

Sexuality education:  
Implications for policy, parents, and family life educators

by

Sarah Ann Kuborn

B.S., Manchester College, 2012  
M.S., Kansas State University, 2015

AN ABSTRACT OF A DISSERTATION

submitted in partial fulfillment of the requirements for the degree

DOCTOR OF PHILOSOPHY

School of Family Studies and Human Services  
College of Human Ecology

KANSAS STATE UNIVERSITY  
Manhattan, Kansas

2018

## **Abstract**

The following three studies examine school-based sexuality education and parent-child sexual communication. Using findings from qualitative data, the studies address what information is missing and/or needed in sexuality education delivered by parents and the school system, and to determine the best methods to deliver the information. Study 1 identifies the need for a change in sexuality education discourse, especially for women. Study 2 identifies the important need for parents to keep in mind the environment, the methods, and the timing of their parent-child sexual communication. Finally, study 3 assesses novel and discussion question use in mother-daughter sexual communication. Implications are provided for Family Life Educators, Sexuality Educators, and Policymakers.

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Approved by:

Major Professor  
Melinda Markham

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*"We don't have to do all of it alone. We were never meant to"* (Brown, 2017, p. 179).

## **Dedication**

I would like to dedicate this dissertation to my husband, Daniel, my most prominent support person. In addition, I would like to dedicate this to every person out there who has had a dream that others thought you could not achieve. Finally, to the fellow students and colleagues who are currently in my program and all the ones who are to come. You will reach this point, it will end, you will be stronger and better for it. You are not a failure, you are being challenged, you are developing.

# **Chapter 1 - Introduction**

## **Statement of Problem**

“Sexuality is an essential component of healthy development for young people” (Shtarkshall, Santelli, & Hirsch, 2007, p. 116). It is related to many other aspects of development including the physical, cognitive, and psychosocial domains of development (Feldman, 2015). During this time of development, an adolescent may receive information about sexuality from a variety of sources, including parents, relatives, schools, peers, magazines, television, books, and the Internet. The following three studies will explore the school and parents as sources of information. It is important to explore and understand both family and school influences on sexuality because adolescents learn sexual knowledge and skills through school-based sexuality education and they acquire an understanding of values, beliefs, and ideas through parents (Shtarkshall et al., 2007). Therefore, the purpose of the following three studies is to explore and understand what information is missing and/or needed in sexuality education delivered by parents and the school system, and to determine the best methods to deliver that information.

## **Purpose and Justification**

### **Paper 1: “I Wish I Had Been Told the Truth Sooner”: The Sexuality**

#### **Education College Women Wish They Had**

This study utilized a Qualtrics (2018) survey to collect qualitative responses regarding formal sexuality education. The purpose of this research was to identify what college women feel they should have been taught in their formal sexuality education. This study used a feminist lens to investigate: (a) *What kind of sexuality education do college women wish they had received prior to college?* and (b) *How do the responses of college women who received comprehensive*

*sexuality education, abstinence-based sexuality education, and abstinence-only sexuality education compare?* The constant comparative method was used to analyze the data (Corbin & Strauss, 2008). Findings indicated that women wished they had learned more about (a) safe sex, (b) empowerment, (c) anatomy and physiology, (d) definitions of sex, and (e) sexual assault. Women who received comprehensive or abstinence based school-based sexuality education wished they had learned more about (a) communication, (b) college culture, (c) LGBTQ+, and (d) sexual health and resources. To address the content needs of women, we must address the discourse and move toward sexual agency and sexual citizenship. The findings of this study provide implications for formal sexuality education policy to change the current neoliberal narrative. This manuscript will be submitted to the *Journal of Sexuality Education*.

## **Paper 2: “I Wish They Would Have a Class for Parents About Talking to Their Kids About Sex[uality]”**

The purpose of this study was to examine what college students wish their sexuality education from their parents would have been like. To fulfill this purpose, college students were asked to complete a Qualtrics (2018) survey that utilized sentence stems. Specifically, this study sought to answer the following research questions: *How do college students wish their parents had discussed human sexuality with them prior to coming to college?* To analyze the data, the constant comparative method was utilized (Corbin & Strauss, 2008). Findings illustrate the importance of the environment, methods, and timing of parent-child sexual communication. College students discussed how they desired their parent-child sexual communication to be situated in a comfortable and open environment with their parent delivering the content by providing different perspectives, having discussions, being competent, and stating things bluntly. Finally, college students emphasized the need to discuss sexuality in an age-appropriate manner

and throughout the lifespan. Family life educators can use the results of this study to better equip parents in discussing human sexuality with their children. This manuscript will be submitted to *Family Relations*.

### **Paper 3: A “Catalyst for Us to Talk About Relationships and Sex”: Using a Novel in Mother-Daughter Sexual Communication**

The aim of this study was to address the influence of using a novel and discussion questions as a tool in mother-daughter sexual communication. This study used a symbolic interactionism (Blumer, 1969) lens to answer the following questions: (a) *In what ways does reading the same young adult literature book influence mother-daughter sexual communication?* and (b) *In what ways does using young adult literature discussion questions influence mother-daughter sexual communication?* Twelve mother-daughter dyads were asked to read the novel, *Forever* (1975/2007) and then have a discussion with one another about it. Half of the dyads were simply asked to discuss sexuality in the novel, while the other half were provided discussion questions. It was found that the use of novels in mother-daughter sexual communication has many benefits including: (a) providing a bonding experience, (b) reducing initial barriers, and (c) changing comfort level. In addition, using questions to guide the discussion were helpful in providing (a) ease, (b) structure, (c) depth and breadth, and (d) a catalyst to share real-life or personal experiences. The findings of this study assist family life educators in providing a research-based medium to parents wanting to discuss sexuality with their children. This manuscript will be submitted to *Family Relations*.

### **Summary**

Sexuality is a normal aspect of development (Sanstrock, 2012). For many, sexual activity starts in early adulthood or earlier (Goins, Garcia, & Barger, 2013; Mosher, Chandra, & Jones,

2005). Formal and parental sexuality education provide the knowledge, skills, values, and beliefs to help individuals navigate their sexual lives (Shtarkshall et al., 2007). Knowing information about what may be missing in both formal and parental sexuality education can assist family life educators in knowing what to address in parent education programming. In addition, family life educators gain a new research-based method to help parents talk to their children about sexuality.

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## **Chapter 2 - Paper 1: “I Wish I Had Been Told the Truth Sooner”:**

### **The Sexuality Education College Women Wish They Had**

#### **Introduction**

Many students arrive to a college campus with some sort of information about sexuality, but many overestimate their knowledge about human sexuality before taking a course in it (Rutledge, Siebert, Chonody, & Killian, 2011). In support of this idea, previous research has found college students gain a better understanding of what they did not know when they take a human sexuality course in college (Rutledge et al., 2011). Although promising, college-level instruction is often too late (Hirst, 2013; Sarrel & Coplin, 1971) because the majority of college students have already engaged in sexual activity (Goins, Garcia, & Barger, 2013; Oswalt, Cameron, & Koob, 2005). Therefore, this study sought to identify what topics college women feel they should have been taught earlier in life.

#### **Review of Literature**

##### **Types of Sexuality Education**

There has been a long-standing debate on what type of sexuality education, if any, should be taught in schools. According to Sexuality Information and Education Council of the United States (SIECUS, 2009), the debate mostly lies within two distinct realms: comprehensive sexuality education and abstinence-only programs. Within these programs, there is much variability. On one end of the spectrum lies comprehensive sexuality education. Comprehensive sexuality education programs provide accurate, research-based, age-appropriate instruction from the time children begin school throughout high school (Barr, Moore, Johnson, Forrest, & Jordan, 2014). In 1991, SIECUS convened the National Guidelines Task Force and identified six key

concept areas to be included in comprehensive sexuality education programs. The framework was then published and is currently in its third edition, which now includes 39 topics related to sexuality education for school-age children including, but not limited to, human development, relationships, decision-making, contraception, and disease prevention (SEICUS, 2009). Within the guidelines, comprehensive sexuality education teaches that abstinence is the best method to avoid sexually transmitted infections (STIs) and unintended pregnancy, but it also teaches about prevention methods such as condoms and contraception. Additionally, it helps people explore their own values, as well as interpersonal and communication skills (Advocates for Youth, 2011).

On the other end of the spectrum is abstinence education. There are two main types of abstinence sexuality education: abstinence-based (abstinence-plus or abstinence-centered) and abstinence-only-until-marriage (Kohler, Manhart, Lafferty, 2008). Abstinence-based education emphasizes the benefits of abstinence and mentions other forms of sexual behavior, while also including information about contraception and disease-prevention (Barr et al., 2014). These programs also may be referred to as abstinence-centered or abstinence-plus. Abstinence-only-until-marriage education programs emphasize abstinence from all forms of sexual behavior until marriage (Percival & Sharpe, 2012). These programs do not usually include information about contraception and/or disease-prevention; if they do, they emphasize the failure rates or censor the information in some way (Advocates for Youth, 2011; Barr et al., 2014; SIECUS, 2009). There is often a moral context to these programs, implying that sexual activity is only appropriate within marriage.

Kohler and colleagues (2008) indicated that although there is similarity between school-based sexuality education programs, there are two categories of programs: comprehensive and

abstinence-only. This categorization was based on the existence within the programs of accurate and research-based information about sexual health, including, but not limited to, contraception and disease-prevention methods. The comprehensive sexuality education category included comprehensive and abstinence-based, while the abstinence-only category included abstinence-only-until-marriage. Although Kohler and colleagues (2008) separated out the types of sexuality education based on contraception and disease-prevention, we still have much to learn about the similarities and differences between these programs based on other criteria. At this point, more information is needed to determine if we can confidently state that comprehensive and abstinence-based are similar enough to be grouped together or if abstinence-based is more akin to abstinence-only sexuality education.

### **Perceptions of Content in School-Based Sexuality Education**

Over the years, there has been a significant amount of research done to understand adolescents' perceptions of school-based sexuality education (SBSE) in countries outside of the United States, including Canada (Byers, Hamilton, & Fisher, 2017), New Zealand (Allen, 2005; 2008), and the United Kingdom (Forrest, Strange, & Oakley, 2004; Hirst, 2004). Overall, adolescents perceived their SBSE to be too scientific or simplified and they preferred content that was more relatable (Allen, 2005; Hirst, 2004).

Based on these international studies, the following topics have been identified as being covered well: (a) puberty, (b) STIs, (c) reproduction, (d) condoms, (e) contraception (Allen, 2008; Byers et al., 2017), (f) abstinence, (g) menstruation (Byers et al., 2017), and (h) the effects of drugs and alcohol (Allen, 2008). However, there was some disagreement between the countries; for example, STIs was said to be covered well and to be lacking. The topics that were said to be lacking include: (a) STIs, (b) HIV/AIDS, (c) medical resources, (d) contraception, (e)

sexual coercion, (f) the act of sex, (g) sexual development (Forrest et al., 2004), (h) abortion, (i) breakups (Allen, 2008), (j) pleasure (Allen, 2008; Hirst, 2004), (k) teenage pregnancy (Allen, 2005; Allen 2008), (l) erotics, (m) LGBTQ+, and (n) pregnancy (Allen, 2005; Forrest et al., 2004). Hirst (2004) argued that the micro-level factors and the public sphere of sexuality education have a significant consequence on adolescents' sexual experiences and agency. Those sampled in Canada, New Zealand, and the United Kingdom provided an understanding of what adolescents and graduate students want or feel they need in sexuality education. However, sexuality education is a bit different across countries, and while these studies provide some insight, additional research is needed to better understand sexuality education in the United States.

Recently, Rubinsky and Cooke-Jackson (2017) utilized an open-ended survey to obtain memorable messages that gender minorities, ages 18 – 60 in the United States, received about sexual health. Along with memorable messages, Rubinsky and Cooke-Jackson (2017) also obtained information about what the participants wish they had received instead. Three themes emerged regarding memorable messages: (a) protection, (b) abstinence, and (c) danger. These memorable messages were found to have negative or harmful influences on the participants' self-concept and led to beliefs and opinions they identified as harmful. The absence of memorable messages is a memorable message in itself, and one that portrays the topic as not being important. The participants expressed that they wish they had heard (a) open dialogue, (b) pleasure and positivity, (c) beyond heteronormativity and cisnormativity, and (d) consent and healthy dating relationships. These message gaps are “memorable because they foster unhealthy attitudes and practices during formative years of identity and sexual development...message gaps leave individuals with inadequate information on how to engage in safe sexual behavior,

with feelings of fear and guilt about sexual activities and their own bodies, and with experiences of shame for their sexual and gender identities” (p. 396). Women who feel this type of anxiety, fear, guilt, and shame may also have trouble communicating about their sexuality, seeking medical services, and/or participating in desired sexual activities. This study provides information regarding what 18- to 60-year-old, gender non-specific, Americans remember about their SBSE. The present study will seek to focus in on women and a smaller age range to learn more about the nuances that may exist.

Much of the previous research has used needs assessments with the population in which programming or education is done (Allen, 2005; Allen, 2008; Forrest, Strange, Oakley, 2011; Haglund, 2006). In addition, studies have sought the ascribed needs of the population; for example, researchers have asked parents what they think their children need regarding sexuality education (Ashcraft, 2017). These assessments are limited because the participants do not yet know what they may need in the future and parents may not fully understand what it is like to be an adolescent in the given time and context. College students are able to reflect on the value of the sexuality education they received (Coleman & Testa, 2007). Therefore, this study was done retrospectively and sought to identify what college women specifically wish they would have learned in their SBSE.

### **Women in Sexuality Education**

Much of the SBSE that has existed delivers content according to gendered sexual scripts (Bay-Cheng, 2003; Hirst, 2013; Rubinsky & Cooke-Jackson, 2017). These sexual scripts develop into the sexual knowledge and sexual practices of the individuals receiving the education (Bay-Cheng, Livingston, & Fava, 2011; Hirst, 2013; Hynie, Lydon, Côté, & Weiner, 1998). Questions that recipients of education must consider include: Who has the right to enjoy sex? Who is the

primary beneficiary of the experience? Who has the right to engage in sex and when is it not okay? (Orenstein, 2016). The answers to these questions are developed based on the lens in which the sexuality education was implemented (Tolman, 1999).

Sexual scripts often display men to be the sexual initiator, the one with the active role and the most desire to have sex (Bay-Cheng, 2001; Fetterolf & Sanchez, 2015; Holland, Ramazanoglu, Sharpe, & Thomson, 1999; Kiefer & Sanchez, 2007). According to Bay-Cheng (2003), women are typically viewed as sexual gatekeepers who are supposed to be passive and the ones to be desired. In addition, girls tend to receive sexuality education that focuses on puberty and adolescent development such as menstruation and reproduction. Boys, on the other hand, tend to receive information on the sexual urges and drive they will feel. These scripts are likely to lead to women feeling the need to present themselves as desirable, but not too desiring, as males are the ones to be active agents when it comes to sexuality.

Overall, SBSE tends to put men's needs first; thereby empowering them, while treating women as agents only to serve men or society at large (Haberland & Rogow, 2015; Rubinsky & Cooke-Jackson, 2017). This type of SBSE results in a transference of such values and maintains the status quo that privileges males (Hirst, 2013). At first, adolescents may not see this type of education affecting everyday life. However, we know that women assign personal meanings to the values of female sexuality presented to them and it results in these values becoming personalized, internalized, and integrated into their own belief systems (Allen, 2008; Miyazawa, 2017). Because late adolescence and emerging adulthood are critical times for developing and exploring relationships and sexual development, college women may be able to provide better insight into how they wish they were educated based on what they have experienced and learned since.

## **Theoretical Framework**

A feminist family theory lens was utilized in this study. The basic assumptions of feminist theory prioritize the need to understand women's experiences, perspectives, and feelings (Osmond & Thorne, 1993; Smith & Hamon, 2017). This study focuses on two main assumptions of feminist family theory: the idea that women's experiences are central to our understanding of society and that their experiences are political, thus emphasizing social change (Osmond & Thorne, 1993).

First, women's experiences are central to our understanding of society (Osmond & Thorne, 1993; Smith & Hamon, 2017). This assumption considers the power differences regarding sex and gender and places the perspectives and feelings of women at the forefront. Therefore, this study sought to make women visible in the discourse of sexuality education. The lack of women's voices hinders the probability of women's needs being met in sexuality education, in turn, possibly hindering their sexual development. By exploring women's opinions and experiences, sexuality education programs can be changed to better fit the needs of women.

Second, feminist theory emphasizes social change (Osmond & Thorne, 1993; Smith & Hamon, 2017). The personal experiences of women are political (Allen & Baber, 1992). Women's experiences effect policy and policy effects the experiences of women. Therefore, women's experiences, or lack thereof, regarding their sexuality education should influence future sexuality education policy, just as sexuality education policy will affect the experiences of women. According to Allen and Baber (1992), sexuality education can provide some material foundation for gender equality.

## **The Present Study**

This study sought to use women's voices to understand what is missing for women in sexuality education and how we can change policy to make it better. Using feminist theory as a lens, the following research questions guided the investigation: *a) What kind of formal sexuality education do college women wish they had received prior to college?* and *b) How do the responses of college women who received comprehensive sexuality education, abstinence-based sexuality education, and abstinence-only sexuality education compare?*

## **Methods**

### **Procedures & Measures**

Following approval from the university's Institutional Review Board, recruitment began by sending out an online Qualtrics (2018) survey via an email delivered through the online education portal of the university to college students in senior capstone courses and an Introduction to Human Sexuality course in the Human Development and Family Science undergraduate program at a Midwestern university. These courses were chosen to ensure that students were either enrolled in the human sexuality course or had already taken the human sexuality course. By completing the comprehensive sexuality education course, participants were more informed and were better able to speak to the concepts they would have liked to learn prior to college. The human sexuality course focused on healthy sexual choices in relation to one's body; sexual interactions with others; and how individuals relate, understand, and experience sexuality in a global society. Course objectives targeted theoretical perspectives, self-awareness as a sexual person, gender identity and sexual orientation, anatomy and physiology, sexual communication, sexual arousal and response, contraception and childbirth, sexually transmitted infections, sexual expression and behavior, and sexual coercion and violence. Data were

collected from the spring semester of 2016 through the fall semester of 2017, excluding summers.

