

A Critical Analysis on the Adolescent's Relationship with their Parents

Esrat Jahan¹ Rajib Hasnat Shakil²

Abstract: The main objective of the study was to identify the relationship status of the adolescent with their parents. As the selected topic of the research is "Adolescents' relationship with their parents" the researchers would discuss the types of relationship parents are maintaining with their children. Adolescence is a transition period between childhood and adulthood. It is a stressful developmental period filled with major changes in physical maturity and sexuality, cognitive processes, emotional feelings, and relationships with others. Now a days majority parents are very much busy with their profession. Day by day the relations with children are becoming formal rather than actual. Because of this majority of the children are failing to get family charity from their childhood. Lots of parents are illiterate so that they are failing to give proper education to their children. They even are failing to diagnosis the activities of their children. So lots of children losing their hope primarily. Its has a great impact over the society. Poverty is another reason for which the parents are failing to fulfill the demands of their children. In this article I am trying to find out the relation among children with their parents under different aspects of the society.

Key words: Adolescents, children demand, dependence, maturity, parents & relationship.

I. Introduction

Objectives: Adolescence the period between 10 – 19 years is an important formative. Adolescence is the period time which largely shapes the future course of a human life. Today millions of adolescence is faced with the prospects of early marriage, which may affects their hold developmental process as well as their next generation. The main objective of the study are-

- To know very well about adolescence age.
 - To distinguish between boys and girls relationship with parents.
 - To know parents attitude toward adolescence.
 - To find out their socio-economic status.
 - To know the pattern of maintaining relationship of child with parents.
- By this observation researcher try to find above elements.

Adolescence: Addressing the healthcare needs of this age group requires not only addressing identified health concerns, but also considering the complicated interactions of developmental changes on healthcare needs, the effectiveness of treatment, health education, and health promotion. As adolescents begin to take responsibility for their own health, education and promotion of preventive healthcare is very important. Teaching preventive healthcare (about topics such as pregnancy prevention, sexually transmitted diseases, the effects of smoking, the need for immunizations, and substance use) and providing health education regarding specific healthcare needs to adolescents requires special consideration and effort to ensure understanding and encourage compliance.³ From the point of view of biological development, a span of time starting with puberty and concluding with maturity. Chronologically, this is usually from about 12 or 13 to 18 or 19 years of age. (Consequently, there are the informal terms teenage years and teenager.) Some authorities suggest that adolescence ends for females at about the age of 21 and for males at about the age of 22. From the psychological and social point of view, adolescence as it is popularly known is to some extent an artifact of an industrialized civilization. Primitive tribes frequently have no concept of adolescence. With the onset of puberty, there are often rites of passage, and the child becomes an adult in terms of both status and responsibility. The increased affluence associated with industrialization makes possible the prolonged period of dependence and learning that is associated with

¹ Senior Lecturer, Department of Law, Northern University Bangladesh

² Assistant Professor, Department of Law, Northern University Bangladesh

³ <https://www.caring4kidshealth.com/go/healthy-living/parenting/adolescence>

adolescence. **At water 1992 states that** adolescence is the period of rapid growth between childhood and adulthood, including psychological and social development. **Hopkins 1993** Defines adolescence as the period between childhood and adulthood with much personal growth- physical, psychological and social—that gives the period its special place within the field of developmental psychology. **Santrock 1993**, Defines adolescence as, the developmental period of transition between childhood and adulthood that involves biological, cognitive and social changes.

Stages of adolescent: Adolescence, these years from puberty to adulthood, may be roughly divided into three stages: early adolescence, generally ages eleven to fourteen; middle adolescence, ages fifteen to seventeen; and late adolescence, ages eighteen to twenty-one. In addition to physiological growth, seven key intellectual, psychological and social developmental tasks are squeezed into these years. The fundamental purpose of these tasks is to form one's own identity and to prepare for adulthood.

Early Adolescence (Approximately 12-14 years of age) Movement Toward Independence, Struggle with sense of identity; Moodiness; Improved abilities to use speech to express oneself; More likely to express feelings by action than by words; Close friendships gain importance; Less attention shown to parents, with occasional rudeness; Realization that parents are not perfect; identification of their faults; Search for new people to love in addition to parents; Tendency to return to childish behavior; Peer group influences interests and clothing styles. Future interests and Cognitive Development, Increasing career interests; Mostly interested in present and near future; Greater ability to work, Sexuality, Girls ahead of boys; Shyness, blushing, and modesty; More showing off; Greater interest in privacy; Experimentation with body (masturbation); Worries about being normal Ethics and Self-Direction, Rule and limit testing; Occasional experimentation with cigarettes, marijuana, and alcohol; Capacity for abstract thought Physical Changes, Gains in height and weight; Growth of pubic and underarm hair; Body sweats more; Hair and skin become more oily; Breast development and menstruation in girls; Growth of testicles and penis, Nocturnal emissions (wet dreams), Deepening of voice, Growth of hair on face in boys.

