



# African American Parent–Son Sexual Communication Among a College Sample

Allyssa L. Harris RN, PhD, WHNP-BC\*

William F. Connell School of Nursing, Boston College, Chestnut Hill, MA

Received 18 May 2015; revised 14 December 2015; accepted 15 December 2015

## Key words:

African American;  
parent–child sexual  
communication;  
sexual risk behaviors

**Purpose:** To investigate whether reports of parent–child sexual communication (PCSC) varied by parental gender, education and living environments among African American adolescent and young male students attending a historically black university ( $n = 146$ ).

**Design and Methods:** Using secondary data a paired t-test was used to determine mean differences for PCSC by gender. Factorial ANOVA was calculated to examine the interaction between PCSC and living environment.

**Results:** Overall African American mothers were significantly more likely to engage in PCSC with their sons than African American fathers ( $t(68) = 4.143, p < 0.001$ ). African American fathers from suburban areas were significantly more likely to engage in PCSC with their sons than urban fathers ( $t(137) = -2.295, p = 0.023$ ). No significant difference in PCSC by parental educational level was found.

**Conclusion:** Findings from this research suggest that African American mothers continue to be the primary conversant in PCSC with their sons. Additional research is needed to understand the role that living environment (urban vs. suburban) plays in the father PCSC process.

**Practice Implications:** PCSC can play an important role in reducing adolescent sexual risk behaviors. Nurses should encourage and support PCSC among African American parents and their adolescent and young adult sons.

© 2015 Elsevier Inc. All rights reserved.

DESPITE RECENT REDUCTIONS in teen pregnancies, adolescent sexual activity remains a significant public health concern. Nearly 47% of adolescents, ages 13 to 18 years old reported ever having sex and 34% are currently sexually active (Kann et al., 2014). Adolescents participating in sexual activity are at risk for a number of negative health and psychosocial consequences including sexually transmitted infections (STIs), HIV/AIDS, teen pregnancy, unplanned parenthood, low educational attainment, and lowered economic success (Ng & Kaye, 2012).

Among adolescents, African American adolescents and young adults, ages 13 to 24 years old face significant reproductive health disparities. African American adolescent and young adult males and females, ages 13 to 24 years old are more likely to engage in sexual activity than their

Caucasian and Hispanic counterparts, 60.6% compared to 43.7% and 49.2%, respectively (Centers for Disease Control and Prevention, 2014b). Among African American adolescents, 68.4% of males and 53.4% of females reported ever having sex (Centers for Disease Control and Prevention, 2014b). African American adolescents are also more likely to engage in sexual activity prior to 13 years of age, with 24% of males and 4.9% of females engaging in sexual behavior, compared to Caucasian peers at 4.4% of males and 2.1% of females (Centers for Disease Control and Prevention, 2014b). In addition they are more likely to acquire sexually transmitted infections including HIV/AIDS (Centers for Disease Control and Prevention, 2013c). African American youth, ages 13 to 24 years old accounted for 57% of new HIV infections in 2010 (Centers for Disease Control and Prevention, 2015).

Researchers have demonstrated that a number of familial factors are influential in reducing adolescent sexual risk

\* Corresponding author: Allyssa L. Harris, RN, PhD, WHNP-BC.  
E-mail address: Allyssa.harris@bc.edu.

behaviors including family structure and cohesion, parental monitoring, parental attitudes and beliefs about sex, parent–child connectedness and parent–child communication (Wright & Fullerton, 2013). Parent–child communication is of particular importance during the adolescent period. Parent–child communication allows parents to convey their values, attitudes and beliefs to their adolescents and shape their behaviors as they continue to develop (Huebner & Howell, 2003). In addition parent–child communication has been found to delay sexual activity and improve adolescent condom use (Huebner & Howell, 2003; Hutchinson, 2002; Martino, Elliott, Corona, Kanouse, & Schuster, 2008; Hutchinson, Jemmott, Sweet, Braverman, & Fong, 2003).