After clicking on the hyperlink to the survey, the participants were provided an informed consent document that informed them of the study aims, methods, possible risk and/or discomfort, implications of findings, and confidentiality (see Appendix A). The participants were asked both closed and open questions regarding sexuality education as well as demographic questions (see Appendix B). A qualitative approach was most appropriate for this study because we wanted to get in-depth descriptions about sexuality topics from the women, rather than identifying the sexuality topics for the women. After reading the informed consent form and agreeing to participate, participants began the survey by identifying the type of formal sexuality education (from school or organizations) they received prior to coming to college. Participants could choose from four options: a) abstinence-only, b) abstinence-based, c) comprehensive, and d) other. Definitions were provided for each type of education using Advocates for Youth's (2001) definitions. The "other" option allowed participants to explain or describe the education they had.

Following these questions, questions that utilized sentence stems were asked (Campbell, 1957). Sentence stems help guide participants in answering by providing structure, while also providing room for open interpretation by the respondent. Structured sentence stems were developed to direct participants' thinking toward sexuality education (Hart, 1986). The sentence stems were written in a retrospective nature, as the goal was to seek information about the past.

Although using sentence stems provides richer data than typically gathered through surveys, there are limitations to this methodology, particularly when used to collect retrospective data. First, sentence stems used in a survey do not provide as much depth in responses as an

interview format may produce. In addition, the retrospective aspect may be affected by flawed recall (Klein & Breck, 2010). Due to the research questions and the sensitive matter of discussing sexuality, however, the retrospective sentence stems were the most appropriate. The following four items were developed based on sentence stems used to understand the sexuality education experiences of middle school teacher candidates (Klein & Breck, 2010) and the retrospective writing of a study of what daughters wish their mothers had told them about sexuality (Brock & Jennings, 1993).

*Thinking about sexuality and its education prior to college, I wish I had been taught...*

*Thinking about sexuality and its education prior to college, I wish I had asked about...*

*Thinking about sexuality and its education prior to college, I wish I had been told...*

*When teaching about sexuality, I wish my teacher(s) had...*

Following the sentence stems, participants were asked to complete demographic questions, including participants' date of birth, gender identity, sex, sexual orientation, ethnic and racial background, place of birth, city of high school graduation, political party preference, religious affiliation, major, school class level, and whether they had taken certain classes in Human Development and Family Science (see Appendix B). The survey ended with debriefing information, informing the participant that if the survey triggered any feelings or issues to contact local resources (e.g., local counseling service agencies).

## **Sample**

The inclusion criteria for this study included the following: (a) self-identified women, (b) answered at least one of the sentence stems, (c) had previously or were taking the Human Development and Family Science: Introduction to Human Sexuality college course at a Midwestern University, and (d) identified they had received one of the following types of SBSE:

a) abstinence-only, b) abstinence-based, or c) comprehensive. A total of 94 women, born between 1972 and 1998 ( $M = 1993$ ) fit the criteria. The sample identified as White or Caucasian (79%), Black or African American (1.2%), Hispanic/Latina (1.2%), Chinese (1.2%), Middle Eastern (1.2%), and mixed (11.7%). The majority of women identified as heterosexual (89.4%); the rest identified as bisexual (3.2%), pansexual (1.2%), and lesbian (1.2%).

### **Method of Analysis**

Data analysis began by importing the responses from Qualtrics (2018) into a Microsoft Excel spreadsheet. The responses of the women were read verbatim and two members of the researcher team coded the data by reading through the responses of each of the sentence stems and using the constant comparative method to conduct analyses. First, we read the data line-by-line to identify themes (Corbin & Strauss, 2008) and then worked inductively, using descriptive coding, to summarize the data in a word or short phrase identifying the basic topic of the data (Braun & Clarke, 2006) such as 'safe sex.' The data were then read through once again to determine if additional categories or subcategories were necessary. If there was disagreement, it was discussed and data were re-examined. When the codebook was finished, the first author then went through the data once more and separated the responses according to which sexuality education the women stated they had received prior to coming to college. A total of 94 college women were separated into three groups: a) comprehensive ( $n=34$ , 36.2%), b) abstinence-based ( $n=41$ , 43.6%), and c) abstinence-only ( $n=19$ , 20.2%). In the following results, quotes will be referenced with the following abbreviations: (a) comprehensive (C), (b) abstinence-based (AB), and (c) abstinence-only (AO).

Descriptive coding was then used once again to see what categories and themes emerged within each of the sexuality education groups. At this point, a new codebook was created with

the data from each type of education and separated into categories and themes. These categories and themes were consistently being compared to the initial full data to determine the results.

## **Results**

Results are provided first based upon what women across all SBSE programs wish they had learned. Nuances are then provided regarding similarities and differences of what the college women wish they had learned based on their differing sexuality education approaches.

### **Findings Among All SBSE Programs**

Regardless of the type of SBSE women received, the participants in this study indicated they wish they would have received education in the following five arenas prior to coming to college: (a) safe sex, (b) empowerment, (c) anatomy & physiology, (d) what is sex?, and (e) sexual assault.

#### **Safe sex.**

A majority of women reported wanting to learn more about safe sex. Many times, women expressed safety generally, including: “how to be safe” (AO), “having safe sex” (AB), and “what is safe and what is never safe” (C). Participants described safe sex practices regarding (a) sexually transmitted infections (STIs) or diseases (STDs) and (b) prevention methods.

*Sexually transmitted infections (STIs).* Many women described wishing they had been given more information regarding STIs. Women shared that they wish they would have learned about “How common STIs are” (C) and “How STIs could be transferred and more about real life consequences of different STIs” (AB).

Although all of the sexuality education types had women who addressed wanting to know more about the commonality and the transference, when looking more closely at the data within each of the sexuality education types, nuances emerged. In the comprehensive and abstinence-

based groups, women described how they wish they had learned about how to prevent STIs and what the signs or symptoms consisted of, including that many are asymptomatic. Example responses included: “The rates of STIs, ways to prevent them, and that they rarely have symptoms. I think a lot of people in my high school needed to know that” (C) and “STDs are normally symptom-less!! This one should be stressed” (AB). Women in the abstinence-based group identified wishing they had learned more about how to go about getting tested and how to communicate with a partner. “I wish I had asked about how to get tested and how to be open with your partner about getting tested” (AB). Women in the abstinence-only group expressed that they wished they had learned more “about STDs in general” (AO) and “how easy it is to catch a STP” (AO).

***Prevention methods.*** Many college women also identified wanting more information on contraceptives and prophylactics. Across all sexuality education types, women agreed that they wanted to know about all the forms of contraceptives, rather than just one or two. For example, “The different types of condoms and the different types of contraceptives” (C), “About forms of contraceptives” (AO), and “I wish I had been taught about ALL of the methods of birth control, instead of just one or two” (AB). In addition to the forms of contraceptives, women wish they would have been told how to properly use condoms and birth control. One participant said, “Correct use of contraceptives in depth rather than having to ask friends” (AB). Another stated, “How to properly apply a condom” (AO).

Within the comprehensive and abstinence-based groups, women wished to have learned more about how the different forms of birth control worked, what each contained, for what they were used, and side effects. One woman reported:

I wish I had asked more about the different forms of birth control offered to girls. Before I found the right birth control I had to try a number of different methods (Nuva ring, multiple pill forms, plan B) because I didn't know the differences in any of them until I took them. I had to learn on my own about how different pills affect your hormones and mood, and that Plan B isn't a completely safe option. I really didn't know what I was doing when it came to birth control—all I knew was that I needed it. (C)

The comprehensive and abstinence-based group also had women who wished they would have learned that is the withdrawal method was not a reliable form of preventing pregnancy. For example, “Ways you can get pregnant (e.g. ‘pulling out’ does not mean you can’t get pregnant)” (AB) and “Proper condom use and statistics when it comes to pregnancy by just ‘pulling out’” (C). There was stress on wanting to learn about natural family planning and how women could understand their own fertility (C). In addition, the comprehensive group also shared wanting to know about Plan-B.

The comprehensive group was unique in that it was the only group that had women who wished they had learned more about the process of obtaining birth control.

I wish I had been taught the process of getting birth control. We all know how easy it is to get condoms. However, it seems to be a bit of a mystery just how to receive birth control and the process that is involved with that. I know it is uncomfortable to talk about for some individuals, but I think it would be helpful to almost have the whole process mapped out. Especially for those students who did not receive a great sex education prior to coming to college. (C)

The abstinence-only group was the only group that discussed how they wish they would have known more about the success rates of each form of contraceptive. “More about

contraceptives and the likelihood that they will work. I never learned about that unless I googled it or from this class now as a 20-year-old” (AO).

**Sexual empowerment.**

The women in this study identified empowerment as one of the things that was lacking in their SBSE. Women discussed empowerment in four primary ways: (a) self-esteem, (b) self-efficacy, (c) agency, and (d) reducing shame/villianization.

*Self-esteem.* From the responses, it appears many of the women did not feel confident about who they were as sexual beings. Responses included wishing they had been taught “to feel comfortable in my body” (AO) and “to love myself” (C). In addition, one woman expressed how she wished she would have had assistance in “building a stronger self-esteem” (C).

*Self-efficacy.* Many women described the importance of recognizing one’s own decisions, values, and beliefs. These, at times, were associated with being true to oneself. For example, one woman wrote, “Everything will be okay, you will make good and bad choices. Try and make the good choices.... As soon as you know yourself and love yourself, the better other aspects will be” (AB). In addition, women shared wanting to know more about “what my personal opinions were” (C) and that “It’s okay to have different values, beliefs, and norms than your peers or friends” (C). It was noted that values, beliefs, and one’s views of oneself could affect one’s decision-making. One woman wrote that she wishes she had learned more about how “you must think about that decision rather than sliding into which you first have sex. Come up with a plan, and boundaries of how far you want to go and stick to those boundaries” (C).

*Agency.* In addition, women shared the desire to have learned more about their own agency as sexual beings. Pressure to go beyond their values and/or boundaries were expressed. Women stated they wish they had learned “a better way to stand up for myself when it came to

peer pressure” (C) and “that I don’t have to do anything I don’t want to do and not everyone is having sex or expecting it from you” (AB). If the women would have learned more about agency, they may not have had responses such as wishing they had learned “better ways to say no” (AB) and “that it is okay to say no, and that there are a lot of people who do...you are allowed to say no to any sort of sexual activity, even if you are in a relationship with that person” (AB).

***Shame/villianization.*** According to the college women sampled, it is necessary to reduce the shaming and/or villianization of sex. The women expressed how their sexuality education made them feel bad about themselves. They wish they had been told that “it was normal and not to feel guilty” (C), that “sex is a normal healthy part of life and is nothing you should be ashamed of” (AB), and “life does not end when you have sex, and it definitely isn’t terrible that you’ve slept with more than one person” (AO). These women also wished they had been told that “it is okay to talk to boys, it is okay to explore your sexuality” (AB) and “it is okay to like sex” (AB). “It is not the end of the world if you have sex...I was raised with a guilty conscience regarding sex. I wish I had been told that having sex does not mean you are a bad person” (AO). Although these women mentioned feeling shame for having sexual desires, there were a few women who wished they would have been told that “it’s okay to not desire anything sexually until you’re ready” (C). One woman even wondered if there was something wrong with her if she did not enjoy sex (AB).

In addition, a few women who received abstinence-based and abstinence-only education emphasized the shame they experienced in their sexuality education that was related to having sex before marriage. They discussed how they wished they would have been told that “it is okay to have sex and you are not a bad person if you have sex before marriage” (AB). Women who

had abstinence-only sexuality education concurred by stating that they wish they had known “that a lot of people don’t wait till they are married to have sex with someone” (AO). More women shared these feelings, but included the need for safety or choice. For example, women wanted to be told that “having sex before marriage is not something to be ashamed about, but safe sex needs to be practiced” (AB) and “that it’s OK to have sex before marriage as long as you, the individual, is OK with the aftermath...emotions, etc.” (AO). Shame of having sex before marriage only showed up for the women who had abstinence-based or abstinence-only education. The women who had comprehensive did not mention marriage at all; however, they did emphasize the need to be safe.

### **Anatomy & physiology.**

*Anatomy.* Many women described wishing they would have learned more about the development that males and females go through, what sexual organs look like, and how they function. Women stated that they wish they had “been taught more about sexual development and the biological process throughout childhood and adolescence” (AB). Women from the abstinence-only group described wanting to know more about how “not everyone goes through sexuality development the same way... and that is okay” (AO). One woman stated that she had learned more about “genitals anatomy, specifically the vagina” (AB). One woman stressed wishing she had been told “more about my own female anatomy, this is HUGE in regards to your sexuality and sexual response” (AO). Women felt as if their sexuality education prior to coming to college was lacking in female specific sexuality education.

The women in the comprehensive group seemed to have received general education regarding sexual organs, but what was lacking was the correct use of terminology and diversity. For example, one woman expressed her frustration regarding the terminology used. She stated,

Body parts are named for a reason and they each have their own functions. In this case, I wish both my teachers and peers would have talked about a body part by its respected title and not by what our society deems okay. For example, I have spoken to many women who hate their breasts being referred to as ‘tits’ or ‘boobies’ because those names are degrading to them, and we find it childish and unappealing. Although these names are accepted by society, with ‘save the boobies’ movement for breast cancer awareness. Even though my teacher may not have used those names, it would be beneficial if they would have been more eager for us to talk about each body part by the correct title. (C)

In addition, one woman wanted to be “taught that every individual is different in how their sexual organs look, how they react to different stimulation, and that it’s okay to not be exactly like everyone else” (C).

**Physiology.** Physiology encompassed women wanting to understand how things function. Women described wanting to know more about physiology in three unique ways: (a) hormones and brain chemicals, (b) sexual arousal and response, and (c) menstruation and reproduction. All three groups mentioned wanting to know more “about sex hormones and the impacts they have on the body” (C). Specifically, they wanted to know more about what was going on chemically within the body such as the “dopamine that is released” (AO).

Related to hormones and brain chemicals, but also distinctive in the way the women discussed it, was sexual arousal and response. One woman shared that she wished she had learned more “about the male and female sexual responses” (AB). In addition, a few of the women identified how they wish they would have learned more about “masturbation and how women can do it” (C); “it wasn’t until late in my high school years that I knew girls could also masturbate” (AB). Women also wanted to know more about stimulation, including erogenous

zones. The women in the abstinence-based group had the most responses relating to physiology and their responses provided more detail regarding their wishes of learning more about desire, foreplay, and orgasm. These women expressed wanting to know more about the “relationship between sexual arousal and desire leading up to intercourse” (AB). Another woman stated, “I don’t need to have sex with people to have pleasure...it’s not my fault if I can’t orgasm” (AB).

Women wanted to learn more information regarding menstruation and the reproductive system. Women wished they had received “healthy reproductive health information” (C). Many of the women expressed they did not learn enough about “how the reproduction system works” (C). Some women stated they wanted “more in-depth education about phases of pregnancy” (AB) and “more about how one gets pregnant” (AB). Other women mentioned wanting to know more about “menstrual cycles (when they start, when they end, more on the ‘timeline’ and definitions of them),” (AB) “menstruation abnormalities” (AB) and “the female cycle of ovulation” (AB). Going along with both reproduction and menstruation, one woman stated,

...they never taught us Natural Family Planning from a positive standpoint. NFP would have been such an interesting topic to learn about when I was younger. This way, we naturally can feel in control and in-sync with our bodies. I also wish I would have been taught the positives about having a period, and that it is normal for women and in-fact a potential sign that we are sexually/physically healthy. (C)

### **What is sex?**

*Meaning of sex.* Women from all three groups wanted to know about the meaning of sex. Women wished they had been told that “sex is an important thing, and a big decision” (C); it “really isn’t worth rushing into” (AB); and “it is the best gift you can give your spouse” (AO).

*The act of having sex.* The act of having sex includes what forms of sexual activity is considered sex, what sex entails, how it happens, how it feels, what to expect, who it is for, and what is the goal. A few women specifically mentioned wishing to have known more about “oral sex...what it is, if you can get STDs from it...” (AO) and “that oral sex can be considered sex, and has many risk factors as well” (C). All the rest of the women who mentioned wanting to know more about the act of sex either had received abstinence-based or abstinence-only sexuality education.

Many of the responses from the women who had received abstinence-based sexuality education spoke generally. Women wished they had been taught “anything really about sex because not knowing much about it growing up made me have to go explore and figure it out myself essentially” (AB), “how sex is supposed to feel” (AB), and “what to expect your first time” (AB). Only one woman in this group discussed the act of sex more specifically when she stated she wished she had learned “that sex is not about just getting a man to completion” (AB).

The responses from the women who had received abstinence-only sexuality education were a bit more specific in their responses. They wanted to know “more about what to expect” and more about the details. One woman stated, “They never talked to me about the details of sex or how it happened or anything” (AO). Women in this group also wished they would have asked about “how sex really works” (AO). One woman stated, “up until marriage, I had no idea how my body or my partners’ bodies worked” (AO). These women also wished they had known more about “what is normal and what is abnormal relating to sexual activity” (AO). One woman expressed how she did not feel like her sex (as a lesbian) was ever explained as being normal. Finally, women expressed that sex may be “awkward and uncomfortable” (AO).

*Implications of sex.* Women also wanted to know the implications of sex. One woman wrote that she wished she had been taught the “different things that can happen when you have sex” (AO). Two main themes emerged from this subcategory: positive implications and emotional implications of having sex. The participants explained that they learned negative implications of sex, but also wanted to learn about positive implications. Women said things like wanting to know more about “the different aspects and consequences” (C) as well as “more about the benefits of sex” (AO). “Not just the negatives of sex but also the positive and the good things about sex...what sex is designed to be” (AO).

Women in all three groups desired to learn more about the emotional implications of having sex. Many of them expressed that the physical aspect was shared, but there was not enough on the emotional aspect. “Sex is just not a physical act, but also emotional and can affect you in the future if you have flippant encounters” (C). More specifically, they expressed being curious about what feelings are involved and if it is different based on gender.

