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The Influence of Parental Communication About Sexual Health on Quality of Emerging Adult Romantic Relationships

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THE INFLUENCE OF PARENTAL COMMUNICATION ABOUT SEXUAL HEALTH

ON QUALITY OF EMERGING ADULT ROMANTIC RELATIONSHIPS

by

Jaclyn Denise Powers

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ABSTRACT

THE INFLUENCE OF PARENTAL COMMUNICATION ABOUT SEXUAL HEALTH

ON QUALITY OF EMERGING ADULT ROMANTIC RELATIONSHIPS

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The research on relationships between parent-child communication about sexuality and sexual communication between adult partners is currently lacking. The current study aims to examine the influence of parent-child sexual communication on adult sexual communication when those children reach adulthood and engage in romantic relationships. Parent-child sexual communication, attachment styles, sexual attitudes, and partner sexual communication were examined for influence on the physical and emotional relationship satisfaction of emerging adults. Study 1 included a quantitative analysis with 553 emerging adults participating in an online survey, and study 2 incorporated a qualitative analysis with an additional 7 emerging adults participating in online focus groups. Attachment styles were not found to influence parent-child communication or relationship satisfaction. Permissive sexual attitudes demonstrated a positive influence on relationship satisfaction, as did increased sexual communication between partners. Increased partner sexual communication was associated with sexual relationships that included less emotional attachments. Both studies revealed a general lack of parent-child communication about sex, with the majority of participants reporting minimal or no conversations about sexuality with their parents. Results from study 2 demonstrated a weak connection between parent-child sexual communication and partner

sexual communication. Implications for parent-child communication about sexuality are discussed.

ACKNOWLEDGMENTS

DEDICATION

To my mom, Teresa Harwell, for believing in me before the rest of the world did, and for making me believe in myself. To my best friend, Courtney Irwin, for your many, many nights of encouragement, support, and laughter. And finally, to my husband, Andrew Powers, for sacrificing so much for my education and for always pushing me to be the best I can be.

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LIST OF ABBREVIATIONS

RDAS   Revised Dyadic Adjustment Scale

BSAS   Brief Sexual Attitudes Scale

INE   Inhibition of Need Expression

PSS   Physical Satisfaction Scale

CHAPTER I – Introduction

The communication between a parent and child about sexuality directly impacts adolescents and their decisions about engaging in sex. For example, frequent and comfortable communication about sex with parents has shown to delay sexual intercourse for adolescents and increase the chance of adolescents being involved in a trusting relationship at the time they engage in sex for the first time (Parkes, Henderson, Wight, & Nixon, 2011). The overall parent-child relationship is also essential to the outcomes for sexual activity while in adolescence; adolescents who perceive their parents as supportive and present have shown to be less likely to engage in sexual intercourse (Whitbeck, Hoyt, Miller, & Kao, 1992). Research by Dittus and Jaccard (2000) also found that adolescents who perceived their relationship with their parents as strong were more likely to use contraception when they did engage in sexual intercourse.

An adolescent's relationship with their parents may be influenced by the attachment styles between them. Infants form attachments with their caregivers from an early age (Bowlby, 1969), and research shows that this attachment style may set the foundation for relationships with all other significant others throughout that child's life (Hazan & Shaver, 1987).

Parental attitudes regarding sex have been shown to impact their child's views on sexual behaviors. Research by Somers and Ali (2011) found that adolescents were more likely to delay having sex while in high school if their parents communicated with them that they should delay their sexual debut. In terms of adolescent sexual health, both explicit conversations regarding sexuality and a healthy parent-child relationship are important for positive outcomes (Somers & Ali, 2011).

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The overall purpose of this study is to expand on how parent-child discussions about sexuality influence the emotional and physical satisfaction of emerging adult romantic relationships. Specifically, this research will examine how a child's attachment style might impact parent-child discussions about sexuality, and how these discussions could influence overall satisfaction in adult romantic relationships, their ability to communicate openly about sex with their partners, and their general attitudes about sexual behaviors. For the purpose of this paper, the term *parent* will be used to describe the primary guardians in the child's life.

This study will focus on adults in the emerging adulthood period, described by Jeffrey Arnett (2000) as ages 18-25. During the period of emerging adulthood, individuals are experimenting with love, work, and their worldviews as they transition from adolescence to adulthood. Dating during adolescence typically focuses on companionship, and relationships are often short-lived. Dating during the emerging adulthood phase is more likely to include increased intimacy, cohabitation, and the preparation for marriage (Arnett, 2000). Adults of this age are discovering the direction of their lives and how their lives will differ from their families of origin. Focusing on this age range for this study will allow the researcher to examine the influence parents have on romantic relationships for their children and how these influences play a role in the relationship satisfaction for emerging adults.

This research will utilize a mixed method approach with both quantitative (study 1) and qualitative (study 2) studies. Quantitative data was collected from 553 emerging adults via an online survey and qualitative data was collected from an additional 7 emerging adults via online focus groups. A triangulation design was used to measure both

quantitative and qualitative data at the same time to answer the same research questions and to further support research findings, thus increasing the validity of the results (Greene, Caracelli, & Graham, 1989). Results from both studies can be beneficial to parents, family life educators, and other professionals in family services fields by providing research on the link between parent-child sexual communication, romantic partner sexual communication, and overall relationship satisfaction for emerging adults.

Literature Review

Many factors influence an adult's satisfaction in their romantic relationships. Communication (Timm & Keiley, 2011), attachment styles, (Timm & Keiley, 2011; Stackert & Bursik, 2003), and type of parenting received as a child (Donnellan, Larsen-Rife, & Conger, 2005) all seemingly play a role in overall relationship satisfaction. The following literature review will examine the relationships between parent-child relationships, attachment styles, and parent-child communication regarding sexuality and sexual behavior. The development of sexual attitudes and competence in sexual communication with romantic partners will be discussed in relation to parent-child relationships. Adult romantic relationship satisfaction will be reviewed with an emphasis on how attitudes, communication, attachment styles, and parental relationships play a role in overall satisfaction.

Importance of Parental Relationships

The knowledge and skills to maintain an adult romantic relationship must be cultivated in some way. Many individuals are introduced to romantic love initially by observing the relationship of their parents. Observing negative interactions between parents may have negative consequences for a child's competence in romantic

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relationships as an adult (Donnellan, et al., 2005). The type of parenting a child receives also plays a role in their knowledge of adult romantic relationships. Donnellan et al. (2005) found that children who received nurturant-involved parenting were more likely to be satisfied with their romantic relationships as an adult. Nurturant-involved parenting included high positive communication, positive assertiveness, prosocial behavior, warmth, and listener responsiveness. Nurturant-involved parenting also included low hostility, angry coercion, and antisocial behavior (Donnellan, et al., 2005).

A strong parent-child relationship can improve the overall development of children, including being more likely to exhibit stronger prosocial behavior in peer groups (Clark & Ladd, 2000). Children who grow up with a strong relationship and a high quality of communication with their parents are also more likely to feel as if their feelings are understood and their needs are met (Clark & Ladd, 2000). Additionally, children whose parents provided social advice on peer relationships were less likely to experience social anxiety (Su, Pettit, & Erath, 2016), and children who have had their emotional needs met are more likely to display these same empathic behaviors to their peers, resulting in a larger number of positive friendships (Clark & Ladd, 2000). Children with these strong and supportive relationships with their parents are able to cultivate relationship competency from an early age and are likely to refine and master these relationship skills throughout their lives (Clark & Ladd, 2000).

The quality of parent-child relationships can also have a strong impact on late adolescence. Research by Hair, Moore, Garrett, Ling, and Cleveland (2008) found that adolescents who perceived their relationship with their parents as positive and supportive and who participated in routine family activities were less likely to engage in delinquent

behaviors (i.e., selling drugs, damaging/stealing property, assaulting another person, carrying a handgun, or being arrested for another crime). Increased parental support and coaching of peer interactions is associated with lower levels of social anxiety for adolescents. Adolescents with strong parental relationships found that advice from parents on interpersonal skills and maintaining peer relationships decreased their social anxiety when interacting with peers (Su, et al., 2016). Additionally, adolescents who perceived their relationship with their parents to be strong and who perceived their parents as being involved and knowledgeable about their lives exhibited greater mental well-being (Hair, et al., 2008). Positive parent-child relationships are also correlated with increased parent-child communication about sensitive topics, such as sexuality (Jaccard, Dittus, & Gordon, 2000).

Sexual Communication

Parent-child relationships play an important role in influencing sexual decisions for adolescents. Adolescents who perceived their relationship with their mothers to be positive were less likely to engage in sexual intercourse and were more likely to use contraception when they did initiate sexual activity (Dittus & Jaccard, 2000). Adolescents who communicate frequently and openly with their parents about sex are more likely to delay sexual intercourse, and they are more likely to be in a committed sexual relationship with their partner if they have a stronger relationship with their parents (Parkes, et al., 2011). Adolescents who received social support at home were more likely to possess the skills to avoid risky behavior, such as unprotected sex (Somers & Ali, 2011).

Discussions about sexuality can include abstaining from sex, practicing safe sex, understanding healthy relationships, respecting others, physical pleasure, appropriate decision-making, human reproduction, and emotional aspects of a sexual relationship. The topics discussed seem to vary based on the parents' perception of their child's sexual activity, though. If it is assumed that the child has not engaged in sexual intercourse, parents typically discuss values regarding sexual behavior, such as how to choose a healthy relationship, how to make the decision of when to have sex, and the consequences of pregnancies and STDs. When parents have reason to believe that their adolescents have started engaging in sexual activity, topic discussions focus on birth control and STDs (Beckett, et al., 2008). Regardless of the age of their child's sexual debut, parents are more likely to discuss human reproduction, abstaining from sex, and practicing safe sex rather than the emotional aspects of sex, physical pleasure, and healthy sexual relationships (Jerman & Constantine, 2010).

When the communication is clear with their child, the discussion has the potential to reduce adolescent sexual behavior, adolescent pregnancy, and frequency of STDs (Deptula, Henry, & Schoeny, 2010). Oftentimes there are barriers to parent-adolescent communication about sex, though. Mothers report being hesitant to discuss sexual topics with their children out of fear of embarrassment or being asked questions that they do not know the answers to (Jaccard, et al., 2000). Discrepancies also exist between parent and child perceptions of sexual communication with mothers perceiving more frequent communication and children perceiving less frequent communication. This is likely attributed to the fact that adolescents remember conversations about sex in which they felt as if they were heard and as if they learned something, while parents remember all of their

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attempted conversations regarding sex (Jaccard, et al., 2000). Parental conversations about sex also differ depending on the age and gender of the child. Parents are more likely to have increased discussions about sex with older adolescents, and parents are more likely to communicate more openly and frequently with their children of the same gender (Jerman & Constantine, 2010).

Adolescents who have discussed condom use with their parents are more likely to consistently use condoms when they begin engaging in sexual intercourse (Hadley, et al., 2008). Additionally, adolescents who are more comfortable communicating with their sexual partners engage in increased communication about sexual topics and contraception and are more likely to use contraception during sexual intercourse (Widman, Welsh, McNulty, & Little, 2006). Strong patterns of communication between adult romantic partners are also associated with greater relationship satisfaction; adults who communicate more openly and frequently with their partners about general relationship topics as well as sexual topics are more likely to be satisfied with their relationships, both emotionally and sexually (Mark & Jozkowski, 2013). Parent-child communication about sex also has the ability to influence an adolescent's sexual attitudes and whether or not they choose to engage in risky sexual behaviors (Deptula, et al., 2010).

Sexual Attitudes

Sexual attitudes are influenced by a variety of factors, including parental attitudes (Dittus & Jaccard, 2000), experiences with sexually explicit media (Brown & L'Engle, 2009), and peer attitudes (Potard, Courtois, & Rusch, 2008). Maternal attitudes regarding adolescent sexual behavior have been shown to play a large role in an adolescent's decision of whether or not to engage in sexual intercourse. Research by Dittus and Jaccard (2000)

found that adolescents whose mothers disapproved of their sexual behavior were 6.3 times more likely to abstain from sexual intercourse.

Relationships between parental sexual attitudes and adolescent sexual attitudes are not always so clear. Additional research by Somers and Ali (2011) revealed that when parents communicated to their children that they believed they should wait until after high school to have sex, adolescents were more likely to hold similar beliefs regarding sexual intercourse and to disagree with premarital sex. However, when parents taught their children to wait until marriage to have sex, adolescents were not as likely to hold those beliefs and were more likely to be comfortable with sexual intercourse prior to marriage. This research also found that a family's religiosity was not associated with an adolescent's sexual attitudes and behaviors.

The influence of peers on an adolescent's sexual attitudes has also been documented. When adolescents perceive their peers to approve of casual sex, they are more likely to engage in sexual intercourse themselves. Adolescents are also more likely to have positive attitudes towards condom use when they perceive their peers to be using condoms, and adolescents are more likely to use any form of contraception when they perceive their peers' beliefs regarding condoms as being positive (Potard, et al., 2008). Female adolescents who believed in using birth control were more likely to be friends with other adolescents with similar views. Female adolescents who did not believe in consistent condom use were more likely to be friends with adolescents who held more permissive views regarding sex, such as not waiting to have sex and not using condoms (Weinman, Small, Buzi, & Smith, 2008).

Adolescents who have been exposed to sexually explicit media (defined as television, internet, or magazine images of genitals) have also been shown to have different attitudes and behaviors regarding sex than adolescents who do not consume such media. Attitudes are correlated with the viewing of this material as adolescents who view sexually explicit material are more likely to hold traditional beliefs about gender roles, have permissive attitudes regarding sex, engage in oral or sexual intercourse, and sexually harass someone (Brown & L'Engle, 2009).

Attachment Styles

John Bowlby (1969) looked at the relationship between mothers and their infants. He proposed that infants form an attachment with their primary caregiver that is essential to ensuring that their physical and emotional needs are met. Infants learn how to form relationships and establish connections with others from their earliest interactions with caregivers. If these interactions are warm, positive, and result in their needs being consistently met, infants form secure attachments. If these interactions are harsh or inconsistent, infants may begin to fear their caregivers and learn that they can't always depend on others to meet their needs (Ainsworth, Blehar, Waters, & Wall, 2015). If a healthy attachment occurs, infants will likely grow into self-sufficient adults. If an unhealthy attachment between mother and infant occurs, the infant is likely to suffer a myriad of developmental difficulties throughout their life. Mary Ainsworth expanded on Bowlby's work and identified three attachment styles: secure, insecure avoidant, and insecure ambivalent/resistant (Ainsworth & Bell, 1970). Mary Main and Judith Solomon (1986) drew upon this work and developed a fourth attachment style (i.e., disorganized)

while Bartholomew and Horowitz (1991) later re-categorized the four adult attachment styles into secure, preoccupied, avoidant, and anxious-avoidant.

Research by Hazan and Shaver (1987) proposed that the quality of attachment an infant and caregiver form would determine the quality of attachments the infant has in all future relationships. For example, if children grow up experiencing rejection or fail to have their basic needs met, they begin to doubt having connections with others. They may fear getting close to someone or they may become overly dependent on other people very quickly. If children grow up experiencing warmth, love, and the comfort of all needs being met, they are likely to trust others and be able to form close relationships with an appropriate amount of dependency (Hazan & Shaver, 1987).

Secure attachments form when caregivers warmly and consistently respond to their infant's needs. Infants are attached to their primary caregiver and are minimally distressed upon separation, but they are easily comforted when the caregiver returns and display an appropriate amount of fear towards unfamiliar adults. Infants with a secure attachment will rely upon their caregiver when exploring a new environment and will demonstrate trust and security when near this caregiver (Ainsworth & Bell, 1970). Securely attached adults are similar to securely attached infants in that they have a higher self-esteem, find themselves worthy of others' love, and generally believe that people are good (Bartholomew & Horowitz, 1991).

