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## DIFFERENT FACTORS AFFECTING TEENAGE LATINA PREGNANCY

by

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## DISSERTATION

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# DIFFERENT FACTORS AFFECTING TEENAGE LATINA PREGNANCY

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#### **Dedication**

This dissertation is dedicated to my parents who worked hard as migrant workers. Thank you for giving me that experience of working in the fields. Thank you dad for supporting my educational endeavors. Thank you mom for planting the mustard seed of education by telling me that I was going to be a secretary, which was the highest educational level you sow possible through your experiences and understanding. Now that you both are not here with me, I am at peace trusting that you know how much I have accomplished through the grace of God, your love and support. I am eternally grateful to have had you both as my parents. I hope that one day we will meet again in Heaven.

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#### **ABSTRACT**

### DIFFERENT FACTORS AFFECTING TEENAGE LATINA PREGNANCY

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The purpose of this qualitative study was to examine the factors that contributed to Latina teenagers' decisions to remain sexually abstinent or to become sexually active. The participants in this study included four Latina women between the ages of 20-30 years from a major southwestern metropolitan area. Specifically, two of the participants who remained sexually active and two participants each of whom had had a child during her teenage years were interviewed twice. Extreme case sampling was useful in that it allowed the researcher to identify the differences and similarities between the participants. Critical, life story, and *testimonios* methods were utilized to uniquely respond to the needs of the Latino population. Results indicated that for all of the participants, the immediate family played a major role in the Latinas' decisions to remain sexually abstinent or to become sexually active. The participants who remained sexually abstinent had a close relationship with their parents and it served as a protective factor for sexual abstinence. Whereas the absence of a relationship with parents and a lack of information regarding sexual topics, allowed for outside forces to influence the Latinas to become sexually active.

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#### CHAPTER I:

#### INTRODUCTION

Parenthood, a transformational life experience, changes one's sphere of existence and mind sight forever regardless of incidental outcomes (Neeley, Baldwin, Beckwith, & Williams, 2011). The transcendental experience of parenthood transforms individuals, regardless of ethnicity, and societal or economic status. Teenage pregnancy is a critical problem because most of those pregnancies are unplanned or unwanted, and teen parents are usually unable to properly take care of their babies (Chambers, 1997). Teenagers are still developing physically, emotionally, and socially. The responsibilities inherent in caring for a child can be overwhelming for both teenaged mothers and fathers (Chambers, 1997). The literature is unclear as to how to best prevent this teenage pregnancy crisis.

Additionally, teenaged parents are more likely to have troubled marriages or unions with their partners and are more likely to neglect their children than are older parents (Chambers, 1997). Most teenagers are still in search of personal identity and are not yet prepared for the committed, long term relationship required for marriage or raising children (Wallerstein & Blakeslee, 2004). Unplanned pregnancy often forces a couple into an unhealthy underdeveloped relationship which can be detrimental for both parents and the resulting offspring (Wallerstein & Blakeslee, 2004). While males tend to use an intimate relationship to satisfy their sexual urges, females tend to seek intimate relationships to serve as a source of love and security (Wallerstein & Blakeslee, 2004). However, because women often feel "used" by a sexual partner seeking only sexual gratification, the relationship ultimately suffers and can disintegrate (Wallerstein & Blakeslee, 2004).

Although Latinos are the largest minority group in the United States (U.S. Department of Commerce, Economics and Statistics Administration, Bureau, 2012) and

one of the fastest growing (Marx, 2006; Torres, Martinez, Wallace, Medrano, Robledo, & Hernandez, 2012), there is limited literature within the education field to explain how Latina teenagers' sexual practice is developed. Specifically, there is limited research pertaining to teenaged Latinas' decisions to become sexually active or to remain sexually abstinent. The population increase indirectly demonstrates the need to study this ethnic group so educators may better serve Latinos. Teenagers who have children are at a higher risk of not completing secondary education and are at risk of dropping out of school (Neeley et al., 2011). Moreover, girls who have higher educational aspirations are more likely to remain abstinent than their peers who have limited higher education aspirations (Bogart, Collins, Ellickson, & Klein, 2007; Kost, & Henshaw, 2010).

This qualitative research study explored the factors that contributed to Latina teenagers' decisions to remain sexually abstinent or to become sexually active during their teenaged years. The study was conducted in a southeastern metropolitan area, and the focus of the study was on Latina teenagers and their decisions to remain sexually abstinent or to become sexually active. In order to understand the need to provide equal access to sexual education programs for Latina teenagers, it is necessary to understand specific educational needs that Latina teenagers or Latino parents may have regarding teenage Latina pregnancy through school educational access and integrated instruction.

## **The Research Problem**

Teenage pregnancy, sexually transmitted diseases (STDS) and abortion rates are substantially higher in the United States than in other western industrialized nations (Martin, Hamilton, Osterman, Curtin, & Mathews, 2013). The following sections address teenage pregnancy rates and sexually transmitted diseases (STDS).

Sexually experienced teenagers in the general population have 152.8 pregnancies per 1,000 teenagers aged 15 to 19 (Kost & Henshaw, 2010). Although there has been

substantial research interest in predictors of adolescent sexual behavior, few investigations have assessed predictors or correlates of sexual abstinence (Buhi, Goodson, Neilands, & Blunt, 2011).

#### **Health Concerns**

Unplanned pregnancy is not the only sexual and reproductive health issue facing our nation's youth (Smith & Wagoner, 2009). There is also an epidemic of sexually transmitted diseases (STDS) such as the Human Immunodeficiency Virus (HIV) that could lead to fatal outcomes (Smith & Wagoner, 2009). Parental education is one of the factors missing from STD prevention programs (Dilorio, McCarty, Resnicow, Lehr, & Denzmore, 2007). Parents remain unaware of the information that is presented to their children and fail to reinforce important messages about HIV, sexually transmitted infections (STIS), and pregnancy prevention. Parents are not adequately encouraged nor are prepared to talk with their children about sexual health (Dilorio et al., 2007). With the recent increase in teenage pregnancies after funding cut backs for abstinence educational programs, there is a need to continue to encourage delayed sexual activity, not only to avoid pregnancy but to reduce the risk of HIV and other sexually transmitted diseases (Stein, 2010).

### **Teenage Pregnancy**

Even though pregnancy rates have decreased for non-Hispanic teenagers, rates have remained relatively high among Latina teenagers (Hamilton, Martin, Osterman, & Curtin, 2014; Ventura, Abma, Mosher & Henshaw, 2009). In 2005, almost 129 of every 1,000 Latina females ages 15-19 experienced a pregnancy (Ventura et al., 2009); whereas, the number of similarly aged females in the general population experiencing pregnancies was 71 pregnancies per every 1,000 teenagers. Between 2005 and 2006, Latino pregnancy rates rose from 124.9 per 1,000 women to 126.6 (Kost & Henshaw,

2010). Latinas tend to not only have more children than non-Latinas, they also have children at a younger age (Pew Research Center, 2009). More than one-fourth (26%) of Latinas are mothers by the time they reach age 19, compared with 22% of African Americans, 11% of Caucasians and 6% of Asians (Pew Research Center, 2009).

According to the Centers for Disease Control (CDC) and Prevention's National Center for Health Statistics (NCHS) preliminary data on births based on the registered vital records of the United States, a total of 3,108 babies were born to girls ages 10 to 14 and 274,641 for girls ages 15 to 18 in the year 2013 (Hamilton et al,2014). Latinas 15 years and younger gave birth to 1,221 babies and Latinas ages 15 to 19 gave birth to 93,585 babies (Hamilton et al., 2014).

Moreover, at the national level, teen parenthood among Latinas is 50 % higher in the immigrant generation than that of their native-born peers (Pew Research Center, 2005, 2006, & 2007). Twenty-six percent of foreign-born Latinas between the ages of 18 and 19 have children, compared with 16% of second-generation Latinas and 21% of third-generation Latinas of the same age (Pew Research Center, 2009). On average, Latinas give birth to three children. In comparison, African American females are estimated to have an average of 2.15 children, and for European-Americans the number is 1.86 (Pew Research Center, 2006). Additionally, Latinos marry at a younger age. Furthermore, the latest available statistics indicate that Texas has one of the highest teenage birth rates in the country (Hamilton et al., 2014).

There is a small difference between the likelihood of Latinas who are 20 to 25 having had sexual intercourse prior to age 20 and Latinas who are 26 and older having had sexual intercourse (Pew Research Center, 2009). The possibility of having engaged in teen sex does not differ between Latino youths and their older counterparts (ages 20 to 25). Among respondents ages 20 to 25, 74% report first having had sexual intercourse as

a teen and 65% of older Latinos (older than 26 years) report first having had sexual intercourse as teens (Pew Research Center, 2009). The percentages of male and female youths (ages 20 to 26) reporting having had sex is similar--78% for males, 75% for females. Among the group of Latinos between the ages of 20 and 25 who were interviewed for the Pew study, 38% of males reported having first had sex prior to age 16. This number is reduced by half to 19% among the females (Pew Research Center, 2009). Although the proportion of high school students who have had sex has dropped in the past decade, many adolescents in the United States are engaging in sexual activity at early ages and with numerous partners (Grunbaum, Kann, & Kinchen, 2003). Approximately 47% of high school students in the U.S. have had sexual intercourse. Of these, 7.4% report having sex before the age of 13, and 14% have had more than four sexual partners (Grunbaum et al., 2003).

## **Purpose of the Study and Research Questions**

The purpose of this study was to examine the factors that contributed to Latina teenagers' decisions to remain sexually abstinent or to become sexually active. Since Latina teenagers have higher pregnancy rates (Stein, 2010), further research is needed on the predictive factors that contribute to Latina teenagers' decisions to engage in sexual activities (East, Khoo, & Reyes, 2006).

Two overarching questions provided clear limits for the study and generated sufficient data to explore the factors that contributed to Latina teenagers' sexual activity decisions:

Research Question 1 – What factors contributed to Latina teenagers' decisions to become sexually active or to remain abstinent?

Research Question 2 - What sexual educational instruction, if any, was received by Latina teenagers who were sexually active and teenagers who remained sexually abstinent?

#### **Delimitations**

The objective of this study was to describe the Latinas' sexual educational experiences with the family or significant caretaker, peers, cultural influences, school, and the media. Any relevant data shared by the participant and perceived to be conjunctive, was added, such as religion, assertiveness, and significant life experience. The parameters of this research began and ended with the research participants themselves and their stories. What was not mentioned by them was not pursued so as to not skew their *testimonios* or story in any way.

## **Definitions of Key Terms**

The following are the definitions for key terms used throughout this dissertation. 

Latino/Latina- "Latinos/as can also be Mestizo or a cultural identity that is a blend of indigenous and European influences and may come from Mexico, Colombia, Peru, Cuba, Honduras, Haiti, Puerto Rico, Guatemala, Guyana, Venezuela, Argentina, or other countries" (Hondo, Gardiner, & Sapien, 2008, p. xi). According to the United States summary 2010, (2012), "Hispanic or Latino refers to a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race" (p. 2). In this study Latino and Hispanic were used interchangeably.

First Generation Latinos- "...refers to persons born outside the 50 states or the District of Columbia, including those born in Puerto Rico" (Pew Research Center, 2009, p. 60).

Second Generation Latinos- "...refers to persons born in the U.S. with at least one first-generation parent" (Pew Research Center, 2009, p. 60).

*Third and Higher Generation Latinos-* "...refers to persons born in the U.S. with both parents born in the U.S." (Pew Research Center, 2009, p. 60).

*Sexually Active*- Sexually active is defined as having sexual activity including vaginal, anal, or oral intercourse (Horan, Phillips, & Hagan, 1998).

Sexual Abstinence- Horan et al. (1998) defined sexual abstinence as refraining from vaginal, anal, or oral intercourse.

Parental Guidance- "PG- motion pictures with this rating should be investigated by parents before they let their younger children attend" (Motion Picture Association of America, 2013).

Familismo- Gallardo and Poaliello (2008) define familismo as a "strong sense of identification with, and loyalty to, nuclear and extended family" (p. 3).

This study drew from the experiences of Latina teenagers and the factors that contributed to their decisions to remain sexually active or to remain abstinent. The impact of parental involvement on sexual education from the perspective of the participants was addressed and the implications for schools to better address sexual education were also reviewed.

The ecological model considers many societal settings that need to be addressed in order to help an individual in solving a problem (Hershenson, 1998). The ecological model can be used to demonstrate the interaction between the individual and various factors in the environment that may impact decision making and problem solving. Hence, this study drew from teenagers' perspectives and context and what influenced their decisions to remain sexually abstinent or to become sexually active.

#### CHAPTER II:

#### LITERATURE REVIEW

This chapter presents what researchers have reported regarding Latinas and their decisions to engage in sexual activity or to remain sexually abstinent. The review of literature encompasses topics that the researcher deems important when considering teenage pregnancy among Latinas. The first section reviews statistics regarding demographics of Latinos. The second section considers the impact of environmental factors on teenage sexual decisions. The third section considers how culture can have an effect on Latina teenage pregnancy. The fourth section examines parental involvement and school accountability related to sexual education of teenagers. Research reviewed includes both quantitative and qualitative studies.

## **Latino Population**

Data from the 2010 reports that of the 308.8 million people residing in the United States, 50.5 million are Hispanic, which shows a dramatic increase from the 35.5 million in 2000 (U.S. Department of Commerce, Economics and Statistics Administration, Census Bureau [Census Bureau], 2011). Projections for comparative growth rates indicate that the Latino population will increase at a rate 3 to 5 times faster than the general population with an estimated 100 million by the year 2050. According to Texas population growth predictions, the European-American population will continue to age while the Latino population will become the youngest group in the state (Torres & Zerquera, 2012). A younger group translates into more teenagers who are at risk of becoming sexually active and at a higher risk of becoming parents during their teenaged years.

Teen pregnancy may create stressors on teenagers and their families. Teenaged pregnancy may cause a negative impact on academic achievement (Neeley et al., 2011).

Additionally, teenagers who have become sexually active have an increased risk to their physical and emotional health (Cashman, Eng, Simán, & Rhodes, 2011; Chambers, 1997). Teen pregnancy alone costs taxpayers at least \$9.4 billion (Martin et al., 2013). A review of these negative effects has been provided in the following section.

## The Need to Study Teenage Pregnancy

Sexual activity among teenagers is a risk factor that can have a negative impact on academic achievement, (Neeley et al., 2011), and health (Cashman et al., 2011; Chambers, 1997). Pregnancy and giving birth are significant contributors to high school dropout rates among girls (Martin et al., 2013). Only about 50% of teen mothers receive a high school diploma by 22 years of age, versus approximately 90% of women who had not given birth during adolescence. Children of teenage mothers are more likely to have lower school achievement and drop out of high school, have more health problems, be incarcerated at some time during adolescence, give birth as a teenager, and face unemployment as a young adult (Martin et al., 2013). In 2011, teen pregnancy accounted for at least \$9.4 billion in costs to U.S. taxpayers for increased health and foster care, increased incarceration rates among children of teen parents and lost tax revenue because of lower educational attainment and lower income among teen mothers (Martin et al., 2013). Teenage sexual activity is a factor that can create an elevated health risk (Cashman et al., 2011; Chambers, 1997). Of the Human Immunodeficiency Virus (HIV) cases reported in the United States in 2008, 20% are from the Latino ethnic community, four times greater than the non-Latino Caucasian community (U.S. Department of Health and Human Services, Centers for Disease Control and Prevention [CDC], 2008a). HIV/AIDS (Acquired Immune Deficiency Syndrome) is the fourth leading cause of death for Latinas ages 35-44. Moreover, Latinas have increasing rates of chlamydia and gonorrhea (CDC, 2007), higher incidences of cervical cancer, and a 50% higher cervical

cancer mortality rate than their non-Latina counterparts (DATA, 2010; Wasserman, Bender, & Lee, 2007). Teenagers who are sexually active have an increased chance of developing cervical cancer and uterine diseases (Chambers, 1997). In recent studies, teenagers reveal they have misinformation about sexual health, including HIV and STD transmission (Byrd, Peterson, Chaves & Heckert, 2004; Cashman et al., 2011; McMullin, De Alba, Chavez & Hubbell, 2005; Berenson & Wu, 2004). Although condoms are 85% effective in pregnancy prevention, the risk of getting pregnant or getting a sexually transmitted disease tremendously increases when teenagers have multiple partners and multiple sex interactions (Evert & Stefanick, 2010). When the 15% risk in the use of condoms is multiplied by the number of times teenagers have sex, the risk for pregnancy and STDS increases. When teenagers become sexually active at young ages, they tend to have multiple sexual partners (Adimora, Schoenbach, Taylor, Khan, & Schwartz, 2011; Grunbaum et al., 2003; O'Donnell, O'Donnell, & Stueve, 2001; Santelli, Brener, Lowry, Bhatt, & Zabin, 1998; Stueve & O'Donnell, 2005) and the chance for teenagers to have an unplanned child and sexually transmitted diseases increase significantly (Collins, Elliott, Berry, Kanouse, Kunkel, Hunter, & Miu, 2004). Given the steady increase in teen pregnancy and the high risk of sexually transmitted diseases, more research is needed on Latina sexual activity.