I wish I had been told more about the importance of being with someone emotionally before you decide to be with them sexually. I knew that generally it was a good rule of thumb to be emotionally connected to someone before you sleep with them, but I was never told how important that is and why. I never knew how much more meaningful sex could be if both partners are committed to one another and how important emotional security is for a girl. (C)

A woman who received abstinence-based sexuality education stated, “I wish I would have asked about feelings after having sex with emotional connection. Also, more about how you would feel after having sex with someone that you weren’t dating” (AB). A woman from the abstinence-only group stated that she wishes she had been told

that boys heads are sex based and women's sex lives are emotionally based. In the end no matter how much a girl thinks she's just using a boy, in the end she's going to be emotionally damaged with the more sexual partners she has because it is not what she is looking for in sex, unlike men. (AO)

### **Sexual assault and consent.**

Women wished they would have learned more about sexual assault, including (a) pressure, (b) consent, (c) saying no, (d) coercion, (e) rape, (f) violence, and (g) assault. One woman stated she wish she had learned,

That people (men) will pressure others into having sex, or at least try to. It's so degrading how many women I have spoken to who had a rough experience where they didn't want sex, but they felt pressured into it. I know many more women whom have regretted having sexual intercourse with a man, but I have not met one person who has regretted not having sex at that time. It's interesting how many people think it's 'natural instinct,' yet I wish I had been told that it's also acceptable to say no and to talk first. (C)

Women from the comprehensive and abstinence-based groups described wanting to know more about consent, especially in the context of college campuses. The women did not feel like they were prepared for this epidemic prior to coming to college.

I never had a healthy understanding of consent prior to college. I knew I had a right to my own body, but I didn't know the logistics of consent. I feel like a lot of girls come to college and are sexually assaulted, but have no idea what even happened or if they should say anything. They need to teach high school students/middle school students about consent, not only to prepare them for college, but to prepare them even for high school. (C)

Another woman agreed by saying,

The only thing I wish I would have been taught about prior to college was sexual assault and college campuses. There's a huge issue and I believe the only way to start putting an end to this epidemic is to teach not only women to be careful, but teach the men the whole consent problem and what it means and why it's important. (AB)

Women from these two groups also described wishing they would have known more about what sexual assault consists of and that "penetration is not [the] only form of rape...I wish I would have been taught about sexual coercion" (AB). In addition, women wanted to know "more about how common rape is" (C) as well as the signs "and how to look for it, and how to be more prepared for events such as these" (C) Finally, some of the women mentioned how they wished they would have known more about the aftermath of rape and the stigma that exists.

I wish I had been informed more of the actions needed for a person who has been raped. Yes, that is a hard topic to discuss with high school students. However, with all that is happening in our country and within the last few years of college, I believe it is never too early to begin warning students of the aftermath of a rape and what you can do to protect yourself in the event of an unwanted STD. And it would just be nice to know that there are people out there who want to help you rather than fearing the stigma followed by a rape. I think the sooner we can inform students of what to do in the event of a rape, the better protected we can make ourselves. (C)

One of the big differences between the groups was that the abstinence-only group identified helping friends with sexual assault, but did not use any wording that portrayed that it could happen to them. Women in this group wanted to know more about "how to comfort someone who has been through sexual trauma" (AO) and "how to deal with people who have

been sexually assaulted... and how to better handle situations where a sexual assault may be taking place” (AO). These women indicated it was an important issue, and they wanted to help other people who may face sexual violence.

### **Findings among Comprehensive and Abstinence-Based SBSE**

Although the issues addressed above were identified across all three types of sexuality education, there were some unique findings that varied by type of sexuality education. Women who received abstinence-based education indicated they wanted to learn about communication and how college culture is different from high school. Women in both the comprehensive and abstinence-based groups wanted to know more about LGBTQ+ and sexual health and resources. Women who received abstinence-only education did not report these issues.

#### **Communication.**

Women expressed wishing they had learned about “communication with your partner” (AB). One woman was more specific and identified that she wished she had learned more about “how you should talk about not only likes and dislikes, but personal frequency preference differences and how to bring up testing” (AB). It was apparent in the responses, that women from the abstinence-based group felt as if they did not receive adequate information regarding how to communicate about sexuality.

#### **College culture.**

Women wished they had learned more about how college culture is different from high school, including how casual or serious the relationship is when having sex. Women discussed wishing they would have learned more about “how to choose a partner wisely” (C) and “what happens after the relationship with your first love ends, or first partner” (AB).

A unique finding in the data is that only women who received comprehensive education emphasized wanting to have learned more about casual relationships and the “importance of the relationship before sex” (C) and “that having meaningless sex doesn’t feel better and doesn’t make guys like you” (C). One woman mentioned wishing she had learned “how casual dating and hooking up changes in a college setting” (C). “The terms we use mean different things to different people. For example, ‘hooking up’ meant something different to my friends and I in high school than it does to my friends and I now” (C).

In addition, they shared wanting to know the implications of multiple sex partners. One woman shared that she wished she would have been warned, “Don’t have multiple sex partners” (C). Other women wanted more information about “partner exposure and what that means, and how that can affect people” (C) as well as “multiple partners effects” (C). Women in the comprehensive sexuality education group wished they had been told to be more careful about casual sexual relationships or multiple sexual partners. No women in the other groups shared anything regarding casual relationships or wishing they would have learned more about how important the relationship is when having sex.

Women also wanted to know more about the context in which hooking up and casual relationships may happen, including “more about the party scene and how that impacts your decisions” (AB). One woman expressed her wish for being told,

about the ‘hooking up’ culture we have on college campuses. We basically talked about what happens in high school when you have sex, they didn’t really cover the aspect of college and what that looks like. Things such as hooking up, drinking, date rape, things like that. (C)

**LGBTQ+.**

Women who received comprehensive or abstinence-based sexuality education wanted to learn more about sexual orientation and gender identity. One woman expressed how she thinks that sexual orientation and gender identity do not get discussed as often as it should, especially given that not everyone is heterosexual or cisgender. She wrote,

I wish we had talked more about sexual orientation and gender identity. I think this is a topic that most don't think about covering when you think about "sexual education." I know it might be kind of controversial, but I think it's important to talk about because not everybody will necessarily fit in to the "normal" category of heterosexuality and I think the more we talk about it, the more open I think people will be about those that are different from them. (C)

***Sexual orientation.*** A few women discussed how they wished they would have learned that "sex and sexuality are on a spectrum" (AB) and "what other sexualities there were; transgender, homosexual, etc." (C). They also shared that they wished they would have learned more about the relationships that people with such identities have. One woman stated that she wished the sexuality education she received would have acknowledged that "there are different types of parents (e.g., two moms, two dads)" (AB). In addition, one woman expressed how she wished she had learned more about sex between same sex or gender relationships. She stated,

I am a lesbian and we RARELY talk about woman/woman or man/man sex during sex education. When I was going through education I did not find it a problem because I did not realize I was gay but now looking back, I wish I would have known more about how to practice safe same sex relationships or that my sex was normal. For others it may have made their coming out process easier (AB).

**Gender identity.** Women expressed wishing they had learned more about the “differences between sex and gender” (AB). More directly related to gender, but also connected to same sex or same gender relationships, one woman stated,

I understand little to nothing about the logistics of transsexual sexual activity. It is a complicated subject given the various options for transitioning and subsequent sexual expression. I wish there had been a situation where it was appropriate and encouraged to ask questions without causing accidental offense. (AB)

**Sexual health & resources.**

Women expressed how they wish they had learned more about sexual health and what resources were available to them. For example, women stated that they wished they had known “what we need to do to protect our sexual health” (AB), and “what a pap smear was and when I needed to get one” (AB). Women also stated that they wished they had known more about “what happens during a well-woman exam, fungal infections that are not STD related (effects of bad hygiene), what we need to do to protect our sexual health” (AB) and asked more about

how to look for signs of not only STDs, but also asked about signs of ovarian cancer, breast cancer, etc.... I feel as though we all know it is something to be aware of.

However, I do not feel as though I really know the signs that we should all be looking for.

(C)

Finally, one woman wanted to know if it is “bad if I lie about my sexual activity for a physical examination? Is there something wrong with me if I don’t enjoy sex?” (AB).

Many of the women also wished they had known more about how to go about getting resources to fulfill their sexual health needs. “I wish I had been more aware of the resources out there” (C). Women wanted resources “regarding STDs, pregnancy, sex and desire” (AB).

## **Findings Among Abstinence-Only**

Women in the abstinence-only SBSE seemed to be on opposite poles; either they wished they had learned much more about sex and sexuality or they felt confident with what they had received. Women expressed “I wish I had asked about anything and everything” (AO) and wanted to know “really just more about sex in general” (AO). Other women in this group felt confident in their sexuality education. One participant discussed how not knowing in high school made it easier because there was not as much to worry about. “I was pretty oblivious in high school about having sex or the effects of having sex. Honestly, I don’t regret that because it kept my life simple” (AO). Women in this group either loved their education and felt confident in their sexual selves or they felt like they barely learned anything and wished they would have learned about everything.

## **Discussion**

The aim of our study was to explore what college women wish they had learned in their SBSE. The findings of this study answer the following research questions: (a) *What kind of formal sexuality education do college women wish they had received prior to college?* and (b) *How do the responses of college women who received comprehensive sexuality education, abstinence-based sexuality education, and abstinence-only sexuality education compare?* Across all three types of sexuality education, women wish they learned more about (a) safe sex, (b) empowerment, (c) anatomy & physiology, (d) what is sex?, and (e) sexual assault. Additionally, the women who received comprehensive and abstinence-based SBSE wish they learned more about (a) communication (AB only), (b) college culture, (c) LGBTQ+, and (d) sexual health and resources.

These findings are similar to research findings in countries other than the United States of America, including New Zealand and the United Kingdom (Allen, 2005; Allen, 2008; Byers et al., 2017; Forrest et al., 2004; Hirst, 2013). Similarities include content such as: (a) safe sex, including contraceptives and STIs; (b) anatomy & physiology, including sexual development and pleasure; (c) the act of sex and the emotions involved; (d) LGBTQ+; and (e) sexual health resources. Although similar to previous research, the results of this study also contribute new information and expand on Rubinsky and Cooke-Jackson's (2017) study on memorable messages in sexuality education in which women and gender minorities remembered learning about abstinence, protection, and safety and wanted more messages of positivity, pleasure, and diverse sexuality and gender affirmation. The findings of this study emphasize cisgender women's needs in SBSE. Specifically, women in this study desire more information on (a) female forms of prophylactics and contraceptives, (b) empowerment, (c) female anatomy and physiology, (d) the meaning of sex, (e) communication, and (f) college culture.

The responses from women who received comprehensive and abstinence-based SBSE produced many of the same themes. Although there are many similarities in the C and AB responses, some unique differences are also present. For example, only the AB women discuss communication and its association with likes and dislikes. The comprehensive women may not have shared this because they received this information and the AO women may not have mentioned it because they were focusing more on the behavioral aspect of sex that was missing from their SBSE. In addition, women in the comprehensive group stress needing information on college culture much more than those in the abstinence-based group. Comprehensive SBSE does not have an abstinence lens and many of the women describe how their SBSE made it seem like having sex outside of marriage is okay as long as it is safe. It could be that without an underlying

idea, value, or perspective, sex is discussed or thought about too flippantly and lacks the emotional aspect of what comes with it, in turn, being a surprise for women when they go to college and experience a new culture of sexual relationships.

Although responses from women who received abstinence-based SBSE are typically similar to those who received comprehensive SBSE, those who participated in abstinence programs are similar as well. Women who received AB or AO SBSE indicate they wish their education would have reduced the shame of having sex before marriage and they wanted to learn more about the actual act of sex. None of the women in the comprehensive group address these issues. Perhaps this is because they felt other topics were more important, or they felt this topic was covered well. In addition, the act of having sex was emphasized as a missing element in AB and AO, with only one comment from a woman in the comprehensive group. Thinking about what AB and AO sexuality education includes and from what lens they are teaching (abstinence is best), perhaps the act of having sex is not discussed because the goal is for the women to abstain from sex and they, therefore, do not need the details.

In addition, there are differences between women who received AO SBSE and those who received C and AB. For example, those in the AO SBSE group did not discuss sexual assault in relation to themselves, but instead, wanted to know how they could help their friends, while women in C and AB both discussed sexual assault and consent as important parts of their own sexual selves. Are women in the AO SBSE receiving a discourse with more sexual agency and, therefore, they feel like they have control over preventing sexual assault?

### **A New Discourse of Agency**

The responses of these women provide information that is central to our understanding of society and women's experiences (Smith & Hamon, 2017). One of the key assumptions of

feminist family theory is that there is consideration of the power differences regarding sex and gender (Smith & Hamon, 2017). Sexuality education programs tend to ignore gender and power (Haberland & Rogow, 2015). This results in failing to empower young people, especially young girls. In addition, ignoring gender and power results in failing at assisting young girls to view themselves as capable of making decisions about their sexual selves and viewing themselves as an equal member in a sexual relationship (Haberland & Rogow, 2015), instead of feeling like their needs are not important (Allen, 2008).

The women in this study disclosed what may be missing in SBSE. When one is not fully educated about a topic, it is hard for a person to make decisions and to have agency. Therefore, the results of this study call for empowerment and agency to be incorporated more into SBSE. Sexual empowerment can be conceptualized in many ways and on multiple levels (Peterson, 2010). Three sub-components of psychological empowerment have been identified – intrapersonal, interactional, and behavioral empowerment (Zimmerman, 1995). The intrapersonal component refers to (a) feelings of sexual self-efficacy, desire, and pleasure; (b) awareness of options and resources needed to achieve desired goals; and (c) decision-making and problem-solving skills (Zimmerman, 1995). The interactional component refers to the knowledge about (a) experiencing sexual pleasure, (b) their sexual wants and desires, and (c) how to communicate such needs and desires to their partner (Zimmerman, 1995). The behavioral component refers to the actions taken to produce desired outcomes. This would correspond to taking action regarding their sexual values and desires and then asking for such things, refusing the unwanted, and exploring their sexuality in a positive and healthy manner (Zimmerman, 1995). According to Spencer, Maxwell, and Aggleton (2008), empowerment refers to self-efficacy and perceptions of control, the power to set the agenda, and challenging dominant discourses. These women's

wishes and desires suggest that SBSE content needs to be taught through a sexually agentic lens. They want to be understood differently from how some sexuality education has viewed them, one in which women's role is passive or not as important, and instead, desire a sense of control and their needs to be significant in SBSE.

Researchers have found that sexual agency is important for both men and women because it predicts sexual functioning and sexual satisfaction (Sanchez, Fetterolf, & Rudman, 2012). "Sexual agency is linked to perceptions of sexual experience" (Fetterolf & Sanchez, 2015, p. 968) and this is what came out the women's responses in this study as well. Many sexuality education programs have moved to including sexual agency within their curriculum; however, it is still often done in a manner that incites sexual blaming and shaming. This neoliberal discourse of sexual agency does not truly allow for true agency of women (Bay-Cheng, 2015). In actuality, the neoliberal discourse of agency hides behind the idea that individuals have the free will to make their own decisions, while ignoring the social barriers that stand in the way and are stunting the progress of true agency for women.

This discourse does not take into account the social obstacles that exist for women. Instead, it reinforces the idea that women have sexual agency and that they should act as gatekeepers, deciding how far to go in sexual interactions. This puts women into a victim role if something happens that they may not have desired and they blame themselves, thinking they were in the wrong because they were not assertive, savvy, and/or in control enough (Bay-Cheng & Eliseo-Arras, 2008; Hlavka, 2014; Phillips, 2000). The neoliberal discourse views victims as responsible for what happens to them and ignores that being a victim is "the result of violation by another person, systemic injustice, or even just bad luck; it is the manifestation of ones' ineptitude as an agent" (Bay-Cheng, 2015, p. 286). This message perpetuates the role of women

and suggests that they are responsible for the behaviors of others (Rubinsky & Cooke-Jackson, 2017). “Neoliberal ideology is not an affirmative celebration of agency; instead, it is the hegemonic institution of agency, deviation from which brings social sanction,” instead, it places personal responsibility on women, using the idea of: “do what you will, but at your own risk” (Bay-Cheng, 2015, p. 283).

Although the women in this study discuss many topics and content about which they wish they had learned more, it leaves one questioning if simply adding more of these topics in SBSE will be enough. The discourse with which sexuality education is being taught is incredibly important because it has “ramifications for what can be taught about student sexuality and how it is enacted. It is this point that has implications for sexuality education’s conceptualization and delivery” (Allen, 2008, p. 575). If we continually teach SBSE through a neoliberal lens, women may still not feel confident in who they are as sexual beings or in their sexual experiences.

### **Implications**

The findings of this study have implications for policy, SBSE curriculum development, and SBSE delivery. Sexuality education cannot be taught strictly as a personal matter for women because the personal is political (Allen & Baber, 1992; Mann, 2013). Policymakers have the ability to change what our sexuality education looks like in the United States. Therefore, they are in control of changing the narrative that is often shared in our SBSE. The neoliberal lens through which sexuality education is taught is an underlying issue that requires change in order to provide women with adequate and empowering SBSE. Using feminist family theory (Osmond & Thorne, 1993; Smith & Hamon, 2017), social change is necessary and we must change how we talk about sexuality content and women’s sexuality so that women can be properly educated, informed, and prepared for what they may experience after high school. It is important for sexual

agency and empowerment to not be defined as women being gatekeepers (Bay-Cheng, Bruns, & Maguin, 2018), but to instead move toward sexual agency and sexual citizenship, “which connects the personal to the public and provides a language to talk about sexuality as part of citizenship that includes rights, responsibilities, equality, and belonging” (Miyazawa, 2017, p. 18). Individuals, communities, and cultures hold diverse sexual values and everyone deserves the access to assistance in helping one determine what those are for themselves. Therefore, we must seek to educate and empower people to advocate for a new discourse. This can be done by going into the schools, talking to the parents, administration, and school board. In addition, each person has an effect on policy by voting in local, state, and national elections. Everyone has a role in this change, as it is a change that must be made through how we talk and communicate.

### **Limitations & Future Research**

Although the results of this study contribute to the sexuality education scholarship by sharing what college women in the U.S. wish they had learned prior to coming to college and how these desires are similar and/or different across SBSE approaches, we acknowledge that there are limitations to this study. A Qualtrics (2018) survey was utilized and appropriate to allow for anonymity of the women to recall sensitive information. This resulted in a breadth of information; however, surveys prevented us from asking follow-up questions, which would have provided richer data. In addition, some participants did not answer every question in the survey. If the questions were asked in person, there would most likely have been less of a chance for missing data. Future research should seek to conduct interviews or facilitate focus groups. These methods could enhance the probability of women providing fuller answers and offer a deeper understanding of what education women should receive before college. In addition, the sample was taken from a Midwestern university; more information should be gathered on women across

the U.S. and a more intersectional lens should be used to further examine this topic to account for the many identities that women hold (Bay-Cheng, 2012). Finally, more research on how neoliberal agency affects women's understanding of their SBSE and their sexual selves is necessary to determine what needs to be changed regarding SBSE.