Middle Adolescence (approximately 15-16 years) Movement toward Independence Self-involvement, alternating between unrealistically high expectations and poor self-concept; Complaints that parents interfere with independence; Extremely concerned with appearance and with one's own body; Feelings of strangeness about one's self and body; Lowered opinion of parents, withdrawal from them; Effort to make new friends; Strong emphasis on the new peer group; Periods of sadness as the psychological loss of the parents takes place; Examination of inner experiences, which may include writing a diary, Future Interests and Cognitive Development, Intellectual interests gain importance; Some sexual and aggressive energies directed into creative and career interests, Sexuality, Concerns about sexual attractiveness; Frequently changing relationships; Movement towards heterosexuality with fears of homosexuality; Tenderness and fears shown toward opposite sex; Feelings of love and passion, Ethics and Self-Direction, Development of ideals and selection of role models; More consistent evidence of conscience; Greater capacity for setting goals; Interest in moral reasoning Physical Changes, Continued height and weight gains; Growth of pubic and underarm hair; Body sweats more; Hair and skin become more oily; Breast development and menstruation in girls; Growth of testicles and penis, Nocturnal emissions (wet dreams), Deepening of voice, Growth of hair on face in boys

Late Adolescence (approximately 17-19 years) Movement toward Independence, Firmer identity; Ability to delay gratification; Ability to think ideas through; Ability to express ideas in words; More developed sense of humor; Stable interests; Greater emotional stability; Ability to make independent decisions; Ability to compromise; Pride in one's work; Self-reliance; Greater concern for others, Future Interests and Cognitive Development, More defined work habits; Higher level of concern for the future; Thoughts about one's role in life, Sexuality, Concerned with serious relationships; Clear sexual identity; Capacities for tender and sensual love, Ethics and Self-Direction, Capable of useful insight; Stress on personal dignity and self-esteem; Ability to set goals and follow through; Acceptance of social institutions and cultural traditions; Self-regulation of self esteem, Physical Changes Most girls fully developed; Boys continue to gain height, weight, muscle mass, body hair, Teenagers do vary slightly from the above descriptions, but the feelings and behaviors are, in general, considered normal for each stage of adolescence.

Characteristics of the Adolescent: The years between 10 and 14 years of age are known as adolescence. It is a time characterized by rapid change and development, as it is the transition between childhood and young adulthood. Changes can be inconsistent and also uncomfortable. Adolescents experience physical, social, as well as personal and emotional changes. Cognitive processes will also begin to differ. The rate at which adolescents experience changes will vary depending on gender, genetics, environmental factors and health.

Physical Changes: Physical change is a primary characteristic of adolescents. Preteens will experience growth spurts, changes in skeletal structure, muscle and brain development, as well as sexual and hormonal development. Gender differences play a role in when these changes occur. For girls, physical changes begin to happen at about age 12, while boys typically begin to see changes at about age 14. Eating disorders, drug use and sexual activity can pose serious health risks if teens engage in these behaviors during these rapid physical changes.

Socialization: Adolescent girls stick to small groups of friends: Socialization is another characteristic of adolescence, as they begin to socialize more with their peers and separate themselves from their family. During childhood, kids have a loyalty to their adult role models, such as parents or teachers. However, during adolescence, this loyalty shifts, making preteens more loyal to their friends and peers. For adolescents, self-esteem is largely dependent on their social lives. Girls tend to stick to small groups of close friends, while boys build larger social networks. Adolescents are highly aware of others and how they are perceived during this stage.

Cognitive Development: Changes in cognitive processes are characteristic during adolescence. Preteens experience higher thinking, reasoning and abstract thought. Preteens develop more advanced language skills and verbalization, allowing for more advanced communication. Abstract thought allows adolescents to develop a sense of purpose, fairness and social consciousness. Adolescents also decide how moral and ethical choices will guide their behaviors during this time. Cognitive processes are affected by overall socialization, meaning that adolescents will develop differently during this stage based on the individual factors.

Personal and Emotional Characteristics

Adolescents can feel no one understands them: Adolescence is a time when emotions begin to run high. Parents and teachers may begin to notice argumentative and aggressive behaviors due to sudden and intense emotions. Adolescents are also characteristically self-absorbed. They are preoccupied with themselves because they are beginning to develop a sense of self, but they are also scrutinizing their own thought processes and personalities. Possibilities begin to look endless during adolescents, leading some teens to become overly idealistic. They also believe that their thoughts and feelings are unique, doubting that others could possibly understand what they are experiencing.⁴

Labile Emotions: Adolescents can shift moods rapidly, vacillating between happiness and distress and self-confidence and worry. Some of these mood changes stem from biological sources. Increased hormones and changes to the brain structure arise from normal physical growth. Also, complex social interactions such as conflicts with friends, school pressures and experimentation with romantic relationships can exacerbate the labile emotional state of adolescents.

Personal Identity: Adolescence is a time when teenagers begin to explore and assert their personal identities. During this developmental period, teenagers engage in a process of searching for where they fit in with peers and society at large. It is common for adolescents to have an unstable sense of self and try out new personal labels and associate with various peer groups. Additionally, adolescents might struggle to define their sexual and gender identity during the teenage years. While these unstable identity issues are a common part of early adolescence, they tend to stabilize between the ages of 19 and 21, according to the American Academy of Child and Adolescent's "Facts for Families," as cited by the Early Head Start National Resource Center.