## **Theoretical Perspective**

The theoretical perspective used in this study takes into account some of the factors that could have an impact on teenagers' decisions to remain sexually abstinent or become sexually active. The Ecological Systems Theory structures a person's development within the context of the system of relationships that form his or her environment. The interaction between people's maturing biology, their immediate family/community environment, and the societal landscape fuels and steers their

development and decisions (Paquette & Ryan, 2001). The Ecological Systems Theory identifies four systems in which an individual interacts. Bronfenbrenner (1994) called these systems the Microsystem, the Mesosystem, the Exosystem, and the Macrosystem. The Microsystem consists of immediate environments that the individual interacts with such as family, school, peers, neighborhood, church and health services (Bronfenbrenner, 1994). At this level, relationships can have impact in two directions--away from the individual and toward the individual. The immediate environments or Microsystem, Mesosystem, Exosystem, and Macrosystem may affect the individual's beliefs and behavior and conversely, the individual may also affect these environments. The Mesosystem consists of the connections between the individual's immediate environments (e.g., an individual's home and school) (Bronfenbrenner, 1994). The Exosystem includes the neighbors, legal services, social welfare services, mass media, and friends of the family (Bronfenbrenner, 1994). The Exosystem indirectly affects the development of an individual. The Macrosystem includes all the subsystems and the general beliefs and values of the culture and is made up of written and unwritten principles that regulate everybody's behavior (Bronfenbrenner, 1994). Although the Ecological Model includes all the mentioned elements, this research only considered how the individual beliefs and behaviors were influenced by family, extended family, peers, school, health services, media, and culture. Figure 1 illustrates a model informed by Bronfenbrenner's Ecological Model that takes into consideration possible differences in how Latinos are influenced by the environment that surrounds them. This research investigated the factors included in the model that influenced teenagers in their decisions to remain sexually abstinent or to become sexually active.

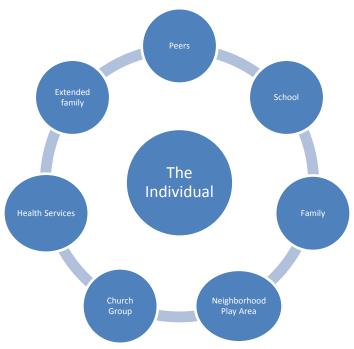


Figure 1. Factors that could influence Latinas' sexual activity decisions.

## Microsystem

## **Family**

Family is a significant environmental factor that contributes to teenagers' decisions to become sexually active or remain sexually abstinent (East et al., 2006). East et al. studied the protective factors that might guard against teenage pregnancy among Latinas who live in high-risk environments. The high-risk factors in this longitudinal study included girls who live in single mother households, a family history of teenaged parenting, family poverty, and sibling pressure to be sexually active. In regards to sibling pressure, this study looked at the culture of sexual promiscuity and permissiveness among siblings as an increased risk for teen pregnancy. The sample included 128 Latinas and African American girls' ages 13 through 19. Participants were studied on three separate occasions: at age 13, during early adolescence, at age 15, during middle adolescence, and at age 18, late adolescence. Sixty-seven percent of the participants were Latinas and 33 % were African American. Results indicated that when parents were

vigilant and strict and had clear sanctions against teenage sex and teenage childbearing, and had high educational expectations during early adolescence, adolescents had reduced rates of pregnancy. When teenage girls had parents who did not monitor the teenagers' activities, the likelihood for pregnancy was 77% (123 girls from ages 13 through age 19).

In shaping the values of young teenagers, parental influence is more powerful than any clinic, any teacher, or any peer (Chambers, 1997). Parental communication about sex is the strongest protective factor against early sexual behavior (Brown et al., 2006). Research indicates there is a pronounced lack of sexual education provided by parents to their pre-adolescent or adolescent offspring (Cashman et al., 2011; Chambers, 1997; Dilorio et al., 2007; Rawson & Liamputtong, 2010; Pew Research Center, 2009). In fact, some Latino parents believe that sexual education is the responsibility of institutions, such as schools (Rawson & Liamputtong, 2010; Valdés, 1996). Just over half of Latino teenagers (53%) report that their parents talked to them about sex when they were growing up (Pew Research Center, 2009). A smaller amount (39%) report that their parents talked to them about birth control. In contrast, among Latinos older than 25, only 31% report that their parents discussed sex with them when they were growing up, and just one-fourth (25%) report that their parents discussed birth control (Pew Research Center, 2009). Moreover, immigrant youths are significantly less likely than their second-and third-generation counterparts to report ever discussing sex with their parents. Some 38% of immigrant youths reported that their parents talked with them about sex when they were growing up, compared with 63% of second-generation youths and 65% of those in the third generation (Pew Research Center, 2009). Many Latino teenagers lack sexual health information because this topic is traditionally not discussed in Latino families (Pew Research Center, 2009; Valdés, 1996).

Parents are one of the important factors that influence teenagers to abstain from sex and prevent teenage pregnancy (Dilorio et al., 2007; East et al., 2006; Evert & Stefanick, 2010; Wilson, Dalberth, & Koo, 2010). According to East et al. (2006), Latinas and African American teenagers who live in poverty and have a family history of teenaged pregnancy are at a higher risk of becoming pregnant. Results indicate that protective parenting, positive school orientation, and the teens' desire to not have children are preventative factors. The parenting interventions examined in this study included strict parenting, vigilant monitoring, clear sanctions against teenaged sex, and high educational expectations during early adolescence. However, 77 % of teenagers who had friends that were sexually active and who had uninvolved parents became sexually active.

Moreover, the distress of a parental divorce may cause teenage girls to exhibit maladaptive coping behaviors, such as engaging in multiple sexual relationships, or impulsive marriages that end in early divorce (Wallerstein & Blakeslee, 2004). The absence of a father figure increases the risk for teenage girls to become sexually active. These girls may lack the attention and love from a father figure; they may seek to substitute this love through attention from a male and consequently become sexually active (Evert & Stefanick, 2010; Wallerstein & Blakeslee, 2004).

Parental involvement in a teenager's life is an important tool for the prevention of sexual engagement among teens and pregnancy prevention (Dilorio et al., 2007; East et al., 2006; Evert & Stefanick, 2010; Wilson et al., 2010). Wilson et al. (2010) specifically studied paternal involvement in sexual education and noted promising interventions in promoting teenage abstinence from sex, teenage pregnancy, and HIV prevention. In a study conducted by Wilson et al. (2010), fathers who talked to their sons about sexual education also emphasized discussing future goals, and monitoring children's activities

and friends (Wilson et al., 2010). According to Wilson et al., fathers' perspectives on sexual education are important for children to hear.

Fathers may also talk to their daughters from a male perspective and help them be aware of the pressures that boys generally impose on becoming sexually involved (Wilson et al., 2010). In the Wilson et al. (2010) study, Latino fathers mentioned how they wanted to protect their daughters because fathers perceived, through their own experience, that boys usually seek sexual satisfaction without regard for the negative consequences on girls (Wilson et al., 2010). Both Latina mothers and Latino fathers acknowledged that despite their desire to speak to their children about sex, there were certain barriers to doing so. These barriers included: believing that their children were not ready to learn about sex, not being sure how to address the topic, and feelings of embarrassment. Hence, parents, especially fathers, may need support to overcome barriers to effectively communicate with daughters regarding sexual education (Wilson et al., 2010).

Wilson et al. (2010) studied fathers' views of their roles in protecting their preteen age children from sexual risk and promoting their healthy sexual development. The participants included mothers and fathers who had children ages 10 to 12. The majority of participants (81%) belonged to intact nuclear families or lived with both the mother and father. Focus groups ranged in size from 6 to 11 participants. Some questions for mothers and fathers focused on father-child discussions about sex, including: the extent to which fathers talk to their children about sex, the reason some fathers may not have such a discussion, the importance of fathers' talking about this topic (Wilson et al., 2010). Results indicated that most fathers are eager to play a role in guiding children's sexual development, and fathers believe they can make a unique contribution (Wilson et al., 2010). Nearly all parents agreed that fathers' perspectives are important for their children

to hear. Fathers felt they were better suited to talk about male puberty and how young men think; however, fathers did not feel suited to speak about menstruation with their daughters (Wilson et al., 2010). Mothers and fathers acknowledged that talking to children about sex was traditionally left to the mother. In fact, many Latino fathers reported being more protective of daughters than of sons, and some had particular difficulty talking with their daughters about sex. Therefore, Wilson et al. (2010) recommended that intervention programs that support parent-child communication regarding sexual education include fathers.

Evert and Stefanick (2010) further support the idea that mothers and fathers have unique roles when communicating with daughters and with sons. A father talking to his son about sexual education may be more meaningful to the son because a male is talking to a male (Evert & Stefanick, 2010). This talk implies certain understanding and insight from the father to the sons (Evert & Stefanick, 2010).

#### Familismo

Extended family may play a central role in the upbringing of children in the Latino culture (Levitt et al., 2005). Grossman, Tracy, Richer, and Erkut (2015) reviewed adolescent sexual communication with extended family. Grossman et al. used qualitative data to explore quantitative results of a study done by Creswell and Clark (2011). Creswell and Clark's study included 24 schools in the Eastern Massachusetts area. Participants agreed to partake in the evaluation of the *Get Real: Comprehensive Sex Education that Works* curriculum developed by Planned Parenthood League of Massachusetts. Participants were randomly assigned to intervention and control conditions. The analysis sample in Grossman et al. (2015) was limited to eighth-grade students who had completed the section of the survey on communication about sex (*n* = 1,494). Fifty-three percent of the participants were females. The sample was comprised

of 32% Latino, 30% African American, 20% Caucasian, 15% biracial, and 4% Asian teenagers. A convenience sample was selected by the schools that participated. Out of the 177 students who were invited to participate in the qualitative section of the study, 38 returned a parental consent, on which four withheld consent. Thirty-two out of the 34 agreed to participate and completed interviews. Interviews lasted 30 minutes and were done in the school or by phone. This qualitative sample included 56% male participants. The sample was comprised of 33% Latino, 37% African American, 18% Caucasian, and 12% biracial. Participants were asked to whom they talk about sex and relationships. Teens reported talking about sex with parents, grandparents, stepparents, aunts, uncles, older siblings, cousins, and friends of the family. The most frequently reported conversations were with mothers (56%), followed by cousins (32%), fathers (29%), and friends of the family (23%). Overall, 59% of teens reported talking with at least one extended family member about sex and relationships. Twenty-one percent reported talking about sex and relationships with their parents only, 18% talked to their extended family only, 41% talked to parents and extended family, and 21% did not talk to parents or extended family. The most common reason that teens reported talking to extended family members was the participants' feeling of connection and trust with the extended family member with whom the teenagers talked about sex and relationships. The second common reason for teens to talk to extended family members about sex and relationships was the perceived knowledge and experience about certain topics such as HIV, protection methods and the extended family members' life experience. The third reason teens reported talking to extended family members was the feeling of discomfort when talking to parents and teens. They described the differences in how family members reacted to sexual topics. Among the topics that participants reported talking to extended family members about were dating and relationships, having sex, teen pregnancy and

parenthood, protection methods, and homosexuality (Grossman et al., 2015). Thus, extended family may play an important role in teenagers' decisions to become sexually active. In fact, participants who reported only talking to an extended family member about sex were most likely to have had sex and those who talked only to parents were least likely to have had sex (Grossman et al., 2015).

#### Peers

In a study conducted by East et al. (2006), among teenaged girls who had many friends who were sexually active and received less protective parenting, the likelihood for pregnancy increased. Epstein, Bailey, Manhart, Hill, and Hawkins (2014) examined whether early initiation in sexual encounters was a predictor of risky sexual behavior in their 20s and 30s and if peers had an influence on sex initiation. Youth attending fifth grade (N = 1,053) in 18 public schools in Seattle serving high-crime neighborhoods were invited to participate in Epstein et al.'s study. Participants included 808 parent and fifth graders who consented to participate in the study. The study was comprised of 49% females and included 47% European American, 26% African American, 22% Asian American, 5% Native American, and 5% Hispanic. While the results of the Epstein et al. (2014) study may not be generalizable for the Hispanic population since it was a small sample (5%), it might be worth noting the outcomes. Participants were surveyed at ages 10, 11, 12, 13, 14, and 16; follow up surveys were continued for every 3 years from ages 18 to 33. Retention rates remained above 90%. Early sexual initiation with the opposite gender was coded when participants reported having had their first sexual intercourse before age 15. Results indicated that adolescents who reported having early sexual initiation had a significant increase in sexual risk behavior in their early 20s and early 30s. However, the link between early sexual initiation and risky sexual behaviors did not persist when other social factors were co-occurring. In fact, adolescent behavior

disinhibition and antisocial peer influences emerged as the strongest predictors of sexual risk behaviors over and above early sexual initiation. Results indicated that when adolescents were predisposed toward impulsivity and had the presence of risk-taking peers the likeliness for the adolescents to get involved in sexual risk in the future was more prevalent. Adolescents with high behavioral disinhibition may be more likely to engage in risk-taking behavior on their own and are likely to seek out antisocial peers with similar behavioral patterns. Thus, adolescents who are less intrinsically driven to impulsive behavior may be influenced more by peers.

Killoren, Updegraff, Christopher, and Umana-Taylor (2011) investigated sexual initiation and sexual risk behaviors among schools around the metropolitan area of Phoenix, Arizona. Two hundred forty-six families whose adolescents lived with both parents participated in Killoren et al.'s study. Each parent was interviewed for three hours, and the oldest daughter or son was interviewed for two hours. Most of the parents in Killoren et al.'s study were born outside of the United States (71% of mothers and 69% of fathers were born in Mexico). Forty-seven percent (n=114) of the participating adolescents were born in Mexico and 132 were born in the U.S. Parents reported on background characteristics and family relationships and adolescents reported on their relationships with parents, peers, and their intentions to engage in sexual intercourse. There was a difference in the results for the adolescents who were born in the U.S. and the ones who were born in Mexico. Results indicated that paternal acceptance and disclosure with mothers (used to rate the closeness of the adolescent with the parent) did not have an effect on the adolescents' affiliations with deviant peers among the adolescents who were born in Mexico; whereas, lower levels of acceptance with fathers and lower levels of disclosure to mothers were related to greater deviant peer affiliations, and deviant peer affiliations were linked to greater sexual intentions among U.S.-born

adolescents. Linking parents and peers to adolescents' sexual intentions were not significant factors for Mexico-born adolescents in Killoren et al.'s study. According to Killoren et al., for adolescents born in Mexico, peer relationships may not be as important as other relationships, such as siblings and extended family members.

## Religion

Davidson, Moore, and Ullstrup (2004), found that college students who are religiously involved delay in sexual initiation and have fewer sexual partners. "Virginity pledges" is a movement that began in 1993 and influenced schools and churches in America (Landor & Simons, 2014). The movement, entitled *True Love Waits*, stresses the moral value of abstaining from premarital sex (Bersamin et al., 2005). Landor and Simons (2014) examined the reasons why some virginity pledges work and why other virginity pledges do not work. Participants in Landor and Simons study included 1,380 college students who attended a public Southeastern state university. Landor and Simons' study included 410 males, and 970 females whose ages ranged from 18 to 24 years. Results indicated that participants who signed a virginity pledge and were also religiously committed where more likely to abstain from sexual activity. Religious commitment was assessed by asking participants to indicate the level of religious influence which ranged from 1 (none) to 5 (very influential) and by asking how often the participants prayed and looked for spiritual comfort from a 1 (never) to 5 more than once per day. These two items were combined to get a religious commitment scale where higher scores indicated higher levels of the religious behavior commitment. The Cronbach alpha for the religious commitment scales was .81. Results indicated that the interaction variable, religious commitment and pledge is statistically significant; this indicated that signing a virginity pledge was effective when participants were religiously involved (Landor & Simons, 2014).

#### **Prevention Health Services**

In 1970 President Nixon and Congress authorized the Title X family planning program, which is the first federal program solely devoted to pregnancy prevention through availability of contraceptive education and services (Scales, 1981). In 1978, President Carter amended Title X to mandate that a portion of the education and services target single teens (Scales, 1981). President Carter approved funding for community-based educational pregnancy prevention programs for teens. The U.S. Department of Health and Human Services' Office of Population Affairs (OPA) oversees the Title X program (CDC, 2014). The Office of Population Affairs funds 4,200 family planning centers. Services are provided through a state, county, or local health department. Services are also provided at community health centers, Planned Parenthood centers, and hospital-based, school-based, faith-based, and private nonprofit organizations (CDC, 2014).

During 2005-2010, the CDC funded several organizations to implement science-based approaches to prevent teen pregnancy programs (CDC, 2011). The CDC provided state and local organizations with intensive training to help build their capacity and develop evidence-based prevention programs. Youth in schools and community settings received comprehensive sex education curricula or youth development programs (CDC, 2008b).

The CDC is partnered with the federal Office of the Assistant Secretary for Health (OASH) to reduce teenage pregnancy as part of the Teen Pregnancy Prevention Initiative (TPPI) for the years 2010 through 2015. The TPPI uses a model that incorporates a community wide initiate (CWI) that intends to reduce teen pregnancy among communities with the highest rates, which are the African American and Latino youth aged 15 to 19 years CDC, 2014).

The CWI has five components which are part of the Teen Pregnancy Prevention plan for 2010 through 2015 (CDC, 2014). The first component incorporates a community wide effort to address teen pregnancy prevention. This second component includes mobilizing resources, disseminating information, generating support, and fostering cooperation across public and private sectors in the community. The third component provides teens with informational programs that incorporate youth development and curriculum. The fourth component's goal is to increase youth access to contraceptive and reproductive health care services. The goal of the fifth component is to educate civic leaders, and parents regarding strategies to reduce teen pregnancy and to improve adolescent reproductive health, including needs and available resources in the target community. The sixth component addresses community partner awareness of the link between teen pregnancy and social determinants of health, and ensuring culturally and linguistically appropriate programs and reproductive health care services are available to youth (Centers for Disease Control, 2014).

The Center for Disease Control's (CDC) (2014) top ten priorities for teen pregnancy prevention address:

- Knowledge of sexual health, HIV, other STDs, and pregnancy (including methods of prevention).
- 2. Perception of HIV risk.
- 3. Personal values about sex and abstinence.
- 4. Attitudes toward condoms (pro and con...).
- 5. Perception of peer norms and sexual behavior.
- 6. Individual ability to refuse sex or limit number of partners.
- 1. Intent to abstain from sex or limit number of partners.

- Communication with parents or other adults about sex, condoms, and contraception.
- 3. Individual ability to avoid HIV/STD risk and risk behaviors.
- 4. Avoidance of places and situations that might lead to sex.

The Texas Health and Human Services, Department of State Health Services (2014) uses a systems approach to address teen pregnancy prevention by leveraging local partnerships and resources to collectively influence behaviors in young people that contribute to an impact on adolescent childbearing using a positive youth development framework. The initiative aims at increasing teens' knowledge, strengthening their relationships with parents and community, and providing positive role models.

