

Summer 8-22-2014

Sexy But Not Sexual: An Examination of the Sexual Narratives of African American Adolescent Females

April Timmons

DePaul University, atimmon1@depaul.edu

Follow this and additional works at: https://via.library.depaul.edu/csh_etd



Part of the [Clinical Psychology Commons](#)

Recommended Citation

Timmons, April, "Sexy But Not Sexual: An Examination of the Sexual Narratives of African American Adolescent Females" (2014). *College of Science and Health Theses and Dissertations*. 85.
https://via.library.depaul.edu/csh_etd/85

This Dissertation is brought to you for free and open access by the College of Science and Health at Digital Commons@DePaul. It has been accepted for inclusion in College of Science and Health Theses and Dissertations by an authorized administrator of Digital Commons@DePaul. For more information, please contact digitalservices@depaul.edu.

Sexy But Not Sexual: An Examination of the Sexual Narratives of African
American Adolescent Females

A Dissertation

Presented in

Partial Fulfillment of the

Requirements for the Degree of

Doctor of Philosophy

By

April Timmons

August, 2014

Department of Psychology

College of Science and Health

DePaul University

Chicago, Illinois

Table of Contents

Dissertation Committee.....iii

Acknowledgements.....iv

Biography.....v

Abstract.....vi

Introduction.....1

 Identity Development Theory.....4

 Sexual Self.....5

 Sexuality Development and Adolescence.....6

 Sex Positivity and Sex Negativity in Adolescence.....9

 Female Adolescent Sexuality.....12

 Gender Norms.....12

 Desire.....15

 African American Female Adolescent Sexuality.....20

 Religion and Sexuality in the African American Community..... 27

 Rationale.....34

 Research Questions.....37

Method..... 38

 Participants.....38

 Procedure.....39

 Recruitment.....39

 Interview Process.....40

Instrument.....	40
Analysis and Results.....	42
Analysis.....	42
Bracketing Of Experiences.....	43
Coding.....	46
Reviewing Interviews.....	46
Content Analysis.....	46
Thematic Analysis.....	47
Coding Refinement.....	47
Data Comparison.....	47
Data Verification.....	48
Results.....	50
Discussion.....	80
References.....	99
Appendix A.....	110

Dissertation Committee

W. LaVome Robinson, Ph.D. ABPP, Chairperson

Gary W. Harper, Ph.D., MPH

Midge Wilson, Ph.D.

Trina Davis, Ph.D.

Francesca Royster, Ph.D.

Tracey Lewis-Elligan, Ph.D.

Acknowledgements

I would like to express my sincere gratitude and appreciation to Gary W. Harper, who has guided me not only through this dissertation process, but through the entire process of my graduate school career. Gary believed in me when I did not believe in myself, and this absolutely would not be possible without him. I would like to express heartfelt appreciation to Dr. W. LaVome Robinson, who has served as a mentor to me throughout graduate school, and who stepped in as chairperson of my committee when Gary could no longer, due to a change in university. I would like to thank Dr. Wilson, Dr. Davis, Dr. Royster, and Dr. Lewis-Elligan for their thoughtful and valuable input. I would like to thank my mother, father, and sister. I would not have been able to accomplish this without their consummate love and support. Lastly my deepest appreciation goes to my fiancée, Donald Tyler who served as my emotional rock providing unconditional love, encouragement, and belief in my abilities. Thank you!

Biography

The author was born in New York, New York on May 11, 1979. She graduated from Hunter College High School, received her Bachelor of Science degree from Lincoln University of Pennsylvania in 2001, and a Master of Arts degree in Applied Psychology from Columbia University in 2004.

Abstract

Much of the research on sexuality during adolescence has focused on the potential negative sequelae of adolescent sexual behavior such as STI acquisition or teenage pregnancy. Researchers have begun to advocate for examining adolescent sexuality as a normative aspect of adolescent development. One aspect of this examination would be to form a more complete understanding of how adolescents develop their sexual identity – their conceptualization of themselves as a sexual being. Erickson's (1968) identity development theory asserts that identity is developed internally and shaped by the social environment.

Development of a healthy sexual identity may be particularly difficult for African American adolescent females, as adolescent females are consistently warned of the potentially negative consequences of sexual expression. Despite this, popular culture is saturated with images of sexualized young women who represent the ultimate object of male desire. For adolescent African American females this process may be further complicated by historical stereotypes associating them with sexual exoticism, sexual promiscuity, and disinhibition. Additionally, religion has proven to be influential in shaping norms and attitudes around sex and sexuality in the African American community.

Using a psychological phenomenological approach, the sexual narratives of 20 African American adolescent females were examined for positive and negative conceptualizations of sex, the presence or absence of named sexual desire; and for various gender, cultural or religious influences that emerged which impacted these young women's understanding of their sexuality.

Introduction

Sexuality affects almost every aspect of our lives. As the former Surgeon General of the United States remarked:

Sexuality is an integral part of human life. It carries the awesome potential to create new life. It can foster intimacy and bonding as well as shared pleasure in our relationships. It fulfills a number of personal and social needs, and we value the sexual part of our being for the pleasures and benefits it affords us (Satcher, 2001, pp.1).

Sexuality refers not only to the physical act of sexual intercourse, but to the understanding of oneself as male or female; all emotions, feelings, and cognitions related to attraction and romantic relationships, the physical changes involved with sexual maturation, as well as all factors related to procreation, gestation, and birth (Greenberg, Bruess, & Conklin, 2011). How we understand our sexuality, and understand ourselves as sexual beings, can affect the way we think, act, relate to others, and influence the behavioral choices we make.

Adolescence has been referred to as a “critical” period in sexuality and sexual development (Moore & Rosenthal, 2006). Adolescence, defined broadly as the time between ages 13 and 24, is conceptualized as the developmental stage within which the primary psychological goal is identity development (Erickson, 1968). This is the time in which individuals begin to question the ideas and values accepted as a child and seek to determine if those ideas and values correspond to the independent adult one is becoming. One seeks the answer the question “who am I?” related to every aspect of the self, including the sexual self. Although

identity development in itself is viewed by many as an internal psychological process, it has long been recognized that external circumstances and the social environment have a very large impact on identity formation and psychological development during this time period (Bronfenbrenner & Morris, 2006; Erikson, 1968). Adolescents are early in the identity development process which makes them especially susceptible to the influence of the social environment in shaping how they view themselves. During adolescence, the awareness of the desire for sexual pleasure becomes apparent, sexual values begin to develop, and adolescence is frequently the time when sexual behavior is initiated (Moore & Rosenthal, 2006).

The exploration of sexual feelings and the expression of sexuality during adolescence is often a different experience for males and females. For heterosexual males, sexual exploration is routinely normalized. Adolescent males typically learn about their genital organs early in childhood, as they are located externally (Hyde, 1991). As males progress into adolescence they come to associate their genital organs with sexual pleasure, often learning of ways to self-pleasure from peers, family members, or popular culture (Hyde, 1991, Usher 1989). For young women, the socialization around their sexuality is very different. Adolescent females are not encouraged to explore the sexual aspect of themselves (Tolman, 2002). By contrast, through explicit teaching and social cues, young women learn that they are supposed to discourage sexual contact and are warned to avoid any situation that may make sexual contact a possibility. Socialization has taught adolescent females that overt expressions of sexuality

may result in loss of reputation or loss of respect (Fine 1988; Fine & McClelland, 2006; Tolman, 2001; Tolman, 2002). Despite this, the public is bombarded with images of sexualized young women who are presented as the ultimate object of male desire (American Psychological Association Task Force on the Sexualization of Girls, 2010).

These conflicting messages can make it difficult for adolescent females to develop a coherent understanding of their own sexuality. For African American young women, this process can be even more challenging as racially based sexualized images which depict African American women as “Jezebels,” “Welfare Mothers,” or more recently as “Freaks,” or “Baby’s Mamas” have historically been woven into American discourse (Hill Collins, 2000; Stephens & Phillips, 2003). In addition, for African American adolescents, religiosity has proven to be an influential factor in the development of sexual attitudes and in engagement in sexual behaviors. Specifically, while religiosity may be associated with a later age of sexual debut and a lower number of sexual partners (Gold et al., 2010; Landor, Simons, Simons, Brody and Gibbons, 2011; McCree, Wingood, DiClemente, Davies, Harrington, 2003; Steinman & Zimmerman, 2004), it is also associated with negative attitudes about sex and constricted beliefs about the appropriate modes of sexual expression (Coyne-Beasley & Schoenbach, 2000; Manlove, Logan, Moore, & Ikramullah 2008; Rostosky, Regnerus, & Wright, 2003).

Only in the last decade has adolescent sexuality begun to be widely explored as a normative aspect of development (Halpern, 2010; Tolman &

McClelland, 2011). Until recently, adolescent sexuality has been conceptualized as inherently dangerous; with negative outcomes such as teenage pregnancy and STI acquisition being the primary focus of research (Halpern, 2010; Kaestle, Halpern, Miller, & Ford, 2005; Tolman & McClelland, 2011). Given the need to understand sexuality development from a normative developmental, perspective, and the difficulties that adolescent African American females in particular may have in negotiating their sexual self-concept, this study will seek to better understand the sexual narratives of sexually experienced heterosexual African American adolescent females. Specifically, this study will explore their sexual narratives and examine these narratives for aspects of sex positivity and sex negativity, the presence or absence of named desire; and for various gender, cultural and religious influences that may emerge which impact these young women's understanding of their sexuality.

Identity Development Theory

According to Eriksonian's theory of identity development (1968), young people enter adolescence unclear of who they are and who they want to be. Optimally, by the end of adolescence, they will have developed a clear sense of who they are and who they would like to become. During adolescence, through exploration and lived experience, attempts are made to reconcile notions of past, present and future selves into an integrated whole. This integrated whole is conceptualized as identity. Erikson (1968) identified experiencing a sense of inner sameness, and having consistency of this inner sameness over time as necessary

prerequisites for a sense of identity to occur. Although this identity formation process is internal, Erikson (1968) stressed the importance of the social world in which the adolescent lives as exerting influence on the process and ultimate outcome of identity formation.

The term identity can refer to an integrated sense of self as a whole, and applies as an understanding of self across different domains. One can claim an infinite number of identities at any given time (Roccas & Brewer, 2002). Within traditional Eriksonian theory and continued with the work of James Marcia (Schenkel & Marcia 1972), overall identity achievement was measured by adolescents having achieved a firm religious identity, political identity, and occupational identity (Erikson, 1968; Schenkel & Marcia, 1972). Since that time, psychologists have studied a myriad of different identities that an individual may claim - ethnic identities (Phinney & Rosenthal, 1992), gender identities (Bedard, Zhang & Zucker, 2010) sexual orientation identities (Jamil, Harper, & Fernandez, 2009), sexual identities¹ (Archer & Grey, 2009) and national identities (Devos, Gavin & Quintana, 2010) are among them. Any answer to the question “Who am I” could be conceptualized as an identity. Thus, an adolescent’s attempt to understand who they are as a sexual person could be seen as trying to understand their sexual identity, sexual self.

Sexual Self

The “sexual self” has been discussed and defined in many different ways within the literature. Terms such as “sexual self-schema” and “sexual self-

¹ Sexual identity, as used throughout this paper refers to a sense of who you are as a sexual being (Cass, 1984). This is distinct from sexual orientation identity, which is related to the sex for whom you have sexual desire.

concept” have been used. The term “sexual self-schema” was coined by Anderson and Cyranowski (Andersen & Cyranowski, 1994). They defined the sexual self-schema as cognitive generalizations about sexual aspects of oneself. These cognitions are derived from past experience, manifest in current experience, and are influential in the processing of sexually relevant social information. Anderson and Cyranowski posit that these cognitions guide sexually related behavior. Sexual self-concept is a broader term encompassing sexual identity, sexual self-view, sexual self-schema, and sexual self-esteem (Vickberg & Deaux, 2005). Others have simply defined sexual self-concept as an individual’s view of him or herself as a sexual person (O’Sullivan, Meyer-Bahlburg, & McKeague, 2006). Throughout this paper, sexual identity, sexual self-concept, and sexuality identity will be used interchangeably to refer to a sense of oneself as a sexual being.

A very important component of the sexual self-concept is sexual subjectivity. Sexual subjectivity is a part of one’s understanding of oneself as a sexual being, conceptualized as an awareness of one’s sexual desires and responses, a sense of entitlement to those sensations, and the requisite agency to advocate for one’s sexual pleasure or sexual safety (Schick, Zucker, & Bay-Cheng, 2008). The recognition and acceptance of sexual desire is necessary in order to experience subjectivity. While sexual subjectivity may be assumed in those who are sexually active, this is not always the case, particularly regarding adolescents (Schalet, 2009).

Sexuality Development and Adolescence

The concept of adolescent sexuality has traditionally been looked upon in a negative light. Sexuality in adolescence has been conceived as risky, dangerous, and as something to be prevented and discouraged. This outlook is reflected in much of the literature examining sexuality in adolescence. (Broman, 2007; Schalet, 2011; Niccolai, Ethier, Kershaw, Lewis, Meade, & Ickovics, 2004; Tolman & McClelland, 2011). Adolescent sexuality is routinely explored within the context of unwanted pregnancy, STI acquisition, negative psychological outcomes, and as one of several “risk” behaviors such as substance use and delinquency (Halpern, 2010; Tolman & McClelland, 2011). In addition, adolescent sexual behavior has been treated in the literature as a phenomenon that should be documented and characterized, rather than understood. (Capaldi, Stoolmiller, Clark, & Owen, 2002; Savin-Williams & Diamond, 2004). This propensity of researchers to study what sexual activities adolescents are partaking in at what ages, and what negative outcomes arise from this behavior, has resulted in an abundance of information on adolescent sexuality that is simply behaviorally descriptive. A wealth of information exists regarding average age of sexual debut, types of sexual behaviors adolescents engage in, whom adolescents are engaging in sexual behavior with, adolescent rates of condom use, adolescent pregnancy rates, and adolescent rates of abortion. By contrast, much less information exists regarding how adolescents develop their conceptualizations of sex, how they experience and interpret information they receive about sex, or how they develop their own sexual identities (Savin-Williams & Diamond, 2004).

Recently, researchers have been challenged to regard and examine adolescent sexuality as a normal part of adolescent development (Collins, 2003; Halpern, 2010; Tolman & McClelland, 2011; Savin-Williams & Diamond, 2004). Indeed, most adolescents endorse having been involved in a romantic relationship by age 16 (Collins, 2003). If adolescent sexuality is regarded as another aspect of adolescent development, the study of adolescent sexuality can be broadened to include positive sexual development encompassing concepts such as sexual identity development, sexual orientation identity development, positive aspects of sexuality in adolescence, and the mechanism between adolescent sexuality and healthy, fulfilling adult sexuality (Russell, 2005).

Developmentally, sexuality can be viewed as a central component in negotiating the transition from childhood to adulthood. It is necessary that an adolescent is able to integrate his/her sexual feelings, needs, and desires into a coherent and positive self-identity, which contains, as one aspect a sexual self. Sexuality fits into biological, psychological and social aspects of adolescent development. Biologically, sexuality is the central feature of adolescence, manifested by puberty, represented by the maturation of reproductive organs which allows a former child to become a parent (DeLamater & Friedrich, 2002; Biro & Dorn, 2006). Psychologically adolescents begin to develop a readiness to take on adult roles (Collins, 2003). Socially, adolescence is the shift from one's primary orientation being family to a reliance on peers when it comes to guidelines for attitudes and behaviors, clarification of life goals, and interpersonal skills (Nurmi, 2004). All of these changes develop within the context of broader

and expanded cognitive skills which allow for an evaluation of alternate points of view (Keating, 2004). This increased ability to evaluate the thoughts and opinions of others makes adolescents particularly susceptible to social cues and influences. Social forces shape adolescents' sexuality in the sense that adolescents look to peers, family, and media to give them clues as to the norms and values around sex and gender (Savin-Williams & Diamond, 2004).

Sex Positivity and Sex Negativity in Adolescence

Sex-positive” and “sex-negative” are terms originally attributed to Austrian-American psychiatrist William Reich and became a larger part of American vernacular during feminist movements of the 1980s. Generally, sex positivity refers to a positive, affirming view of sex that embraces sexuality as a pleasurable, healthy aspect of life. Sex positive orientations embrace the idea that sexuality exists in diverse forms for each individual and is present throughout the lifespan (Bay-Cheng, 2003; Dailey, 1997). By contrast, sex negativity is a view of sex that equates sexuality with amorality, danger, dirtiness, and guilt or shame.

In the context of adolescent sexuality development, sex positivity and sex negativity are generally discussed in terms of how adolescents are oriented to sexuality and their subsequent view of sex and sexuality (Bay-Cheng, 2003; Dailey, 1997; Savin-Williams & Diamond, 2004; Weaver, Smith, & Kippax, 2005). In the United States, adolescents' orientation and attitude toward sex and sexuality are largely influenced by school-based sex education programs, religious doctrine, and family.

Research on United States school based sex education (SBSE) programs reveal that sex education has a history of focusing on the dangers of sexuality almost to the complete exclusion of any positive notions of sex. Originally SBSE was implemented in 1913 during the social hygiene movement as a remedy to the physical problems of masturbation STIs, in addition to the social problems of perceived moral decay (Moran, 2000). Similarly, today the predominate models of school-based sex education programs in the United States are abstinence only and abstinence based (Bay-Cheng, 2003; Dailey, 1997; Savin-Williams & Diamond, 2004; Weaver, Smith, & Kippax, 2005). Abstinence only models teach youth that sex is most appropriate within the context of heterosexual marriage, communicates the potential negative consequences of adolescent sexual indulgence - including unintended pregnancy and potential STI acquisition, and does not teach about condom use or contraception. Abstinence-based models also adhere to the doctrine that abstinence is best and that adolescent sexuality is inherently risky but differ from abstinence only models by teaching about contraception and condom use (Bay-Cheng, 2003; Dailey, 1997; Savin-Williams & Diamond, 2004; Weaver, Smith, & Kippax, 2005). Neither one of these models approach sexuality as a normal and healthy aspect of adolescent development, and are inherently sex negative.

The consequences of adolescents being socialized to sexuality in a sex negative way have proven problematic. Weaver, Smith, and Kippax (2005) in their examination of SBSE in four countries found that sex negative approaches to adolescent sexuality are correlated with higher negative sex-related outcomes in

youth. In their study of SBSE programs, in Australia, France, the Netherlands, and the United States, they found that although average age of sexual debut was the same across the countries, the United States, the only country with a primarily abstinence, sex negative based approach to adolescent sexuality, had higher rates of adolescent pregnancy, abortion, and STIs relative to the other three countries examined. The Netherlands, with the most comprehensive and liberal approach to adolescent sexuality in their SBSE programs, had the lowest adolescent pregnancy rate and the highest rate of contraceptive use. The mechanism by which sex positivity and sex negativity may influence sexual health outcomes has been studied by Fisher, White, Byrne and Kelley (1988) whom assessed the characteristics of individuals deemed “erotophobic” and “erotophilic” – terms essentially synonymous with sex-negative and sex-positive, respectively. Fisher et al (1988) established a connection between erotophilia and approach responses to sexuality and erotophobia and avoidance responses to sexuality, showing that those who are more erotophobic are less likely to accurately predict potential sexual occurrences and therefore less likely to plan for contraception. While those who are more erotophilic may be looking forward to sex and plan accordingly. Likewise, Thompson (1990), in her analysis of the sexual, romantic, and reproductive narratives of 100 teenage girls, found that the young women who she dubbed as “pleasure narrators” had more sexual agency, were more prepared to engage in safer sex, and reported greater enjoyment in their sexual experiences. These findings suggest that when adolescents are given permission to think of sex as normative and healthy, they are empowered to make better decisions regarding

their sexual health, potentially resulting in a more comprehensive sexual identity that includes sexual subjectivity.

Female Adolescent Sexuality

Gender norms. Although adolescent sexuality is generally discouraged for both sexes, adolescent females are given even less permission to express their sexuality than adolescent males. In adolescence, young men are taught sexual entitlement and they come to understand that they have power and agency over their sexuality (Hyde, 1991). Conversely, adolescent females are taught sexual accommodation and that they must protect themselves from unwanted sexual advances and the consequences of sex (Fine, 1988). Gender norms circumscribe women's sex roles as passive recipients of sex, or "responsible gatekeepers" – ensuring that presumed unwanted sex does not occur. These restrictions can be barriers to women's sexual well-being (Fine 1988; Fine & Mccleland, 2006; Impett & Tolman, 2006; Schick, Zucker, & Bay-Cheng, 2008; 2006; Tolman, 2002).

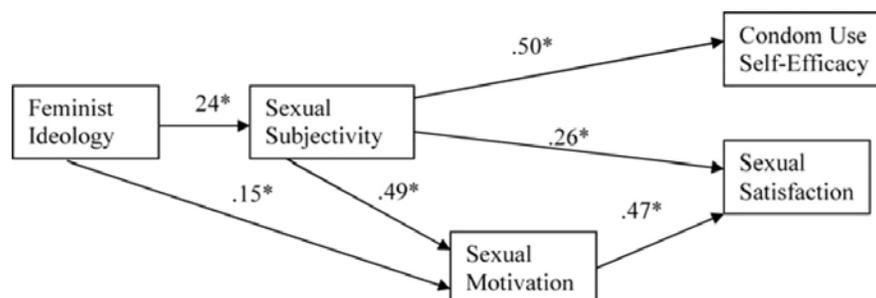
Traditional gender roles dictate that women must be passive and docile (Schick, Zucker, & Bay-Cheng, 2008) however, aspects of advocating for safer sex with a male partner contrast expectations of woman being sexually pleasing and acquiescent to men. Women who advocate for condom use can be accused of being promiscuous and of practicing infidelity, as women are supposed to be sexually chaste and monogamous, therefore "clean" (Schick, Zucker, & Bay-Cheng, 2008).

Katz and Tirone (2009) surveyed 193 undergraduate women to investigate the relationships between women's sexual compliance, associations with investments in ideal womanhood, and romantic well-being. They found that 37% of the sample reported sexual compliance. Sexual compliance was operationalized as acquiescence to unwanted sexual intercourse for reasons other than sexual desire or the pursuit of erotic pleasure - in the absence of explicit or immediate partner pressure. Compliant women in this sample reported a greater investment in ideal womanhood compared to other women. Ideal womanhood was assessed using two Likert scale measures that asked participants about the importance of meeting society's ideals for a woman. Katz and Tirone (2009) originally hypothesized that women who engaged in sexual compliance and endorsed a greater investment in ideal womanhood would have higher relationship satisfaction, however the opposite was found. Women who engaged in sexual compliance and endorsed a greater investment in ideal womanhood actually experienced less relationship satisfaction, therefore questioning the benefits of sexual compliance. The extant literature suggests that investment in traditional gender roles may inhibit the sexual satisfaction and health of adolescent females (Fine 1988; Fine & Mcclelland, 2006; Impett & Tolman, Schick, Zucker, & Bay-Cheng, 2008; 2006; Tolman, 2002).

