

Parent-Child Communication Related to Sexual Health: The Contextual Experiences of Rural Latino Parents and Youth

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Abstract: *Understanding how parent-child communication occurs within the cultural context is an important consideration in sexual health given that culture plays a major role in the development of various beliefs and attitudes. This qualitative study explores the perceptions of first-generation, immigrant rural Latino parents and youths (N = 19) regarding parent-child communication related to sexual health. Specifically, the article explores their perceptions on (a) the process of such communication when and if it occurs; (b) the content of such discussions when they occur; and (c) whether the content and process are guided by cultural scripts that stem from traditional gender and familial norms. Results suggest that parents provided gender-specific messages about sex to their children; meanwhile, these messages were delivered in strict gender concordance. Going against religious and father's expectations, the mothers also discussed birth control facts in greater frequency. As for youth, they expressed the need to have more conversations about sex with their parents, especially with boys. We discuss implications for Latino teen pregnancy prevention efforts.*

Keywords: *Sex-related communication, Latino parent-child interactions, culture, Latino teen pregnancy, gender roles*

INTRODUCTION

After years of steady decline, teen pregnancy rates in the United States have risen (Guttmacher Institute, 2010). The rate of incidence rose by 3% in 2006 (Guttmacher Institute, 2010). The overall teen pregnancy rates decreased by about 29% between 1990 and 2000 (Guttmacher Institute, 2006); however, that level of decline was not evident for Latinas. Between 1990 and 2000, the teen pregnancy rates only decreased 15% to 20% for Latinas, a much lower decrease compared to non-Hispanic Whites and African Americans (National Latino Resource Center, 2005; Ryan, Franzetta, & Manlove, 2005). This rate of incidence partially explains why some estimates suggest that 53% of Latinas will become pregnant at least once before turning 20 (National Campaign, 2009; Ryan et al., 2005). Thus, we maintain that pregnancy prevention efforts have not had the same degree of influence on Latinas as on other racial and ethnic groups.

Although teen pregnancy rates are similar between rural and urban communities, teenagers in rural communities account for a greater percentage of all nonmarital births than those in urban settings (36.2% v. 29.2%) (Litcher, Rascigno, & Condrón, 2003). The birth rate for females ages 15–19 in all regions was 52.4 births per 1,000 female

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adolescents. However, in rural counties, the birth rate is higher at 57.9 births per 1,000 female adolescents (National Center for Health Statistics, 2001). Among Latinas, some estimates suggest that the rate of incidence is nearly double that of non-Hispanic Whites (Guttmacher Institute, 2006). These statistics demonstrate a disparity in occurrence of teen pregnancies that should call for more attention in understanding how and why these differences exist.

In the state of Arkansas, early teen sexual behavior is a major health concern. As a rural state, Arkansas boasts some of the highest teen pregnancy rates in the country (Annie Casey Foundation, 2003; Guttmacher Institute, 2006). In 2009, Arkansas had the third-highest teen pregnancy rates in the nation (Centers for Disease Control and Prevention, 2009). The rate for girls ages 15–19 was 106 per 1,000 girls compared with the United States average of 78 per 1,000 girls (Annie Casey Foundation, 2003). In 2007, Arkansas also reported a significant problem of the incidence of sexually transmitted diseases in adolescents living there. The reported totals for those under age 19 were as follows: Gonorrhea – 1,391; Chlamydia – 4,056; Syphilis – 22 (Arkansas DHHS, 2005). In Polk County, where the current investigation took place, adolescent sexual behavior is prevalent. Among 9th and 12th graders, 48% reported they have had sexual intercourse and 15% reported having sexual intercourse before the age of 13. Moreover, 17% of 9th grade respondents reported having sex in the past 30 days (Arkansas DHHS, 2005).

Parent-child communication is posited as critical to preventing early teen sexual behavior and teen pregnancy. Albert's 2010 study using data from the National Survey of Family Growth, found that teens perceive the influence of their parents on their decisions about sex is greater than the influence of their peers, siblings, and media. Additionally the study found that over 80% of teens in the study believed that more open and honest conversation with their parents would help youth to make better decisions about sex. Consequently, understanding how parent-child communication occurs within the cultural context is an important consideration in sexual health given that there is growing recognition that culture plays a major role in the development of various beliefs and attitudes (Andrulis & Brach, 2007; Institute of Medicine, 2004). Yet few studies have attempted to understand the specifics of Latino parent-child communication in relation to sexual health (Guilamo-Ramos et al., 2006; Guilamo-Ramos, Bouris, Jaccard, Lesesne, & Ballan, 2009). Very limited research exists that seeks to understand the process and content about sexual health communication within the Latino cultural context that can inform prevention efforts that aim to reduce teen pregnancy rates. To address this knowledge gap, multiple focus groups of Latino participants living in a rural community in Arkansas were brought together to discuss their perceptions of (a) the typical process of parent-child communication when and if it occurred; (b) the content of such discussions when they occurred; and (c) whether the content and process is guided by cultural scripts that stem from traditional gender or familial norms.