Adults with secure attachments are confident in their relationships and feel safe with their partners. Increased communication is associated with securely attached adults, and increased communication leads to greater relationship satisfaction (Timm & Keiley, 2011). Parents who are securely attached to their romantic partners are likely to show

more positive emotions during interactions with their children (River, Borelli, & Nelson-Coffey, 2016). Positive parent-child interactions are associated with a secure attachment style for the child (Bowlby, 1969). Adults with more secure attachment styles are typically more satisfied with their relationships (Stackert & Bursik, 2003), and are more likely to engage in open sexual communication with their partners (Timm & Keiley, 2011). Frequent and respectful communication between partners is associated with greater relationship satisfaction, and increased sexual communication between partners is linked to increased sexual satisfaction in a relationship. Sexual communication involves discussing satisfaction, needs, and preferences regarding sex in an open manner with a partner (Mark & Jozkowski, 2013).

Infants who form insecure avoidant attachments with their caregivers do not appear to be emotionally connected to the caregiver. These attachments typically develop when a caregiver ignores an infant's cries for help and the infant does not feel as if the caregiver meets their needs. Upon separation, these infants are not distressed and display no fear of unfamiliar adults. Both the primary caregiver and unfamiliar adults can easily comfort these infants, and the infant does not show a preference towards the primary caregiver upon their return (Ainsworth & Bell, 1970). The fearful-avoidant adult attachment style corresponds with this infant attachment style and is characterized by low self-esteem and a belief that others are untrustworthy and rejecting (Bartholomew & Horowitz, 1991).

Insecure ambivalent/resistant attachments develop when a caregiver inconsistently responds to an infant's needs and the infant is unsure of whether the caregiver will be responsive to them. These infants show extreme distress upon

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separation of the caregiver, and they immediately return to the caregiver for comfort upon their return, but they may also quickly withdraw and not be comforted by the caregiver (Ainsworth & Bell, 1970). This attachment style in children corresponds to a preoccupied attachment style in adults. The preoccupied attachment style incorporates a low self-esteem with a belief that other people are generally good (Bartholomew & Horowitz, 1991).

Adults with insecure attachments tend to hold irrational beliefs about relationships, which negatively impacts relationship satisfaction (Stackert & Bursik, 2003). Women with insecure attachments are more likely to hold irrational beliefs regarding their ability to disagree with their partners, and men with insecure attachments are more likely to hold irrational beliefs regarding their need to always perform well sexually (Stackert & Bursik, 2003). Women with anxious-avoidant attachments are likely to react to negative sexual encounters with hostility and relationship damaging behaviors, which often results in their partner responding with similar behaviors and decreasing the satisfaction of the relationship (Birnbaum, Reis, Mikulincer, Gillath, & Orpaz, 2006). Adults with anxious-avoidant attachments or avoidant attachments are more likely to experience sexual anxiety and to use sex as a measure of their overall relationship satisfaction. These factors lead to decreased sexual communication, which in turn leads to overall decreased sexual satisfaction (Davis, et al., 2006).

Attachment styles play a significant role in not only sexual communication, but sexual behaviors and experiences. Individuals with anxious-avoidant attachments typically seek increased sexual encounters as a way to feel close to their partner and to maintain an attachment that may be lacking, whereas individuals with avoidant

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attachments are more likely to have adverse feelings towards sexual encounters (Birnbaum, et al., 2006). Gender differences are typically found between the attachment styles, with women generally being more anxious-avoidant and men generally being more avoidant (Brassard, Shaver, & Lussier, 2007). Anxious-avoidant men are more likely to pressure their partners into having sex. Individuals with anxious-avoidant attachments are known to have strong feelings of needing reassurance that their partner loves them, and this is attributed to the increased sexual pressure for men with anxious-avoidant attachments (Brassard, et al., 2007).

Individuals with anxious-avoidant attachments are more likely to measure relationship satisfaction through sexual experiences and may feel unloved or rejected by their partner if their partner does not always reciprocate their sexual desires. This strain on the physical relationship can often lead to decreased relationship satisfaction. Additionally, individuals whose partners have an avoidant attachment may struggle with sexual pleasure when their avoidant attached partner resists sexual encounters. These differences in sexual satisfaction lead to at least one partner's needs not being met and a decrease in relationship satisfaction (Birnbaum, et al., 2006). Adults with avoidant attachments are most likely to be dissatisfied with their sexual relationship, and adults with anxious-avoidant attachments are most likely to be dissatisfied with the emotional aspects of their romantic relationship (Davis, et al., 2006).

Summary

This present study aims to examine parent-child relationships in relation to communication about sexuality and sexual behavior. Positive parent-child relationships from an early age form the basis of a child's attachment style throughout their life (Hazan

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& Shaver, 1987). Children form attachment styles and learn about positive relationships from an early age, and when children become adolescents they depend on their parents to communicate with them about sexual topics. The current research on the relationship between attachment styles and sexual communication between parent and child is lacking.

Families with stronger parent-child relationships are more likely to be comfortable communicating frequently and openly about sensitive topics, such as sexuality. Increased communication about sex with adolescents results in decreased sexual activity, fewer pregnancies, and fewer STDs (Deptula, et al., 2010). However, previous research on parent-child sexual communication have not examined specific content related to these conversations; this research has largely explored whether or not parents communicate about abstinence and condom use (Deptula, et al., 2010; Hadley, et al., 2008). The present study will examine specific parent-child sexual topics including abstinence, condom/other contraception use, STDs, pregnancies, and healthy relationships.

Adolescents who have communicated more frequently with their parents about sex are more likely to communicate openly with their own sexual partners and are more likely to use condoms (Hadley, et al., 2009; Widman, et al., 2006). Increased communication with romantic partners is also correlated with both secure attachment styles and increased satisfaction with romantic relationships (Timm & Keiley, 2011). A person's sexual attitudes influence their likelihood of being open to communicating about sexual needs and desires (Hendrick, Hendrick, & Reich, 2006), and parental relationships play a large role in the formation of sexual attitudes (Dittus & Jaccard, 2000). Previous

research on the relationships between parent-child sexual communication and romantic relationship satisfaction has only focused on sexual communication between romantic partners (Timm & Keiley, 2011) or has only focused on the relationship between parent-child sexual communication and romantic partner sexual communication in adolescents (Widman, et al., 2006). This study aims to examine the influence that parent-child sexual communication has on sexual communication between romantic partners in emerging adulthood and how these influences impact romantic relationship satisfaction.

Adults who were taught more permissive attitudes towards sex during their childhood are more likely to communicate about sex with their romantic partners (Hendrick, et al., 2006) and those with increased communication are more likely to be satisfied with their relationships (Timm & Keiley, 2011). The current study aims to answer the guiding research question of how parent-child conversations regarding sex influence romantic relationship satisfaction during emerging adulthood.

In summary, the goal of this study is to answer the following specific research questions:

RQ1: How do attachment styles between the parent and child influence parent-child conversations about sexuality?

RQ 2: How do parent-child conversations regarding sexuality influence the child's sexual attitudes once they reach adulthood?

RQ 3: How do parent-child conversations regarding sexuality influence sexual communication between the child and their romantic partner once they become an adult?

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RQ 4: How do the preceding questions influence overall romantic relationship satisfaction during the emerging adulthood period?

The researcher hypothesizes that secure attachment styles will be correlated with increased parent-child communication about sexuality and increased romantic relationship satisfaction for those children once they become adults. The researcher also hypothesizes that increased parent-child communication about sexuality will be correlated with more permissive sexual attitudes which will in turn be correlated with increased sexual communication with adult romantic partners. Finally, the researcher hypothesizes that increased sexual communication between romantic partners will be correlated with increased romantic relationship satisfaction (see Figures 1-4).
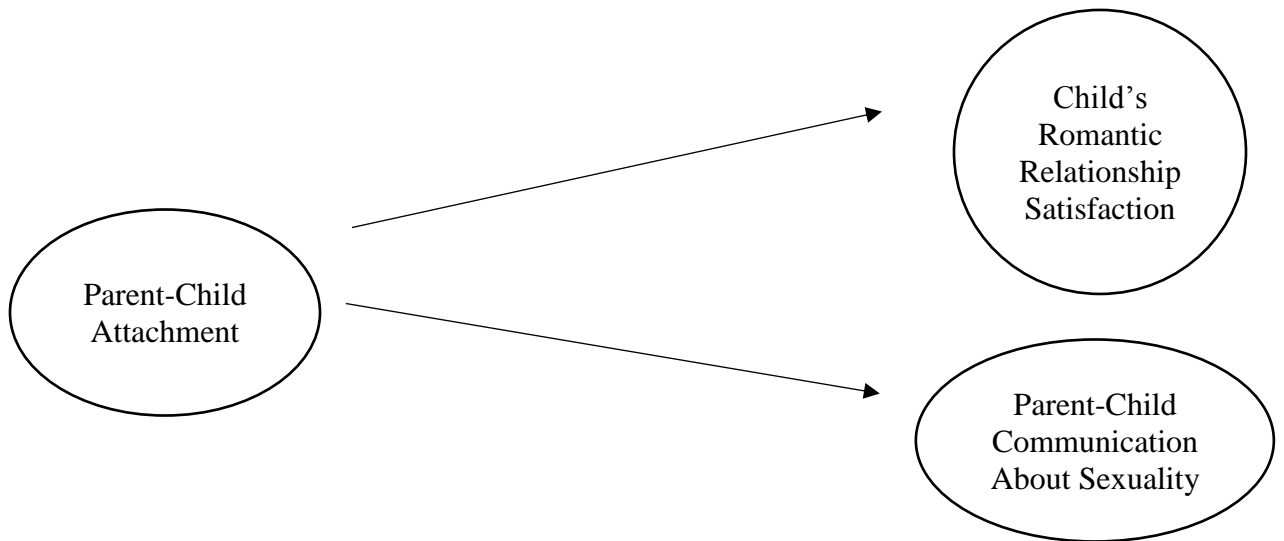
Figure 1. Research Question 1 and hypothesized correlations
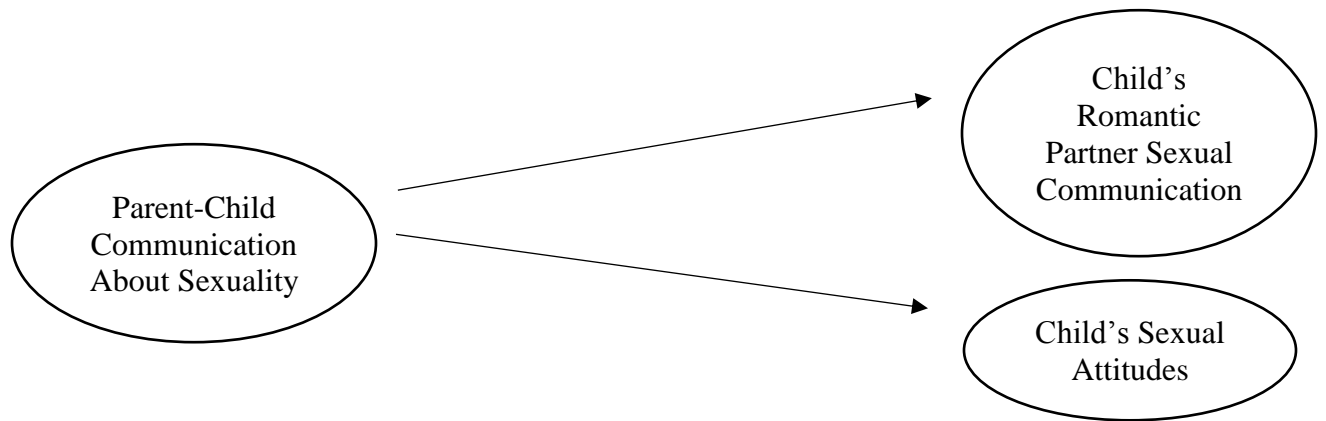
Figure 2. Research Questions 2 and 3 and hypothesized correlations.
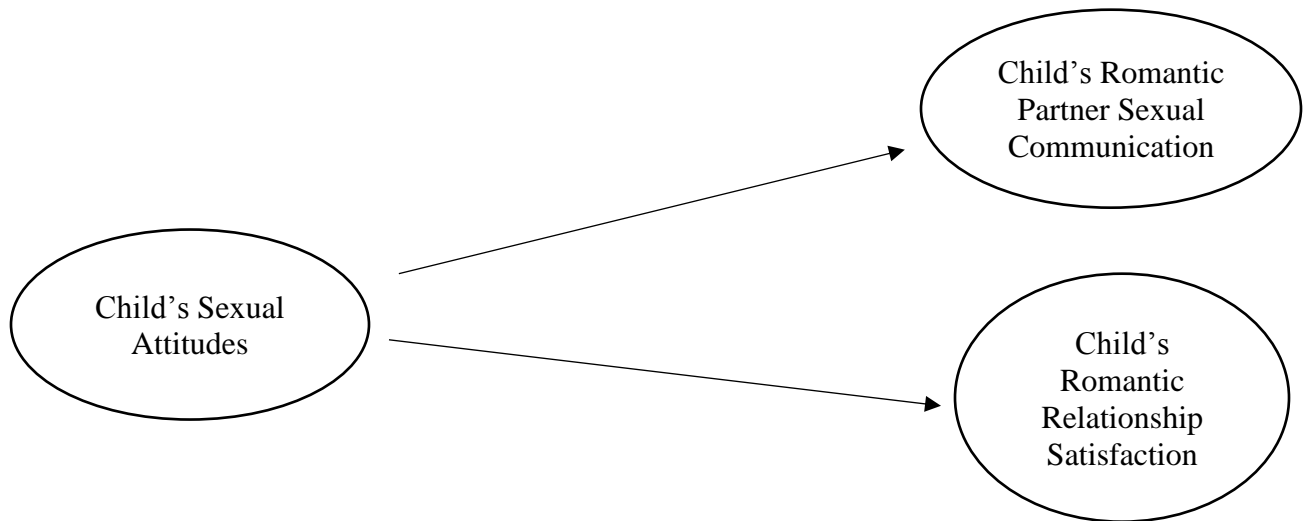
Figure 3. Research Question 4: part 1 and hypothesized correlations.
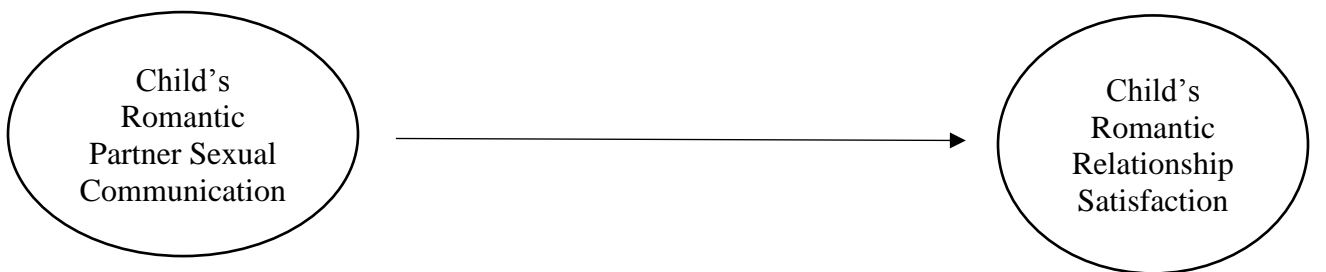
Figure 4. Research Question 4: part 2 and hypothesized correlations.

CHAPTER II – Study 1 Method

Procedures

The present study contains both a quantitative (study 1) and qualitative (study 2) analysis of data collected from individuals regarding parent-child sexual communication, sexual attitudes, romantic partner sexual communication, and relationships satisfaction. Quantitative data for study 1 was collected through an online survey (see Appendix A). 583 adult participants were recruited with snowball sampling through Facebook as well as classrooms at The University of Southern Mississippi, The University of Tennessee-Knoxville, The University of Kentucky, and Texas Woman's University. Participants completed an anonymous online survey after signing an informed consent with a waiver of signature. Participants were given the opportunity to enter to win a $100 gift card; participants were directed to an online link--separate from the survey--to enter their contact information. The contact information was not connected to the survey responses to maintain anonymity.

Participants

Of the 583 participants who responded, data was only analyzed for participants who were between 18 and 25 years of age; this resulted in a total of 553 participants. See Table 1 for demographical information. Of the 553 participants selected for this study, the median age was 22 years old. The majority of participants were female (88%). When asked to report their race/ethnicity, 56.1% of participants reported African American, 37.6% reported Caucasian, 1.8% reported multicultural, 1.4% reported Hispanic, 1.0% reported Native American, 1.0% reported Asian, and 1.0% reported Pacific Islander. Participants were asked to rate their financial stability, and 69.8% reported being

financially stable, followed by unstable (20.3%), very stable (7.2%), and very unstable (2.7%). When asked to describe their current relationship status, 37.9% of participants reported being single, followed by dating (34.7%), married (17.5%), engaged (7.3%), divorced (2.0%), and separated (0.6%).