#### Mesosystem

### Parental Involvement and School Accountability

Students' academic achievement is the primary goal of education. For students to be successful, teachers and schools need to ensure parental support for all students. To be effective partners in the education of their children, parents need to know what is expected at school so they can provide an environment conducive to learning at home. They also need to address factors which can impede students' academic success. One of these factors is teenage pregnancy. However, the actual ways in which schools and teachers effectively engage parents of teenagers is the subject of few studies. Even fewer studies have examined parental involvement at the middle and high school levels (Seitsinger, Felner, Brand, & Burns, 2008), and these are the grade levels where teenage pregnancy becomes prominent.

Bogart et al. (2007) recommend interventions that strengthen adolescents' connections with families and with school, and these interventions are more likely to reduce the risk of teen pregnancy. Hence, this research intends to investigate the unique

roles that parents or a significant caretaker play in communicating with teenagers or their children about sex and how the school may support that communication.

The United States Department of Education, Title I, Part A, contends that parental involvement is defined by No Child Left Behind (NCLB) as the "participation of parents in regular, two-way, meaningful communication involving students' academic learning and other school activities" (Neeley et al., 2007, p. 20). With the increased accountability demanded by NCLB, parental involvement becomes a key component that supports students' academic achievement. NCLB promotes active parental involvement in education, and the development of partnerships between educators and parents in the education of the children (Neeley et al., 2007). According to the Texas Education Agency and the Title I Statewide School Support Initiative, parental involvement in education includes the participation of parents or caretakers in every facet of the development and education of children from birth through adulthood (Neeley et al., 2007).

Title I offers federal funds to schools so they may actively involve parents in education. Parental education or involvement in schools needs to address issues that impact student achievement. Teen pregnancy is an issue that warrants schools actively involving parents and providing tools for parents to effectively support their children in remaining sexually abstinent. However, few studies have investigated the ways in which schools and teachers effectively engage parents at the middle and high school levels (Seitsinger et al., 2008). During the adolescent years, less parental guidance is offered to parents to assist their children with the issues surrounding sexual activity.

Mixed messages are being sent to teenagers. In some instances, sexual education materials promote abstinence, but at the same time the instructors give the message that sexual activity is permissible as long as the teenagers use condoms (Harper, Henderson,

Schalet, Becker, Stratton, & Raine, 2010). In one study, a nurse who worked in a health organization mentioned that she did not promote abstinence unless she saw a "cue" from the teenagers that indicated otherwise (Harper et al., 2010). Mixed messages are being sent to teenagers in regards to sexual abstinence and a clear message is received by teenagers to use protection (Evert & Stefanick, 2010, p. 103). Some parents also encourage abstinence but add the caveat, "but I know you're a teen, and you're probably going to end up doing it anyway; so just make sure to use protection" (Evert & Stefanick, 2010, p. 103). Thus, it is unclear if the sexual curriculum is effectively addressing adolescents who wish to refrain from sexual activity (Brady & Halpern-Felsher, 2008). Many teenagers view abstinence as synonymous with virginity, which may cause teens to believe an abstinence program is not for them (Evert & Stefanick, 2010, p. 103).

### **Exosystem**

#### **Media Factors**

The environment that surrounds teenagers is filled with sexual inferences (Brown et al., 2006; Helmich, 2009). Exposure to sexual content in the media (television, internet, magazines, music, etc.) may accelerate teenagers' sexual initiation (Brown et al., 2006; Chandra et al., 2008; Collins et al., 2004). Most movies with parental ratings of Parental Guidance 13 (PG 13) have sexual content. Thus, some materials may be inappropriate for children under 13 years (Motion Picture Association of America, 2013). "A PG-13 motion picture may go beyond the PG rating in theme, violence, nudity, sensuality, language, adult activity or other elements, but not reach the restricted (R) category" (Motion Picture Association of America, 2013, p. 1). At times, while a general audience movie or television show is playing, commercials show advertisements with sexual innuendo.

Moreover, access to sexual content on the internet is available without regard to the age of the individual who is accessing the information. There is limited research on how sexual content on television (TV) can affect teenage sexual activity and other reproductive health outcomes (Chandra et al., 2008). However, the research that has been done on this topic does confirm that watching sexual content on TV can predict teenagers' sexual involvement (Brown et al., 2006; Chandra et al., 2008; Collins et al., 2004). Results of a longitudinal study indicated that adolescents who viewed more sexual content at the baseline of the study were more likely to initiate intercourse and progress to more advanced sexual activities during the subsequent year (Collins et al., 2004). Adolescents who view considerable televised sexual content have an augmented risk of experiencing a pregnancy prior to age 20 (Chandra et al., 2008). High rates of exposure to sexual content in the media corresponded to twice the rate of pregnancies (Chandra et al., 2008). Exposure to TV that includes only talk about sex is correlated with the same risks as exposure to TV that usually depicts sexual behavior (Collins et al., 2004).

In addition to television, music, and movies, magazines also pressure adolescents toward becoming involved in sexual activity at an early age (Brown et al., 2006). However, in a study conducted with European-American and African American teenagers and the effects of media on their sexual activity decisions, African American teens do not appear to be as influenced by what they see and hear in the media (Brown et al., 2006). Brown et al. (2006) studied whether exposure to sexual content in television, movies, music, and magazines used by early adolescents predicted sexual behavior in middle adolescence. Participants in the Brown et al. study included 1,017 African American and Caucasian adolescents from 14 middle schools in North Carolina. Participants were interviewed when they were 12 to 14 years and 2 years later using

computer-assisted self-interviews. A measure of each teen's sexual media diet (SMD) was constructed by weighting the frequency of use of the media by the frequency of sexual content in each television show, movie, music album, and magazine the teens used regularly (Brown et al., 2006). Results indicated that Caucasian participants who were in the top quintile of SMD when 12 to 14 years old were 2.2 times more likely to have had sexual intercourse when 14 to 16. African American participants appeared to be more influenced by perceptions of their parents' expectations and their friends' sexual behavior than by what they see and hear in the media (Brown et al, 2006).

Cashman et al. (2011) conducted focus groups which were designed to provoke conversation about women's sexual health concerns and challenges. The sample included 43 Latinas who resided in North Carolina. Participants' ranged from 19 to 64 years of age. Results for this study indicated that sexual education literature in Spanish from institutional sources (e.g., school, educational programs, television, radio) is limited (Cashman et al., 2011). According to Cashman et al., this lack of information may lead to higher rates of sexual activity.

Brady and Halpern-Felsher (2008) examined the social and emotional consequences among adolescents of refraining from sexual activity. The sample included 612 adolescents of which 58% were females. Of the 612 participants, 40% were White, 17% Latino, 22% Asian/Pacific Islander, 3% African American, and 18% multiethnic or other ethnicity. The adolescents were interviewed four times for intervals of six months. Adolescents were interviewed during the fall and spring semester of ninth and tenth grade. The positive consequences included "had a good reputation," "had your friends proud of you," and "felt responsible" (Brady & Halpern-Felsher, 2008, p.164). The negative consequences included "had a partner get angry," "had a bad reputation," "felt regret," "felt left out of your group of friends," and "felt like you let your partner down"

(Brady & Halpern-Felsher, 2008, p.164). The percentage of the participants who reported having positive consequences for abstaining from sex reduced from 46% in the fall of ninth grade to 24% in the spring of 10<sup>th</sup> grade. For sexually experienced participants from the start of the study, positive consequences dropped from 37% to 6% and from 40% to 6% among participants who initiated sexual activity by the end of the study. Brady and Halpern-Felsher (2008) contend that adolescents may yield to peer-pressure and become sexually active because they experience substantial negative and few positive social and emotional consequences when they choose abstinence. The authors also mentioned that many boys tend to get angry with their girlfriends if they refuse sexual intimacy.

There is no question that teenagers have become more sexually active in the 21<sup>st</sup> century across all age groups (Pew Research Center, 2009). Young Latinos are told by their parents to "just say no" to sex, yet the media, their friends, and society foster the idea that sexual activity among teenagers is non-preventable (Evert & Stefanick, 2010). Teens are exposed to sexual content through media, pornography, and conflicting messages, they also talk about sex among themselves; however, the information acquired from these sources many times is inaccurate, unreasonable, or irresponsible (Helmich, 2009).

## Macrosystem

### **Cultural Factors**

Culture is another element that can influence teenagers' decisions to remain sexually abstinent or to become sexually active. Culture is the set of norms that guide people toward what is and what is not acceptable (Owens & Valeskey, 2007). Culture illustrates the dominant values and beliefs that are shared by members of a group and influences decisions and actions (Owen, & Valeskey, 2007).

#### **Traditional Latino Gender Roles**

In considering cultural factors that may influence teenaged Latinos to become sexually active or to remain sexually abstinent, it was necessary to review the traditional Latino gender roles. In considering how culture could have an impact on young Latinas' decisions to become sexually active, *marianismo* and *machismo* need to be discussed. *Marianismo* and *machismo* describe how Latinas and Latinos are traditionally encouraged to behave (Castillo, Perez, Castillo, & Ghosheh, 2010).

Marianismo describes female gender roles traditionally governed by norms (Castillo et al., 2010). Marianismo is a term that describes a set of values and norms associated with being a woman in Latin American culture (Rivas, 2008). It was initially adopted as a response to the term machismo (Rivas, 2008). Rivas (2008) affirmed that marianismo refers to the cultural expectation that a woman be passive and submissive along with being sexually pure. Gil and Vazquez (1996) assert that marianismo defines the ideal role of a woman and takes as its model the Virgin Mary. Women who are loving, caring, and docile are considered to reflect marianismo (Rivas, 2013). Hembrismo is a term used by Rivas (2008) to describe a positive aspect of marianismo. In hembrismo, women are conceptualized as strong, proactive individuals who shape their lives as well as those of others.

The majority of Latino parents expect their daughters to remain abstinent until married, whereas they are less protective of their sons (Wilson et al., 2010). Gil and Vazquez (1996) assert that Latinas often find themselves wanting to empower their daughters as much as their sons, but the Latino culture is pressuring mothers to treat boys and girls differently.

*Machismo* is a term that describes a set of values and norms traditionally associated with being a man in Latin American culture (Rivas, 2008). *Machismo* has

been described in the English language as a synonym for oppressive male supremacy (Gil & Vazquez, 1996). This term has been misinterpreted as synonymous with negative terminology such as "chauvinism, exaggerated aggressiveness, emotionally restrictive, controlling, homophobic" (Gallardo & Paoliello, 2008, p. 3), aggressive, sexist, chauvinistic, and hypermasculine (Arciniega, Anderson, Tovar-Blank, & Tracey, 2008). In the term *machismo*, men are expected to be active, aggressive, and sexually experienced (Rivas, 2008).

Gil and Vazquez (1996) add a positive side to *machismo* and describe men as being *caballeros*. The term *caballero* personifies the sensitive side of men who deify rather than denigrate their wives (Gil & Vázquez, 1996). *Caballeros* are the protectors of their families (Gil & Vásquez, 1996). They offer the best seats to their wives, stand up to give women their seats on the subway, carry heavy packages, always open the door for ladies, and help with the heavy household chores (Gil & Vazquez, 1996). Arciniega et al. (2008), state that *caballerismo* can be defined as nurturing, family centered, and loyal. Rivas (2008) also adds a positive description of *machismo* and describes Latino males as having honor, respect, bravery, dignity, and family responsibility.

Latinos around the world are known for their values on paternalism; however, the male dominance varies among Latinos in the United States (Pew Research Center, 2009). In a 2009 National Survey of Latinos when asked about whether the father should have the last word in family matters, 43% of Latinos agree with the statement and 56% disagree. The greatest difference was found among young Latino males with 50% agreeing and 24% of Latinas disagreeing (Pew Hispanic Center, 2009). Therefore, young males tend to have a more traditional view in regard to fathers having the last word when faced with a decision. Whereas, Latinos who are 20 and older and who have been living in the United States, disagree with the statement that fathers have the last word. Thus,

Latinos who have been living in the United States and who are 20 years or older, tend to not be as accepting of traditional male dominant values.

# Values, Attitudes, and Experiences of Latino Youths

In view of this research, it was necessary to consider the perspectives of Latino youth who are recent immigrants, as well as those who are first, second, or third generation regarding career, family, and religion because beliefs change according to generation. Latino teenagers' attitudes toward abortion, teen sexual behavior, and having children will be addressed in the following section.

The Pew Hispanic Center (2009) explored the values, attitudes, and experiences of America's next generation: the Millennials. The sample for the Pew Hispanic Center study was selected randomly from a nationally representative sample of 2,012 Latinos ages 16 and older. The sample included 1,240 Latinos ages 16 to 25. The Pew Hispanic Center (2009) conducted seven focus groups to help inform the development of the survey questionnaire and to ask young Latinos, ages 16 to 25, about issues that they considered important. The survey was conducted in English and Spanish, face to face and by telephone.

Survey findings indicate that Latino teenagers who are either immigrants or whose dominant language is Spanish tend to be more conservative, family-oriented, and more likely to adopt the values of *machismo/marianismo* than Latinos who are in the third and higher generation (Pew Hispanic Center, 2009). Second generation Latinos usually fall somewhere along a continuum between being conservative and non-conservative family-oriented individuals (Pew Hispanic Center, 2009). When asked how much value youth place on different types of goals and priorities in life, Latinos ages 16 to 19 generally rated career achievement higher than they rated marriage, children, and

religion. They also rated career success higher than they rated wealth (Pew Hispanic Center, 2009).

Additionally, 56% of Latinos ages 16 to 25 said abortion should be illegal in most cases, whereas 45% of the adults United States population agreed with this stance (Pew Forum on Religion & Public Life and the Pew Research Center for the People and the Press 2009). Nearly two-thirds (65%) of foreign-born Latinos ages 16 to 25 and 58% of second-generation Latinos say abortion should be illegal. In contrast, only 39% of thirdgeneration Latinos ages 16 to 25 hold this belief (Pew Research Center, 2009). More than 71% of Latinos ages 16 to 25 who primarily speak Spanish say they oppose abortion (The Pew Research Center, 2009). Sixty-one percent of Latinas believed abortion should be illegal whereas only 53% of Latino males concur with this belief (Pew Research Center, 2009). More than half (56%) of Latinos ages 16 to 25 see the increased number of teens having children in the United States as a negative impact on society, whereas about a third (35%) say teen pregnancy does not make much of a difference in society (Pew Research Center, 2009). Therefore, the data indicated that the longer a family is in the U.S., the more they approve of abortion (Pew Research Center, 2009). Generally, third generation Latinos tend to adopt the mainstream culture and begin leaving traditional Latino values (Pew Research Center, 2009).

Latino youths (ages 16 to 19) were much more accepting of teen sexual behavior than older Latinos (ages 20 to 25). While about 46% of Latino youths agreed or strongly agreed with the idea that teen sex is acceptable if those involved were in a serious relationship, only 26% or older Latinos felt this way (Pew Research Center, 2009). Tolerance for teenage sexual behaviors seemed to increase generationally with Latinos. Of Latino youths ages 16 to 25 who were immigrants, 38% agreed or strongly agreed that teen sex within a serious relationship is acceptable. In contrast 50% of the second

generation Latinos ages 16 to 25 and 53% of the third generation Latinos believed teen sex is acceptable within a serious relationship (Pew Research Center, 2009). However, Latinas ages 16 to 25 were less likely than Latino males ages 16 to 25 to approve of teen sex in either of these scenarios. While just over half (52%) of Latino males ages 16 to 25 agreed or strongly agreed with the idea that teen sex is acceptable if teens were in a serious relationship, only 39% of Latina females agreed. More than 63% of Latino males ages 16 to 25 believed teen sex is acceptable if the participants use protection; however, among Latina females, 48% believed teen sex is acceptable when participants use protection (Pew Research Center, 2009). Therefore, the results of the survey indicate that Latino males are more accepting of teen sexual behavior and that third generation Latinos think that teen sex is acceptable in a serious relationship.

Despite Latinos' high rate of teen parenthood, most Latino youths (ages 16 to 25) do not look positively upon having children prior to age 20. Three-fourths (75%) say that the frequency of teens having babies is "not good" for society, an opinion shared by 90% of the overall youth population in the U.S. (Pew Research Center, 2009). However, Latinos (ages 16 to 25) favor parenthood at a younger age than other youths (Pew Research Center, 2009). Among foreign-born youths, 70% believe that having babies as teenagers is bad for society. Seventy-four percent of second generation Latinos believe having babies as teenagers is "bad" for society compared to 87% among the third generation. Therefore, most Latinos believe that having babies prior to age 20 is "not good for society."

When questioned about the apparent impact of teen parenthood on achieving one's goals, the pattern persists. Sixty-two percent of immigrant youths (ages 16 to 25) think that becoming a teen parent prevents people from achieving their goals; 71% of the second generation and 78% of the third generation agree (Pew Research Center, 2009).

Forty-six percent of Latino youths believe that the ideal age for a woman to have her first child is between 22 and 25 years of age (Pew Research Center, 2009). The median ideal age for a man to have a child is 25, according to the perception of Latino youths, while youths in the general population, perceive the ideal age to have children is 28 years old (Pew Research Center, 2009). Therefore, most Latino youths do not look positively upon having children prior to age 20.

As noted, Latinos have different beliefs in regards to sexuality in comparison to the general population (Pew Research Center, 2009). Rawson and Liamputtong (2010) recommend that sexual education be culturally appropriate and accessible, taking into consideration cultural norms regarding gender and cultural matters. Helmich (2009) states sexual education should reflect and respect the values of the specific community, the families who live there, the sub-parts of the community, and faith communities. Sexual education presented to the Latino community needs to include Latino values related to sexual education and suggest programs that support parents' goals for their adolescents to abstain from sexual activity (Evert & Stefanick, 2010; Helmich, 2009; Rawson & Liamputtong, 2010). Latinos need teen pregnancy prevention programs that incorporate the Latino culture and incorporate factors such as the central role of the family (Guilamo-Ramos, Goldberg, Lee, McCarthy, & Leavitt, 2012).