Embracing of feminist ideology and rejecting traditional gender norms can directly and positively impact a woman's sexual well-being. Although feminism is a broad and varied discipline, the central tenants advocate for consciousness raising which allows the individual to recognize external structures of oppression,

to unlearn internalized norms, to unlearn internalized sexism, and to embrace the feminist goal of sexual liberation. Schick, Zucker, and Bay-Cheng (2008) sampled 424 female psychology undergraduates who ranged in age from 18-30 with a mean age of 19.7. The researchers measured feminist ideology using the liberal feminist subscale of the Feminist Perspectives Scale. This subscale measured attitudes related to gender equality. They measured sexual subjectivity by combining measures from the sexual consciousness subscale of the Sexual Awareness Questionnaire and the assertiveness and “say no” subscales of the Sexual Self-Efficacy Scale. The sexual consciousness subscale measured participants’ awareness of their own sexual desires and responses. The assertiveness and “say no” questionnaires assess a person’s confidence in her ability to perform certain activities related to sexual assertiveness whether that be advocating for desired behaviors or being able to say no to unwanted behaviors. Condom use self-efficacy was measured by a subscale of Beck’s Condom Use Self-Efficacy Scale and measured participants’ confidence in their ability to assert to their partner the desire to use a condom. Sexual Satisfaction was measured/assessed using a subscale of the of Snell and Papini’s (1989) Sexuality Scale which asked them to agree or disagree with items related to current perceptions of their sex life. Path Analysis using structural equation modeling was used to test a theoretical model of women’s sexual well-being such that the endorsement of feminist beliefs will be associated with greater sexual subjectivity. Sexual subjectivity in turn will be related to increased confidence in one’s ability to advocate for condom use with a male partner and to greater sexual

satisfaction both directly and indirectly through increased intrinsic motivation to engage in sexual intercourse.



Testing of the model revealed that all paths in their test model were significant, and model fit was improved by adding a direct path from feminist ideology to sexual motivation. Results lend evidence for the notion that overall holding feminist beliefs are positively related to women's sexual well-being, and furthermore that holding feminist beliefs is directly related to greater sexual subjectivity and greater sexual motivation. It is important to note that this sample was 72% White with 69% endorsing family incomes over \$100,000 a year so it is unclear if this same model would be significant for adolescents with lower SES or women of color.

Desire. As previously mentioned, when adolescent sexuality is discussed, young women are often conceptualized as “passive recipients” of male sexuality and “responsible gatekeepers,” of adolescent sexuality, without any acknowledgement of intrinsic sexual desire (Fine, 1988). They are deemed responsible for ensuring that inappropriate sexual behavior is avoided. This

notion is reflected in the extant literature as investigations of adolescent sexuality, particularly those involving sexual decision making and safer sex are disproportionality focused on adolescent women (Savin-Williams & Diamond, 2004).

Feminist scholars have taken note of this phenomenon. Michelle Fine (1988), in her work examining sex education programs in public schools in the 1980s made key observations in the way in which adolescent sexuality is presented and discussed in U.S. culture and the implications this has for adolescent females' sexual development. She identified three prominent discourses of adolescent sexuality taking place. *The discourse of sexuality as violence*, which equates adolescent heterosexuality with violence such as sex abuse, incest and HIV/AIDS. *The discourse of sexuality as victimization*, where female adolescent sexuality is represented as a moment of victimization and the dangers of sex for heterosexual young women are prominent. Women learn their vulnerability to young men's sexual advances, and the consequences such as pregnancy, disease, and being "used" that come along with giving in to those advances. This discourse is reinforced by classroom activities that teach adolescent females how to say no, the virtues of abstinence, and the enumeration of the many diseases one can acquire from sexual activity. This discourse portrays adolescent males as predators and adolescent females as victims. The last prominent discourse observed by Fine was *the discourse of sexuality as individual morality*. This discourse supports adolescent females' sexual decision making as long as the decision is to stay abstinent until marriage. Through discussions of

self-control, self-respect, and individual restraint young women are reminded of the potential social consequences and personal problems that could arise from engaging in premarital intercourse.

Fine argues that what is missing and essential to the healthy and positive sexual identity development of adolescents in general, but particularly of adolescent girls, is the *discourse of desire*. She describes this as the ability of adolescent females to be the *subjects* of sexuality - initiators, as well as negotiators. It would allow them the permission to speak of and consequently become in touch with their desire, pleasure, and feelings of sexual entitlement. This discourse of desire would be informed and generated out of the young women's socially constructed meanings.

Although Fine's essay was written over twenty years ago, the role of desire in adolescent female's sexual development is still relevant today. While female adolescent sexuality is in some ways more prominent now than at any point in the past, this sexualization makes young women the object rather than the subject of sexual desire (American Psychological Association Task Force on the Sexualization of Girls, 2010).

Desire and sexual objectification. In reaction to a growing concern among child advocacy organizations, parents, and psychologists that child and adolescent females were increasingly being sexualized by the media, and that this sexualization was harmful, the APA developed the Task Force on the Sexualization of Girls. The APA task force defined sexualization as any one of the four following instances occurring: 1) a person's value comes only from his or

her sexual appeal or behavior, to the exclusion of other characteristics; 2) a person is held to a standard that equates physical attractiveness (narrowly defined) with being sexy; 3) a person is sexually objectified—that is, made into a thing for others' sexual use, rather than seen as a person with the capacity for independent action and decision making; and/or 4) sexuality is inappropriately imposed upon a person. It has been argued that the sexual development of females is particularly challenged by the confusion between being the object of vs. the subject of sexual desire. Their experience as objects of male desire complicates their ability to fully experience their own embodied desire (Welles, 2005). Similarly, Tolman (2002) argued that in the current environment, adolescent girls are encouraged to look sexy, yet they know little about what it means to be sexual, to have sexual desires, and to make rational and responsible decisions about pleasure and risk within intimate relationships that acknowledge their desires. According to objectification theory, adolescent girls become aware that their bodies are examined and evaluated by others and consequently internalize the observers' perspective to evaluate their own bodies (Frederickson and Roberts, 1997). Research has suggested that young women who internalize objectification, therefore distanced from their embodied experiences, may be less influenced to advocate for condom use on behalf of their sexual health (Impett et al., 2006), have less of a capacity for sexual arousal and pleasure (Roberts, 1997), and have less of an ability to assert sexual preferences and interests (Morokoff, 2000).

Desire and motivations for sex. When examining motivations for sex, prior literature has supported that young men and women differ in their reasoning

for engaging in sexual activity (DeLamater, 1987; Hyde, 1986; Peterson & Hyde, 2010; Welles, 2005). Specifically, that females are more likely to engage in sexual behavior due to peer/partner influences, and to promote intimacy within the relationship while males are generally motivated by an internal desire for sex and desire for physical pleasure. However, this has not proven to always be the case. Ozer, Dolcini and Harper (2003) examined motivations for sex in a sample of 145 sexually active African American adolescents between the ages of 14-20 (90 males, 55 females). In face-to-face interviews they were given a list of reasons why some youth may choose to have sex and asked to choose any reasons that may be true for them. Young women in the sample chose two primary reasons for having sex: "Having a boyfriend you love" (80%) and "feels good/satisfies sexual desire" (82%). None of the young women in the sample endorsed any items related to social pressure or economic difficulties (e.g. so boyfriend wouldn't break up with you; because friends are having sex; to get food, money, drugs or a place to stay). As expected, regarding young men, the most endorsed answer was "sexual desire/feels good" (89%), however the second most popular answer was "having a girlfriend they love" (66%). Unlike the adolescent females, the adolescent males endorsed a number of items related to social/economic pressures including: In order to be more popular (23%), to feel more accepted/loved (22%), "so girlfriend wouldn't break up with you" (14%), to get food, money, drugs, or a place to stay (13%), because your friends are having sex (10%).

The participants for this study were a sample of youth from the community, not a clinic or school based sample. This illustrates the diversity of motivations for sex within this population. Given that satisfaction of sexual desire was the number one endorsed reason for sex given by girls, one might assume young women are very aware of their desires. However it is important to note that these were pre-generated answers that young women and men could choose from and these answers were not spontaneously generated. It is unclear if the same results would have been achieved had participants had to generate their answers independently.

Reed et al. (2011) utilized qualitative interviews to gain an understanding of the social context within which sexual partner concurrency occurs in a community based sample of African American adolescents. When participants were asked to name reasons why they engage in sexually concurrent partnerships, sexual enjoyment/desire for sex was an emergent theme for both males and females. One adolescent female quoted in their study remarked, "Cause I'm always horny, I need somebody to do it with. My boyfriend's not around all the time." These data suggest that for African American female adolescents, desire may play a more salient role in their sexual identity than once believed.

African American Female Adolescent Sexuality

As with all identities, development of a sexual identity takes place within, and is influenced by, a social context. As African American adolescent females begin to ask the question of “Who Am I” with regard to the sexual aspect of their identity, this question cannot be divorced from their racial identity. Race and gender are melded. Within the United States, women of color have historically suffered stereotypes that focus on their sexuality and their bodies (Hill Collins, 2004). Although adolescent women in general are not given *permission* to be willfully sexual or express their desire, the historic discourse of the United States has linked White women with sexual purity, virtue and restraint, and African American women with exoticism, sexual promiscuity, “wildness” and disinhibition (hooks, 1992; Stephen and Phillips, 2003; Tolman 1996). Adolescent, inner-city, African American women in particular have been portrayed as the embodiment of negative adolescent sexuality, often being the primary subject of research examining adolescent sexuality and risk (Fine, 1988; Tolman, 1996).

The cultural images of African American women as highly sexualized beings arises out of the legacy of slavery in the United States (Harris, 2009; Hill Collins, 2002; Ward, 2005). The sexual exploitation and routine sexual violation of African/African American female slaves by their owners necessitated that African/African American women be viewed as primitive, animal-like sex objects. Over time, pervasive (a)sexualized archetypes of African American women have developed and become familiar cultural images (Hill Collins, 2000;

Stephens & Phillips, 2003; Tolman, 1996). Given the impact the environment and social cues can have on the sexual identity development of adolescents, an examination of the prominent gendered (a)sexualized archetypes of African American women in the United States is warranted.

Various African American and feminist scholars have referenced these archetypes as Mammy, Matriarch, Welfare Mother, and Jezebel (Hill Collins, 2000; hooks, 1981; Stephens & Phillips, 2003). The Mammy is often depicted as an asexual, faithful, domestic servant. She works in the home of White families and humbly cooks, cleans and takes care of the household occupants. She is portrayed as happy and grateful to do this work and prioritizes this over any personal duties or responsibilities she may have. She is often physically depicted as overweight and very dark skinned. She is an important sexualized image due to the fact that she is asexualized. In order for her to be an acceptable domestic servant, all allusions to her as a possible sexual being are absent, therefore rendering her a non-threatening presence in the White household and by extension White society (Hill Collins, 2000; hooks, 1981; Stephens & Phillips, 2003).

The Matriarch image, like the Mammy archetype, is an asexualized African American female. However, unlike the passive demeanor of the Mammy, the Matriarch is emasculating, overly aggressive and the singular head of her family by default as her forceful nature has driven her partner away. This image was popularized by then Assistant to the Secretary of labor Daniel Patrick Moynihan in 1965. He wrote, "The Negro Family: The Case for National Action," a U.S. Department of Labor report (Moynihan, 1965) which detailed his

understanding of one of the main causes of negative outcomes in African American communities - the large number of female headed households. He argued that the dominance of the African American female results in husbands having low power in their relationships which contributes to high rates of divorce/desertion in African American communities. These emasculated men then turn to aggression and criminality to reclaim their masculinity. African American female dominance is achieved by African American women having more education and greater economic opportunities than African American men. The Matriarch is an important sexualized image as the message is communicated that the outcome of being a strong, non-passive, successful, and educated African American woman is the loss of the opportunity to have a successful, sustainable, romantic relationship.

The Welfare Mother/Queen is the image of African American women as uncontrollable breeders. Unlike the Mammy and the Matriarch, her sexuality is her ultimate flaw. She is unwed, irresponsible and lazy. Her sexual recklessness combined with her predisposition to fertility results in multiple children whom she is unable to financially support. The welfare mother/queen relies on government subsidies to support herself and her children and because she knows these are available, she continues to have more children in order to continue to live off of the government and not have to work. It is believed that she passes on these values to her children (Hill Collins, 2000; hooks, 1981; Stephens & Phillips, 2003). The welfare mother/queen image perpetuates the association of sexuality based animalistic attributes to African American women in her propensity for

bearing children. Additionally it assumes that she is unable to be responsible in her sexual endeavors. It also infers that these women have no desire to meaningfully contribute to society and their sole desire is to have others support them.

Finally, the Jezebel in some respects is the sexualized image of African American women in its purest form. Jezebels have strong, innate sex drives and constantly seek to satisfy their sexual urges. They are physically portrayed as “exotic” – often with a light complexion, long hair, and a voluptuous body shape. Jezebels manipulate men in order to get their sexual, financial, and emotional needs met. Jezebels cannot be violated sexually as they are accepting and often welcoming of all male attention and sexual contact (Hill Collins, 2000; hooks, 1981; Stephens & Phillips, 2003).

The Mammy, Matriarch, Welfare Mother/Queen, and Jezebel are decades, and in the case of Mammy and Jezebel, centuries old societal images of African American women. When ascertaining societal images that contemporary adolescent African American females may use to derive notions of their sexual identity, it may be necessary to examine present-day images that are relevant and immediate in the lives of adolescent African American females.

The Diva, The Gold Digger, The Freak, The Dyke, Gangster Bitch, Sister Savior, Earth Mother, and the Baby Mama have surfaced as eight present day models of African American female adolescent and young adult sexuality (Stephens & Phillips, 2003). These images are heavily shaped by current popular

culture, particularly current hip-hop culture and have vestiges of the foundational Mammy, Matriarch, Welfare Mother/Queen, and Jezebel.

The Diva interacts with men sexually and romantically who are able to enhance her social status. Divas [trading social status for sex] are middle class (or higher) well groomed attractive (light skin, long hair, curvaceous body) women who wear attractive clothing, and keep their hair done and nails manicured at all times. They use men to enhance the image they have already created. Divas are sexy but not trashy. They will make sure men notice them, but never directly approach a man. Stephens and Phillips (2003) note that they are toned down Jezebels. The Gold Digger is typically a lower or working class woman who views her only commodity as sex. She trades sex for financial and/or material gain. Gold Diggers (combination of Jezebel and Welfare Mom) are portrayed as willing to do anything and everything for material gain. Once a man is no longer able to provide for them, they will no longer be with the man. Love and emotional attachment are not a part of Gold Digger interactions (Stephens & Phillips, 2003).

The Freak is portrayed as a sexually aggressive woman who desires sexual relationships with men without any emotional attachment. Freaks do not desire social status or financial gain, they only desire sexual pleasure. Freaks are willing to engage in sex anytime, anywhere without any sexual inhibitions. The Freak image is the purest contemporary form of Jezebel. Freaks are seen as women whom men desire sexually, but not as women men would desire as a romantic partner. Freaks are coveted by men sexually but rejected by men emotionally (Stephens & Phillips, 2003)..

The Dyke is portrayed as a woman who is not interested in sexual contact with men. Dykes are lesbian identified. In the context of these images, their choice to have sex exclusively with women is seen as a reaction to emotional and/or physical hurt by men, and a desire to emasculate men, rather than a true desire to be with women. Dykes are self-sufficient, but because of this they are portrayed as competing against men. The Dyke image is a contemporary variant on the Matriarch. The Gangsta bitch is portrayed as an aggressive woman who is “street tough” and has sex to show solidarity toward, or to help her man. She is willing to engage in any behavior in support of her male partner, even illegal activities (Stephens & Phillips, 2003).

The Sister Savior is religious and rejects all sexual contact except within the context of marriage and for the purpose of procreation. Sister Saviors dress very demure without a hint of sexiness or provocativeness. Their asexuality and piety make them similar to the classic Mammy. The Earth Mother is socially, emotionally and politically conscious. Earth Mothers reject traditional notions of beauty. They are often Afrocentric, self-sufficient, independent, and disallow any attempts made by others to objectify them. Earth Mothers have sex with men who embrace similar social and political values as them. (Stephens & Phillips, 2003).

Finally, the Baby Mama is a woman who has had a child by a man but is no longer his main partner sexual or romantic partner. They are portrayed as women who will continue to have sex with their child’s father in order to maintain a financial or emotional connection to him. Men are assumed to always have sexual access to their “baby’s mama” and these women are often portrayed as

getting pregnant on purpose. Their entire identity is viewed as being the mother of a man's child (Stephens & Phillips, 2003).

Stephens and Phillips (2003) contend that the over-sexualized stereotypes of African American women propagated in contemporary media and in broader society have helped to shape the perception of African American adolescent females' sexuality, and these images may affect the way African American girls view themselves as well as influence the way in which others value and interact with them. Recent research by Gordon (2008) and by Townsend, Thomas, Neilands, and Jackson (2010) is beginning to support this assertion.

Gordon (2008) in her survey of 176 African American female adolescents ranging in age from 13-17 years old (mean 15.29 years), found that adolescents' identification with popular images of African American women on television and music related to increased subjective importance of being attractive and with stronger endorsement of attractiveness as an important quality for all young women. Attractiveness was related to perceived boys attraction to them.

Alternatively, Townsend et al. (2010) investigated African American adolescent females' identification with popular stereotypical images of African American women and the relationship between this identification and sexual attitudes. Results indicated that those young women who scored higher on the Modern Jezebel scale (endorsed stronger identification with stereotypical images) were more likely to perceive risky sexual situations as less harmful and more likely to endorse intent to engage in sexual intercourse in the next three months.

Adolescents in this study ranged in age from 10-15 with an average of 13 years.

These findings highlight the impact that sexualized stereotype images can have on the sexual identity development of young African American as young as ten years old.

Religion and Sexuality in the African American Community

Religion is deeply rooted in traditional African American culture (Mattis & Jagers, 2001; Ward, 2005). Throughout much of U.S. history, religious institutions have occupied an important position in the African American community and studies have reported that a majority of African Americans are affiliated with a religious denomination (Mattis & Jagers, 2001; Taylor, Ellison, Chatters, Levin, & Lincoln, 2000; Ward, 2005). Given the influence of religion on the lives of many African Americans, it is necessary to understand what effect religiosity may have on the developing sexual self-concept of African American adolescent females.

Research on the effect of religiosity on adolescent sexual behaviors and attitudes are mixed. Consistently, research has indicated that African American adolescents, and adolescents in general, who measure higher on religiosity scales, attend formal religious services more often, or indicate that religion/religious beliefs are important to them have an older age of sexual debut and less sexual partners (Gold et al., 2010; Landor, Simons, Simons, Brody and Gibbons, 2011; McCree, Wingood, DiClemente, Davies, Harrington, 2003; Steinman & Zimmerman, 2004). These are often touted as the protective factors of religiosity on adolescent sexuality. However, the data relating religiosity and consistent contraceptive and/or condom use is less clear.

Nonnemaker, McNeely, & Blum (2003), in their examination of 16,306 youth from Wave I of the National Longitudinal Study of Adolescent Health (Add Health), a nationally representative sample of U.S. youth in grades 7-12, analyzed the relationship between two dimensions of religiosity, public and private, and various measures of adolescent health and risk behaviors, including sexual behaviors. Public religiosity was calculated as the mean response to how often participants attended religious services in the past 12 months and how often they attended teen specific religious activities in the past 12 months. Private religiosity was calculated as the mean response to the two questions “How important is religion to you?” and “How often do you pray?” The sexual behaviors measured were: (1) Ever engaging in sex; (2) Birth control at first intercourse (including condom use); (3) Birth control at most recent intercourse, and; (4) Ever having been pregnant. Results of this study showed that public and private religiosity were significantly associated with lower levels of ever having had sex. Only private religiosity was associated with use of birth control during first sexual intercourse and neither public nor private religiosity was associated with use of birth control during the most recent incidence of sexual intercourse. However, for females, public religiosity was protective for having ever been pregnant. These results seem to infer that while religiosity in general delays sexual debut and or lowers the incidence of sexual intercourse, it does not facilitate effective and consistent use of birth control once teenagers do make the decision to become sexually active. It is important to note however, that the above study includes

adolescent males and females of all ethnicities and is not particular to African American females.

McCree et al. (2003) surveyed 522 African American adolescent females between the ages of 14 and 18 (mean age of 16). The aim of their study was to examine the association between religion and STD/HIV-preventative behaviors, attitudes toward sex, and ability to negotiate safer sex. Each participant completed a short self-administered questionnaire and then a structured interview by a trained African American female interviewer regarding sexual behavior. Religiosity was defined as frequency of engaging in religious/spiritual activities and was assessed using a four-item Likert scale. The scale items were: "How often do you... (1) Attend religious/spiritual activities; (2) Pray or meditate; (3) Talk to others about religious or spiritual concerns; (4) Talk with a religious or spiritual leader (minister/priest)." Answers ranged from "1" – Never to "4" – Very Often. Scores ranged from a low of 4 to a high of 16 with a median of 10.4. As the authors acknowledged that their distribution of scores were skewed, they dichotomized the religiosity variable using a median split classifying everyone above the median as "high" religiosity, and everyone below the median as "low" religiosity. Results of the study indicated that adolescents with greater religious involvement ("high" on the religiosity measure) were 2.3 times more likely (OR= 2.3) to have higher self-efficacy in communicating with new partners about sex, and significantly more likely to communicate with steady partners (OR= 1.9) about sex. Adolescents with greater religious involvement also had higher self-efficacy in refusing an unsafe sexual encounter (OR = 2.1), were more likely to

have communicated more frequently with partners in the last six months regarding HIV, STI, and pregnancy prevention (OR = 2.5), were more likely to have initiated sex at a later age (OR = 1.5), and to have used condoms in the last six months (OR = 1.6). Additionally, those scoring “high” on the religiosity measure were more likely to have favorable attitudes toward using condoms (OR = 1.5) and more likely to be supportive of safer sex (OR = 1.7). Likewise, Landor et al. (2011) in their examination of longitudinal data from 612 African American adolescents, between 15 and 16 years old at Time 1 and between 18 and 19 years old at Time 2 found that religious commitment was negatively related to early sexual debut, multiple sexual partners, and inconsistent condom use.

The findings above are different from other research which has not found a significant relationship between religiosity and higher levels of condom and/or contraceptive youth when examining adolescent behaviors (Brewster et al, 1988; Cooksey, Rindfuss & Guikay, 1996; Gold et al, 2010; Manlove et al, 2006; Nonnemaker, McNeely, & Blum, 2003; Studer & Thornton, 1987). However these studies have had all White or multiple race/ethnicity samples and/or have included males and females in their analysis. Elkind (1999) found that involvement in religious activities tends to have different meanings and outcomes for adolescents from different racial and ethnic backgrounds. Thus, findings regarding the role of religiosity in non-African American samples may not be generalizable to African American youth.

In addition to an effect on behaviors, there is another way in which religiosity can affect adolescents developing understanding of their own sexuality,

namely through influencing adolescents' ideas and beliefs regarding sex and sexuality using religious teachings. Traditionally, African American faith traditions have had difficulties addressing and discussing complex issues of sex and sexuality (Harris, 2009), and can be said to be one of the most significant sources of homophobia within the African American community (Ward, 2005). Within the African American church tradition, as is true for many religious traditions, embracing sex and sexuality is taboo. Heterosexual vaginal intercourse within the confines of marriage is the appropriate mode of sexual expression, the gold standard. Other forms of sexual expression in alternate contexts are seen as deviant behaviors to be avoided (Coyne-Beasley, 2000; Harris, 2009; Ward, 2005). The transmission of these ideals to adolescents can profoundly shape their understanding of their own sexuality, especially if religiosity is an important aspect of their identity.

Researchers suggest (Harris, 2009; Ward, 2005) that the root of sexual conservatism within the African American church lies in the desire of African American churches, many of which were formed in the wake of emancipation, to distance the image of African Americans from the negative portrayal of Black sexuality propagated during slavery. In order to counteract the dehumanizing images of African Americans as "bucks" or "jezebels," without intellect, morals, or decency, the African American community embraced a very conservative stance towards sex and "deviant" sexuality, such as pre-marital sex, extramarital affairs, out-of-wedlock births and particularly homosexuality (Mitchell 2004). The African American churches believed that the best route to equality and racial

uplift was to display “respectable” behavior and adhere to “traditional” American values.

These tenets have continued to permeate African American religious values. Coyne-Beasley and Schoenbach (2000) surveyed sexual health concerns of a convenience sample of 45 African American clergy from Southern churches. Results indicated that although the clergy believed that HIV/AIDS and pregnancy were among the top five most important health issues facing adolescents in their congregations, 30% deemed the topic of anal sex, bisexuality, homosexuality, masturbation and oral sex as inappropriate for discussion within the church or at church sponsored health events. Issues that were acceptable included abstinence, AIDS and birth control.