### **Conclusion**

To address the content needs of women, we must first address the discourse in which sexuality education is taught. This study enabled college women to look back and reflect on what content they wish they would have received in their sexuality education programs. We need to provide more voice to women in our sexuality education programming and delivery. The need for sexual empowerment and sexual agency within the discourse is apparent in their calls for the content they wish they had received and it is the responsibility of program developers and facilitators to better serve our populations. Action must be taken to better serve women in sexuality education to ensure sexual health and well-being and this requires attention to how we discuss sexuality.

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## **Chapter 3 - Paper 2: “I Wish They Would Have a Class for Parents About Talking to Their Kids About Sex[uality]”**

### **Introduction**

It is normal for adolescents to be interested in and curious about sexuality (Malacane & Beckmeyer, 2016). Many young people report they would like to discuss sexuality with their parents (Brock & Jennings, 1993; Holman & Koenig Kellas, 2018; Jaccard, Dodge, & Dittus, 2002); however, adolescents do not always know the right questions to ask or what they need to know. Parents also are reluctant to discuss sexuality with their children (Fitzharris & Werner-Wilson, 2004).

Prevention programming attempts to provide services and information that will be used to reduce negative outcomes. Although facilitators may ask about the felt needs, it can be difficult to guess what one needs to know in the future. Conducting a needs assessment to gain felt needs is not always going to provide enough information to understand the true needs of participants; therefore, facilitators of such programming often ascribe needs to the participants. To have a better understanding of these ascribed needs, it is important to understand what people feel would have been helpful in their education by asking them retrospectively.

Some researchers have begun to gather information from adults about what their needs were as young people. For example, Brock and Jennings (1993) asked women in their 30s what they wish their mothers had told them about sexuality, and their findings led “to the conclusion that most adult daughters believe their mothers provided an inadequate sexuality education” (p. 65). This research provides an understanding of what adult women wish they would have learned from their mothers, but it does not provide information about other sexes or genders. This study also did not look at how the women wished their mothers would have spoken to them about

sexuality. In addition, this research was limited in that it may be hard for the women in their 30s to remember much about their childhood education. Asking younger individuals, such as college students, may provide less flawed recall responses. Human sexuality courses are offered on many college campuses (Jones & Abes, 2003) and taking one provides “opportunities for students to self-assess what they knew before and after the course in light of the course content itself” (Rutledge, Siebert, Chonody, & Killian, 2011, p. 482). Therefore, the following study sampled college students who took a human sexuality course in college and asked them what they wished their sexuality education from their parents would have been like.

## **Review of Literature**

### **Parent-Child Sexual Communication**

Many young adults consider their parents an important source of sexual information (Albert, 2010) and want their parents to serve as a primary role in their sexuality education (Guilamo-Ramos et al., 2015). Parent-child sexuality communication has served as a protective factor during adolescence (Dittus, Jaccard, & Gordon, 1999). Parents who communicated with their children about sexuality had children who delayed sexual activity (Whitaker & Miller, 2000), engaged in reduced sexual risk taking (DiIorio, Kelley, & Hockenberry-Eaton, 1999; Hutchinson, Jemmott III, Jemmott, Braverman, & Fong, 2003; Jaccard & Dittus, 1991; Markham et al, 2010; Miller, Levin, Whitaker, and Xu, 1998), and used contraception and condoms more frequently (DiIorio, McCarty, Resnicow, Lehr, & Denzmore, 2007), especially when the sexual communication with their parents was warm, open, and comfortable (Huebner & Howell, 2003; Karofsky, Zeng, & Kosorok, 2001; Luster & Small, 1994; Miller, 1998). The frequency and timing of this sexual communication was found to be crucial to conveying expectations regarding the child’s sexual behavior (Regnerus, 2007). On the other hand, adolescents who have

not engaged in communication about sexuality with their parents were more likely to report low self-efficacy of condom use, having multiple partners, and having used alcohol or drugs before having sex (Crosby, Hanson, & Rager, 2009).

Parents face many barriers that make it difficult to have sexual conversations with their children (Hutchinson & Cooney, 1998; Malacane & Beckmeyer, 2016). Parental embarrassment and discomfort (Morawska, Walsh, Grabski, & Fletcher, 2015), perceived lack of accurate information, and poor communication skills contributed to parent-child sexual communication difficulty (Hutchinson & Cooney, 1998; Jaccard, Dittus, & Gordon, 2000). The extensive research has provided knowledge of the benefits of the frequency, timing, and quality of parent-child sexual communication as well as identifying the barriers that exist to have such parent-child sexual communication.

Researchers have examined which sexual topics have been generally discussed by parents with their children (DiIorio et al., 1999; Grossman, Charmaraman, & Erkut, 2016; Grossman, Richer, Charmaraman, Ceder, Erkut, 2018; Hutchinson & Cooney, 1998). The most common topics discussed included: (a) dating relationships, (b) safe sex/STIs, (c) waiting or delaying sex (Goldfarb, Lieberman, Kwiatkowski, & Santos, 2018; Grossman et al., 2018; Sneed, 2008), (d) pregnancy, (e) consequences of sex (Beckett et al., 2010; Eisenberg et al., 2006; Stauss, Murphy-Erby, Boyas, & Bivens, 2011), and (f) anatomy and physiology (Beckett et al., 2010; Eisenberg et al., 2006; Lefkowitz, 2002). Topics discussed the least included: (a) pleasure, (b) masturbation (Elliott, 2010), (c) where to obtain condoms and birth control (Eisenberg et al., 2006), (d) how to use a condom and/or choose a birth control option (Beckett et al., 2010), and (e) to only go so far sexually for right now (Sneed, 2008).

Parents have a critical role in assisting their children on every aspect of their development, including sexual development, because development is situated within context and social environments, and parents influence children's development (Baltes, 1987). Parents acknowledge this role; however, they often do not feel comfortable discussing sexuality with their children (Ballard & Gross, 2009; Jaccard et al., 2000; Malacane & Beckmeyer, 2016). This results in an avoidance of the subject (Ballard & Gross, 2009) and adolescents feel closed off from seeking out information from their parents (Goldfarb et al., 2018). Parents are missing out on a critical conversation with their children where they can convey expectations and help guide their children in making healthy sexual choices.

### **Parents' Perceptions of Parent-Child Sexual Communication**

Data have been collected to understand the parents' perspectives of parent-child sexual communication. According to Jaccard et al. (2002), 70% of parents indicate they have had sexual communication with their children and 50% of adolescents indicate they have not had sexual communication with their parents. This shows that many parents feel they are already talking to their children about sex, but the children do not agree with this. This could be based on how the parent is talking about sex.

In a study of 557 Australian parents, it was reported that parents felt knowledgeable, confident, comfortable, and anxious when their child posed sexuality questions. They felt that they did a good job of (a) not teasing their child about sexuality, (b) staying calm when their child asked a sexuality related questions, (c) using correct terminology, and (d) expressing comfort (Morawska et al., 2015). Parents wished to have open communication with their children and to share the knowledge they have (Grossman et al., 2016). Parents felt "least confident in starting up a conversation about sexuality with their child" (Morawska et al., 2015, p. 244).

According to Elliott (2010), children are an important part of how parent-child sexual communication begins. Many mothers “wait for cues or questions from their children before they initiate a conversation about sex. That is, they do not talk about sex unless their children explicitly ask them to do so” (p. 313). When a parent is the one to bring up a sexual conversation, parents often feel resistance from their child.

### **Adolescents’ Perceptions of Parent-Child Sexual Communication**

Adolescents perceived their parents to have more influence on their decisions about sex than their peers, siblings, and the media (Albert, 2010). “Over 80% of teens in the study believed that more open and honest conversations with their parents would help youth to make better decisions about sex” (Albert, 2010, p. 182). Youth wanted their parents to approach sexual communication in a more laid-back fashion (Stauss et al., 2011). Adolescents understood that sexual communication is difficult; however, they also believed it to be important (Richardson, 2004). Sampling adolescents provides a here and now understanding of what adolescents prefer in their parent-child sexual communication; however, more insight may be gained by sampling college students who retrospectively think about their parent-child sexuality communication after taking a human sexuality course.

### **College Students’ Perceptions of Parent-Child Sexual Communication**

Researchers have utilized college students’ perspectives to understand parent-child sexual communication (Rutledge et al., 2011). In a study of 333 undergraduate students, the majority of college students indicated little satisfaction with the way they learned about sexuality (Rutledge et al., 2011). Of this sample, 67.1% of college students indicated that parents should have been the primary source of information for learning about sex, but only 15.5% stated their parent was the main source. When asked what topics were discussed in parent-child sexual communication,

it was found that the majority of the students discussed personal hygiene (85%), menstruation (80% for female students and 40% of male students), what to look for in a mate (70%), and pregnancy (60%). However, more than half of the students stated that they did not discuss birth control methods or STIs with their parents and only 34% discussed how far to go on a date (Rutledge et al., 2011). This research provides a glimpse into what content or topics may be missing in parent-child sexuality communication.

In addition, students expressed that the most significant barriers to parent-child sexual communication included the following: (a) the child feeling embarrassed to ask, (b) the child being afraid of the parent's reaction, (c) the parent never bringing up the topic, (d) the parent seeming embarrassed when child asked, and (e) the parent giving a lecture instead of answering questions from the child (Rutledge et al., 2011). These findings provide insight into what college students perceive the barriers to be regarding parent-child sexual communication. Although knowing the barriers to parent-child sexual communication is important, it is essential to understand *how* college students wish their parents communicated with them about sexuality. Understanding how this communication should occur may help reduce some of the barriers.

### **The Present Study**

The present study was conducted qualitatively to examine what methods college students wished their parents would have used to engage in parent-child sexuality communication. The following research question guided this study: *How do college students wish their parents had discussed human sexuality with them prior to coming to college?*

### **Theoretical Framework**

This study utilized a life-span development perspective. Baltes (1987) developed a set of seven principles to guide this framework, and this study will focus on two of these principles.

According to Baltes (1987), development is a lifelong process. This principle holds that development happens throughout the lifespan and there is no decline. In addition, it holds the belief that development may emerge throughout the lifespan and, therefore, development may not be present at birth. This study asks participants to think retrospectively because people's knowledge of feelings about sexuality and sexuality education change over time as they are exposed to different messages about sexuality (Rutledge, et al., 2011).

Another principle of lifespan development is that development is situated within context (Baltes, 1987). Social environments can affect the development of an individual and it is important to understand how development differs based on such contexts. For this study, the participants were asked to think about the sexuality education they received from their parents. Thus, the parents providing the sexuality education was the context that affected the participants' understanding and development of sexuality.

## **Methods**

### **Procedures & Measures**

After receiving Institutional Review Board approval, recruitment began by going into Human Development and Family Science senior level capstone courses and the Introduction to Human Sexuality course at a Midwestern university near the end of the semester from the spring of 2016 through the fall of 2017, excluding summers. In these courses, a brief description of the research was provided and a Qualtrics (2018) survey link was sent out to these students through the education portal. Upon receiving the invitation, participants were directed to the Qualtrics (2018) survey and consent form. The consent form indicated that the study was being conducted to explore what college students wished they had learned from their parents regarding sexuality prior to coming to college. It indicated that there was limited risk, but if discomfort was

experienced, participants were advised to seek assistance from a local counseling service agency whose contact information was provided. Confidentiality was assured and participants were provided information regarding the possible implications of the results and findings (see Appendix A).

Once participants consented, they were directed to the survey questions. A Qualtrics (2018) survey was used to gain in-depth descriptions about parent communication about sexuality (see Appendix B). This was done through the utilization of both closed-ended and open-ended questions. To begin, the participants were asked to identify the type of sexuality education they received from their parents prior to coming to college. Participants were provided four options: a) abstinence-only, b) abstinence-based or abstinence-plus, c) comprehensive, and d) other. Definitions for each type of education were provided based on Advocates for Youth's (2001) definitions. Participants who selected "other" were asked to describe their education and provide some explanation.

The participants were then asked to answer a few open-ended questions. Sentence stems were utilized to help guide participants in answering questions regarding their sexuality education. This procedure left the questions open to the participants' interpretation, but still provided some structure and control by the researcher (Campbell, 1957). Each of the sentence stems were asked retrospectively. Retrospective sentence stems were chosen because they assisted in gaining insight into the knowledge the participants learned about the sometimes-sensitive subject of human sexuality. The sentence stems utilized in this study were developed based off sentence stems used in a study asking educators to reflect upon their own sexuality education (Klein & Breck, 2010). In addition, the sentence stems developed below were influenced from questions asked to adult daughters about what they wish their mothers had told

them about sexuality (Brock & Jennings, 1993). The following five items were used for the analysis of this study:

*I wish I had learned about sexuality from...*

*I wish I had learned about sexuality when...*

*I wish I had learned about sexuality by...*

*How do you wish you would have learned this information?*

*When teaching about sexuality, I wish my guardian(s) had...*

Demographic questions were asked following the sentence stems. Questions included participants' birth date, place of birth, sex, sexual orientation, gender identity, ethnic and racial background, political party preference, religious affiliation, city of high school graduation, university major, university class level, and whether they had taken certain courses in Human Development and Family Science. The end of the survey provided a debriefing that included a list of local resources, including local mental health facilities, if any part of the survey produced triggering feelings or issues (see Appendix B).

## **Sample**

Participants were included in the analysis if they (a) answered at least one of the five sexuality questions used in the analysis of this study, (b) had either previously taken or were currently enrolled in the Introduction to Human Sexuality course within the Human Development and Family Science program at a Midwestern university, and (c) described that they received either abstinence-only, abstinence-based/plus, or comprehensive sexuality education from their parent(s) or guardian(s). This produced a sample of 112 college students.

Participants were fairly equally distributed in the three types of sexuality education they received from their parents: a) comprehensive (n=34, 30.4%), b) abstinence-based and/or

abstinence-plus (n=37, 33.0%), and c) abstinence-only (n=41, 36.61%). Participants were born between 1965 and 1997 ( $M = 1993$ ,  $Median = 1994$ ). They identified as White or Caucasian (80.4%), Multiracial (6.3%), Hispanic or Latinx (5.4%), Black or African American (4.5%), Chinese, (0.89%), and Middle Eastern (0.89%). We asked participants to identify their sex and gender identity. If the participant identified as female and woman, we classified them as a cisgender woman. All participants identified as cisgender, women and men. Participants also were asked their sexual orientation and identified as heterosexual (93.8%), bisexual (3.6%), and lesbian (0.9%).

### **Method of Analysis**

Data analysis began by importing the data from Qualtrics (2018) into a spreadsheet. From there, the data were cleaned to eliminate any participants who did not fit the criterion. Data were then read verbatim by the research team. The constant comparative method was utilized by the research team. We read the responses line-by-line to inductively identify themes (Corbin & Strauss, 2008). Descriptive coding was utilized to identify a word or phrase (Braun & Clarke, 2006). For example, in answering the question *When teaching about sexuality, I wish my guardian(s) had...* one respondent stated, “talked with me more about sex without judgment.” This was coded as “open” under the larger theme of environment. Meetings were then held to address the validity of the themes. If disagreements arose, coders discussed similarities, differences, and re-examined the data. Upon agreement, the codebook was developed and the first author went through the data once more for accuracy.

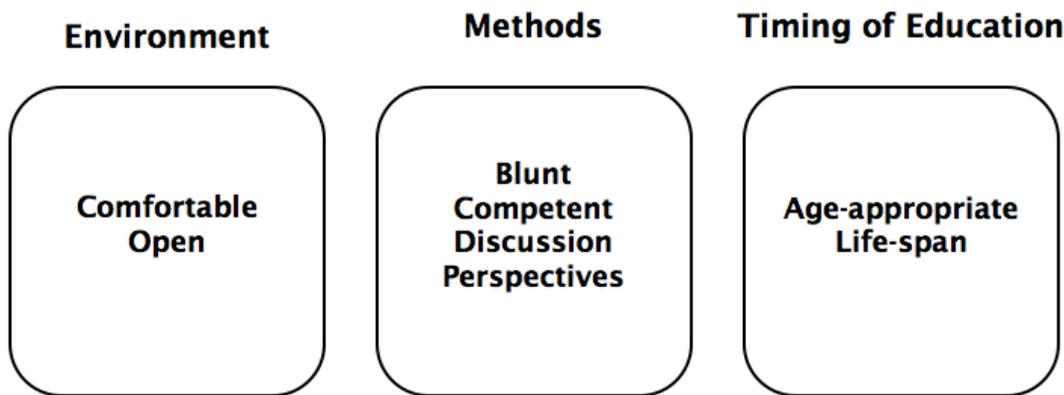
### **Results**

Although not directly asked, 44.6% of the college students sampled mentioned that their parents, often mothers specifically, should play a role in their sexuality education. A few

participants provided the content that they wish their parents would have addressed. Participants identified that they wanted their parents to provide “more information” and discuss “sex itself” and “sexuality in general.” They felt as if they did not get enough information from their parents. They wanted to know how complex sex is and “everything that goes with it,” including “how it can affect your life.” Overall, participants felt they were lacking parent-child sexual communication. Addressing how the participants wished their parents had approached parent-child sexual communication provided even more insight into what parent-child sexual communication should look like from college students’ perspectives.

### **How**

The findings of this study illustrate how (environment, methods, and timing) college students wished they would have learned about sexuality from their parents. Three categories emerged for how students wished their parents would have discussed human sexuality: (a) environment, (b) methods, and (c) timing of education. Students discussed the environment in which human sexuality should be taught, the methods they wished their parents had used, and when they wished they had learned this information (Figure 3.1).



