$).

As shown in the above table, the mean occurrence of provocation (physical and verbal provocation) between adolescent mothers and their child (2.75) is greater than adult mothers and their infants (1.55). The difference is statistically significant ($t = 4.091$, $df = 38$, $P < 0.000$). Adolescent mothers used more physical and verbal provocation than adult mothers.

From the above table, one can understand that adolescent mothers tend to interact with their children with relatively more physical than adult did. The most frequent style young mothers engaged with their children, is non-verbal and more physical interaction. And adolescent mothers used more verbal and physical provocation in their interaction with the child than adult mothers did.

### 4.9. Focus Group Discussion (FGD) Results

In the focus group discussion both groups have a knowledge on the importance of prenatal care, while two of the discussants from adolescent mothers group not attend the prenatal care since their pregnancy was unwanted and they were embarrass by their condition.

In the FGD adolescent mothers discussed that sources of information about parenting are mothers, friends, relatives etc. Both adolescent and adult mothers groups revealed that responsibility for child care is totally covered by themselves that is no support from husband in child care taking activities.
The focus group discussion concerning developmental expectations were different for the adolescent (15 –20) and adult (35–40) groups. Adult mothers forwarded the realistic understanding of the developmental capabilities of children as well as a general acceptance of developmental limitation. On the other hand, adolescent age groups had lack of understanding of children’s developmental capabilities. Adolescent mothers group expect their children to behave as an adult manner, like to sit quietly for extended periods of time.

During focus group discussions, it was found that adolescent mothers group were more sensitive to the needs of the children and place those needs in high regard, while adult mothers mentioned that they were afraid of spoiling children by helping them meet their age appropriate needs. Adolescent mothers group was strongly disagree toward the attitudes children should keep their feeling for themselves and children should know what their parents need without being told.

In the FGD, it was also stated that adolescent mothers used the alternative strategies to corporal punishment. They had an attitude to reflect a dislike for spanking children and had a positive attitude towards non-violent ways of providing discipline for children. The adult group revealed that hitting is the only way children learn to follow rules and stay out of problem. They believed that fear or pain teach appropriate and healthy behaviors to children. The majority of adult mothers’ discussant utilizes physical punishment to punish and correct specific bad conduct on the part of children.
In the focus group discussion both groups revealed that children are perceived as objects for adult gratification. The majority of adolescent and adult mothers’ discussants expected children to be sensitive and responsible for their happiness. Both groups traditionally interchange role behaviors between a parent and child.

In the FGD, adolescent mothers revealed that parents should give freedom for children to explore their world, while adult mothers stated that parents should place a strong emphasis on obedience, they believed that children should do what they are told to do. The majority of adult mothers’ discussant believed that if children are permitted to use their power to explore their environment, they will become disrespectful.

During group discussions, it was found that adolescent mothers have less knowledge about child development than adult mothers. Discussants in the adolescent mothers group had less knowledge than adult mothers about the amount of time infants cry, sleep, is alert and at what age a child starts to walk alone etc.
CHAPTER FIVE

5. DISCUSSION

5.1. Differences on Parenting and Child Rearing Attitudes

The focus of analyses in this study was the comparison of the mean score for parenting and child rearing attitudes, child development knowledge and parental behavior. As mentioned in the previous chapter, the results of the analysis indicated that adolescent mothers scored higher in empathy, indicating that adolescent mothers have an ability to be empathically aware of their children’s needs. Adolescent mothers scored higher in physical punishment than adult mothers. According to the interpretation of the inventory higher score in physical punishment indicates adolescent mothers have a negative attitude towards punishment and they give less value to physical punishment, that is, for adolescent mothers corporal punishment is not the only means of discipline available for them to use, they use alternative strategies to corporal punishment. Adolescent mothers scored higher in power independence than adult mothers indicating that adolescent mothers encouraged children’s to express their opinions and feelings. Inappropriate expectation of children and parent-child role reversal measures adolescents scored significantly lower, indicating that adolescent mothers lack of understanding of children’s developmental capabilities and a belief in parent-child role reversal, respectively.