Most parents from the general population hope their adolescent girls will remain abstinent at least through high school; in contrast, the social environment surrounding girls promotes and accepts sexual activity (Evert & Stefanick, 2010). Although young girls understand they are to abstain from sex until they are married or become adults, these same girls lack the knowledge and skills to achieve their goal. These conflicting views may burden a young girl to choose between the family culture and the social pressures. More than 50% of teenagers contend they want to remain sexually abstinent

(Evert & Stefanick, 2010). Yet the question remains: How can educational institutions support students who want to remain sexually abstinent in reaching their goal of abstinence?

There are limited studies that explore cultural factors that may shape sexual behavior of Latinas. Rawson and Liamputtong (2010) examined the factors which shape the sexual behavior of Vietnamese Australian young women living in Australia. Although Rawson and Liamputtong studied Vietnamese girls living in Australia, similar results could be relevant to Latinas' sexual experiences here in the United States. The participants in Rawson and Liamputtong's study included 15 Vietnamese Australian women ages 18 to 25 years. The in-depth interviews illustrated three key elements involved in the acquisition of knowledge of sexual issues among the Vietnamese young women: accepting parental silence, exploring sources of knowledge and needing culturally targeted information. The participants communicated the desire to discuss sexual issues but accepted the cultural familial norm not to speak about sexual matters. Consequently, participants sought sexual information from peers, school and the media (Rawson & Liamputtong, 2010). Participants stressed the importance of having access to culturally appropriate and adequate sexual discussions so they may make informed decisions about their sexual lives. Rawson and Liamputtong (2010) suggest that sex education programs need to consider appropriate means to effectively provide sex education that reflects cultural values. The ideal person to deliver this information should also be considered (Rawson & Liamputtong, 2010). The sexual education programs that are regularly used in schools in the United States do not discuss the problems associated with casual sex, with the merits of abstinence, or the connection of sex to marriage, intimacy, relationships, and emotional health (Evert & Stefanick, 2010). Some sexual education programs used in schools discuss delaying sexual activity and suggest other

ways to be affectionate, while disseminating information regarding condom use (Harper, 2010).

Bogart et al. (2007) examined the association between sexual abstinence until the end of high school and mental health at age 29. The sample included 1,917 adolescents ranging from 13 years of age through 29. Results of this study indicated that women who had abstained from sexual relations during high school had more positive mental health at age 29. To assess the mental health at age 29, Borgart et al. used the MHI-5 (alpha = .83) which is well validated. Twenty-one percent of women reported being sexually abstinent in adolescence (ages 13 to 18) (Borgart et al., 2007). Adolescent abstinence was a significant bivariate predictor of adult mental health for women (b = .15, SE = .05, p < .05.01. In fact girls who had higher grades and educational aspirations at age 13 were more likely to abstain from sexual intercourse throughout adolescence and to report better mental health. To assess family bonding, participants indicated whether they were living with both mother and father. Parental communication was assessed by asking participants whether they would talk to their parents if they had a personal problem (Bogart et al., 2007). When the association between abstinence and mental health was significant, Bogart et al. examined the relationship between each of the proposed explanatory variables (i.e., educational prospects, and family bonding). Results of this study also indicated that families and schools play an essential role in promoting teenagers' health. Therefore, Bogart et al, recommend that schools strengthen adolescents' connections between schools and families as an intervention. Bogart et al. also mentioned that "stable families and strong parent-child relationships may set up an environment in which the child has the resources, support, and motivation to avoid sexual activity and to achieve high educational levels" (Bogart et al., 2007, p. 295).

#### **Boundaries**

The existence or non-existence of boundaries within a family and set by that family may have an impact upon the Latinas' decisions to become sexually active or to remain sexually abstinent. The word boundary is used as a means of stating, "the rules that parents set where children are expected not to go beyond a limit of time, space, activity or personal contact" (McKie & Cunningham-Burley, p. 81, 2005). Caring, loving parents that support their offspring appear to give strong and consistently maintained boundaries. If the child moves outside of the boundaries, or if there are no boundaries, dire results await (McKie & Cunningham-Burley, 2005). In the analyzation of child temperament types with the resultant assessment and measurements of child and parental personalities or temperaments, an effective boundary, feasible to both the parent and child can be formulated and somewhat easily maintained (Rettew, 2013). Thus, for the purposes of this research, it is necessary only to note the fact that parent-child temperament and personality might play a limited role in boundary acceptance or rejection, most specifically with the sexually active participants.

### Summary

The literature reviewed how the environment through the media influences teenagers in their decisions to become sexually active. The second section dealt with the impact that the culture may have on sexual education that is provided to Latino teenagers and how this may in turn impact Latinos' decisions to become sexually active. Latino traditional gender roles and the impact that these roles may have on Latina pregnancies was reviewed. The perspectives of Latinos between the ages of 16 through 25 on career, family, and religion were addressed. The third section addressed the lack of parental involvement in regards to sexual education promoted in schools during the teenage years and how this may impact teenage Latina pregnancies.

#### CHAPTER III:

#### **METHODOLOGY**

The purpose of this qualitative inquiry was to examine the factors that contributed to four Latinas' decisions to remain sexually abstinent or active during their teenage years. Teenage pregnancy rates have decreased for non-Hispanic teenagers; however, rates have remained relatively high among Latina teenagers (Hamilton et al., 2014; Ventura et al., 2009). A review of the literature indicates there are limited studies that address Latina teenagers' decisions to become sexually active. There is even less research that examines the factors that contribute to teenaged Latinas' decisions to remain sexually abstinent. This research sought to explore the factors that contributed to Latina teenagers' decisions to remain sexually abstinent or to become sexually active during their teenage years.

This chapter describes methods that were used to identify the key factors that contributed to teenage Latinas' sexual activity decisions. This chapter is divided into four sections. The first section addresses the methodologies which include critical inquiry, life story method, and critical life story method. The characteristics of the participants and recruitment techniques are described in the second section. Third, the procedures for data collection and analysis are described. Finally, ethical considerations are reviewed.

## Methodology

Methodology describes the broad theoretical and philosophical agenda researchers use when conducting an investigation (Allen, Chapman, Francis, & O'Connor, 2008). The method is the arrangement and the procedure by which the inquiry is conducted (Allen et al., 2008). A research question emits the methodology, the theoretical and philosophical framework, and therefore, the methods adopted for the study (Denzin &

Lincoln, 2000; Minichiello, Sullivan, Greenwood, & Axford, 2004; Polit & Beck, 2004). Latinas are a minority group that may be influenced in their decisions to become sexually active or remain sexually abstinent by the environment that surrounds them. The media, the culture, and even sex education courses too often communicate a message that encourages sexual experimentation (Jemmott, Jemmott, & Fong, 2010).

This investigation used a qualitative research design to investigate factors that contributed to Latina teenagers' decisions to remain abstinent or become sexually active. Traditional quantitative methods have been considered very successful in many of the natural sciences; yet, Yanchar, Gantt, and Clay (2005) note that quantitative methods seem to be limited in the investigation of human experience. Qualitative studies take the natural setting into consideration which thereby permits investigators to attain very detailed accounts of human experience (Berg, 1998; Bernard, 2000; Denzin & Lincoln, 1994). Additionally, qualitative methods allow both the researcher and participant to connect with each other in the common language of everyday experience and understanding, rather than in the often simulated and limited language of numbers (Yanchar et al., 2005). Researchers such as Hoshmand and Polkinghorne (1992), view the communication and interaction between the researcher and the participants in a qualitative study as strengths of qualitative investigations (Slife & Gantt, 1999). In qualitative research, participants are not required to translate their experience into an unfamiliar mathematical language (Yanchar et al., 2005). Furthermore, this strategy minimizes the need for both researcher and participant to interact at an artificial level of discourse removed from the experiential level of the phenomena under investigation (Yanchar et al., 2005). Also qualitative research design involves the examination of human behavior, which is nested in ethnic, cultural and gender issues, as it relates to sexuality all of which are complex and sensitive issues (Power, 2002; Rawson &

Liamputtong, 2010). Thus, this design was most appropriate for this study because it allowed the researcher to explore factors that shaped the sexual behavior of Latina teenagers and examined the factors that contributed to Latinas' sexual activity decisions during their adolescent years.

To examine the aforementioned factors, the researcher employed thick description to engage participants in discussion, rather than the anonymous completion of a questionnaire (Rawson & Liamputtong, 2010). "Thick description" of human behavior used by Geertz (1973) allowed the researcher to describe a behavior and the context where the behavior was implemented such that the behaviors became meaningful to an outsider. Through this inquiry, the researcher learned from the experiences of Latina teenagers who were living in a major southeastern metropolitan area (Charmaz, 2006; Denzin, & Lincoln, 1994; Liamputtong & Ezzy, 2005; Rawson & Liamputtong, 2010).

This qualitative inquiry used critical theory as the epistemological underpinning to elicit Latinas' perspectives of their decision to remain sexually active or abstinent. Critical theory allowed the researcher to understand these four Latinas' realities regarding their sexual activity decisions during their teenage years within a larger context of structural and systematic inequality within and beyond educational institutions. According to critical anthology, reality is constructed through social structures, such as political, economic, cultural, ethnic, and gender (Cohn, & Crabtree, 2006). This research looked at Latinas' decisions to become sexually active or remain sexually abstinent during their teenage years and how these Latinas' decisions were made in accordance with their values and whether outside forces or conditions impacted their choice. Specifically, this research considered whether the media, culture, gender, family, and religion influenced these Latinas' sexual activity decisions in an inequitable way. For the Latinas who had a child and the Latinas who remained sexually abstinent during

their teenage years, the question remained the same, what social forces or structures had a "power over" and limited Latinas' options? As an investigator what I knew and believed might have skewed the direction of the investigation as noted in Cohn and Crabtree (2006); however, peer check with the doctoral committee was implemented after each analysis as was further explained in the data collection. This research was not about judging the participants' sexual activity decisions, but about what reality is and how knowledge can be added to what the assumed reality was.

Additionally, the use of life story, along with *testimonios* methods, served as a way to permit participants to share their past life experiences in a qualitative manner. The voice of Latinas was missing in the literature in regards to teenage pregnancy, critical life story and *testimonios* methods allowed their stories to be told and might help the reader understand their decisions regarding sexual activity.

# **Critical Life Story Method**

This study integrated Linde's (1993) life story method into Carspecken's (1996) critical methodology. This incorporation was necessary to adequately and accurately capture the stories that explicated Latina teenagers' decision to remain abstinent or become sexually active. While both Linde (1993) and Carspecken (1996) put forth methods that delved beneath the surface to highlight the voices of participants, neither was sufficient, for this study, on its own.

Specifically, critical methods (Carspecken, 1996) study beneath the surface of a narrative to examine the power relations and influences affecting experiences. Using field methods helped the researcher to identify not only culture, the 'consciousness' or the 'lived experiences' of others, but also exposed the political, social and material disempowerment of individuals and disadvantaged groups in order to elicit adjustments or transformation (Allen et al., 2008). Critical methods aim to equip participants with a

heightened awareness of the ways in which their daily lives are constructed (Holmes & Smyth, 2011). Through life story and *testimonos*, the participants reflected on past events and provided a description of the events from their perspective. The researcher interpreted the reflection from the perspective of the theoretical framework (Yanchar et al., 2005).

"Life stories express our sense of self: who we are and how we got that way" (Linde, 1993, p. 3).

Linde's (1993) life story method, on the other hand, expedited both theoretical and practical support for conducting interview only research. Life story method is a constantly evolving oral form of self-expression and requires an audience (Linde, 1993). The type of audience determines what life stories an individual will emphasize or what parts of the story will be left out (Linde, 1993). Additionally, Linde (1993) mentions that in order to convey a story an entire life must be reduced to parts deemed socially noteworthy to explain particular results in the individual's life. The types of elements that were integrated when sharing a life story are culturally bound because the story must conform to cultural conventions of storytelling (Linde, 1993). The elements of a story are sometimes added, removed, and reframed through time to keep the story consistent with the teller's view of self. The life story is the way individuals position themselves within their life for understanding and validation of others and for their own understating of their past, present, and future (Linde, 1993). The "truth" of the story is in the significance it holds for the individual who shares the story and the navigation through social condition displayed by the story itself (Linde, 1993). Whether or not told events "really" happened as reported were not the focus of this approach, but rather the significant meaning the story had to the storyteller. Life story method gave voice to

groups by sharing their story but lacked the critical perspective to locate that voice within a larger socio-political context.

Given the unique experiences of Latinas, critical, life story and *testimonios* methods were needed to uniquely respond to the needs of the Latino population (Crotty, 1998). By combining Carspecken's critical methods with Linde's life story method, the researcher was able to identify the social and cultural factors that influenced the participants' decisions (Payne, 2002).

Recruitment Techniques. Following institutional review board (IRB) approval, participants were recruited using recruitment posters, brochures, and flyers posted at urban community centers, schools, and area health care centers as previously done in Morrison-Beedy, Cote-Arsenault, Seibold-Simpson, and Robison (2007). Morrison-Beedy et al. studied sexual abstinence in urban adolescent girls. The researcher, for this study, used snowball or chain sampling (Litchman, 2010), which means that participants were asked to recommend other Latinas who they knew meet the criteria for participantion in this study. Since snowball sampling was used to recruit participants, a group of the participants had similar demographics (Minichiello et al., 2004) such as socioeconomic status, parents' educational levels, being first or second migrant generation, and living in the same geographical area in Texas. Snowball sampling was used as a recruitment technique in which the researcher utilized any opportunity to enhance recruitment. Similar sampling techniques have been implemented in sexual health and socialization research undertaken with minority youths (Rawson & Liamputtong, 2010).

# **Participants**

Four Latina women between the ages 20-30 years from a major southwestern metropolitan area were recruited for this study. From the pool of recruited volunteers, extreme case sampling (Carspecken, 1996) was used to select the participants for the

study. Specifically, two participants who remained sexually abstinent and two participants who had a child during their teenage years were selected to participate in this study. Latinas who remain abstinent were self-identified in meeting the requirements for the study. This study focused only on heterosexual young women who had a child and those who remained sexually abstinent during their teenage years.

Furthermore, extreme case sampling was useful in illustrating the polarities or differences and similarities between the participants (Mills, Durepos, & Wiebe, 2010). Moreover, the following demographic information, as shown in Table 1, was gathered from each participant:

Table 1

Demographic Characteristics

Participant	Age	Migrant Generation	Parents' Marital Status	Sibling Had a Child During Teenage Years
Scarlet	22	First	Married	No
Bertha	22	Second	Married	No
Claudia	27	First	Divorced	Yes
Dalia	26	First	Divorced	No

## **Data Collection**

To examine the factors that contributed to Latina teenagers' decisions to remain abstinent or become sexually active, in-depth interviews allowed the researcher to focus on the life experiences and social behavior of the participants, and to hear what they had to say. Also, interviews allowed the researcher to acknowledge the issues under

investigation through the participants' perspective (Lichtman, 2010; Munhall, 2001). Life Story along with *testimonios* methodology were used to elicit the participants' reasons for remaining sexually abstinent or becoming sexually active during their adolescent years.

According to Carspecken (1996), the most effective way to use qualitative interviews is to "get participants to describe events they remember taking part in: to begin at a concrete level where a specific action situation is recalled and then to work toward articulations of interpretative schema that the subject applies in many diverse situations" (p. 41). The idea of having general or non-leading questions was to allow the participants to direct their stories towards the events which were most significant to them, rather than being directed toward an event centered by the researcher. Lead off questions encouraged the participants to think about specific experiences related to high school. Paraphrasing was used to delve further into areas of particular interest or the covert interest and gain clarification when those areas were introduced by the participant. Questions specifically about sexuality were asked only after the participant introduced the topic as central to an area of her story. The stories that participants shared were theirs, created through the interaction with the researcher.

Example of an Introductory Question

<u>Lead-off Question:</u> When you think about high school, what specific experiences come to mind? Can you describe those for me?

<u>Covert Interest:</u> For the participants, the experiences most associated with high school might be related to gender, identity, self-concept, self-esteem, isolation, fear,

presentation of self, sexual experience, measuring self against others, performance, accomplishment, academic, extracurricular, failure, success, awareness of difference, and family. Exploration of these types of involvements also related to the idea of identity development and the tendencies to become sexually active or remain sexually abstinent. Appendix A includes information on topic domains, lead-off questions and covert categories that addressed the influence of school, parents, peers, Latino and United States culture, and media on sexual activity.

Each participant was interviewed twice. To ensure comfort, the interviews were conducted at a location preferred by the interviewee. An interview guide was used to consider a list of topics deemed pivotal to the research questions, with new topics being added to the guide as the interviews progressed. The interview guide was developed using Carspecken's (1996) sample questions (see Appendix A). Additionally topic domains were developed using themes gathered from the literature review, and others were edited to align closely with critical life story methods. The data collection timeline appears in Appendix B.

During the first interview, the researcher explored how experiences with race, gender, nativism, and class emerged in the participants' experiences with sexual activity during their teenage years. The first interview was used to lead the participants to look back at the incident, and what conditions were present that influenced their decisions to become sexually active or remain sexually abstinent.

The researcher inquired and worked toward articulation of "interpretative schemas that the subject applies in many diverse situations" (Carspecken, 1996, p. 39) by having

asked about thoughts and feelings that came to mind at the moment of a significant event and recalling other instances where those thoughts and feelings occurred. *Testimonios* allowed the researcher to explore the stories of the participants in light of emotions, spirit, and struggles (Huber, 2009).

Testimonios were audio-taped with the consent of the participants and transcribed verbatim. Notes were taken during the interview, documenting physical movements and expression that would not be captured on audio recording (Carspecken, 1996). At the beginning of the first interview, participants were asked to provide demographic information such as age, ethnicity, parents' highest educational level, socioeconomic level, migration generation, parents' and participants' nativity origin, and parents' marital status at the time participants were teenagers.