BACKGROUND AND SIGNIFICANCE

Research suggests that sexual attitudes and beliefs are highly influenced by the cultural and familial context (Blake, Simkin, Ledsky, Perkins, & Calabrese, 2001). For Latinos, culture may be a salient source that prescribes attitudes and beliefs regarding

sex, especially because of the high importance placed on family, or *familialismo* (Marin, Sabogal, Van Oss Marin, Otero-Sabogal, & Perez-Stable, 1987; Sabogal, Marin, Otero-Sabogal, Van Oss Marin, & Perez-Stable, 1987). One qualitative study found that among 11th and 12th grade Mexican-American youths in San Francisco, parental and cultural prohibitions were important reasons cited for not engaging in sexual activity (Flores, Eyre, & Millstein, 1998).

One manner in which *familialismo* takes place within the family is by socializing the youth through communication (Guilamo-Ramos et al., 2009). Guilamo-Ramos and colleagues (2009) suggest that this process happens through dialogue, when parents convey to their children their rules and expectations. Existing evidence posits parent-child communication as an influential factor in shaping a youth's decision to engage in or abstain from early teen sexual activity. Parent-child communication about sex-related themes is highly relevant for youth because the information and values received from such conversations can shape an adolescent's way of thinking and increase his or her likelihood of adopting safe and healthy sexual behavior (Martino et al., 2008; Schouten, van den Putte, Pasmans, & Meeuwesen, 2007; Whitaker & Miller, 2000). Increased parent-child communication is correlated with lower levels of youth risk-taking behaviors (McBride et al., 2005), less conformity to peer norms, and a greater belief that parents provide the most useful information about sex (Whitaker & Miller, 2000). However, several studies report that such discussions between parents and children do not happen frequently, or if they occur, they focus only on the basic biological facts (El-Shaieb & Wurtele, 2009). The one qualitative parent-child communication study we located that focused specifically on Latinos reported that Latina mothers were able to talk with their children about the consequences of having sex, but not about more taboo topics such as sexual intercourse and birth control (Guilamo-Ramos et al., 2006). Among Latinos, talking about sex-related topics is uncomfortable and may also violate a cultural taboo, which may partially explain why it happens less frequently than it does among other racial and ethnic groups (Hutchinson, 2002; National Campaign, 2001; O'Sullivan, Meyer-Bahlburg, & Watkins, 2001).

Another plausible reason why Latinos may not frequently speak about sex-related topics could be the influence of religion. McCutcheon (2003) suggests that through religion, moral codes, practices, values, institutions, customs, and rituals associated with its belief system are transmitted to the individual. Among Latinos, religion continues to play a significant role as a socialization agent (Regnerus, 2009), in particular around issues of sex. Gonzalez-Lopez (2003) suggests that to some degree, sexuality for Latinas is shaped by the preservation of premarital virginity, which complies with the Catholic sexual moral code. However, the moral standards of Catholicism are only one factor that imposes such notions of social and moral control (Gonzalez-Lopez, 2003). This is evident in a national study that found that among Latino youths, relative to African American and non-Hispanic White youths, both boys and girls were least likely to report that religion and morals were a reason why they did not have sex (Abma, Martinez, Mosher, & Dawson, 2004). Nonetheless, we cannot discount the fact that there may be segments of Latinos that believe sex-related talks with their children may not be consistent with religious teachings and therefore abstain from engaging in such discourse.

Existing research has also found that among Latinos, gender differences exist when it comes to various facets of parent-child dialogues of sex-related topics. For example, Guilamo-Ramos and colleagues (2006) found that among a group of Latinas in New York City, there was a belief that conversations about sexual-related topics should be based on gender concordance (mothers should talk to daughters and fathers to sons) and concerns about pregnancy outcomes were more germane to girls than to boys. Although conflicting, some studies have found that gender predicts whether discourse about sex-related topics takes place in the home. Youths were more likely to have dialogues about sex with mothers than fathers and these conversations happened more with daughters than sons (Miller, Kotchick, Dorse, & Forehand, 1998; O'Donnell et al., 2007; Raffaelli, Bogenschneider, & Flood, 1998). For example, Epstein and Ward (2008) found that Latino college-aged men had the lowest levels of parental communication about sex compared with other racial and ethnic groups. Conversely, Romo, Lefkowitz, Sigman, and Au (2001) found that Latina mother-son dyads reported more communication around sex than mother-daughter dyads. However, in non-Latina samples mothers report more communication about sex and daughters report more than sons (Dilorio, Kelley, & Hockenberry-Eaton, 1999). Collectively, these findings may speak to the traditional gender roles prescribed in the Latino community that define and limit the behavior of men and women (Raffaelli & Suarez-al-Adam, 1998). There are certain roles and expectations that create gender differences that create a double standard for boys and girls in how sex-related topics are discussed and delivered. Faulker (2003) suggests that these cultural scripts delineate behaviors that correspond with Latino culture in ways that put forth expectations about what are appropriate and acceptable sexual beliefs and behaviors for Latinas and Latinos.