The results of the present study, therefore, are consistent with the findings of earlier investigation (Hurlbut et al., 1997) in that adolescent mothers found to show inappropriate expectations of
children capabilities and a belief in parent-child role reversal. Thus, the findings of inappropriate expectations from children and parent-child role reversal from the present study fit very harmoniously with results from previous studies conducted with adolescent mothers. Therefore, previous findings in conjunction with the results of this study suggest that adolescent mothers compared with adult mothers have an inappropriate developmental expectation of children. These contentions are supported by the findings from focused group discussions. The adolescents have belief in parent-child role reversal.

In contrast to most previous studies, the present study result showed that adolescent mothers scored significantly higher in empathy, indicating that adolescent mothers empathically are aware of their children’s needs. According to the interpretation of the result, higher score in corporal punishment for adolescent mothers indicating that adolescent mothers give less value to physical punishment. And also, adolescent mothers scored higher in power independence indicating they empower children’s independence. Therefore, the present findings offer little support for the notion that adolescent mothers have an attitude that reflects a dislike for spanking children and a positive attitude towards non-violent ways of providing discipline for children. They believe hitting children is not a healthy type of parent-child interaction. The findings support adolescent mothers are sensitive to the needs of their children. They are not afraid of spoiling their children by helping them meet their age appropriate needs. The finding also supports the idea that adolescent mothers believe on children being allowed to express their opinions and feelings.

However, many previous studies have reported that adolescent mothers prematurely foster independence (Brooks, 1994). Other researchers reported that adolescent mothers are perceived as less sensitive, less restricted, more physically intrusive and more punitive rearing practices.
compared with adult mothers (Coll, Vohr, Hoffman & Oh, 1986).

The findings were therefore, consistent with preceding literature in inappropriate expectation of children and parent-child role reversal, but not in empathy, physical punishment and power independence.

Then what condition have accounted for the unpredicted outcomes?

One possible clarification for the present finding that adolescent mothers are empathic and have a positive attitude towards non violent ways of providing discipline for children and encourage feeling of empowerment than adult mothers may be positioned in the difference in-group comparisons made in the present study and other research studies.

A second and perhaps more possible explanation may be also the cultural, economical and educational differences between Ethiopia and developed countries. Despite the lack of data in the present study and the insufficiency of literature about parenting and child rearing attitudes in Ethiopia, it is of value examining the complexity and difficulty of adolescent parenting and child rearing attitudes in the Ethiopian situation.

5.2. Child Development Knowledge

In this study, the researcher was interested in studying the difference in child development knowledge between adolescent and adult mothers. The finding is consistent with the on hand literature indicating that adolescent mothers have less knowledge about child development than adult mothers (Coley & Chase Linsaqdale, 1998, Jorgensen 1993 (Cited in Fabes & Martin,
This result was also supported with group discussion. However, some researchers (Parks & Smeriglio, 1983) stated that knowledge level of adolescent mothers was high and no difference from adult mothers. This result may be because of assessing parenting knowledge as the awareness that parenting behavior influences infant’s current and future well-being. Thus, adolescent mothers appear to be sensitive to this component of parenting knowledge and are not less aware than are adult mothers.

5.3. Parental Behavior

In the present study, the difference in parental behavior (parenting style of interaction with heir children of one to five years of age between adolescent and adult mothers was studied.

In order to examine the difference in parental behavior between adolescent and adult mothers, parenting styles of their interaction with their children of one to five years of age were divided into three: physical, verbal and provocations.

The analyses revealed a significant difference on parenting styles of interactions between adolescent and adult mothers and their children one to five years of age.

The present study showed important differences on physical interaction between adolescent and adult mothers. Adolescent mothers scored higher in physical interaction than adult. This finding is reliable with the previous studies (Elster, McAnamey & Lamb, 1983) in that most frequent style of adolescent was non-verbal interactions. Mothers who demonstrated this type of interaction provided for the children’ basic physical needs, but did not vocalize much to their
babies.