In attempting to explain the sometimes negative relationship between adolescent religiosity and contraceptive use, some researchers (Manlove et al. 2008) have theorized that lack of contraception use may reflect a desire to avoid publicly acknowledging sexual activity (which may occur if one is purchasing contraception from a pharmacy or requesting it from a doctor), personal discomfort or ambivalence regarding being sexually active, or disapproval of contraception use overall on some religious communities. Other researchers (Rostosky, Regnerus, & Wright, 2003) have directly tested the effect of attitudes about sex on the relationship between religiosity and delayed coital debut. Attitudes about sex turned out to be a significant moderating variable between religiosity and coital debut. Specifically, the belief that engaging in sexual intercourse will lead to negative emotional consequences such as guilt, loss of

respect from one's partner, and/or the anticipation that having sex will emotionally upset one's mother significantly strengthened the relationship between religiosity and delayed coital debut.

The African American church continues to reflect conservative sexual values. Religion has consistently been shown to be an important influence in the lives of many African American adolescents. In attempting to understand the developing sexual identity of African American adolescent females, the potential effects of religiosity must be examined.

Rationale

Most research on adolescent sexuality has focused on problem behavior outcomes, such as pregnancy and sexually transmitted infection among middle or late adolescent girls (Niccolai et al., 2004), resulting in a narrow perspective regarding the sexual lives of adolescents. (O'Sullivan, et al., 2006). Over the last decade, some researchers have pushed to move away from the focus of adolescent sexuality as inherently negative, and to expand our understanding of adolescent sexuality by conceptualizing adolescent sexuality as an integral part of adolescent development (Halpern 2010; Tolman & McClelland, 2011).

Identity development is viewed as the major developmental and psychological task that takes place during adolescence. (Erickson, 1968), Adolescents are charged with developing multiple identities during this time across various domains. (Erikson, 1968; Schenkel & Marcia, 1972). One of these identities is a sexual identity. Identity development theory posits that optimal

identity formation takes place after a period of exploration (Erickson, 1968; Schenkel & Marcia, 1972). Additionally, external forces and the social environment greatly impact the process and outcome of identity formation (Bronfenbrenner & Morris, 2006; Erickson, 1968).

When examining sexuality development, research suggests that while heterosexual adolescent males may be encouraged to embrace and explore their sexuality, adolescent heterosexual females are not. Socialization has taught adolescent females that overt expressions of sexuality may result in loss of reputation or respect (Fine 1988; Fine & McClelland, 2006; Tolman, 2001; Tolman, 2002). Young women learn to be sexually desirable without being given permission to have sexual desires themselves, making it difficult for adolescent females to develop a clear understanding of their own sexuality (Welles, 2005). African American adolescent females in particular may face additional challenges in developing a sense of their sexuality as multiple negative historical and contemporary racially based sexualized images of what African American female sexuality is supposed to be are propagated in popular culture (Hill Collins, 2000, hooks, 1981; Stephens & Phillips, 2003). Religiosity in the African American community has also proven to be an influential factor in the sexuality development of African American adolescents (Steinman & Zimmerman, 2004), often influencing their ideas and beliefs about what is “normal” vs. what is “deviant” sexual behavior (Harris, 2009; Ward, 2005).

Although an affirming understanding of one’s sexuality is seen as an important component to adult psychological well-being, and adolescence is the

critical time period in which one is expected to develop a sense of self, we know very little about how African American adolescent females develop their conceptualizations of sex, or how they develop their sexual identities. This qualitative study seeks to better understand the sexual narratives of sexually experienced adolescent African American females and elucidate the factors that might contribute to their understanding of their own sexuality. Specifically, this study examined their narratives for positive and negative conceptualizations of sex, the presence or absence of named sexual desire; and for various gender, cultural or religious influences which impacted these young women's understanding of their sexuality.

Research Questions

What are the characteristics of the sexual narratives of African American female adolescents?

1. To what degree are the narratives of African American female adolescents sex-positive or sex negative?
 - a. What sexual behaviors are acceptable or unacceptable?
 - b. What role does African American culture play in these characterizations?
 - c. What is the role of gendered beliefs/gender ideology?
 - d. What is the role of religiosity?
2. How is desire addressed/discussed in the sexual narratives of African American female adolescents?
 - a. What are the reasons given for engaging in sexual behavior?
 1. What reasons are acceptable?
 - b. What role does African American culture play in the acknowledgement of desire?
 - c. What is the role of gendered beliefs/gender ideology?
 - d. What is the role of religiosity?

Method

The data for the present study was drawn from a larger community-based qualitative investigation examining influences on the sexual and dating lives of urban African American adolescents. Data collection for this study took place in Chicago and San Francisco in the Spring of 2010.

Participants

The participants for this study were 20 African American females ranging in age from 15-17 years old (mean = 16) at the time of study enrollment. These youth represented a subsample of adolescents who participated in Phase I of a larger qualitative study (N=82) specifically examining gender ideologies and their relationships to dating and sex behaviors among this age group of African American female and male adolescents. In order for participants to qualify for the larger study they had to meet the following criteria: 1) identify their race/ethnicity as African American or Black, 2) be between the ages of 15 and 17, inclusive, and 3) endorse predominant sexual attraction to persons of the other sex. The 20 youth identified for the present study met the above criteria as well as the additional inclusion criteria of identifying as female, and endorsing having engaged in penetrative sexual intercourse with a person of the other gender at least once in their lifetime.

Procedure

Recruitment. All participants were recruited from Chicago and San Francisco community-based, youth-serving agencies. In each city, two or three community-based agencies served as recruitment and interview sites. These community based agencies provided various enrichment programs for youth. The chosen sites were located in low-income neighborhoods. The neighborhoods from which the participants were selected were comparable with respect to high rates of poverty, unemployment, school drop-outs, incarceration, and STI prevalence (City and County of San Francisco, 2006; Chicago Department of Public Health, 2006; San Francisco Department of Public Health, 2007). In addition, African Americans account for a large proportion of heterosexually transmitted cases of HIV and STIs in both cities (Chicago Department of Public Health, 2006; San Francisco Department of Public Health, 2007). The primary differences between the areas chosen in the two cities are differing population densities of African Americans (93% in the Chicago neighborhoods and 53% in the San Francisco neighborhoods) and overall African American population size in the cities (more in Chicago than San Francisco; City and County of San Francisco, 2006). Within each community agency participants were recruited in one of two different ways: a) directly by the study staff, or b) through referral by agency staff. Once identified as a potential participant, participants were screened to determine eligibility. If eligibility was met, participants were told more about the study and invited to participate. Once participation was agreed to, written youth assent and parental consent were obtained.

Interview Process. After eligibility was established and both consent and assent were obtained, youth participated in individual, semi-structured qualitative interviews. Given the sensitive topics covered, these interviews were administered by trained, gender matched, ethnic minority interviewers in a private setting. The average interview was between 90 and 120 minutes. Participants were compensated \$40 for their time.

Interviews were digitally recorded and transcribed verbatim. Accuracy of all transcriptions were checked by members of the research team involved in data collection.

Instrument. A semi-structured interview guide was developed by the principal investigators for this study. Building on previous work which examined adolescent dating and sexual behavior (Dolcini, Harper, Boyer, & Watson, 2002; Dolcini, Harper, & Coe, 2007; Harper et al., 2004), the interview protocol was designed to address social and ecological factors that may impact adolescent social development and sexual health. The interview included questions about youth's ideas related to romantic and sexual relationships, romantic and sexual communication, and the sources of information that informed youth's ideas on these subjects.

This interview protocol was tested with 18- and 19-year-old youth from the sampled communities in order to verify the appropriateness and clarity of the language used. Adjustments to the protocol were made if language was unclear or if there was culturally relevant language that was more appropriate for the target population.

The final interview instrument was approved by the respective institutional review boards for the universities with which the researchers were associated. The full interview guide is attached as Appendix A.

Analysis and Results

The psychological phenomenological approach guided the data analysis procedure (Creswell, Plano, and Morales, 2007; Moustakes, 1994). Data analysis using this framework requires an emic approach to the analysis process which aims at ensuring that themes, categories and patterns that are discovered emerge directly from the data as opposed to originating within the researcher and searched for within the data (an etic approach). To aid in the organization and labeling of the data collected, QSR NVivo software (QSR International, 2002) was used.

Analysis

The data analysis process for this study took place in four major stages. The first stage, essential to the psychological phenomenological approach to analysis was a bracketing or “epoche” (Creswell, 1998) of previous experiences that may bias the researcher in the analysis and interpretation process. The second stage involved the development and organization of codes. These codes transformed and organized the raw transcripts into analyzable pieces of text. The third stage was data comparison. Within the data comparison stage, cross-case analysis took place. The fourth stage was the data verification stage, in which techniques such as peer debriefing, member checking, and consensus coding were used to ascertain the credibility of the research findings. It is important to note that because of the interactive nature of qualitative data analysis, these stages

were not necessarily discrete or sequential in nature. The information generated from one stage often informs and/or refines information from another. A detailed description of each stage, its purpose follows.

Bracketing of Experiences

As mentioned previously, the central tenet of the phenomenological approach is to understand the meaning, or “essence” of an experience from the perspective of those who have lived the experience. In order to do that in the most effective way, the researcher must do her/his best to bracket any previous experiences related to the phenomenon under study. The purpose of this bracketing is to elucidate any internal biases held by the researcher in order to guarantee that any themes discovered are a valid representation of the data and not a product of the researcher’s preconceived notions. It is also an opportunity for the researcher to engage in self-reflection and acknowledge her/his personal reasons for pursuing the particular phenomenon under study. Lincoln and Guba (1985) suggested a similar approach, using a reflexive journal, as a way to ensure internal validity. To that end, I engaged in a reflection of my socio-historic background, the development of my views on race and oppression, my understanding of my own sexuality development, and my motivation to pursue this line of inquiry.

I am a 35-year old, heterosexual African American female. I grew up in a working class family in New York City with both of my parents until the age of 14, when my parents divorced and I subsequently lived with my mother. I lived in

New York City in a predominantly Latino and secondarily African American neighborhood until I went to college. My school environment from the beginning of 7th grade until my graduation from high-school was one overwhelmingly dominated by upper class White students. This was in stark contrast to my college environment outside of Philadelphia at a historically Black university (HBCU) which was almost one hundred percent composed of lower middle class/middle class African American students. The differences between the expectations that my high-school environment placed on its students and the expectations that the respective high-school environments of many of my college peers placed on them was eye-opening. My education at an HBCU, which often focused on African American empowerment and the African American experience in the United States, also had a deep impact on my view of life as an African American. I believe that my experiences during these formative years in two very different cultural environments profoundly shaped my ideas regarding race, privilege, and oppression in America.

My sexuality development was deeply influenced by my mother's phrase "your body is a temple, not an abandoned building." I cannot remember at what age she began saying this to me, but it is a phrase I remember hearing multiple times throughout my child and adolescent years. The meaning behind her words was that my body was something sacred and should be treated as such, not an entity that everyone and anyone should enter at will. She also instilled in me the ideas that sex could be wonderful within the confines of a loving relationship and alternatively, if one has sex "too fast," the relationship would end. My mother's

beliefs, along with a comprehensive, sex-positive, sexual education class in high school, contributed to my view of myself as a curious, but cautious, sexual being when I became sexually active at age 18.

The roots of my interests in the sexual identity development of African American girls stem from my interest in the sexual health of African American women. For two and a half years before moving to Chicago, I worked in an adult outpatient HIV clinic. Sixty percent of the clinic patients were women, most of whom were African American or African Caribbean. These women often told me stories about how they were infected with HIV and the impact that HIV has had on their lives and their intimate relationships. Many women became infected because they did not feel sufficiently empowered over their own sexuality, or simply were not educated around sexual health issues.

As I have continued my studies, I have been able to teach undergraduate Human Sexuality and an undergraduate HIV/AIDS prevention, education and treatment class. These experiences, along with my research work with African American adolescent females who are just beginning to have sex, have enlightened me to the vast amount of mis-education and confusion that exists among adolescents around sexuality. I have come to understand the importance of healthy sexuality development.

Coding

Codes are labels for assigning units of meaning to pieces of data (Miles and Huberman, 1994). In this case the pieces of data are units of text from the

interview transcripts. The process of coding was a four step process consisting of: (1) a complete read through of all of the transcribed interviews, (2) content analysis, (3) thematic analysis, (4) and coding refinement.

Reviewing Interviews. The researcher completely read through all of the data collected at least once before attempting any coding. This complete reading of all interviews was conducted to ensure a general understanding of each participant's overall experiences related to sex or sexuality as articulated in the interview, and as a first step in forming an understanding of the data as a whole. Additionally, any initial impressions were notated in the margins. This provided the researcher with a familiarity with the depth and breadth of the data.

Content Analysis. The next step of the coding procedure was content analysis. Content analysis involved coding all parts of the transcripts broadly to identify all ideas or concepts mentioned which are relevant to the research questions posed. All content related to a participant's conceptualizations of sex, or sexuality was coded (Miles & Huberman, 1994). After the completion of content analysis, an analysis of relevant themes was conducted.

Thematic Analysis. Thematic analysis was the next step of the coding procedure. Thematic analysis involved searching across the data set to find repeated patterns of themes and concepts identified during the content analysis procedure. Once this was completed, thematic codes were assigned which reflected specific phenomena related to the research questions (Miles & Huberman, 1994; Patten, 2002). As an example, a code of "SEX/NOT" was assigned to sexual behaviors that the participants felt were not appropriate.

Coding Refinement. The fourth step was coding refinement. Coding refinement involved the identification of subsets of codes that existed within the themes identified through thematic analysis. Building on the previous example, the code “SEX/NOT-Act” was used to delineate specific sexual acts that the participants felt were not appropriate. A “sexual act” was defined specifically as an action performed on another person for the purposes of sexual pleasure. This was a subset of a “sexual behavior” which is a broader concept.. Additionally, emergent codes that came from the data were also identified. This process was repeated until all relevant sub-themes that occurred in the data were represented. (Miles & Huberman,1994).

Data Comparison. Once the thematic analysis process was completed and codes were clarified through coding refinement, *cross-case analysis* was completed. Essentially, this involved examining themes, patterns, and relationships across cases to see if the findings were consistent across members of the sample (Miles & Huberman, 1994). According to Miles and Huberman (1994) the two main reasons cross-case analyses are conducted are to enhance the generalizability of the findings and to enhance the understanding and explanation of the results.

Data Verification. As with all research, steps were taken in order to ensure that the findings were accurate representations of the data and that the story that emerged was in fact the one that best represents the lives of participants. There are three main ways that credibility of findings was established within this

study. This was accomplished through the processes of *peer debriefing, member checking, and consensus coding*.

Peer debriefing took place throughout the analysis process, from beginning to end. Peer debriefing involved the periodic relaying of information about study methodology, data, and results to a “disinterested” peer in order to minimize potential bias that can occur from being submerged in the data (Lincoln and Guba, 1985). The peer not only provided feedback, but also helped the researcher explore neglected avenues of inquiry and alternative explanations for results when warranted by the data. Additionally, the peer debriefer served as an understanding colleague that the researcher spoke with honestly about frustrations that arose regarding the processes. Members of my research team, all doctoral candidates at DePaul University experienced in qualitative research, served as peer debriefers.

Consensus coding is the processes by which transcripts are coded separately by experienced coders, and subsequently the coders come together to compare and contrast their results. Differences in coding are addressed through discussion and an explanation by the coders of their rationale behind their particular analysis. This process continues until a consensus is reached among coders. A modified process of this took place, where members of the aforementioned research team were given pieces of transcript (instead of the entire transcript) coded by the researcher and were asked to review and examine the text to see if they would code it in a similar way. This process allowed the

researcher to benefit from the elicitation of a variety of informed viewpoints during the coding and interpretation phase of analysis.

Lincoln and Guba (1985) argue that member checking is the most important technique for establishing credibility. Member checking is the processes by which data interpretations and conclusions are verified by informants as accurate representations of their realities and experiences. A modified method of member checking was conducted with four African American adolescent females between the ages of 15-17 who reside in urban, predominantly African American neighborhoods with high rates of poverty, unemployment, school drop-outs, incarceration, and STI prevalence located in two large American cities. Member checking with the actual participants was not able to be conducted as four years elapsed between data collection and analysis for this manuscript. Two member checking interviews were conducted by phone, and two in person. Member checking participants were provided with an overview of the purpose of the study, and research questions. They were then provided with the themes, subthemes, and representative quotes section by section. They were asked to provide feedback to the researcher regarding whether or not these themes seemed reflective of experiences of young women like them, and if quotes seemed to be interpreted correctly. Results of the member checking resulted in no significant changes to the overall themes found.

Results

The results of this qualitative study aim to elucidate the ways in which adolescent African American females conceptualize aspects of their sexuality, as well as describe the factors that contribute to this conceptualization. The results also aim to describe the role of desire in participant's understanding of their sexuality.

As mentioned previously, this analysis was conducted on data from interviews as part of a larger study examining ecological factors that affect social and sexual development among urban African American youth. Thus, the data was not collected with this author's primary research questions in mind. When examining the data for this analysis, it became apparent that the research questions could not be answered in the way originally conceptualized. This is primarily due to the fact that participants were not systematically prompted to provide in-depth narratives of their sexual experiences. However, this author employed thematic content analysis to look at the interviews across cases to examine: 1) Sex positive or sex negative viewpoints expressed by participants, 2) The acceptability or unacceptability of different sexual behaviors, 3) The influence of African American cultural references on participants' understanding of their sexuality, 4) The role of gendered beliefs/gender ideology on participants understanding of their sexuality, 5) The role of religiosity on participants understanding of their sexuality, and 6) How sexual desire is addressed or discussed in relation to participant's sexuality. This allowed for the retainment of

the core research questions, while analyzing them in a different context due to the restrictions of the available data.

The presentation of the results begins with a brief introduction of each participant to gain a small understanding of who they are. Their pseudonym, age and city are presented followed by whom they live with, how they describe themselves, what they like to do, whom they look up to, and why. All participants were high school students during the time of the interviews. In the sections that follow the participant introductions, research question each area is discussed using salient themes drawn from the data. Each theme presented is accompanied by one or more illustrative quotes. All quotes contain the letter “P” at the beginning of a statement to denote that it is the participant speaking, or a letter “I” at the beginning of a statement to denote that it is the interviewer speaking. All names that were referenced during each interview have been modified within the transcribed data (i.e., assigned pseudonyms) to ensure the confidentiality of the participants, their sexual partners, and other individuals who may have been identified. The table below (Table 1) outlines pertinent demographics of the participants.

Table 1

Participant Demographics

Pseudonym	Age	City
Sandra	15	San Francisco
Brenda	15	San Francisco
Angie	16	San Francisco
Destiny	15	Chicago
Gina	15	Chicago
Erickah	15	Chicago
Quinn	15	Chicago
Dana	17	San Francisco
Ashanti	17	San Francisco
Kimberly	16	Chicago
Raven	16	San Francisco
Zara	16	Chicago
Candi	16	San Francisco
Gabrielle	16	Chicago
Tina	17	Chicago
Mika	17	Chicago
Kayla	16	Chicago
Danielle	17	San Francisco
Leslie	16	San Francisco
Toni	17	San Francisco

Introduction of Participants

Sandra. Sandra is a 15-year old female from San Francisco. Sandra lives with her mother and her sister. She describes herself as a people person, who can relate to many different types of people. She likes singing, acting and dancing. Sandra looks up to her older sister because her older sister has "been through a lot of things" and come through it, including becoming a teenage mother.

Brenda. Brenda is a 15-year old female from San Francisco. Brenda lives with her mother. She describes herself as athletic, friendly and patient, and the type of person who takes responsibilities very seriously. She enjoys playing

sports, especially basketball. Brenda looks up to her therapist, because her therapist has always been there for her, telling her right from wrong.

Angie. Angie is a 16-year old female from San Francisco. She describes herself as goal oriented. Angie enjoys school, fashion, and wants to be a model. She lives with her mother who works in the medical field. Angie looks up to her mother because of her career and the open communication they have in their relationship.

Destiny. Destiny is a 15-year old female from Chicago. She describes herself as independent. She enjoys cheerleading, math, science, and world studies. Destiny lives with her grandmother. Her father died before she was born. Her mother is in her life, but discusses her grandmother as her primary caretaker. Destiny looks up to her two aunts, who both have professional careers and are financially stable. She competes with her friends regarding who can get the highest grades.

Gina. Gina is a 15-year old female from Chicago. She enjoys reading books, going to the library, and spending time with her family and friends. Gina lives with her mother, step-father, and multiple siblings. She looks up to her mother because despite becoming pregnant in high school, her mother successfully graduated, went to college, and became a medical professional.

Erickah. Erickah is a 15-year old female from Chicago. She describes herself as “crazy.” She enjoys playing the French horn and the drums. She wants to be a model. She lives with her mother. Erickah indicates that she looks up to no one, known personally or otherwise. She states that by choice she has no friends

and spends all of her time with her boyfriend. She chooses not to have friends because she does not want to spend any time around young women who bring her down or who are not classy.

Quinn. Quinn is a 15-year old female from Chicago. She describes herself as a nice, goofy person who likes to have fun. She enjoys playing basketball. Quinn lives with her aunt who she calls her “mother-auntie.” Her aunt took her in as a baby and raised her because her birth mother was involved with the criminal justice system. Quinn is tentatively beginning to build a relationship with her birth mother. She looks up to her mother-auntie, grandfather, and sisters and brothers. She specifically states that she looks up to her mother-auntie because she has taken care of her all of her life, and continues to encourage her to love her birth mother. Quinn has no children, and has been diagnosed with an STD in the past.

Dana. Dana is a 17-year old female from San Francisco. She describes herself as outgoing, nice, and funny. She enjoys shoe shopping and photography. Dana lives with her mother, sister, and brother. She looks up to the singer Keyshia Cole because she had been through a lot of things and still made it.

Ashanti. Ashanti is a 17-year old female from San Francisco. She enjoys watching TV, listening to music, and going to parties with her friends. She lives with her mother. She looks up to the program director of the community agency she was recruited from because the program director always wants her youth to do right “by any means necessary.”

Kimberly. Kimberly is a 16-year old female from Chicago. She describes herself as outgoing, loud, friendly, and talkative. Kimberly enjoys volleyball, basketball, math and writing. She lives with her mother and siblings. Kimberly looks up to a female friend

of hers who has her own house, car, and is not dependent on anyone. This friend encourages Kimberly to finish school.

Raven. Raven is a 16-year old female from San Francisco. She describes herself a shy, but confident in her looks. She enjoys science and wants to be a pediatric nurse when she gets older. Raven lives with her mother and siblings. She states that she used to look up to her grandmother before her grandmother died. Now she looks up to herself because she thinks about the consequences of actions before she takes them.

Zara. Zara is a 16-year old female from Chicago. Zara describes herself as a perfectionist, well rounded, intelligent, beautiful, respectful, encouraging, and descriptive. She enjoys writing and reading books. She lives with her grandmother and brother. She looks up to her grandmother because of her grandmother's strength. Her grandmother has exhibited this strength by persevering after losing one of her own sons, and deciding to raise Zara and Zara's brother.

Candi. Candi is a 16-year old female from San Francisco. Candi describes herself as a talkative person who likes to get to know people. She enjoys going to the movies and shopping. She lives with her aunt. She views her aunt as her mother. She looks up to her aunt because her aunt has stuck by her through many of the challenges she has had in life.

Gabrielle. Gabrielle is a 16-year old female from San Francisco. She describes herself as adventurous, nice, caring and helpful. She enjoys math, chemistry and going to the movies. Gabrielle lives with her mother. She looks up to her 18-year old step sister because she is serious about school and a positive person.