The above literature highlights the importance of gaining a better understanding of parent-child communication in Latino families relative to sexual health within their cultural context. The few studies exploring sexual health have been conducted in urban settings and have focused less on the contextual experiences of Latinos living in rural communities (Guilamo-Ramos et al., 2009). Even fewer studies have incorporated the perspectives of Latino males (Guilamo-Ramos et al., 2009). Through a qualitative inquiry, we contribute to the literature by exploring the breadth and scope of the content and process of sexual health communication among Latino mothers, fathers, and children living in a rural Arkansas community.

METHODS

The methodology for this study is grounded in a constructivist theoretical framework, in which themes and patterns in collected data are discovered rather than predetermined. Given that this topic has not previously been explored in depth, researchers took a qualitative, exploratory approach using a grounded theory methodology (Bryant & Charmaz, 2007; Patton, 2002). Through a constructivist lens, we sought to elicit the personal meanings and understandings of the participants' experiences around Latina/Latino parent-child communication of teen sexual behavior, sexual health, and pregnancy prevention. The research team consisted of three university professors and two master's degree students. There were two males and three females total. Team members

included a Latino male, an African American female, an African female, a non-Hispanic white female, and a non-Hispanic white male.

Sample and Recruitment

A community-based abstinence program called Voices 4 Healthy Choices (V4HC) was recently completed in rural Arkansas that included 19 Latinas/os that participated in the treatment group during the first year. Although the program was developed with the idea of being culturally sensitive to Latina/o participants (i.e., Spanish-surveys and translators available), it was not designed to focus exclusively on this group's needs but rather on the rural community as a whole. Focus groups were completed from the pool of year-one Latina/o participants to gather more in-depth data on the parent-child communication process in Latina/o families so that the program could better meet their needs. This manuscript reflects the data from these focus groups.

Purposeful sampling procedures were used to identify possible candidates for the focus groups. A family was eligible to participate if the child and at least one parent was of Latina/o descent, the child took part in the V4HC program, and the mother or father of the child participated in at least one of the parent activities sponsored by the program. All eligible Latino families were invited to partake in a focus group. Of the 19 Latina/o children who participated in year-one of the program, only 10 children had a mother or father who also participated in at least one of the parent activities associated with the full project. As a result, 10 families were eligible to join the focus group component; however, only 7 agreed and were scheduled to participate. On the day of the focus group, one of the parents was delayed at work and our group count consisted of 7 youths and 6 parents.

Recruitment of the participants occurred through telephone calls to the youths' homes. The study's purpose and procedures were outlined during these phone calls. The day the focus groups took place, informed consent forms were distributed explaining the purpose and procedures again. The university's Institutional Review Board approved the procedures for recruitment and participation used in the current study. All participants were given a \$20 gift card for contributing to the focus group.

The focus groups were assembled according to family roles and resulted in the following five groups: a group of fathers ($n = 3$), a group of mothers ($n = 3$), a combined group of boys and girls ($n = 7$); a girls-only group ($n = 5$) and a boys-only group ($n = 2$). The youths who participated in the combined boys and girls group were the same ones who participated in the boys-only and girls-only focus groups. The adolescent focus group was also split by gender so that we could focus our inquiry on examining specific gender-related topics. The parent focus groups were conducted with a Spanish translator (who was foreign born) and the mothers and fathers in the group represented different children. All six parent-participants had emigrated from Mexico and all but one of these participants stated that Spanish was the only language they spoke and read. All the youth-participants were fluent in English; therefore, their focus groups were conducted in English. Issues and cautions relative to the small focus group size are discussed in the limitations section.

Data Collection

The focus groups were conducted at the middle school the youths attended. Every focus group lasted approximately one to two-and-a-half hours. After the consent process was completed, a short demographic questionnaire was administered, which included a validated instrument to measure acculturation levels among the parents (Marin et al., 1987). The interview guide (see the Appendix) was created with the intent of capturing the participants' perspective on parent-child communication in regards to sex. Some specific areas of interest were exploring how this communication occurred, what was discussed, and how gender affected this process. The semi-structured interview guide was followed by each facilitator for consistency, but each facilitator went into depth with questioning when appropriate. The focus group discussions were audio-taped and later transcribed by a transcriptionist not affiliated with the study.