The other finding of this study was adolescent mothers scored lower in verbal interaction than adult. This finding confirm with the previous studies (Coley & Chase-Lansqdale 1998; Jorgensen, 1993 (cited in Fabes & Martin, 2000) that adolescent mothers tend to vocalize less with their infants.

This study also found that there is a considerable difference between adolescent and adult mothers in provocation (physical and verbal). Adolescent mothers scored higher in provocation, indicating adolescent mothers occupied inappropriate behaviors such as pinching, and poking. The finding is dependable with previous studies of Lawrence, Mc Anarney, Aten, 1981(cited in Elster et al., 1983). From the result one can say that, adolescent mothers may use physical punishment in the form of pinching and poking to control their children from inappropriate behavior since they had a negative attitude towards physical punishment.

In general, the study has some limitations; sample drawn from Addis Ababa only (Shiromeda area), could have been wider in scope and large in size if conditions had been more favorable. Some aspects left untouched such as ethnic, cultural influence, with in group variation, the socio economic factors associated with early child bearing, interrelations between the qualities of adolescent mothers parenting could have helped if they had been included.

Despite the limitations, however, the study has made efforts to develop as much information as possible in order to provide insights in to the psychological qualities of adolescent mothers parenting. Therefore, the study has gone one step in the effort to understand adolescent mothers parenting and child rearing attitudes, child development knowledge and parenting styles of
interaction with their children.
CHAPTER SIX

6. SUMMARY, CONCLUSION, AND RECOMMENDATIONS

6.1. SUMMARY

The major objective of the present study was to assess the qualities of adolescent mothers parenting. Accordingly, a sample was drawn from Shiromeda area only. Adolescent (15–20) and adult (35-40) mothers were selected purposively from two kebeles. One hundred four mothers, 52 from each group, were respondents that participated in the study.

In order to examine the psychological qualities of adolescent and adult mothers parenting, measures were adapted for parenting and child rearing attitudes and child development knowledge and parental behavior measures were developed.

Thus, the comparative result of parenting and childrearing attitudes, child development knowledge and parental behavior were studied by focusing on adolescent and adult mothers parenting scores.

To compare the psychological qualities of adolescent and adult mothers a t-test was performed for the parenting and child-rearing attitude, child development knowledge and parental behavior.

The result showed a significant difference in parenting and child rearing attitudes, child development knowledge and parental behavior.

T-test analyses revealed that there was a significant difference indicated that adolescent mothers have inappropriate expectation towards children development and they believe in reverse of
parent-child roles. With respect to empathy, corporal punishment and power independence, statistically significant difference was observed between adolescent and adult mothers, indicating that adolescent mothers demonstrate empathy toward the needs of children, use the other strategies to physical punishment and have a strong value for children feeling.

As element of the analyses adolescent and adult mothers development knowledge was studied. The result was statistically significant indicating that adolescent mothers have less knowledge about child development than adult mothers.

Parenting style and interaction with their children differed between adolescent and adult mothers who were studied. The result showed a significant difference in physical interaction with their children. Adolescent mothers showed more physical interaction with their children than adult did. In verbal interaction; a statistical significant difference was observed between adolescent and adult groups, indicating that adolescent mothers were found to be less verbal than adult mothers. In physical and verbal provocations significant difference was also found between the two groups. Adolescent mothers scored high in provocation, indicating adolescent displayed inappropriate behaviors such as punishing and pinching their infants than adult did.

Therefore, from the outcomes of the present study, and analyses, one may get the following conclusions.

6.2. CONCLUSION

1. There is a significant difference in five constructs of parenting and child rearing attitudes.

That is, inappropriate expectations of children, empathy towards children’s needs, belief in the value of physical punishment, parent-child role reversal and power independence.
Adolescent mothers scored significantly lower than adult did in inappropriate expectation of children development and in parent-child role reversal. That is, adolescent mothers had a lack of understanding of children's developmental capabilities and also adolescent mothers' belief in the parent-child role reversal.