**Figure 3.1 How do students wish their parents had discussed human sexuality with them prior to coming to college?**

**Environment.**

Two themes relating to environment emerged: comfortable and open. Many participants reported wanting the environment to be comfortable. They wanted their parents to discuss it in a “comfortable setting and in a very calm way” and to help them “feel more comfortable when asking and talking about sexuality.” They wanted their parents to have “not made it so awkward to talk about” or embarrassing. One participant shared that they appreciated the environment surrounding sexuality education from parents and explained that everything could have been done the same. “I think they respect my personal views of sexuality, so they did not press me with a lot of potential uncomfortable talks about sexuality, but they were always open and helpful to discuss anything I brought to them.”

In addition to the participants wanting a comfortable environment, the vast majority of participants reported that they wanted their parents to be more open and willing to discuss sexuality. One participant said, “I wish more students had an open-relationship with their parent of the same gender so that they could share their experiences with one another more fluently.” They wanted to have “had open discussions without judging” and had “been open to questions and willing to answer anything, no matter what. Whether or not I was not participating or interested in the sex questions I was asking about, having the information would be beneficial for future reference.” They wanted to “speak about it in an open manner,” one that was honest and “not trying to protect” them.

### **Methods.**

Four themes relating to methods emerged: discussions, perspectives, competence, and blunt. Most of the participants described how they wished sexuality education was done through discussion. They wanted “an actual discussion... rather than just saying “don’t do it. It’s a mistake and I will be angry if I find out you are doing something.” They wanted it to be a

conversation and to actually “talk about it,” instead of having the only conversation be: ““Are you a virgin?” ‘Yes,’ and that is the end of the discussion.”

Students desired for their parents to share their points of view, including “religious standpoints” and views other than abstinence-only or abstinence-based. They wanted to have conversations with their parents, but they wanted to learn more than simply to abstain; they wanted to hear the “positive views” as well. Along with positive views, participants described how they wanted their parents to not share their bad experiences with them because it made them afraid it would happen to them. One suggestion was to tell “more about their experiences of college and sexuality, NOT details, but stories they had heard or things they had witnessed.”

Along with wanting parents to have discussions that shared points of views, participants wanted these discussions to be filled with knowledge and information. They wanted their parents to share “about their knowledge on the subject and what is all out there.” “Adults are so afraid to educate their children on this subject, but it is important to them.” It was important to the college students that this education was accurate. One participant wished their [parent(s)] “had proper knowledge of everything so they could have properly informed me before I was 21-years-old and had already had sex.” Another participant felt like parents did not have enough competence to discuss sexuality with their children. “Honestly, I wish they would have a class for parents about talking to their kids about sex.”

Finally, the college students described how they wished their parent(s) or guardian(s) would have “been more blunt about it [sex] and talked about it openly rather than not talking about sexuality at all.” One participant described how they wished their parent had “sat me down and been straight-forward.” They wanted their parents to have a “frank discussion” with them.

### **Timing of Education.**

Students described wanting to learn about sexuality education through a lifespan perspective, with their parents sharing information throughout their childhood in age-appropriate ways. One participant stated they wanted it “gradually throughout my childhood.” Other participants agreed with this. “I think it should be something taught at different levels starting in grade school and increasing through high school.” Another desired it to be discussed by their parents starting in “kindergarten through my senior year of high school.” One student said:

From a young age, I think it could have been introduced appropriately. This could prevent exposure that an individual is not prepared for. I think this is especially true now because they [have] access to a lot more material nowadays because of technology and the internet and cell phones and the media.

## **Discussion**

The results of this study provide additional support for programming of parent-child sexual communication (PCSC). Specifically, it adds to Jaccard’s (1995) five aspects of parent-adolescent sexual communication: (a) frequency and depth, (b) style or manner, (c) content of information, (d) timing, and (e) general family environment or relationship. This study addresses the style or manner, also known as the context of communication (Jaccard, Dodge, & Dittus, 2002) by examining the environment and methods in which college students desired their PCSC. This study explores how college students wish their parents would have spoken about sexuality when they were younger. Specifically, it contributes what college students wish were the environment, methods, and timing of their PCSC.

College students report that they would have liked their PCSC to be more open and comfortable, similar to what adolescents have desired (Holman & Koenig Kellas, 2015). In addition, our results support the finding that parents should be competent in their PCSC (Miller

et al., 2009). Some unique contributions from this sample of college students include the desire for parents to be blunt when discussing sexuality with their children and to share different perspectives while using a discussion format. Finally, this study adds to the timing aspect of PCSC (Jaccard et al., 2002). College students identified the timing of the PCSC to be important and expressed that it should be done early, consistently, and age-appropriately. It is essential to begin facilitating sexual development early and continue it throughout life in age-appropriate ways (Widman et al., 2014) because development is a lifelong process (Baltes, 1987).

It is important to provide clear and practical instruction when assisting parents in their conversations and teaching them communication skills (Jaccard et al., 2002; Morawska et al., 2015; Walker, 2004; Widman et al., 2016). If the parent does not approach the conversation in a way that helps the adolescent feel comfortable, it is not likely to be as successful (Holman & Koenig Kellas, 2015) because the approach parents take when attempting to discuss sexuality has a significant influence on the adolescent (Akers, Holland, & Bost, 2011). Parents need to be taught how to talk less and listen more, how to be less directive, how to ask more questions, and how to behave in a nonjudgmental way (Akers et al., 2011; Lefkowitz, Sigman, & Au, 2000).

PCSC should begin early (Newby, Bayley, & Wallace, 2011; Walker, 2004). Participants of this study agree and wanted their PCSC to be done throughout their life and in an age-appropriate manner. Therefore, programming should seek to incorporate this and ensure parents understand what is age-appropriate.

## **Implications**

The findings of this study have implications for parents and family life educators (FLEs). To fulfill the needs, we must encourage parents to situate parent-child sexual communication in a comfortable and open environment and to deliver the content by providing different perspectives,

having discussions, being competent, and stating things bluntly. FLEs should encourage parents to use a lifespan human development approach and assist them in discussing sexuality at an age-appropriate manner and times throughout the child's life. To do this, programming must provide parents with the tools, skills, and support they need to have a sexual conversation with their child (Ashcraft & Murray, 2017; Guilamo-Ramos & Bouris, 2009; Jaccard et al., 2002).

Effective communication skills encompass the style of delivery; the timing of the message; and the content, structure, frequency, and context of the communication (Jaccard et al., 2002). Many parents do not feel confident in their knowledge about sexuality or sexual behavior (Guilamo-Ramos, Jaccard, Dittus, & Bouris, 2006; Guilamo-Ramos & Bouris, 2009; Jaccard et al., 2000; Jaccard et al., 2002). Therefore, it is essential to assist parents in understanding basic terms and accurate information. The practitioner can help the parent structure the communication by helping establish a language to talk to the adolescent and help them set up some ground rules for conversations (Ashcraft & Murray, 2017). The practitioner's role would be to help the parent understand that the more often open sexual conversations happen, the more effective parents are at conveying their expectations and values (Regnerus, 2007).

It is important to provide clear and practical instruction when assisting parents in these conversations (Jaccard et al., 2002; Morawska, et al., 2015; Walker, 2004; Widman et al., 2016). Family Life Educators can help build open and positive communication by teaching parents how to ask questions about sex, rather than lecturing (Foster et al., 2011). This is important because the conversation is more likely to be successful if the parent approaches it in a way that makes the adolescent feel comfortable (Holman & Koenig Kellas, 2015). Because the approach that parents take has a significant influence on the adolescent (Akers et al., 2011), parents need to be taught how to talk less and listen more, how to be less directive, how to ask more questions, and

how to behave in a non-judgmental way (Akers et al., 2011; Lefkowitz, Sigman, & Au, 2000). These skills can be worked on by using role plays, goal directed activities, and self-directed learning (Guilamo-Ramos & Bouris, 2009; Pop & Rusu, 2015).

One suggestion to practice communication is to ask questions during everyday life, known as teachable moments (Moraska et al., 2015; Walker, 2004). For example, a romantic or sexual moment in a television show, movie, or book, along with other media or everyday experiences, provides a starting point and an environment for a parent to ask questions, gain insight on the thoughts of the child, and share their own values and expectations (Guilamo-Ramos & Bouris, 2009; Malacane & Beckmeyer, 2016; Walker, 2004).

Teachable moments provide a space for the parent to focus on characters portrayed in the media, possibly making it more comfortable for the parent to discuss. In addition, a parent could be more open during such a discussion as it may not feel as personal or intimate, but rather age-appropriate. Such moments also provide for the opportunity of parents to state their opinions, values, or morals bluntly without the fear of having the child take it personally. Although teachable moments do not always help parents be competent, they can provide an opportunity for parents to correct things that they know are wrong. Finally, teachable moments foster conversation to be conducted in a discussion format, rather than lecturing. During such a conversation, the parent can share multiple perspectives by not only sharing their own, but bringing in what the character's, or those involved, perspectives may be. Taking this approach also fulfills the desire for parents to discuss sexuality throughout the lifespan rather than only once. Teachable moments happen frequently and can be used to gradually build the conversation throughout the development of the child.

## **Limitations & Future Research**

This study has a number of limitations that should be considered. First, this study utilized a survey to gain the responses from the respondents. Although the survey provided more confidentiality, interviews or focus groups would have provided more depth and allowed for follow-up questions. Second, while adding to the literature, this study only assessed college students' wishes for how they wanted their parent-child sexual communication to be. Third, our sample is homogeneous in regard to sex (female), gender (women), and ethnicity (White) and cannot be generalized to a broader U.S. sample.

Future research should seek to address whether the desires of the participants in this study are being incorporated into PCSC programs. Upon determining this, it will be important to evaluate how educators are implementing these into programs and if it is assisting PCSC. Finally, it would be beneficial to learn if college students or adolescents desire differences between mothers and fathers regarding PCSC.

## **Conclusion**

In conclusion, it is important for parents, with the assistance of practitioners (FLEs) and programming to work toward creating the kind of environment, utilize the kind of methods, and time the communication as the findings in this study indicate. Parents and practitioners have an essential role in creating a space and environment for parent-child sexuality communication to occur. Our sexual-communication programming cannot simply address teaching parents sexual content; instead, it must also assist parents in understanding how to talk about sexuality so that their adolescent will store the information in a meaningful way. Although many programs teach communication skills, this study provides additional insight into what adolescents want it to look like and what they believe would have helped.

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# **Chapter 4 - Paper 3: A “Catalyst for Us to Talk About Relationships and Sex”: Using a Novel for Mother-Daughter Sexual**

## **Communication**

### **Introduction**

Parents play an important role in the sexual socialization of their children (Beckett et al, 2010). In addition, both parents and children desire the parent to take on the role of discussing sexuality (Brock & Jennings, 1993; Holman & Koenig Kellas, 2018; Jaccard, Dodge, & Dittus, 2002). Unfortunately, many barriers block parents from discussing sexuality with their children (Fitzharris & Werner-Wilson, 2004). The following study seeks to ease the barrier of parents and children being uncomfortable discussing sexuality with one another. Suggestions have been made to use teachable moments to help ease comfortability when discussing sexuality (Guilamo-Ramos & Bouris, 2009). For example, Myers-Bowman and Jurich (2015) suggested the use of young adult literature as a springboard to be used by parents to discuss sexuality. The suggested strategy was to begin “with scenes or circumstances from the novels before suggesting how participants can discuss the situations in their own family relationships” (Myers-Bowman & Jurich, 2015, p. 376). Unfortunately, this strategy has never been empirically researched. Therefore, this study sought to understand whether the use of young adult literature discussion questions about sexuality influenced mothers’ and daughters’ comfortability communicating about sexuality with one another.

## **Review of Literature**

### **Mother-Daughter Communication**

The mother-daughter relationship is highly interactive and interconnected (Randall, 1995). Mothers tend to spend more time with their adolescent children (Collins & Russell, 1991) and communicate more with their children than fathers, and are more likely to talk with their daughters than their sons (Dutra, Miller, & Forehand, 1999; Miller, Levin, Whitaker, Xu, 1998). Girls tend to report stronger relationships, more frequent communication, and higher satisfaction levels with their mothers over their fathers (Noller & Callan, 1990; Parker, Greene, & Serovich, 1993; Thakkar & Sheth, 2014; Youniss & Smollar, 1985). As a result, adolescents, especially daughters, tend to be closer to their mothers (Steinberg & Silk, 2002). Moreover, mothers are most often the primary parent involved in the sexual socialization of children, particularly daughters (Fox, 1981; Jaccard, Dittus, & Gordon, 2000; Regnerus, 2007; Walker, 2001).

### **Parent-Adolescent Sexual Communication**

“Rapid physical, social, and sexual development occurring during the early adolescent period can influence adolescents’ interest in sexual activity dramatically, as well as influence their curiosity and communication about sexual issues” (Widman, Choukas-Bradley, Helms, Golin, & Prinstein, 2014, p. 733). This time provides an opportunity for parents to influence their children’s sexual socialization by discussing sexual topics. However, many parents and adolescents do not talk about sexual topics (Beckett et al., 2010; Guilamo-Ramos, Jaccard, Dittus, & Collins, 2008). When they do talk about sexual topics, the most frequently discussed topics include sexual dangers and safety, dating and sexual behavior, pregnancy, abstinence, and menstruation (girls only; DiIorio, Kelley, & Hockenberry-Eaton, 1999; Feldman & Rosenthal, 2000; Pistella Young & Bonati, 1998). Parents desire having open communication with their

children and the opportunity to share their knowledge (Grossman et al., 2016); however, many barriers stand in the way, including: (a) parental embarrassment and discomfort (Morawska, Walsh, Grabski, & Fletcher, 2015), (b) poor communication skills, and (c) a perceived lack of accurate information (Hutchinson & Cooney, 1998; Jaccard et al., 2000; Jerman & Constantine, 2010).

### **Embarrassment and Comfort**

Both parents and adolescents view sexual communication as difficult (Fox, 1981). One of the barriers to parent-adolescent sexual communication is embarrassment (Eisenberg, Sieving, Bearinger, Swain, & Resnick, 2006; Elliott, 2010; Guilamo-Ramos & Bouris, 2009; Hutchison & Cooney, 1998; Lefkowitz, 2002; Nolin & Peterson, 1992). Although there is a desire to be comfortable when discussing sensitive issues such as sex, parents perceive sexual communication to be uncomfortable and they are often unsure of what to say (Eisenberg et al., 2006; Lefkowitz, 2002; Warren, 1995; Warren & Neer, 1986). Parents do not feel comfortable starting up a sexual conversation with their child (Morawska et al., 2015). They tend to “wait for cues or questions from their children before they initiate a conversation about sex” (Elliott, 2010, p. 313), meaning, the topic is not discussed unless the child explicitly asks. If the parent does bring up a sexual conversation, parents often feel resistance from their child (Elliott, 2010).

It is important to help make sexual communication more comfortable because when adolescents have comfortable conversations with parents, they are more likely to have fewer sexual partners, use condoms more consistently, and delay sexual debut (Huebner & Howell, 2003; Karofsky, Zeng, & Kosorok, 2001; Luster & Small, 1994; Miller et al., 1998). In addition, the more frequently these comfortable conversations happen, the more effective parents are in sharing their expectations and values about their child’s sexual behavior (Regnerus, 2007).

Although we know frequent, comfortable sexual conversations are important, there is little “information concerning interventions designed to improve communication comfort about sexually related issues within families, especially between parents and their adolescents” (Burgess, Dziegielewski, & Green, 2005, p. 379). Thus, there is a need to develop a research-based intervention or tool to assist families in becoming more comfortable discussing sexuality.

### **Strategy for Improvement**

Family life educators seek to help parents communicate with adolescent children about sexuality through programming. Interventions and programs should be evidence-based and should have evidence of effectiveness from well-designed and rigorous evaluations (Small, Cooney, & O’Connor, 2009). Because many of the parents who go through a sexuality education program remain uncomfortable discussing the subject with their children, learning what tools or strategies increase comfortability is important (King & Lorusso, 1997; Richardson, 2004). Strategies used in programs can include the use of role-plays, handouts, discussions, assessments, modeling, and the use of media (Darling, Cassidy, & Powell, 2014; Darling & Howard, 2006; Guilamo-Ramos & Bouris, 2009). Additionally, media can offer teachable moments that parents can use to begin sexual conversations (Ashcraft & Murray, 2017; Miron & Miron, 2002). The use of novels has also been encouraged by family life educators (Myers-Bowman & Jurich, 2015), but has not been empirically tested.

### **Young Adult Literature**

When it comes to sexuality, Bittner (2012) stated that “teens need complementary sources of information that are approachable, interesting, and accurate” (p. 359). “The young adult novel is quickly becoming one of the best complementary sources of information related to sex, tolerance, navigating queer life, and sexual diversity” (Bittner, 2012, p. 370). The

information that adolescents receive in literature, such as young adult novels, can help adolescents gain insight into the world in which they live and about themselves (Gilbert & Fistner, 2011). This insight can help induce more curiosity and desire to discuss such topics. Therefore, novels can be used as a teachable moment for parents to discuss sexuality. The suggested strategy is to begin by using the novel's characters, scenes, and circumstances and then move into discussing personal relationships (Myers-Bowman & Jurich, 2015). Unfortunately, this strategy has never been empirically tested. Therefore, the purpose of this study was to employ an intervention using young adult literature to determine to what extent the use of discussion questions about sexuality in conjunction with a young adult novel will influence sexual communication between mother and daughter.

### **Theoretical Framework**

This study is situated within a symbolic interactionism theoretical framework. According to Blumer (1969), symbolic interactionism looks at human behavior by addressing the subjective meanings through social interaction. Meaning can be given to objects, events, language, or behavior. Meanings are then interpreted and modified. "Sex communication implies the valuation of a co-creation of meaning about sexual beliefs, attitudes, values, and/or behavior between persons exchanging messages, with verbal and nonverbal symbols" (Warren, 1995, p. 173).

Through this lens, we can understand why parents and adolescents might not be having conversations about sexuality. For example, if the parent or adolescent perceives the other as uncomfortable, then they might feel embarrassed (Malacane & Beckmeyer, 2016). Making the sexual communication more comfortable could help the frequency of sexual communication between parent and adolescent.

In addition, symbolic interactionism can be used for this study because both the parent and the adolescent will be reading a novel in which they must interpret the symbolic meaning of the text. To achieve a fuller understanding, the parent and adolescent can reflect on these meanings in the discussion of sexuality by using discussion questions from the novel. “Such discussion of novels can provide teens and parents access to each other’s perspectives, offering a promising venue for them to reflect on and share their thoughts and feelings” (Myers-Bowman & Jurich, 2015, p. 357).