Data Analysis

The five members of the research team read all of the transcripts. Every member coded the transcripts independently to generate a first series of emergent themes and subthemes. Using a constant comparative method (Merriam, 1998), the team held a number of meetings to discuss the findings and look for research consistency. Notes were taken as part of the process and a journal was established that detailed our discussions. The data recorded in the journal were used during the final analysis as an additional source. For a more exhaustive reanalysis, two Ph.D. researchers from the team continued to reread each transcript and review the process journal using the notes and emergent themes identified from previous team meetings. Reanalysis of each narrative entailed a sentence-by-sentence appraisal, seeking and extracting open codes. The theoretical/conceptual framework of the study also served as a frame for the analysis process (Miles & Huberman, 1994). During open coding, possible themes were identified and short segments of text were underlined (Ryan & Bernard, 2000). Codes or categories were written on the right-hand side of the transcript. After open coding, axial coding was completed. This process linked relationships among codes and these codes then formed core categories. Finally, selective coding occurred when broad, more inclusive categories were found that encompassed several core categories. To ensure that themes were not misstated or misconstrued, the two researchers collaborated in the discussion of emerging themes and categories. Great importance was placed on coalescing these themes into suppositions made about the participants' experiences.

Trustworthiness

Trustworthiness is an important element in determining the level of rigor in qualitative research. Credibility, confirmability, and transferability are three factors often used to assess the trustworthiness of qualitative findings (Lincoln & Guba, 1985; Padgett, 2008). Credibility and confirmability pertain to the rigor in which the data and findings were obtained and transferability pertains to how the findings can be generalized to other contexts, settings, and practices (Lietz & Zayas, 2010; Padgett, 2008). To this end, our analysis included several techniques to increase credibility, clarity, and transferability of the results. Triangulation was used, which involves using multiple methods and

informants to analyze the data and results (Denzin & Lincoln, 1998). We used three different types of triangulation strategies (Berg, 2009). First, investigator triangulation was used, in which each of the members of the research team independently coded the transcripts and determined emergent themes and later compared their findings. The fact that all research team members generated similar themes increases the validity of the key themes. Second, we used participant triangulation by exploring the data to determine if points existed at which the data in one group corroborated data in other groups. There were numerous cases in which this occurred. Using theory-based triangulation, we also looked for points where existing research, theory, and literature suggested the perceptions of the different participant groups (i.e., mothers vs. fathers, parents vs. children, or boys vs. girls) were projected to converge and diverge. We also enhanced transferability by using thick descriptions that provide readers with information regarding the research context and protocol and the research participants (Lietz & Zayas, 2010; Lincoln & Guba, 1985; Padgett, 2008). The fact that our findings were consistent with expected situations enhances the credibility and transferability.

Using a process journal throughout the analysis, the researchers established an audit trail that included a sensitive narrative of the emerging themes and categories, which enhanced the confirmability and transferability of our results (Lietz & Zayas, 2010). Furthermore, the confirmability of the data analysis was established by having multiple coders and a peer research team. Cultural sensitivity was also promoted by incorporating a Latino male in the data analysis process. As the focus groups progressed, the researchers were able to explore the preliminary themes emerging from the previous groups to enhance clarity of the findings. Due to the semi-structured interview format, the researchers were able to check these preliminary themes with the participants in each subsequent focus group, thereby enhancing the level of confirmability and credibility. Major importance was again placed on every individual's narrative, his or her experiences, and subsequently, the representations of these experiences.

RESULTS

Latina/o is not a monolithic label and there are significant differences between individuals, often based on their country of origin and level of acculturation. As a result, it is important to note that all of the parent-participants had emigrated from Mexico. The fathers had been in the United States an average of 23-24 years, while the three mothers had emigrated approximately 14 years ago. The level of parent-participants' acculturation was also taken into account. We utilized a commonly used measure of acculturation (Marin et al. 1987) to determine the extent to which our participants' attitudes and beliefs had been modified by living in the United States. All but one of these participants commented that Spanish was the only language they spoke and read, only Spanish was the language in which they think, and only Spanish was spoken at home and to their friends. The sixth participant said that she spoke, read, and thought in Spanish, but spoke both Spanish and English. Based on these results, all of the parent-participants reported low levels of acculturation (Marin et al. 1987). The youth appeared to be more acculturated. Most were born and raised in the United States and all of them had a good mastery of the English language.

All participants were specifically asked about communication between parents and children relative to sex. The responses resulted in discussions about process (how they go about talking about sex) and the content (what they actually talk about). Under the theme of process, responsibility for communication and communication style emerged as key points of discussion. Under the theme of content, protection, teen sex, responsibility, goals, consequences, and ambitions emerged as key points of discussion. Traditional gender-specific messages were also focused on under this theme. There was a convergence of opinions between the individual participants and focus groups, but also a divergence of communication style and content.

Process

There was a divergent attitude on who should be responsible for communicating information about sex to children. The mothers jointly believed that fathers need to be more involved in this communication process, but they often are not. When trying to get her husband involved in sexual discussions one mom stated that her husband said, "Oh, you know how to do it. You do it. You know how to do it." One mother expressed, "Sometimes my kids go to the bedroom when he is there, then I'll start the conversation about sex with my kids there. Then maybe I will say something that I know makes him want to say something. That's the only way I can get him to participate. He would rather watch his TV show." Another mother stated, "I am more open to talk about sex with my kids than my husband is. If my husband knows anything it's because I tell him about it. Because if not, he would never know."