The significant differences between adolescent and adult in other parenting attitude constructs (empathy, physical punishment and power independence), adolescent mothers group scored significantly higher than adult mothers, may direct to the conclusion that adolescent mothers group had the ability to show empathy toward the needs of their children. According to the interpretation of the result a higher score in physical punishment and power independence indicate that adolescent had an attitude of dislike towards spanking children and a positive attitude toward non-violent ways of providing discipline for children, and empower children to express their feelings and opinions.

2. The significant difference in child development knowledge scores may lead to the conclusion that adolescent mothers group have less knowledge about child development than adult groups.

3. Adolescent mothers scored high in physical interaction with their children and in physical and verbal provocation. It may be, therefore, concluded that adolescent mothers are more physically interacting with their children. Even if adolescent mothers had a negative attitude towards physical punishment direct observation of these adolescent mothers showed physical punishment in the form of pinching is observed. Adolescent mothers may be engaged with these physical and verbal provocations to control their children's inappropriate behaviors. Adolescent mothers group score less in verbal interaction. That is, they are less verbal than adult group.
In use as one, the present research findings are not new. The differences between adolescent and adult mothers found in this study correspond to that which can be observed in the research literature, except in empathy, corporal punishment and power independence. However, a small score differences in the empathy towards children needs, value of physical punishment and power independence found in this study are relatively a new perspective. Of course, it may not be amazing it is viewed from the modernization view of adolescent mothers in one hand.

Yet, the present study was not without some potential weakness and limitations. First, some of the data were self report, and many important parenting related questions were not asked that could explain the qualities of adolescent mothers’ parenting.

Second, to estimate the difference of the two groups sufficiently, the sample was small to get reliable tests with a large sample of respondent; it might have been able to conduct important results.

Despite these limitations, the study provides at least a hesitant answer to the research questions raised in the introduction. Thus, some specific sensible implications and recommendations can be made on the basis of the results obtained.

6.3. RECOMMENDATIONS

First, the striking gap in inappropriate expectation of children and parent-child role reversal between adolescent and adult groups indicates that adolescent mothers showed inappropriate
expectation of children developmental expectation and a belief in parent-child role reversal. These differences also may indicate the gap between what has been done and what must be done to solve the problems of these adolescent mothers. This problem, therefore, calls for attention for those mistreated partly by the society. For this reason to formulate more effective parenting program teamwork among social workers, psychologists and religious personnel can be a key factor to support those adolescent to progress fruitfully into adult motherhood.

Furthermore, what should be made is to educate our society about the importance of parenting and to give details on the effect of adolescent parenthood on both mothers and their children. For this reason, we need to begin at a much earlier age by training people about parenting in the form of parenting education. This can help in early identification of teen parents who are at risk for maladaptive parenting.

Second, the finding of a significant difference between adolescent and adult mothers in child developmental knowledge, and child rearing leads to the suggestion that, with in the borders of the present study, it is important to teach adolescent mothers about child development before they are going to give birth.

Thirdly, the differences in verbal and physical interaction and in provocation between adolescent and adult mothers, indicating adolescent group were less verbal, they mostly use non-verbal interaction and showed inappropriate behaviors like pinching than adult mothers, these lead to the proposition that parenting education is very important.
In general, the findings reported here by no means cover all the need for knowledge about adolescent parenting. This study raises more questions than it tries to answer. At best it provides hints for future research work. It is hoped that the present research show the response to the question “what are the parenting attitudes, child development knowledge and parental behavior of adolescent mothers”. These can be a sequence of other questions that need further study.
References


53


APPENDIX I  STRUCTURED INTERVIEW

Addis Ababa University
Faculty of Education
School of Graduate Studies
Department of Psychology

Dear Respondents:

This study is conducted in partial fulfillment of the requirement for the degree of Master of Arts in Developmental Psychology. The purpose of the structured interview is to get information about the parenting and child rearing attitudes, child development knowledge and parental behaviors of adolescent and adult mothers. I would like you to note that as this response is without name and confidential, your truthful and honest answers will not affect your personality. It will only highly contribute to taking your precious time in giving response for the interview.