Tina. Tina is a 17-year old female from Chicago. She describes herself as fun and smart. She enjoys going to parties and clubs. She also enjoys playing basketball and softball. Tina lives with her mother and her sister. She looks up to her 97- year old grandfather. He has taken care of her all of her life, and is supportive of her. He lets her know that she can do anything she wants to do and encourages her to pursue her dreams.

Mika. Mika is a 17-year old female from Chicago. She describes herself as nice, kind, and low-key. She enjoys watching TV and listening to music. Mika lives with her aunt and her cousins. Mika looks up to her aunt because her aunt took her in when she no longer wanted to live with her mother. Her aunt takes care of her, and treats her like one of her own children.

Kayla. Kayla is a 16-year old female from Chicago. She describes herself as moody. She indicates that sometimes she is sweet, and sometimes she has an attitude. Kayla enjoys playing volleyball and shopping. She lives with her mom. Kayla looks up to her mother because her mother is independent, works, goes to school, and is determined.

Danielle. Danielle is a 17-year old female from San Francisco. She describes herself as disliking routine and monotony. She enjoys watching cartoons and listening to music. She wants to become a dentist. Danielle lives with her mother and siblings. Danielle states that she does not have one person that she looks up to; rather she takes inspiration from many different things and different people.

Leslie. Leslie is a 16-year old female from San Francisco. She describes herself as fun to be around. She likes to make jokes and laugh a lot. Leslie enjoys going to the movies and being around children. She lives with her father and one of her siblings. Leslie's mother died last year. When she turns 18 she wants to take custody of her younger sibling who lives with another relative. Leslie looks up to her best friend because her best friend gets good grades, tries to keep her on the right track, and always supports her. She states that her best friend is one of the few people who have not given up on her.

Toni. Toni is a 17-year old female from San Francisco. She describes herself as a person who likes children. She wants to open up a daycare when she is older. She lives with her mom, siblings, and her step-dad. Toni looks up to Tyra Banks and one of her teachers. She looks up to Tyra Banks because Tyra was a model, but now does many different things independently. Toni looks up to her teacher because her teacher was a 16-year old mother who was kicked out of her house as a teenager, but became successful. She states that now her teacher is married, runs a daycare center, and owns her own home.

Sex Positivity and Sex Negativity

Participant interviews were examined to gain a better understanding of the extent to which participants held "sex positive" or "sex negative" views of engaging in sex as a teenager. A sex positive attitude toward adolescent sexuality would be reflective of understanding sex as a normal and natural aspect of adolescent development, while a sex negative view would equate adolescent

sexuality with inappropriateness, danger, guilt or shame. Participant views were elicited by their response to the prompt “Do you think it’s okay for teenage girls and guys to have sex of any kind?” As participants often held nuanced beliefs regarding adolescent sexuality, participant views were not categorized in a binary way, instead sex positivity and sex negativity were viewed as opposite ends of a continuum, with participant responses falling closer to one end or another.

Participant responses revealed three overarching themes: *unconditional adolescent sex positivity*, *conditional adolescent sex positivity*, and *adolescent sex negativity*.

Unconditional adolescent sex positivity. While many participants simply answered “yes” that they thought it was okay for teenagers to have sex of any kind, a few elaborated on this answer reflecting a more nuanced sex positive attitude. Participants that fell more firmly on the sex positive side of the continuum regarded teenage sexuality as innate. Leslie expressed this sentiment very simply.

I: Do you think it’s okay for teenage girls and guys to have sex of any kind?

P: Yeah, it’s natural. That’s human nature. (Leslie, 16 years old)

Viewing sex as being natural and a normal part of human development, even for teenagers, is the essence of sex positivity. Another way that participants reflected sex positivity was by acknowledging the autonomy that adolescents have over their bodies

I: Do you think it’s okay for teenage guys and girls to have sex of any kind?

P: Yeah. ‘Cause shouldn’t nobody have control of their body. It’s them, not nobody else. (Dana, 17 years old)

Dana seemed to equate adolescent sexuality as a choice that teenagers have and should be free to make, without the interference or input of others.

Conditional adolescent sex positivity. Participants who fell into the *conditional adolescent sex positivity* category expressed the idea that sex as a teenager was an appropriate behavior, only if certain conditions were met. Within *conditional adolescent sex positivity*, two subthemes were: a) *conditional adolescent sex positivity – protection*, and b) *conditional adolescent sex positivity – not just anyone*.

Conditional sex positivity – protection. The theme *conditional adolescent sex positivity – protection* reflected the belief held by participants that sex as a teenager was appropriate only if proper precautions were taken to protect oneself against pregnancy or disease. The notion of sex potentially leading to disease or pregnancy was forefront in the minds of many participants when discussing adolescent sexuality. For example, when asked if she thought it was okay for teenagers to engage in sex, one participant initially answers yes, “it’s whatever you feel like doing.” She then quickly follows that statement up with the stipulation of “As long as you are protected,” and proceeds to go down a list of things you should do to keep yourself “safe” if you are going to engage in sex.

I: Do you think it’s okay for teenage girls and guys to have sex of any kind?

P: Yes, I think it’s whatever you feel like doing. As long as you’re protected.

I: And by protected you mean?....

P: If you having oral sex, just make sure everything is very, is safe, basically. Like, you know, check for bumps and stuff like that. And including anal and the anal and vaginal sex, just protect yourself. Birth control, condoms, pills, the shot, anything you can do to

keep yourself safe. (Brenda, 15 years old)

Other participants endorsed sex as a teenager simply because they thought it was an inevitability, again acknowledging the necessity of being safe.

P: “I think it’s okay...because we gonna do it anyway, so we might as well just do it. As long as we are doing it the safe way it’s okay.

I: And by the safe way you mean?

P: With the condoms and like the safe way.....y’all both have on protection. It’s safe for both of you to have on protection if he had one protection then it’s okay. (Raven, 16 years old)

Some participants vacillated on the sex positive sex negative continuum as they discussed the precautions that must be taken if one is to engage in sex as a teenager. While initially endorsing adolescent sexuality with the caveat of condom and birth control use, the reasons why these protections were needed became so prominent in the mind of some participants that they began to question whether sex as a teenager was actually appropriate at all. Destiny discusses the need to use protection to prevent teenage pregnancy utilizing the example of a friend who became pregnant. She then becomes unsure as to whether she thinks sex is appropriate for young people like herself.

P: I think it’s okay as long as you be protected. Well, I’m kind of – well I don’t know because I don’t think you should have sex – there are young girls who have sex now as a teenager are getting pregnant at a young age. My best friend, she had sex and now she got a baby. She was out of school for a long time. She had to make up that time, stuff like that. So I’m not gonna say you shouldn’t have sex as a teenager and I’m not gonna say you should. (Destiny, 15 years old)

With the above participants, the potentially dangerous outcomes of sex were the most salient.

Conditional sex positivity - one special partner. Another stipulation provided by these young women for embracing teenage sexual activity was that it

was only appropriate to engage in sexual activity as a teenager if you had one partner. Toni acknowledged the normality of teenage sexuality, while simultaneously expressing ambivalence toward the appropriateness of it, and finally settling on sex as a teenager perhaps being okay as long as you are only with one partner.

P: I think – I mean that’s normal. Like having sex is, I guess, is normal. Because that’s how we got into this world – by our parents having sex. But like it’s alright. I don’t know if it’s alright. Like I really don’t know what I think of it. Because I mean it could be alright. It’s just like as long as you’re having it – not like – you have your own partner like. You’re not having sex with the whole world. Like that one person. You know?
(Tony, 17 years old)

For participants, often it took more than just sticking to one partner for teenage sexual activity to be deemed appropriate. Sex had to be only with one partner, and that partner had to meet certain criteria which set them apart from other potential partners, thus making them special. For example, Sandra expressed teenage sex only being appropriate to engage in if it is the “right one, [right partner],” and only if you have had a long established relationship with the potential partner.

P: I think that girls should start having sex when they feel like they found the right one, or like if they feel like they’ve been talking to that person for a long amount of time, and if they know them for a long amount of time
(Sandra, 15 years old)

Continuing with this theme of a special partner, when asked about her opinion of teenage sexuality, Erickah recounted her experience of guilt around having sex, and feeling absolved of that guilt when she began to realize that she was not having sex with just “anybody,” as her sexual partner was the person she wanted

to spend the rest of her life with, thus making him special and sex with him appropriate.

I: Do you think it's okay for teenage girls and guys to have sex of any kind?

P: First when I told my mom I felt bad, but now that I look at it it's not like how I'm seeing my old friends just doing it with anybody, and they have a different view of it. First I thought I made a bad decision, but now I'm starting to realize this is the boy, the only boy that I've been with and the one I wanna spend the rest of my life with, so it depends on the type of person and relationship (Erickah, 15 years old).

In addition to being someone you have known a long time, or someone you want to spend the rest of your life with, another characteristic of the "right person" was a person who wants to have a romantic relationship with you outside of having sex with you. Gina affirmed that she did not think "sex of any kind is wrong," as long as partner characteristic conditions are met.

I: Do you think it's okay for teenage girls and guys to have sex of any kind?

P: Yes. It all just depends on who you're doing it with. If it's with someone you just met then it's not cool...but if you have that right person that respects you and wanna really be with you besides physically then I don't think having sex of any kind is wrong (Gina, 15 years old)."

Adolescent sex negativity. Although all participants were sexually active as a condition of inclusion, some participants expressed views more firmly on the sex negative side of the continuum when discussing adolescent sexuality. These relatively more sex negative views highlighted the potential dangers of sex, with no circumstance (protection, or one partner/special partner) in which adolescent sexuality may be accepted. For example, Zara stated:

P: I still think that's an adult situation to have sex. Because you a teen, you havin' sex, you getting pregnant. You're not supposed to have a kid when you're a teenager, your body not finished. You not supposed to be having sex because your body not completely developed and it's harming you (Zara, 16 years old).

In this one quote, Zara makes clear that she feels that sex is only for adults, presupposes a negative outcome as a result of adolescent sexuality, and implies that sex as an adolescent is an antithesis to normal biological development.

Acceptability of Sexual Behaviors

Participant interviews were examined for the presence of sexual behaviors that were discussed as being acceptable or unacceptable. Acceptable behaviors were those which were widely condoned or practiced, and unacceptable behaviors were those that participants described as inappropriate, or behaviors which participants had been warned not to engage in.

These acceptable and unacceptable sexual behaviors reflected multiple rules regarding how young women should conduct themselves in the context of sexual relationships, and included five major thematic categories: a) Transactional Sex, b) Sexual Acts c) Sexual Fidelity/Infidelity, d) Sexual Outcomes, and e) Sexual Assertiveness.

Transactional sex. While participants did not explicitly give reasons why you should have sex, interviews did reveal reasons that participants felt were unacceptable motivations for engaging in sexual behavior. One of these was having sex with someone in order for them to provide you with money or material

objects. Dana indicated her personal dislike of this behavior, equating it to being “slutty.”

I: So on this one hand, you’ve got a boyfriend. On this other hand, you got someone that you’re having sex with just to get money and clothes.

P: I don’t do that.

I: But how would they be different, [Dana]

P: I don’t know ‘cause I don’t do that....That’s nasty.

I: How’s that nasty, [Dana]?

P: ‘Cause that just slutty. That’s not even cute. That ain’t even ladylike. (Dana, 17 years old)

Participants felt that family members should be the individuals one turned to if money or clothing was needed. To instead have transactional sex was equated with prostitution.

P: I wouldn’t have sex with nobody for money and clothes. If I needed something that bad, I would call my grandma or my father...And that makes you seem like you’re a prostitute, even though you’re not.” (Toni, 17 years old)

Sexual acts. There are various sexual acts which emerged as acceptable or unacceptable sexual behaviors. Sexual acts are defined as an action performed with another person for the purposes of sexual pleasure. The primary sexual act that was deemed acceptable was vaginal sex. Oral and anal sex were specifically and repeatedly mentioned as behaviors that were not appropriate for adolescents, or acts in which participants themselves do not, or would not, engage. These findings spontaneously emerged from the interviews when explaining to participants the study’s operational definition of sex.

Oral and anal sex were generally understood as sex acts to be engaged in when one is older, or when one is married. These acts were viewed as sexual acts

that could put you at greater risk for a sexually transmitted infection, therefore safer to be performed within a marriage where monogamy is assumed. For example, Gabrielle, 16, reflected this sentiment:

P: I think – okay – like not the anal and oral sex, because that's just too much. That's when you're supposed to wait 'til you married for real because you don't know if he with somebody else. He could bring something back, and it be in your mouth. I think just regular vaginal sex is okay (Gabrielle, 16 years old).

Candi, 16, while acknowledging that anal sex could be pleasurable and she had friends who have engaged in the behavior, expressed her feelings that as a teenager, she did not feel like she was ready for anal sex. She also expressed a general aversion to the act.

P: That's so. That's no.

I: – penis in a girl's butt.

P: [Clears throat] un un.

I: Why – why do you say that?

P: I mean I'm – like some people do it. Some – it's pleasurable. I just – I could never – I mean not saying it would never happen, but now, I be a teenager, and I don't think I'm ready for that stuff just now.

I: Okay. So you're not feeling it.

P: I don't think guys and – I mean some of my friends have did it, but it's just like, I can't put something and then I see what's coming out of there, that's just not right (Candi, 16 years old).

Other participants felt that the act of fellatio, as well as a boy even asking a girl to perform fellatio was disrespectful.

P: ...girls don't like when boys tell 'em, you know, to go down, that's disrespectful.

I: Is it just disrespectful if he tells you to go down or is it disrespectful in general to go down?

P: In general to me. (Mika, 17 years old).

Oral and anal sex were the only two sexual acts which emerged from the interviews as being specifically inappropriate for adolescents. The reasons given for his unacceptability did not overtly reflect gender, culture, or religion.

Sexual fidelity/infidelity. Consistently throughout the interviews, infidelity emerged as an unacceptable sexual behavior. The young women in this study reflected on the undesirable nature of infidelity through personal opinion, reflection on their own experience, and lessons they learned from others. Infidelity was viewed as disrespectful, and a behavior which negatively impacted relationships. Gabrielle expressed that she thought cheating was the ultimate form of disrespect.

I: And what might a girl do to show she disrespects her boyfriend?

P: Cheat on him, and – I don't know. Cheat on him. That's it. I think that's the worst thing you could do during the relationship.

Raven discusses her experience with being unfaithful in a relationship and why she would never be unfaithful again.

I: Okay, do you have sex with anyone else besides your boyfriend?

P: No, I don't think he – I did before and then he found out, so I was like, "All right, I'm gonna stop." And it was kind of weird how he found out, 'cause he was like when we was having sex and he was like, "It feels different." And then he was like – I was like, "How does it feels different?" And he was like, then he just got up, and then he was like, "You had sex with somebody else." And I just came out and told him, and he was mad. And then we broke up for like, I would say for like a day. And then he called me, or whatever, and we was just talkin'. And we talked the whole day and just resolved it, but yeah.

I: Okay.

P: Ever since then I kinda don't do it, because I be kinda scared I'm gonna get caught.

I: And so since that time you haven't slept with anyone else?

P:Huh-uh (Raven, 16 years old)

Sexual outcomes. Participants consistently expressed the idea, and spoke about being given the message that teenage pregnancy was an unacceptable outcome of engaging in sexual activity. Brenda, when talking about what she learned from her family about being a teenage girl stated:

P:How pregnancy, how teenage pregnancy can mess up the rest of your life or it can mess up school or college (Brenda, 15 years old)

Angie reflected that her grandmother communicating to her some of the potential pitfalls of becoming a teenage mother, helped her avoid being a teen mother.

P:And [grandmother explained] that some girls just be getting' pregnant because they think that having a baby is gonna make the boy love them and want to be with them, but they don't know that that's just pushing a boy away. So it's like I'm kinda glad she did come and tell me about the baby situation, because I kinda don't want to be a teen mom. I want to wait to try to pursue my dreams and stuff and have like money to provide for my baby and stuff (Angie, 16 years old).

Kimberly's mother communicated the message of teenage pregnancy being unacceptable by actions, rather than words. Kimberly's mother automatically put her on birth control when she was 14, although Kimberly stated she was not sexually active at that time.

P: With her [mom], it really wasn't no advice, because she like raised a lot of girls, and when I was fourteen, that's when I first asked her [about sex]. She put me on birth control. I wasn't doing nothing when I was fourteen. And she just sat me down and told me like, you can get off of them when you're ready, but just know you don't need me to go get birth control for you (Kimberly, 16 years old)

Sexual assertiveness. An acceptable sexual behavior was sexual assertiveness. Participants revealed learning from family that it was okay to assert themselves verbally and physically if they are experiencing unwanted sexual contact. Family members communicated to participants that their comfort level with sexual contact was what was most important. One participant reported that her mother told her:

P: Don't be letting boys... feel on you and touch you in a wrong way you don't want to be touched and stuff. (Quinn, 15 years old)

Another participant's mother told her to physically remove herself from the proximity of a male she felt was pressuring her for sex.

P: Well, she'd tell us like don't never let no guy pressure us, and like if we feel like we were being pressured, we should get away from them as soon as possible (Kayla, 16 years old).

In addition to saying "no" and removing herself from the situation, Zara's family communicated to her that it was okay to use the word "rape," call the police, and physically fight back if she was experiencing unwanted sexual contact.

P: Don't let nobody pressure you. You can always say no and just leave. Just like [if] you in an uncomfortable situation, call the police. You can call the police. Don't be scared to say rape if it's happening and you don't want to believe it, but it's happening. Don't be scared to bite and fight (Zara, 16 years old).

African American Cultural Images Influence on Sexuality

Within the interview, participants were asked, "What do you think the messages and images are of African American girls your age?" They were then asked about the source of those messages. A majority of participant responses to this prompt contained themes around sex and sexuality. These responses were

examined for statements reflecting the presence and impact of cultural images of African American women's sexuality as well as messages from African American specific cultural sources impacting participants' understanding of their sexuality. These images and messages reflected four broad themes: a) expectation of sexual activity, b) perception of promiscuity, c) sexualization of the body, and d) sexual sponsorship.

Expectation of sexual activity. Participants reflected on messages which communicated to them that African American young women were inherently sexual. These messages and images came primarily from popular culture and peers. When asked generally what the messages and images are of African American young women her age, one participant plainly stated "That you should, images that I see on TV [are] that you should be having sex"(Zara, 16, Chicago). Other participants reported that in school peers believe that if you are Black female, virginity is implausible and you must be having sex.

P:And if she was a virgin, she told somebody that or something, they'll just be like, "You lying. You know you had some before." They won't believe it. They think that everybody that's Black doing something (Tina, 17, Chicago).

In reflecting on the images shown and messages received that being a young African American female means you are or should be having sex, participants named specific African American female celebrities that they felt not only propagated these messages, but influenced sexual activity among their peers. Leslie discussed recording artist Ciara, and her belief that Ciara's music video encouraged young African American women to have sex.

P: Ciara, she does not present herself the way that young women should present herself.
 She came out with this song, called “Ride”...and that song is about riding they penis. And that’s not right, like for little girls like us to be listening to that like... “I like the way you ride it.” Come on now, that don’t make no sense.
 I: So for the young women that are listening to “Ride” what kind of messages are they getting?
 P: They gettin’ – the message they gettin’ is like, “Oh, it’s okay for me to listen to this song, I want to learn how (Leslie, 16 years old)

Perception of promiscuity. Related to the message that young African American women are inherently sexual, many of the messages that participants received were that young African American women were not only sexual, but indiscriminately sexual with multiple partners. Gabrielle, a 16 year old from Chicago, when asked to reflect on messages of African American young women in popular culture stated:

P: That they ghetto, and they bad, and they sleeping with a lot of people.
 I: Okay. So you get that from – from what?
 P: TV. (Gabrielle, 16 years old)

Similar messages were received from music, particularly hip-hop music.

Kimberly was asked

about pop culture images of African American young women

I: No. Okay. What about movies or music?
 P: Music, yeah. But I don’t think so in the movies.
 I: Okay, so what kinds of things are in movies – I mean, music about what black girls our age should be like?
 P:..... And they’ll tell how black girls is, but we ain’t really like that. ... Like Gucci Mane, when he says girls is like buses, next fifteen, one coming.
 I: Okay. So what does that mean? Girls are like buses, next fifteen, one’s coming.
 P: Like they’re some buses. Like the girl probably don’t even know you, she’ll still do something with you [sexual activity], and you shouldn’t –

like if I was a boy, you shouldn't care about no girl because it's like hunt you some, and like the next fifteen you catch another one or something. (Kimberly, 16)

The quote above illustrates the message sent by a popular hip-hop artist that young African American women are not worth being emotionally invested in due to their indiscriminate sexuality.

Messages also reflected the idea that African American young women, perhaps due to their inherent sexuality and promiscuity, were expected to sexually service men. Ashanti (17, from San Francisco) discussed rap artists rapping about young women only in terms of what sexual acts they would perform.

I: So from the rappers, what kinds of messages are they talking about when it comes to girls your age? ..

P: Be like cussing a lot and stuff like and they are saying like how they [young women] going to do this and how they going to do that, like sexual activity and stuff like that, basically they not talking about them [young women] in a good way.

I: What do you mean, sexual activity?

P: Like, you know, like, uh, a b[itch] gonna suck my d[dick], you know stuff like that (Ashanti, 17 years old).

When assessing the impact of messages such as the above on African American female sexuality, Toni had this to say

P: Like Lil Wayne songs and stuff like that. Like he says a lot of stuff about what he wants to do with the girls and stuff. And then some girls take songs like – well – like ...

I should do that, because that's what they like." You know? (Toni, 17 years old).

Mika reported the same effect when female singers discuss having sex with men

I: What are those messages that they send out from? You said TV then music. Did you mean the videos?

P: Yeah, music videos. Okay, like you know, like music girls, women these days, they like, call themselves "B"s and saying all types of ridiculous things that females shouldn't do and these girls feel like they

should do it too 'cause they like look up to these girls, the rappers, or singers.

I: So by "B"s, you mean? What do you mean when you say "B"s, they call themselves "B"s. (Mika, 17 years old).

P: Like bitches. Yeah, bitches.

I: Okay. You said there are other things they do. What other kinds of things do they do in the videos?

P: Talking about having sex with men, and it's a lot of explicit things. That's how these girls react to it and they do the same.

Sexualization of the body. Two subthemes emerged from the larger theme of sexualization of the body. These subthemes were a) *display of the body: skimpy clothing* and b) *shape of the body: "thickness"*. Young women received messages equating the shape and size of their body parts, as well as the display of those body parts with attractiveness, or being "cute." Wearing short, tight, or sexually revealing clothing, and being "thick," were viewed by participants as promoted ideals, and standards of attractiveness. This image was perpetuated by the media, and reinforced by their peers.

Display of the body: skimpy clothing. Participants reflected on the fact that what they saw on TV, magazines, and from prominent hip-hop artists where African American young women in clothing that prominently revealed their body.

P: Like on videos –those girls think they should be like think they should be like.

I: Okay. Tell me about the videos and what's in there about how girls your age should be.

P: Like they half-naked and stuff, and I think that – that's what they look up to. Like, they see that they get attention, so that's what they do.

I: Who looks up to them?

P: The girls on the videos – well, the girls my age look at the girls in the videos.

I: Okay – and think they should be that way.

P: Yeah. (Gabrielle, 16 years old)

As with sexual activity, participants discussed the influence of African American female celebrities on young women's conceptualization of what is sexually attractive. Angie acknowledges that African American young women are taking cues from music stars regarding how to display their body.

P: I feel like right now, it's always somebody who is trying to be like somebody ...and right now, everybody is trying to be like Nicki Minaj, trying to be like Rhianna, and stuff like that. Like trying to have all the little short clothes and all the little skirts and stuff like that. Like, basically, on one bus you can count like three girls that have at least almost the same outfit on because everybody is just dressing the same.