Two of the fathers confirmed this belief in the mothers being more responsible for this communication. The third father disagreed and expressed his belief that both mother and father are responsible. He stated, "I believe we as parents need to educate ourselves. In my case, I love to read. It's a very important thing." While the fathers did not take credit for being the primary communicators with their children, they all consistently perceived that their responsibility for parent-child communication in regards to sex had changed from how it was communicated to them. Because of their children's increased knowledge about sex they too had to be more knowledgeable. One father stated, "But they already know, they learned that in school. They learned on the Internet. They watch on the Internet." Nonetheless, they also perceived that their children trusted them enough to come to them and talk and to confirm the information. One father said, "If they ask us, they may already know it, but if they come to us to ask us—to confirm what they already know—because of the trust he has. They come to us because they trust us even if they know it, they come to us." While mothers thought it was important for them to talk to both the boys and girls, the fathers perceived it was the mother's role to talk to the girls and their role to talk to the boys.

In reviewing the data, it was also clear that the mothers' communication styles were more direct, explicit, and detailed. The fathers perceived their discussions of sexual issues to be informal, implicit, and superficial, particularly with their daughters. When discussing how he communicates to his teenager about sex, one father stated, "But we don't exactly go to the table and talk about it. Sometimes we do. Sometimes we talk about this subject but not really deeply." Another father said, "We talk about the subject

but not really deeply.” The fathers also confirmed what the mothers and teens said about the more explicit conversations occurring with mom. The Spanish interpreter confirmed what one of the fathers was trying to say. She said, “They coat what the mom has to say, they put in the last layer.” Another father said, “The mom tells the girl when they get their period and what they need to do. We just support them.”

When questioned about what leads to the conversations and how they come up, the fathers reported play and work as the two avenues. With regard to play, one father stated, “Oh like kidding and joking” and another said, “Little by little we just keep joking and we start talking about it.” With regard to work and play, another father stated, “and we’re working together, and we just start talking. Or at home when they put on the lotion, deodorant, they fix their hair. ‘Hey where you going?’ ‘Oh I’m going to the park.’ Oh the boys and the girls, so that’s how we start talking.”

Confirming the parents’ reflections, the children consistently agreed that the parent-child conversations about sex were primarily with their mother versus the father. Only one girl reflected that her father discussed any sexual topics with her. This was consistent with the data from both the mother and father focus groups where one father indicated that he talked to his daughter. The boys also reported experiencing the dads talking with them about sex and expressed more comfort with this; but again, it was described as an informal discussion, usually in a work or outdoor setting. One teenage boy stated, “I think with my dad. Because most the time you’re with him and not nearly as much with your mom. Because we spend time working outside and because he’s the man.” When directly asked what the fathers talked to the boys about, the boys were unable to come up with any topics.

All of the mothers perceived themselves as the primary initiators of the conversations with their children. On the contrary, most of the youth believed that they themselves brought up these conversations. One teenage girl commented that her friends at school would bring up something “nasty” and she would not know what they were talking about. She went on to say, “So I would ask my mom. What does that word mean and she would tell me.” Interestingly, the youth thought that they were cleverly getting their parents to talk about sex by bringing up topics that they knew would lead to discussions of sex. A teenage boy said, “Sometimes I would ask my parents ‘When can I have a girlfriend?’ They would go like, whenever you have the responsibility and you’re at the right age. Then that would lead into other things about girlfriends, then it leads to sex and goes from there.”

The youth who perceived that their parents initiated sex conversations confirmed that such conversations usually started informally with both the mothers and the fathers. For example when discussing how the conversations get started one girl said, “Well they always start it off by saying ‘when I was a kid’ and I’m like here we go again.” One female adolescent also stated, “When I’m interested in a guy, they talk, they explained everything that happens when you fall in love.” Lastly, even though the adolescents agreed that conversations around sex occurred periodically, usually with the mothers, both the girls and the boys wanted these conversations to occur more frequently. When reflecting on parents not wanting their kids to learn about sex from other sources one girl

stated that she would tell parents, "Well I would say, 'then you should talk to them about it.'" Another girl stated, "In my opinion it's ok for them to know (about sex) when they start growing up. So they will know what's going on. If it's a girl and a boy is messing with her. They need to know what he is doing to her." Interestingly, both boys and girls made the point that because there is a gender difference in this process, boys are often not included in these conversations and need to be. When questioned about the gender-differences in these conversations one teenage boy expressed, "Make sure the parents know that you are having a relationship." When asking for clarification the interviewer asked, "So you think parents should investigate more with boys?" He then went on to confirm, "yeah."