Thank you for your cooperation.

Date of the interview______
Code Number____________
PART I. Personal Data

1. Age __________

2. Religion________
   1. Orthodox
   2. Catholic
   3. Protestant
   4. Muslim
   5. Others, Specify________

3. Marital status_______
   1. Married
   2. Unmarried
   3. Divorced
   4. Widow
   5. Others, specify________

4. Educational Level__________
   1. Can read and write
   2. Illiterate
   3. 1-8
   4. 9-12
   5. Higher education
6. Others, specify_________

5. Occupational Status_________
1. House wife
2. Petty trade
3. Job less
4. Others, specify_________

PART II. CHILD DEVELOPMENT KNOWLEDGE

Below are questions that are designed to measure your knowledge about child development and you are requested to answer the questions to which you agree or disagree.

1. Taking alcohol, cigarette, etc. during pregnancy have toxic effect on your child?
   
   1) Disagree  
   2) Uncertain  
   3) Agree

2. Talking to the baby is important in order to stimulate the infant’s verbal development?

   1) Disagree  
   2) Uncertain  
   3) Agree

3. At the age of five an infant can engage in conversation?

   1) Disagree  
   2) Uncertain  
   3) Agree

4. By eighteen months of age, most children can say eight to ten words.

   1) Disagree  
   2) Uncertain  
   3) Agree
5. By age two most are putting words together into sentences.
   1) Disagree  2) Uncertain  3) Agree

6. Nine months infant can copy sounds.
   1) Disagree  2) Uncertain  3) Agree

7. At the age of two an infant can walk alone?
   1) Disagree  2) Uncertain  3) Agree

8. Seven months infant can sit for a few minutes without support.
   1) Disagree  2) Uncertain  3) Agree

9. Nine months infant can stand for a short time holding on to support.
   1) Disagree  2) Uncertain  3) Agree

10. A one-month infant likes to be held and rocked.
    1) Disagree  2) Uncertain  3) Agree

11. A four years child can stand on one foot.
    1) Disagree  2) Uncertain  3) Agree

12. A two year old is able to reason logically much as an adult would.
    1) Disagree  2) Uncertain  3) Agree

13. At the age of three an infant can identify his/her sex.
    1) Disagree  2) Uncertain  3) Agree

14. Within the first two years of life children begin to gain a sense of their own self worth.
    1) Disagree  2) Uncertain  3) Agree
15. Around birth an infant can recognize his mother's voice.
   1) Disagree  2) Uncertain  3) Agree

16. Right from birth an infant or a young child begins to really take in and react to the world.
   1) Disagree  2) Uncertain  3) Agree

17. Babies as young as one month old can sense whether or not his or her parent is depressed or angry.
   1) Disagree  2) Uncertain  3) Agree

18. Children’s capacity for learning can be greatly increased or decreased by how the parents interact with them.
   1) Disagree  2) Uncertain  3) Agree

19. Fifteen months old baby be expected to share her/his toys with other children.

20. By the age of six or seven, children understand the concept of time.
   1) Disagree  2) Uncertain  3) Agree

21. Spanking children as a regular form of punishment doesn’t help children develop a better sense of self-control.
   1) Disagree  2) Uncertain  3) Agree

22. Babies should not be held, because it will make them want to be held all the time?
   1) Disagree  2) Uncertain
Observation Checklist for a Sample of the Child Every day Interactive Behaviors with the Mother

Mother’s age
Infant’s age
Infant’s sex
Birth order
Date of Observation
Total time
Time Length of Observation for one session 10 Minutes.