I: So it's just about looking like Nicki and Rhianna.

P: Like looking cute. Like looking cute, like you got to be having little short skirts on. .. (Angie, 16 years old)

Angie equates "looking cute" with short, revealing clothing.

Shape of the body: "thickness". Along with wearing short sexually revealing clothing, participants discussed messages received from peers and the media that to be an attractive African American female, they must be "thick." Being thick was described primarily as having a large butt. Within the definition of "thick" also fell having big legs, large breasts, and a small waist. However, having a large butt was the focus. African American female celebrities were again cited as perpetuating this expectation.

P: They bad messages, like you got to have this big ole booty for the boys to like you. ...they mainly stress the black like butt is so important like today, like now. Like it is just so overboard and so overrated...Like, have you ever heard of Nicki Minaj?...She is the worst example to set for anybody period and that's what everybody look at and want to be... She got this big ole fake booty first of all and she get these hip injections to make her butt get this big...First it was like this and now it's like your butt is huge, it's the size of Uranus. It's like how could you get like that? That's not a good example, that's why everyone want a booty now, they got the booty pads and everything so it's like that's not good. You either got it or you don't, so don't get shots and booty pads...Nicki Minaj, she's

appealing to all they young kids and these young girls and they want to be like her and everybody want a fake booty now and it's like no, it's just not working. (Zara, 16 years old)

In the quote above, Zara discusses how celebrities like Nicki Minaj are not only perpetuating the expectation of thickness, but influencing young women to alter their bodies to try to meet this expectations. Danielle reflected that this message came from music in general, without singling out a specific artist.

I: Okay. What about from movies or music? Are there messages and ideas from there?

P: Yes, and music, everybody, all the girls should have these big old round butts and these perfect hourglass bodies and movies, I don't know. I can't really say about movies, but music, yeah.

I: Okay, so music, also girls should be a certain body type.

P: Um hmm. (Danielle, 17 years old)

Participants indicated that this thickness expectation not only came from music, but that young men had these expectations of their girlfriends.

I: So give me an example of what a boyfriend's image of what a girl should be like.

P: Oh, he want his girlfriend to be thick....

I: So when you say thick though, is that how she looks or—

P: Thick is like, she got big legs, a big ole booty, big titties, stuff like that. So, boys just, I don't know where they getting these things from because everybody ain't perfect. (Angie, 16 years old)

Of note in the quote above, while discussing that young men expect their girlfriends to be “thick.” Angie inadvertently equates thickness with perfection.

Sexual sponsorship. Participants reflected on multiple messages promoting the idea that they should not have sex for “free.” Participants received the message that if they were going to have sex, they should be receiving monetary or material compensation in return. This message was received from

popular culture and peers. Rapper Nicki Minaj was again mentioned as a popular culture figure who promoted this idea.

P: And everybody is like, oh, I love Nicki Minaj...what she rap about, it's not really good all the time.

I: What's some of the things she rap about?

P: Talk about I never let a D boy blank for free. You know what that means?

I: Explain.

P: Like, like think about how she say, I never let a D boy blank for free. She never let a boy in the hood or a D boy, a dope boy do her for free, so basically you got to pay to have sex with her so that's message. (Tina, 17 years old)

A particular song, called "Sponsor" was mentioned by various participants as a song that gave messages to young women that that they should be financially supported by a man if they are having sex with them.

P: It's women making songs about men should be taking care of you and doing all this stuff... "Sponsor." You heard that song, "Sponsor"?

I: No, I haven't.

P: They talk about how – they just say a whole bunch of stuff about how he should put it in a bank, put some in your tank and talk about everything. (Mika, 17 years old)

Music was not the only popular culture source that participants received this message from, they also discussed receiving this message from urban fiction novels.

I: Okay. What about radio or magazines or books? Do you think images about what black girls your age should be like come from those places? That you've seen.

P: Yeah. Probably like some of Zane's books that girls be like. They talk about how to dress and you know, how to play their role to get money from boys and stuff. And that's how most of the girls out here is. (Kimberly, 16 years old)

In addition to these messages from popular culture, some participants stated that their friends encouraged them to acquire money from young men they are having sex with.

I: Okay. What about friends? Do you get messages from friends about how you should be?

P: Um-hmm. Well, they say I should just have a lot of boyfriends. Get their money. (Kayla, 16 years old)

It is interesting to note that while individual participants viewed having sex for money and/or material goods as a personally unacceptable behavior, they are surrounded by messages to do so from popular culture and peers.

Gender Beliefs/Gender Ideology

Participant responses were analyzed for instances in which the role of gender ideology in relation to sexuality became apparent. The role of gender beliefs/gender ideology became apparent regarding one main aspect of sexuality, having multiple partners. This was expressed in two ways: a) Females' Sexual Reputation and, b) Gender Bias/Double Standard.

Females' sexual reputation. Participants conveyed the belief that young women who had multiple sex partners had character defects in some way. These beliefs were never reflected about young men. These young women were viewed as "slutty," as reflected by Dana.

I: Okay, so next, [Dana] I'm going to ask about your opinions on sex and what you think has influenced your opinion. So first, do you think it's okay for teenage girls to have a lot of different sex partners?

P:No.

I: Okay. Why is that?

P: 'Cause that's not cute. That's trifling, like I said before.

I: What does it say about them?

P: I don't know. That's just nasty. That's slutty. (Dana, 17 years old)

They were also viewed as attention seeking.

P: They need help. I think they looking for attention, and that's why they doing it.

I: And why do you feel that way?

P: Because that's just too many people. I couldn't do it. (Gabrielle, 16 years old)

Kayla went further in her conceptualization of young women with multiple sex partners, indicating that she believed they were sexual deviants, attempting to solve their personal difficulties with sex.

P: Either they are sexual deviants or they are slutty, that's what it is. Either you've got a problem with sex, you don't know how to control it.. 'cause I got a lot of friends like that that don't mind saying they have a lot of sex and being like I just like it, it's fun. You know, so they just sexual deviants to me. Sexual deviants or just promiscuous or just got problems at home and they bring it out and solve it with sex. You know like people solve their problems with weed and people solve their problems with drugs. (Kayla, 16 years old)

Explicit acknowledgement of gender bias. While some participants expressed the gender-based belief that women who had multiple sex partners were deficient in some way, other participants recognized the double standard inherent in the fact that women suffer a loss of reputation, while men have no such loss, and are often celebrated. This is plainly reflected by Brenda, below.

P: Females, when you have a lot of sex with different men...people, look at you in the wrong way. The males..., people look at you in a good way, like you know, you get a lot of [girls], you know, so I think that's wrong. (Brenda, 15 years old)

Participants thought that given the fact women were expected to not have multiple partners, men should be held to the same standards.

P:I would say my best friend, [Carla], 'cause we always talking. We was talkin' about that. We was talkin' about girls shouldn't have sex with a lot of guys, 'cause that's how they get like a name for their self and then we talk about how boys be having sex with all these girls, but they don't get a name for they self. So it was like if a girl can't do it then a boy shouldn't do it either, 'cause that's not fair. (Raven, 16 years old)

Religion

In examining participant interviews, religion was not found to be an influential or impactful factor on participants understanding of their sexuality. Participants continuously denied learning anything about sex or sexuality from religious sources.

Desire

In order to better understand the role that desire plays in the sexual conceptualizations of these adolescents, participant interviews were examined for the presence of statements reflecting desire. Tolman (2000) defined desire as “strong, embodied, passionate feelings of sexual wanting.” Fine (1998; 2006) understood that being able to experience and acknowledge feelings of sexual pleasure was an essential component of desire. She posited that experiencing desire was necessary for sexual subjectivity/experiencing sexual agency. Consequently, themes emerging from this examination of the presence of desire

within these interviews were grouped into three broad categories, each with several subthemes. These categories were a) acknowledgment of *pleasure*, b) acknowledgement of *sexual desire* and c) expressions of *sexual agency*.

Acknowledgment of pleasure. Sexual pleasure is defined as the experience of sex or a sexual act resulting in physical gratification. When discussing sexual pleasure, participants noted the association for them between sex and pleasure, and sexual pleasure differentials based on partner type.

When participants acknowledged the association between sex and their personal pleasure. pleasure was seen as both a reason for sex, and an outcome of sex. Candi (age 16) explained having sex as a teenager in terms of learning about pleasure.

You're doing new stuff to find out how to use certain parts of your body. You're getting – you're experiencing pleasure (Candi, 16).

Brenda (age 15) acknowledged obtaining pleasure from sex and reflected on her own transition from viewing sex as simply a pleasurable act, to thinking about the potential consequences of sex.

Well, what I got out of it [sex] was of course, pleasure. What I was scared to get out of it was an STD of course, and what I got out of it was education because once she told me that [best friend became pregnant], I had to think farther into it besides just pleasure, I had to think about condoms, birth control, everything (Brenda, 15) .

Although participants associated sex with pleasure generally, pleasure as a reason for sex was more salient depending on partner type. Particularly, pleasure was seen as the primary reason for sex with secondary partners, while pleasure generally played a decreased role in sex with a main partner.

Angie (age 16) denies that the primary reason for having sex with a secondary partner is to receive material items. She remarks that a boyfriend also has the capability of buying you items, therefore the reason you are having sex with someone else is simply for pleasure.

P: That's your trick [friend with benefits]. A boyfriend, I mean your boyfriend would buy you things too, but I think you have sex with the friend with a benefit and then he buy you stuff, I think that's for your own personal pleasure because you have a boyfriend who buy you things too and then you go and have sex with someone else. That's your own personal pleasure, that's just what you want to do (Angie, 16 years old) .

The idea that lack of sexual pleasure with a main partner as the reason why one would even have other partners was expressed. Leslie stated:

I: So what about girls now. What do you think about girls who have lots of sex partners, so more than three besides their boyfriend?

P: I think if it's beside their boyfriend, I think their boyfriend just ain't doin' somethin' right for them.

I: What did you mean by that?

P: Like I just think they boyfriend not pleasin' them, because if they boyfriend was pleasin' them why would they be havin' sex with other people? (Leslie, 16 years old)

By contrast, one participant discussed enjoying sex more with a main partner, precisely because there are no other secondary benefits:

P: Your boyfriend supposed to be someone you have sex with because you want too. You like him. You love him. You see him as somebody you will enjoy having sex with without getting benefits, so that person with benefits is somebody you just do it because you have to. (Destiny, 15 years old)

Acknowledgement of sexual desire. Acknowledgement of sexual desire was reflected in statements acknowledging the longing for, or wanting of sex. Participants acknowledged the presence of sexual desire among other young

women, their own sexual desire, and discussed potential differences in sexual desire based on partner type.

Various participant statements reflected the observation that there are some girls who experience sexual desire and attempt to act on that desire, potentially to their detriment. This sentiment is exemplified by Mika, who believes that some adolescent girls have such a desire to get “laid” that they become ignorant of the risks of having multiple sex partners outside of a defined relationship. Before the exchange below, Mika states that she believes that males who have multiple sex partners outside of their relationship are “nasty:”

I: Do you think other girls feel pretty much like you do or do you think they feel differently?

P: I think they feel differently.

I: Okay... you said girls your age feel differently. How?

P: 'Cause they don't know neither, they don't know like how they can be affected, they don't know the type of diseases out there, they just wanna, you know, get laid (Mika, 17 years old)

Other acknowledgements of sexual desire were more personal. One participant, who has a child, discussed a conversation with her sister, wherein her sister asked her why she felt the need to have sex with her boyfriend.

P: And she [sister] was, like, "Some people have boyfriends and don't have sex with them for a long, long time." And I was thinking that it's kinda true, but then I have needs. I had a baby already. You know, I'm sexually active. He's sexually active. We're not gonna sit in no room and not have sex. Who does that, sit in their room and just actually sit there and not cupcake. And she was like –

I: And by cupcake, you mean?

P: Just sitting there and kissing and not do nothing. Like who gonna sit there, talk about sex to each other and not have sex (Candi, 16 years old).

The participant above attributes her desire for sex to the fact that she already has a child, and is already sexually active. She has “needs” that will naturally manifest themselves with someone who is her boyfriend.

As with pleasure, sexual desire was seen to vary based on partner type.

Sexual desire was conceptualized as a stronger motivator for sex with a secondary partner as compared to a main partner. Danielle remarked:

P: Friends with benefits is more like a sexual attraction, like there’s like an urge. And then with a boyfriend it’s like you can control your urge cause you want to know that person. Like you wanna be a part of that person’s life (Danielle, 17 years old)

In this quote, Danielle also equates “controlling [sexual] urge” as a prerequisite for developing a more serious relationship.

Kayla states that sex with someone other than your boyfriend is only “because you want to have sex,” while there may be other, more emotional reasons you have sex with your boyfriend.

P: With your boyfriend, it’s like it’s more romantic, and with just somebody you talk to, it’s like, it’s kind of like a one-night stand. Like you’re just doing it just because you want to have sex. Not... because like you love him or something (Kayla, 16 years old) .

Expressions of sexual agency. Going beyond statements of sex being pleasurable and an acknowledgement of sexual desire, participants displayed expressions of sexual agency. Sexual agency includes the ability to recognize, accept, and freely respond to one’s own sexual feelings, as well as the ability to freely make choices regarding one’s sexual experiences and expression of sexuality (Pearson, 2008; Tietelman, 2004). Sexual agency was expressed in two

ways, 1) participants expressing the expectation that within a relationship, sex should be pleasurable, 2) participants having conversations with partners about desired and undesired sex acts.

Participants described the need for pleasurable sex to exist within a relationship in order for the relationship to be sustainable. Toni (age 17) was asked her opinion regarding waiting until marriage to have sex.

P: So it's like: "Do I want to be with this one person for the rest of my life, and our sex life is not gonna be that good? I don't know how it is or stuff like that? So I think you should just – when you're ready [as a teenager], you should just go ahead and do it [have sex]."

Above, Toni expressed the importance to her, of being sexually compatible with a husband. She does not want to risk marrying someone without having sex with them first.

The way in which participants ensured that their sexual needs would be met within a relationship, was through direct conversation with a sexual partner. Participants talked to sexual partners about what sexual acts would take place, the sexual acts that pleased them, as well as sexual acts they would not perform. Tina reflects on talking to her partners about her sexual needs:

P: I might feel shy or embarrassed, but I feel like it's your body and you need to explore your body, and if that's your boyfriend or whoever you're doing it with that they should fulfill your needs just like I fulfill their needs, because me and boys, they gonna take what they like, so you might as well tell them what you like (Tina, 17 years old).

Danielle (age 17) describes a conversation with her boyfriend about what pleases her

P: Like what do I talk about? Talk about like what, with my boyfriend?

I: Um hmm.

P: Like what pleasures you the most or whatever or like yeah. Like what do you like and don't like; stuff like that.

I: Things like how you like to be touched. Is there any other things that you guys talk about when it comes to sex?

P: Hm-mm.

I: Okay. Just how you like the feel of it.

P: Yeah. (Danielle, 17 years old)

Ashanti (age 17) discussed how she and her boyfriend negotiated sex acts, being assertive about her needs as well as compromising with his:

P: Right... like my boyfriend will be like, oh, get on top and I could be like no, I don't want too. Like no I want to do it from the back and he could be like okay, or I could like I'm going to do later and he could remind me, like you said you was going to get on top and I could get on. Or I wait five minutes and he's like "man." And then he'll wait though."

Angie (age 16) looked at talking to partners about her sexual needs as a way to ensure that she had equal power in the sexual interaction.

P: 'Cause if we gonna have sex, I'm gonna tell him how I want to have sex, too. Instead of just like him being in control, that's not no fun.

There are some participants who felt comfortable expressing entitlement, but in a constrained way. They felt comfortable expressing their wish to have, or not to have sex, but felt uncomfortable having a say with regards to what happens when they have sex. Sandra (age 15) illustrated this well

I: So how would you feel about talking to a boyfriend about sexual health matters, or things you like to do when you have sex?

P: I feel okay talking to him. Like if I feel like I want to have sex. It'll be like no, or something like that....

I: And would you feel comfortable talking about things you might want to do when you have sex?

P: No.

I: No.

P: Unh-uh.

I: You wouldn't talk about what you want to do?

P: No, I just let everything happen.

Discussion

The purpose of this investigation was to elucidate the factors that may contribute to African American female heterosexual adolescents' understanding of their own sexuality. Specifically participants' positive and negative conceptualizations of sex, gender beliefs, culturally specific messages and images, religion, and the presence or absence of named desire were examined. This was accomplished by analyzing the content of previously collected semi-structured qualitative interviews of participants focused on the relationship between gender ideology and sexual risk behavior. Understanding the factors that impact these female adolescents' understanding of their sexuality is vital as they are expected to grow into sexually healthy adults, while being immersed in a culture where their age, gender and race leave them particularly vulnerable to complicated, often disaffirming messages about their sexuality.

Data for this investigation was ascertained by examining responses from the semi-structured qualitative interviews of twenty sexually active, heterosexual, African American female adolescents between the ages of 15-17. These interviews were from phase one of a larger, mixed gender, three phase study examining the relationship between gender ideology and sexual risk behavior among African American adolescents. Interviews were analyzed using a psychological phenomenological approach.

The present section will begin by presenting an overview of the most prominent findings within each research question domain, explaining the meaning of the findings within the context of previous studies and current literature

whenever possible. Implications of the findings will then be explored, followed by a discussion of strengths and weaknesses of the current study, ending with recommendation for future research.

Sex Positivity/Sex Negativity

When exploring participant's attitudes toward teenage sexuality, results highlighted the ambivalent beliefs held by sexually active African American female adolescents regarding being sexually active as an adolescent. While a few participants expressed positive attitudes toward engaging in sex as a teenager, most participants expressed attitudes indicating that the appropriateness of teenage sexual activity was conditional; conditional to being absolutely certain you have protected yourself from the dangers of sex, and conditional to having sex with one partner who was special in some way. Some participants, in the middle of affirming the appropriateness of teenage sexuality within the caveat of protection, began to change their stance on teenage sexuality as the dangers of sex became salient to them.

Adolescent females feeling ambivalent about engaging in sexual activity is consistent with previous research findings. Fine (1988) observed that young women whom she interviewed often simultaneously experienced excitement/anticipation and anxiety/worry with regard to their sexuality. Additionally, general adolescent ambiguity about sexual activity, regardless of gender has been discussed (Mitchell & Wellings, 2002; O'Sullivan & Gaines, 1998). In 2005, Muehlenhard and Peterson wrote, "Wanting and Not Wanting Sex: The Missing Discourse of Ambivalence," commenting on the fact that much

research, including their own, conceptualized adolescent sexual activity as either “wanted” or “unwanted.” This binary conceptualization left no room for capturing adolescent attitudes toward sexual activity that often lay somewhere in-between. They suggest a new model for exploring adolescent sexuality that attempts to account for this potential ambivalence. This model posits that there are multiple dimensions along which sex can be wanted or unwanted. The part of this model most salient to the results obtained in this investigation suggests distinguishing between wanting a sexual activity and wanting its outcomes. They suggest that adolescents can want a sexual activity, but not its outcomes, and this ambivalence may be particularly true for young women. Muehlenhard and Peterson (2005) list some of these feared potential outcomes as STI acquisition, pregnancy, or loss of reputation or respect. These listed feared outcomes are consistent with the present findings.

The finding that participants endorsed the appropriateness of teenage sexuality only under the circumstances that every precaution from the potential negative outcomes of adolescent sex are taken is also consistent with standard sexual education practices in the United States, and critiques of those practices. From a strictly public health perspective this finding may be confirmation that efforts to promote “safe sex” among youth have been successful in equating sex with condoms and birth control for adolescents (Weissbourd, Peterson, & Weinstein, 2013; Lamb, 2013). However it is also apparent that these young women seemed to equate sex with danger, the danger of pregnancy or disease. When asked generally about adolescent sexuality, the outcomes of teenage

pregnancy and disease were the most salient to participants. This is consistent with the existing prevailing paradigm in the United States that adolescent sex is inherently risky and dangerous (Broman, 2007; Ehrhardt, 1996; Niccolai, Ethier, Kershaw, Lewis, Meade, & Ickovics, 2004; Schalet, 2011; Niccolai, Ethier, Kershaw, Lewis, Meade, & Ickovics, 2004; Tolman & McClelland, 2011). Formalized sex education, when provided to adolescents in the United States focuses almost solely on biological changes experienced during puberty and the potential negative consequences of sex (Percival and Sharpe, 2012). This is reflective in the equating of adolescent sex with negative outcomes among participants.

Sex being appropriate “only if you are with one special partner” is also consistent with the way young women are socialized regarding their sexuality. Young women are socialized to value their virginity, and to hold onto that virginity until marriage and/or “the one” comes along (Kirkman, Rosenthal, & Smith, 1998). The prevailing narrative around female adolescent sexuality is that young women want relationships, commitment, and love. Sex is seen as something that young women engage in only if these requirements are met (McCabe, 2005). This is echoed in the present results.

The finding that adolescent females thought adolescent sex was only appropriate with one partner may also be explained by the loss of reputation or respect feared by young women if they have multiple partners. This fear of loss of reputation or respect is reflective of the sexual double standard, referring to the differing ways in which young men and women are socialized regarding their

sexuality (Fasula, Miller, and Wiener, 2007; Lyons, Giordano, Manning, Longmore, 2011; Tietelman, Tenille, Bohinski, Jermmott and Jermmott, 2013). Adolescent males are taught to embrace their sexuality and are praised for engaging in sexual activity, while adolescent females are taught the opposite and are admonished for sexual activity, especially sexual activity with more than one sexual partner. This may be another potential explanation for the ambivalence observed within these young women.

Acceptability/Unacceptability of Sexual Behaviors

Oral and anal sex, sex for money or material goods, infidelity, and teenage pregnancy were all found to be unacceptable sexual behaviors; while sexual assertiveness was something that was promoted by family members and loved ones. Unexpectedly, the acceptability or unacceptability of sexual behaviors was not explicitly related to religion.

Oral and anal sexual behaviors were found to be unacceptable for participants. The following reasons emerged: 1) participants discussed oral and anal sex as being beyond the scope of what they felt was appropriate for them at this age level, 2) they felt that the practice of oral and anal sex was indicative of a relationship with a higher level of commitment than boyfriend and girlfriend and 3) they found these sex acts to be aversive and disrespectful. While this author was unable to find studies outlining the reasons why adolescents who did not engage in oral or anal sex chose not to do so, studies do indicate that African American adolescent females are less likely to engage in oral and anal sex than the national average of adolescent females. According to the most recent data

available from the CDC's National Survey of Family Growth (Copen, Chandra & Martinez, 2012), 43.4% of African American females between ages 15-19 have had oral sex of any kind with an opposite sex partner, and 10.1% of African American females in this same age group have engaged in anal sex. This is compared to national rates 47.5% and 13.2 % respectively. Why African American adolescent females are having oral and anal sex less than some of their same aged peers of other ethnic groups is an underexplored topic. It has been suggested that oral sex is less acceptable for African American females (Wilson, 1986), however the reasons for this have not been adequately investigated. This author was unable to find empirical literature that directly explored reasons why African American adolescent females are less likely than their same age counterparts to engage in oral and anal sex. Thus, the present results indicating that participants find oral and anal sex to be age inappropriate, indicative of a higher level of relationship commitment than just boyfriend and girlfriend, aversive, and disrespectful, may be an important addition to the literature.

Sex for money and or clothing was also a behavior that participants did not personally condone. Participants compared this practice to prostitution. While this was seen as something that participants personally felt like they would not do/should not do, in latter parts of the analysis participants discussed pressure from others (media, peers) to get money/material objects from men with whom they are having sex. Extant literature suggests that when low-income adolescent African American females engage in sexual commerce, they are more likely to be products of families with maternal incarceration and paternal substance use

(Nebbitt, Tirmazi, Lombe, Cryer-Coupet and French, 2014), or lack the adequate options or skills for acquiring employment (Browne et. al, 2014) . While this is a sample from high poverty communities in large Midwestern and large West coast cities, data were not collected on their caregivers or employment status.