During the second interview, member checks were utilized to ensure that each interviewee's perspective was accurately noted. During the member checks, the interviewer went back to the interviewees and shared their *testimonios* from the initial interviews (Lichtman, 2010). The interviewer asked clarifying responses when necessary. It was important to have done member checks because the participant might have said something and meant something else. Clarification of meaning could be possible once one hears oneself. In addition to member checks, peer debriefing where the researcher consulted with the methodologist, the doctoral committee, and other Latina doctoral students looked at the data, debrief, and explored coding together. Together, member checks and peer debrief, helped distill articulated meaning and imparted the final reconstructions with support. Carspecken's guidance for life history based research

allowed for analyzing a shared culture that could itself not be evident through interview analysis.

After having done the members check, the researcher had a visual representation that showed a picture of the factors that participants mentioned during the first interview and participants described the settings and its impact on their sexual activity decisions. For example, the interviewer said, "Here is a diagram of the community or the environment you talked about in the first interview that appeared to have had an impact in your sexual activity decision. Can you give me a description of how these elements played a role in your decision to remain sexually abstinent or sexually active, explain everything about each setting? You can add items/settings that are important to you that I have missed." The transcriptions were checked against the recording for accuracy and inflection, and matched with the notes taken during the interview.

Data collection involved the use of Lichtman's (2010) six steps in obtaining interviews or raw data. Data collection and analysis would have, at times, occurred concurrently. Each *testimonio* was transcribed and coded using *a prior* codes taken from the theoretical framework – the ecological model (figure 1). The researcher annotated field notes and added reflective notes within the same day of the interview. Each interview was read independently of the other interviews to allow themes within each interview to emerge (Carspecken, 1996). Field notes allowed the researcher to capture nuances, voice inflections, pauses, etc. that were not captured in written transcripts. Following this initial round of analysis, a second round occurred in which data not aligned to the ecological model was identified and coded. A list of categories or central

ideas was developed in the third step. Modifying the initial list based on additional rereading was the fourth step. Revisiting the categories and subcategories was the fifth step. Finally, concepts or themes were derived from categories. Thus, raw data was analyzed to identify codes, then these codes identified categories, and the categories yielded concepts (Lichman, 2010).

## **Data Analysis**

Carspecken's critical qualitative research method analysis consists of five stages. The first stage is called the cultural reconstruction stage, involves the researcher as a nonparticipant observer of the surroundings (Carspecken, 1996). In the second stage, the researcher interprets the observations from the first stage. The third stage includes interviews and reflections as well as participant observations. The fourth stage involves system analysis between cultures. In the fourth stage, the researcher describes system relations to the broader context. The fifth stage links findings to existing macro level theories. Although Carspecken, (1996) identifies five stages of analysis to a critical qualitative research method, this study only used stage four see Table 2.

Carspecken's Stage 4 analysis involves finding relationships between different social sites within a social system (Carspecken, 1996). Those social sites included physical sites, or sites of cultural production such as TV shows, movies, books, etc. The examination of the role of media in furthering the sense of sexual activity experienced by the participants in this study was addressed. In fact, initial coding was guided by *a priori* codes informed by the ecological model. This research only considered how the individual beliefs and behaviors were influenced by family, extended family, peers, school, health services, media, and culture of the Ecological Model.

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Table 2 Carspecken's Five Stages of Critical Qualitative Research

Stage	Called	Researcher's Role	Researcher's
			Application
1	Cultural	Non participant	Not applicable
	reconstruction	observer of the	
		surrounding	
2	Cultural	Interpretation	Not applicable
	reconstruction		
3	Cultural	Dialogical data	Not applicable
	reconstruction	generation	
4	Systems analysis	Describe systems	Conduct systems
		relations to broader	analysis between
		context	locales/sites/cultures
			(discovery)
5	System analysis	Explain relational	Not applicable
		systems	

The Ecological Systems Theory provided *a priori* codes and critical theory guided the analysis. See Appendix D for the codebook that was used for initial coding. The emerging themes were catalogued with notations indicating the frequency with which each theme emerged (Carspecken, 1996). The themes that were analyzed depended on the

frequency, emphasis, perceived emotional response, and connection between themes. Low, medium, and higher level-coding were noted depending on the participants' emphasis or how important the participant indicated the theme to be. Low level-coding required little abstraction because the coding fell close to the primary record. Thus, minimal interpretation was needed (Carspecken, 1996). High level-coding was dependent on a higher level of abstraction and required more interpretation and needed more inference. When the participant had an emotional response to the theme and when there was a connection between themes, higher inferences were annotated.

The researcher acted as a facilitator who constructed a supportive and safe normative environment for the participants and helped "them to explore issues with their own vocabulary, their own metaphors, and their own ideas" (Carspecken, 1996, p. 155). According to Carspecken, a skilled researcher will respond to things said rather than asking irrelevant questions. This approach allowed the cultural themes operating within the informants' life to have been discovered through their own words and evoked experiences. The analysis was reconstructive because it described those cultural themes and system factors that were not apparent and that were usually implicit to the participants themselves (Carspecken, 1996); hence, putting previously unstated factors into linguistic representation was reconstructive.

After the first interview, the *testimonios* were analyzed to attend to categories, and reflections created by the researcher as previously done by Huber (2009) in her use of *testimonios* as a method. During the second interview, the researcher read aloud the reflection and the participants were given time to respond. These reflections were shared with the participants during the second interview as a form of collaborative data analysis.

Themes within each interview were investigated in the order the theme appeared. As the participants became comfortable, they were more willing to share inconsistencies in self-conception. According to Carpecken (1996, p. 75), "It is extremely common to find that what people will say about their attitudes and feelings during the initial stages of an interview alters a great deal by the end, and this without the use any 'leading' questions on the interviewers part."

Meaning reconstruction was used to address some text portions relevant to all major emergent themes within each interview, examining all the possible "meaning," taking into account the gestures, tone, and timing within the interview of the text being reconstructed (Carspecken, 1996, p. 97). The goal of meaning reconstruction was to take the 'position of the actor,' and to having articulated all possible meanings for a given statement/story as well as the claims to truth implicit in those meanings.

### **Ethical Issues**

The researcher obtained permission from the institutional review board (IRB) and from the participants to conduct this research. To protect the privacy of the interviewed women, participants' names were coded with pseudonyms. Information that corresponds to the participants are kept in a locked file cabinet in the researcher's office.

Included in this chapter was the methodology used to identify the factors that contributed to teenage Latinas' decisions about sexual activity. The researcher discussed the sample being used, data collection, instrumentation, data analysis procedures, and the ethical considerations.

#### CHAPTER IV:

#### **RESULTS**

This was a qualitative research study that sought to investigate factors that contributed to teenaged Latinas' decisions to remain sexually abstinent or to become sexually active. Four Latinas between the ages of 20 and 30 years were interviewed to share their life story or *testimonio* regarding their teenage years and their sexual activity decisions. Participants described life events that led to sexual abstinence or activity. Two of the Latinas remained sexually abstinent, and two had a child during their teenage years.

Participants chose the place where they felt comfortable being interviewed. Their presentation of self and physical descriptions initiated the results section. The results from the topic domain interview questions, i.e. concerning the influence of parents or significant caretaker, high school experience, sexual education at school, peer influence, media, and cultural expectations are individually presented. These topic domains produced emergent sub-themes that became evident during the interviews. Results are presented in order of interview within the topic domains.

Pseudonyms were given to the participants to protect their privacy: Scarlet, Bertha, Claudia, and Dalia. Scarlet and Bertha remained sexually abstinent and were each interviewed separately first because they were the first group to be identified. Claudia and Dalia each had a child during their teenage years, and they were each interviewed after Scarlet and Bertha.

# Participants' Presentation of Self and Physical Descriptions

Scarlet agreed to be interviewed at the university that she currently attends. She picked an outdoor site but soon realized that it was going to be hot and guided me indoors while apologizing for the change. We sat in a foyer at the entrance of a building that was

quiet and private. We sat side by side on individual couches, and she faced me. When asked about sexuality topics, she appeared shy and would occasionally giggle after her answer. She was dressed casually in jeans. Her makeup was light and conservative, and she appeared to only be wearing mascara.

Bertha agreed to be interviewed at the university she attends. She had to work at the last minute and insisted on being interviewed while working. She worked at the front desk of the university dorms. Bertha immediately stated that she was comfortable talking about her decision to remain abstinent and assured me that she was not embarrassed to talk about this while people were occasionally checking in at the front desk. I would pause the recording while she attended to people coming in. After 45 minutes, a friend took over her job. We sat in an outside patio at a small round table. Since the interview was before the semester started, the patio was empty. She was wearing shorts and a sleeveless shirt. She had no makeup on and had her hair pulled back in a ponytail.

Claudia agreed to be interviewed in my office. She came with her four-year old son, who was entertained with YouTube videos during the interview. Claudia seemed comfortable talking about her teenage years and her experience with sex. We sat side by side at a small round table. During most of the interview, she kept her hands on the table with one hand embracing the other hand. She was dressed casually in jeans and a gray shirt. She had makeup on, including painted eyebrows and purple lipstick.

Dalia decided to be interviewed at an ice-cream parlor. She brought her two-year old daughter. We sat across from each other at a small table, in a section designed for children with an area for drawing. During the interview, Dalia attended to her daughter while she described her experience with sex. She seemed comfortable talking about her teenage years and her experiences with sex. She wore spandex pants and a tee-shirt as if

she was going to the gym. Her makeup was heavily applied, and she was wearing a baseball cap.

The physical descriptions and presentation of self during the interview was noted as it possibly pertains to the self-esteem they have attained at this stage of their life. Both of the participants who remained abstinent were dressed casually and used very little make up while the participants who had a child during their teenaged years had heavily applied make up.

# **Demographics of the Participants Who Remained Sexually Abstinent**

Scarlet and Bertha had similar demographic statistics. They grew up in large cities and attended public schools. Both of the participants' parents had a bachelor's degree.

Scarlet was born in Oklahoma but moved to Katy, Texas, after the age of six. She identifies herself as Latina. Scarlet did not specify why she identifies herself as Latina, it is possibly because of the prevalence of Latino culture in the Houston area. Her mother was born in Peru, and her father was born in Iran. Both of Scarlet's parents have a college degree. Her father is an engineer, and her mother is a school teacher. She attended private school during her elementary and intermediate school years. She was homeschooled for six months when she and her family moved to Katy and again when she was in seventh grade. Scarlet attended public school during her high school years. At the time of the interview, Scarlet was attending a private university in Houston, Texas. She had completed her graduate degree in Arts and had been accepted into a Master's program, where she is pursuing a degree in education. Bertha's background was similar to Scarlet's.

Bertha also lived in a suburban area near Houston. She was born in Houston and her family has lived in the United States for at least two generations. Bertha's great-

grandmother was born in Mexico. Bertha grew up in a predominantly Latino community. Her father attended a trade school to become an electrician. Bertha's mother was a housewife and took care of her family. After first grade, Bertha attended Vanguard, a school for gifted and talented students. She attended a charter high school. At the time of the interview, she attended a private university in Houston, Texas. She completed her Bachelor of Science degree in hopes of continuing her education as a physical therapist.

## **High School Years**

Scarlet was involved in band and church choir during high school. She mentioned being occupied most days with band practice. She did not date during high school although she had the opportunity to date. She stated, "...there were guys that I would have gone out with because they were, like, morally sound, and they were, like, um good Catholic, and, like they had the certain attributes that I would have said yes to." She also mentioned struggling academically and working hard to keep passing grades.

Compared to Scarlet, Bertha had a uniquely different experience in high school. Bertha attended a high school for gifted and talented students. The curriculum at the school she attended focused on health and medicine. As part of Bertha's high school experience, she volunteered as a health technician in a local hospital. She was exposed to injured people and mothers in labor. She recalls knowing about different sexually transmitted diseases and being conscious of the risk of being sexually active and acquiring sexually transmitted diseases.

### **Data Analysis of Abstinent Participants**

Of the six topic domains: influence of parents or significant caretaker, high school experience, sexual education at school, peer influence, media, and cultural expectations, immediate family is the most prevalent factor that influences the Latinas in this study to remain sexually abstinent. In their second interviews, the participants confirmed the

initial finding of the investigator that their immediate family had a great influence on their decision to remain sexually abstinent.

### The Influence of the Immediate Family

Both participants who remained sexually abstinent had a close relationship with their parents. Both participants mentioned feeling loved by their parents. Scarlet said, regarding her parents, "I love them both, and I know they love me, which is good. It's very, very good." Bertha also mentioned that she loved her family in two consecutive sentences, "I do love my parents...I really just value my parents," She mentioned that she is blessed to have her "little niche in her family," possibly alluding to the fact that her family is so supportive that she feels safe, in having her own place at home and in the family. During the second interview, Bertha stressed that her family has given her so much support that she would not want to disappoint them in any way. She also wants to set an example of abstinence for her own children. Both Bertha and Scarlet's parents talked about sexual topics during the participants' preadolescent years.

The parents of both participants had, for the most part, indirect conversations with them regarding sexual education, having chosen relevant informational venues. For example, when Scarlet was 12 years old, her mother took her to a group talk at her church where they talked about sexual intimacy and the importance of remaining abstinent. She described the group having been mothers with their daughters. They showed a PowerPoint presentation. Scarlet remembers not really understanding what they were saying and feeling more confused. In the second interview, Scarlet remembered that she asked her mother while in the meeting if she could get pregnant by kissing someone and her mother explained that just kissing someone did not cause pregnancy. Scarlet's mother explained how the sperm is transmitted into the woman.

After this explanation, Scarlet understood, and said, "Oh, that makes sense." Scarlet affirmed that her parents had been good teachers of sexual education topics.

Scarlet's parents had a unique involvement in their church that further aided in their ease at having conversations regarding sexual topics. She shared that her parents are teachers of Natural Family Planning (NFP) at church. She explained that NFP is a program that couples attend before they get married to learn about sexuality and fertility cycles. Scarlet also recalled how one time her father had looked a little distressed when reflecting on abortions and how some girls feel they do not have support to have a baby. Then her father told her, "If it ever did happen, don't have an abortion. I'm going to help you out." Scarlet knew she did not want to have a baby before she got married, but felt reassured by her father's remark. Since her parents instructed her on the fertility cycles of a woman, she knew from a very young age that there are times of the month when women are fertile and will become pregnant if they are sexually active. Since she is the oldest daughter, she also witnessed her mother's pregnancies.

While Scarlet's parents had one direct conversation that she recalled, Bertha's parents had only indirect conversations in regard to sexual education topics. Bertha did not recall her parents having a direct conversation regarding sexual education. In fact, Bertha's mother repeated a Mexican saying, "El hombre llega hasta donde la mujer quiere." (a man goes as far as a woman lets him). However, there were rituals that her mother and sisters participated in that aided in her decision to remain sexually abstinent. She recalled wanting a purity ring when she was eight years old because she saw her older sisters getting one. Even though she did not understand the significance of a purity ring at the age of eight, she saw it was special. Bertha got her purity ring when she was in eighth grade and was aware of the significance of the purity ring. She described the ring as being a James Avery ring that was gold and silver and had a cross on it. Bertha

noted that her sisters have been a great example in her remaining sexually abstinent.

Bertha firmly stated with a proud smile, "Both of my sisters remained abstinent until they got married."

There was a particular experience with her mother and sisters that stands out in Bertha's mind regarding sexual intimacy. Bertha remembers that the first time she heard about a sexual topic was with her mother and sisters. Bertha's sister was going to get married, and she had a bachelorette party. Bertha remembers being embarrassed seeing that her sister got edible underwear; both her mom and sisters laughed. Bertha exclaimed, "Ew, you guys are gross." This incident indicated that sexuality was not a taboo topic in her family and established openness between her and her mother and sisters.

Bertha also felt trusted by her parents. Bertha had an apartment on the second floor of the house, and her parents allowed her to have male friends over. She was involved with soccer and had friends who visited her. There was one incident when her parents did send her brother to be in her apartment while one of her friends visited her because they knew she was dating him. Bertha's boyfriend participated in the youth group in their church. While sharing about this incident, her voice got shaky, her eyes teary, and she did not mention his name initially. She explained that he was going through a tough time, and she was being supportive. His father was an alcoholic and at times he did not have food in his house. Bertha fed him in her apartment. She appeared to be disappointed, sad, and annoyed that her parents sent her brother while this boy visited her and not when other males visited her. Her dad told her, "Hey, be careful. Like, of, like hanging out, like, alone." She did not understand why her father told her that, since he had always trusted her when she was alone with her male friends. Her father voiced his concern that people would talk, and he did not want her reputation to be

ruined. However, she told her father, "Dad, you raised me right, I got this."

Additionally, both participants were supported by and identified with their father.

Of the immediate family, the role of the father had a great influence in both of the participants' decisions to remain abstinent. Both participants described having had a close relationship with their father, and considered themselves, "Daddy's girls". Both participants also described their fathers as being sensitive men. Scarlet also described her father as being someone who has no difficulty discussing female matters such as menstrual cycles due to his experience as an only brother among many sisters. Scarlet felt understood by her father and spoke to him first when discussing matters that Scarlet knew her mother did not automatically understand. For example, once when her parents had decided to take her out of band because her grades were low, she later talked to her father and explained how the band was actually motivational for her grades. After discussing this with her father, he then went to talk to the mother and they both agreed to allow her to stay in band. Scarlet said, "My mom is stricter than my dad, but my dad supports my mom very well." Whenever Bertha would tear up in the interview, she would mention that she was emotional like her father. Both of the participants felt connected with their father.

During the second interview, Scarlet agreed that she admires the way her dad treats her mother and agreed that unconsciously her dad influenced the qualities she looks for in a prospective husband. She laughed when she remembered how recently her boyfriend and father both acted "goofy while dancing to a song that was on." Scarlet explained the qualities she looks for in a future boyfriend such as not using profanity, being helpful and nice towards people.

Similarly to Scarlet, Bertha's father influenced her to remain abstinent. Bertha asserted that her father had a great influence on her decision to remain abstinent. She

explained that he encouraged her to speak up for what she believed in. Her father would say, "Bertha, if you have something to say to anybody, say it. Let them know, or if you have something that you're uncomfortable with, say something or always just speak your voice." Her father would say, "If you don't feel comfortable, you say something." Bertha stated, "I feel like I have a lot of him in me."