Content

When talking with their children about sex-related topics, the fathers reported talking primarily about relationships, responsibility, and good moral character. The fathers consistently believed they are responsible for their child's attitudes about sexual behavior but these attitudes should be transferred by being a good role model. One father said, "It's mostly the parents how they direct them. Because a lot of parents get home and all they do is go watch TV, and then go to bed. Then on weekends all they do is drink, drink, drink." Another said, "You don't see us as having so many women, or drinking alcohol, drugs. If they don't see that in us and then they're not going to look for it. They're going to be quiet and peaceful because they know we're quiet. They're going to see that in us." The third stated, "We try to be good parents, good fathers. Talking and keeping them busy in activities and on the weekends. So not just thinking about parties, parties, parties....We are like the brain of the family, we're wrong and everything else will be wrong. More than anything, we are the ones that have to go on the good path. Take the boat in the right direction."

Even though the fathers knew that the mothers' conversations with the children, especially the daughters, were more explicit and direct, they assumed the mothers were delivering messages to the children that were similar to their messages of good character, moral values, and achieving goals and ambitions. As a matter of fact, one father expressed that people who teach youth to carry condoms would send the wrong message "...What are they saying? Here, go. They are inviting them to have sex before they get married. What is the moral authority that is involved in this to do that?" Ironically, the mother participants were communicating different messages to their daughters. Reflecting this, one mother stated, "usually the father may have different opinions."

The mothers reported talking primarily about protection from pregnancy and sexually transmitted diseases (STDs). An example is apparent in the following quote from a mother talking about what she most wished to communicate to her child: "For me, it's how to protect themselves against STD. To protect themselves from getting pregnant so early in life. To have a goal in their life. So they know what they're going to be when they grow up." Another mother stated, "For me it's very important for them to protect themselves and to not start having sex so early in life either. And then to fight for whatever they want to be, to pursue their dream." The third mother echoed, "For me it's the same." Another example of the divergent parent attitude was when one mom was

talking about birth control. She said, "I do [talk about specific forms of birth control]. The only thing he says is that she has to protect herself. But he doesn't actually believe that. But I do." Another responded passionately, "For me, they're going to have sex whether they have the information or not. The difference is they need to know how to protect themselves."

According to both the mothers and fathers, common secondary themes were the topics of goals, aspirations, and consequences. They wanted their children to realize that having a child at a young age could hinder them from obtaining their goals and dreams. When asked about the content of conversations with their children, one father indicated that he talked about the "consequences of having sex on you. What can happen? They mess up their lives—not totally, but their studies, their efforts. They have to work at Tysons all their lives—that sort of thing." Another father stated his message to his daughter was, "just don't have a kid so young. You get a disease in the system, be messed up."

The youths seemed to grasp that a key component of parent-child topics of sexual health communication was talking about the negative consequences of teen pregnancy. An example of these negative consequences is clearly seen in one of the father's previous comment to his daughter, "If you come out on the bad side, everything falls apart. If you behave you will get what I promised. If not all will be broken." Similarly, a teenage girl said, "My mom would always tell me if you get with a guy and you have a baby, 'You get out of this house!' I am like, what the heck!"

Consistently, the youth said their parents followed the traditional cultural script in regards to gender when discussing topics of sex (Murphy-Erby, Stauss, Boyas, & Bivens, 2011). They reflected that these conversations and house rules were different based on the gender of the teen, and that it was okay to have different discussions and expectations. In describing this difference one teenage boy said, "They don't let my sister, she is sixteen, have a boyfriend. Yet, I ask my parents, can I have a girlfriend, and its like if you ask your parents first, you can have a girlfriend." When explaining why it was okay to treat girls and boys differently, the youth consistently reflected that the girls would be the ones left with the baby. As one girl remembered her mother's statement to her she commented, "If you get pregnant you have to take care of this. She's been showing me my whole life how to take care of a kid." Another stated, "Coz the boys will not want to take care of a baby." A third said, "They will just leave. That happens a lot here."

In discussions regarding gender specific messages, both girls and boys heard from their parents that boys were always focused on sex and, therefore, unable to make good decisions in regards to initiation of sexual contact. Examples from the girls include: "She (her mother) says that guys are different because they have hot hormones," and "Girls are different cause they are more mature, and they have to learn how to speak like do not touch me up here or down there. Guys don't have to worry about someone touching them. Cause they are guys of course." Another female reflected, "Some families will tell their boys, yeah, you can go off and have sex with this girl as long as you use protection but then they will tell their daughters, no, you shouldn't have sex or you can't even have

a boyfriend.” Confirming these gender-specific messages one of the boys stated, “It’s okay to be different (conversations), because we’re different. If they want to have a baby they could have it. The boys have to depend on girls saying yes.” The other boy confirmed, “Because if the girl didn’t want to do it she could say no. What if he really wants to and she doesn’t.”