Peer Relationships: During adolescence, relationships with peers begin to take precedence over relationships with the family. Although family interactions are still important and essential for a teen's development, adolescents often place a stronger emphasis on their friends' perceptions and values. Likewise, during the adolescent years, teens might be strongly influenced by their peers' beliefs and behaviors. Paired with adolescents' limited life experience and under-developed decision-making skills, teenagers are often vulnerable to negative peer pressure.

Independence and Testing Boundaries: Adolescents often test parents' and teachers' rules and boundaries. Although this rebellious behavior might seem oppositional to parents, in most cases, this behavior is driven by the adolescent's need to develop autonomy, experience new activities and earn more independence, explains the

⁴ http://www.ehow.com/info_8154577_5-characteristics-adolescence.html

American Psychological Association. Even though teenagers can benefit from testing boundaries during adolescence, they still require rules and boundaries if they are to avoid negative influences and achieve their potential.

Self-centered Attitudes: It is often difficult for adolescents to look at circumstances from other people's perspectives. This is due, in part, to their still-developing brain structures. Thus, adolescents might come off as self-centered and focused on their own needs without considering how those needs affect others. This apparent lack of empathy is normal and typically resolves itself once a teen reaches the end of adolescence. However, a complete lack of empathy in adolescents could mean a more significant underlying mental health issue exists. If that's the case, consult a mental health worker.⁵

Theories of adolescent development: Adolescence is a developmental transition between childhood and adulthood. It is the period from puberty until full adult status has been attained. In our society, adolescence is a luxury. It is reported that the real reason there is the developmental period of adolescence was to delay young people from going into the workforce, due to the scarcity of jobs. There are also varying views on the actual time line of adolescence-especially about when it ends. Typically, we view adolescence beginning at puberty and ending at 18 or 21 years. Others suggest that there is a period of late adolescence that extends well into what is now known as the period of young adulthood.

Sigmund Freud and the Psychoanalytic Theory of Adolescent Development Psychological: Main Focus - Adolescence as a period of sexual excitement and anxiety. Freud paid relatively little attention to adolescent development only to discuss it in terms of psychosexual development. He shared a common idea with that of Hall's evolutionary theory : that the period of adolescence could be seen as phylogenetic. Freud did maintain that the individual goes through the earlier experiences of mankind in his psychosexual development. According to Freud and psychoanalytic theory, the stages of psychosexual development are genetically determined and are relatively independent of environmental factors⁶. Freud believed that adolescence was a universal phenomenon and included behavioral, social and emotional changes; not to mention the relationships between the physiological and psychological changes, and the influences on the self-image. He also stated that the physiological changes are related to emotional changes, especially an increase in negative emotions, such as moodiness, anxiety, loathing, tension and other forms of adolescent behavior.

Jean Piaget's Cognitive Theory of Adolescent Development: Main Focus - Formal operational thought; moving beyond concrete, actual experiences and beginning to think in logical and abstract terms. Jean Piaget began to look at the period of adolescent development later in his career with the publication of *The Growth of Logical Thinking from Childhood to Adolescence*⁷. Probably some of Piaget's notions about cognition, came from his work and experiences as an assistant to Alfred Binet in Paris, while Binet was developing his intelligence test. Piaget became fascinated with the thought processes children revealed in attempting to solve test problems.

Piaget outlines the developmental stages in cognitive development. He discusses the concept of egocentrism in development. The first and most pronounced period of egocentrism occurs toward the end of the sensor motor stage. The second burst of egocentrism appears toward the end of the preoperational stage and is reflected in a "lack of differentiation both between ego's and alter's point of view, between the subjective and the objective.

According to Piaget, the final form of egocentrism occurs at the transition from the concrete to the formal stage as a result of enlarging the structure of formal operations. This high level egocentrism take the form of a naive but exuberant idealism with unrealistic proposals for educational, political, and social reforms, attempts at reshaping reality, and disregard for actual obstacles. "The adolescent not only tries to adapt his ego to his social environment but, just as emphatically, tries to adjust the environment to his ego"⁸.

The adolescent thinker can leave the real objective world behind and enter the world of ideas. They are able to control events in their mind through logical deductions of possibilities and consequences. This type of thinking proceeds from what is possible to what is empirically real⁹. This reversal of the direction of thought between reality and possibility constitutes a turning point in the development of the structure of intelligence, since it leads to an equilibrium that is both stable and fixed¹⁰.

⁵ <http://everydaylife.globalpost.com/5-characteristics-adolescent-social-emotional-development-4827.html>

⁶ Muuss, 1975, p.38

⁷ with B. Inhelder, 1958

⁸ Inhelder and Piaget, 1958, p.343, as cited in Muuss, 1975,p. 186

⁹ Inhelder and Piaget, 1958, p.251

¹⁰ Muuss, 1975, p. 192

Formal operations allow the adolescent to combine propositions and to isolate variables in order to confirm or disprove his hypothesis. He no longer needs to think in terms of objects or concrete events, but can carry out operations of symbols in his mind¹¹.