In response to who their guardians were while growing up, 55.2% of participants reported growing up in a two person household with both mother and father, 18% reported living in a single mother household, 9.7% in a mother/stepfather household, 7.2% of participants reported split custody with both parents, 2.1% grew up in a single father household, and 0.8% resided with father/stepmother. The remaining 6.9% resided with adopted parents, grandparents/other extended family members, or others. When asked to report their main source of information about sex, 49.7% of participants reported peers, followed by parents (17.8%), TV (9.4%), internet (8.4%), and sex education in schools (8.0%). The remaining 6.7% reported other sources as being their main source of information about sex, including siblings and other family members.

When asked about what sexual topics were discussed with their parents, the majority of participants reported not discussing sexual topics, but--of those who did--the most common topics discussed with mothers were birth control (22%), reasons not to have sex (18.4%), what life would be like if they became a teenage parent (18.3%), and mother's thoughts about teenagers having sex (16.3%). Additional topics discussed with mothers included STDs (14.8%), right and wrong sexual behavior (13.5%), answering questions about sex (13%), and friends' thoughts about teenagers having sex (10.2%). Even fewer participants reported discussing sexual topics with their fathers. Of those who did, the most common topics discussed with fathers were reasons not to have sex (5.1%),

what life would be like if they became a teenage parent (4.8%), and father's thoughts about teenagers having sex (4.5%). Additional topics discussed with fathers included right and wrong sexual behavior (3.3%), STDs (2.8%), answering questions about sex (2.4%), birth control (2.1%), and friends' thoughts about teenagers having sex (1.5%).

Table 1

Overall Demographics (n = 553)

Variable	% (#)
Gender	
Female	88 (434)
Male	11.8 (58)
Androgynous	.2 (1)
Ethnicity	
African American	56.1 (276)
Caucasian	37.6 (185)
Hispanic	1.4 (7)
Native American	1.0 (5)
Asian	1.0 (5)
Multicultural	1.8 (9)
Pacific Islander	1.0 (5)
Financial Stability	
Stable	69.8 (337)
Very stable	7.2 (35)
Unstable	20.3 (98)
Very unstable	2.7 (13)
Relationship Status	
Single	37.9 (188)
Dating	34.7 (172)
Engaged	7.3 (36)
Married	17.5 (87)
Separated	.6 (3)
Divorced	2.0 (10)
Guardian	
Mother and father	55.2 (267)
Mother only	18 (87)
Father only	2.1 (10)

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Table 1. *(continued)*

Variable	% (#)
Mother and stepfather	9.7 (47)
Father and stepmother	.8 (4)
Split household	7.2 (35)
Adopted parent(s)	.2 (1)
Grandparent(s)	4.1 (20)
Gay fathers	.2 (1)
Extended family members	1.2 (6)
Other	1.2 (6)
Primary source of sex information	
Peers	49.7 (237)
Parents	17.8 (85)
Siblings	2.7 (13)
Other family members	.4 (2)
Internet	8.4 (40)
TV	9.4 (45)
Sex education in school	8.0 (38)
Other	3.6 (17)
Topics discussed with mother	
Birth control	22 (171)
Right and wrong	13.5 (105)
Mother's thoughts on sex	16.3 (127)
Friends' thoughts on sex	10.2 (79)
Questions about sex	13 (101)
Reasons against	18.4 (143)
Becoming a teenage parent	18.3 (142)
STDs	14.8 (115)
Topics discussed with father	
Birth control	2.1 (16)
Right and wrong	3.3 (26)
Father's thoughts on sex	4.5 (35)
Friends' thoughts on sex	1.5 (12)
Questions about sex	2.4 (19)
Reasons against	5.1 (40)
Becoming a teenage parent	4.8 (37)
STDs	2.8 (22)

Table 1 (continued)

	Mean	Min.	Max	SD
Age	22.10	18.00	25.00	1.84

Measures

Communication

Parent-child sexual communication was assessed by asking participants questions about how many sexual topics were addressed with each guardian during adolescence. Parent-child sexual topics discussed included birth control, right and wrong sexual behavior, parents' thoughts about teenagers having sex, friends' thoughts about teenagers having sex, adolescents' questions about sex, reasons not to have sex, consequences of becoming a teen parent, or consequences of contracting an STD. Parent-child sexual communication was measured through the number of sexual topics discussed throughout childhood with each parent.

Attachment Styles

Attachment was measured using Bartholomew and Horowitz's (1991) four adult attachment styles: secure, preoccupied, avoidant, and anxious-avoidant. Participants were asked to choose which of the following statements most described them: "It is easy for me to become emotionally close to others. I am comfortable depending on them and having them depend on me. I don't worry about being alone or having others not accept me", "I am uncomfortable getting close to others. I want emotionally close relationships, but I find it difficult to trust others completely, or to depend on them. I worry that I will be hurt if I allow myself to become too close to others", "I want to be completely intimate with others, but I often find that others are reluctant to get as close as I would like. I am

uncomfortable being without close relationships, but I sometimes worry that others don't value me as much as I value them", "I am comfortable without close emotional relationships. It is very important to me to feel independent and self-sufficient, and I prefer not to depend on others or have others depend on me." A participant's attachment style was coded as one of the four adult attachment styles based on which statement describing relationship styles they most identified with.

Revised Dyadic Adjustment Scale

This scale included the following subscales: *relationship satisfaction*, *dyadic consensus*, *dyadic satisfaction*, *and dyadic cohesion* (Busby, Crane, Larson, & Christensen, 1995). *Relationship satisfaction* was designed to measure overall satisfaction in a relationship. *Dyadic consensus* examined the degree to which partners agreed with each other, *dyadic satisfaction* measured the degree to which participants felt satisfied with their partners, and *dyadic cohesion* measured the degree to which partners engaged in activities together. Participants were asked to respond to 15 statements regarding relationship satisfaction. These statements were related to how comfortable participants were with communicating their needs to their partners, how satisfied they were with their physical and emotional relationship with their partner, and how often they argued with their partner or had thoughts of separating. The first seven questions asked participants to rate how often they disagreed with their partner about certain topics, for example "making major decisions". Participants were asked to respond that they "always agree", "almost always agree", "occasionally agree", "frequently disagree", "almost always disagree", "or "always disagree" with their partners. The next five questions asked participants to indicate how often certain situations occur by responding that they

occur "never", "rarely", "occasionally", "more often than not", "most of the time", or "all the time". An example question was "how often do you and your partner quarrel". The final three questions asked participants to indicate how often certain events occur with their partner such as "working together on a project." Participants were asked to indicate that situations occurred "once a day", "once or twice a week", "once or twice a month", "less than once a month", "never", or "more often." According to Busby, et al. (1995), the Revised Dyadic Adjustment Scale has a Cronbach alpha coefficient of .90. In the current study the Cronbach alpha coefficient was .84.

Brief Sexual Attitudes Scale

The Brief Sexual Attitudes Scale was used to measure a participant's attitudes and beliefs about sexual topics across four dimensions: *permissiveness*, *birth control*, *communion*, and *instrumentality* (Hendrick, et al., 2006). The *permissiveness* questions discussed attitudes regarding casual sex and sex with multiple partners, while the *birth control* questions involved whether or not birth control is considered responsible sex and whether men or women should be responsible for birth control. *Communion* included what emotions or attachments are associated with sexual encounters and *instrumentality* focused on the physical pleasure associated with sex (Hendrick, et al., 2006). Participants were asked to respond to 23 statements regarding sexual attitudes and indicate whether they "strongly agreed", "agreed", "neither agreed nor disagreed", "disagreed", or "strongly disagreed". These statements included how comfortable participants were discussing sexual needs with partners, their beliefs on engaging in sexual intercourse outside of marriage, their views on the connection that sexual intercourse provides with another person, and how satisfied they are with their sexual experiences. Examples

included statements such as "casual sex is acceptable" and "a sexual encounter between two people deeply in love is the ultimate human interaction". Cronbach alpha has been found in previous studies to range from .73-.90; in the current study the Cronbach alpha coefficient was .90.

Inhibition of Need Expression

This measurement looked at how comfortable participants were communicating sexually with their partners (Davis, et al., 2006). Questions included items about expressing wants, desires, and dislikes to sexual partners. Additional questions asked respondents about their comfortability with initiating sex and hearing their partner discuss their sexual concerns. Survey questions asked participants to respond to 18 statements with "not at all", "a little", "neither agree nor disagree", "quite a bit", or "very much." Example statements included "If I'm dissatisfied with something about our sex life, I don't hesitate to tell my partner" and "Generally, I tend to be reserved about having sex." According to Davis, et al. (2006), the Inhibition of Need Expression has a Cronbach alpha coefficient of .89. In the current study the Cronbach alpha coefficient was .73.

Physical Satisfaction Scale

The Physical Satisfaction Scale was used to measure sexual satisfaction (Davis, et al., 2006). Questions included items about overall sexual satisfaction, satisfaction with partner's appearance and sexual skills, and the ability to orgasm with a sexual partner. Participants were asked to respond to 11 statements with "not at all", "a little", "neither agree nor disagree", "quite a bit", or "very much". Example statements included "satisfied with the quality of sex in your relationship" and "satisfied with the sexual attractiveness of your partner". According to Davis, et al. (2006), the Physical

Satisfaction Scale has a Cronbach alpha coefficient of .85. In the current study the

Cronbach alpha coefficient was .76. See Appendix A for all survey questions used for

study 1.

CHAPTER III - Study 1 Results

The relationships between all variables were measured using the Pearson product-moment correlation coefficient. A lower score on the *INE* was interpreted as lower sexual anxiety when communicating about sex with a romantic partner. Research Question 3 (see Figure 2) of how parent-child conversations about sexuality later influenced sexual communication between the child and their romantic partner was measured by examining the correlation between the total number of sexual topics discussed with mother/father and *INE*. There was a moderate, negative correlation between *INE* and *PSS* ($r = -.471, p < .01$). The relationship between partner sexual communication (as measured by *INE*) and emotional relationship satisfaction (as measured by the *RDAS*) demonstrated a moderate, negative correlation between *INE* and *RDAS* ($r = -.309, p < .01$). These correlations addressed Research Question 4 (see Figures 3 and 4) of how sexual communication between romantic partners influenced relationship satisfaction.

The relationship between partner sexual communication (measured by the *INE*) and sexual attitudes (measured by the *BSAS* scale) demonstrated weak correlations between *BSAS Birth Control* and *INE* ($r = .194, p < .01$) and between *BSAS Communion* and *INE* ($r = .155, p < .01$). The relationship between physical relationship satisfaction (as measured by the *PSS*) and sexual attitudes (as measured by the *BSAS* scale) demonstrated weak correlations between *BSAS Permissiveness* and *PSS* ($r = .121, p < .05$), *BSAS Birth Control* and *PSS* ($r = -1.09, p < .05$), and *BSAS Communion* and *PSS* ($r = -1.53, p < .01$). The relationship between emotional relationship satisfaction (measured by the *RDAS*) and sexual attitudes (measured by the *BSAS* scale) demonstrated a weak correlation between *BSAS Permissiveness* and *RDAS* ($r = .244, p < .01$). These correlations addressed Research

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Question 4 (see Figures 3 and 4) of how sexual attitudes influenced overall relationship

satisfaction. Results are shown in Table 2.

Table 2

Correlations Between Variables

	P	B	C	I	INE	PSS	RDAS
Discussion with Mother	.037	.049	-.026	-.012	.018	.05	.06
Discussion with Father	-.015	.135	.012	.021	-.025	.08	.14
INE	-.071	.194	.155	-.056	--	-.471	-.309
PSS	.121	-1.09	-1.53	.022	-.471	--	.321
RDAS	.244	.039	-.090	.092	-.309	.321	--

Note. P = Permissiveness sexual attitudes, B = birth control sexual attitudes, C = communion sexual attitudes, I = instrumentality sexual attitudes

ANOVA

A one-way between-groups analysis of variance was conducted to explore

relationships between relationship satisfaction, physical satisfaction, and parent-child

communication to attachment styles; this answered the Research Question 1 (see Figure

1) of how attachment styles related to each of the preceding factors. Each comparison

involved the participants being divided into four groups according to their attachment

styles (Group 1: secure; Group 2: fearful; Group 3: preoccupied; Group 4: dismissing).

First, an ANOVA was conducted to explore the relationship with physical satisfaction, as

measured by the *PSS,* and attachment styles. There was a statistically significant

difference at the $p < .05$ level in *PSS* scores for the four attachment groups: $F (3, 400) =$

3.33, $p = .02$. Despite reaching statistical significance, the actual difference in mean

scores between the groups was quite small. The effect size, calculated using eta squared,

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was .02. Post-hoc comparisons using the Tukey HSD test indicated that the mean score for Group 1 ($M = 41.28$, $SD = 8.84$) was approaching significance by scoring higher on physical satisfaction when compared to Group 2 ($M = 38.48$, $SD = 8.07$, $p = .06$) and Group 4 ($M = 38.50$, $SD = 9.43$, $p = .08$). A one-way between-groups analysis of variance was also conducted to explore the relationship with overall relationship satisfaction, as measured by the *RDAS*. There was no statistically significant difference at the $p < .05$ level in *RDAS* scores for the four attachment style groups: $F (3, 175) = 1.75$, $p = .16$.

A one-way between-groups analysis of variance was also conducted to explore the impact of parent-child communication (measured by the total number of sexual topics discussed by both mother and father throughout childhood). There was no statistically significant difference at the $p < .05$ level in scores for total number of sexual topics discussed with the mother for the four attachment style groups: $F (3, 489) = 1.24$, $p = .30$. For topics discussed with fathers, the homogeneity assumption was violated, so Welch and Brown-Forsythe were reviewed for significance; there was no statistically significant difference at the $p < .05$ level in scores for total number of sexual topics discussed for the four attachment style groups: $F (3, 489) = 1.62$, $p = .178$. Results are shown in Table 3.

Table 3

One-Way Analysis of Variance for the Effects of Attachment Styles on Physical Satisfaction, Emotional Relationship Satisfaction, and Parent-Child Sexual Communication

Table 3 (continued)

	Secure		Fearful		Preoccupied		Dismissing				
	M	SD	M	SD	M	SD	M	SD	F (3,400)	p	η^2
PSS	41.28	8.84	38.48	8.07	38.34	8.10	38.50	9.43	3.33	.02	.02
RDAS	52.81	7.46	49.08	10.5	52.38	7.88	51.74	7.40	1.75	.16	
Discussion with Mother	2.03	2.76	2.18	2.75	2.19	2.71	1.62	2.45	1.24	.30	
Discussion with Father	.50	1.37	.25	.86	.50	1.35	.28	.92	1.62	.18	

Multiple Regressions

To answer Research Question 2 (see Figure 2) of how parent-child

communication about sexuality influenced the child's sexual attitudes, a standard

multiple regression was completed to determine the ability of two independent variables

(i.e., number of sexual topics discussed with mother/father and relationship status) to

predict the dependent (outcome) variable of sexual attitudes (measured by the *BSAS*

scale). The overall model for number of sexual topics discussed with mother and

relationship status statistically enhanced the prediction of *BSAS Permissiveness* at the *p*

<.05 level; F(2, 454) = 4.60, *p* = .011, R^2 = .02, over the baseline model with zero

predictors. The total number of topics discussed with mother and relationship status

together explained 2% of the variance in *BSAS Permissiveness.* Relationship status

significantly predicted the variance in *BSAS Permissiveness* (t = 2.93, *p* = .004, β = .14),

while total number of topics discussed with mother did not (t = .83, *p* = .41, β = .04).

Specifically, perceived relationship status and total topics discussed with mother

accounted for 1.8% and .01% respectively, of the overall variance in *BSAS*

Permissiveness. Results are shown in Table 4.