DISCUSSION

Minimal research has been conducted with rural Latina/o families in relation to sexual health, particularly among first-generation immigrant families. Through our study this group was given an opportunity to give first-hand accounts of the ways in which parent-child sex communication occurs. The findings suggest that the parents of this study, particularly the mothers, recognize the need to change the process of sexual communication with their own children. They want to connect more with their children by broadening their conversations to include delicate subject matters such as sex. This is a change in parental norms from how older generations have handled the issue of sex, which could be a result of the evolution of the acculturation process to the United States. In previous studies, lower levels of acculturation (Driscoll, Biggs, Brindis, & Yankah, 2001), being from Mexico (Driscoll et al., 2001; Raffaelli & Green, 2003), being male (Raffaelli & Green, 2003), and coming from a lower socioeconomic status (Raffaelli & Green, 2003) resulted in decreased sex communication. Contrary to other studies (El-Shaieb & Wurtele, 2009; Guilamo-Ramos et al., 2006), the sample of mothers in this study were invested in talking to their children about more than biological facts in regards to sex but they were also passionate about discussing birth control. Going against more traditional cultural norms, both mothers and fathers also recommended that the fathers need to be more involved in this process.

Consistent with existing research (Kirkman, Rosenthal, & Feldman, 2002), our findings suggest that there was a strong belief in gender concordance when it comes to sexual health communication. In other words, there was a belief among fathers and mothers that conversations about something as sensitive as sex should be based on fathers talking with their sons and mothers talk to their daughters. Fathers and mothers agreed that they each had a responsibility to talk with their sons and daughters about sex, but that this should be done through strict traditional gender role expectations. While this was a practice that was more in line with traditional cultural thinking, these parents still believed it themselves. Even though the youth established that conversations with their parents should be gender-specific, both the boys and girls also agreed that boys need to be brought more into the conversations and that parents need to be more cognizant of the boys’ behavior.

Implications

The participants’ accounts and insights into their perceptions and experiences offer guidance and hold specific implications for teen pregnancy prevention efforts. As current statistics indicate, programming and policy efforts aimed at reducing teen pregnancy are not as effective with the Latino/a population in comparison with other populations. Although many sex education programs have attempted to integrate culturally competent

interventions, none has applied a theoretical framework that addresses the complex and interlaced dimensions of underserved populations (Kreinin, 2004). Taking these dimensions of the Latino experience into account, we used the Multi Systems Life Course (MSLC) perspective (Murphy-Erby, Christy-McMullin, Stauss, & Schriver, 2010) as our theoretical framework. As conceptualized by Murphy-Erby and colleagues (2010), the MSLC perspective is a dynamic, integrative, and holistic assessment and intervention approach that attempts to synthesize four disparate yet interrelated and complementary theoretical frameworks. Recognizing the need for a framework that is sensitive to the intricacies of human experience, MSLC makes a shift from traditional reductionist, linear, one-dimensional models to a postmodern, emergent, holistic, nonlinear, and multi-layered view. MSLC accomplishes this by incorporating the frameworks of ecological/systems perspectives, symbolic interactionism, life-course theory, and social change theory. In accordance with the MSLC perspective, the studies on sexual health communication should also reflect an understanding of the complexity of the Latino experience. To this end, we present several implications for practice and programming efforts relative to teen pregnancy prevention efforts with Latino families that capture a great deal of this.

With regard to practice with Latino families, there are several implications for clinicians. Assessment is an important and ongoing process for clinicians. It is important for clinicians to explore each family's process for discussing sensitive topics such as sex. In implementing the assessment, it will be important for the clinician to triangulate data sources by conducting a mix of individual, family and couples work as a way to determine if the mother and father are delivering conflicting messages in communicating with their children about sex.

In working directly with the parents and youth, clinicians may sense a need to help the youth and parents challenge traditional beliefs and practices such as the cultural belief that the responsibility of pregnancy and sex decisions should be shouldered more so by girls than by boys and the parenting strategy of focusing heavily on consequences with minimal use of parenting strategies that involve the use of support and trust, particularly with regard to their daughters. It is important for clinicians to be aware that challenging such traditional beliefs and practices may present a cultural discord. Therefore, it is important for clinicians to ensure their work is grounded in an empowering and culturally relevant perspective. Similarly, one of the major differences in the perspectives of parents and children centered on acculturation levels, and subsequently, the differences in how each perceived the process and content of discussions relating to sexual health. On the one hand, most parents who were not highly acculturated reported that this topic was hardly discussed when they were younger in their native country of Mexico. They perceived this to be a divergent practice in the United States—everyone talks about sex in the United States with more ease. Youth on the other hand, believed that their parents needed to be more “laid back” and “cool” about this topic. Thus, we believe this to be a sign of an acculturation gap that has been noted in parent-child relationships, where one or both parents were born outside of the United States (Birman, 2006). It is important to recognize that such a gap can have negative implications in the household because neither can fully relate to the other. Because of the importance of sexual health, it will be

important that clinicians working with such family dynamics identify and/or develop strategies that could be implemented in their work to bridge this cultural gap. Doing so could open and enhance the communication between Mexican-origin parents and children about a sensitive topic that is rooted in cultural divergence.