### **Significant Life Experience**

Each of the participants, who remained sexually abstinent, shared having had a life experience that supported and solidified their decision to remain abstinent. Scarlet shared that her father became very sick when she was in eighth grade. Her mother would go to the hospital to be with her father right after work. Scarlet would be the one taking care of her younger brother and sister while her mother visited her father in the hospital. This experience of taking care of her brother and sister made her more conscious of the responsibility of being a parent, and she stated, "...in part it made me more conscious of my decisions" to remain abstinent. She also felt mindful of her actions and the impact that it would have on her siblings.

Similar to Scarlet, Bertha also had life experiences that reinforced her decision to remain sexually abstinent. Bertha's experience of attending DeBakey High School allowed her to see the effects of being sexually active. DeBakey High School is a school for students who are interested in medical fields. As a volunteer at a local hospital and as an assistant for nurses, she saw mothers giving birth to babies. She saw the effects of sexually transmitted diseases and knew how the diseases affect the human body. Attending DeBakey helped Bertha be aware of the consequences of her actions.

#### **Determined Decision to Remain Abstinent**

Both of the participants who remained abstinent had made a determined decision to remain sexually abstinent. Scarlet never considered not being sexually abstinent; she stated, "...it wasn't really, like, a decision for me, it was a life choice." She felt sure of her decision to remain abstinent and currently is dating, and she feels glad that her boyfriend is supportive of her decision to remain abstinent. Even in matters of dating, when Scarlet was faced with the decision to date a friend from a youth group whom she had been talking to, she did not feel the obligation to go out with him. He had experienced a death, and she was being supportive. She mentioned, "The next day I told him 'I don't think this is a good idea; and he wasn't very receptive to that, but I was like, "This is my decision."

Similar to Scarlet, Bertha was sure of her decision to remain sexually abstinent. During the interview, Bertha seemed to be very sure of herself. She immediately stated that she was not embarrassed to talk about the sexual topic we were about to address. She described her feelings of security by sharing an incident when she was young. When she was approximately four years old, she would explore her environment. While doing this, an African American male, a stranger and someone of a different ethnicity, saw her wandering in the street and asked her if she was lost. Her response was, "I am not lost" in an assured voice; thus illustrating the point that even at a very young age, she was selfconfident, self-assured, and assertive. When the older man asked her where she lived, she told him her address. This example was mentioned by Bertha to exemplify the fact that the qualities of self-confidence nurtured by her parents led to her assuredness in developing her determined decision to remain abstinent. She was influenced by her sisters, and she agreed with them that being abstinent made "sense and was logical." She wants her husband to be the only one with whom she would be sexually intimate as she appreciates the value of monogamy, i.e., being committed to one individual. She mentioned, "Why would I want anything else? I want my husband to be the only person I

am with." Even though Bertha had opportunities to become sexually active: her decision remained to be abstinent.

In the eight years that Bertha has been dating, she remained dedicated to sexual abstinence. Bertha recalled the first time she dated and how she kept on removing herself from compromising situations with her boyfriend. For example, she shared that he was tall and that they were in the swimming pool. As they kissed, while in the swimming pool, she recalled feeling something hard, and she remembers thinking, "What is that?" She remembers moving herself higher, so she would not feel him. Bertha did not feel comfortable in this situation and removed herself. Throughout Bertha's teenage years, she had a couple of boyfriends but kept the relationships away from sexual encounters by telling them that she felt uncomfortable when things became heated and removing herself from the situation. Her purpose in dating was to get to know a male well without sexual intimacy. Now that Bertha is 22 years old, she continues to be abstinent.

Bertha's decision to remain abstinent until she marries remains. She is now dating the boyfriend she had from the youth group in church. While interviewing her, it made sense that Bertha got emotional when she recalled the situations her boyfriend was in when he was young. She sees her cousins, who are close in age to her, having children, but she has her educational goals and aspirations and is not planning on getting married yet. As she was talking about her cousins having children, she would say, "I am not there yet, and I'm okay with that," and "I'm glad I'm going the way I am." However, at the same time, she stated that she does not judge their decision to have children because "children are a blessing," which she stated multiple times.

Bertha shared that when she turned 21, her boyfriend wanted her to drink; however, she was not interested and believed that it was not necessary to drink to have fun. She remained secure in her decision to not drink. She recalled the negative

experiences she had with her little cousin telling her dad, "Please, don't drink, you promised you wouldn't drink." She also remembered the time her 18-year old cousin drowned because he was swimming and had been drinking. Bertha has always been very mindful of the consequences of her actions, implicit in knowing what could affect her decision making capabilities, putting her in a position of susceptibility and vulnerability, i.e., in possibly over-imbibing which could affect her decisions concerning sexual activity. She has always stressed safety.

# **Religious Support**

Religion was a theme that emerged throughout the interviews of the participants who remained abstinent. Both mentioned being involved in church activities. Scarlet was raised Catholic and mentioned that even though her father was from Iran and had been raised Muslim, her family practiced Catholicism; both religions support the idea that being sexually intimate is for married couples. Scarlet participated in church choir, youth group, and was an altar server. Her parents were leaders at their church. Scarlet was actively involved in church from the sixth through the twelfth grade. Scarlet's parents were in charge of talking to couples who were scheduled to get married regarding fertility and sexuality. Immediately at the beginning of the interview, Scarlet mentioned that her family is "...extremely pro-life, and I'm extremely pro-life." Scarlet's parents supported the idea that the cycles of life are a "holy thing" and that "we are not supposed to be grossed out" with sexuality. When asked during the second interview, if she believed religion was a factor that contributed to her decision to remain abstinent, she mentioned that the close relationship with her parents made the teachings of the church further support her decision to remain abstinent. She also described her belief that sexual activity was a holy act between married couples.

Similarly, Bertha was also involved in her church. Since Bertha was a young girl, she shared wanting to be involved in the experiences in which her sisters were involved at church. When her sisters participated in a sleep over at church, she remembered wanting to stay also. Bertha would hide under the table so her mother would forget that she was there and leave her at the sleep over. During Bertha's teenage years, she was also active in the youth group at her church. Bertha mentioned that her participation in youth groups at church supported her goal of sexual abstinence. Bertha stated, "I am very firm in my faith, and I know that God knows what I am doing." Bertha also mentioned that the sexual act was a sacred act; this was similar to what Scarlet had shared.

## The Influence of Peers

Scarlet and Bertha were not influenced by their peers in their sexual activity decisions. In fact, they chose peers who reflected their values of sexual abstinence. Scarlet said, "...my friends I chose very, very carefully." Scarlet mentioned that her friends were not sexually active. She did mention that a peer from her band group was pregnant; however, the band group was accepting of her. During the second interview, Scarlet asserted that her family was her priority and not her friends. Bertha also did not recall having talks with her peers regarding sexual activity. Bertha's peers would, however, say to each other, "they are intimate" when talking about a certain couple, but that was all. Bertha had many male friends because she played soccer. She described her relationship as being playful with her male friends. She stated, "I was very happy with just having a lot of guy friends. So I have tons of brothers in my youth group, or — I consider them brothers. Where I can jump on their back and punch them, and, like, mess with them, and they could, like, mess with me in, uh, dog pile and just, like, give me noogies, and I surrounded myself with friends." Bertha's relationship with her female

friends was different. Bertha would question her female friends when they would say of celebrities, "I will do him." She would ask her friends why they would not say, "He is very handsome," instead of using a sexual connotation when referring to males. It got to a point that her friends would limit their conversations about boys when Bertha was around. When she questioned why they would not want to talk in front of her about boys, their response was, "Because you're too good. Like you make us feel terrible about ourselves." Bertha clarified that she was not judging them but was instead, questioning the way society puts a lot of emphasis on sexual connotations.

#### The Influence of the Media

For both girls, the media and their peers were selected according to their values. Scarlet stated that her parents "shielded" her from the media. First, she stated that she was not into magazines. She also mentioned that her parents set a time limit on television viewing. Her parents allowed her to watch two hours of television per day. Scarlet watched television shows in the company of her parents mostly. She described how her parents, while watching a movie, would have the television control close to them to be able to speed up sexual scenes while at the same time they would say "turn around." While Scarlet described her parents requesting her to "turn around," her voice sounded urgent, and she spoke faster. Her tone of voice changed as if she was imitating her parents. One time one of her friends saw her covering her face during a movie and asked, "Are you covering your face?" Scarlet mentioned being so accustomed to covering her face that she did not even realize what she was doing.

Most of the shows or movies that Scarlet watched during her teenage years did not have sexual intimacy. Currently, when Scarlet is watching a show that she likes, she gets annoyed when the characters of the show start being sexually intimate. While sharing about this frustration, her speech became more rapid and she sounded

disappointed as she said, "Noooo... Now we can't watch you anymore. We loved you."

As an adult, she chooses not to watch shows where characters become sexually involved.

Scarlet shared an experience with a character in her favorite book series that supported her decision to remain abstinent. Scarlet covered her face and laughed a little before sharing about a main character of a novel that influenced her decision to remain sexually abstinent. She explained how she read all the Twilight books and how Edward, the main character in the book, "had a huge thing about waiting until marriage." She remembered how Bella, the female character wanted to be intimate with Edward, but he would not get involved sexually until they married. She admired the respect that Edward had towards Bella. Scarlet remembers thinking, "I want that for me too."

Compared to Scarlet, Bertha had a different experience with the media. She asserted that the public media did not influence her decision to remain sexually abstinent. Bertha believes that couples in movies "jump into a relationship quickly," referring to sexual acts. Bertha mentioned that in movies or shows, potential couples are attracted to each other, get sexually involved, and miss the part about getting to know each other; she said, "Getting to know someone is how we love them." Bertha prefers to know a potential boyfriend for a year before she decides if she wants to date him. If she likes someone, she observes how he interacts with others; she likes to "...know who they are, their hopes, dreams, and aspirations." She observes how he acts when he is going through a hard time and how he spends his time off. If she feels that there is no potential for a long-term relationship, such as leading to marriage, she is honest and does not date. She recognized, "I am an emotional person and do not want to invest in a relationship that does not have the potential to be long term." Besides, she does not want to hurt others by misleading them into a relationship that will not last.

### **Sexual Education at School**

Both of the participants mentioned that their high school did not address the topic of sexual activity. They both mentioned being in a health class, but not receiving information regarding pregnancy and sexual topics in school. Scarlet said that they focused on getting their Cardiopulmonary Resuscitation Certification (CPR) and seeing a movie about nutrition and its effects. Bertha mentioned being at DeBakey High School for medical health professionals, but they did not have a sexual education class that explored sexual intimacy. She shared that they did explore the reproductive system and studied extensively about sexual transmitted diseases in biology class. Neither participant remembers hearing about sexual intimacy and pregnancy in their health class in high school.

## **The Influence of Culture**

Scarlet explained that her father was from Iran, but their family practiced Catholicism. She clarified that among Muslims and Catholics the expectation is to wait for sexual intimacy until marriage. Regarding sexual intimacy, Scarlet did not feel influenced by the American culture; she felt more influenced by religious teachings.

Bertha had a similar experience with culture. She mentioned that she has seen statistics that in the Latino culture there is a lot of teen pregnancy; however, she has not been influenced into sexual activity by United States' culture or by her extended family. She explained that she has cousins who had children out of wedlock or at a young age. She stated that her sisters were a great influence in her decision to remain sexually abstinent.

For the Latinas who remain abstinent, the strong family connection, exposure to and connection with the facets of whatever particular religion the family adhered to, and selected positive influences of media, led them to remain steadfast in their decision to

remain abstinent. Figure 2 shows the participants who remained abstinent being influenced the most by their immediate family, which is in the center of the concentric circle. Religious teaching, the media, and significant life experience then follow in order of decreasing impact on the participant. Significant life experience was an emergent theme. The strong family relationship is in the center demonstrating greater impact in supporting their decision to remain abstinent.

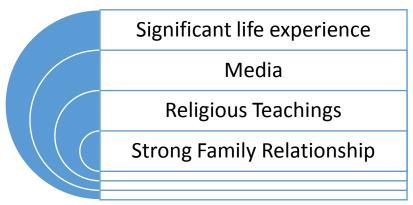


Figure 2. Factors Influencing Abstinent Participants

## **Demographics of the Participants Who Had a Child**

Claudia and Dalia had similar demographic statistics. They both grew up in small cities and attended public schools. Claudia did not graduate from high school, but Dalia did graduate from high school. Neither participant has a bachelor's degree.

Claudia was born and raised in Pasadena, a city near Houston, Texas. She identifies as Latina. Both of her parents were born in Mexico. Her parents did not complete elementary school. Claudia recalls hearing her mother say, "I never finished school." Claudia's parents separated when she was five or six years old. Claudia has seen pictures of herself and her family visiting relatives in Mexico but does not recall being in Mexico. Claudia attended most of her high school years at an alternative school

because she was caught under the influence of drugs while in school. She is currently a manager at an apartment complex.

Dalia was born and raised in McAllen, Texas. She identifies as Latina. Her mother was born in the United States and her father in Mexico. Dalia's mother attended college, but did not obtain a bachelor's degree. Her father completed high school. Dalia's parents divorced when she was a year old. She has lived with her stepfather whom she sees as a father. Dalia attended a public high school and graduated. She mentioned that she currently stays at home, taking care of the children, cooking, cleaning, and maintaining the household finances. She has three girls, a 13-year old, a nine year old, and a two year old.

# **High School Years**

Claudia had a unique experience in high school because she attended an alternative school during most of her high school years. Claudia mentioned that high school was a "blur" because she was using drugs. Claudia met the father of her child at the alternative school. She recalls some staff members from the high school telling her, "don't get involved with him, he is not good company."

Compared to Claudia, Dalia's high school experience was different and had more responsibility. Dalia had parental responsibilities that she had to attend to throughout her high school years. Dalia had her child before entering high school; therefore, she recalls having to do homework while still being responsible for her daughter. She continued dating the father of her child for one year. Dalia's relationship with the father ended because he continued to party without her. When asked about her teenage experiences, she immediately responded, "I was all into boys."

## **Data Analysis of Sexually Active Pariticipants**

Of the six topic domains: influence of parents or significant caretaker, peer influence, sexual education at school, media, and cultural expectations, and lack of a strong family relationship, the last one was the foundational reason the Latinas who had a child during their teenage years became sexually active. Both of the participants also experienced a life event, which further affected their decisions to become sexually active.

# The Influence of the Immediate Family

During Claudia's teenage years her relationships with her mother, father, and stepfather were distant. Claudia described her relationship with her parents as being isolated. Her parents divorced when she was four or five years old. She remembers her mother getting very angry with her father because he would not communicate with her mother about daily family problems. Claudia mentioned more than two times that her father and mother were "opposites" and could not get along. When asked if she believed that her parents' separation had an effect on her decision to become sexually active, she said, "Those two don't go together," referring to their personalities, implicitly implying that staying together was not an option for the parents, in her opinion. The way that Claudia answered, in referring to her parents as "those two," effectively distanced herself from the pain of the separation. Claudia did not see how things would have been different if her parents had remained together. She actually foresaw more stress in her family if her parents had stayed together.

Claudia's relationship with her mother lacked communication. Claudia stated, "Me and her didn't have a good relationship. We barely spoke; it was just, 'come eat,' or 'I'm leaving, bye." Claudia recalls her mother telling her she knew Claudia was sneaking her boyfriend in the house but did not say much; therefore, Claudia continued sneaking out

with her boyfriend and being sexually active with him while they were using illicit unprescribed drugs, i.e., Xanax. Claudia's addiction to drugs further clouded her perception, and she did not even think about the possibility of becoming pregnant. During Claudia's childhood, her mother used an Authoritarian Parenting Style as described by Teyber and McClure (2011) in which the parents are punitive and show low affection to their children. Claudia recalled her mother hitting her and her siblings many times with a branch from a tree that was right outside her apartment. She described the strikes as being very painful. By the time Claudia was a teenager, her mother had stopped using corporal punishment and would just give her "a look." Claudia shared that her mother was very strict with her older brother and sister and that with her "....she just gave me a look, and that was it." Claudia's older sister had a baby in her teenage years. Claudia does not recall hearing her mother say much about her sister's pregnancy. Claudia mentioned "not being aware of what was going on" when her sister had a child. She shared that her mother rarely disciplined her sister when she did inappropriate things as a teenager because her sister would help out a lot at home. While Claudia was young, she recalls her mother going to Mexico while her older sister took care of them in Houston. Claudia affirmed, "She made sure nothing happened to us, fed us, and cleaned everything. I think that's why our mom let her slide with a lot of stuff." Additionally, Claudia's relationship with her father was also distant.

After Claudia had an argument with her mother at the age of fifteen, Claudia lived with her father. Her father worked as a truck driver and was tired at the end of the day. Claudia recalled that sometimes her father would not come home at night. The time that her father was home, he would sit and watch television and hardly talk to her. Claudia described her father as being "laid back and quiet." In fact, when she got pregnant at 17, she decided to tell her father first because she knew he would react in a calm manner

compared to her mother. When Claudia lived with her father and found out she was pregnant, his response was to say "congratulations."

Claudia's relationship with her stepfather was also distant. She had little communication with her stepfather while she was a teenager. Claudia described her stepfather as "just being there." However, now that she is 27, her stepfather is very involved with her children, and as she said, "He does a lot for us, more than my dad."

Dalia's relationship with her parents was similar to Claudia. Dalia did not have a close relationship with her parents, either. Dalia's parents divorced when she was a baby. She lived with her mother and stepfather from the age of one. She did not have contact with her biological father. She described her mother and stepfather as being "real conservative, quiet, and religious people." Dalia mentioned that her mother was strict and would not have approved of her being sexually active, but at the same time Dalia's mother would not talk to her or explain why Dalia should not be sexually active. Even after Dalia's daughter was born, her mother disapproved of Dalia's sexual activity, but would not talk to her about it. Currently, when Dalia wants to talk about something that is bothering her, she talks to her friends. Conversations with her mother revolved around general and superficial things, such as the weather or what was happening with their extended family. Dalia's mother was the one who disciplined the children until things got out of hand between her and her sister; then her stepfather would speak to them. She described her stepfather as being very quiet; and as she stated, "He keeps to himself."