Table 4

Multiple Regression Analysis for Mother-Child Communication and Relationship Status

Predicting Sexual Attitudes (Permissiveness)

	95% CI	β	t	p
Discussion with Mother	[-.017, .042]	.04	.83	.41
Relationship status	[.030, .154]	.14	2.93	.004

The model for number of sexual topics discussed with mother and relationship status statistically enhanced the prediction of *BSAS Birth Control* at the $p < .05$ level; $F_{(2, 466)} = 4.60$, $p = .016$, $R^2 = .018$, over the baseline model with zero predictors. The total number of topics discussed with mother and relationship status together explained 1.8% of the variance in *BSAS Birth Control*. Relationship status significantly predicted the variance in *BSAS Birth Control* ($t = -2.68$, $p = .008$, $β = -1.2$), while total number of topics discussed with mother did not ($t = 1.02$, $p = .31$, $β = .05$). Specifically, perceived relationship status and total topics discussed with mother accounted for 0.88% and .09% respectively, of the overall variance in *BSAS Birth Control*. Results are shown in Table 5.

Table 5

Multiple Regression Analysis for Mother-Child Communication and Relationship Status

Predicting Sexual Attitudes (Birth Control)

	95% CI	β	t	p
Discussion with mother	[-.014, .044]	.05	1.02	.31
Relationship status	[-1.44, -.022]	-1.2	-2.68	.008

The model for number of sexual topics discussed with mother and relationship status statistically enhanced the prediction of *BSAS Communion* at the $p < .05$ level; $F(2,$

467) = 4.33, p = .014, R^2 = .018, over the baseline model with zero predictors. The total

number of topics discussed with mother and relationship status together explained 1.8%

of the variance in *BSAS Communion.* Relationship status significantly predicted the

variance in *BSAS Communion* (t = -2.89, p = .004, β = -1.3), while total number of topics

discussed with mother did not (t = -.028, p = .54, β = .03). Specifically, perceived

relationship status and total topics discussed with mother accounted for 0.88% and .09%

respectively, of the overall variance in *BSAS Communion.* Results are shown in Table 6.

Table 6

Multiple Regression Analysis for Mother-Child Communication and Relationship Status

Predicting Sexual Attitudes (Communion)

	95% CI	β	t	p
Discussion with mother	[-.035, .018]	.03	-.028	.54
Relationship status	[-.139, -.026]	-1.3	-2.89	.004

The model for number of sexual topics discussed with mother and relationship

status did not statistically enhance the prediction of *BSAS Instrumentality*. Results are

shown in Table 7.

Table 7

Multiple Regression Analysis for Mother-Child Communication and Relationship Status

Predicting Sexual Attitudes (Instrumentality)

	95% CI	β	t	p
Discussion with mother	[-.033, .026]	-.01	-.228	.819
Relationship status	[-.011, .115]	-.08	1.62	.106

The model for number of sexual topics discussed with father and relationship

status statistically enhanced the prediction of *BSAS Permissiveness* at the p <.05 level;

F(2, 454) = 4.26, p = .015, R^2 = .019, over the baseline model with zero predictors. The total number of topics discussed with father and relationship status together explained 1.9% of the variance in *BSAS Permissiveness*. Relationship status significantly predicted the variance in *BSAS Permissiveness* (t = 2.90, p = .004, β = .14), while total number of topics discussed with father did not (t = -.178, p = .86, β = -.008). Specifically, perceived relationship status and total topics discussed with father accounted for 1.7% and .04% respectively, of the overall variance in *BSAS Permissiveness*. Results are shown in Table 8.

Table 8

Multiple Regression Analysis for Father-Child Communication and Relationship Status Predicting Sexual Attitudes (Permissiveness)

	95% CI	β	t	p
Discussion with father	[-.076, .063]	-.008	-.178	.86
Relationship status	[-.03, .154]	.14	2.90	.004

The model for number of sexual topics discussed with father and relationship status statistically enhanced the prediction of *BSAS Birth Control* at the p <.05 level; F(2, 466) = 7.68, p = .001, R^2 = .032, over the baseline model with zero predictors. The total number of topics discussed with father and relationship status together explained 3.2% of the variation in *BSAS Birth Control*. Although both independent variables statistically enhanced the prediction of *BSAS Birth Control*, the findings show that number of topics discussed with father better predicted *BSAS Birth Control* (t = 2.82, p = .005, β = .129) than relationship status (t = -2.58, p = .01, β = .-.118). Specifically, number of topics

discussed with father and relationship status accounted for 2.9% and .06%, respectively, of the overall variance in *BSAS Birth Control.* Results are shown in Table 9.

Table 9

Multiple Regression Analysis for Father-Child Communication and Relationship Status Predicting Sexual Attitudes (Birth Control)

	95% CI	β	t	p
Discussion with father	[-.030, .165]	.129	2.82	.005
Relationship status	[-.140, -.019]	-.118	-2.58	.01

The model for number of sexual topics discussed with father and relationship status statistically enhanced the prediction of *BSAS Communion* at the $p <.05$ level; $F(2, 467) = 4.16$, $p = .016$, $R^2 = .018$, over the baseline model with zero predictors. The total number of topics discussed with father and relationship status together explained 1.8% of the variance in *BSAS Communion.* Relationship status significantly predicted the variance in *BSAS Communion* (t = -2.87, $p = .004$, $\beta = -1.3$), while total number of topics discussed with father did not (t = .135, $p = .89$, $\beta = -.006$). Specifically, perceived relationship status and total topics discussed with father accounted for 1.7% and .04% respectively, of the overall variance in *BSAS Communion.* The model for number of sexual topics discussed with father and relationship status did not statistically enhance the prediction of *BSAS Instrumentality*. Results are shown in Table 10 and 11, respectively.

Table 10

Multiple Regression Analysis for Father-Child Communication and Relationship Status Predicting Sexual Attitudes (Communion)

Table 10 (continued)

	95% CI	β	t	p
Discussion with father	[-.059, .067]	-.006	.135	.89
Relationship status	[-.138, -.026]	-1.3	-2.87	.004

Table 11

Multiple Regression Analysis for Father-Child Communication and Relationship Status

Predicting Sexual Attitudes (Instrumentality)

	95% CI	β	t	p
Discussion with father	[-.051, .090]	.025	.536	.59
Relationship status	[-.01, .116]	.077	1.65	.10

To answer Research Question 3 (see Figure 2) of how parent-child conversations about sexuality influenced sexual communication between the child and their romantic partner when they become an adult, a standard multiple regression was completed to determine the ability of two independent variables (i.e. number of sexual topics discussed with mother/father and relationship status) to predict the dependent (outcome) variable partner sexual communication, as measured by the *INE* scale. The model for number of sexual topics discussed with mother and relationship status did not statistically enhance the prediction of *INE*. The model for number of sexual topics discussed with father and relationship status did not statistically enhance the prediction of *INE*. Results are shown in Table 12 and 13, respectively.

Table 12

Multiple Regression Analysis for Mother-Child Communication and Relationship Status

Predicting Partner Sexual Communication

Table 12 (continued)

	95% CI	β	t	p
Discussion with mother	[-.366, .522]	.018	.346	.73
Relationship status	[-1.02, .863]	-.008	-.163	.871

Table 13

Multiple Regression Analysis for Father-Child Communication and Relationship Status

Predicting Partner Sexual Communication

	95% CI	β	t	p
Discussion with father	[-.1.32, .790]	-.025	-.492	.623
Relationship status	[-1.03, .851]	-.010	-.191	.849

To answer the Research Question 4 (see Figures 3 and 4) of how sexual attitudes influence relationship satisfaction, a standard multiple regression was completed to determine the ability of two independent variables (i.e. sexual attitudes as measured by the *BSAS* scale and relationship status) to predict the dependent (outcome) variable partner sexual communication, as measured by the *INE* scale. The model for *BSAS Permissiveness* and relationship status did not statistically enhance the prediction of partner sexual communication. Results are shown in Table 14.

Table 14

Multiple Regression Analysis for Sexual Attitudes (Permissiveness) and Relationship

Status Predicting Partner Sexual Communication

	95% CI	β	t	p
Permissiveness	[-2.42, .441]	-.072	-1.36	.175
Relationship status	[-.956, .978]	.001	.022	.983

The model for *BSAS Birth Control* and relationship status statistically enhanced the prediction of partner sexual communication, as measured by the *INE*, $F(2, 378) = 7.43$, $p = .001$, $R^2 = .038$, over the baseline model with zero predictors; *BSAS Birth Control* and relationship status together explained 3.8% of the variance in partner sexual communication, as measured by the *INE*. *BSAS Birth Control* significantly predicted the variance in *INE* ($t = 3.85$, $p < .001$, $\beta = .20$), while relationship status did not ($t = .310$, $p = .76$, $\beta = -016$). Specifically, *BSAS Birth Control* and relationship status accounted for 2.7% and 1.4% respectively, of the overall variance in partner sexual communication, measured by *INE*. Results are shown in Table 15.

Table 15

Multiple Regression Analysis for Sexual Attitudes (Birth Control) and Relationship Status Predicting Partner Sexual Communication

	95% CI	β	t	p
Birth Control	[1.33, 4.12]	.196	3.85	<.001
Relationship status	[-.789, 1.08]	.016	.310	.757

The model for *BSAS Communion* and relationship status statistically enhanced the prediction of partner sexual communication, as measured by the *INE*, $F(2, 378) = 4.65$, $p = .01$, $R^2 = .024$, over the baseline model with zero predictors; *BSAS Communion* and relationship status together explained 2.4% of the variance in partner sexual communication, as measured by the *INE*. *BSAS Communion* significantly predicted the variance in *INE* ($t = 3.05$, $p = .002$, $\beta = .16$), while relationship status did not ($t = .236$, $p = .813$, $\beta = .012$). Specifically, *BSAS Communion* and relationship status uniquely accounted for 2.0% and 0.5% respectively, of the overall variance in partner sexual

communication, measured by *INE*. The model for *BSAS Instrumentality* and relationship

status did not statistically enhance the prediction of partner sexual communication, as

measured by the *INE*. Results are shown in Table 16 and 17, respectively.

Table 16

Multiple Regression Analysis for Sexual Attitudes (Communion) and Relationship Status

Predicting Partner Sexual Communication

	95% CI	β	*t*	*p*
Communion	[.833, 3.87]	.157	3.05	.002
Relationship status	[-.831, 1.06]	.012	.236	.813

Table 17

Multiple Regression Analysis for Sexual Attitudes (Instrumentality) and Relationship

Status Predicting Partner Sexual Communication

	95% CI	β	*t*	*p*
Instrumentality	[-2.13, .625]	-.055	-1.07	.284
Relationship status	[-.990, .908]	-.004	-.085	.932

To additionally answer Research Question 4 (see Figures 3 and 4) of how sexual

attitudes influenced relationship satisfaction, a standard multiple regression was

completed to determine the ability of two independent variables (i.e. sexual attitudes as

measured by the *BSAS* scale and relationship status) to predict the dependent (outcome)

variable physical satisfaction, measured by the *PSS* scale. The model for *BSAS*

Permissiveness and relationship status statistically enhanced the prediction of physical

satisfaction, measured by the *PSS*, $F(2, 386) = 3.37$, $p = .04$, $R^2 = .017$, over the baseline

model with zero predictors; *BSAS Permissiveness* and relationship status together

explained 1.7% of the variance in physical satisfaction, measured by the *PSS*. *BSAS*

Permissiveness significantly predicted the variance in *PSS* (t = 2.24, *p* = .026, β = .11), while relationship status did not (t = 1, *p* = .317, β = .364). Specifically, *BSAS Permissiveness* and relationship status uniquely accounted for 1.6% and 0.1% respectively, of the overall variance in physical satisfaction, measured by the *PSS*. The model for *BSAS Birth Control* and relationship status did not statistically enhance the prediction of physical satisfaction, measured by the *PSS*. Results are shown in Table 18 and 19, respectively.

Table 18

Multiple Regression Analysis for Sexual Attitudes (Permissiveness) and Relationship Status Predicting Physical Satisfaction

	95% CI	β	*t*	*p*
Permissiveness	[.145, 2.26]	.114	2.24	.026
Relationship status	[-.352, 1.08]	.051	1.00	.317

Table 19

Multiple Regression Analysis for Sexual Attitudes (Birth Control) and Relationship Status Predicting Physical Satisfaction

	95% CI	β	*t*	*p*
Birth Control	[-2.13, -.039]	-.102	-2.04	.042
Relationship status	[-.352, 1.08]	.054	1.07	.283

The model for *BSAS Communion* and relationship status statistically enhanced the prediction of physical satisfaction, measured by the *PSS*, F(2, 399) = 5.2, *p* = .006, R^2 = .026, over the baseline model with zero predictors; *BSAS Communion* and relationship status together explained 2.6% of the variance in physical satisfaction, measured by the *PSS*. *BSAS Communion* significantly predicted the variance in *PSS* (t = -2.93, *p* = .004, β

=.-1.47), while relationship status did not (t = .945, *p* = .345, β = .047). Specifically,

BSAS Communion and relationship status uniquely accounted for 2.2% and 0.6%

respectively, of the overall variance in physical satisfaction, measured by the *PSS*. The

model for *BSAS Instrumentality* and relationship status did not statistically enhance the

prediction of physical satisfaction, measured by the *PSS*. Results are shown in Table 20

and 21, respectively.

Table 20

Multiple Regression Analysis for Sexual Attitudes (Communion) and Relationship Status

Predicting Physical Satisfaction

	95% CI	β	*t*	*p*
Communion	[-2.81, 1.04]	.047	.945	.345
Relationship status	[-.364, 1.04]	.047	-2.93	.004

Table 21

Multiple Regression Analysis for Sexual Attitudes (Instrumentality) and Relationship

Status Predicting Physical Satisfaction

	95% CI	β	*t*	*p*
Instrumentality	[-1.32, .742]	-.027	-.541	.589
Table 22 *(continued)*				
Relationship status	[-.216, 1.20]	.069	1.37	.173

A standard multiple regression was completed to determine the ability of two

independent variables (i.e. sexual attitudes as measured by the *BSAS* scale and

relationship status) to predict the dependent (outcome) variable romantic relationship

satisfaction, as measured by the *RDAS*. The model for *BSAS Permissiveness* and

relationship status statistically enhanced the prediction of romantic relationship

satisfaction, measured by the *RDAS*, F(2, 170) = 5.42, $p = .005$, $R^2 = .061$, over the

baseline model with zero predictors; *BSAS Permissiveness* and relationship status

together explained 6.1% of the variance in romantic relationship satisfaction, as measured

by the *RDAS*. *BSAS Permissiveness* significantly predicted the variance in *RDAS* (t =

3.17, $p = .002$, $\beta = .239$), while relationship status did not (t = .460, $p = .65$, $\beta = .035$).

Specifically, *BSAS Permissiveness* and relationship status uniquely accounted for 5.7%

and 0.6% respectively, of the overall variance in romantic relationship satisfaction, as

measured by the *RDAS*. The model for *BSAS Birth Control* and relationship status did not

statistically enhance the prediction of romantic relationship satisfaction, measured by the

RDAS. The model for *BSAS Communion* and relationship status did not statistically

enhance the prediction of romantic relationship satisfaction, measured by the *RDAS*. The

model for *BSAS Instrumentality* and relationship status did not statistically enhance the

prediction of romantic relationship satisfaction, measured by the *RDAS*. Results are

shown in Tables 22-25, respectively.