What Parents Can Do: When young people feel connected to home, family, and school, they are less likely to become involved in activities that put their health at risk. Parental warmth and strong, positive communication helps young people to establish individual values and make healthy life decisions. Nurture a positive relationship with your child. When parent-child interactions are characterized by warmth, kindness, consistency, respect, and love, the relationship will flourish, as will self-esteem, mental health, and social skills. Encourage independent thought and expression in your child. Teens who are competent, responsible, and have high self-esteem have parents who encourage them to express their opinions and who include them in family decision making and rule setting. Show genuine interest in your child's activities. This allows parents to monitor their child's behavior in a positive way. Parents who, together with their children, set firm boundaries and high expectations may find that their children's abilities to live up to those expectations grow.

Development of Adolescence: Adolescence is the phase of transition from being a child to an adult. Just before adulthood, adolescents or teenagers can become perplexing creatures for their parents. It seems that there is no right way to understand them, respond to them or even approach them. Everything that a parent does seems to go wrong. Teenage or adolescence generally extends from 12 to 19 years of age and can be broadly categorized into three stages - early adolescence (12 to 14 years), middle adolescence (14 to 17 years) and late adolescence (17 to 19 years). In this section, we will discuss the various stages of development in adolescence and some ways to understand the complex nature of teens.

Physical Development: Adolescent years are not just marked by growth in height, but involve a whole lot of other physical changes such as development of bones, muscles, and organs in the teenager. A prominent change is the onset of puberty, in both males and females. It marks sexual maturation of the child. While for girls, her first menstruation is the sign of puberty, for guys it is the appearance of the first few whiskers. Testosterone in males and estradiol in females play a significant role in pubertal development. The average age for sexual maturation is 12.5 years for boys and 10.5 years for girls.

Intellectual Development: Most boys and girls enter adolescence still perceiving the world around them in concrete terms: Things are either right or wrong, awesome or awful. They rarely set their sights beyond the present, which explains younger teens' inability to consider the long-term consequences of their actions. By late adolescence, many youngsters have come to appreciate subtleties of situations and ideas, and to project into the future. Their capacity to solve complex problems and to sense what others are thinking has sharpened considerably. But because they are still relatively inexperienced in life, even older teens apply these newfound skills erratically and therefore may act without thinking.

Emotional Development: If teenagers can be said to have a reason for being (besides sleeping in on weekends and cleaning out the refrigerator), it would have to be asserting their independence. This demands that they distance themselves from Mom and Dad. The march toward autonomy can take myriad forms: less overt affection, more time spent with friends, contentious behavior, pushing the limits—the list goes on and on. Yet adolescents frequently feel conflicted about leaving the safety and security of home. They may yo-yo back and forth between craving your attention, only to spin away again.

Cognitive Development: The cognitive development takes a fast pace during the adolescence. Teenagers accumulate general knowledge and start applying the learned concepts to new tasks. Interest in learning life skills, such as cooking, fixing things, driving and so on, from adults at home and else where is also seen during these years. In terms of school, there is a great transition for the budding adult. From being in the top-notch position in the junior school, kids become the youngest, smallest and least powerful in middle or high school. A sense of ego and personal uniqueness also creeps in the youngster, who starts thinking that no one can really understand them.

Social Development: In terms of social development, there is a constant friction of adolescent with their parents, siblings and relatives. While parents fail to give personal space to their young adult, the teenager, on the other hand, find that his/her parent are too interfering and do not understand him/her at all. During adolescence,

¹¹ Muuss, 1975, p.193

teens spend much of their time with their friends. Peer pressure is also one of the important elements during this age. Groups and crowds become more heterogeneous and heterosexual and dating becomes very important.

Problems and Disorders Adolescence: Drug and Alcohol Abuse - Lack of love and attention from parents and bad company are the prime reasons, for teenagers falling into the grips of drug and alcohol abuse. Juvenile Behavior - Immature and socially unacceptable behavior are visible during this age. Right from, acting violently to status offenses such as running away from home, to criminal acts such as burglary, is often a part of adolescent and need to be treated. Adolescent Pregnancy - The need to be loved and to be the center of attraction is high during this phase of life. In addition to it, sexual maturation makes the young teen take a wrong step in life. Depression and Suicide - Adolescents are most susceptible to suicide and depression. The basic factors that trigger the mental state of the youngster include high stress, loss of a boyfriend or girlfriend, poor grades, an unwanted pregnancy, or earlier experiences such as family instability and unhappiness. Eating Disorders - It is mostly of two types - anorexia nervosa and bulimia. While in the first case, the teenager pursues thinness through starvation, the second involves a binge-and-purge sequence.

Coping up with Peer Pressure: Peer pressure is not always bad. Not all teens have similar cultural values and moral systems. Mostly, being with friends only reinforce family values in teens as they learn to form relationships, share and get involved with people their own age and learn to live as an individual and not as a child who depends on his parents for everything.

Dating Teens: When kids ask for the permission for dating for the first time and many times after that, it is an emotional challenge for parents. They are worried sick for the safety of their child going out alone with a friend, concerned about the changing times and what kids might do in their absence.

Early Adolescents: The most difficult phase of life is early adolescence. It is a phase when the kid is not yet mature but he is no longer a kid. Peers insist that they have grown enough to be self independent while parents still not provide ample freedom. This is the time when even studies are getting more difficult and physical changes are a constant source of irritation.

Late Adolescents: Late adolescents finally come quite close to adulthood to have a firm identity and more stable interests. Soon-to-be-adults and already adult kids attain greater emotional stability finally and have a more developed sense of humor. They are able to keep a little patience when there is a delay in gratification of their desires.