With regard to programming, incorporating opportunities for Latino parents to talk about their immigration experiences and their relation to parenting and talking with their children about sex and other risky behaviors, providers of teen sex prevention programs can validate the experiences of Latino participants while also gaining a better understanding of the challenges they face in communicating with their children about sex. Although many teen pregnancy prevention efforts incorporate a parent component, programs that target the Latino population would probably benefit by using additional strategies to specifically recruit and engage Latino fathers. The significance of fathers in achieving positive well-being outcomes for children has been well documented over the last decade (Popenoe, 1996; Yeung, Duncan, & Hill, 2000). Consistent with existing research (Kirkman et al., 2002), our findings suggest that while the fathers in our study understood the importance of their role, they were less involved than mothers in communicating with their children about sex, less informed about the topic, and felt they needed more education on the topic. The mothers and the fathers both felt that collaborative efforts involving the fathers were needed. According to the fathers and mothers in our study, one reason for the low involvement of fathers is that the fathers spend much of their time working. Therefore, it is important for program leaders to consider creative ways such as embedding education and information into fun and social activities that are planned during the times that fathers are off from work to welcome and engage the fathers into the program's efforts. As one of the fathers in our study suggested, potluck gatherings where the fathers could bring dishes they like to make might serve to motivate the fathers to participate. In addition, given that the connection between time and earning is salient for the fathers, honoraria that recognize the value of their participation and time are important. Also, recognizing the divergent perspectives and comfort levels between the Latino mothers and fathers in talking with their children about sex, teen pregnancy prevention programs may also benefit by using a hybrid of father-only and mother-only groups in conjunction with combined parent groups.

Given the focus that the fathers placed on informal and more indirect styles of communication and social interactions, incorporating experientially-based and active learning strategies into the parent-only and father-only sessions may be helpful. Also, given the importance that the Latino parents placed on responsibility and good moral character, incorporating strategies to promote youth asset and character development in both the youth and parent components of prevention efforts may be beneficial.

Limitations

Two study limitations warrant attention. First, although the focus groups reflected the experiences of 7 of the 10 Latino children whose mother or father also participated in the program and were therefore eligible to participate in this study, the individual focus group sizes were less than the recommended 6–8 participants (Krueger & Casey, 2000). Even if the number of eligible families were larger, the researchers and parent

participants believe that perceived language communication concerns and fears may prohibit many Latina/o parents from participating in research. To minimize the limitation of small focus group sizes, the researchers paid particular attention to triangulating the responses between the various focus groups and the current literature.

Second, while analysis of data from the larger study suggests there were no obvious demographic differences between the eligible Latino parents who participated in the focus group and those who did not, it is plausible that differences do exist that are not captured by the demographic data collected for the larger study. For example, although our demographic results suggest that all of the participants were immigrants of Mexican ancestry with relatively low levels of acculturation, it is highly possible that the parents who participated were in general more comfortable communicating about sex and participating in research. Additionally, since the Latino population is not a monolithic cultural group, the transferability of our findings are limited as each subgroup may have a different social experience in the United States. Understanding that a great deal of heterogeneity exists within this population with regard to cultural, legal, and socioeconomic differences, there is a need for developing interventions that are more culturally specific in order to produce better health-related outcomes.

While the study was not designed to produce findings that are generalizable, they are transferable and add value to the study participants and those working with the participants in a number of ways. First, the study highlights the voices and contextual experiences of Latino families in the V4HC program. Second, it informs the program's efforts by providing concrete recommendations for adapting the program to better serve the Latino population. Finally, our study is an initial step in addressing a major gap in the literature and provides a much-needed impetus for researchers, funders, practitioners, public policy makers, and others committed to reducing teen-pregnancy rates to further explore the experiences and highlight the voices of Latino parents and youths relative to parent-child communication about sex.

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Appendix

Interview Guide

- 1) Before you were involved in the program did you talk to your child/parent about sex related topics?
- 2) What messages did you get from your own parents about communication about sex? (Question to parents)
- 3) What role do you see mothers and fathers needing to take when helping youth not get pregnant?
- 4) How did these conversations occur or come up?
- 5) Do you talk to your daughters and sons/mothers and fathers differently when it comes to sex?
- 6) If answer is yes to above question then...Does that communication process need to change or does that work for your family or situation?
- 7) Are there things that girls need to learn from their fathers and boys need to learn from their mothers?
- 8) What kinds of things do you talk about?
- 9) How does their culture affect how they communicate with their kids in regards to sex?
- 10) What are the challenges that Latina/o people face in a rural community as far as teen pregnancy?
- 11) What types of knowledge or information would help you with these discussions?
- 12) Any suggestions for future programming in regards to prevention of teen pregnancy?

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