Table 22

Multiple Regression Analysis for Sexual Attitudes (Permissiveness) and Relationship

Status Predicting Emotional Relationship Satisfaction

	95% CI	β	t	p
Permissiveness	[.901, 3.88]	.239	3.17	.002
Relationship status	[-.774, 1.24]	.035	.460	.646

Table 23

Multiple Regression Analysis for Sexual Attitudes (Birth Control) and Relationship Status

Predicting Emotional Relationship Satisfaction

Table 23 (continued)

	95% CI	β	t	p
Birth Control	[-1.82, 1.20]	-.031	-.412	.681
Relationship status	[-.590, 1.45]	.063	.830	.407

Table 24

Multiple Regression Analysis for Sexual Attitudes (Communion) and Relationship Status

Predicting Emotional Relationship Satisfaction

	95% CI	β	t	p
Communion	[-2.52, .734]	-.082	-1.08	.280
Relationship status	[-.632, 1.40]	.056	.742	.459

Table 25

Multiple Regression Analysis for Sexual Attitudes (Instrumentality) and Relationship

Status Predicting Emotional Relationship Satisfaction

	95% CI	β	t	p
Instrumentality	[-.623, 2.33]	.087	1.14	.255
Relationship status	[-.608, 1.43]	.061	.795	.428

To answer Research Question 4 (see Figures 3 and 4) of how partner sexual communication influenced relationship satisfaction, a standard multiple regression was completed to determine the ability of two independent variables (i.e. partner sexual communication, measured by *INE,* and relationship status) to predict the dependent (outcome) variable romantic relationship satisfaction, as measured by the *RDAS* scale. The model statistically enhanced the prediction of romantic relationship satisfaction, measured by the *RDAS*, $F(2, 375) = 54.49$, $p < .001$, $R^2 = .226$, over the baseline model with zero predictors; *INE* and relationship status together explained 22.6% of the

variance in romantic relationship satisfaction, as measured by the *RDAS*. *INE*

significantly predicted the variance in *RDAS* (t = -10.34, *p* = .000, β = .-.471), while

relationship status did not (t = 1.37, *p* = .17, β = .063). Specifically, *INE* and relationship

status accounted for 20.6% and 1.6% respectively, of the overall variance in romantic

relationship satisfaction, as measured by the *RDAS*. Results are shown in Table 26.

Table 26

Multiple Regression Analysis for Partner Sexual Communication and Relationship Status

Predicting Emotional Relationship Satisfaction

	95% CI	β	*t*	*p*
Partner Sexual Communication	[-.335, -.112]	-.309	-3.96	<.001
Relationship status	[-.607, 1.48]	.065	.827	.409

A standard multiple regression was completed to determine the ability of two

independent variables (i.e. *INE* and relationship status) to predict the dependent

(outcome) variable physical satisfaction, as measured by the *PSS* scale. The model

statistically enhanced the prediction of physical satisfaction, measured by the *PSS* F(2,

150) = 8.20, *p* < .001, R^2 = .1, over the baseline model with zero predictors; *INE* and

relationship status together explained 10% of the variance in physical satisfaction, as

measured by the *PSS*. *INE* significantly predicted the variance in *PSS* (t = -3.96, *p* = .000,

β = .-3.09), while relationship status did not (t = .827, *p* = .409, β = .065). Specifically,

INE and relationship status accounted for 9.1% and 0.7% respectively, of the overall

variance in physical satisfaction, as measured by the *PSS*. Results are shown in Table 27

Table 27

Multiple Regression Analysis for Partner Sexual Communication and Relationship Status

Predicting Physical Satisfaction

	95% CI	β	*t*	*p*
Partner Sexual Communication	[-.428, -.291]	-.471	-10.34	.000
Relationship status	[-.192, 1.09]	.063	1.37	.170

CHAPTER IV – Study 2 Method

Procedures

For the qualitative section of this study, potential participants were recruited

through social media and flyers posted at The University of Southern Mississippi and the

Onslow County Partnership for Children in Jacksonville, NC. Interested participants

completed a brief survey via Qualtrics where they indicated times they were available for

an online focus group. When a common time was found, the potential participants were

sent an email with instructions for downloading and logging into Blackboard Collaborate

Classroom using an anonymous user ID, along with a copy of the informed consent.

Three focus groups were conducted with 2-3 participants each and lasted

approximately 30 minutes each; this resulted in 7 adult participants between the ages of

18 and 25. The informed consent was displayed again at the beginning of the focus

groups and participants indicated that they consented in the chat box. The researcher

asked 9 open ended questions (see appendix B) regarding the nature and quantity of

participants' sexuality conversations with their parents during their childhood as well as

their comfort with discussing sexual topics with their current romantic partners.

Questions also explored overall relationships with parents during childhood and romantic

relationship satisfaction, both sexually and emotionally. Full transcriptions of the focus

groups are included in Appendix C, Appendix D, and Appendix E. Note that all names

are pseudonyms for the participants.

Thematic Analysis

Thematic analysis was used to analyze the qualitative results from the focus

groups. The online focus groups were recorded via Blackboard Collaborate Classroom

and the researcher listened to the recordings multiple times while transcribing the content

of the focus groups into a word document. While reading the content of the focus groups,

the researcher developed initial codes based on common and recurring ideas that were

present in the responses. The researcher then reviewed the transcriptions again and all

responses were classified into an initial code that labeled the overall idea present in the

response (Braun & Clarke, 2006). The researcher searched for patterns in the codes and

responses, and classified the codes into overall themes, so that the qualitative data was

more manageable. The researcher noted when the participant responses revolved around

similar ideas.

The transcriptions of the focus groups were reviewed again after concepts were

developed, and responses were labeled according to which of those concepts they fit in.

This process continued several times until the researcher was confident that the concepts

established represented the entire data set, and that the responses fit well into the

established themes (Braun & Clarke, 2006). The researcher was then able to analyze the

themes and responses to determine what themes were present most often, how many

participants' responses fell within each theme, how certain themes were related to other

themes within the same participant's response, and how well the themes present in

participants' responses answered the overall research questions (Braun & Clarke, 2006).

Results of the themes in participant responses are shown in Table 28.

Table 28

Descriptive Analysis of Themes Found in Focus Group Participant Responses

Theme	Subtheme	Frequency	Example Quote
Lack of Communication	Unanswered questions	4	"My question was about when a female "gets wet" I didn't know what that was so I was asking her what was happening. I described it as a random discharge Her reply was hmm.."
	No talk of healthy relationships	4	"…she would say you know, this is a penis, it gets an erection, it has ejaculations, and it's over. I mean, it was very just, these are the points, this is how it is, not anything involving emotions or how I should feel about it, just very black and white of what sex was, not why you should do it, when to do it…"
Partner Sexual Communication and Satisfaction	Communication is essential	7	"…it's all about both parties being comfortable and a lot of communication is very important as well."
	Sexual communication related to satisfaction	6	"My partner and I both have very open conversations about our sex life and are comfortable enough with each other that we try new things as often as we can."
Relationship between Parental and Partner Sexual Communication	Parental communication related to comfortability with sexual communication	5	"…because I didn't grow up in a house where sex was talked about, I have a hard time expressing my needs and what I want in my desires. So no, we legitimately just really don't talk about it very much at all."
	Sexual communication related to satisfaction	6	"I can be pretty open communicating like, this is what I want and this is what I need and I think that's very important within the sexual relationship to know what each other likes, what each other wants..."

Reliability and Validity

The researcher ensured credibility through the utilization of both qualitative and quantitative data to answer the research questions (Guba, 1981). Study 1 and 2 were designed to answer the same set of research questions. Results from study 1 were used to formulate the focus group questions for study 2. The results of the quantitative data from

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study 1 supported the qualitative findings from study 2. Similar themes were found among both sets of data and were able to be used to jointly to answer the research questions. The researcher ensured that participants were aware that the study was voluntary and that they did not have to answer any questions they did not wish to answer. When confusion occurred—which was rare--questions were rephrased to participants so that they had a chance to answer the same question in two different ways to verify participants' honesty. Detailed instructions of data collection and analysis are provided so that the study may be easily replicated by an outside researcher.

CHAPTER V Study 2 Results

Lack of Sexual Communication with Parents

The majority of participants discussed a lack of communication with their parents about sexual topics during childhood and adolescence. Several participants reported that their parents did not engage in any sort of communication with them about sex. Rinn stated that there was "nothing at all" and Emmuhlee11 said their parents communicated about sex "absolutely zero". Others reported minimal communication with their parents. XYZ remembered speaking with their stepfather briefly about sex, but really having a desire to speak with their mother:

> When I was younger I wanted to talk to my mother more about it, and not really so much my stepdad because he was a male and it was weird at the time, but my mom was completely against it never wanted to talk about it, she said, you'll learn everything in school that you need to know and just kind of left it at that.

Several participants reported one brief conversation with their parents about sex, but then the subject never got brought up again. Jamminjd remembered communicating "Never with my dad. Briefly with my mom. Maybe one small conversation," and ABC123 recalled not talking with their mother about sex "until I was 17 and she knew I had lost my virginity."

For participants who did communicate with their parents about sex, many did not believe they received sufficient information about healthy sexual relationships. ABC123 recalled one conversation with their mother about sex as "a statement that I needed to get on birth control and then the topic was closed," and blessed2017 recalled a "specific memory of my father sitting me and my brother down at about the age of 12 and told us

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the importance of using condoms. After that there was not much conversation."
Emmuhlee11 described the one conversation they had with their mom about sex as being strictly anatomical:

> So she would just say, you know, this is a penis, it gets an erection, it has ejaculations, and it's over. I mean, it was very just, these are the points, this is how it is, not anything involving emotions or how I should feel about it, just very black and white of what sex was, not why you should do it, when to do it, it was just these are the facts and these are the facts I want you to know and nothing else.

XYZ recalled a similar conversation with their stepdad following an incident with sexual material on TV:

> [He would say] that's how you get cooties, don't do that, you want to save yourself for one person. It wasn't like you need this to protect against this or this will lead to this, it was never anything like that.

> A common theme also emerged among participants asking their parents questions about sex that did not get answered. Participants reported that not only did their parents avoid initiating conversations about sex, but at times they explicitly ignored questions that were asked. Emmuhlee11 remembered:

> I would ask some questions like if I overheard a phrase at school that I didn't understand or something, but they would tend to just kind of oh, you know, don't worry about that right now, maybe when you're older we'll talk about it- they never really got a full explanation of my question.

Jamminjd recalled a specific memory of asking their mom about when a "female 'gets wet' I didn't know what that was so I was asking her what was happening. I described it

as a random discharge. Her reply was hmm.." Rinn reported not feeling comfortable even asking questions; he stated that his "family is not very open to communication, so no, I can't really go to them to get answers to questions I may have." Blessed2017 reported talking with their parents "once or twice" during adolescence about sex, but that "communication about sex back then felt awkward and forced" so they didn't ask many questions.

The lack of parental communication about sex resulted in participants seeking answers elsewhere. Emmuhlee11 reported learning "everything I know from sex from being in band in high school and talking to the seniors". ABC123 recalled not asking their parents any questions about sex because they "did not make it a welcoming topic and that made me feel uncomfortable." Jamminjd similarly reported being "not at all" comfortable asking their parents questions about sex. XYZ made several attempts to communicate with their mother about sex, but was told that she "would learn everything in school that you need to know." XYZ disclosed that they "absolutely [did] not" get the information they were seeking in school.

Partner Sexual Communication and Satisfaction

All participants spoke of the importance of communication for a healthy sexual relationship. However, participants had varying ideas of what a healthy sexual relationship looked like with Jamminjd believing that "multiple partners and the connection formed with each could be damaging and unhealthy," while Marilyn doesn't believe that the "number of sexual partners should matter as long as both are being safe." However, all participants indicated that they felt communication was essential for a healthy sexual relationship. Rinn felt that "knowing each others ideas of what sex should

be" is important. XYZ summed up the conversation about healthy sexual relationships by saying "it's all about both parties being comfortable and a lot of communication."

Participants reported varying levels of comfort with communicating sexually with their partners, but those who were more comfortable communicating about sex with their partners discussed being more sexually satisfied. ABC123 reported being "satisfied with the quality" of their sexual relationship and stated that they "have very open conversations about our sex life and are comfortable enough with each other that we try new things as often as we can." Similarly, blessed2017 noted being "generally satisfied" with the sex in their most recent relationship and that the sexual communication was very open and they were "both willing to try new things that interested us." Marilyn discussed being satisfied with their sexual relationship and being comfortable saying "this is what I want, and this is what I need, and I think that's very important within the sexual relationship to know what each other likes, what each other wants."

XYZ had a different experience with sexual communication. They reported difficulty communicating with their partner about sex because "it's kind of awkward- to be like, hey, this is what I like, and he's like, whoa, what? That's weird. And I'm like never mind, never mind, it's fine." Similarly, emmuhlee11 reported being unsatisfied because sex had not been a part of their relationship in over a year. Emmuhlee11 recalled that initially after the sex stopped, "we would talk about it and it was kind of friction," but that recently they "don't talk about it, it's not really much of a discussion, it's just, we've just stopped having sex."

Relationship Between Parental Sexual Communication and Partner Sexual

Communication

A common theme emerged between the quality and quantity of parental

conversations about sex and how comfortable participants are communicating about sex

with their partners. Emmuhlee11 described difficulty talking with their partner about the

lack of sex in their relationship by expressing that because they "didn't grow up in a

house where sex was talked about, I have a hard time expressing my needs and what I

want in my desires." Rinn recalled their one romantic relationship by saying they "didn't

really 'love' the person" and that the relationship was "more out of desperation to have a

partner." Rinn disclosed that communication about sex did not happen in their parents'

household and described their virginity by saying it is "a bit of both conscious choice and

lack of desire to have sex." XYZ expressed that their mom "avoids that topic like the

black plague, and still to this day she's like, don't talk about that." XYZ also

communicated that conversations with their stepdad revolved around what not to do and

only that they should wait for one person. XYZ reported being uncomfortable

communicating with their partner about sex and feeling as if they couldn't express their

sexual needs.

Blessed2017 remembered discussing sex with their parents a few times, but

reported that the "conversation was mostly lecture-based" and that those conversations

were "mostly based around prevention of STDs and pregnancy." When speaking of their

most recent relationship, blessed2017 stated that "our communication about sex was very

open" and that they were "willing to try new things that interested us." While ABC123

recalled minimal communication with their parents about sex, they did state that their

mother was open about discussing birth control and being safe. ABC123 described their current relationship by saying, "my partner and I both have very open conversations about our sex life." Marilyn summed up their sexual conversations with their parents as being very open and frequent:

> I could really come to them with any questions I had and they would give an age appropriate answer, especially when I started getting serious boyfriends, they would just tell me to be careful and always come to them, stuff like that.

Marilyn reported that conversations with their parents about sex evolved as they got older and that while conversations about sex were initially awkward, they became "more comfortable the more we talked about it." Marilyn communicated being very open with their sexual partners and finding it easy to discuss their sexual needs and desires.

CHAPTER VI – Discussion

This research utilized a mixed methods approach with both a quantitative (study 1) and qualitative (study 2) analysis of data to answer the overall research question of how parental communication about sex influences romantic relationship satisfaction when children enter the emerging adulthood period. Specifically, it focused on attachment theory and how parent-child attachment styles are reflected in adult relationships as well as the influence attachment styles have on communication. This research examined the roles that sexual attitudes play in relationship satisfaction and how parental conversations about sex might influence sexual attitudes. Communication between romantic partners was reviewed, including possible relationships between parent-child sexual communication and partner sexual communication as well as the influence partner sexual communication plays in relationship satisfaction.

A clear link was not found between attachment styles and parent-child communication. Results from both study 1 and study 2 demonstrated a general lack of parent-child communication about sexuality. Even for participants who reported a positive relationship with their parents, communication about sex was not prevalent. In study 1, only 17.8% of participants reported their parents as being their primary source of information about sex. In study 2, the majority of participants reported either no communication with their parents about sex or very brief communication. For both studies, communication about sex with parents was primarily about using birth control, not becoming pregnant/contracting STDs, and just waiting to have sex in general. Both studies demonstrated a lack of communication about healthy sexual relationships and a lack of open discussion, including not answering adolescents' questions about sex. This

supports previous research that found parent-child conversations about sex were unlikely to include information about healthy relationships, emotions, and physical pleasure (Jerman & Constantine, 2010).

This lack of communication may not reflect poor parent-child relationships or insecure attachment styles, but rather additional factors that influence sexual communication, such as a parent's embarrassment or fear of being asked questions they do not know the answer to, as has been demonstrated in previous research (Jaccard, et al., 2000). A lack of communication may be the result of parents' own lack of knowledge about sexual topics. Future research should study parents' reasoning for not communicating with their children about sex. Both studies revealed a trend for adolescents to communicate more with their mothers about sex than their fathers. As the majority of participants were female, this supports previous research that parents are more likely to communicate with children of the same gender about sexual topics (Jerman & Constantine, 2010). Future research should aim to examine male participant's experiences with communicating about sex, specifically whether they are more likely to communicate with their fathers about sex.