Middle Adolescents: Middle adolescent is the phase, when a child is on the road of transformation. There are a whole lot of changes that occur, be it, physically, mentally, cognitively or sexually. While most of the girls cross their puberty stage, boys are still on the road of maturing physically

Peer Pressure: Peer pressure means being influenced or pushed over by friends to do something that you would not wish to do otherwise. Adolescence is an age when teenagers try to create an identity for themselves. They have a desperate need to belong to a group and thus, often end up becoming a soft target for peer pressure.

Understanding Puberty: The toddler years of your child when his favorite word was 'No' and he used to resist everything, rebel and cry to exercise his will seem easier when your children enter puberty. Children usually enter the stages of puberty between the ages of 9 to 16 years old, which is characterized by great physical, hormonal and emotional changes.

Tattoos & Piercings: Tattoos and piercing all over the body, other than ear lobes, is a difficult topic for parents to deal with. Teenagers with raging hormones often get swept off by raging trends and neglect the risks and permanence of the designs and that what may seem the 'in' thing today may make him look like a 'weirdo' in the future.

Teen Marriage: Teen marriage was not a big issue in the old times. Life expectancy was shorter then and most of our economy was depended on agriculture and farming. People were less educated and large number of children was considered a boon as it meant more hands to work and greater prosperity. But times have changed now.

Teen Pregnancy: Rising number of teenage pregnancy is often quoted as an example, to prove that our society is going downhill. Young pregnant teens can be seen passing their time at food joints and hanging out with their friends, while being casual about their unplanned pregnancy.

Teens & Parental Authority: Physical changes, hormonal changes and constantly changing moods and thought processes of a teenaged child can be quite scary. The way teens seem to rebel and try to find faults with everything their parents do such as their values, political thoughts, lifestyle

Abuses of Adolescent

Defining ages of the abusers: An adolescent is a young person between the ages of 12 and 24. This age range is the developmental stage between childhood and adulthood. This does not mean that 12-24 is the only age range of abusers; they can be younger than 10 years old, in fact, 11% of the abusers may be less than age 10.

Abuses of Adolescent: Abuse is the improper usage or treatment of an entity, often to unfairly or improperly gain benefit.^[1] Abuse can come in many forms, such as: physical or verbal maltreatment, injury, assault, violation, rape, unjust practices; crimes, or other types of aggression.

Types of abuse: According to Cottrell and Bobic, abuse may appear in one or a combination of five forms; physical, verbal, psychological, emotional, and financial. Bobic mentioned only four of the five listed abuses; verbal abuse was not included in his 2004 article.

Adolescent abuse: Adolescent abuse towards parents and even grandparents is a problem in the United States as well as other countries around the world but it is something not often discussed or reported because most family abuse in general remains hidden from public view until law enforcement becomes involved. Child abuse and spousal abuse are discussed, but parents abused by their own offspring are still considered by many to be a taboo subject, according to some researchers. Reasons for this may be parents feel ashamed and/or think they should be able to handle the situation by themselves without outside assistance.

Anti-social behavior: Anti-social behavior is behavior that lacks consideration for others and may cause damage to the society, whether intentionally or through negligence. This is the opposite of pro-social behaviour, which helps or benefits the society. Anti-social behaviour is labelled as such when it is deemed contrary to prevailing norms for social conduct. This encompasses a large spectrum of actions. A wide variety of other activities are deemed anti-social behaviors.

Juvenile delinquency: Juvenile delinquency, also known as juvenile offending, or youth crime, is participation in illegal behavior by minors (juveniles) (individuals younger than the statutory age of majority). Most legal systems prescribe specific procedures for dealing with juveniles, such as juvenile detention centers, and courts. A juvenile delinquent is a person who is typically under the age of 18 and commits an act that otherwise would have been charged as a crime if they were an adult. Depending on the type and severity of the offense committed, it is possible for persons under 18 to be charged and tried as adults.

Parental abuse by children: Abuse of parents by their children is a common but under reported and under researched subject. Parents are quite often subject to levels of childhood aggression, typically in the form of verbal or physical abuse, in excess of normal childhood aggressive outbursts. Parents feel a sense of shame and humiliation to have that problem, so they rarely seek help and there is usually little or no help available anyway.

Child abuse: Child abuse is the physical, sexual or emotional maltreatment or neglect of a child or children. In the United States, the Centers for Disease Control and Prevention (CDC) and the Department for Children and Families (DCF) define child maltreatment as any act or series of acts of commission or omission by a parent or other caregiver that results in harm, potential for harm, or threat of harm to a child. Child abuse can occur in a child's home, or in the organizations, schools or communities the child interacts with. There are four major categories of child abuse: neglect, physical abuse, psychological or emotional abuse, and sexual abuse. Douglas J. Besharov, the first Director of the U.S. Center on Child Abuse and Neglect, states "the existing laws are often vague and overly broad" and there is a "lack of consensus among professionals and Child Protective Services (CPS) personnel about what the terms abuse and neglect mean". Susan Orr, former head of the United States Children's Bureau U.S. Department of Health and Services Administration for Children and Families, 2001–2007, states that "much that is now defined as child abuse and neglect does not merit governmental interference".¹²