Fidelity was greatly valued by participants. Cheating on their partner was seen as the ultimate form of disrespect. This is consistent with existing literature on the importance of fidelity in African American adolescents (Gowen, Catania, Dolcini, and Harper 2014; Fyre, Auerswald, Hoffman, and Millstein, 1998; Towner, Dolcini, Harper, 2012). Research has suggested that African American adolescents expect fidelity in named exclusive romantic relationships where the explicit decision was made to be faithful as a condition of relationship status. Adolescents, and African American adolescents, have many variations on romantic and sexual partnerships where fidelity is not necessarily expected. These include but are not limited to: a) being in a relationship where you are getting to know someone (“talking to someone”), and b) having a “friend with benefits.” Getting to know someone, or “talking to someone” usually infers the dating/getting to know one another stage of a romantic relationship where fidelity is not expected, and sex may or may not be involved. A “Friend with benefits” usually characterizes someone that is known, whom one is sexually involved with, but are not romantically linked to in any way. There are many other names African American adolescents use to describe these two types of partnerships and variations within, however what they all have in common is that fidelity is not expected. It could be that because there are a variety of socially acceptable

options for sexual and romantic partnerships outside of commitment, that once the decision is made to be in a named, committed relationship (be a “boyfriend” or “girlfriend”) the promise of fidelity is paramount.

Teenage pregnancy as an outcome of sexual activity was found to be an unacceptable behavior. Contrary to theories purported that low-income adolescent African American females desire to have children to have someone to love (Crosby, DiClemente, Wingwood, Davies & Harrington, 2002), participants reported overwhelmingly receiving messages from family, and understanding themselves, that being a teenage mother was not something desirable. Davies, DiClemente, Wingwood, Harrington, Crosby, & Sionean (2003) examined pregnancy desire among low-income African American adolescent females and found that desire for pregnancy was associated with low perceived family support. It is reasonable to believe that since the messages about teenage pregnancy received came from family members, that this sample did not perceive low family support.

Findings also highlighted that these young women were encouraged to advocate for themselves if they were being pressured to engage in sexual behaviors in which they did not want to engage. This is in contrary to literature discussing young women being socialized to be acquiescent to their partner’s sexual desires (Fine 1998; Schick, Zucker, & Bay-Cheng, 2008). However, research has found that African American young women who spoke more often with parents about sexual issues were almost twice as likely to refuse unwanted sex than those who spoke with their parents less frequently about these issues

(Sionean et. al, 2002). The present results reflect that these adolescents were indeed encouraged to refuse unwanted sex by their parent. These results highlight the important role of the family in the development of the sexual self-concept of African American female adolescents.

African American Cultural Images

When examining the popular culture images of African American female sexuality these participants reported being exposed to, the images reflected many of the cultural archetypes discussed by hooks over 30 years ago (Hill Collins, 2000; hooks, 1981). These images put forth the message that young African American women were inherently sexual, and were promiscuous. These conceptualizations are reflective of the classic Jezebel and the more modern “Freak” archetypes of African American female sexuality (Hill Collins, 2000; hooks, 1981; Stephens & Phillips, 2003). Participants also spoke of the explicit objectification of their bodies and body parts. These adolescents received messages that standards of attractiveness were based on the degree to which their clothing was revealing and the size of their sexualized body parts, particularly their buttocks. Young African American women were considered attractive and sexually desirable if their clothing was revealing and their buttocks were large. The importance of the size of their buttocks was not only perpetuated by African American popular culture, but they received the message from their male peers that this was an important aspect of what they wanted in a girlfriend. Although a large buttocks is not a new standard of attractiveness in the African American community (Stephens & Few, 2007; Jackson & McGill, 1996), it has taken over a

new level of importance as a growing number of African American female celebrities, such as Nicki Minaj and Serena Williams, are celebrated within the African American community explicitly for their large buttocks (Shultz, 2005; White, 2013). While celebrated within African American culture, outside of the culture, this same body shape has been used to de-feminize and de-humanize African American women due to its sheer contrast to the idealized White female body (Harris-Perry, 2011).

Although sex in exchange for money and material goods was a personally unacceptable behavior for participants, they reported being confronted with messages from music and peers that they should have a “sponsor,” that they should be receiving material compensation from an individual they are having sex with. The idea that African American women should use their sexuality to manipulate men for money is reflective and consistent with the modern “gold digger” archetype of female sexuality (Stephens & Phillips, 2003). Gold diggers view their only commodity as sex, and are willing to do anything and everything for material gain (Stephens & Phillips, 2003).

Gender Beliefs/Ideology

In the factors examined by this study, gendered beliefs and sexual behaviors intersected paths regarding multiple partners. Specifically some participants expressed the idea that adolescent females with multiple partners were morally bankrupt – while not attributing the same character defects to adolescent males with multiple partners. Related to this, other participants

explicitly discussed the gender bias inherent in the fact that teenage girls suffer a loss of reputation by having multiple partners, while teenage boys do not. This named and unnamed gender bias regarding female sexuality is consistent with literature referenced in a previous section of this discussion concerning the sexual double standard (Fasula, Miller, and Wiener, 2007; Lyons, Giordano, Manning, Longmore, 2011; Tietelman, Tenille, Bohinski, Jermmott and Jermmott, 2013). As discussed in the sexual double standard literature, young women are admonished for overt displays of sexuality, especially sexual behavior with more than one partner. The outcome of this admonishment is often loss of reputation by being labeled as “hos,” “sluts”, etc. Adolescent females given this label are seen as individuals to be used for sex, but not deserving of respect. The intimation is that they are morally deficient objects to be used for sex. This is consistent with the findings of the present study.

Desire

Unlike what was predicted by the literature, participants expressed an awareness of the connection between sex and personal pleasure. These adolescent young women expressed that their own pleasure was a reason for, and an outcome of sex. They did not view sex as something primarily for their male partner that they were not supposed to receive pleasure from (Fine, 1988; Tolman, 2000). This may be a by-product of the fact that there are many young African American women prominent in popular culture (some participants mentioned Ciara, and Nicki Minaj) who are perpetuating images and messages about women’s sexuality. While these images and messages may not always be good/healthy,

they represent African American young women who seem to understand that they have permission to be sexual. It is plausible that adolescent African American females see these images and understand that they too have permission to be sexual. Another surprising finding connected desire and sex for pleasure was partner type. Participants were able to not only discuss pleasure as a reason for sex generally, they were able to distinguish pleasure as a singular motivator for sex based on whether or not someone was a main partner. Specifically participants discussed one of the only reasons an adolescent African American female would have sex with someone other than their main partner was for pleasure. This is a new finding not currently discussed in the literature.

Participants also described behaviors that exhibited sexual agency. They were able to communicate that in a romantic relationship, they had expectations that sex would be pleasurable for them, they also were not afraid to communicate with their partners and advocate for their own sexual needs. A number of these young women discussed having conversations with their male partners about what pleased them, and what did not pleasure them. Similar to above, this is contrary to the literature discussing adolescent females as objects rather than subjects of their sexuality. According to feminist scholars, the ability of adolescent females to recognize and name their own pleasure and sexual desire is a necessary prerequisite to sexual agency. Adolescents in this study were able to do both, which may account for the display of sexual agency exhibited. These adolescents are exposed to multiple forms of modern women's sexuality, from popular culture music stars mentioned above, to characters in urban fiction books. Perhaps the hip

hop artists participants mentioned extensively in the cultural images section serve two purposes – while perpetuating what participants felt were negative stereotypes, they may also embolden young women to feel more sexually empowered.

Implications

This section will present the results as a whole and how they can be utilized in education, clinical, and community settings to promote the healthy sexual identity development of female African American adolescents.

Taken as a whole, these results suggest that African American female adolescents are conflicted about being sexual at their age, but once they are sexual under conditions that are deemed as acceptable, they are comfortable advocating for their needs, their pleasures, and their likes and dislikes. Participants views regarding what were acceptable and unacceptable behaviors seemed to stem from personal preferences and protective messages provided by their families. Results suggest that larger social influences on their developing sexual self-concept stem from gender norms regarding sexuality and popular culture images of African American female sexuality. As these young women are trying to navigate their sexuality, what can be done to mitigate the effects of negative and conflicting messages that can make developing a healthy sexual self-concept challenging? For example, how can we help an already sexually active African American adolescent female navigate the message that sex as a teenager is negative, dangerous and risky? Or conflicting societal messages that equate her essence as

an African American young women with unrestricted sexuality and promiscuity, while simultaneously being made to understand that having multiple partners makes her morally bankrupt? And how can we reinforce protective messages from family that promote sexual assertiveness?

Many articles have been written discussing the problematic way in which sexual education is taught to adolescents in the United States (Lamb, 2013; Percival and Sharpe, 2012; Stranger-Hall & Hall, 2011; Walcott, Chenneville, & Tarquini 2011). Even when the sex education it is not an abstinence based curriculum, the dangers and potential negative outcomes of sexual activity are emphasized. This was apparent in our participant's views on having sex as a teenager. Young women in this study are clearly receiving the message that engaging in sexual activity as a teenager is a risky endeavor that can potentially lead to negative outcomes such as disease acquisition and teenage pregnancy. However, it is clear that these adolescents are not being purposively educated regarding potentially positive outcomes of sexual activity. The adolescent females in this study are aware of the physical pleasure that sexual activity can bring, but beyond that, positive aspects of sexuality development are absent. For African American female adolescents to develop a healthy attitude toward sexuality that is carried into adulthood positive sexuality must be incorporated into their education. Positive sexuality includes emphasizing sexuality as a natural and healthy aspect of human development, providing education on relationships, providing accurate and straightforward information on biology and health, and promoting and teaching effective communication skills. Within positive sexuality,

safer sex is also emphasized, but in the context of exploring one's sexuality while remaining as healthy as possible. The emphasis is on normalcy, pleasure and health as opposed to danger and fear.

This study also has implications for professionals who work with adolescent African American females in clinical or community settings who are interested in sexual risk reduction, or simply the healthy sexual development of African American female adolescents. As these young women are receiving multiple negative messages about their sexuality and how their bodies should look and be displayed from popular culture, specifically hip-hop culture, a critical consciousness approach should be incorporated into any intervention, whether individual or group level. This approach would entail having adolescents critically examine the popular images that are being fed to them, in the context of power, history, sexism and racism and how those images currently influence their thoughts, feelings, and behaviors.

If possible interventions should also seek to understand what adolescents have learned from their family that influence their sexual identity development process. This can be done through reflection and discussion, or through including family members in the intervention process. Although at this stage of identity development, adolescents are typically differentiating from their parents/family, when it comes to sexual values, the messages that participants received from their family seemed to be internalized by participants, and protective.

Lastly, individual and group level interventions should incorporate components that aid adolescents in the process of developing their own value

system when it comes to sexuality. African American adolescent females should be guided to evaluate everything that they have learned from sexual education, socially reflective critical thinking, family, and personal experiences to come to their own awareness and acceptance regarding who they are as a sexual person.

Strengths and Limitations

There are important strengths and limitations of this study that will now be discussed. First, the strengths will be highlighted. An important strength of this study is that it examined multiple factors that may have an impact on the developing sexuality of African American female adolescents. The development of a healthy sexual self does not occur in a vacuum, and this study attempted to account for how the intersection of gender, culture, religion and attitudes about sexuality impact the sexual development of these adolescents. Another strength of this study was its qualitative design. Utilizing qualitative data allowed for a fuller description of these young women's ideas and experiences. Youth were able to explain their ideas and understanding of concepts in their own words. It also allowed for spontaneous outcomes to arise which may not have emerged if the study was strictly quantitative. For example, participant reasoning around disliking oral and anal sex may not have emerged if this study was quantitative in nature. A third major strength of the study was the age group analyzed. This study examined 15-17 year olds exclusively, a relatively young adolescent sample capturing the time period within which dyadic expressions of sexuality are beginning to be explored. This is also the age period which coincides with adolescents developing an autonomous sense of self in multiple areas, including

their sexual self. Addressing desire is a strength of this study. Examining how desire, pleasure and sexual agency manifests itself in the sexual lives of these adolescents helps us to gain an understanding of their experience of sex beyond sexual risk characteristics. Lastly this study incorporated young women from large city, low SES neighborhoods in both the Midwest and the West Coast. This is a strength as it lends credence to the idea that the experiences reported by participants are not geographically unique.

Although there are multiple strengths to this study, there are also limitations that must be considered. The biggest limitation being that the data was not collected with the author's primary research questions in mind. This prevented the in-depth analysis of narratives on specific aspects of sexuality as originally conceptualized. Also, direct questions regarding the impact of gender, race, religion, and attitudes on their developing sense of sexuality were not able to be asked. Another limitation that must be acknowledged is the relatively small sample size. Twenty qualitative interviews were analyzed. More interviews may have garnered more themes, or produced a more in-depth understanding of the themes presently uncovered. Only speaking to participants at one time point is a limitation. Some participants were 15, some were 16, and some were 17. Being able to speak to participants at multiple time points would allow for analysis of how their understanding of their sexuality may change over time. Regarding data verification, because of the length of time between data collection and data analysis, a modified version of member checking was conducted with demographically matched participants, instead of the original participants.

Member checking with the original participants may have resulted in a more nuanced analysis of the author's interpretation of results. Lastly, participants were recruited from two large cities, one in the Midwest and one on the West Coast. The experience of adolescents from small cities, rural areas, or different parts of the country may be different than the experiences from adolescents in the present sample.

Directions for Future Research

This exploratory study was an initial attempt to understand factors which may contribute to adolescent African American female's understanding of their sexuality. Specifically examined among participants were gender, cultural, and religious influences, positive and negative conceptualizations of sex, and the presence or absence of named sexual desire. Results revealed that these sexually active adolescents were largely ambivalent about sex as a teenager, did not condone behaviors such as transactional sex, infidelity, and teenage pregnancy, and felt averse to oral and anal sex at their age. Within their sexual relationships they acknowledged sexual desire, felt comfortable advocating for their sexual needs, and were taught that sexual activity should only occur if they are comfortable. These adolescents attributed negative character traits to

In order to expand on these results, of interest to future research would be to examine the narratives of African American adolescent females from multiple cities across the country to understand the experiences of rural vs. urban adolescents. Adolescents who live in more rural and less urban environments may have less access to resources, and less access to education around sexuality.

Additionally, religion did not emerge as a factor in these adolescents' conceptualizations of their sexuality. A more diverse sample may capture religious factors that were not observed in this sample. The sample of adolescents used in this study were homogeneous regarding SES, all coming from low SES communities. Diversity in SES may result in different outcomes. Research suggests that for African American adolescents, the higher SES status of the family, the more likely they are to identify with traditional European American standards of beauty. This may also translate to sexual practices. It could be that with diverse SES the influence of African American specific cultural images on sexuality becomes different than what was found here. The acceptability or unacceptability of sexual practices may also be different. Future research should also try to follow participants before and after sexual debut, to see if viewpoints and influences on sexual identity change over time, and the mechanism of that change. Lastly, future research studies should attempt to conduct an investigation such as this with primary, rather than secondary data. This will allow the researcher to directly ask questions related to factors impacting sexual self-concept and direct participants to share narratives which would allow for an even richer source of data.

References

- American Psychological Association Task Force on the Sexualization of Girls. (2010). Report of the APA Task Force on the Sexualization of Girls. Retrieved from <http://www.apa.org/pi/women/programs/girls/report-full.pdf>
- Andersen, B. L., & Cyranowski, J. M. (1994). Women's Sexual Self Schema. *Journal of Personality and Social Psychology, 67*(6), 1079-1100.
- Archer, S. L. & Grey, J. A. (2009). The sexual domain of identity: Sexual statuses of identity in relation to psychosocial sexual health. *Identity: An International Journal of Theory and Research, 9*(1), 33-62.
- Bronfenbrenner, U., & Morris, P. A. (2006). The bioecological model of human development. In W. Damon & R. M. Lerner (Eds.), *Handbook of child psychology, Vol. 1: Theoretical models of human development*. New York: John Wiley.
- Bay-Cheng, L. Y. (2003). The trouble of teen sex: The construction of adolescent sexuality through school-based sexuality education. *Sex Education, 3*(1), 61-74
- Bedard, C., Zhang, H. L., & Zucker, K. J. (2010). Gender identity and sexual orientation in people with developmental disabilities. *Sexuality and Disability, 28*(3), 165-175.
- Biro, F. M. & Dorn, L. D. (2006). Puberty and adolescent sexuality. *Psychiatric Annals, 36*(10), 685-690.

- Capaldi, D. M., Stoolmiller, M., Clark, S. & Owen, L. D. (2002). Heterosexual risk behaviors in at-risk young men from early adolescence to young adulthood: Prevalence, prediction, and association with STD contraction. *Developmental Psychology, 38*(30), 394-406.
- Cooksey, E. C., Rindfuss, R. R., & Guilkey, D. K. (1996). The initiation of adolescent sexual and contraceptive behavior during changing times. *Journal of Health and Social Behavior, 37* (1), 59-74.
- Coyne-Beasley, T. & Schoenbach, V. J. (2000). The African American church: A potential forum for adolescent comprehensive sexuality education. *Journal of Adolescent Health, 26* (4), 289-294.
- Creswell, J. W. (1998). *Qualitative inquiry and research design: Choosing among five traditions*. Thousand Oaks, CA: Sage Publications.
- Creswell, J. W., Hanson, W. E., Clark, V. L. & Plano, M. A. (2007). Qualitative research design: Selection and implementation. *The Counseling Psychologist, 35*(2), 236-264.
- Dailey, D. M. (1997). The failure of sexuality education: Meeting the challenge of behavioral change in a sex-positive context. *Journal of Psychology & Human Sexuality, 9*(3-4), 87-97.
- DeLamater, J. (1987). Gender differences in sexual scenerios. In K. Kelley (Ed.), *Females, males, and sexuality: Theories and research* (pp. 127-139). Albany, NY: SUNY Press.
- DeLamater, J. & Friedrich, W. N. (2002). Human sexual development. *Journal of*

Sex Research, 39(1), 10-14

- Devos, T., Gavin, K., & Quintana, F. J. (2010). Say “adios” to the American dream? The interplay between ethnic and national identity among Latino and Caucasian Americans. *Cultural Diversity and Ethnic Minority Psychology*, 16(1), 37-49.
- Dolcini, M. M., Harper, G. W., Boyer, C. B., & Watson, S. E. (2002). *Developing culturally relevant HIV interventions: A clique-based program for urban African American youth*. Paper presented at the 5th Annual Conference on AIDS Research in California, Sacramento, CA.
- Dolcini, M. M., Harper, G. W., & Coe, M. (2007). *Urban African American adolescent heterosexual males talk about masculinity and sexuality: Implications for tailored HIV/STI programs*. Roundtable presentation at the annual meeting of the American Public Health Association, Washington, DC.
- Erickson, E. H. (1968). *Identity: Youth and Crisis*. New York: W.W. Norton & Company.
- Fine, M. (1988). Sexuality, Schooling, and Adolescent Females: The Missing Discourse of Desire. *Harvard Educational Review*, 58(1), 29-53.
- Fine, M., & McClelland, S. I. (2006). Sexuality Education and Desire: Still Missing After All These Years. *Harvard Educational Review*, 76(3), 297-338.

- Fisher, W. A., White, L. A., Byrne, D., & Kelley, K. (1988). Erotophobia-Erotophilia as a Dimension of Personality. *The Journal of Sex Research*, 25(1), 123-151.
- Frederickson, B., & Roberts, T. A. (1997). Objectification theory: Toward understanding women's lived experiences and mental health risks. *Psychology of Women Quarterly*, 21, 173-206.
- Gold, M. A., Sheftel, A. V., Chiappetta, L., Young, A. J., Zuckoff, A., DiClemente, C. C., & Primack, B. A. (2010). Associations between Religiosity and Sexual and Contraceptive Behaviors. *Journal of Adolescent Gynecology*, 23, 290-297.
- Gordon, M. K. (2008). Media contributions to African American girls' focus on beauty and appearance: Exploring the consequences of sexual objectification. *Psychology of Women Quarterly*, 32, 245-256
- Greenberg, J. S., Bruess, C. E., & Conklin, S. C. (2011). *Exploring the Dimensions of Human Sexuality*. Sudbury: Jones and Bartlett.
- Halpern, C. T. (2010). Reframing Research on Adolescent Sexuality: Healthy Sexual Development as Part of the Life Course. *Perspectives on Sexual and Reproductive Health*, 42(1), 6-7. doi: 10.1363/420610
- Harper, G. W., Gannon, C., Watson, S. E., Catania, J. A., Dolcini, M. M. (2004). The role of close friends in African American adolescents' dating and sexual behavior. *Journal of Sex Research*, 41(4), 351-362.
- Hill Collins, P. (2000). *Black Feminist Thought: Knowledge, Consciousness and the Politics of Empowerment* New York: Routledge.

- Hill Collins, P. (2004). *Black sexual politics: African Americans, gender, and the new racism*. NY: Routledge.
- hooks, b. (1992). *Black looks: Race and representation*. Boston: South End Press.
- hooks, b. (1981). *Ain't I a Woman: Black Women and Feminism* Boston: South End Press.
- Hyde, J. S. (1991). *Half the Human Experience*. Lexington: D.C. Health & Company.
- Impett, E. A., & Tolman, D. L. (2006). Late adolescent girls' sexual experiences and sexual satisfaction. *Journal of Adolescent Research, 21*, 628-646.
- Jamil, O. B., Harper, G. W., & Fernandez, M. I. (2009). Sexual and identity development among gay-bisexual-questioning (GBQ) male ethnic minority adolescents. *Cultural Diversity and Ethnic Minority Psychology, 15*(3), 203-214.
- Kaestle, C. E., Halpern, C. T., Miller, W., & Ford C. (2005). Young age at first sexual intercourse and sexually transmitted infections in adolescents and young adults. *American Journal of Epidemiology, 161*, 774-780.
- Katz, J., & Tirone, V. (2009). Women's Sexual Compliance with Male Dating Partners: Associations with Investment in Ideal Womanhood and Romantic Well-Being. *Sex Roles, 60*(5-6), 347-356. doi: 10.1007/s11199-008-9566-4
- Landor, A., Simons, L. G., Simons, R. L., Brody, G. H., & Gibbons, F. X. (2011).

The role of religiosity in the relationship between parents, peers, and adolescent risky sexual behavior. *Journal of Youth and Adolescence*, 40(3), 296-309.

Lincoln, YS. & Guba, EG. (1985). *Naturalistic Inquiry*. Newbury Park, CA: Sage Publications

Manlove, J. S., Terry-Humen, E., Ikramullah, E. N., & Moore, K. A. (2006). The role of parent religiosity in teens' transitions to sex and contraception. *Journal of Adolescent Health*, 39(4), 578-587.

Manlove, J., Logan, C., Moore, K. A., & Ikramullah, E. (2008). Pathways from family religiosity to adolescent sexual activity and contraceptive use. *Perspectives on Sexual and Reproductive Health*, 40(2), 105-117.

Mattis, J. S. & Jagers, R. J. (2001). A relational framework for the study of religiosity and spirituality in the lives of African Americans. *Journal of Community Psychology*, 29(5), 519-539.

McCree, D. H., Wingwood, G. M., DiClemente, R., Davies, S., & Harrington, K. F. (2003). Religiosity and Risky Sexual Behavior in African American Adolescent Females. *Journal of Adolescent Health*, 33, 2-8.

Miles, M. B. & Huberman, A. M. (1994). *Qualitative data analysis: An expanded sourcebook (2nd ed)*. Thousand Oaks, CA: Sage Publications.