<table>
<thead>
<tr>
<th>Observed Interactive Behavior</th>
<th>Frequency</th>
<th>Duration</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Morning</td>
<td>Afternoon</td>
<td>Evening</td>
</tr>
</tbody>
</table>

**Physical**

1. Kissing
   - Mother kisses the infant
   - Infant kisses the mother

2. Holding
   - Mother holds the infant

3. Tickling and Bouncing
   - Mother tickles or bounces the infant
   - Infant tickles the mother

4. Showing affectionate face
   - Mother gazes, nodes, smile at infant

5. Feeding
   - Mother feeds the infant

**Verbal**

6. Laughing
   - Mother laughs at infant
   - Infant laughs at mother

7. Calling name of Objects or people
   - Mother calls name of objects or people
   - Infant calls name of objects or people

**Provocation**

8. Giving or taking objects from the infant
   - Mother gives to or take objects from infant
   - Infant gives to or takes objects from mother

9. Displeasure or Anger
   - Mother scolds or abrupt at infant
   - Infant may cry

10. Punishment
    - Mother punishes the infant
APPENDIX II. FOCUS GROUP DISCUSSION (FGD) INTERVIEW GUIDE

A Study of Parenting Qualities of Adolescent and Adult Mothers

Adolescent and Adult Mothers of Children One to Five Years of Age

Name of Moderator

Name of Note taker

Date ________ Total time taken ________ Minutes

Code number of Tape Recorded

Hello! Thank you for taking your time to talk to us. We are ________ (the moderator) and ________ (note taker). We are working on a research for Addis Ababa University, department of psychology to be conducted in partial fulfillment of a master’s degree in developmental psychology.

We are here to learn from you about parenting and child rearing attitudes, child development knowledge, and parental behaviors that will contribute to design a prevention programs. We would like to explain to you some of the ground rules for the discussion.

1. The discussion will last about 1:30 - 2:00 hours.

2. Everything you say remains confidential.

3. Your name will not be used when reporting on the findings.
FGD Discussants

Characteristics of the Group

<table>
<thead>
<tr>
<th>Serial Number</th>
<th>Age</th>
<th>Sex</th>
<th>Religion</th>
<th>Educational Background</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

A. General Discussion

1. Discussion about all the problems that mothers face in raising children.

Probes
1. Do you know prenatal care is important for child and the mother?
   2. Where do you get information about parenting (family, friends, others)?
   3. Who take the responsibility for child care?

B. Parenting Attitudes

   B.1. Inappropriate Expectation

2. Do you know the particular stages of your child development?

   Probe - How do you expect your child to behave?

   B.2. Maternal Empathy Level towards Children’s Needs

3. How do you be empathic for your children’s needs and respond to those needs?
Probe - Do you think children should keep their feelings for themselves?

**B.3. About Physical Punishment**

4. Do you think physical punishment is an important means of child control and discipline?

Probe - Do you believe spanking teaches children right from wrong?

**B.4. Parent-Child Role Reversal**

5. Do you believe children should comfort and nurture the parent?

Probe - Do you think children should be responsible for the well being of their parents?

**B.5. Power and Independence**

6. Do you believe children’s power and independence needs to be oppressed?

Probe - Do you think children need to be allowed freedom to explore their world in safety?

**C. Parenting Knowledge**

7. Do you know developmental milestones of your child?

Probes 1. At what age a child start to walk alone?

2. At what age a child start to recognize his mother, relatives, etc?

3. Do you know the amount of time infants cry, sleep, is alert etc.?

**Note:** Adult- Adolescent Parenting Inventory (AAPI-2) published by Family Development Resources, Inc. is federally protected against unauthorized reproduction, that is why the researcher of this study not attached the AAPI-2 in the appendix part.
DECLARATION

I, the undersigned, declare that this thesis is my original work and all sources of materials used for the thesis are duly acknowledged.

Name

Signature

Date 17/06/05

Confirmed by

Signature

Date 17/06/05