## **The Present Study**

The aim of the present study was to examine the influence of using young adult literature and discussion questions on mother-daughter sexual communication. The following research questions were addressed: (a) *In what ways does reading the same young adult literature book influence mother-daughter sexual communication?* and (b) *In what ways does using young adult literature discussion questions influence mother-daughter sexual communication?*

## **Methods**

### **Participants**

Mother and adolescent daughter dyads were recruited for this study. Mothers were chosen because much of the research has shown that mothers tend to communicate more with adolescents (Baldwin & Baranoski, 1990; Jaccard et al., 2000; Regnerus, 2007; Walker, 2001) and generally have better communication quality than fathers (DiIorio, et al., 1999; Hutchinson & Cederbaum, 2010; Kirkman, Rosenthal, & Feldman, 2002). Adolescent daughters were chosen because mothers are a significant source of sexuality education for daughters (DiIorio, et al., 1999; Wilson & Koo, 2010). With this being the case, it is essential that the mother-daughter sexual communication is effective. To be eligible for this study, the daughters had to be between

the ages of 14- and 16-years-old. Adolescents were chosen because of the developmental abilities such as increased abstract and hypothetical reasoning (Feldman, 2015). Although this limits the generalizability, having mothers and daughters made the most sense due to how much variability would result if sons and fathers were also included.

A mix of criterion and purposive snowball sampling was utilized as the sampling procedure (Patton, 2002). In other words, we recruited mother-daughter dyads who met the inclusion criteria and then asked them to invite other dyads they knew who met the criteria. This sampling procedure was used because a particular population, mothers and adolescent daughters, was sought. Because this study utilized young adult literature as a springboard to foster comfortability in discussing sexuality, it was best to have study participants who enjoyed reading books. Not all parents have the time or desire to read a young adult novel, nor do adolescent girls. Trying to get parents and adolescents to read who do not enjoy reading or who do not have time, would have made the study a burden to the participants, which could have increased attrition rates.

After receiving Institutional Review Board approval, recruitment began by creating flyers and emails to advertise the study. Flyers and emails were distributed to surrounding high schools and colleges. In addition, flyers were hung at local establishments including coffee shops, churches, and public libraries. Emails were sent to school administrators and public librarians. Finally, social media was utilized to inform people and help it spread through word of mouth.

A total of 12 cisgender mother/daughter dyads participated in the study, six in the treatment group and six in the comparison group. Eleven mother/daughter dyads were biological and one was adoptive. The average age of mothers was 43 (range = 34 – 57). All mothers identified as being heterosexual (91.7%) with one declining to answer. A majority of the mothers

self-identified as White (83.4%) and 16.7% as multi-racial. The education of the mothers ranged from receiving some college (8.3%) to earning a Doctorate degree (25%), with 8.3% receiving one or more years of college, 16.7% with an Associate's degree, 33.3% with a Bachelor's degree, and 8.3% earning a Master's degree.

The daughters were on average 15-years-old (range = 14 – 16). The daughters identified as heterosexual (58.3%), lesbian (8.3%), and bisexual (16.7%), with 16.7% declining to answer. A majority of the daughters were White (66.7%), 25% were multi-racial, and 8.3% identified as Black or African American.

### **Procedures and Measures**

A pilot study was conducted to evaluate and finalize the discussion questions and the format of the discussion. The evidence from the pilot study indicated the importance of focusing on one discussion question at a time, rather than having all the questions on a sheet of paper. Therefore, questions were written out one-by-one onto index cards and ordered based on the feedback and evidence from the pilot study.

To begin data collection, a meeting was scheduled with the mother/daughter dyad to provide more information, accept the terms of participating by completing the informed assent/consent form (see Appendix C), and filling out the demographic questionnaire (see Appendices D & E). During this meeting, mothers and daughters also were provided a hard copy of the book *Forever* by Judy Blume (1975/2007). Each mother and daughter were asked to read the same young adult novel, complete it in a timely manner, and not discuss the book with one another prior to the discussion. Also, at this initial meeting, a time to have the discussion was scheduled, on average, three weeks out.

*Forever* (1975/2007) was chosen as the book the mothers and daughters read because it explores not only the physical aspects of sexuality, but also the emotional aspects. Themes such as love, adolescent pregnancy, birth control, sexually transmitted infections, sexual orientation, masturbation, and the exploration of sexual behaviors are all included in this novel. The book was originally published in 1975, meaning that many mothers had heard of the book or had even read it before. This provided more interest for the mothers to read the book. The book has many editions; therefore, it is familiar to current adolescents as well, with reprints published up to 2014. For this study, each dyad was provided with the 2007 published version.

Dyads were randomly assigned (Urbaniak, & Plous, 2013) to a comparison group that read the book and discussed it or a treatment group that read the book and had discussion questions to assist in the discussion. The discussions were then held in a private, convenient place, usually a library conference room. The author was not in the room when the discussion took place; instead, each discussion was videotaped.

For the treatment group, instructions were provided and the dyad was asked to discuss the novel by using the index cards provided. Each index card had one discussion question based on the novel (see Appendix F). These questions were written to facilitate a sharing of points of view by both the mother and daughter. The index card discussion questions were placed at the center of the table beginning with general questions about the novel to more specific questions, and ending with personal questions, all referring to sexuality. In addition to the instructions, the treatment group was provided with definitions of sexual intercourse, sexuality, and sexual relationship to assist them in understanding what was being asked in the discussion questions. The comparison group did not receive the discussion questions on index cards, nor did they receive definitions of terms. Instead, the dyads in this group were asked to discuss what their

thoughts were on the sexual relationship that was portrayed in the novel (Appendix I). Each discussion ended when the dyad felt they were done discussing. The experimental group had more structure with this because they had many questions to discuss, whereas the comparison group was only asked a general question. The experimental group discussions lasted between 27 and 60 minutes, while the comparison group discussions lasted between 7 and 38 minutes.

When the treatment groups' discussion ended, both mother and daughter completed a paper questionnaire that included a few open-ended questions asking the participants what the discussion was like, what they thought of using the discussion questions, and how comfortable it felt (see Appendices G & H). The comparison group also was asked to complete a few open-ended questions (see Appendices J & K). In addition, the author engaged in memo writing and took notes of the dyads' reactions, words, and attitudes before and after the discussion was conducted.

### **Method of Analysis**

To begin analysis, all questionnaire data were imported into a Microsoft Excel spreadsheet. Data were then uploaded to SPSS (Version 25, IBM, 2017) and descriptive statistics were calculated. The video-taped discussions were then viewed and detailed memos were taken. All memos and open-ended responses were then printed out, read, and organized by dyad number and group. Data were read by the research team to establish first impression themes and discuss with one another. The data were then read thoroughly by the author to establish similarities and differences between the treatment and comparison groups. Additional memos were written during this process to further organize and come to a consensus. Finally, each of the groups were analyzed separately to infer similarities and differences within groups.

## Results

The results represent the themes that emerged related to mother-daughter sexual communication. First, the influence of using the young adult novel, *Forever* (Blume, 1975/2007) is discussed. Next, the findings of how the novel discussion questions influence the sexual communication is provided.

### Use of Novel

All participants read *Forever* (1975/2007) and then were asked to discuss it together. The participants in this study indicated that the use of the novel influenced the sexual communication in the following three ways: (a) provided a bonding experience, (b) reduced initial barriers, and (c) changed comfort level.

#### **A bonding experience.**

The mothers and daughters reported connecting with one another through the experience of reading the same book. One of the daughters described the experience as “a nice bonding experience” (C6D). Reading *Forever* (1975/2007) provided the opportunity for the mother and daughter to read something that was relatable for both. One dyad stated it was a “great experience to be able to find something we could both relate with” (C9M) and that “it was nice to have something similar to talk about” (C9D). The dyad enjoyed being able to read something together so that they were able to discuss it while knowing the other engaged in the story as well.

Mothers, specifically, expressed that reading the same book as their daughter produced the desire of wanting to hear the other’s perspective, views, thoughts, and ideas about what was happening in the book. “At times while I was reading I wondered what she would think about that part” (C6M). “It was challenging to read the same book and not discuss it at home. I was

very interested to see her views on the progression of the sexuality in the book and her opinion on the ending” (C13M).

Finally, the discussion of the book contributed to the bonding experience by hearing each other’s thoughts and sharing their own. One daughter stated, “I feel like my mom and I both agree on the sexuality topics we discussed. Understanding each-others opinions is important. Now I know for sure how she feels and I feel like I was very honest and open about it” (C13D). The daughters enjoyed comparing their beliefs (C16D) and understanding one another. “I felt like we have a lot of the same views and opinions and we can understand each other’s ideas” (T12D). The mothers felt like they learned a lot more about their daughter’s thoughts and feelings regarding sexuality. “It was good to know what she thought about the story and allowed us to actually feel more comfortable discussing sex” (T10M). Another mom stated, “I learned a lot about my daughter’s feelings and views on relationships and sex” (T12M). Overall, reading and discussing the same book was a bonding experience for the mothers and daughters, one in which they desired to learn about the other person’s thoughts.

***Generational Comparison.*** A specific bonding experience emerged during the discussions. Engaging in the discussion about the novel opened-up the space for the mothers and daughters to discuss similarities and differences between the time the book was originally written in 1975, around the time the mothers grew up, and current time. Dyads brought up how relationships are different today because of the technology that is available, such as texting, phone apps, and instant messaging. One mother mentioned how the discussion allowed for her and her daughter to discuss “how unrealistic the book was for today’s world with the existence of social media and cell phones” (C13M). Another mother pointed out that

They [the characters] are not on the phone that much. They aren't even watching TV or movies very much. There is no electronic noise in the background and that probably plays a role more today than it would have in the 70s... There are no computers yet, no email. They were writing letters instead of emails. No mobile phones, or texting pictures of things. (T3M)

Terminology also was discussed because some terms were outdated and the dialogue provided the mothers and daughters to discuss what the terms meant and what terms were currently being used. A daughter mentioned that phrases like "talking everyday" means something different today than it did then. It was apparent by this that the datedness of the novel actually opened up the opportunity for the mother and daughter to discuss similarities and differences between the past and the present (T8D).

In addition, sex and relationships were discussed as being different regarding how sex was/is viewed. For example, one mother stated,

I think in the 70s when it was written, it was different. I don't know, right now the way that I think is that it was just kind of have sex, do it. If you get pregnant and you don't want it, you can easily give it up for adoption or have an abortion....it was very carefree, nonchalant, like that's it, it wasn't that big of a deal. (T10M)

The daughter went on to say, "Nowadays it is different" (T10D). Another mother brought up how people were viewed if they had sex when she was growing up. She began this by asking her daughter a question about what it is like today.

Do you feel today that that's more common for boys to be pushing the issue than for girls? Do you think it's more even? Do you think there are some girls who are pushing the issue more than boys? ...Cause like for me, when I was your age really like no girl

would admit having sex. You may have had sex, but you never would have admitted it. But every boy had had sex. So now, it seems like pretty much everybody is admitting it in some respects. I wonder how many of your friends that you think have had sex or people that you know have really had sex versus how many of them are saying it because they think it's cool. I don't know the pressure side of things. I think the pressures are different today, but I would definitely say that the boys when I was young tended to push things a lot more. (T8M)

Overall, *Forever* (Blume, 1975/2007) opened up the conversation to compare and discuss how things have changed over time.

### **Initial barriers.**

The book helped to reduce the difficulties or obstacles that are common to parent-adolescent sexual communication. Mothers and daughters in both the comparison and treatment groups indicated that reading the same book and then discussing sexuality made the conversation easier. A mother from the treatment group stated that the book “removed some barriers to discuss sexuality in general, sexual activity specifically” (T2M). Another mom explained that it was “great to have a springboard from the book to get started” (C16M). The mothers viewed the book discussion as being a good opportunity because it “opened up the door for further conversation” (T12M). Daughters pointed out that discussing the book was “not as awkward as I thought it would be” (T2D). In fact, one daughter felt like her mother “was more open to some of the information in the book” (C7D). Overall, the book acted as a tool to begin the conversation and get past some initial barriers that were common to parent-adolescent sexual communication, such as embarrassment and discomfort.

### **Comfort level.**

Reading and discussing the book influenced comfortability of parent-adolescent sexual communication. Overall, the dyads found the communication to be comfortable throughout, with only a few moments of discomfort. Participants' comfortability ranged from one person being tense (T11) to many indicating they were very comfortable. One mother explained that it "allowed us to actually feel more comfortable discussing sex" (T10M) and another mother felt like using the discussion questions made the daughter more comfortable talking: "I believe it made her more comfortable talking to me about it as well" (T12M).

The discussion became "more comfortable the longer we talked" (T2M). Comfort was discussed in conjunction with how open the discussion was. One mother stated, "I was very comfortable. I became more comfortable when I noticed my daughter talking to me openly" (T12M). Another said, "I felt very comfortable because I have a very open relationship with my daughter" (C13M). A daughter stated, "Everything was very open and comfortable" (C13D).

Other participants described getting along and/or feeling understood when discussing their comfort. "I felt comfortable. My mom and I get along and talk a lot so I feel everything went really well. We talked about my opinion about sexual relationships and I think we both agree very well together" (C13D). Another daughter stated, "I was fine talking to her because I felt as if she understood where I was coming from and how I felt about certain topics" (T12D). Overall, both mothers and daughters felt comfort discussing sexuality. Daughters' responses indicated that acceptance or agreement of opinions was integrated with comfort.

Some of the participants felt uncomfortable during the sexual discussion. Based on the responses of the participants, discomfort seemed to be experienced due to (a) the content/topic of

sex, (b) the depth of disclosure of personal thoughts or information, (c) not knowing what to say, and (d) the tone of the mother and daughter while discussing.

**Content.** Both mothers and daughters indicated that discomfort was experienced due to the content of the discussion. One daughter said, “It was a little uncomfortable because of the content” (T10D) and a mother stated, “It was difficult due to the content” (T12M). One mother stated that sex would “always be an uncomfortable topic to discuss” with her daughter and she “was very uncomfortable as the book was too graphic... We were much more open about the topic, but I still die on the inside when talking to my daughter about it [sex]” (T10M). The daughter felt the same discomfort because she thought it was weird talking about sex with her mother (T10D). Another daughter said, “It was kinda weird because it [the book] was about sex and it was weird thinking that we were reading the same thing” (C14D). In addition, sexual terminology produced some discomfort as well. For example, one mother explained, “When we were discussing the terms ‘sexual intercourse’ it was weird, & STDs” (T11M).

**Personal information.** Discomfort also arose when the discussion went more in-depth or when personal information was disclosed. For example, one mother said, “I’ve never talked about sex with my daughter at that level” (T12M). A daughter mentioned how she and her mother have scratched the surface with sexual topics, but they did not go in-depth (T10D). One mother mentioned her discomfort discussing her intimate sex life. “I’m not certain she needs to know exactly what I do, but I am very open to discussing sex in a bit more general terms... The conversation made me think a lot about [daughter] as my child and the fact that she is not my girlfriend to share sexual exploitations with, at least not the finer details” (T8M).

Daughters felt more discomfort regarding personal thoughts or disclosure than mothers. One daughter stated that there was discomfort “when I was talking about past people I dated”

(T2D). Another daughter stated, “There was less comfort when the questions were directed at us, and on how we viewed things” (T10D). As the discussion moved from general to personal, daughters felt uncomfortable. One daughter was uncomfortable when they “talked about each other’s thoughts on sex” (C7D). Another mentioned, “I was nervous was when we would compare to real life” (C9D).

*Not knowing what to say.* Daughters also felt discomfort because they did not know what to say. For example, one daughter said, “At times I just did not know what to say because of how I’m not involved, nor are a lot of girls my age” (T8D). Another daughter mentioned how at the start of the discussion she felt discomfort because she did not know what to say, but this changed as the discussion went on (C6D). This finding illustrated that the age, knowledge, and perhaps experience or interest of sex played a role in how comfortable the daughters felt.

*Tone of the discussion.* Finally, the tone of the discussion was an indicator of discomfort as well. One of the dyad’s discussions was “tense” and neither mother or daughter enjoyed the experience (T11M). This dyad disagreed with one another, which produced tension and hesitation by each to sharing and talking more. The daughter said she hated the experience. “I thought I could trust her with sexual topics but I refuse to speak to her about it now ‘cause I have different things to say and I keep getting put down” (T11D). She rated her comfort as very comfortable at the beginning of the discussion, but it was the complete opposite by the end of the discussion. It did not seem like it was the book or the discussion questions that influenced this negativity, but instead, how the daughter and mother responded to one another’s opinions.

### **Use of Novel Discussion Questions**

Although the book was effective overall, there were distinctions between the comparison and treatment groups. Four themes emerged from the participants’ comments who received the

discussion questions: (a) ease, (b) structure, (c) depth and breadth, and (d) a catalyst to share real-life or personal experiences.

### **Ease.**

Using the discussion questions was “easy, natural, productive, even fun” (T2M). Primarily, the daughters were the ones who discussed the ease. One daughter stated that the discussion questions “made it easier to talk instead of having to talk about it on our own” (T12D). The questions also “made it easier to talk about specific things that were in the book” (T10D). It also should be noted that the delivery of the discussion questions influenced the ease. It was especially “easier to talk about the book with questions one at a time” (T2D).

### **Structure.**

The participants in the treatment group mentioned how the discussion questions provided structure for the conversation. From the beginning to the end of the discussion, the questions “helped guide discussing” (T8M). One of the daughters stated that the discussion questions “were good conversation starters” (T3D). Throughout the conversation, the discussion questions “were spot on! They led us where I’d hoped we would go” (T2M). Another mother mentioned, “they helped me focus in on areas we may not have discussed” (T3M). Overall, it was apparent that the discussion questions were helpful and made for a smooth conversation. Although structure was provided, it should be noted that the pace of the questions was up to the dyad. Some dyads rushed through the discussion questions and simply answered the question and moved on to the next. These dyads coincided with the ones who also felt more uncomfortable during the discussion. For example, during the discussion between dyad T11, the questions were more rushed when the conversation began to be uncomfortable. Both daughter and mother found the discussion questions to be helpful, but because the questions were controlled by the

individuals, the pace of the conversation was dependent on the individuals. For example, the mothers mentioned, “my daughter was in control of the cards, so she rushed through” (T11M) and the daughter agreed, stating that the discussion questions were “good, but questions are easily rushed” (T11D). Although both discussed feeling rushed, the daughter also mentioned that conversation seemed “smooth” (T11D).