Mitchell, K., & Wellings, K. (2002). The role of ambiguity in sexual encounters between young people in England. *Culture Health and Sexuality*, 4(4), 393-408

- Moore, S., & Rosenthal, D. (2006). *Sexuality in Adolescence: Current Trends*. New York: Routledge.
- Morokoff, P. J. (2000). A cultural context for sexual assertiveness in women. In C. B. Travis & J. W. White (Eds.), *Sexuality, society, and feminism* (pp. 299-319). Washington DC: American Psychological Association.
- Moustakes, C. (1994). *Phenomenological research methods*. Thousand Oaks, CA: Sage.
- Moynihan, D. P. (1965). *The Negro Family: The Case For National Action*. Washington D.C.
- Muhlenhard, C.L. & Peterson, Z.D. (2005). Wanting and not wanting sex: Themissing discourse of ambivalence. *Feminism and Psychology, 15*, 15-20
- Niccolai, L. M., Ethier, K. A., Kershaw, T. S., Lewis, J. B., Meade, C. S., & Ickovics, J. R. (2004). New Sex Partner Acquisition and Sexually Transmitted Disease Risk Among Adolescent Females. *Journal of Adolescent Health 34*, 216-223.
- Nonnemaker, J. M., McNeely, C. A., & Blum, R. W. (2003). Public and private domains of religiosity and adolescent health risk behaviors: Evidence from the National Longitudinal Study of Adolescent Health. *Social Science & Medicine, 57*(11), 2049-2054.
- Nurmi, J-E. (2004). Socialization and self-development: Channeling, selection, adjustment, and reflection. In R. M. Lerner & L. Steinberg (Eds.), *Handbook of adolescent psychology* (pp. 85-124). NY: John Wiley.

- O'Sullivan, L.F. , & Gaines, M.E. (1988). Decision-making in college students' heterosexual dating relationships: Ambivalence about engaging in sexual activity. *Journal of Social and Personal Relationships, 15*, 347-363
- O'Sullivan, L. F., Meyer-Bahlburg, H. F. L., & McKeague, I. W. (2006). The Development of the Sexual Self Concept Inventory for Early Adolescent Girls. *Psychology of Women Quarterly 30*(2), 139-149.
- Ozer, E. J., Dolcini, M. M., & Harper, G. W. (2003). Adolescents' reasons for having sex: Gender differences. *Journal of Adolescent Health, 33*, 317-319.
- Peterson, J. L. & Hyde, J. S. (2010). A meta-analytic review of research on gender differences in sexuality, 1993-2007. *Psychological Bulletin, 136*(1), 21-38.
- Phinney, J. S. & Rosenthal, D. A. (1992). Ethnic identity in adolescence: Process, context, and outcome. In G. R. Adams & T. P. Gullotta (Eds.), *Adolescent identity formation* (pp. 145-172). Thousand Oaks, CA: Sage Publications.
- Roccas, S. & Brewer, M. (2002). Social identity complexity. *Personality and Social Psychology, 6*(2), 88-106.
- Rostosky, S. S., Regnerus, M. D., & Wright, M. L. (2003). Coital debut: The role of religiosity and sex attitudes in the Add Health Survey. *Journal of Sex Research, 40*(4), 358-367.

- Satcher, D. (2001). *The Surgeon General's Call to Action to Promote Sexual Health and Responsible Sexual Behavior* Washington, D.C.: U.S. Department of Health and Human Services.
- Savin-Williams, R. C., & Diamond, L. M. (2004). Sex. In R. M. Lerner & L. Steinberg (Eds.), *Handbook of Adolescent Psychology* (2nd Edition ed., pp. 189-231). Hoboken: John Wiley & Sons, Inc.
- Schalet, A. T. (2009). Subjectivity, intimacy and the empowerment paradigm of adolescent sexuality: The unexplored room. *Feminist Studies*, 35(1), 133-160.
- Schalet, A. T. (2011). Beyond abstinence and risk: A new paradigm for adolescent sexual health. *Women's Health Issues*, 21(3), S5-S7.
- Schenkel, S. & Marcia, J. E. (1972). Attitudes toward premarital intercourse in determining ego identity status in college women. *Journal of Personality*, 40(3), 472-482.
- Schick, V. R., Zucker, A. N., & Bay-Cheng, L. Y. (2008). Safer, Better Sex Through Feminism: The Role of Feminist Ideology in Women's Sexual Well-Being. *Psychology of Women Quarterly*, 32(3), 225-232.
- Snell, W. E. & Papini, D. R. (1989). The sexuality scale: An instrument to measure sexual-esteem, sexual-depression, and sexual-preoccupation. *Journal of Sex Research*, 26(2), 256-263.
- Steinman, K. J. & Zimmerman, M. A. (2004). Religious activity and risk behavior among African American adolescents: Concurrent and developmental effects. *American Journal of Community Psychology*, 33(3-4), 151-161.

- Stephens, D. P., & Phillips, L. D. (2003). Freaks, Gold Diggers, Divas and Dykes: The Sociohistorical Development of Adolescent African American Women's Sexual Scripts. *Sexuality & Culture*, 7(1), 3-49.
- Studer, M. & Thornton, A. (1987). Adolescent religiosity and contraception usage. *Journal of Marriage and Family*, 49(1), 117-128.
- Taylor, R. J., Ellison, C. G., Chatters, L. M., Levin, J. S., & Lincoln, K. D. (2000). Mental health services in faith communities: The role of clergy in the Black church. *Social Work*, 45(1), 73-87.
- Teitelman, A.M. (2004). Adolescent girls' perspectives of family interactions related to menarche and sexual health. *Qualitative Health Research*. 14(9), 1292-1308.
- Tolman, D. L. (2000). Object lessons: Romance, violation, and female adolescent sexual desire. *Journal of Sex Education and Therapy*, 25(1), 70-79.
- Tolman, D. L. (1996). Adolescent Girls' Sexuality: Debunking the Myth of The Urban Girl. In B. J. Ross & N. Way (Eds.), *Urban Girls: Resisting Stereotypes, Creating Identities*. New York: New York University Press.
- Tolman, D. L. (2001). Female Adolescent Sexuality: An Argument for a Developmental Perspective on the New View of Women's Sexual Problems. *Women & Therapy*, 24(1-2), 195-209.
- Tolman, D. L., & McClelland, S. I. (2011). Normative Sexuality Development in Adolescence: A Decade in Review, 2000-2009. *Journal of Research on Adolescence*, 21(1), 242-255. doi: 10.1111/j.1532-7795.2010.00726.x

- Townsend, T. G., Thomas, A. J., Neilands, T. B., & Jackson, T. R. (2010). I'm No Jezebel; I am Young, Gifted, and Black: Identity, Sexuality, and Black Girls. *Psychology of Women Quarterly*, *34*, 273-385.
- Usher, J. M. (1989). *The psychology of the female body*. New York: Routledge.
- Vickberg, S. M. J., & Deaux, K. (2005). Measuring the Dimensions of Women's Sexuality: The Women's Sexual Self-Concept Scale. *Sex Roles*, *53*(5-6), 361-369.
- Ward, E. G. (2005). Homophobia, hypermasculinity and the U.S. Black church. *Culture, Health & Sexuality*, *7*(5), 493-504
- Weaver, H., Smith, G., & Kippax, S. (2005). School-based sex education policies and indicators of sexual health among young people: A comparison of the Netherlands, France, Australia, and the United States. *Sex Education*, *5*(2), 171-188.
- Welles, C. (2005). Breaking the Silence Surrounding Female Adolescent Sexual Desire. *Women & Therapy*, *28*(2), 31-45. doi: 10.1300/J015v28n02_03

Appendix A

Interviewer instructions

- **[Interviewer:** See Screening interview for age and sexual experience; Confirm this information]

Screener Check List:

Age (yrs.) _____

Sexual Experience: Yes No

- **[Interviewer:** Whenever R uses terms that you don't understand, or that you think the reader won't understand, Inquire as to what the word(s) mean.
- **[Interviewer:** Get to know the person a bit before launching into the interview questions. Have them tell you about themselves.]
- **[Interviewer:** Throughout the interview, and as appropriate, ask R for stories or other examples of things R talks about.]
- **[Interviewer:** Try to use R's terms for phenomena, but make sure you know what the terms mean!]

Section A. Introduction

First, I would like to tell you about the interview we'll be doing today. The interview will help us learn from you what it's like to be a young woman in today's world.

Think of yourself as a teacher. These are your opinions; there are no right or wrong answers. I will respect your views. Some questions are on sensitive topics, so tell me if there is something that you'd rather not talk about. Everything you say will be kept completely confidential.

[Interviewer: If R asks what confidential means you may supplement with the following material. What I mean by confidential is that we will not use your name on the recording or connect your name with anything you say in the interview. After we have typed out what you said in the interview we will destroy the recording.]

The interview should take a couple of hours. We'll take a break about half way through, but if you need a break sooner, let me know.

Before we get started do you have any questions?**To get started, I'd like to know a little about you.**

A1. How would you describe yourself?

[**Probe as needed:** Do you prefer the term African American or Black or doesn't it matter to you?]

[**Interviewer:** Ok, I'll use [Preferred Term] as we talk today.]

[**Interviewer:** Skip questions below as necessary if the answer is covered in A1 Response]

A2. Who do you live with?

[short answer]

A3. How old are you? _____(Yrs.)

A4. Where are you currently living? Which neighborhood?

[short answer]

A5. What is it like living in your neighborhood?

[**Interviewer:** If R has just moved, it is ok to get information about the prior neighborhood in this question.]

[short answer]

A6. Are you in school?

A6a. [If yes, ask:] Where do you go to school?

A6b. [If yes, ask:] Do you do activities like sports, drama, music, or leadership at school?

[short answer]

A6c. [If yes, ask:] What are your favorite subjects?

[short answer]

A7. Do you have a job? [yes, no]

A7a. [If yes, ask:] Where do you work?

A8. If you could live anywhere you wanted in the United States, where would you like to live? [short answer]

A9. Is there someone you look up to, that you really admire and want to be like? [yes, no; short answer]

A9a. [If yes, ask:] Tell me about him/her/them.
[short answer]

Section B.

These next questions are about the kinds of things you like to do.

B1. Which of the following do you like to do [**Read Each**] ...

B1a. Watch TV? [yes, no]

B1a1. [If yes, ask:] What programs do you watch?
[short answer]

B1b. Listen to music? [yes, no]

B1b1. [If yes, ask:] What kinds of music do you like
to listen to?
[short answer]

B1b2. Who are your favorite artists?
[short answer]

B1c. Go out to movies or rent movies to watch at home? [yes, no]

B1c1. [If yes, ask:] What kinds of movies do you like to watch?
[short answer]

B1d. Read magazines? [yes, no]

B1d1. [If yes, ask:] What kinds of magazines do you like to read?
[short answer]

B1d2. What are your favorite magazines?
[short answer]

B1e. Read books? [yes, no]

B1e1. [If yes, ask:] What kinds of books do you like to read?
[short answer]

B1e2. What are your favorite books?
[short answer]

B1f. Spend time on the internet? [yes, no]

B1f1. [If yes, ask:] What kinds of things do you like to do on the
internet? [short answer]

Probe as needed: Facebook, You Tube, Myspace, what else?

B1g. Hanging out with your friends? [yes, no]

B1g1. [If yes, ask:] What kinds of things do you and your friends like to do?

[short answer]

B1h. Being with your family? [yes, no]

B1h1. [If yes, ask:] What kinds of things do you and your family do together?

[short answer]

B1i. Go to Church-related activities or services? [yes, no]

B1i1. [If yes, ask:] What kinds of things do you do with people you know from church?

[short answer]

Section C

These next questions ask about what you think the messages and images are of (African American/Black) girls your age. People get lots of ideas and messages about how girls your age should act from a lot of different places.

[Interviewer: In items below, C1a to C1h, we often ask about several influences in a single item. Within an item, we do not need to know about specific sources of the ideas or images (e.g., TV vs magazines), but if this information is offered that's ok.]

[Interviewer (If needed): By messages we mean the ideas or themes that you hear or see around you. These messages can come from lots of other people, from books, or from media or from other places. **(If needed):** By images we mean the images of what African Americans should be like. Sometimes we think of images as “pictures” or “snap shots” of what people should be. The images can come from lots of other people, from books, or from media or other places.]

C1. Do you think that ideas and messages about what African American girls your age should be like, come from **[Read Each]**... *(what girls your age should say or do, how they should dress, how they should act, etc.)*

C1a. TV, Radio, Magazines, Books? [yes, no]

C1a1. [If yes, ask:] What kinds of things have you learned from TV, radio, books, or magazines about being a teenage girl?
[short answer]

C1b. The Internet: Facebook, Myspace, YouTube? [yes, no]

C1b1. [If yes, ask:] What kinds of things have you learned from the internet about being a teenage girl?
[short answer]

C1c. Movies, Music? [yes, no]

C1c1. [If yes, ask:] What kinds of things have you learned from movies or music about being a teenage girl?
[short answer]

C1d. Family members? [yes, no]

C1d1. [If yes, ask:] What kinds of things have you learned from family about being a teenage girl?
[short answer]

Probe as needed: Have you learned different things about being a woman from different family members, say from a Mom or from an uncle?

C1e. Sports figures or politicians? [yes, no]

C1e1. [If yes, ask:] What kinds of things have you learned from sports figures or politicians about being a teenage girl?
[short answer]

C1f. Teachers, Ministers, or Pastors? [yes, no]

C1f1. [If yes, ask:] What kinds of things have you learned from teachers or religious leaders about being a teenage girl?
[short answer]

[Interviewer: If No Boyfriend Ever, Skip to C1h]

C1g. Boyfriends? [yes, no]

[Interviewer: Explain that a boyfriend is someone you feel romantic about, are going out with, and may or may not be having sex with.]

C1g1. [If yes, ask:] What kinds of things have you learned from Boyfriends about being a teenage girl?
[short answer]

C1h. Friends? [yes, no]

C1h1. [If yes, ask:] What kinds of things have you learned from friends about being a teenage girl?
[short answer]

C1i. Are there other people or places that you have learned about being a teenage girl from?
[short answer]

Probe as needed: Where else does R think she has gotten her ideas on what girls are like?

[Interviewer: Construct next item, C2, using example sources described by R in C1a to C1i, as things that influence their images of girls]

C2. Thinking about the images of (African American/Black) girls that come from the people, places, or things you just talked about (for example, **insert example**

sources from C1a to C1i), would you say you are different from or similar to these images?

[Interviewer: If images the R has presented are contrasting or contradictory, probe this issue in C2a and C2b.]

[Interviewer: If R is having difficulty answering this question, ask specifically about one source that seems central (e.g., family) to get the R started.]

[Longer Answer]

C2a. In what ways are you different?

[Longer Answer]

C2b. In what ways are you similar?

[Longer Answer]

C3. Do you feel pressure to be different than you want to be? [yes, no]

C3a. [If yes, ask:] Tell me about that?

[Longer Answer]

C4. When an (African American or Black) girl doesn't fit the popular image of what a girl should be like, how do other people treat her?

[short answer]

[Interviewer: If R has difficulty understanding the phrase "popular image." you should paraphrase it, for example, popular image means the images that the media have of what girls your age should be like; alternatively, it means the stereotypes people sometimes have of girls your age]

C4a. Do you know someone like this? [yes, no]

C4a1. [If yes, ask:] Can you tell me a story about that person and how others sometimes treat her?

[short answer]

C4a2. [If no, ask] How do you think someone who doesn't fit the popular image of what an (African American or Black) teenage girl should be like would be treated by other people?

[short answer]

C5. If an African American girl your age is known for having a lot of sex partners, how do other people treat her/what do other people say about her?

C5a. If an African American girl your age is known for being a virgin, how do people treat her/what do people say about her?

C6. If an African American girl your age is known for *always* using condoms, how do other people treat her/what do other people say about her?

C6a. If an African American girl your age is known for *never* using condoms, how do other people treat her/what do other people say about her?

Section D

These next questions are about sex and your views on sex.

D1. Have you had a sex education class, a health class, or other class that talked about sex?

[yes, no]

[Interviewer: If No, Skip to Item D2]

D1a. [If yes, ask:] Some sex education teaches about how to make decisions and protect yourself when you have sex. Have you had a class that did those things? [yes, no]

D1b. [If yes, ask:] Some sex education classes only teach about not having sex (sexual abstinence). Have you had a class that talked only about not having sex and ways to avoid having sex?

[yes, no]

[Interviewer: For next question, start with the root question, asking specific questions as needed. Use the definition work sheet for sexual behaviors as needed, especially for non-sexually experienced youth.]

D2. What do the words “to have sex” mean to you?

D2a. Does it mean to have vaginal sex, oral sex, or anal sex?

D2b. Does it mean all of those things?

D2c. Would you include anything else?

Transition sentence to acknowledge and think about other types of sex.

[Interviewer: Confirm sexual experience if needed: Have you had sex with anyone including vaginal or anal sex, oral sex, or other types of sex? [yes, no]

[Interviewer: If R’s definition is different than ours, say...

Thanks for telling me what sex means to you. Now, we’re going to broaden the definition. In the next few questions we want you to think about the definition I am going to read to you.]

These next questions ask about having sex with another person. By the word sex I mean any of the things people do sexually with a partner. This includes oral sex, when a guy puts his mouth on a girl’s vagina, or a girl puts her mouth on a boy’s penis. It also includes vaginal intercourse, when a guy puts

his penis in a girl's vagina, or anal intercourse when a guy puts his penis in a girl's anus (or butt).

So, a person who is doing any one of these sexual activities with a partner is having sex.

Is that clear or would you like me to explain further?

[Interviewer: Use Additional Explanation as needed: So, if I was to ask you, what age is it ok for girls to start having sex?—this would mean at what age is it ok for a girl to start doing any one of the sexual things I mentioned earlier including oral sex, vaginal sex, or anal sex.]

[Interviewer: use alternative explanations as needed until it is clear that the word sex means any one of the things mentioned previously.]

D3. People have different ideas about whether it is ok to have sex as a teen. Do you think it is ok for teenage girls and guys to have sex [Of any kind]?
[short answer]

D3a. How do you think a guy views that?
[short answer]

D4. What age is it ok for a guy to start having sex [Of any kind]?
[Age or Age Range]

Probe: Why then?
[short answer]

D5. What age is it ok for a girl to start having sex [Of any kind]?
[Age or Age Range]

Probe: Why then?
[short answer]

D6. Do you think it is ok for young people to start having sex [Of any kind] when they are ready, whether they are married or not?
[Yes, No, or short answer]

D7. Is it ok for married people to have sex [Of any kind] with someone other than their wife or husband?
[Yes, No, or short answer]

D7a. How do you think guys view having sex outside a marriage?
[short answer]

Transition Sentence: “That’s all I want to ask about marriage, now I’d like you to think about some other things”

D8. Tell me about a time when you wanted to have sex with a new guy, someone you just met, what did you do to get him interested in you?
[short answer]

Probe: What did you do or say to get him interested?

These next few questions are about condoms.

D9. What do you think about condoms?
[short answer]

Probe each as needed:

- Do you like using them?
- Do they work (E.g., stay on, break, prevent STDs/Pregnancy)?
- Are they easy to buy or get in your neighborhood?

[Probe, Girl Rs only:] Do you like it when guys use them?

D10. What do your male friends think about condoms?
[short answer]

Section E

Our next questions are about boyfriends and about sex. I want to ask you about the words you like to use in talking about boyfriends and girlfriends, and if you want me to use those words in the interview.

E1. First, what words do you use to describe a boyfriend, that is, someone you are going out with, feel romantic about, and may be having sex with?

[Interviewer: R might not be having sex with this person, but the person needs to be someone they feel romantic about.]

Boyfriend: _____

E2. If someone is your boyfriend does it always mean he is having sex with you or can someone be your boyfriend and not be having sex with you?

[short answer]

E3. Are there different kinds of boyfriends? [yes, no]

E3a. [If yes, ask:] What do you call the different kinds of boyfriends?

[short answer]

[Interviewer define sex as needed: As before, by the word sex we mean vaginal, oral, or anal sex.]

E4. How is a boyfriend different from someone you are having sex with who is just a friend (friends with benefits)?

[short answer]

Probe. If you were having sex with someone who is not your boyfriend, what do you call that [that person]?

E5. How is a boyfriend different from someone you might have sex with in exchange for something like money or clothes and stuff?

[short answer]

E6. If someone is your boyfriend does it mean that you should only have sex with that person or are you free to have sex with others?

[Interviewer: If needed, ask a ‘What if question.’ What if [a friend had sex with someone else] even though she had a boyfriend. What would you think of that?]

[short answer]

Other Sexual Relationships:

These next questions ask about your views on and experiences with boyfriends and having sex.

E7. What would your ideal boyfriend be like, that is someone you are in love with and may be having sex with?

[Long Answer]

Probe each as needed:

- How old would your ideal person be?
- What would he look like?
- What kind of person would he be like (e.g., respectful, reliable, honest, loyal, exciting, dangerous, have your back)?
- Would he have a job?
- Would it be important for him to be religious or go to church?
- Would it be important for him to be going to school or want that?

E8. How important is it for teenagers to have a boyfriend or a girlfriend?

[short answer]

E9. What do you think it means to a guy to have a girlfriend?

[Long answer]

Probe as needed: Do guys see this the same way you do or different?

[short answer]

Probe: How so?

[Long answer]

E10. Do you have a boyfriend? That is someone you are going-with, that you might feel romantic about? [yes, no]

[Interviewer: If Yes to E10, skip to E10f]

E10a. [If no, ask:] Have you had a boyfriend in the past couple of years?

[yes, no]

[Interviewer: If No to E10a, and E10: No Boyfriend Ever, Skip to E15.1a]

[Interviewer: These next questions, E10b to E10e, are about Rs most recent ex-boyfriend.]

E10b. Thinking about your most recent ex-boyfriend, what kinds of things did you and he [your ex-boyfriend] like to do? [short answer]

E10c. Were you and your ex-boyfriend having sex? [yes, no]

E10d. Did you have sex with anyone else while you were going with your ex-boyfriend?

[yes, no]

E10e. Did your ex-boyfriend have sex with anyone besides you while you were going together? [yes, no]

[If No to E10 and Yes to E10a: R has a past, but no current Boyfriend, skip to instructions before E11]

[Has Boyfriend, ask E10f]

E10f. What kinds of things do you and your boyfriend like to do? [short answer]

E10g. Are you having sex with your boyfriend? [yes, no]

E10h. Do you have sex with anyone else besides your boyfriend? [short answer]

E10i. Does your boyfriend have sex with anyone besides you? [short answer]

[Has/Had Boyfriend, read instruction below]

Relationships can be respectful or disrespectful. These next questions ask about respect and disrespect in relationships.

E11. What does it mean to you to show your boyfriend respect?

[Long Answer]

Probe Each and get examples:

How does a girl show that she respects her boyfriend?

What might a girl do to show she disrespects her boyfriend?

E12. What are some of the things a boyfriend might do to show you disrespect?
[long answer]

E13. How would a boyfriend act towards you if he were being respectful of you?
[long answer]

These next questions are about getting advice on boyfriends.

[Interviewer: If R does not understand the term advice, try an alternative term or rephrase as, “ideas have you gotten about...”]

[Interviewer: The term sex in the Probes for E14 and E15 is more generic, it could be advice on anything (e.g., birth control, STDs) about sex and boyfriends, not necessarily on how to have sex]

E14. Have you gotten advice about boyfriends from somewhere, like magazines, books, or the Internet?
[short answer]

Probe as needed. Have you gotten advice on boyfriends and sex?

E14a. What kind of advice have you gotten?
[Long Answer]

E15. Have you asked another person for advice on boyfriends? [yes, no]

E15a. Who did you get advice from?
[Short answer]

E15b. What kind of advice did they give you?
[Long Answer]

Probe as needed. Has the advice included advice on boyfriends and sex?