¹² <http://en.wikipedia.org/wiki/Abuse>

Multiple Causes of abusive behavior: According to Purple fairy, many people consider parent abuse to be the result of bad parenting, neglect, or the child suffering abuse themselves, but many adolescent abusers have had normal upbringing and have not suffered from these situations. Children may be subjected to violence on TV, in movies and in music, and that violence may come to be considered "normal." The breakdown of the family unit, poor or nonexistent relationships with an absent parent, as well as, debt, unemployment, and parental drug/alcohol abuse may all be contributing factors to abuse. Some other reasons for parental abuse:

According to several experts are: arguments getting out of control; aggressive behavioral tendencies; frustration or inability to deal with problems; not having learned how to manage (or control) angry feelings; witnessing other abuses at home can cause similar behaviors; lack of respect for their parents – perceived weakness; lack of consequences for bad behavior; fear; drugs and alcohol; gang culture; not having adequate role models; not being able to properly deal with a disabled or mentally ill parent(s); revenge or punishment for something the parents did or did not do; Mental illness and Typical model of parent-adolescent abuse interaction

According to Spitsbergen the typical interaction leading to parental abuse often seems to occur in the following sequence: The adolescent makes a request; The parent asks for clarifying information; The adolescent responds courteously and provides the requested information; The parent acknowledges the teen's point of view but decides to say "no" based on the information provided, while possibly continuing the conversation regarding a possible "next time"; The adolescent tries to change the mind of the parent by asking the parent to explain the decision, sometimes using the information to continue to challenge the parent until certain that the answer would not change; and If the parent holds firm to his or her decision, the teen may start using abusive remarks and threats, harass the parent by following the parent around, and finally responding with verbal threats, physical force, emotional abuse, and often destruction of property or financial damage. These types of aggressive behaviors are very important to recognize for appropriate treatment of adolescents and parents abused by the same. Yet the escalation of violence is an interactive process. When parents or others overreact and intervene emotionally, they can cause the adolescent's aggression to escalate to a higher level, by exerting examples of violence and unreasonableness as a parent. The more tendency towards abuse and negative behaviors that the parent exemplifies, the more reactive the child will also be, more often in a negative manner. Balancing these two dynamics is the key to healthy family dynamics in reducing potential abuse within families, whether it is parental abuses or child abuses.

Adolescent related law in Bangladesh

Adolescent law: The Children (Pledging of Labour) Act, 1933 declares void an agreement to pledge the labour of a child below 15 years. The parent or guardian of the child and the employer making the agreement are both guilty under the Act. An agreement to pledge the labour of child means an agreement, written or oral, express or implied, whereby the parent or guardian of a child, in return for any payment or benefit received or to be received by him, undertakes to cause or allow the services of a child to be utilized in any employment. Young workers The Factories Act of 1965 fixes the minimum age of children as 12 years for employment in factories. No child is allowed to work in a factory unless he is certified physically fit, and children between 16 and 18 years of age not certified fit as such, are treated as children under the provisions of the Act. The Employment of Children Act 1938 prohibits the employment of children below the age of 15 in any occupation connected with transport of passengers, goods or mails by railway or involving the handling of goods within the limits of any port. It further prohibits the employment of children below 12 years in any workshop wherein the process of bidi (cigarette) making, carpet weaving, cement manufacture, cloth printing manufacture of matches and explosives, mica-cutting and depleting are carried on.

13.2 Overview of Bangladesh labour laws: The labour law system is more than a century old in Bangladesh. The first labour law was enacted in the Indian sub-continent during the British period, in 1881. Subsequently, the British Government introduced several laws concerning different labour issues, e.g., working hour, employment of children, maternity benefit, trade union activities, wage, etc.¹³¹⁴¹⁵¹⁶¹⁷¹⁸ Were remarkable labour laws

¹³ The Factories Act (1881),

¹⁴ Workmen's Compensation Act (1923),

¹⁵ Trade Unions Act (1926),

¹⁶ Trade Disputes Act (1929),

¹⁷ Payment of Wages Act (1936),

¹⁸ Maternity Benefit Act (1939),

enacted during the British period. After the separation of the Indian sub-continent in 1947, almost all the laws during the pre-partition period were kept in force with some modifications and amendments, in the form of administrative rules, by the Pakistan Government. After the independence in 1971, the Bangladesh government retained the previous laws through the Bangladesh Laws Order²⁰. It also enacted additional laws in response to the changing circumstances and needs of the working class and the country. In 2006, the country adopted the revised Bangladesh Labour Law of 2006 or BLL. The BLL is fairly comprehensive and progressive. The law is a consolidation and updating of the 25 separate acts. The comprehensive nature of the law can immediately be gleaned from its coverage --conditions of service and employment, youth employment, maternity benefit, health and hygiene, safety, welfare, working hours and leave, wages and payment, workers' compensation for injury, trade unions and industrial relations, disputes, labour court, workers' participation in companies profits, regulation of employment and safety of dock workers, provident funds, apprenticeship, penalty and procedure, administration, inspection, etc. The BLL is also considered an advance because it removes certain ambiguities in the old and diverse labour acts and aligns the labour law system with the ILO core conventions. On the removal of ambiguities, the definition of a "worker" is now very specific. Another example: the exclusion under the term "wages" of the following items -- expense for housing facilities like lighting and water supply, employers' contribution to the provident fund, traveling allowances and other sums paid to worker that are needed to cover work-related expenses. The BLL is also an advance because of its wider coverage, for example, workers and staff of hospitals, nursing homes and even non-governmental organizations are now covered by the law. Also, certain welfare and social benefits have been improved or instituted, e.g., death benefit (financial support to family of deceased worker), application of provident fund benefit to all workers in the private sector, expansion of maternity benefit from 12 to 16 weeks, adoption of group insurance for establishments with 200 or more workers, and increased employee compensation for work-related injury, disability and death. On the ILO core conventions, Bangladesh has ratified the following International Labour Conventions (ILCs):

