



# Future orientation and health related factors among African American adolescents☆



Suzanna So<sup>a</sup>, Dexter R. Voisin<sup>b,c,\*</sup>, Amanda Burnside<sup>a</sup>, Noni K. Gaylord-Harden<sup>a</sup>

<sup>a</sup> Loyola University, Department of Psychology, United States

<sup>b</sup> University of Chicago, School of Social Service Administration, United States

<sup>c</sup> STI/HIV Intervention Network, United States

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## ABSTRACT

African American youth are frequently confronted by economic and structural hardships, which can often suggest that their lives do not matter. This study examined the extent to which having high future orientation was related to a broad spectrum of health related factors. Among a sample of 638 largely low-income African American youth, this study assessed measures of demographics, future orientation, delinquency, sexual risk behaviors, and school engagement constructs. Major findings indicated that higher future orientation was related to lower levels of delinquency and a reduced likelihood of engaging in risky sex. In addition, stronger future orientation was related to higher levels of school bonding and student-teacher relationships. Overall, findings point to an overall protective relationship between future orientation and several health related factors among African American youth; this suggests that promoting a sense of future orientation among this population could be related to advancing more healthy youth development.

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## 1. Introduction

Relative to their other ethnic counterparts, African American youth living in poorly resourced communities report worse indices on several health-related factors (Williams & Mohammed, 2009). More specifically, these youth report elevated delinquency (Lyons & Pettit, 2011; Tapia, 2011), greater rates of newly diagnosed sexually transmitted infections (STI) (Centers for Disease Control and Prevention, 2012), and lower school success (e.g. Vanneman, Hamilton, Baldwin Anderson, & Rahman, 2009). Within the existing literature, it has been found that such problems often cluster among youth populations (Jessor & Jessor, 1977). Studies demonstrate that the occurrence of one negative behavior increases the likelihood of additional negative behaviors occurring within the adolescent population (Boles, Biglan, & Smolkowski, 2006). In particular, it has been suggested that negative youth behaviors, such as substance use, delinquent behavior, and sexual intercourse, may constitute a “syndrome” of problem behavior in adolescence (Donovan & Jessor, 1985).

As such, it is important to identify positive and malleable factors that may potentially impact these types of behaviors among youth. Future orientation has been identified as an important cognitive construct

associated with positive behavior regulation (de Bilde, Vansteenkiste, & Lens, 2011). However, to date, no studies have examined the extent to which future orientation among African American youth might be related to a broad spectrum of health related factors such as delinquency, unsafe sexual behaviors, and better school engagement. This represents the primary aim of this study.

## 2. Future orientation

Future orientation is a cognitive-motivational construct (e.g. thoughts, plans, motivations, hopes, and feelings) that provides the underpinnings for setting one's goals and plans for the future (Stoddard, Zimmerman, & Bauermeister, 2011). It has been described as a complex, multistage, multidimensional phenomenon that serves as the basis for developing one's expectations and creating personal meaning for future events (McCabe & Barnett, 2000; Nurmi, 1991). Adolescence is a time when future orientation is quickly evolving, differentiating, and expanding, so youth make increasingly detailed and realistic plans about the future (Stoddard et al., 2011). Indeed, the literature on possible selves, which are representations of the self in the future, asserts that the way youth think of themselves in the future can guide and regulate current behavior (Oyserman, Bybee, Terry & Hart-Johnson, 2004). One's self-concept of his or her hoped-for selves (what individuals *could* become), expected selves (what individuals *would like to* become), and feared selves (what individuals are *afraid of* becoming) may provide a roadmap connecting the present to the future (Oyserman & Markus, 1990; Oyserman, Bybee, Terry & Hart-Johnson, 2004; Perry & Vance,

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\* Corresponding author at: School of Social Service Administration, University of Chicago, 969 East 60th Street, Chicago, IL 60637, United States.

E-mail address: [d-voisin@uchicago.edu](mailto:d-voisin@uchicago.edu) (D.R. Voisin).

2010). Youth with balanced possible selves are striving toward a positive self-identifying goal, but they are aware of the personally relevant consequences of not meeting that goal (Oyserman & Saltz, 1993). Thus, they may try harder to attain expected selves and to avoid feared ones. This suggests that thinking about oneself in a desirable future state may motivate youth to pursue behaviors that facilitate the development of more positive end states or to avoid behaviors that reduce the likelihood of them achieving their goals. Consequently, possessing a strong sense of future orientation could be greatly correlated with whether youth decide to engage in risky behaviors or whether they may pursue activities and actions that could advance their life chances.

Some research has focused on future orientation as a promotive factor for outcomes related to academic achievement (Adelabu, 2008). More specifically, students who have strong orientations toward the future have been found to view education as a useful tool for reaching later life success (Brown & Jones, 2004). Thus, they often view a higher intrinsic value for academic work and activities, which is then associated with higher grades in school (Brown & Jones, 2004). However, few studies have examined the association between future orientation and school bonding or student-teacher connectedness. These are additional domains that need to be further evaluated, especially given that low school connectedness during middle school has been found to be a predictor of poor academic achievement during later years of schooling (Bond et al., 2007). Notably, among African American male high school students, the educational aspiration aspect of school belonging has demonstrated positive associations with academic self-efficacy (Uwah, McMahon, & Furlow, 2008). As such, it is crucial to investigate these malleable factors that could be targeted by intervention and prevention efforts to improve outcomes among African American youth.