[If R has had a boyfriend in the past/currently, Skip to Instructions Before E16]

[Interviewer: If No Boyfriend Ever, ask E15.1a]

E15.1a. Earlier you mentioned that you haven’t had a boyfriend yet. However, have you ever talked to anyone, or saw or read things that have told you about what it might be like to have a boyfriend? [short answer]

Probe Response for each:

- What age it is ok to have a boyfriend?
- How to get a boyfriend?

Probe R for all the possible sources that she may have learned things about boyfriends from: magazines, books, the Internet, or a person.

These next questions are about boyfriends and sex.

[Interviewer: In this section by sex we mean having oral, vaginal, anal sex]

[Interviewer: For those who have never had a boyfriend, ask R to imagine that she has a boyfriend she is having sex with.]

E16. If you have/had a boyfriend, would you expect him to have sex only with you?
[yes, no]

E16a. [If yes, ask:] Why do you think that is important to you?
[short answer]

E17. What do you think about guys who have lots of sex partners besides their girlfriend? [short answer]

Probe: Why do you think you feel this way?
[short answer]

Probe: Do you think other girls feel pretty much like you do or different? [short answer]

E17a. What does it mean to you for a teenager to have “a lot of sexual partners;” That is, in your opinion about how many sexual partners might that be? [Short answer]

[Interviewer: look for a number or a range of numbers; Clarify as needed that we are talking about teenage years.]

E18. What do you think about girls who have lots of sex partners besides their boyfriend? [short answer]

Probe: Why do you think you feel this way?
[short answer]

Probe: Do you think other girls feel pretty much like you do or different? [short answer]

This next question asks you to imagine what your ideal or perfect sex partner might be like?

E19. First, tell me what is your idea of the ideal guy that you would want to have sex with? [Long answer]

[**Interviewer:** This item differs from the item about ideal boyfriends. Here we want to focus on an ideal person to have sex with.]

Probe each:

- How old would you want him to be?
- What would he look like and what kind of person would he be like (e.g., respectful, reliable, honest, loyal, exciting, dangerous, have your back)?
- Would he have a job?
- Would it be important for him to be a religious person or go to church?
- Would it be important for him to be the kind of person who would be or is a good dad?
- Would it be important for him to be going to school or want that?

E20. If you wanted to live with a guy or get married, what would that guy need to be like?

Probe each:

- How old would your ideal person be?
- What would he look like and what kind of person would he be like (e.g., respectful, reliable, honest, loyal, exciting, dangerous, have your back)?
- Would he have a job?
- Would it be important for him to be a religious person or go to church?

- Would it be important for him to be the kind of person who would be or is a good dad?
- Would it be important for him to be going to school or want that?

These last questions ask about how you think guys and girls should show respect to each other. This is not asking about boyfriends but guys in general.

E21. What does it mean to you to show a guy respect? [Long answer]

Probe Each:

- How does a girl show that she respects a guy?
- What might a girl do to show she disrespects a guy?

E22. What are some of the things a guy might do to show you disrespect? [Long answer]

E23. How would a guy act towards you if he was being respectful of you? [Long answer]

Section F

These next questions are about talking to guys about sex. When people talk about sex they sometimes talk about the things they like to do sexually or they might talk about health stuff like birth control, condoms, or STDs.

These first questions ask about how you would feel talking about different kinds of sexual things with a boyfriend. If you don't have a boyfriend, use your imagination to think about what it would be like to talk to a boyfriend about these things.

[**Interviewer.** Emphasize that R does not have to have ever talked to a guy about sex. If they have not, then ask them to imagine what it would feel like to do so.]

[**Interviewer, if needed:** Remind R that boyfriends are someone you are going-out with, feel romantic about, and may be having sex with.]

[**Interviewer:** R is being asked about how they feel about talking about sexual matters, that is, are they comfortable, uncomfortable, embarrassed, find it easy, find it hard to do, etc?; We are not asking about the actual experience until item F7]

F1. How would you feel about talking to a boyfriend about sexual health matters or things you like to do when you have sex?

Probe as needed for specific topics:

- How about talking about birth control?
- How about talking about condoms?
- How about talking about STDs?
- How about talking about the things you might want to do when you have sex?

F2. How would you feel talking about these kinds of sexual things [**see Probes**] with a guy you are having sex with but who is not your boyfriend?
[short answer]

Probe each as needed:

- How about talking about birth control?
- How about talking about condoms?

- How about talking about STDs?
- How about talking about the things you might want to do when you have sex?

F3. How do you think other girls your age feel about talking to a boyfriend about these kinds of sexual things?

[short answer]

[If R has never had a boyfriend, Skip to Interviewer instructions before F5.]

F4. Have you ever talked to a boyfriend about sex? [yes, no]

[Interviewer: If No skip to Instructions before F5]

F4a. [If yes, ask:] What kinds of things have you talked about?

F4b. [If yes, ask] Is there anything you would be uncomfortable talking to a boyfriend about [when it comes to sex]?

These next questions are about someone you're interested in but have only known a short time. In these questions, we will refer to him as a "new guy"

F5. Have you ever talked to a new guy about sexual health things like using condoms, or birth control, or STDs? [yes,no]

F5a. How would you feel talking to a new guy about these different kinds of sexual things [see Probes]?

[short answer]

Probe each as needed:

- How about talking about birth control?
- How about talking about condoms?
- How about talking about STDs?
- How about talking about the things you might want to do when you have sex?

[Interviewer: Record response to F5 as to actual experience with talking to a new guy about condoms, for use in rephrasing G12. That is, if the respondent describes having done these things, then the question you ask in G12 reflects this prior information.]

F6. How do you think other girls your age feel about talking to a new guy, someone they just got to know, about sexual things?
[short answer]

F7. Who do you think is better at it when it comes to talking about sex, guys or girls? [Guys, Girls; short answer]

Probe: Why do you think that is?
[short answer]

These next questions ask about who should make decisions about sex, guys or girls.

F8. Do you think the guy or the girl should make the first move when it comes to having sex for the first time?
[Guys, Girls; short answer]

F9. When it comes to using condoms, who should decide if the guy has to wear a condom, the guy or the girl?
[Guys, Girls; short answer]

F10. If you had a sex partner who wanted to use condoms and you did not, what would you do?
[short answer]

F10a. What if you wanted to use a condom and he did not, what would you do? [short answer]

F11. Has there been a time when you and your sex partner disagreed about using condoms? [yes, no]

F11a. [If yes ask] Tell me what happened?
[long answer]

Probe: Was a decision reached?

Probe: Who made the decision?

F12. When it comes to using birth control, who should take care of these things?
[Guys, Girls, Both; short answer]

F12a. [**If Guy is Responsible, ask:**] Why do you think the guy should take care of these things?
[short answer]

F12b. [**If Girl is Responsible, ask:**] Why do you think the girl should take care of these things?

[short answer]

F12c. [**If Both Responsible, ask:**] Why do you think both the guy and the girl should take care of these things? [short answer]

Section G

As teenagers become adults they learn a lot about relationships, and about sex. That's part of being a teenager.

These next questions ask about where you may have learned about sex. The things people learn about sex might come from talking to someone, reading, or watching TV.

This first question asks about where you might have learned things about birth control. Birth control includes condoms, birth control pills and shots, IUDs, and diaphragms.

G1. Have you or a sex partner ever used birth control? [yes, no]

G2. Have you learned about birth control from **[Read Each]**...

G2a. Did you learn from Friends?

G2a1. **[If yes, ask:]** What did you learn from them?
[short answer]

[If R has never had a boyfriend, Skip to G2c]

G2b. Did you learn from boyfriends?

G2b1. **[If yes, ask:]** What did you learn from them?
[short answer]

G2c. Did you learn from Family:

G2c1. **[If yes, ask:]** What did you learn from them?
[short answer]

G2d. Did you learn from teachers, coaches:

G2d1. **[If yes, ask:]** What did you learn from them?
[short answer]

G2e. Did you learn from a minister or pastor or religious readings:

G2e1. **[If yes, ask:]** What did you learn from them/that?
[short answer]

G2f. Did you learn from other adults you know:

G2f1. **[If yes, ask:]** What did you learn from them?
[short answer]

G2g. Did you learn from TV, Movies, Radio, Books, Magazines:

G2g1. **[If yes, ask:]** What did you learn from them/that?
[short answer]

G2h. Did you learn from the Internet: Facebook, You Tube, Myspace:

G2h1. **[If yes, ask:]** What did you learn from them/that?
[short answer]

This next question asks about where you might have learned things about using condoms to avoid getting a disease (an STD).

G3. Have you or a sex partner ever used condoms to avoid getting a disease? [yes, no]

G4. Have you learned about condoms from **[Read Each]**...

G4a. Did you learn from Friends?

G4a1. **[If yes, ask:]** What did you learn from them?
[short answer]

[If R has never had a boyfriend, Skip to G4c]

G4b. Did you learn from boyfriends?

G4b1. **[If yes, ask:]** What did you learn from them?
[short answer]

G4c. Did you learn from Family:

G4c1. **[If yes, ask:]** What did you learn from them?
[short answer]

G4d. Did you learn from Teachers, coaches:

G4d1. **[If yes, ask:]** What did you learn from them?
[short answer]

G4e. Did you learn from a minister or pastor or religious readings:

G4e1. **[If yes, ask:]** What did you learn from them/that?

[short answer]

G4f. Did you learn from other adults you know:

G4f1. **[If yes, ask:]** What did you learn from them?
[short answer]

G4g. Did you learn from TV, Movies, Radio, Books, Magazines:

G4g1. **[If yes, ask:]** What did you learn from them/that?
[short answer]

G4h. Did you learn from the Internet: Facebook, You Tube, Myspace:

G4h1. **[If yes, ask:]** What did you learn from them/that?
[short answer]

These next questions are about your opinions about sex and what you think has influenced your opinion.

[Interviewer: These next few questions are about numbers of sex partners in general, which differs from earlier questions that ask about numbers of sex partners while you have a boyfriend.]

G5. First, do you think it is ok for teenage girls to have a lot of different sex partners or do you disagree with that?
[short answer]

[Interviewer: Probe as needed to elicit R's opinion]

G5.1. How about guys, do you think it is ok for teenage guys to have a lot of different sex partners or do you disagree with that? [short answer]

[Interviewer: Probe as needed to elicit R's opinion]

G5.1a. Who do you know that shares your opinion [On Questions **G5** and **G5.1** above]?

Probe each:

- Friends?

[If R has never had a Boyfriend, Skip to FAMILY]

- Boyfriends?

- Family?

Probe: Which family members share your opinion?

- Teachers or Coaches?
- Ministers, pastors?
- Other adults you know?

G5.2. Have you seen or heard opinions like yours [On questions **G5** and **G5.1** above]

Probe Each:

- On TV, Movies, and the Radio,
- On the Internet: Facebook, You Tube, Myspace:
- In Books and Magazines

This next question is about what you might do if you thought you had an STD

[**Interviewer: If needed:** STDs are sexual diseases you can get from having sex; those that you might have heard of are Chlamydia, gonorrhea, herpes, and syphilis.]

G6. What would you do if you thought you had an STD?

Probe: Would you go get tested at a clinic?

Probe: Where would you go?

Probe: Have you ever been told by a doctor or nurse that you have an STD?

G7. Have you learned about where to go to get tested for STDs from [**Read Each**]...

G7a. Did you learn from Friends?

G7a1. [**If yes, ask:**] What did you learn from them?
[short answer]

[If R has never had a Boyfriend, Skip to G7c]

G7b. Did you learn from boyfriends?

G7b1. **[If yes, ask:]** What did you learn from them?
[short answer]

G7c. Did you learn from Family:

G7c1. **[If yes, ask:]** What did you learn from them?
[short answer]

G7d. Did you learn from Teachers, coaches:

G7d1. **[If yes, ask:]** What did you learn from them?
[short answer]

G7e. Did you learn from a minister or pastor or religious readings:

G7e1. **[If yes, ask:]** What did you learn from them/that?
[short answer]

G7f. Did you learn from other adults you know:

G7f1. **[If yes, ask:]** What did you learn from them?
[short answer]

G7g. Did you learn from TV, Movies, Radio, Books, Magazines:

G7g1. **[If yes, ask:]** What did you learn from them/that?
[short answer]

G7h. Did you learn from the Internet: Facebook, You Tube, Myspace:

G7h1. **[If yes, ask:]** What did you learn from them/that?
[short answer]

G8. This next question asks about what you would do if someone was putting pressure on you to have sex and you didn't want to have sex with him.

G8a. If it was a new guy (someone you just met) who was putting pressure on you, what would you do to let him know you did not want to have sex with him?
[short answer]

G8b. If it was someone who was a friend who was pressuring you, what would you do to let him know you did not want to have sex with him?
[short answer]

G8c. If it was an Ex-boyfriend who was pressuring you, what would you do to let him know you did not want to have sex with him?
[short answer]

G8d. If it was a current boyfriend who was pressuring you, what would you do to let him know you did not want to have sex with him?
[short answer]

[Interviewer: If R said “Don’t Know” or “I just go along” to Items G8a to G8d, then Skip to Instructions before G10]

G9. You just told me about some ways to avoid having sex with someone you don’t want to have sex with. Have you learned about ways to avoid having sex from **[Read Each]**...

G9a. Did you learn from Friends?

G9a1. **[If yes, ask:]** What did you learn from them?
[short answer]

[If R has never had a Boyfriend, Skip to G9c]

G9b. Did you learn from boyfriends?

G9b1. **[If yes, ask:]** What did you learn from them?
[short answer]

G9c. Did you learn from Family:

G9c1. **[If yes, ask:]** What did you learn from them?
[short answer]

G9d. Did you learn from Teachers, coaches:

G9d1. **[If yes, ask:]** What did you learn from them?
[short answer]

G9e. Did you learn from a minister or pastor or religious readings:

G9e1. **[If yes, ask:]** What did you learn from them/that?
[short answer]

G9f. Did you learn from other adults you know:

G9f1. **[If yes, ask:]** What did you learn from them?
[short answer]

G9g. Did you learn from TV, Movies, Radio, Books, Magazines:

G9g1. **[If yes, ask:]** What did you learn from them/that?
[short answer]

G9h. Did you learn from the Internet: Facebook, You Tube, Myspace:

G9h1. **[If yes, ask:]** What did you learn from them/that?
[short answer]

These next questions ask about how you have learned to meet guys and talk to them.

G10. Meeting a new guy that you are feeling attracted to can be difficult. Have you learned about how to meet a new guy from someone, and what ideas did you get from them? **[Read Each]**

G10a. Did you learn from Friends?

G10a1. **[If yes, ask:]** What did you learn from them?
[short answer]

[If R has never had a Boyfriend, Skip to G10c]

G10b. Did you learn from boyfriends?

G10b1. **[If yes, ask:]** What did you learn from them?
[short answer]

G10c. Did you learn from Family:

G10c1. **[If yes, ask:]** What did you learn from them?
[short answer]

G10d. Did you learn from Teachers, coaches:

G10d1. **[If yes, ask:]** What did you learn from them?
[short answer]

G10e. Did you learn from a minister or pastor or religious readings:

G10e1. **[If yes, ask:]** What did you learn from them/that?
[short answer]

G10f. Did you learn from other adults you know:

G10f1. **[If yes, ask:]** What did you learn from them?
[short answer]

G10g. Did you learn from TV, Movies, Radio, Books, Magazines:

G10g1. **[If yes, ask:]** What did you learn from them/that?
[short answer]

G10h. Did you learn from the Internet: Facebook, You Tube, Myspace:

G10h1. **[If yes, ask:]** What did you learn from them/that?
[short answer]

G11. Earlier we asked about talking to a new guy, someone you recently met, about sexual things you might like to do. Have you learned to talk to a new guy about sexual things you might like to do with him from **[Read Each]**...

G11a. Did you learn from Friends?

G11a1. **[If yes, ask:]** What did you learn from them?
[short answer]

[If R has never had a Boyfriend, Skip to G11c]

G11b. Did you learn from boyfriends?

G11b1. **[If yes, ask:]** What did you learn from them?
[short answer]

G11c. Did you learn from Family:

G11c1. **[If yes, ask:]** What did you learn from them?
[short answer]

G11d. Did you learn from Teachers, coaches:

G11d1. **[If yes, ask:]** What did you learn from them?
[short answer]

G11e. Did you learn from a minister or pastor or religious readings:

G11e1. **[If yes, ask:]** What did you learn from them/that?
[short answer]

G11f. Did you learn from other adults you know:

G11f1. **[If yes, ask:]** What did you learn from them?
[short answer]

G11g. Did you learn from TV, Movies, Radio, Books, Magazines:

G11g1. **[If yes, ask:]** What did you learn from ~~them~~/that?
[short answer]

G11h. Did you learn from the Internet: Facebook, You Tube, Myspace:

G11h1. **[If yes, ask:]** What did you learn from them/that?
[short answer]

[Interviewer: If R indicated in F5 that she has previously talked to a new guy about condoms, birth control or STDs, rephrase G12:

“These next questions ask about how you learned to talk to new guys about condoms, birth control, or STDS.”

Use participant’s answer from F5 to decide whether to proceed to G12a or G12b

G12a. **[If yes, ask:]** Have you learned to talk to a new guy about sexual health things like condoms, or birth control, or STDs from **[Read Each]**...

G12b. **[If no, ask:]** Even though you have not talked to a new guy about sex, have you learned something about ways you might talk to a new guy about condoms, birth control, or STDs from someone such as **[Read Each]**...

[Interviewer: If R says she has never learned anything about this from anyone, SKIP TO SECTION H]

G12c. Did you learn from Friends?

G12c.1. **[If yes, ask:]** What did you learn from them?
[short answer]

[If R has never had a boyfriend, Skip to G12e]

G12d. Did you learn from boyfriends?

G12d.1. **[If yes, ask:]** What did you learn from them?
[short answer]

G12e. Did you learn from Family:

G12e.1. **[If yes, ask:]** What did you learn from them?
[short answer]

G12f. Did you learn from Teachers, coaches:

G12f.1. **[If yes, ask:]** What did you learn from them?
short answer]

G12g. Did you learn from a minister or pastor or religious readings:

G12g.1. **[If yes, ask:]** What did you learn from them/that?
[short answer]

G12h. Did you learn from other adults you know:

G12h.1. **[If yes, ask:]** What did you learn from them?
[short answer]

G12i. Did you learn from TV, Movies, Radio, Books, Magazines:

G12i.1. **[If yes, ask:]** What did you learn from them/that? [short
answer]

G12j. Did you learn from the Internet: Facebook, You Tube, Myspace:

G12j.1. **[If yes, ask:]** What did you learn from them/that?
[short answer]

Section H

H1. Thinking about all the things we have talked about today, who have you learned things from about having sex, or sexual health matters (e.g., birth control, or STDs) that has given you information that was helpful to you in some way? That is you learned something you wanted or needed to know about. **[Read Each]**

H1a. Have you learned anything about having sex, or sexual health matters from Friends that was helpful?
[yes, no]

H1a1. **[If yes, ask:]** What did you learn from them that was helpful?

[If R has never had a boyfriend, Skip to H1c]

H1b. Have you learned anything about having sex, or sexual health matters from boyfriends that was helpful?
[yes, no]

H1b1. **[If yes, ask:]** What did you learn from them that was helpful?
[short answer]

H1c. Have you learned anything about having sex, or sexual health matters from Family that was really helpful? [yes, no]

H1c1. **[If yes, ask:]** What did you learn from them that was helpful?

H1d. Have you learned anything about having sex, or sexual health matters from teachers, coaches that was really helpful?
[yes, no]

H1d1. **[If yes, ask:]** What did you learn from them that was helpful?

H1e. Have you learned anything about having sex, or sexual health matters from other adults you know that was helpful?
[yes, no]

H1e1. **[If yes, ask:]** What did you learn from them that was helpful?

H1f. Have you learned anything about having sex, or sexual health matters from doctors, other health workers, at a clinic that was really helpful?

[yes, no]

H1f1. **[If yes, ask:]** What did you learn from them that was helpful?

H1g. Have you learned anything about having sex, or sexual health matters from ministers, pastors, or religious reading that was helpful?
[yes, no]

H1g1. **[If yes, ask:]** What did you learn from them that was helpful?

H1h. Have you learned anything about having sex, or sexual health matters from TV, Movies, Radio, Books, Magazines that was helpful?
[yes, no]

H1h1. **[If yes, ask:]** What did you learn from them that was helpful?

H1i. Have you learned anything about having sex, or sexual health matters from the Internet: You Tube, Facebook, Myspace, or chat rooms that was helpful?
[yes, no]

H1i1. **[If yes, ask:]** What did you learn from them that was helpful?

Section I

These last few questions are about having children and living with someone.

I1. Do you have children? [yes, no]

[If no to I1, skip to I4]

I2. How many children do you have?

I2a. Is/Are he/she/they a boy(s) or girl(s)?

I2b. What is/are his/her/their age(s) and

I2c. Does he/she/they live with you?

I3. Has having a child changed your opinions about sex or using birth control? [yes, no]

I3a. [If yes, ask:] How have your opinions changed?
[short answer]

Probe: What has changed? R's views on sex, talking about sex, birth control? [short answer]

[If yes to I1, Skip to 15]

I4. How old do you think you will be when you have your first child?
[age range]

I5. Do you think guys and girls feel the same about when is a good time to have children? [short answer]

Just a few more questions and we are done.

We've been talking about teens for most of the interview. Now I have a few questions about adults. The next two questions ask for your opinions about how men and women should make decisions about some daily life issues.

I6. When a man and woman get married or live together, who do think should make most of the decisions about **[Read Each]** ...

I6a. How to spend money?
[short answer]

I6b. How to raise kids if they have them?

[short answer]

This next question asks about what you think the messages and images are of adult (African American or Black) men and women in the world today. Again, we're asking for your ideas about adult men and women.

17. What messages or ideas do you think you have gotten about what women should be like?

[short answer]

[**Interviewer:** Also use examples as needed, for example: Ideas or messages about how people should look, act, live their life, treat the opposite sex, and so on. Ask R to be specific about what they believe they are hearing/seeing.]

I have one last question and then we are done. This last question asks about how you see the future and life in general. I want you to imagine what life will be like when you're older, say 25 to 30 years old.

18. What will life be like for you then?

[short answer]

Probe each as needed:

What do think you'll be doing when you're 25 to 30 years old?

[short answer]

What kind of work might you be doing?

[short answer]

Do you think you might have kids (or more kids)?

[short answer]

Who might you be living with?

[short answer]

Where might you be living?

[short answer]

TURN OFF RECORDER AFTER
COMPLETING THIS SECTION.

V. Conclusion

Ok that's all the questions I have today. I want to thank you for your help and for talking about your experiences and opinions. Do you have any final questions or comments? I'd like to mention again that we keep all your information confidential. Okay, thanks again.

Time Interview Ended: _____

VI. Post-Interview Data

After the interview is over and you've left the informant, spend a few moments dictating the following thoughts **into the recorder**.

Label it: Final Comments by: _____

1. Where was the interview done?
2. Give the date, day of the week and time of day the interview took place.
3. Provide a verbal description of respondent's appearance -- apparent maturity, physical appearance, articulateness, etc.
4. Were there other people present other than the interviewee? Explain any third voices heard on the tape. Explain any interruptions. Explain anything unusual that happened during the interview.
5. How comfortable was respondent with the interview process?
6. How honest do you think respondent was?
7. Did respondent display any emotion that you think needs further explanation?
8. How comfortable were you with the interview? Did you have any emotional reactions to respondent that might have colored how you did the interview?

9. Mention any observations of things that might make the comments on the tape more clear -- anything you noticed that you think may not have come through on the tape.
10. Mention any thoughts you have about this interview compared to others you have done. Is there anything that you want the analyst to take special note of?
11. Reflect on the content of the interview? Give any analytic thoughts you have? Does this have a lot of new info in it? Or is it the same as others? Any internal contradictions in R's interview you noticed?