The purpose of this research study is to explore whether African American male students, ages 17 to 25 years old, attending a historically black University, reports of parent–child sexual communication (PCSC) vary by parental gender, educational levels, and living environments (urban vs. suburban). PCSC is defined as the communication between parents and their child about sex and sexuality including topics such as reproductive health, pregnancy, contraception and condom use, STIs and HIV/AIDS and dating and relationships (Diiorio, Pluhar, & Belcher, 2003). PCSC may also include the discussions about parental values and beliefs about sex (Raffaelli, Bogenschneider, & Flood, 1998). The following hypotheses (H) were formulated.

- H1.** African American urban mothers will communicate with their sons more than African American urban fathers.
- H2.** African American suburban mothers will engage in greater PCSC than African American suburban fathers.
- H3.** There will be a difference in PCSC by living environment.
- H4.** PCSC will be positively affected by the parental gender, parental education level and living environment. That is, greater PCSC will occur among African American mothers who live in an urban environment and have a higher educational level.

## Background

### Adolescent Sexual Activity

Much of the research today has focused on understanding and reducing adolescent female sexual activity. However, understanding and reducing adolescent and young adult male sexual activity is of importance also as they represent one half of the adolescent and young adult sexual dyad. Therefore, to reduce adolescent and young adult sexual activity, it is imperative that we understand the factors that reduce adolescent and young adult male sexual activity and risk behaviors.

Approximately 50% of the 19 million sexually transmitted infections annually in the U.S. are among adolescents and young adults, 15 to 24 years old (Centers for Disease Control and Prevention, 2014a). Among African American adolescents and young adults, ages 15–24 years old, the rates for chlamydia, gonorrhea, and syphilis are startling. Chlamydia

rates for African Americans males, ages 15 to 19 years old are 9.9 times those of whites and 6 times that of whites for 20 to 24 year olds. Gonorrhea rates are even higher at 26.2 times that of whites among 15 to 19 year olds and 16.4 times that of whites among 20 to 24 year olds. Syphilis rates are 14 times the rate of whites among 15–19 year old males and 8.5 times the rate of whites among 20–24 year olds (Centers for Disease Control and Prevention, 2014a).

Despite recent advances in reducing HIV/AIDS, the number of new HIV infections remains at approximately 50,000 per year and has been stable for the last decade (Kaiser Family Foundation, 2014b). Although African Americans represent only 12% of the U.S. population, they are significantly burdened with HIV/AIDS and have a new HIV infection rate eight times that of their white counterparts. The rate of HIV infection among African American men is 103.6 per 100,000 or 32.4% (Kaiser Family Foundation, 2014a). In 2010, African American adolescent and young adult males, ages 13 to 24 years old account for 70% (14,700 cases) of the 20,900 new HIV infections cases; their female counterparts account for 29% (6100 cases) (Centers for Disease Control and Prevention, 2015). During their lifetime it is 1 in 16 African American men (Centers for Disease Control and Prevention, 2013a).

Researchers have documented that transmission patterns of HIV play a significant role in new infections rates. Sexual activity among men who have sex with men (MSM) is a significant factor in transmission among all ethnic groups and account for 63% of new HIV infections annually (Centers for Disease Control and Prevention, 2013b). Among African American young men who have sex with men the burden of new HIV infections is highest at 55% of new HIV infections. However heterosexual transmission and IV drug use play a greater role in transmission among African American males (Centers for Disease Control and Prevention, 2012). In addition in African American communities the prevalence of HIV is higher and individuals are more likely to engage in sexual activity with individuals that are African American which increases the risk of acquiring HIV (Centers for Disease Control and Prevention, 2015).

### Parent–Child Communication About Sex

Adolescent and young adults receive information about sex from a variety of sources such as parents and family members, schools, peers, church, and media. Parents have more influence on the sexual activity of their children than they are aware of. In a recent study, 47% of 12 to 19 year olds cited their parents as having the most influence on their sexual decision-making (Ikramullah, Manlove, & Cui, 2009). The quality of the parent–child relationship is key in promoting good PCSC. Adolescents and young adults who feel close and connected to their parents and express trust in the parent–child relationship are more likely to have better general communication and better sexual communication (Markham et al., 2010). Researchers have associated parent–child connectedness and closeness with a reduction

Download English Version:

<https://daneshyari.com/en/article/5870619>

Download Persian Version:

<https://daneshyari.com/article/5870619>

[Daneshyari.com](https://daneshyari.com)