- ILC 29 (Forced Labour)
- ILC 87 (Freedom of Association and Protection of the Right to Organize),
- ILC 98 (Right to Organize and Collective Bargaining),
- ILC 100 (Equal Remuneration),

Mode of fixing the terms of employment by means of bargaining between an organized body of employees and employers or an association of employers usually acting through organized agents." CB is a major institutional mechanism for resolving the conflicts among the interested parties. CB is the combination of two words: (a) Combination ²¹& (b) Bargaining ²² So we can say that CB is a technique of resolving the existing conflicts between the employee and employer.

13.3 Employment of Adolescent: Prohibition of employment of children and adolescent. Provisions of the new labor law: Section 34 of the new labour law creates a bar on the appointment of children in any establishment. The section states as follows:

1. No child shall be required or allowed to work in any factory. Adolescent workers to carry token: An adolescent who has completed fourteen years of age shall not be required or allowed to work in a factory unless:
2. A certificate of fitness granted to her/him under section 68 is in the custody of the manager of the factory;
3. Such adolescent carries a token - giving a reference to such certificate while he is at work;
4. Nothing in this section shall be applicable to an adolescent employed in any occupation or in a factory as an apprentice for vocational training;
5. If the Government considers appropriate, it may as well waive the enforcement of the pre-conditions of the employment of an adolescent for a particular period.

Child: In the present law child means a person who has not yet completed his fourteen years of age.

Adolescent: Adolescent means a person who has completed her/his fourteen years but has not completed her/his eighteen years of age.

¹⁹ Employment of Children Act (1938)

²⁰ President's Order No. 48

²¹ i.e. Jointly

²² i.e. offer & counter offer to reach a settlement

Changes in the present law: In the earlier laws, the term “child” was used to mean a person who had not completed 16 years of age and the term “Young Person” was used to mean and include both the child and adolescent. Under the earlier law, even a child could have obtained a fitness certificate to get a job in a factory. But in the new law, child means a person who has completed her/his fourteen years of age and adolescent means the person who has completed sixteen years and has not completed eighteen years of age. The present law specifically prohibits employment of children and makes a provision for fitness certificates for the adolescent only.

Exception: A child, who has completed twelve years of age, may be employed in such light work as not to endanger his health and development or interfere with his education. Provided that the hours of work of such child, where he is school going, shall be so arranged that they do not interfere with his school attendance²³.
Certificate of Fitness: Provisions of the new labour law (adolescent). Section 37 of the new labour law requires an adolescent to obtain a fitness certificate to be employed in any occupation or in a factory.

- A registered medical practitioner shall, on the application of an adolescent or her/his parent or guardian accompanied by a document signed by the manager of a factory that such person will be employed therein if certified to be fit for the work he or she has proposed to be employed for, issue a certificate of fitness.
- Such certificate shall be valid only for the subsequent 12 months.
- The employer shall pay the fees for obtaining such certificate and the fees cannot be realized from the parents or guardians of the worker.

Working hours of adolescent

Provisions of the new labour law: Section 41 of the new labour law deals with provisions relating to the working hours of the adolescent. As per the section following points are important and relevant for the RMG industry.

- No adolescent shall be allowed or required to work 5 hours a day and 30 hours a week
- No adolescent shall be allowed or required to work between the hours from 7 pm to 7 am
- In every factory, the work of an adolescent shall be limited up to two shifts and no such shift shall be more than 7 and a half hours
- An adolescent can only be appointed in a single relay and such relay shall be changed only with the prior approval of the inspector for once in a month.

Restriction of appointment of adolescent in certain work:

Provisions of the new labour law: Section 39, 40 and 42 of the new labour law reports some activities for which the employment of the adolescent is strictly prohibited. As per the above mentioned sections, the employment of the adolescent are strictly restricted for the following activities:

- Cleaning of the machinery while it is in motion. Lubrication or for other adjustment operation of the machinery while it is in motion.
- Any work in-between the moving parts of a machine.
- Any work under ground or under water.