Dalia's mother did not talk to her or her sisters about sexual intimacy or relationships with boys. Her sisters were the ones who told her about her menstrual cycle and what to expect. Dalia said, "I did not know it was so easy to get pregnant." After Dalia had her child at the age of fourteen, she did not feel she could talk to her mother regarding being sexually active because she knew her parents did not approve of sexual

intimacy before marriage. Both of the participants who had a child during their teenage years mentioned not being aware or even thinking about the possibility of becoming pregnant when they became sexually active.

#### **Sexual Education at School**

Both participants who had a child during their teenage years do not remember hearing about sexual education in school. In fact, Claudia asserted that "high school was a blur" because she began drinking alcohol and taking unprescribed pills or "bars" as they are commonly called. Dalia remembers hearing about condoms and birth control from peers during high school but does not recall hearing an explanation of what these forms of protection did. She stated, "I don't think I ever really thought to put it to action."

## The Influence of Peers

Claudia stated that she did not have close friends during her teenage years. She mostly kept to herself; she explained, "I was distant from everything and anything." She would not pay attention to what her peers would do. She asserted, "I guess I was more concerned about the drugs." She does recall a female friend sneaking out of school to meet her boyfriend. She would hear her say, "Oh, I'll be back. I'm a go with him real quick." Now, Claudia realizes that her friend was sneaking out with her boyfriend to have sexual intercourse. Although Claudia said that she was not close to her friends, she would spend time with peers walking at night and doing drugs. When she started attending the alternative school, she started dating a boy at that school and become sexually active. She and a friend attended a party that her boyfriend was supposed to have attended, but did not, when she was sixteen. During that party, she and her friend were given drugs, and were raped by older males, as they were under the influence and could not consent. The staff at the alternative school found out what had happened at the party and the incident was reported to the police. She received counseling, which helped

her manage that traumatic incident. She then continued to be sexually active with her boyfriend and became pregnant.

Compared to Claudia, Dalia had a more open relationship with her peers. When she was 13, Dalia had a friend who was a year older than she was. She recalls her friend talking to her regarding sexual topics, but when asked about the topics or things that her friend did, she would tell her, she could not recall them. Dalia would spend the night at her friend's house to "hook up" with her boyfriend who was a friend of her friend's brother. While Dalia spent the night at her friend's house, she would be sexually intimate with her boyfriend. Dalia became pregnant two months after she became sexually active.

## The Influence of the Media

The media did not influence the sexual activity decision of Claudia as much as Dalia. Both Claudia and Dalia described their generation as being active outside the home rather than talking on the phone or playing video games. Claudia did not watch television, but she went for walks late at night with peers. Claudia's peers were more like acquaintances doing drugs together than true friends. Dalia, on the other hand, was unexpectedly influenced by the media such that it thrust her into sexual activity. Dalia mentioned that when she was nine or ten years old, her cousin showed her a pornography magazine that belonged to Dalia's uncle. Dalia mentioned that her uncle had a "whole lot of pornography in his home." He had magazines, videos, and books." Dalia with a nervous laugh and an "oops," affirmed that her seeing those pornographic images "triggered something" in her which led to sexual intimacy. Through pornography, Dalia got an idea of what a relationship was supposed to be like. Therefore, during Dalia's preadolescent years, as she mentioned, "I was all into boys." As soon as Dalia began dating, she began to explore sexual acts with her boyfriend. She mentioned that there were no restraints or thoughts about how far she and her boyfriend would explore

sexually. Dalia stated, "One thing led to another." She began to be sexually active when she was 13 and became pregnant by the second month. Dalia had her first child when she was 14.

## **Cultural Expectations**

Both of the participants were born in the United States. When asked about cultural expectations, Claudia immediately described women as being the ones who "do everything: cooking, cleaning, taking care of kids, and doing all the stuff." Claudia recalled her father and her ex-husband, who is the father of her three children, being similar in that they were married but still went out and partied. When sharing about her story, she mentioned, "I should have never been like that with him, on and off, giving him what he wanted, making him happy." Immediately after she said this, she asserted that she loved her kids and "would have them again" as she glanced at her youngest child who was busy on a cell phone.

Dalia also mentioned the cultural expectation in the Latino community for the women to be the ones who take care of the children. She also explained that her boyfriend continued partying while she was the one taking care of her daughter. While both identified with US culture, they both selected traditional Latino males as their boyfriends.

## Giving of Self

Both participants who had a child during their teenage years, described situations where they were dedicated to their children while the boyfriend continued to party. After Claudia become pregnant at 18 years of age, she moved in with the father of her child. She mentioned many times that their relationship was rough. Claudia remained in the relationship with her husband for 10 years. She and her husband had decided to stay together because they did not want their children living without a parent

as they had in their own childhood. Claudia divorced her first husband and recently remarried.

Both of the participants who had a child during their teenage years were distanced from their parents by divorce and/or a lack of affection and communication. They both had parents who divorced when they were young. Both participants had no communication with their father or stepfather. Outside forces such as drug use and the media introduced Claudia and Dalia into sexual activity. Figure 3 demonstrates the participants who become sexually active during their teenaged years being affected in their choice by the distant relationship with their parents, which is in the center of the concentric circle. Illicit drug use and media then follow in order of decreasing impact on the participant.

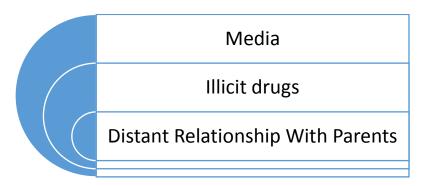


Figure 3. Factors Influencing Sexual Activity

As previously mentioned, this was a qualitative study that sought to give voice to four Latinas regarding their experience concerning their decisions to remain sexually abstinent or to become sexually active. This study included two interviews with each of the four Latinas who participated. Two of the Latinas remained abstinent and two had children during their teenage years. The relationship with their parents was a factor that

influenced both groups in their decisions to be sexually abstinent or active. The participants who remained abstinent had a close relationship with their parents. Their parents had conversations about the menstrual cycle and dating, and they encouraged the participants to be assertive. The immediate family served as a protective factor in preventing teenage sexual activity and promoting educational goals. In contrast, the participants, who had a child during their teenage years, had a strained relationship with their parents. There was limited communication between the participants and their parents. Both of the participants' parents divorced when the participants were young. Their parents did not talk about sexual topics or menstrual cycles to their daughters. Thus, the abstinent participants' relationship with their parents influenced the Latinas to consciously decide to remain abstinent; whereas, the lack of a relationship with their parents allowed outside forces to influence the Latinas' subconscious decision to become sexually active. Table 3 exemplifies results as they pertain to the topic domains and their influences on the participants' choice of abstinence or sexual activity, including religion, which was not an original topic domain.

Table 3

Topic Domains Influencing Sexual Activity Decisions

Participant	Relationship with Parents	Peer Influence	Sexual Education	Media Influence	Cultural Influence	Religious Teachings
Scarlet	Yes	No	No	Yes	No	Yes
Bertha	Yes	No	No	No	No	Yes
Claudia	Yes	No	No	No	Yes	No
Dalia	Yes	Yes	No	Yes	No	No

Table Notes: A Yes indicates the factor that influenced Latinas in their sexual activity decision to either remain abstinent or to become sexually active.

The non-active girls did not participate in any level of sexual exploration; rather, they were adamant in their avoidance of sexual activities. They said that they did so in order to stay true to their choice of being abstinent. Connectivity of family, religion and culture influenced the abstinent girls giving them more opportunities for positive, wholesome activities. The sexually active girls were affected by being disconnected from family, peers, school, etcetera, with no wholesome physical activities thus leading them to seek physical connectivity or attachment at some level. The naivete of the teenage years can lead to an unrealistic belief that first time sexual activity cannot lead to pregnancy.

Although simplistic, the implications arose with each of the participants, abstinent and sexually active, in which the parental bond appears to supercede most other connections, i.e., media, peers, and school with the lone exception being a strong

religious commitment as stated by Landor and Simons (2014). Although friends, peers and family members may appear to contribute to a girl's sexual education and to possibly exert undue influence it is only because the teenager girl envisages said friends, etcetera as parental figures, thus empowering them.

#### CHAPTER V:

#### DISCUSSION AND CONCLUSIONS

This study was a qualitative study that investigated the factors that contributed to Latinas' decisions to be sexually abstinent or become sexually active during their teenage years. Four Latinas were each interviewed two times. Two of the Latinas remained abstinent and two of the Latinas had children during their adolescent years. Chapter Five will summarize the findings as related to the topic domains of parental influence, peer influence, sexual education at school, media, and cultural expectations. Religion was spontaneously brought up as a supportive influence that allowed the two abstinent participants to remain rooted in their decision to be abstinent; therefore, religion will also be included in the discussion.

## **Summary of Findings**

For all of the participants, the immediate family played a major role in the Latinas' decisions to remain sexually abstinent or to become sexually active. East et al. (2006), also concluded in their research that family may serve as a protective factor towards teenagers' decisions regarding the sexual activity decision. The Latinas who remained sexually abstinent, Scarlet and Bertha, had a very close relationship with their immediate family. Both participants had a close relationship with their parents. This close relationship served as a protective factor for the Latinas who remained sexually abstinent. They had parents who practiced the Authoritative Parenting Style as defined by Teyber and McClure (2011) in which parents combine limits and reliably enforce rules and also show a lot of affection, contrasted with Authoritarian Parenting Style in which parents are punitive, controlling, and unreasoning and show limited affection.

Additionally, Scarlet and Bertha had a very close relationship with their fathers.

They each had an admiration of their father. Both participants also described their fathers

as being easy to talk to, sensitive, and involved. The fathers of these Latinas had characteristics such as those of a *caballero* as described by Arciniega et al. (2008) in which Latinos are conceptualized as nurturing, family-centered, and loyal. The *caballero personifies* the sensitive side of Latino men who deify rather than denigrate women (Arciniega et al., 2008). Unlike the abstinent Latinas who had a close relationship with their immediate family, the Latinas who were not abstinent did not have a close relationship with their parents.

Claudia and Dalia described having a distant relationship with their parents.

Claudia described her mother's parenting style as Authoritarian in which her mother was punitive and showed limited affection (Teyber & McClure, 2011). Both of these participants' parents divorced when the participants were younger than five years old.

This was consistent with Wallerstein and Blakeslee's (2004) findings that the stress of a parental divorce may cause impulsive marriages that end in divorce. Claudia married because she became pregnant and did not want her child to be without a parent. Claudia described the relationship with her first husband as not being stable and as being "rough." Both of the participants lived with their mothers, but, eventually, lost communication with their biological fathers.

Both participants described their stepfathers as being present in their lives as providers, but not communicating with them. Claudia and Dalia's fathers' descriptions were aligned with the *machismo* portrayal of Latino males, which describes a Latino male as being emotionally restrictive (Gallardo & Paoliello, 2008). *Machismo* is a term that describes a set of values and norms traditionally associated with being a man in Latin American culture (Rivas, 2008). In the term *machismo*, men are expected to be chauvinistic, exaggeratedly aggressive, emotionally restrictive, controlling, sexually experienced and homophobic (Gallardo & Paoliello, 2008). According to the Pew

Research Center (2009) Latino males who lived in Latin America up to their early twenties tend to have traditional dominant male values as seen with the fathers of the Latinas who had a child during their teenage years. Both fathers were born and lived in Mexico during their teenage years. Unlike the participants who had a child, the participants who remained abstinent had a different relationship with their parents. While the immediate family impacted the participants' decisions to remain abstinent or become sexually active, the conversations regarding sexual intimacy with their parents were different for both groups.

Conversations regarding sexual education among the participants was different for both groups. The parents of the participants who had a child did not have conversations regarding sexual intimacy or education; however, the participants who remain abstinent had conversations regarding sexual education topics with their parents. Results for this study are consistent with Brown et al. (2006) in which parental communication about sex is the strongest protective factor against early sexual activity behavior. There were, however, additional factors that influenced these participants. Scarlet was also informed by her parents of the fertility cycles and was very conscious and aware of pregnancy. Scarlet's mother talked to her about sexual abstinence facilitated by a church event. The ritual of the purity ring practiced in Bertha's family initiated a consciousness of Bertha's goal of abstinence. The exposure of different facets of the particular religion of the family allowed the formulation of a belief or value system that led the participant to develop and accomplish the participant's goal of sexual abstinence until marriage. Results of this study are consistent with Bersamin et al. (2005) in which religious practices and beliefs support teenagers' decisions to abstain from sexual activity. Landor and Simons (2014) also assert that the virginity pledge together with the inherent religious commitment is what led to sexual abstinence. Additionally,

Bertha's older sister was a role model for Bertha in her decision to remain sexually abstinent. Both Latinas who remained abstinent wanted to be role models in regards to remaining sexually abstinent for their own children. Scarlet thought about being a role model for her younger sisters. While the abstinent participants had an indirect conversation about sexual intimacy with their parents and role models, the participants who had a child during their teenage years had no conversation regarding sexual intimacy with their parents.

Both of the participants who had a child do not remember having a conversation with their parents regarding sexual intimacy. Consistent with Killoren et al. (2011) this study showed that lower levels of conversations regarding sexual topics with mother and lower levels of acceptance with father lead eventually into early sexual activity. The parents of the Latinas who had children had limited communication and limited relationships with their daughters. Dalia's sister was the one who talked to her about the menstrual cycle. Even after Dalia had her first child at the age of fourteen, her parents disapproved of Dalia being sexually active with her boyfriend. Neither Claudia nor Dalia considered that they could get pregnant so easily.

The parents of the teenaged Latina girls who choose abstinence had set up subtle, yet definite boundaries for them. Subtle, in that the boundaries were not vociferously expounded upon. These boundaries included expecting them to attend school and activities at church. Scarlet attended a sex education meeting at church with her mother, and Bertha and her sisters were highly involved in the church's youth group. The sexually active Latinas, on the other hand, did not have many boundaries as they had basically single parent families as their parents had divorced. Being a single parent and working extremely long hours, it would have been extremely difficult to maintain and enforce boundaries, as exemplified by Claudia going out with her friends whether or not

her father approved. Dalia also exemplifies the lack of boundaries by continuing to be sexually active against her mother's wishes after the birth of her first child, which resulted in a second pregnancy.

Additionally, influence of the media was selective and depended on family involvement for the participants. Media selectivity and exposure played either a constructive or a harmful role in decisions regarding sexual initiation. Both of the participants who remain abstinent, mentioned being selective in what they viewed on television. They both disapproved of how, on television, the characters' relationships immediately became sexually intimate, so they were selective of what they watched. One of the participants who remained abstinent was encouraged to remain abstinent because she admired how Edward, the male character in *Twilight*, courted Bella without being sexually intimate. Media exposure played a role in the decision to become sexually active for one of the participants. Dalia's exposure to pornography at an early age, specifically 10 years old, made her susceptible to a pattern of sexual intimacy with her first boyfriend; and she became pregnant when she was thirteen. Dalia's sexual experience is aligned with Brown et al. (2006) in which exposure to sexual content in the media (television, internet, magazines, music, etc.) can predict a teenager's sexual involvement. In fact, teenagers who watched sexual content in the media at ages 12 to 14 were 2.2 times more likely to have sexual intercourse at ages 14 to 16 according to Brown et al. (2006). Chandra et al. (2008) also concluded that higher rates of exposure to sexual content in the media corresponded to twice the rate of pregnancies.

A modicum of influence from peers might have been obtained, only because of the fact that the Latinas who had a child during their adolescent years chose deviant peer affiliations. According to Killoren et al. (2011) in their investigation of sexual initiation and sexual risk behaviors, in part found that lower levels of acceptance with fathers and

lower levels of disclosure to mothers were related to greater deviant peer affiliations and antisocial peer influences were linked to greater early sexual intentions among U.S. born adolescents. Thus, this study shares several relevant points related to that of Killoren et al. in regards to the participants who were sexually active. The first relevant point is that even though Claudia states that she did not have close friends during her teenage years, she felt "distant," seemingly antisocial; contrastingly, she would go out at night with friends and do drugs, showing impulsive at risk behavior. Another relevant point related to Killoren et al. can be seen with Claudia, in the fact that she said that she felt that she was unaffected by her peers, i.e., she did not have close friends, as she preferred to be alone: this is somewhat invalidated by the fact that she said that she went to a party with a friend which ended in her being drugged and sexually assaulted. In other words, she seems to feel antisocial and at the same time she is involving herself with impulsive, risky behavior with peers. Dalia discounted her religious mother's beliefs of abstinence, an obvious disregard of authority. She also did not take into consideration her mother's feelings, in becoming pregnant, thus manifesting a prime characteristic of antisocial behavior. Dalia's pregnancy at 13 years of age was most likely instigated by adolescent behavior disinhibition (Killoren et al., 2011) as exemplified by her continued sexual activity after the birth of her first child leading to a second young pregnancy. Dalia as an adolescent shows behavior disinhibition which leads to an impulse to engage in risktaking behavior on her own as exemplified by early pregnancy. Dalia was influenced by peers in that she was affected by seeing pornography at an early age which began her sexual behavior. This pornographic material was shared by a peer who was also an extended family member and in sharing this material with Dalia the family member/peer also exhibits antisocial behavioral characteristics, i.e., "a lack of conscience," by exposing a friend, peer, and family member to a heretofore unheard of and inexperienced

immoral exhibition of pornography, a nonempathic disregard of authority related to antisocial behavior which Killoren et al. suggests is a strong predictor of sexual risk behaviors. This study also exemplifies another Killoren et. al. finding which begs further analysis in another thesis; that of the lower paternal acceptance level and lower maternal disclosure level relating to greater deviant peer affiliations. These deviant affiliations then link to greater sexual initiation among U.S. born adolescents as seen in both participants who become sexually active, exemplifying Killoren et al.'s findings. The reverse is exemplified by the participants who remain abstinent because of higher paternal acceptance and higher maternal disclosure levels.