Significant variations were found between different attachment styles and sexual satisfaction, but significant differences were not found when one attachment style was compared to another. The current research did not support previous research that securely attached individuals are more likely to be satisfied with their relationships (Stackert & Bursik, 2003). Knowing a person's attachment style could be an important factor for understanding how their sexual satisfaction might be different from someone with

another attachment style, but cannot be used to predict the likelihood of someone's sexual satisfaction based on this research.

In general, parent-child conversations about sex were not shown to influence sexual attitudes. However, the results did demonstrate that increased communication about sex with fathers might predict an emerging adult's attitudes about birth control, specifically whether birth control is considered part of responsible sex and who is responsible for birth control. This could indicate that conversations with fathers are more likely to convince an adolescent of the importance of birth control and all parties being responsible for birth control. This is an important consideration for parents deciding how to communicate with their children about sex. However, it should be noted that few participants reported communicating with their fathers about sex and this small sample size could be influencing the impact of these results.

Sexual attitudes were found to influence relationship satisfaction. Specifically, increased emotions and attachments connected to sex were correlated with higher sexual anxiety and lower sexual satisfaction. In addition, increased permissiveness, including acceptance of casual sex and multiple sex partners, was correlated with higher sexual satisfaction and emotional relationship satisfaction. While these results are opposite from what the sexual attitudes scale expects to find (Hendrick, et al., 2006), it's an important consideration for this study. These results indicate that emerging adults are more satisfied with their relationships when they hold more permissive views toward sexuality, and they are less satisfied and more sexually anxious when there are more emotions and attachments connected to sex. This could demonstrate the differing views that emerging adults have on sex and relationships compared to previous generations. These results

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support previous research findings that younger generations are holding more permissive views towards sex (Twenge, Sherman, & Wells, 2015).

This is an important implication for the way parents communicate with their children and adolescents about sexuality. As emerging adults' views are shifting from ones revolving around monogamous, committed relationships at a young age to ones revolving around sexual experimentation, multiple partners, and delayed marriage (Twenge, et al., 2015), parents should reconsider conversations they are having with their adolescents and ways they should approach communication about sexuality. The current research findings demonstrated that parent-child communication about sex is lacking open discussion, questions from adolescents, and information about healthy sexual relationships. An understanding of sexual attitudes held by emerging adults can assist parents with changing the ways they communicate about sex with their children. Parents should consider that their adolescents may not value a committed sexual relationship and that they may want to focus their conversations on safety and maintaining healthy sexual relationships in addition to waiting until they are ready for a sexual relationship. The current research findings suggest that adolescents do not receive much instruction on how to know they are ready for a sexual relationship, only that they should wait.

Relationships were found between partner sexual communication and overall relationship satisfaction. Participants in both studies who reported higher sexual anxiety and therefore decreased sexual communication with their partners reported lower levels of physical and emotional satisfaction in their relationships. This is an important indication of relationship satisfaction and supports previous research findings that demonstrated that adults who are comfortable communicating more openly about sex

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with their partners are more likely to be sexually and emotionally satisfied in their

relationships (Mark & Jozkowski, 2013). While this research supports the importance of

increased sexual communication between partners, it lacks a clear understanding of how

emerging adults learn to be competent in communicating sexually. The majority of these

emerging adults did not communicate with their parents about sexuality and others

reported being uncomfortable during the few conversations they did have with their

parents about sexuality.

Study 2 found a common theme between decreased parent-child communication

about sexuality and a lack of comfortability communicating with romantic partners about

sex. Participants described a reluctance towards communicating sexually with their

partners because they were never allowed to discuss sex openly and therefore are unsure

how to express their needs and desires. Participants also reported being taught that sex

was not talked about and was considered a taboo topic and therefore they remain hesitant

to talk about sex today. A relationship was not found between parent-child sexual

communication and romantic partner sexual communication in study 1 and it should be

noted that a limitation of study 2, and therefore its results, is a small sample size.

While the connection between parent-child communication about sexuality and

partner sexual communication remains unclear, the research findings did demonstrate a

connection between sexual attitudes and partner sexual communication. Participants who

reported feeling decreased emotions and attachments revolving around sex and increased

responsibility for birth control also reported less sexual anxiety and increased partner

sexual communication. Previous research has indicated that increased sexual

communication between adolescent partners resulted in increased contraception use

(Widman, et al., 2006). Results from the current study provide implications for the importance of ensuring that emerging adults are comfortable discussing sex with their romantic partners.

While the current study demonstrated connections between sexual attitudes, partner sexual communication, and relationship satisfaction, the link between parent-child sexual communication and partner sexual communication still remains unclear. A likely reason for this finding is the overwhelming number of emerging adults who had minimal or no communication with their parents regarding sexuality. Further research should examine reasons parents are reluctant to communicate with their children about sex as well as how other factors may influence how comfortable an emerging adult is communicating with their partner about sex. Additional research on the development of competence in communicating sexually will allow parents new insight into the best ways to communicate with their children about sexuality and what topics are most beneficial with the most long-term effects

Limitations

Some limitations exist with this research study. The qualitative data from study 2 was drawn from a small sample size and therefore may impact the generalizability of the results found. Future research should attempt to replicate the focus group setting with open ended questions with a larger sample size to determine if results are consistent. While the sample size for study 1 was much larger, the majority of participants were female and this may have impacted the influence of parental discussions with fathers. Previous research has demonstrated that adolescents are more likely to have sexual communication with their parents of the same gender (Jerman & Constantine, 2010), and

this research supported that idea. Conclusions drawn about the influence of father discussions may have been influenced by the small sample size of adolescents who spoke with their fathers about sex.

Due to the vast majority of participants reporting no or minimal conversations with their parents about sex during adolescence, the results of this study leave an unclear understanding of how emerging adults learn to communicate about sex. A limitation of this study was a lack of research questions for participants about what factors, if any, led to them learning how to communicate about sex with their romantic partners. Future research could also include both parents and emerging adults to ask the research question of why some parents choose not to communicate about sex with their adolescents. These results could clear up the question of the influence parents have on their emerging adults' capability to communicate sexually with their partners and can address whether a lack of sexual knowledge or just being uncomfortable with the subject made it difficult for parents to communicate, despite having a strong and close relationship with their adolescents.

Conclusion

Findings from this research study can be valuable to both parents and family life educators and professionals who assist parents with parent-child communication. Overwhelmingly, participants reported a lack of sexual communication with their parents, and while some support was shown for a connection between parent-child sexual communication and partner sexual communication, this research was not able to clear up the question of how adolescents learn to communicate sexually with romantic partners.

Future research should focus on reasons parents choose not to communicate as well as emerging adults' perceptions of how they learned to communicate.

This research revealed interesting information about sexual attitudes in emerging adults. Adults with more permissive sexual attitudes and less committed relationships were found to be more sexually satisfied in their relationships. This reflects the trend of younger generations being more open to various sexual relationships and to having multiple sex partners prior to making a commitment to one partner (Twenge, et al., 2015). This information is valuable for parents to know that they may need to adjust their strategies of communicating about sex to reflect new societal values and expectations.

APPENDIX A – Online Survey Used for Quantitative Data (Study 1)

What year were you born? _____

Which best describes your gender?

○ Male
○ Female
○ Androgynous
○ Other (please describe) _____

How do you define your ethnicity/race (please select all that apply)?

❑ Caucasian
❑ African American
❑ Afro Caribbean
❑ Indo Caribbean
❑ Hispanic
❑ Native American
❑ Asian
❑ Pacific Islander
❑ Multicultural
❑ Other (please describe): _____

Which best describes your current relational status?

○ Single
○ Dating
○ Engaged
○ Married
○ Separated
○ Divorced
○ Widowed

Please choose the description that best matches your guardian(s) while growing up. If

your guardian(s) changed during your childhood, please choose the category that

describes them for the majority of the time.

- ○ mother and father
- ○ mother only
- ○ father only
- ○ mother and stepfather
- ○ father and stepmother
- ○ split household (i.e., time with both biological parents in different locations)
- ○ adopted parent(s)
- ○ grandparent(s)
- ○ foster home
- ○ gay fathers
- ○ lesbian mothers
- ○ extended family (family member other than parents or grandparents)
- ○ Other (please describe): _____

How would you rate your financial stability?

- ○ Very stable
- ○ Stable
- ○ Unstable
- ○ Very unstable

How would you rate the influence of the following on your sexual attitudes and

behaviors?

	Strongly influenced	Influenced	Somewhat influenced	Did not influence
Peers	○	○	○	○
Parents	○	○	○	○
Other family members (e.g., siblings, cousins, etc.)	○	○	○	○
Media	○	○	○	○
Sex education in school	○	○	○	○

Following are four general relationship styles that people often report. Please select the style that best describes you.

○ It is easy for me to become emotionally close to others. I am comfortable depending on them and having them depend on me. I don't worry about being alone or having others not accept me.

○ I am uncomfortable getting close to others. I want emotionally close relationships, but I find it difficult to trust others completely, or to depend on them. I worry that I will be hurt if I allow myself to become too close to others.

○ I want to be completely emotionally intimate with others, but I often find that others are reluctant to get as close as I would like. I am uncomfortable being without close

relationships, but I sometimes worry that others don't value me as much as I value them.

❍ I am comfortable without close emotional relationships. It is very important to me to feel independent and self-sufficient, and I prefer not to depend on others or have others depend on me.

Most persons have disagreements in their relationships. Please indicate below the

approximate extent of agreement or disagreement between you and your romantic partner

for each item on the following list.

	Always agree	Almost always agree	Occasionally disagree	Frequently disagree	Almost always disagree	Always disagree
Religious matters	❍	❍	❍	❍	❍	❍
Demonstrations of affection	❍	❍	❍	❍	❍	❍
Making major decisions	❍	❍	❍	❍	❍	❍
Sex relations	❍	❍	❍	❍	❍	❍
Conventionality (correct or proper behavior)	❍	❍	❍	❍	❍	❍
Career decisions	❍	❍	❍	❍	❍	❍
Financial matters	❍	❍	❍	❍	❍	❍

How often do the following occur?

	Never	Rarely	Occasionally	More often than not	Most of the time	All the time
How often do you discuss or have you considered divorce, separation, or terminating your relationship?	○	○	○	○	○	○
How often do you and your partner quarrel?	○	○	○	○	○	○
Do you ever regret that you married (or lived together)?	○	○	○	○	○	○
How often do you and your partner "get on each other's nerves"?	○	○	○	○	○	○

How often do the following occur?

	Never	Almost every day	Occasionally	Rarely	Never
Do you and your partner engage in outside interests together?	○	○	○	○	○

How often would you say the following events occur between you and your partner?

	More often	Once a day	Once or twice a week	Once or twice a month	Less than once a month	Never
Have a stimulating exchange of ideas	○	○	○	○	○	○
Work together on a project	○	○	○	○	○	○
Calmly discuss something	○	○	○	○	○	○

Reflecting on your experience in adolescence (i.e., between the ages of 13 and 18), which

of the following topics did you discuss with your mother? Select all that apply.

- ❑ Birth control
- ❑ What's right and what's wrong in sexual behavior
- ❑ What your mother thought about teenagers having sex
- ❑ What my friends thought about sex
- ❑ My questions about sex
- ❑ Reasons why I shouldn't have sex at my age
- ❑ How my life would change if I became a parent during adolescence
- ❑ STIs/STDs
- ❑ Other sexual topic (please describe): _____
- ❑ None of the above

How did you feel about discussing these topics with your mother?

	Very Dissatisfied	Dissatisfied	Neutral	Satisfied	Very Satisfied	Not applicable (did not discuss)
Birth control	○	○	○	○	○	○
What's right and what's wrong in sexual behavior	○	○	○	○	○	○
What your mother thought about teenagers having sex	○	○	○	○	○	○
What my friends thought about sex	○	○	○	○	○	○
My questions about sex	○	○	○	○	○	○
Reasons why I shouldn't have sex at my age	○	○	○	○	○	○
How my life would change if I became a parent during adolescence	○	○	○	○	○	○
STIs/STDs	○	○	○	○	○	○

Reflecting on your experience in adolescence (i.e., between the ages of 13 and 18), which

of the following topics did you discuss with your father? Select all that apply.

- ❑ Birth control
- ❑ What's right and what's wrong in sexual behavior
- ❑ What your father thought about teenagers having sex
- ❑ What my friends thought about sex
- ❑ My questions about sex
- ❑ Reasons why I shouldn't have sex at my age
- ❑ How my life would change if I became a parent during adolescence
- ❑ STIs/STDs
- ❑ Other sexual topic (please describe): _____
- ❑ None of the above

How did you feel about discussing these topics with your father?

	Very Dissatisfied	Dissatisfied	Neutral	Satisfied	Very Satisfied	Not applicable (did not discuss)
Birth control	○	○	○	○	○	○
What's right and what's wrong in sexual behavior	○	○	○	○	○	○
What your mother thought about teenagers having sex	○	○	○	○	○	○
What my friends thought about sex	○	○	○	○	○	○
My questions about sex	○	○	○	○	○	○
Reasons why I shouldn't have sex at my age	○	○	○	○	○	○
How my life would change if I became a parent during adolescence	○	○	○	○	○	○
STIs/STDs	○	○	○	○	○	○

Below are a list of statements different people have made about discussing sex with their

primary partner. Please select how much you agree or disagree with each statement.

	Strongly agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
I do not need to be committed to a person to have sex with him/her.	○	○	○	○	○
Casual sex is acceptable.	○	○	○	○	○
I would like to have sex with many partners.	○	○	○	○	○
One-night stands are sometimes very enjoyable.	○	○	○	○	○
It is okay to have ongoing sexual relationships with more than one person at a time.	○	○	○	○	○
Sex as a simple exchange of favors is okay if both people agree to it.	○	○	○	○	○
The best sex is with no strings attached.	○	○	○	○	○
Life would have fewer problems if people could have sex more freely.	○	○	○	○	○

It is possible to enjoy sex with a person and not like that person very much.	○	○	○	○	○
It is okay for sex to be just good physical release.	○	○	○	○	○
Birth control is part of responsible sexuality.	○	○	○	○	○
A woman should share responsibility for birth control.	○	○	○	○	○
A man should share responsibility for birth control.	○	○	○	○	○
Sex is the closest form of communication between two people.	○	○	○	○	○
A sexual encounter between two people deeply in love is the ultimate human interaction.	○	○	○	○	○
At its best, sex seems to be the merging of two souls.	○	○	○	○	○

Sex is a very important part of life.	○	○	○	○	○
Sex is usually an intensive, almost overwhelming experience.	○	○	○	○	○
Sex is best when you let yourself go and focus on your own pleasure.	○	○	○	○	○
Sex is primarily the taking of pleasure from another person.	○	○	○	○	○
The main purpose of sex is to enjoy oneself.	○	○	○	○	○
Sex is primarily physical.	○	○	○	○	○
Sex is primarily a bodily function, like eating.	○	○	○	○	○

Please answer the following questions based on the experiences with your most recent

sexual partner.

	Not at all	A little	Neither agree nor disagree	Quite a bit	Very much
If I feel something needs to be changed about our sex life, I usually try to talk to my partner about it and try to improve things.	○	○	○	○	○
If I'm dissatisfied with something about our sex life, I don't hesitate to tell my partner.	○	○	○	○	○
It is easy for me to tell my partner what I need him/her to do to satisfy me sexually.	○	○	○	○	○
If we're having problems with sex, I tend to let them build up for a long time before I say anything.	○	○	○	○	○

I have trouble telling my partner if something about his/her sexual performance is bothering me.	○	○	○	○	○
I feel completely unrestrained about expressing my sexual desires to my partner.	○	○	○	○	○
I'm not afraid to stand up for myself on sexual issues.	○	○	○	○	○
I often pretend to be more interested in sex than I really am, in order to please or avoid hurting my partner.	○	○	○	○	○
Generally, I tend to be reserved about talking about sex.	○	○	○	○	○
I try not to let my partner see it if I'm not really interested in sex.	○	○	○	○	○

I feel completely comfortable with my sexuality.	○	○	○	○	○
If my partner is unhappy with our sex life, I would rather not know about it.	○	○	○	○	○
If anything about our sex life is bothering my partner, I prefer to hear about it even if it causes me distress.	○	○	○	○	○
I often feel afraid of my sexual feelings.	○	○	○	○	○
Generally, I tend to be reserved about having sex.	○	○	○	○	○
Even when I'm really in the mood to have sex, I prefer to wait to let my partner initiate sex.	○	○	○	○	○

If I don't actually have an orgasm during intercourse, I usually pretend to have one.	○	○	○	○	○
If I want to have sex, I'm more likely to "hint" around that I'm interested instead of just asking outright.	○	○	○	○	○

Rate the degree that you agree with the following statements. Please still answer based on the experiences with your most recent sexual partner.