Other mothers succeeded at moving the conversation past what the discussion questions explicitly asked, and used them more as a discussion starter to then be used to probe more. For example, one mother stated the discussion questions were a “catalyst for us to talk about relationships and sex” (T12M). The same mother felt comfortable throughout the discussion and noticed her daughter open-up more as the conversation continued.

### **Depth and breadth.**

The discussion questions fostered both depth and breadth to the conversation. One daughter stated, “Talking about them wasn’t as bad as I thought it would be. We didn’t go into the details, but we did talk a lot about why they did what they did...we talked about more topics” (T10D). Even though the daughter did not believe that they went into detail, she did feel that they shared their opinions about the sexual behaviors in the novel. Both a mother and daughter expressed how the experience enabled them to have more in-depth conversations than they have had in the past. “It allowed us to have a deeper conversation” (T12M). The daughter mentioned “even though we ‘scratched the surface’ when we talk about these things, we don’t go in-depth” (T10D).

*Emotional aspect of sex.* A unique difference between the treatment and comparison groups was that the dyads in the treatment group discussed the emotional aspect of sex, while those in the comparison group did not explicitly discuss emotions. This topic emerged in the

conversation when a question about the possible pros and cons of a sexual relationship was asked (see Appendix F). For example, one of the dyads discussed how the main female character in the novel, Katherine, was more emotionally connected to sex than her friends were. The mom was then able to express the importance of the emotional aspect of sex and her expectations of her daughter (T8). Overall, the discussion questions provided mothers the opportunity to discuss the emotional side of sex, a topic that was not always brought up during parent-teen sexual communication.

**A catalyst to share real-life or personal experiences.**

The discussion questions acted as a catalyst to discuss real life situations, share personal experiences, and communicate values. One of the daughters expressed that the discussion “was a way to gather information about what might happen later in life” (T2D). Another daughter stated that it “opened doors to talk about real life situations of people going thru similar situations” (T12D). Mothers agreed with the daughters. One mother stated, “It allowed us to apply the characters and the issues they faced into real life situations. It allowed me to reflect on my own experiences and share them with my daughter” (T12M).

The discussion questions also fostered a communication of values and opinions of the motivations of the characters and if that translated to personal beliefs. “I learned a lot about my daughter’s feelings and views on relationships and sex” (T12M). The mothers found this to be a good experience. For example, one mother shared, “It was good to hear my daughter stick to her own values and voice how the characters didn’t have any” (T10M). “It felt great to be in total agreement about these characters’ experiences!” (T2M). Overall, the discussion questions provided the dyad the opportunity to discuss the characters in the book and compare them to what one would do if presented with such a situation.

## Discussion

The aim of our study was to examine the influence of using young adult literature and discussion questions on mother-daughter sexual communication, which was based on the recommendations from Myers-Bowman and Jurich (2015). The findings answer the following research questions: (a) *In what ways does reading the same young adult literature book influence mother-daughter sexual communication?* and (b) *In what ways does using young adult literature discussion questions influence mother-daughter sexual communication?*

The inclusion of the novel *Forever* (Blume, 1975/2007) influenced mother-daughter sexual communication by: (a) providing a bonding experience, (b) reducing initial barriers, and (c) changing comfort level. Connectedness or bonding has been suggested as one of the parenting dimensions that most clearly is associated with sexual outcomes (WHO, 2007). Specifically, it has been found to be a protective factor for adolescents' early sexual debut (Resnick et al., 1997), ever having sex, frequency of sex, pregnancy/birth, and condom use (Markham et al., 2010). Bonding has also been suggested as a moderating variable of sexual communication (Richards, 2013). By constructing experiences that are suitable for mothers and daughters to bond, we could work toward having better parent-child sexual communication and the many outcomes that are affected by it. Reducing barriers and addressing the comfort level is important because research shows that parents often face the barrier of not feeling comfortable starting up a sexual conversation (Morawska et al., 2015). By reducing this barrier with the use of a novel, the discussion can get started and move from there.

Four themes emerged for the dyads that had the additional discussion questions: (a) ease, (b) structure, (c) depth and breadth, and (d) a catalyst to share real-life or personal experiences. Understanding that the discussion questions assisted in the structure of the discussion is

important because parents often do not know what to say (Eisenberg et al., 2006; Lefkowitz, 2002). In addition, college students have mentioned that they would rather have their parents discuss with them, rather than lecturing (Rutledge et al., 2011). Therefore, the discussion questions are essential in the process of assisting parents in communicating with their children.

These findings are important because social interaction is given meaning by those involved (Blumer, 1969). The meaning that the mothers and daughters shared regarding the use of a novel and discussion questions supports the claim that novels can be used to facilitate parent-adolescent discussions (Myers-Bowman & Jurich, 2015). “Conversations about novels can help the teens articulate their own ideas and opinions while also learning about their parents’ viewpoints” (Myers-Bowman & Jurich, 2015, p. 376). We agree with their suggestion of integrating novels into family life education programming efforts with this population. Specifically, it is suggested that the discussion questions should be written in a format that begins with questions about the novel or characters in the novel and then move toward more personal thoughts. This is suggested because of the discomfort that arose from sharing personal information and that comfort increased the longer the discussion went on.

Using novels as a springboard for discussion provides space for parents and adolescents to express their views about important issues without the emotional intensity of focusing on their own lives and relationships. After exploring their own and each other’s ideas about characters in the novels, it may be easier to move toward consideration of their own relationships. (Myers-Bowman & Jurich, 2015, p. 377)

The findings of this research support the use of novels and discussion questions being used in parent-child communication; however, it is essential that the discussion questions are developed in a way to foster the discussion. If the discussion questions move too far beyond the dyads’

comfort levels, it could result in more discomfort as it did for dyad 11. Therefore, more research should be done on the influence of the wording and order of the discussion questions. In the meantime, using just the book has benefits for mother-daughter sexual communication.

## **Implications**

The findings of this study have implications for practitioners who seek to assist parents and children in discussing sexuality. Specifically, family life educators can use this information to implement new strategies into their programming. FLEs should be encouraged to incorporate the use of teachable moments as a tool in parent-child sexual communication. Although this study specifically examined the use of a novel and discussion questions, similar findings could present themselves with the use of other media such as television shows, movies, or music.

These everyday experiences provide an opportunity for the parent to discuss sexuality with their teen. Now that it is known that this can be beneficial, such opportunities and moments should be taken advantage of. These moments allow for parents to start a conversation by reducing initial barriers. They are then able to ask questions, gain insight on thoughts of the child, and share values and expectations with ease by moving from character based questions to more personal questions (Guilamo-Ramos & Bouris, 2009; Malacane & Beckmeyer, 2016; Walker, 2004).

Because teachable moments and/or the use of media is promising according to these findings, we recommend that Family Life Educators seek to create programming to assist parents in effectively communicating with their children using such tools. Based on the findings, our suggestion is for FLEs to conduct such education by first addressing the importance of sexual communication and then educating parents on (a) the extent of communication (frequency and depth), (b) the style of the communication, (c) the content of the communication, (d) the timing

of the communication, and (e) the family environment or parent-child relationship (Akers, Holland, & Bost, 2011). By establishing this knowledge base first, parents may approach discussions of media and teachable moments more openly.

After this information is provided, educators should seek to assist parents in practicing their communication skills. One suggestion is to foster simulated learning by having parents engage in role-playing to practice their newly learned skills (Darling et al., 2014). After skills are learned and practiced, educators can introduce how to engage in communication by using teachable moments or the media. The first step in using teachable moments or the media is to find a book or other media source to use as the springboard. This can be challenging; therefore, we recommend thinking through the following to make a decision that is the best fit:

- 1) What is the subject/topic you wish to focus on?

Examples: sexuality, peer pressure, conflict, friendships, etc.

- 2) What are the demographics of your population? Who is your audience?

Examples: developmental stage, generational characteristics, class, gender, race, sexual orientation, family structure, special need, etc. (These are important for the readers to connect with the book and to more easily apply it to their own lives).

*Forever* (1975/2007) was chosen as the book for this study because of the focus on an adolescent girl's sexual experience and our population consisted of mothers and daughters. In addition, the book is a fairly easy read (allowing for multiple reading levels to understand), and provided a relatability factor for both the daughter (teen girl protagonist) and the mother (based in the 70s).

Upon finding the right source, questions should be developed to assist the discussion. The discussion questions should be formatted in the following way: (a) General questions about the topic portrayed in the media source, (b) Questions focused on the characters, (c) Personal

opinion questions regarding the characters, and (d) Personal questions about own life. These are a general guide for creating discussion questions about media, and should be edited to fit the specific media source and topic. Finally, it may be helpful for educators to have a way to model how parents can use the discussion questions with children. This can be done by recording a video of actors using the discussion questions in a helpful way. For comparison, a video could be recorded using the discussion questions in a non-helpful way as well.

### **Limitations & Future Research**

These findings should be considered within the context of the limitations of the study. The data were collected using a purposive snowball sampling of mother/daughter dyads in a Midwestern state. External validity is compromised, meaning the results of this study are not as generalizable in terms of mothers and adolescent daughters based on race, age, or geographical location (Trochim, 2005). The dyads had to be willing to read a book and discuss the sexual aspects of it with one another. Because this study is one of the first of its kind and it required a lot of time and effort by the dyads, external validity had to be compromised so that the study could be conducted. In addition, the individuals who participated, specifically the mothers, most likely did so because they felt comfortable discussing sexuality with their daughter or they were seeking an opportunity to discuss sexuality. Therefore, future research should seek to understand how literature discussion questions would influence mother/daughter dyads who do not desire to discuss sexuality or those who do not enjoy reading.

This study utilized a short survey completed immediately after the discussion took place. Future research collect data via interviews with both the mother and daughter in order to gather richer data and a better understanding of their experiences reading and discussing a shared book.

In addition, quantitative methods could be utilized to specifically look at how information, values, and comfort change after the treatment and to achieve a larger sample size of dyads.

Finally, this study videotaped the dyad discussions using the book and questions. This resulted in discomfort by a few dyads and could have influenced the comfort of the entire discussion. Future research should aim to have the discussions in a more comfortable location, like in the participants' homes.

## **Conclusion**

Novels provide common ground for parents and children to discuss important topics, and can be used as a springboard to discuss their personal lives. Conversations about novels can help develop a deeper understanding of the adolescents' ideas and opinions while also learning and understanding their parents' viewpoints. The use of discussion questions fostered ease, structure, depth and breadth, and acted as a catalyst to share real-life or personal experiences. Although the discussion questions had additional benefits, the use of the novel itself also had potential benefits to mother-daughter sexual communication, including reducing the initial barriers, producing a bonding experience, and influencing the comfort level. The novel discussion facilitated the learning of one another's opinions, perspectives, and values regarding sex and sexuality. This dialogue was more effective when the dyad had similar perspectives or were, at least, open to hearing the other's views and being judgment free. Such dialogue has the potential to increase the possibility of having constructive conversations about sex and sexuality. Therefore, programming should implement a curriculum that is skills-based, one which "includes opportunities to learn and practice listening skills, conversation starters, strategies for taking advantage of teachable moments, and questioning skills" (Ballard & Gross, 2009, p. 53).

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## **Chapter 5 - Conclusion**

The three studies examined the influence of family and school-based sexuality education of adolescents. The results of the three studies help us understand what information is missing and/or needed in sexuality education delivered by parents and the school system and to determine the best methods to deliver the information. Findings coincide with previous research as well as adding new information to our understanding of sexuality education.

How we talk about sexuality is important when communicating with adolescents about sexuality. First, we must address the discourse. Study 1 identified that there is a need for women's sexual empowerment and sexual agency within the discourse of sexuality education. We also must work toward creating the kind of environment, utilize the kind of methods, and time the sexuality education in a way that adolescents desire. Study 2 identified this responsibility, specifically of parents. Finally, we must utilize research-based methods when implementing programming or education. Study 3 provides a research-based tool, the use of a novel and discussion questions, that could assist in mother-daughter sexual communication.

Overall, we must think critically about how we are implementing sexual communication, whether it is school-based or parent-based. How sexuality education or communication is provided has a significant effect on whether it is a meaningful and helpful experience for the child (Rubinsky & Cooke-Jackson, 2017). Therefore, those who train or educate teachers or parents must work to use these research findings.

## References

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## **Appendix A - Sexuality Education I Wish I Had Informed Consent**

**PROJECT TITLE:** The Sexuality Education I Wish I Had

**APPROVAL DATE OF PROJECT:** 03/30/16

**EXPIRATION DATE OF PROJECT:** 01/19/19

**PRINCIPAL INVESTIGATOR:** Dr. Melinda Markham

**CO-INVESTIGATOR(S):** Sarah Kuborn

### **CONTACT NAME AND PHONE FOR ANY PROBLEMS/QUESTIONS:**

Dr. Melinda Markham, Associate Professor in Family Studies and Human Services, 343-O Justin Hall, Kansas State University. Manhattan, KS, 66506, mmarkham@ksu.edu.

### **IRB CHAIR CONTACT/PHONE INFORMATION:**

Rick Scheidt, Chair, Committee on Research Involving Human Subjects, 203 Fairchild Hall, Kansas State University, Manhattan, KS 66506, (785) 532-3224.

Cheryl Doerr, Associate Vice President for Research Compliance and University Veterinarian, 203 Fairchild Hall, Kansas State University, Manhattan, KS 66506, (785) 532-3224.

**PURPOSE OF THE RESEARCH:** This research project is being done to explore what college students wish they would have learned regarding sexuality.

**PROCEDURES OR METHODS TO BE USED:** This study is conducted by a Qualtrics survey. The survey consists of nine open-ended questions about the sexuality education you wish you had received. The rest of the survey will be a list of demographic questions.

**LENGTH OF STUDY:** 15-20 minutes

**RISKS OR DISCOMFORTS ANTICIPATED:** You are free to refuse to respond to any questions. You may feel discomfort thinking about sexual topics.

**BENEFITS ANTICIPATED:** The findings of this study will provide information to further the fields of Sex Education and Family Life Education. The findings can be used to determine what people want out of sexuality education and what we may be currently be missing.

**EXTENT OF CONFIDENTIALITY:** All surveys will be held in strict confidentiality.

**TERMS OF PARTICIPATION:** I understand this project is research, and that my participation is completely voluntary. I also understand that if I decide to participate in this study, I may withdraw my consent at any time, and stop participating at any time without explanation, penalty, or loss of benefits, or academic standing to which I may otherwise be entitled.

By moving on, I verify that I have read and I understand this consent form, and I willingly agree to participate in this study under the terms described.

Thank you for participating!

## Appendix B - Sexuality Education I Wish I Had Qualtrics Survey

### Sexuality History Multiple Choice

QSE What kind of formal (from school or organizations) sexuality education did you receive prior to college? Select all that apply.

- Abstinence-Only: "teaches abstinence as the only morally correct option of sexual expression for teenagers. They usually censor information about contraception and condoms for the prevention of sexually transmitted diseases (STDs) and unintended pregnancy" (Advocates for Youth, 2001). (1)
- Abstinence-Based or Abstinence-Plus: "programs which include information about contraception and condoms in the context of strong abstinence messages" (Advocates for Youth, 2001). (2)
- Comprehensive: "teaches about abstinence as the best method for avoiding STDs and unintended pregnancy, but also teaches about condoms and contraception to reduce the risk of unintended pregnancy and of infection with STDs, including HIV. It also teaches interpersonal and communication skills and helps young people explore their own values, goals, and options" (Advocates for Youth, 2001). (3)
- Other (4) \_\_\_\_\_
- 

QSE2 What kind of nonformal (from parents or guardians) sexuality education did you receive prior to college? Select all that apply.

- Abstinence-Only: "teaches abstinence as the only morally correct option of sexual expression for teenagers. They usually censor information about contraception and condoms for the prevention of sexually transmitted diseases (STDs) and unintended pregnancy" (Advocates for Youth, 2001). (1)
- Abstinence-Based or Abstinence-Plus: "programs which include information about contraception and condoms in the context of strong abstinence messages" (Advocates for Youth, 2001). (2)
- Comprehensive: "teaches about abstinence as the best method for avoiding STDs and unintended pregnancy, but also teaches about condoms and contraception to reduce the risk of unintended pregnancy and of infection with STDs, including HIV. It also teaches

interpersonal and communication skills and helps young people explore their own values, goals, and options" (Advocates for Youth, 2001). (3)

Other (4) \_\_\_\_\_

End of Block

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### **Section 1: Thinking about sexuality and its education prior to college,**

Q1 Thinking about sexuality and its education prior to college,  
*I wish I had been taught...*

\_\_\_\_\_

Q2 Thinking about sexuality and its education prior to college,  
*I wish I had asked about...*

\_\_\_\_\_

Q3 Thinking about sexuality and its education prior to college,  
*I wish I had been told...*

\_\_\_\_\_

End of Block

---

### **Section 2: How do you wish you would have learned this information?**

Q4 How do you wish you would have learned this information?

\_\_\_\_\_

Q5 *I wish I had learned about sexuality from...*

\_\_\_\_\_

Q6 *I wish I had learned about sexuality when...*

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Q7 *I wish I had learned about sexuality by...*

---

Q8 *When teaching about sexuality, I wish my teacher(s) had...*

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Q9 *When talking about sexuality, I wish my guardian(s) had...*

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End of Block

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### **Section 3: Demographics**

Q10 What is your birth date? (MT - DR - YEAR)

---

Q11 What is your gender identity?

- Woman (1)
  - Man (2)
  - Transgender Woman (3)
  - Transgender Man (4)
  - Other (5) \_\_\_\_\_
  - Decline to answer (6)
- 

Q14 What is your sex?

- Female (1)
  - Male (2)
  - Trans (3) \_\_\_\_\_
  - Other (4) \_\_\_\_\_
  - Decline to answer (5)
- 

Q15 What is your sexual orientation?

- Heterosexual (1)
- Homosexual (2)
- Bisexual (3)
- Other (4) \_\_\_\_\_
- Decline to answer (5)

Q16 What is your ethnic and racial background? Select all that apply.