The presence or absence of a goal played a major role in all of the participants' sexual experiences. While the Latinas who remained abstinent made a determined decision to remain abstinent until they married, the Latinas who had a child during their teenage years did not think about sexual abstinence or pregnancy. In fact, the Latinas who had a child during their teenage years did not consider that becoming sexually active would lead to pregnancy.

The socioeconomic status and educational level of each of the participants might have had an implicit effect on the decision to remain abstinent given that, with more money available within the household, there was most likely enough funding available to fulfill more than basic needs and also money available for recreational activities, thus guiding, motivating, and rewarding each teenager into more positive activities. Both participants who remain abstinent had parents who completed a college or trade school degree or diploma. Scarlet's father has an engineering degree and her mother is a teacher. Bertha's father completed a trade school diploma. It appears that both of the Latinas who remain abstinent were economically stable due to the educational level of their parents. In fact, Bertha's mother did not have to work and decided to attend to her

family. Conversely, both parents of the Latinas who were sexually active did not have a college degree. Claudia's parents completed elementary school. The highest educational level completed by Dalia's mother was high school. As to marital status, both parents of the Latinas who were sexually active divorced when the participants were younger than five years old. Divorced families also go through financial strains which tend to focuses their attention on surviving.

However, all four Latinas showed bravery in their life decisions during their teenage years. All four participants displayed characteristics of *hembrismo* as described by Rivas (2008) in which women are conceptualized as strong, proactive individuals who shape their lives as well as those of others. The Latinas who remained abstinent were determined in their goals to remain abstinent regardless of seeing teenagers and relatives having children. The Latinas who had children showed great courage in deciding to have their children regardless of the challenges this decision brought to their lives. Claudia remained in an abusive relationship for 10 years so her children could live with both parents, unlike what she had experienced. At the same time, the decision to have her first child gave her courage to refrain from using drugs. Dalia spent her high school years shouldering the responsibility of doing homework while taking care of her daughter. Dalia married the father of her second daughter and currently has three daughters. All four participants showed great courage either in remaining abstinent or in accepting the responsibility of their actions and continued to strive for the wellbeing of their children.

The evolution of the models used in this research and how it developed throughout this study can be reference in the figure section. Figure 1 shows the factors informed by Bronfenbrenner's Ecological Model that takes into account the environment surrounding the Latinas and its possible influences in the Latinas' sexual activity decisions. Figure 4 through 7 was shown to each of the participants during the second

interview. Each participant was shown the figure that demonstrated their inferred factors that contributed to their sexual activity decisions. Figure 2 and 3 show the compilation of factors which contributed to the Latinas abstinence or lack thereof. The Microsystem consists of the immediate environments surrounding the participants such as family, school, peers, neighborhood, church, and health services (Bronfenbrenner, 1994). Figure 1 was not intended to show the interaction of the Microsystem with the individual; logistically, for all four participants there was only a modicum of peer influence. Health services was not mentioned by any of the participants. For the abstinent participants, family and religion were strong, positive influences or factors that affected their decisions concerning abstinence. Media was minimal in its effect on one of the abstinent participants. Religion was an emergent code that was brought into the conversation by the participants. For the sexually active participants, in regard to family, the lack of a strong family relationship allowed for media and illicit drugs to influence their decisions to become sexually active. Religion and health services were not mentioned by the participants.

### Limitations

There were three limitations to the study. The sample for this study was comprised of four Latinas living in a major southwestern metropolitan area; therefore, results cannot be generalized to all Latinas living in different parts of the United States. Extreme case sampling was also a limitation in that participants were either sexually abstinent or had a child during their teenage years; therefore, the sample did not include sexually active Latinas who did not have a child during their teenage years. Since this study relied on self-reported data, participants may not have provided all the relevant information or may not have been honest about their sexual experience during their teenage years.

# **Implications for Research**

While this study has the limitation of four Latinas living in a southwestern metropolitan area, it is possible to replicate the methodology in other areas. Larger Latina groups, groups of different ethnicities, different ages, or male groups are a possibility for further research to investigate if the relationship with the family continues to be a major factor in sexual activity decisions. It would also be interesting if the parents of the participants are included in further studies. In fact, the participants who had a child are currently trying to do a better job of communicating with their own children regarding sexual topics and mentioned feeling uncomfortable. Since the Texas Education Agency and the statewide Title I School Support Initiative contend that parental involvement in education includes the participation of parents in every facet of the development and education of children from birth through adulthood (Neeley et al., 2007), schools may include topics during their parental involvement activities to assist parents in having conversations with their children regarding sexual topics. Further research is needed in the role that fathers play regarding sexual activity decisions among teenagers. Further study is also needed in the role that parents, en toto, play in abstinence development in adolescent offspring. Building upon Lander and Simons (2014), in which they concluded that lower levels of acceptance with fathers and lower levels of disclosure to mothers were related to greater sexual intentions among U.S. born adolescents. In this study, the higher paternal acceptance, the higher maternal disclosure levels, and strong religious commitment factored greatly in abstinence development.

# Conclusion

The relationship between children and their parents plays a critical role in the teenagers' decisions to remain abstinent or to become sexually active. Parents showing

love and being honest about the effects of sexual activity can build knowledge and trust, and most importantly, influence teenagers' decisions regarding sexual activity. The Latinas who had positive relationships with their parents were more receptive to the information given from their parents and that allowed them to make informed decisions. The strong relationship with parents served as a protective factor for these Latinas to remain sexually abstinent. The absence of a relationship with parents and lack of information regarding sexual topics allowed for outside forces to influence these Latinas to become sexually active. Furthermore, media and the use of drugs influenced the Latinas in this study to become sexually active. While media cannot be avoided, a strong and positive relationship with family can build a strong foundation for Latinas. That strong foundation is what is needed in order for Latinas to be able to perceive messages imparted by their parents. That message should lead to the fulfillment of educational goals, and, therefore, a more secure financial future, including the ability to bring a child into the world, and into a financially stable, loving family.

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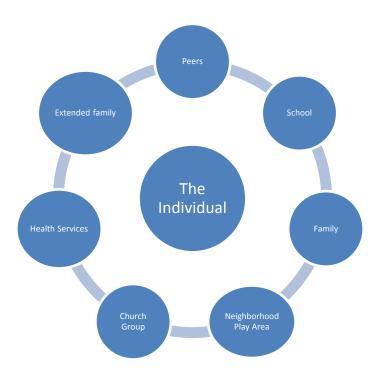
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## **FIGURES**



*Figure 1.* Initial model used to show factors that could have influenced Latinas' sexual activity decisions.

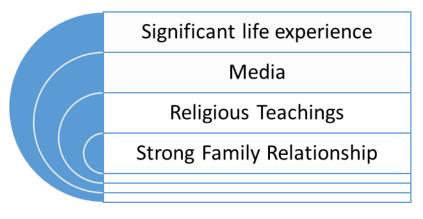


Figure 2. Factor compilation for abstinent participants.

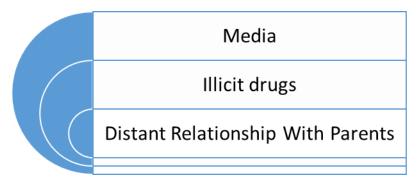
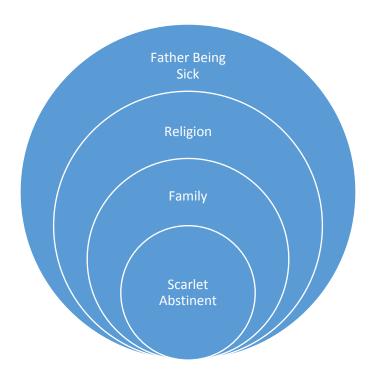
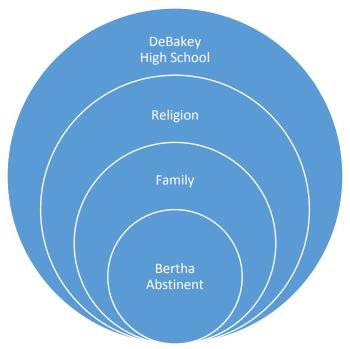


Figure 3. Factor compilation for the sexually active participants.



*Figure 4.* Figure shown to Scarlet during the second interview which demonstrated the factors inferred from the first interview related to her decision.



*Figure 5*. Figure shown to Bertha during the second interview which demonstrated the factors inferred from the first interview related to her decision.

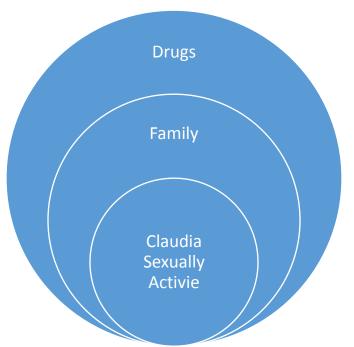


Figure 6. Figure shown to Claudia during the second interview which demonstrated the factors inferred from the first interview related to her decision.

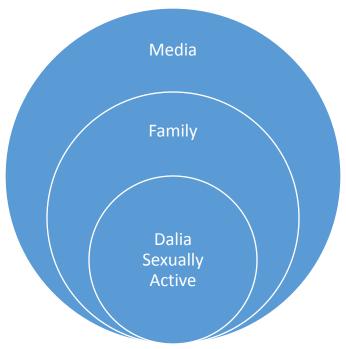


Figure 7. Figure showed to Dalia during the second interview which demonstrated the factors inferred from the first interview related to her decision.

### APPENDIX A:

### INTERVIEW PROTOCOL

### **Demographic Information**

Name:
Age:
Ethnicity:

What is the highest level of education that your parents completed? (¿Cuál es el nivel más alto de educación que tus padres recibieron?)

What generation are you since your family's migration to the United States? (¿Qué generación eres desde que tus padres emigraron a los Estados Unidos?)

- -Were one or both of your parents born in Latin America? (¿Uno o ambos de tus padres nacieron en Latino América?)
  - -Where were you born? (¿Dónde naciste?)

What was the marital status of your parents, when you were a teenager? (Cuando tú tenías 13 a 19 años, ¿cuál era el estatus matrimonial de tus padres?)

### **Topic Domain I: High School Experience**

<u>Lead-off question:</u> When you think about high school, what specific experiences come to mind? Can you describe those for me? (¿Cuándo piensas en los tiempos que estuviste en la preparatoria, que experiencias específicas recuerdas? ¿Podrías describir ese tiempo?)

### Covert categories:

For the participants the experiences most associated with high school and the years of 14-18 are related to gender, identity, self-concept, self-esteem, isolation, fear, presentation of self, sexual experience, measuring self against others, performance, accomplishment, academic, extracurricular, failure, success, awareness of difference, and family. Exploration of these types of involvements also relate to the idea of identity development and the tendencies to become sexually active or remain sexually abstinent.

<u>Follow up question:</u> Think about the first time you had to make a decision about becoming involved in a sexual act, pretend you were back at that moment and describe what happened, tell me about the whole event.

### Topic Domain II: Sexual education at school

<u>Lead-off question</u>: Did you have a sexual education class in school? If you did, describe your be your experience. (¿Tuviste educación sexual en alguna clase en la escuela? ¿Podrías describir tu experiencia?)

### Covert categories:

Some things to note are students' reactions to the sexual education material, participants' reactions to the program, instructor's messages spoken and unspoken during and after the presentation of the program. Exploration of the sexual educational program used in school may have had an impact on the sexual activity decision.

### Follow up question:

What key points from the sexual education class do you remember most? (¿Cuál información recuerdas más del currículo de educación sexual?)

Pretend you are back in that moment, and describe your thoughts and feelings. (*Imagínate que estás en ese tiempo del pasado*, y describe tus pensamientos y sentimientos.)

If you did not have a sexual education class, describe your experience at school regarding getting sex information through other means. (Si no tuviste educación sexual en la escuela, describe tu experiencia de cómo recibiste información sexual por otros medios.)

# Topic Domain III: The influence of parents or significant caretaker, and extended family

<u>Lead-off question</u>: Describe a person who influenced you in your decision to remain abstinent or become sexually active. (*Describe una persona que influyó en tu decisión para mantenerte abstinente o ser sexualmente activa*.)

Describe events that you remember when this person talked to you regarding sexual activity expectations or guidance. Describe what happened as if you are trying to give me a vivid picture of the events. (Describe eventos que recuerdes de cuando esta persona te habló de expectaciones o te trató de guiar sobre actividades sexuales. Describe qué pasó, trata de darme una descripción vívida de esos eventos.)

### Covert categories:

Some of the categories to consider in this section will be the participants' relationship with the person who influenced their sexual activity decisions and the parents' discipline style (i.e., permissive, authoritarian, and authoritative)

### Possible follow-up questions:

You mentioned that your father is strict; can you tell me more about that? (*Mencionaste que tu papá es estricto, ¿me puedes decir más sobre eso?*)

What other incidents do you remember about your dad being strict? (¿Qué otros incidentes recuerdas donde tu papá fue estricto?)

If your parents talked about sexual topics, at what age did they first talk with you about those topics? (Si tus padres te hablaron sobre temas sexuales, ¿cuántos años tenías cuando tuvieron esa conversación?)

How often did they talk about sexual education topics? (¿Qué tan seguido te hablaron de temas sexuales?)

Describe key points that you remember about these conversations with the person that might have influenced you regarding your sexual activity. What were your thoughts and feelings? (Describe puntos claves que recuerdes acerca de esas conversaciones que tuviste con la persona que influyó tu decisión sobre tu actividad sexual ¿Cuáles fueron tus pensamientos y sentimientos?)

### **Topic Domain VI: Peer influence**

<u>Lead-off question</u>: Describe a time that you heard peers talk about sexual topics. (*Describe algún momento cuando escuchaste a tus compañeros hablar de temas sexuales*.)

### **Covert categories:**

Usually during the teenage years, peers have an impact on teenagers' sexual activity decisions.

### Follow up question:

Did you ever discuss sexual topics with a close friend or peer? (¿Alguna vez hablaste de temas sexuales con tus compañeros?)

If so, what do you remember most about these conversations? (¿Qué recuerdas de esas conversaciones?)

## **Topic Domain III: Latino and United States culture expectations on sexual behaviors**

<u>Lead-off question</u>: It sounds like you grew up among the Latino and the United States cultures. Describe expectations from both cultures on sexual behavior. (*Parece que te criaste entre la comunidad latina y de los Estados Unidos. Describe las expectaciones sobre actividad sexual de cada una de estas culturas.)* 

### Covert categories:

Topics to consider will be differences and similarities in Latino and United States expectations, cultural clash of expectations for sexual behaviors, *marianismo* and *machismo* tendencies, different sexual expectations for males and females.

### **Topic Domain IV: Media influence**

<u>Lead-off question</u>: Describe what you saw in the media, for example movies, magazines, or internet in regards to sexual topics. (*Describe lo que viste en los medios de comunicación sobre temas sexuales, por ejemplo películas, revistas, o internet*.)

Covert Categories:

Exploration of the use of technology is important because teenagers usually utilize technology.

### Follow up questions:

Pretend you are there when you were watching the movie, etc. What were your thoughts and feelings? Explain your thought process? (*Imagínate que estás en ese momento que viste alguna película con contenido sexual, ¿cuales fueron tus pensamientos y sentimientos.*)

Describe how those feeling and thoughts regarding sexual activity changed during your teenage years after watching what is on the media? (Describe cómo tus sentimientos y pensamientos acerca de la actividad sexual cambiaron durante tus años de adolescencia al ver lo que hay en los medios de comunicación.)

### Topic Domain V: Social-psychological issues

Lead-off question: Can you think about a time when you had to make a decision about becoming involved in a sexual act? Tell me about the whole event as you recall it. You do not have to give me details of the sexual act if you do not feel comfortable. Describe what happened as if you are trying to give me as vivid picture of the event. What were your thoughts? (Piensa en un momento que tuviste que tomar una decisión de involucrarte en un acto sexual. Dime lo que recuerdes de ese momento. No me tienes que dar detalles del acto sexual si no te sientes cómoda. ¿Cuáles fueron tus pensamientos?)

Covert categories: Topics to consider would be the participants' strategies for handling pressure, their beliefs on sexual activity; whether or not they consciously tried to make a statement through the way in which they handle pressure; whether they felt she was using assertive strategies in any way; their views during the teenage years on girls who become sexually active or abstained from sexual activity; their implicit psychological, social-psychological and sociological tendencies.

**Final question:** Do you have anything you want to add that we have not talked about? (¿Tienes algo que te gustaría agregar?)

(Carspecken, 1996)

## APPENDIX B

## Timeline for Data Collection and Analysis

Activity	Timeline
First interview of participants who had a child	March 2016
Transcribe interviews, Preliminary Analyze, Draft	
Second interview of participants who had a child Member Check Transcribed Data with Latina, Set of Interview Questions Based on Data,	March/April 2016
Γranscribe, Preliminary Analysis & Theme Identification	March/April 2016
First interview of participants who remain abstinent Interviews	April 2016
Transcribe, Analyze, Draft	
Second interview of participants who remain abstinent, Member Check Transcribed Data with Latina, Questions Based on Data	April/May 2016
Transcribe, Preliminary Analysis & Theme Identification	April/May 2016

### APPENDIX C:

### **INTERVIEW GUIDELINES**

### Getting Started

- Develop rapport and trust from the participants
  - o Talk about general topics like: the traffic, the weather, or sports events.

Talk about general topics

- Provide preliminary information:
  - o Why you are there
  - o Your purpose
  - o What you will do with the information
  - o How will you treat the information
  - o How long the interview will take
- Ask permission to record the interview

### The Body of the Interview

- Concentrate on listening
- Record the interview
- Take notes to remind you of follow up questions

### The End of the Interview

- Ask, "Do you have anything you want to add that we have not talked about?"
- Write down thoughts and reactions in a journal after the interview.

(Developed by Lichtman, 2010)

## APPENDIX D:

## CODE BOOK

F = Family,

E = Extended family

P = Peers

S = School

 $H = Health \ services$ 

M = Media

C = Culture