	Not at all	A little	Neither agree nor disagree	Quite a bit	Very much
Satisfied with the quality of sex in your relationship.	○	○	○	○	○
Satisfied with the physical enjoyment you get out of sex.	○	○	○	○	○
Satisfied with the sexual skills of your partner.	○	○	○	○	○
Satisfied with the emotional enjoyment you get out of sex.	○	○	○	○	○
Satisfied with the sexual attractiveness of your partner.	○	○	○	○	○
I am usually able to satisfy my sexual needs in my relationship.	○	○	○	○	○
I always have orgasms when I have intercourse.	○	○	○	○	○
I'm very easy to satisfy sexually.	○	○	○	○	○

I would like to be able to get more physical satisfaction out of sex.	○	○	○	○	○
I would like to be able to have more orgasms.	○	○	○	○	○
I'm very easy to arouse sexually.	○	○	○	○	○

APPENDIX B Focus Group Questions Used for Qualitative Data (Study 2)

1. How would you describe your overall relationship with your parents?

    i. Did you feel comfortable communicating with your parent during your childhood?

    ii. Do you feel like your parents are available for you when you need them?

2. How often did your parents communicate with you about sex during your childhood and adolescence?

    i. At what age did your parents first start talking to you about sex?

    ii. Was sex brought up multiple times throughout your childhood and adolescence or was it a one-time conversation?

3. How were conversations about sex initiated in your parents' household?

    i. Did you go to your parents with questions about sex?

    ii. Did something external (television, books, etc.) prompt a discussion about sex?

    iii. Did your parents discuss sex when you entered into a new relationship as a teenager?

4. Describe the content of your conversations with your parents regarding sex:

    i. Did your parents lecture about sex or did they invite you to participate in the conversation with your own thoughts?

    ii. Were you told to not have sex or were you given the opportunity to make a choice for yourself about sex?

    iii. Did your parents discuss birth control?

    iv. Did your parents discuss emotional attachments related to sex?

v. Do you feel as if the majority of your knowledge about sex came from your parents or another source?

5. How comfortable were you discussing sex with your parents?

i. Was sex a taboo topic or did your parents freely discuss sexual topics?

ii. Were you encouraged to ask questions during conversations about sex?

iii. Were conversations about sex initiated by both you and your parents at different points throughout your childhood and adolescence?

6. How would you describe a healthy sexual relationship?

i. Do you think sexual partners should be romantically involved?

ii. How do you feel about someone having a large number of previous sexual partners?

7. How would you describe your current/most recent romantic relationship?

i. Are you dating multiple people or in a committed monogamous relationship?

ii. How long have you been in this relationship?

iii. Where do you see this relationship going?

8. How emotionally satisfied are you with your current/most recent romantic relationship?

i. Do you and your partner fight often?

ii. How long does it typically take to resolve an issue/make up from the fight?

iii. Do you find yourself arguing about the same issue repeatedly?

iv. Do you feel like anything is lacking in your relationship?

9. How satisfied are you with your sex life with your current/most recent romantic partner?

i. Do you want sex more or less often?

ii. Do you feel as if your partner is attentive to your needs during sex?

iii. Are you comfortable discussing new desires with your partner?

iv. How often do you and your partner discuss sex?

Facilitator: Good afternoon, and thank you for joining us today for our focus group. We're going to go ahead and get started. You can see on the toolbox on your left, about halfway down, there's a hand. So we're going to use this to indicate when you want to answer a question. As we go through the focus group, you can raise the hand to answer a question, click the talk button to turn on your microphone, answer the question, then turn your microphone back off, and lower the hand button. In the participant email you were sent a copy of the informed consent, so I'm going to go ahead and display the informed consent here. If you have read and understood the informed consent, please type "I agree" in the chat box.

Rinn: I agree

Jamminjd: I agree

F: Okay, we're going to go ahead and get started with our first question. Please describe what you feel like your overall relationship with your parents is.

F: It appears as if you are having difficulty with your microphone. You may use the chat box to answer if you prefer.

R: My relationship with my parents is good overall. The relationship with my father is slightly strained seeing as our political views are different. My mother and I are very close though.

F: Rinn, could you expand on that a little bit and tell me if you feel like your parents are available to you and you're able to go to them with questions and concerns as needed?

R: My family is not very open to communication, so no, I can't really go to them to get answers to questions I may have

F: Okay, thank you, Rinn.

J: I had a good relationship with my parents. My mother especially. We wouldn't talk about very serious things together. My dad and I wouldn't talk seiously at all

F: Okay, thank you, Jamminjd. We're going to move on to our next question. How often would you say that you communicated with your parents about sex during your childhood and adolescence?

R: Never.

F: Okay, Rinn. Would you mind expanding on that a little bit? Did your parents every give you any kind of conversations about sex or there was nothing at all?

R: There was nothing at all. They never gave me or my siblings the "birds & bees" talk

J: Never with my dad. Briefly with my mom. Maybe one small conversation.

F: Okay, thank you. We'll go ahead and move on to our next question. Rinn, this question wouldn't apply to you unless you ever tried to initiate conversations about sex with your parents, or just in general, how conversations about sex were initiated in your parents' household?

J: I remebering asking my mom a few questions, on in particular but the question was almost avoided because of embarrasment

F: Okay, thank you, Jamminjd. If this question applies to you- if you are able to give any kind of answer to this- please describe the content of your conversations with your parents regarding sex. If you want to decline this question, you can type that in the chat box as well.

R: Decline

F: Okay, thank you, Rinn.

J: My question was about when a female "gets wet" I didn't know what that was so I was asking her what was happening. I described it as a random discharge Her reply was hmm..

F: Okay, thank you. If this question applies to you- how comfortable were you discussing sex with your parents?

J: Not at all

F: Okay, thank you, Jamminjd.

F: How would you describe a healthy, sexual relationship?

J: Both partners are clear in what they need and how they feel. Making comfort known, and it being okay to say "I don't feel comfortable with that."

R: I would think a healthy sexual relationship is one that is open, and honest, about sexual history. Essentially, knowing each others ideas of what sex should be.

F: Okay, thank you. Kind of as a follow up to this question- how do you feel about people that have multiple sex partners? Do you feel as if it's a choice for an individual to make? How do you feel about someone that may not be romantically involved with a sex partner? What are your personal views on that type of situation?

R: Like I said with the "healthy sexual relationship" as long as that person is open and honest about the people they have been with, I think it's okay.

J: My personal belief is that multiple partners and the connection formed with each could be damaging and unhealthy. I believe in a on epartner situation, the better the outcome of sex

F: Okay, thank you. How would you describe your current or most recent, if you're not currently in a relationship, romantic relationship? How would you describe your current

or most recent romantic relationship? Are you or were you in a committed relationship? Were you casually dating a few people? How would you describe that relationship?

J: Happily married

R: It was okay. It was my first, and so far only, relationship back in high school. I didn't really "love" the person, I think I was with them more out of desperation to have a partner.

F: Okay, thank you. How emotionally satisfied are you with your current or most recent romantic relationship? To expand on that a little bit- do you and your current or most recent partner fight a lot, do you fight about the same sorts of things, does it take awhile to resolve issues? How emotionally satisfied are you with this relationship?

R: I was very emotionally satisfied. He made me feel good. We never argued.

F: Rinn, if you're comfortable answering, could you tell me if there was anything you felt was missing, emotionally, from that relationship? Do you feel like there was anything that could have made you more satisfied?

J: I am emotionally satisfied in that we are able to clearly communicate and when we disagree, even after an argument, we can talk about why we disagree.

R: No, I don't believe there was anything missing from the relationship. I didn't "love" him at first, but it did grow on me.

F: Okay, thank you. How satisfied would you say you are with your sex life with your current or most recent partner?

R: Never had sex, period.

F: Rinn, if you care to expand on that, could you tell me if that is a conscious choice you have made at a previous time or if there is anything you want to add to that statement?

J: I am very satisfied

F: Jamminjd, do you feel like there is anything that would make you more or less satisfied with your current sex life?

R: It's a bit of both conscious choice and lack of desire to have sex.

J: Due to my husband's work schedule, we don't often have enough time together. So time would give us the opprtunity to connect more

F: Okay, thank you. That is the end of the questions that we have for this focus group. Thank you so much for participating; I greatly appreciate it. If you have any further questions about this research, feel free to email me. My email address is jaclyn.powers@usm.edu. If you have any complaints about this project, they can be directed to the Institutional Review Board at the University of Southern Mississippi. If this focus group has caused you any mental discomfort and you feel the need to seek a therapist, you can go to www.therapistlocator.net or call the National Hopeline Network at 1-800-784-2433. Thank you so much for participating. You can click the X in the top right corner of Blackboard and that will take you out of the focus group. Thank you very much, and have a great day.

APPENDIX D Study 2: Focus Group 2 Transcription

Facilitator: Good evening, and thank you for joining our focus group. Today I'm going to be asking some questions, and if you want to answer, just go ahead and click the hand button, which is about halfway down the toolbox on your left side. If you can go ahead and click that now, so we know everybody knows where it's at. Okay, perfect. So if you want to answer a question, click on the hand, I will call on you, click the talk button to turn on your microphone, answer the question, then click the talk button again to turn off the microphone. You were sent a copy of the informed consent in the email that was sent to you earlier. I am going to display the informed consent here as well. If you have read the informed consent and understand, please type I agree in the chat box.

Marilyn: I agree

Emmuhlee11: I agree

F: Okay, thank you. Please remember that you can choose if you want to answer a question or not. First question, how would you describe your overall relationship with your parents?

M: I would describe it as excellent.

F: Okay, Marilyn, just one follow-up question: Can you elaborate on if you feel like your parents are supportive, if you can go to them when you have questions? Do you use them as a support system?

M: Yes, I do. They are very supportive. They always have been, especially with school and working. Yes, I can go to them with anything. I can tell my parents anything and they're pretty open minded and will listen.

E: My experience is completely opposite. My relationship with my parents is very complicated. My parents are divorced and I have stepparents and both sides think very differently. So there are some things I can go to my mom about that I cannot go to my dad about and vice versa. And having stepparents in the mix definitely complicates things because there are four different opinions you're getting instead of just two. And they tend to put me and my siblings in the middle. So I would say it's complicated.

F: Okay, thank you. How often did your parents communicate with you about sex during your childhood and adolescence?

E: Absolutely zero. I learned everything I know from sex from being in band in high school and talking to the seniors behind me in the bleachers.

F: Just one follow-up, emmuhlee. Did your parents ever have any sort of conversation, did you ever ask them questions that did not get answered or anything like that?

E: I would ask some questions like if I overheard a phrase at school that I didn't understand or something, but they would tend to just kind of oh, you know don't worry about that right now, maybe when you're older we'll talk about it- they never really got a full explanation of my question.

M: I actually had the opposite. So, my parents talked to me, I wouldn't say often, but definitely when it came up. So when I got into high school and started getting serious boyfriends they kind of gave the talk. They kind of also gave it when I first got my period, to kind of explain the whole birds and bees process. So yeah, they would just talk about it. I could really come to them with any questions I had and they would give an age appropriate answer, especially when I started getting serious boyfriends, they would just tell me to be careful and always come to them, stuff like that.

F: Okay, thank you. If you feel like you have anything to add- how were conversations about sex initiated in your parents' household? Were they primarily initiated by you asking questions, by them asking questions, by them lecturing you, kind of how did that get started?

E: Like I said, if it ever did get brought up, it's because me or one of my sisters asked them like something that we saw on TV. I do remember once watching a movie with mom and there was a pretty graphic sex scene that she didn't know about and she just got really embarrassed and was like, I don't know what to do, and just kind of left the room and we just never really talked about it. But if it ever was discussed it was because me or my sisters asked the questions.

M: I did have an older sister so I probably heard about sex a little more growing up because of that. But usually just if I asked questions or like emmuhlee said if there was a sex scene it would kind of get brought up, but that was about it.

F: Okay, thank you. If you could, describe the content of your conversations with your parents regarding sex, such as, was it more of a lecture type conversation, was it a back and forth, were you allowed to ask questions, did they ask you questions, kind of what did those conversations look like?

M: It was never really like a lecture, it was more like a back and forth, so they would kind of say something and I could ask any questions and I could come back at any point and ask questions, it wasn't like this is the conversation, it's over, no more talking about it. Especially as I got older it was just like way more open when talking about sex.

E: Like I said, if it was ever discussed, it was more of a lecture. My mother is a lecturer, so she would say you know, this is a penis, it gets an erection, it has ejaculations, and it's

over. I mean, it was very just, these are the points, this is how it is, not anything involving emotions or how I should feel about it, just very black and white of what sex was, not why you should do it, when to do it, it was just these are the facts and these are the facts I want you to know and nothing else.

F: Okay, thank you. How comfortable were you discussing sex with your parents? Such as, how comfortable were you asking questions, how comfortable were you when they brought it up, how did you feel about that?

E: I would literally rather die than talk to my parents about sex ever in my life.

M: I think it's always a little uncomfortable at first talking to your parents about sex because you really just don't really want to imagine that, but it definitely got more comfortable and now it's very open and we're very comfortable talking about anything and everything. So I think it's always just a little awkward at first but it definitely got more comfortable the more we talked about it.

F: Okay, thank you. How would you describe a healthy sexual relationship?

M: I think a healthy sexual relationship is a relationship in which both partners are satisfied with the sex occurring. I believe it should be 50/50. There should not be one side gaining more than the other. I think as long as both partners are happy and content, I believe it is healthy. And if they are both content not having sex, I believe that can be healthy as well.

E: I think a healthy sexual relationship is like what Marilyn said. It's back and forth-Everyone is happy and everyone is getting what they need and what they want out of the relationship. But I also think it's important that it's not the only part of a relationship. It

can be part of that relationship as a whole, but if sex is the main issue then that can start to cause some conflict.

F: Okay, thank you. A follow up question for both of you. Do you feel like sexual partners should be romantically involved, do you feel like sexual partners should only be between two people or that it's okay for someone to have a large number of sexual partners at the same time, how do you feel about that?

E: I think if you are going to have an open relationship, that that is totally your choice, I just think that it needs to be an upfront thing, I think everyone needs to know that it's an open relationship, not someone just thinks it's an open relationship or the other person thinks you're exclusive because that can obviously cause some emotional distress. I've never been in a sexual relationship where I wasn't in a relationship with the person- the people I've had sex with have always been my boyfriends. So that's all my experience, but I think as long as you're open and honest with the people you're sleeping with and you're being safe, that's fine.

M: I believe open relationships should be consent with both partners- they both agree to the open relationship and are both okay with it, if that is not the case, then that's more likely cheating and not an open relationship. I have had both types of a relationship, I've had sex in a relationship and sex without. Personally, I think I like sex better with a romantic partner because I believe there's more emotion there, but I don't think it's wrong to just want to have sex or have a one night stand. And I don't think the number of sexual partners should matter as long as both are being safe and using birth control or condoms or any other protection methods that the number really should not matter.

F: Okay, thank you. How would you describe your current or your most recent romantic relationship. Such as, are you/were in a committed monogamous relationship, dating casually, how would you define that relationship?

E: My boyfriend and I have been together about 3 years now, so I would say we're a pretty monogamous, long-term relationship.

M: I am casually dating.

F: Okay, thank you. How emotionally satisfied are you with your current romantic relationship?

E: He's my best friend, so emotionally, he's got my back and I have his. He legitimately knows everything about me, knows what I like without me having to tell him, just knows my schedule, we're in the same rhythm. So emotionally, it's very good.