II. Findings

1. Family relationships matter for adolescents and young adults. Specifically, parent-adolescent relationship quality together with parent marital quality in early adolescence are related to physical health, mental health, substance use, sexual activity, and religious activity, outcomes during middle adolescence and, to a lesser extent, early adulthood. In particular, adolescents who do not have good relationships with both of their parents and do not report positive parent marital quality are quite consistently at greater risk for negative well-being outcomes in adolescence and for several outcomes in early adulthood.
2. Compared with the group enjoying positive marital and parent/adolescent relationships, most other groups of adolescents appeared to fare poorly on health, substance use, sexual activity, and religious activity, and no group fared better. These results are particularly strong for physical and mental health.
3. Youth living in families with two biological parents compared to one biological parent and a step parent experienced positive outcomes related to more religious attendance during adolescence and better academic

²³ as per section 44

and sexual behavior outcomes as a young adult. In contrast, youth who were in families that experienced a marital disruption between 1997 and 1999 experienced unfavorable outcomes in adolescence, and to some extent as a young adult. In addition, religious attendance was found to be consistently associated with better outcomes in middle adolescence and early adulthood.

4. These results are in line with previous research finding the effects of marital quality and the parent-adolescent relationship on adolescent and youth well-being outcomes and extend on those findings to indicate that both factors matter together. Importantly, adolescents in families with conflict in *both* marital and parent-adolescent relationships fare the worst.
5. Interestingly, those adolescents who reported high parent marital quality and good relationships with only one of their parents fared worse than the adolescents who reported high parent marital quality and good relationships with *both* parents on a number of well-being outcomes. Conceptually, these youth are most similar to the reference group, given that the only source of conflict is between the youth and one of the youths' parents. However, these youth fared significantly worse on physical and mental health outcomes, smoking, hard drug use at age 16, religious activities, and education. These findings suggest the importance of a positive relationship with not just one parent, but both.
6. These analyses as a whole suggest the value of high-quality marital and parental relationships and those private and public policies or programs that enhance family relationships. Indeed, these findings suggest that enhancing *both* marital and parent-adolescent relationships would be beneficial for adolescents and young adults.

III. Recommendation

1. The transition into middle level schools is accomplished by intellectual, moral, social, emotional, and physical changes taking place in at least part of the transition group at any given time. Students making the transition into middle level schools need to receive assistance prior to, during, and after the move so that their social, psychological, and academic well-being is not compromised.²⁴
2. Young adolescents are making both the transition from childhood to adulthood as well as from elementary to middle grades schools. It is well known that starting in sixth grade and continuing through seventh grade, students' motivation, engagement and grades decline, sometimes substantially. There are a number of theories about this shift in student performance:
3. Poor transitions from elementary to intermediate schools: studies show that there is little to no decline in motivation when students are in schools with grades kindergarten through eight.
4. Early adolescents' dramatic developmental changes and their substantial focus on peers makes academics far less important.
5. Parental involvement declines to a greater degree in middle grades and this impacts student motivation.
6. Research provides another view: the decline in student performance is due to a mismatch between young adolescents' needs and the opportunities afforded them in many middle grades school settings. Middle grades educators walk a fine line in creating a developmentally responsive classroom setting. If classes are structured too much like high school—fewer choices, less teacher support, and more competition—students will not respond well. If classes are too much like elementary grades—lower level cognitive strategies and child-oriented nurturing—students will not respond well. In one study, middle grades students reported they valued learning experiences in which teachers made the difference by being strict but nice, being willing to help, affording them respect, and explaining the information until they understood it. They preferred classroom activities involving projects and experiments, studying subjects that were fun to learn, and having opportunities to work with and learn from each other²⁵.
7. Parents or educators who have young adolescents may shake their heads because they cannot figure out why their child or student acted in such an unreasonable way—this illustrates the role reversal between the frontal lobe and the amygdale. It also explains why some students indulge in risky behavior. In addition, because of this role reversal in the brain, the young adolescent may misinterpret things that parents or educators say, or the way they look.
8. Know that for decades, middle grades experts have cried out for special attention to be given to these unique students.
9. Be aware of developmental transitions from childhood to adolescence.
10. Take advantage of professional learning in the area of early adolescent development to create the best learning environment for students.
11. Try to ease transitions from lesson to lesson, class to class, and system to system.

²⁴ Donna Schumacher, *The Transition to Middle School*. Champaign, Ill.: ERIC Clearinghouse on Elementary and Early Childhood Education (#ED422119), 1998.

²⁵ <http://pubs.cde.ca.gov/tcsii/adoldev/adoldev4rec6.aspx>

12. Go to the schools where the incoming students are.
13. Read for more specific ideas about how to ease transitions.

IV. Conclusions

There are about 34 million adolescent boys and girls in Bangladesh. To understand the major research findings, researchers need a basic knowledge of the theoretical foundation on which most research studies have been used. Close parent-adolescent relationship results in child's maturity of behavior which contributes to good peer relationships. The relationship of parents and adolescents will be far better than when parental attitudes are unfavorable. But it is very important to maintain a good relation between parents and adolescents. By this observation it can be said that most of the parents have good understanding relation with their child. Parents take care of their child. In most families father is the head and will bear the educational expenditure of their child. Majority child have good relation with their mother and they share their overall problems with their mothers. In some families father can't give enough time to their child but mother can. In case of family decision majority parents give importance their male child's decisions then female children but some parents give importance their female children opinion. In majority families both male and female children helps their parents in household activities. Most of the children have no freedom doing all kinds of activities. Because parents think that it is not the appropriate time of giving full freedom of the children. Some parents are satisfied with their children behavior and some are not.