- American Indian or Alaska Native (1)
- Black or African American (2)
- Chinese (3)
- Native Hawaiian or Pacific Islander (4)
- Filipino (5)
- Hispanic or Latino (6)
- Indian (7)
- Japanese (8)
- Korean (9)
- Mexican (10)
- Middle Eastern (11)
- Southeast Asian (12)
- White Caucasian (13)
- Unknown (14)
- Decline to answer (15)

---

Q17 Where were you born? (city/region, country)

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Q18 Where did you graduate high school or live when you received a GED? (city/region, country)

\_\_\_\_\_

---

Q19 Which of the following best describes your political orientation?

- Very liberal (1)
  - Somewhat liberal (2)
  - Slightly liberal (3)
  - Neither liberal nor conservative (4)
  - Slightly conservative (5)
  - Somewhat conservative (6)
  - Very conservative (7)
- 

Q20 Your political party preference is:

- Democrat (1)
  - Republican (2)
  - Independent (3)
  - Other (4) \_\_\_\_\_
  - Decline to answer (5)
-

Q21 Religious affiliation: Do you consider yourself to be a religious person?

Yes (1)

No (2)

Decline to answer (3)

Q22 Which of the following do you feel best describes you?

- Nonreligious secular (1)
- Agnostic (2)
- Atheist (3)
- Christian (4) \_\_\_\_\_
- Jewish (5)
- Hinduism (6) \_\_\_\_\_
- Buddhism (7)
- Unitarian -Universalist (8)
- Wiccan Pagan Druid (9)
- Spiritualist (10)
- Native American (11)
- Baha'i (12)
- Other (13) \_\_\_\_\_
- None (14)
- Decline to answer (15)

Q23 What is(are) your major(s)?

---

---

Q24 Which class/level most closely describes you?

- Freshman (1st year) (1)
  - Sophomore (2nd year) (2)
  - Junior (3rd year) (3)
  - Senior (4th year) (4)
  - 5th year (5)
  - Graduate student (6)
  - Other (7) \_\_\_\_\_
  - Decline to answer (8)
- 

Q25 Please select the one that applies:

- I have taken FSHS 302: Introduction to Human Sexuality (1)
  - I am currently taking FSHS 302: Introduction to Human Sexuality (2)
  - I have never taken FSHS 302: Introduction to Human Sexuality (3)
- 

Q26 Please select the one that applies:

- I have taken FSHS 585: Professional Seminar in FSHS (1)
  - I am currently taking FSHS 585: Professional Seminar in FSHS (2)
  - I have never taken FSHS 585: Professional Seminar in FSHS (3)
-

Q27 Please select the one that applies:

- I have taken FSHS 590: Capstone Experience in FSHS (1)
- I am currently taking FSHS 590: Capstone Experience in FSHS (2)
- I have never taken FSHS 590: Capstone Experience in FSHS (3)

End of Block

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### **Debriefing**

Q29 If this survey triggered any feelings or issues, please contact Kansas State's Counseling Services and make an appointment: <https://www.k-state.edu/counseling/student/appointment.html>

Thank you again for your participation.

Please click the next arrow to ensure your answers are recorded.

## **Appendix C - Mother-Daughter Sexual Communication Informed**

### **Consent**

**PROJECT TITLE:** Mother-Daughter Sexual Communication: Using Young Adult Literature to Facilitate Comfortability

**APPROVAL DATE OF PROJECT:** 01/05/18

**EXPIRATION DATE OF PROJECT:** 01/05/18

**PRINCIPAL INVESTIGATOR:** Dr. Melinda Markham

**CO-INVESTIGATOR(S):** Sarah Kuborn

**CONTACT NAME AND PHONE FOR ANY PROBLEMS/QUESTIONS:**

Dr. Melinda Markham, Associate Professor in Family Studies and Human Services, 343-O Justin Hall, Kansas State University. Manhattan, KS, 66506, mmarkham@ksu.edu

**IRB CHAIR CONTACT/PHONE INFORMATION:**

Rick Scheidt, Chair, Committee on Research Involving Human Subjects, 203 Fairchild Hall, Kansas State University, Manhattan, KS 66506, (785) 532-3224.

Cheryl Doerr, Associate Vice President for Research Compliance, 203 Fairchild Hall, Kansas State University, Manhattan, KS 66506, (785) 532-3224.

**PURPOSE OF THE RESEARCH:** This research project is being done as a requirement to graduate with a PhD in Family Studies from Kansas State University. The purpose of this research is to investigate the effectiveness of a young adult novel and discussion for mother-daughter sexual communication.

**PROCEDURES OR METHODS TO BE USED:** This study will require you to complete a short survey. You will then be required to read the book, *Forever* by Judy Blume. The co-investigator will then observe discussion between mothers and daughters. The discussion and observation should take no longer than 1.5 hours. You will then need to complete another short survey.

**LENGTH OF STUDY:** 4-8 weeks from initial meeting to follow-up survey. The initial completion of the questionnaire will take approximately 20 minutes, the reading of the novel should be no longer than 4 weeks, the discussion should take 30-90 minutes, the follow-up should take approximately 20 minutes.

**RISKS OR DISCOMFORTS ANTICIPATED:** You may be exposed to discomfort during the discussion and observation.

**BENEFITS ANTICIPATED:** The findings of this study will have implications for parent education and will provide information to further the understanding of effective tools that Family Life Educators can suggest for use to make sexual communication be more comfortable between mothers and daughters.

**EXTENT OF CONFIDENTIALITY:** Discussions will be videotaped. Videotapes will be encrypted and password protected. Field notes will be taken during the viewing of the video and be labeled using numbers. In addition, the comfortability scales will be coded using numbers.

**TERMS OF PARTICIPATION:** I understand this project is research, and that my participation is completely voluntary. I also understand that if I decide to participate in this study, I may withdraw my consent at any time, and stop participating at any time without explanation, penalty, or loss of benefits, or academic standing to which I may otherwise be entitled. I verify that my signature below indicates that I have read and understand this consent form, and willingly agree to participate in this study under the terms described, and that my signature acknowledges that I have received a signed and dated copy of this consent form.

**Participant (Adolescent) Assent**

Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Participant (Parent) Consent**

Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness to Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Appendix D - Pre-Survey (Daughter)

### Demographics

Q1 What is your birth date? (MT - DR - YEAR)

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Q2 Which best describes your relationship to your mother?

Biological Daughter (5)

Adoptive Daughter (6)

Foster Daughter (7)

Step Daughter (8)

Other (9) \_\_\_\_\_

Decline to answer (10)

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Q3 What is your gender identity?

Woman (1)

Man (2)

Transgender Woman (3)

Transgender Man (4)

Other (5) \_\_\_\_\_

Decline to answer (6)

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Q4 What is your sex?

Female (1)

Male (2)

Trans (3) \_\_\_\_\_

Other (4) \_\_\_\_\_

Decline to answer (5)

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Q5 What is your sexual orientation?

Heterosexual (1)

Homosexual (2)

Bisexual (3)

Other (4) \_\_\_\_\_

Decline to answer (5)

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Q6 What is your ethnic and racial background? Select all that apply.

- American Indian or Alaska Native (1)
- Black or African American (2)
- Chinese (3)
- Native Hawaiian or Pacific Islander (4)
- Filipino (5)
- Hispanic or Latino (6)
- Indian (7)
- Japanese (8)
- Korean (9)
- Mexican (10)
- Middle Eastern (11)
- Southeast Asian (12)
- White Caucasian (13)
- Unknown (14)
- Decline to answer (15)

Q7 Which of the following best describes your political orientation?

- Very liberal (1)
  - Somewhat liberal (2)
  - Slightly liberal (3)
  - Neither liberal nor conservative (4)
  - Slightly conservative (5)
  - Somewhat conservative (6)
  - Very conservative (7)
- 

Q8 Your political party preference is:

- Democrat (1)
  - Republican (2)
  - Independent (3)
  - Other (4) \_\_\_\_\_
  - Decline to answer (5)
-

Q9 Religious affiliation: How religious are you?

- Very Religious (1)
  - Somewhat Religious (2)
  - Neutral (3)
  - Somewhat Not Religious (4)
  - Not Religious (5)
  - Decline to Answer (6)
- 

Q10 Spiritual affiliation: How spiritual are you?

- Very Spiritual (1)
  - Somewhat Spiritual (2)
  - Neutral (3)
  - Somewhat Not Spiritual (4)
  - Not Spiritual (5)
  - Decline to Answer (6)
-

Q11 Which of the following do you feel best describes you?

- Nonreligious secular (1)
- Agnostic (2)
- Atheist (3)
- Christian (4) \_\_\_\_\_
- Jewish (5)
- Hinduism (6) \_\_\_\_\_
- Buddhism (7)
- Unitarian -Universalist (8)
- Wiccan Pagan Druid (9)
- Spiritualist (10)
- Native American (11)
- Baha'i (12)
- Other (13) \_\_\_\_\_
- None (14)
- Decline to answer (15)

## Appendix E - Pre-Survey (Mother)

### Demographics

Q1 What is your birth date? (MT - DR - YEAR)

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Q2 Which best describes your relationship to your daughter?

Biological Mother (1)

Adoptive Mother (2)

Foster Mother (3)

Step Mother (4)

Other (9) \_\_\_\_\_

Decline to answer (10)

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Q3 What is your gender identity?

Woman (1)

Man (2)

Transgender Woman (3)

Transgender Man (4)

Other (4) \_\_\_\_\_

Decline to answer (5)

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Q4 What is your sex?

Female (1)

Male (2)

Trans (3) \_\_\_\_\_

Other (4) \_\_\_\_\_

Decline to answer (5)

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Q5 What is your sexual orientation?

Heterosexual (1)

Homosexual (2)

Bisexual (3)

Other (4) \_\_\_\_\_

Decline to answer (5)

---

Q6 What is your ethnic and racial background? Select all that apply.

- American Indian or Alaska Native (1)
- Black or African American (2)
- Chinese (3)
- Native Hawaiian or Pacific Islander (4)
- Filipino (5)
- Hispanic or Latino (6)
- Indian (7)
- Japanese (8)
- Korean (9)
- Mexican (10)
- Middle Eastern (11)
- Southeast Asian (12)
- White Caucasian (13)
- Unknown (14)
- Decline to answer (15)

Q7 Which of the following best describes your political orientation?

- Very liberal (1)
  - Somewhat liberal (2)
  - Slightly liberal (3)
  - Neither liberal nor conservative (4)
  - Slightly conservative (5)
  - Somewhat conservative (6)
  - Very conservative (7)
- 

Q8 Your political party preference is:

- Democrat (1)
  - Republican (2)
  - Independent (3)
  - Other (4) \_\_\_\_\_
  - Decline to answer (5)
-

Q9 Religious affiliation: How religious are you?

- Very Religious (1)
  - Somewhat Religious (2)
  - Neutral (3)
  - Somewhat Not Religious (4)
  - Not Religious (5)
  - Decline to Answer (6)
- 

Q10 Spiritual affiliation: How spiritual are you?

- Very Spiritual (1)
  - Somewhat Spiritual (2)
  - Neutral (3)
  - Somewhat Not Spiritual (4)
  - Not Spiritual (5)
  - Decline to Answer (6)
-

Q11 Which of the following do you feel best describes you?

- Nonreligious secular (1)
- Agnostic (2)
- Atheist (3)
- Christian (4) \_\_\_\_\_
- Jewish (5)
- Hinduism (6) \_\_\_\_\_
- Buddhism (7)
- Unitarian -Universalist (8)
- Wiccan Pagan Druid (9)
- Spiritualist (10)
- Native American (11)
- Baha'i (12)
- Other (13) \_\_\_\_\_
- None (14)
- Decline to answer (15)

Q12: What is the highest degree or level of school you have completed? If currently enrolled, mark the previous grade or highest degree received.

- No schooling completed (1)
- Nursery school to 8<sup>th</sup> grade (2)
- 9<sup>th</sup>, 10<sup>th</sup>, or 11<sup>th</sup> grade (3)
- 12<sup>th</sup> grade, no diploma (4)
- High school graduate –high school diploma or the equivalent (for example: GED) (5)
- Some college credit, but less than 1 year (6)
- 1 or more years of college, no degree (7)
- Associate degree (for example: AA, AS) (8)
- Bachelor’s degree (for example: BA, AB, BS) (9)
- Master’s degree (for example: MA, MS, MEng, MEd, MSW, MBA) (10)
- Professional degree (for example: MD, DDS, DVM, LLB, JD) (11)
- Doctoral degree (for example: PhD, EdD) (12)

## Appendix F - Treatment Group Instructions & Discussion Questions

Thank you for participating in this study by reading the book, *Forever*. Now that you have finished the novel, you are asked to discuss it. Please use the note cards on the table to foster this discussion.

I would like to provide you with a number of definitions for terms that are used in the questions. When these terms come up, please use the following definitions.

### Terms:

**Sexual Intercourse:** referring to the penetration of the vagina or anus; referring to the act of mouth to genitals (Merriam-Webster)

**Sexuality:** the quality or state of being sexual; the condition of having sex; sexual activity; expression of sexual receptivity or interest especially when excessive (Merriam-Webster)

**Sexual Relationship:** a relationship involving sexual intimacy (thefreedictionary by Farlex)

### Questions on Index Cards:

1. Do you think the story is realistic? If so, how?
2. What do you feel influenced the decision for Katherine and Michael to have a sexual relationship?
3. Katherine and Michael came into their relationship with different sexual experiences. What are your thoughts on this?
  - 3.2 Does this have any influence on the sexual relationship?
4. Do you feel there was any pressure to have a sexual relationship or to have sexual intercourse?  
If so, how?
5. What were Katherine's family's views about Katherine having a sexual relationship?
  - 5.2 Her mother? Her grandmother? Her father? Her sister?
6. What are your thoughts on how Katherine's family talked to her about sexual relationships?
  - 6.2 Her mother? Her grandmother? Her father? Her sister?

7. How were Katherine's friends influencing Katherine's understanding of sexual intercourse and sexual relationships?

7.2 What are your thoughts on this?

8. Do you feel Katherine's views regarding sexuality changed throughout the novel? If so, how?

9. What are some of the possible pros and cons of a sexual relationship?

10. Do you feel the characters protected themselves against possible cons?

10.2 What about pregnancy, sexually transmitted infections and others you came up with?

11. How do you think having sexual intercourse affected Katherine and Michael's relationship?

12. Do you think Katherine and Michael were ready to have a sexual relationship? If so, why?

13. Do you think Katherine and Michael were ready to have a sexual intercourse? If so, why?

14. Did Katherine and Michael know each other well enough to have sexual intercourse? Explain.

15. In your opinion, did Katherine and Michael act responsibly? Explain.

16. At what point do you think people should have sexual intercourse? Explain.

16.1 When they feel desire? When they are in love? When they are married?

16.2 What makes you think this?

17. At what point do you think people should begin a sexual relationship? Explain.

17.1 What makes you think this?

(Adapted from Planned Parenthood, 2009).

## Appendix G - Treatment Group Post Questionnaire (Daughter)

The following statements represent your feelings about the discussion you had with your mother. Please share as much information as possible to provide us with a fuller understanding of what this process was like for you.

What was it like reading the same book as your mother?

Did you discuss the topics or characters of the book prior to coming in for the discussion?  
**If YES:** What did you discuss? How was this?

What was it like to discuss sexuality related topics today?

What was it like using the discussion questions?

What was it like to have discussed what happened to the characters in the book?

How comfortable did you feel throughout the discussion?

Was there any time where you felt less or more comfortable during the discussion?

## Debriefing

If this study triggered any feelings or issues, it is recommended that you seek out a counselor or therapist. One option is Kansas State University's Family Center. <https://www.ksu.edu/familycenter/> In addition, you may find more local resources at <https://therapists.psychologytoday.com/rms/state/KS/Manhattan.html>

## Appendix H - Treatment Group Post Questionnaire (Mother)

The following statements represent your feelings about the discussion you had with your daughter. Please share as much information as possible to provide us with a fuller understanding of what this process was like for you.

What was it like reading the same book as your daughter?

Did you discuss the topics or characters of the book prior to coming in for the discussion?  
**If YES:** What did you discuss? How was this?

What was it like to discuss sexuality related topics today?

What was it like using the discussion questions?

What was it like to have discussed what happened to the characters in the book?

How comfortable did you feel throughout the discussion?

Was there any time where you felt less or more comfortable during the discussion?

## Debriefing

If this study triggered any feelings or issues, it is recommended that you seek out a counselor or therapist. One option is Kansas State University's Family Center. <https://www.ksu.edu/familycenter/> In addition, you may find more local resources at <https://therapists.psychologytoday.com/rms/state/KS/Manhattan.html>

## **Appendix I - Comparison Group Instructions**

Thank you for participating in this study by reading the book, *Forever*. Now that you have finished the novel, what are your thoughts on the sexual relationship that was portrayed?

## **Appendix J - Comparison Group Questionnaire (Daughter)**

The following statements represent your feelings about the discussion you had with your mother. Please share as much information as possible to provide us with a fuller understanding of what this process was like for you.

What was it like reading the same book as your mother?

Did you discuss the topics or characters of the book prior to coming in for the discussion?  
**If YES:** What did you discuss? How was this?

What was it like to discuss sexuality related topics today?

How comfortable did you feel throughout the discussion?

Was there any time where you felt less or more comfortable during the discussion?

## Debriefing

If this study triggered any feelings or issues, it is recommended that you seek out a counselor or therapist. One option is Kansas State University's Family Center. <https://www.ksu.edu/familycenter/> In addition, you may find more local resources at <https://therapists.psychologytoday.com/rms/state/KS/Manhattan.html>

## **Appendix K - Comparison Group Post Questionnaire (Mother)**

The following statements represent your feelings about the discussion you had with your daughter. Please share as much information as possible to provide us with a fuller understanding of what this process was like for you.

What was it like reading the same book as your daughter?

Did you discuss the topics or characters of the book prior to coming in for the discussion?  
**If YES:** What did you discuss? How was this?

What was it like to discuss sexuality related topics today?

How comfortable did you feel throughout the discussion?

Was there any time where you felt less or more comfortable during the discussion?

## Debriefing

If this study triggered any feelings or issues, it is recommended that you seek out a counselor or therapist. One option is Kansas State University's Family Center. <https://www.ksu.edu/familycenter/> In addition, you may find more local resources at <https://therapists.psychologytoday.com/rms/state/KS/Manhattan.html>