F: Just one follow up question to that. Do you feel like you and your partner fight a lot, do you feel like it takes awhile to resolve issues, are you fighting over the same issue repeatedly- how do arguments look like within your relationship?

E: Well we bicker like an old married couple. Like we fight over whose turn it is to scoop the litter and that kind of stuff. When he was still smoking cigarettes that was a really big issue for us because I just didn't understand the addiction part, I didn't understand how a person could smoke. It didn't make sense to me. We fought about that a lot, but he quit smoking a couple years ago, so we don't tend to have very many one big issue that we fight about, it's just little everyday minutiae, typical fighting stuff. And when we do fight there are occasions where we do really really get angry and he needs to go for a drive and I need a minute to myself, but for the most part we can talk things out pretty easily and

work it out and then it's over and done with. And we just move on, we don't tend to hold on to grudges.

F: Okay, thank you, emmuhlee.

M: I would say mostly satisfied. I have never really been one to need a boyfriend so it's not like I'm emotionally sad because I'm not. But being in a relationship would not be a bad thing either, so I would say just moderately satisfied.

F: Just one follow up to that, Dee. Do you feel like there's anything in your current relationship that would make you more or less satisfied?

M: That's a good question. I think at this point in my life, a more committed relationship might make me a little more satisfied, but yeah, I guess, that's a tough question. Possibly a little more commitment wouldn't be bad.

F: Okay, thank you. How satisfied are you with your sex life with your current partner?

E: So I have endometriosis and polycystic ovarian syndrome, so Josh and I have not had sex in over a year. So I would say that I am a little unsatisfied with that. But at the beginning it was really hard, like we had sex before Christmas in 2015, so until like January, February, March, April, it was like, in the air, we would talk about it and it was kind of friction, but ever since then it's just really become a nonissue, to the point where we don't talk about it, it's not really much of a discussion, it's just, we've just stopped having sex.

F: Just a follow up to that, emmuhlee. Do you ever talk about any sexual desires, if there's anything that either one of you would be interested in trying? Do you ever talk about at what point you feel like sex will resume in your relationship?

E: Like in passing, he'll be like, sometimes I wonder if we're ever going to have sex again, or something like that, but because I didn't grow up in a house where sex was talked about, I have a hard time expressing my needs and what I want in my desires. So no, we legitimately just really don't talk about it very much at all. Unless like, he'll just smack my butt or something in passing and it's just hey, I wonder if we're ever going to have sex again and I'm just like, I don't know, ha ha, and then it's over.

F: Okay, thank you, emmuhlee.

M: I would say mostly satisfied, but I could definitely be having more sex and be more satisfied.

F: Just a follow up to that, Dee. Are you comfortable with your partners discussing your sexual needs and desires and communicating what it is that you want out of your sex life?

M: Yeah, I believe I am. I can be pretty open communicating like, this is what I want and this is what I need and I think that's very important within the sexual relationship to know what each other likes, what each other wants, because if not, it's just going to suck.

F: Okay, thank you. That is the end of our focus group. Thank you all so much for participating. If you have any questions or concerns, please feel free to email me. My email address is jaclyn.powers@usm.edu. If you have any complaints, you can contact the Institutional Review Board at the University of Southern Mississippi. Their email address is irb@usm.edu. If this focus group has caused you any mental harm, you can go to www.therapistlocator.net or call the National Hopeline Network at 1-800-784-2433 if you need to seek mental health services. If you click the X on the top right corner, that will take you out of the focus group and out of blackboard. Again, thank you very much for participating.

APPENDIX E Study 2: Focus Group 3 Transcription

Facilitator: Good evening, and thank you for joining our focus group. We're going to go ahead and get started. Are you going to be using a microphone or the chat box for tonight's focus group?

XYZ: I will be using a microphone.

Blessed2017: No mic here, hope to have one by the next session!

A: Chatting through IM.

F: Okay, thank you. Since we only have one person using a microphone tonight, XYZ you can go ahead and click the talk button to turn your microphone on, answer the question, then turn your microphone back on. Blessed and ABC, you can just go ahead and type your answer in the chat box. You were sent a copy of the informed consent in your email and I'm going to go ahead and display it here as well. If you have read and understand the informed consent, please type I agree in the chat box.

A: I agree

X: I agree

B: I agree

F: Okay, thank you. We're going to go ahead and start the questions now. Please remember that you do not have to answer any question you do not want to. How would you describe your overall relationship with your parents?

X: I have a question in regards to that question. When you're referring to parents, are you referring to the people who raised you, or biological?

F: However you would interpret that question.

X: Okay, so the answer for me would be very strong.

F: If you could elaborate on that just a little bit, do you feel like they're a good support system for you, are you able to go to them with questions or anything like that?

X: Absolutely. They're very supportive in my decisions, if I ever have a question or a problem, they're always there. I know that I can call my stepfather at any given time during the night, or day really, no matter what he's doing, he's always going to answer.

F: Okay, thank you, XYZ.

B: I would say that I am very close to my mother, we live together and I feel able to talk to her about most things.

A: I feel that my relationship would be best described as strained. My parents had a very rough marriage filled with conflict so it reflected in their relationship with me. They saw so much of the other parent in me that it was hard for them to connect with me. They have both confessed to these feelings now in my adult years

F: Okay, thank you. How often did your parents communicate with you about sex during your childhood and adolescence?

X: So when I was younger, I found it very hard for my mother to actually talk about it-even to this day she's like, very standoffish about it and it's like super awkward. My stepdad on the other hand, now that I'm older, we have more of an open discussion, I guess, whenever it comes up, not that it comes up often, but it's more like joking based, not so, I really wouldn't know how to say it. My stepdad is more okay talking about it than my mother and back then I always wanted her to like give me the sex talk and she was like, oh no you'll learn about that in school, we're not going to talk about that now.

A: My father never communicated with me about sex, and my mother did not communicate with me about it until I was 17 and she knew I had lost my virginity.

B: Maybe once or twice, communication about sex back then felt awkward and forced.

F: One follow-up, ABC, if you're comfortable answering, how did your mother know that you had lost your virginity? Did you speak to her about that, did she find out some other way?

A: I had told her

F: Okay, thank you. How were conversations about sex initiated in your parents' household? Did you go to them with questions, did they come to you, how did those conversations start for you?

X: As I said before, my mom avoids that topic like the black plague and still to this day she's like, don't talk about that. My stepdad, we just kind of talk about it back and forth and make jokes, especially like if something comes on TV and it's like that awkward, we have to kind of watch this together because it's on TV, there's always like jokes that follow it, like don't do that, that's how you get cooties, boys have cooties thing. Still to this day, I'm like, okay, thanks dad.

A: I let my mother know I had had sex and she stated that she wanted me to get on birth control.

B: I have a specific memory of my father sitting me and my brother down at about the age of 12 and told us the importance of using condoms. After that there was not much conversation.

F: Okay, thank you. Describe the content of your conversations with your parents regarding sex. Was it a discussion, a back and forth, were you encouraged to ask questions, was it more of a lecture, did they discuss birth control, healthy sexual relationships, kind of, what did those conversations look like?

X: Back when I was younger with my stepdad, like I said, we didn't really have much content or really conversation, it was more along the lines of him making jokes towards it, I wouldn't want to say jokes because that sounds really in poor taste, but like, if something would come on TV, it'd be more like, you know, that's how you get cooties, don't do that, you want to save yourself for one person. It wasn't like you need this to protect against this or this will lead to this, it was never anything like that.

F: Just one follow up to that, XYZ. Did you feel like you could talk to your parents if you were having sex or did you feel like it was more of they just did not want you to and would not be comfortable if you had expressed that to them?

X: Back when I was younger, I would definitely say that it was more of like, I don't think that my parents actually knew that I was sexually active until like at an older age and I think it kind of took them by surprise, however, I like to think that my parents think that I'm still a virgin because they don't bring it up, like they know, but they're never like, so, are you being safe? It's just not talked about in that essence.

A: I would say that it was never a conversation. It was a statement that I needed to get on birth control and then the topic was closed

F: ABC, did you try to ask any questions or did you have any desire to ask any questions at that time?

A: I did not try to further the discussion

B: I would say that the conversation was mostly lecture-based. As a young child with next to no knowledge about sex I was unsure of what questions to ask. But the lectures were definitely mostly based around prevention of STDs and pregnancy.

F: Okay, thank you. How comfortable were you discussing sex with your parents?

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X: When I was younger I wanted to talk to my mother more about it, and not really so much my stepdad because he was a male and it was weird at the time, but my mom was completely against it never wanted to talk about it, she said, you'll learn everything in school that you need to know and just kind of left it at that.

F: XYZ, did you feel like you got useful information in school?

X: Absolutely not.

F: Can you elaborate on that?

X: They teach you abstinence, but realistically, nobody was practicing abstinence. They didn't tell us where to get condoms, what would be most appropriate depending on, like for example, if you're allergic to latex or not. For me, I am actually allergic to latex and I didn't know that they had non-latex condoms, so that went over really well. It didn't actually, that was a terrible experience. Between that and then also different types like certain latex condoms don't prevent against all STDs, so none of that was talked about.

A: My parents did not make it a welcoming topic and that made me feel uncomfortable

F: Okay, thank you.

B: Generally uncomfortable. Specifically because I follow a different sexual orientation than my parents.

F: Just a follow up to that blessed, did you ever discuss your sexual orientation with your parents? Did that ever get brought up during your childhood and adolescence?

B: Not during childhood/adolescence. Not until I was in my 20s

F: Just one more follow up, blessed, did you feel like it would have made a difference in how much information you received or how comfortable you were if that had got brought into the conversation?

B: I think it may have been more comfortable with them knowing. It was more so that I felt I was receiving information that I did not need.

F: Okay, thank you. How would you describe a healthy sexual relationship?

X: For a healthy sexual relationship, I would have to say that it would need to be definitely a two way street with both parties feeling absolutely comfortable with one another and being willing to do certain things that one wants to do and if another person does not feel comfortable, either them not doing it or if they're going to try making sure that it's all about both parties being comfortable and a lot of communication is very important as well.

A: I think that for a sexual relationship to exist it has to be full of communication and respect for the other person and their wants/needs

B: Two consenting partners who practice safe measures to prevent STDs and unwanted pregnancy.

F: Okay, thank you. One follow up question for all. How do you feel about people who have multiple sex partners, how do you feel about people who are sexually involved with someone they are not romantically involved with?

X: I feel like everybody has needs no matter if they're in a relationship or not, I feel like it is important if that person is having one or more partners to take the proper precautions, especially to protect against STDs because if they have multiple partners that's something that would be spreading around, it'd be in a constant circle and it would be like an epidemic. But as far as that, I mean, I wouldn't consider it to be like frowned up, as in back then, it was more frowned upon, I wouldn't say back then, but older generations believe that you should only be doing this with one person at a time when you're married,

but unfortunately that has definitely changed now. Maybe it's not unfortunate, but that has definitely changed now.

A: I see no problem with that if the two adults both talk about the fact that it is not going to be a romantic relationship and only physical and that is okay with both people

B: I feel that as long as their romantic partner is informed and consenting of the behavior, then a person could have multiple sexual partners.

F: Okay, thank you. How would you describe your current or most recent relationship? Such as, are you in a committed, monogamous relationship? Are you casually dating, either one person or multiple people, how would you define that relationship?

X: My current relationship would be with one partner, monogamous.

A: I am in a committed relationship with one partner

B: My most recent relationship was a committed relationship with one partner.

F: Okay, thank you. How emotionally satisfied are you with your current relationship or were you with your most recent relationship? Do you or did you fight a lot, did you fight about the same issues repeatedly, did it take you awhile to resolve those issues, how in general, emotionally satisfied are you or were you?

X: I am currently not satisfied with my relationship, emotionally.

F: XYZ, do you care to elaborate on that a little bit?

X: With distance being a major factor in our relationship, it is very very hard to especially meet eye to eye on certain things. And then you don't have the physical connection and it not just being strictly physical, but you don't have the mental connection with that person being there. Unfortunately it just makes things more difficult than not and unfortunately more fights occur and it could be about anything, not just

sexual, but unfortunately more fights arise more often than not and usually it's about things that really don't matter, but they matter, to me, at least.

F: Just a quick follow up, XYZ. Do you have the same sorts of issues when you're physically with that person?

X: When I'm with that person, we don't really have that much time together, so we both try to make it as smooth as possible with less fighting and I think that we have a better time when we are together versus when we're apart.

A: I have a very satisfying romantic relationship

F: Okay, thank you.

B: I would say that I was emotionally dissatisfied with my relationship. We had an age difference of 14 years, which caused difference in opinion about certain things, and that would lead to fighting.

F: Blessed, a follow-up up question, did you feel like there was anything other than the age difference that would have affected your satisfaction?

B: My main issue with him was a lack of commitment from his side. Things that he would brush off as flirting was something that I saw as unacceptable.

F: Okay, thank you. How satisfied are you with your sex life with your current or most recent partner?

X: I would say dissatisfied with the frequency, however, when we do see each other it's pretty consistent.

F: Just a follow up, XYZ, do you feel like you're able to discuss your sexual needs and desires, are you able to be open about what it is that you want, are they able to be open

about what it is that they want, are you comfortable having those discussion with your partner?

X: Unfortunately, with that, I am more curious than he is and sometimes that leads to awkward conversations and more him not being willing to explore. But I do have to give it to him, he does try, but it's more like talking about it, which is sometimes difficult to talk about because it's kind of awkward, to be like, hey, this is what I like and he's like, whoa, what? That's weird, and I'm like never mind, never mind, it's fine.

F: Okay, thank you.

A: I feel that i am satisfied with the quality but not with the frequency

B: Physically, I was generally satisfied with my most recent relationship

F: ABC, same follow up question to you, do you feel as if you're able to express your desires about sex and things that you might like to try, are you comfortable having those conversations with your partner? And blessed, same question to you.

A: My partner and I both have very open conversations about our sex life and are comfortable enough with each other that we try new things as often as we can. We have small children which has lead to a decrease in frequency

B: I feel like our communication about sex was very open. We were both willing to try new things that interested us.

F: Okay, thank you. That is the end of our focus group. Thank you so much for participating. If you have any questions, feel free to email me. My email address is jaclyn.powers@usm.edu. If you have any complaints, you can contact the Institutional Review Board at the University of Southern Mississippi. Their email address is irb@usm.edu. If this focus group has caused you any mental discomfort and you feel the

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need to seek a therapist, you can go to www.therapistlocator.net or call the National

Hopeline Network at 1-800-784-2433. If you click the X in the top right corner, that will

take you out of Blackboard. Thank you for participating, and have a great night.

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NOTICE OF COMMITTEE ACTION

The project has been reviewed by The University of Southern Mississippi Institutional Review Board in accordance with Federal Drug Administration regulations (21 CFR 26, 111), Department of Health and Human Services (45 CFR Part 46), and university guidelines to ensure adherence to the following criteria:

- The risks to subjects are minimized.
- The risks to subjects are reasonable in relation to the anticipated benefits.
- The selection of subjects is equitable.
- Informed consent is adequate and appropriately documented.
- Where appropriate, the research plan makes adequate provisions for monitoring the data collected to ensure the safety of the subjects.
- Where appropriate, there are adequate provisions to protect the privacy of subjects and to maintain the confidentiality of all data.
- Appropriate additional safeguards have been included to protect vulnerable subjects.
- Any unanticipated, serious, or continuing problems encountered regarding risks to subjects must be reported immediately, but not later than 10 days following the event. This should be reported to the IRB Office via the "Adverse Effect Report Form".
- If approved, the maximum period of approval is limited to twelve months.
  Projects that exceed this period must submit an application for renewal or continuation.

PROTOCOL NUMBER: 16121602
PROJECT TITLE: The Influence of Parental Communication about Sexual Health on Quality of Later Adult Romantic Relationships
PROJECT TYPE: New Project
RESEARCHER(S): Jaclyn Powers
COLLEGE/DIVISION: College of Education and Psychology
DEPARTMENT: Child and Family Studies
FUNDING AGENCY/SPONSOR: N/A
IRB COMMITTEE ACTION: Expedited Review Approval
PERIOD OF APPROVAL: 02/14/2017 to 02/13/2018
Lawrence A. Hosman, Ph.D.
Institutional Review Board

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