For adolescents, a hopeful sense for the future can facilitate positive development and promote a successful transition into adulthood (Stoddard et al., 2011). Among youth who are raised in high risk environments, those who are able to sustain hope and positive expectations for the future are less likely to experience psychosocial problems than those who do not engage in these types of future planning (McCabe & Barnett, 2000; Wyman, Cowen, Work, & Kerley, 1993). Research with African American youth exposed to violence demonstrates that higher levels of future orientation are associated with fewer externalizing behaviors and greater decreases in violent behaviors over time (Cedeno, Elias, Kelly, & Chu, 2010; Stoddard et al., 2011). Research on adjudicated adolescents has demonstrated that lower levels of future orientation are significantly related to having sex while consuming alcohol, more alcohol problems, higher perceived risk associated with deviant behaviors, more marijuana use, more hard-drug use, and a greater quantity and frequency of alcohol use (Robbins & Bryan, 2004). However, this sample consisted of primarily males (73%) and only 21% African American youth. Thus, more research is warranted, given that very few studies have examined the relationship between future orientation and a broad spectrum of health-related factors among a single and more general urban population of both African American male and female youth. Further, prior research on future orientation in African American adolescents is limited by a focus on thoughts about future jobs and careers (Stoddard et al., 2011). There is a need for research that includes a more broad assessment of future orientation to explain more variance in outcomes (Stoddard et al., 2011), which in turn, may provide more helpful information for intervention efforts. This is an especially important domain of research because these risk factors disproportionately affect African American youth living in low-income, urban communities, and they can often have detrimental effects on their life chances.

### 3. Health-related factors confronting African American youth

#### 3.1. Delinquency and juvenile justice involvement

Delinquent behaviors are often characterized as lying, stealing, truancy, and vandalism (Murray & Farrington, 2010). Delinquency and

juvenile justice involvement are typically interrelated (Asscher et al., 2011; Loeber, & Farrington, 2012). Among all youth, racial minorities, especially those who are African Americans, bear a disproportionate juvenile justice burden (Fabelo et al., 2011; Stahl, Finnegan, & Kang, 2006). The striking overrepresentation of African Americans in juvenile justice systems occurs at every level from initial contact with the law enforcement, to sentencing and incarceration (Stahl, Finnegan, & Kang, 2006). More specifically, rates of delinquency for African American youth (80.6%) were more than double the rate for White youth (32.9%) and for American Indian youth (32.3%), and almost eight times the delinquency case rate for Asian/Pacific Islander youth (9.7%) (Hockenberry & Puzzanchera, 2014). In 2011, African American juveniles comprised 34% of public order offense cases and 35% of those detained, although they represent less than 13% of the overall youth population (Hockenberry & Puzzanchera, 2014). Given that delinquency is a common precursor to juvenile justice involvement (Chen & Vazsonyi, 2011), this study explored whether there was a relationship between future orientation and delinquency.

#### 3.2. Mental health

Low-income urban environments are often confronted by multiple stressors such as high rates of community violence and limited access to health care, which can advance poor mental health outcomes (Diez Roux, & Mair, 2010; Braveman, Egerter & Williams, 2011; Santiago, Wadsworth & Stump, 2011). Consequently, African American youth residing in low income settings are at an increased risk of reporting poor mental health compared to their counterparts residing in high resource settings (Office of Minority Health, 2014). In particular, African American youth are 20% more likely to report having serious psychological distress (e.g., depression, posttraumatic stress disorder) compared to non-Hispanic, White youth (OMH, 2014). African American youth are also more likely to suffer from phobias, somatic symptoms, and sleep paralysis than youth of other races and ethnicities (Cooper et al., 2003).

In addition, national data suggests that psychological distress, socioeconomic status, gender, and race/ethnicity are interrelated. More specifically, African Americans living below the poverty level are three times more likely to report psychological distress than those living above the poverty level (OMH, 2014). In addition, females report higher rates of suicidal ideation than their male counterparts (Kann et al., 2014). Moreover, the prevalence of attempted suicide among high school students was higher among African American females (10.7%) than White females (8.5%). Higher rates of suicide were also noted for African American males (6.8%) compared to White males (4.2%) (Kann et al., 2014). The extant literature has not examined whether future orientation and mental health are correlated among African American youth, which would be examined in this study.

#### 3.3. School engagement

School engagement is a multidimensional construct and reflects the degree to which students are engaged emotionally, behaviorally, and academically in school (Furlong & Christenson, 2008). Nationwide, African American youth report significantly lower rates of educational attainment than peers from other races/ethnicities. National data indicate that 5.5% of African American high school students drop out of school compared to 2.3% of White and 1.9% of Asian/Pacific Islander students (Aud et al., 2012). In addition, only 68% of African American freshmen end up graduating from high school compared to 85% and 93% of White and Asian/Pacific Islander students, respectively (Stetser & Stillwell, 2014).

Poorer school engagement trends have been noted across all educational levels. With regards to the percentage of 25–29 year olds with a bachelor's degree or higher, only 9% of African Americans possess a bachelor's degree or higher compared to 69% of Whites and 11% of

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