

2017

# Relationship Between Familism and Sexual Attitudes Among College Students

Joseph Rampersad  
*Walden University*

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# Walden University

College of Health Sciences

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Joseph Rampersad

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Walden University  
2017

Abstract

Relationship Between Familism and Sexual Attitudes Among College Students

by

Joseph D. Rampersad

MA, American Intercontinental University, 2009

BS, Chowan University, 2007

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Public Health

Walden University

November 2017

## Abstract

In the United States, college students face an increased risk of sexually transmitted diseases, sexual assault, and unwanted pregnancy due to experimental sexual behavior compared to individuals who do not attend college. Based on the theoretical framework of familism, the purpose of this study was to examine the relationship between sexual attitudes and familism among college students. Data were collected from nontraditional adult students who attend an online institution of higher education. The Familism Scale and the Brief Sexual Attitudes Scale were used to measure the variables of familism and attitudes about sex. Findings from multiple linear regression analyses indicated a statistically significant relationship between total familism and permissiveness ( $r = -.265$ ,  $n = 118$ ,  $p < .01$ ) and between total familism and birth control attitudes ( $r = .20$ ,  $n = 118$ ,  $p < .05$ ). There was no statistically significant relationship between total familism and communion ( $r = .094$ ,  $n = 118$ ,  $p < .353$ ) or between total familism and instrumentality ( $r = -.09$ ,  $n = 118$ ,  $p = .402$ ). Results may be used to inform community health centers interested in using educational approaches to educate community members and college institutions on how students make decisions about sex.

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## Dedication

This dissertation is dedicated to my family: my mother and father, Jackie and Dy; my brothers, Nick and Steve; my daughter, Dyani; my mentor, Dr. Ralph Soney; Poteca Chamblee, and my closest friends, Allen Hunt and Kevin Davis, who kept me motivated when I wanted to quit.

## Acknowledgments

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## Chapter 1: Introduction to the Study

Colleges and universities have seen a significant increase in enrollment over the past 15 years. According to the U.S. Department of Education (2015), 20.2 million students attended U.S. colleges and universities in fall 2015, which constituted an increase of an estimated 4.9 million students since fall 2000. The CDC (2014) reported that the increase in student enrollment and STDs on college campuses has received national attention due to students having unprotected casual sex. The link CDC used to connect enrollment and STDs has been monitored in an ongoing study conducted by the CDC through public health programs that have worked with colleges and universities around the United States since the 1970s (CDC, 2014). Lefkowitz, Waterman, Morgan, and Maggs (2015) identified that there is a need to examine the relationships of college students as it pertains to unsafe sexual behavior.

Lefkowitz et al. (2015) stated that casual sex among college students (and resulting increases in STDs) could be stemming from a lack of communication about potential health risks on college campuses. College students between the ages of 18 and 24 are a relative small portion of the sexually active population but account for the highest rates of STDs in the United States (CDC, 2014). The CDC (2014) also indicated that STI and STD rates could continue to rise due to college students engaging in this risky behavior.

Although there are numerous ways to analyze unsafe sexual behaviors among college students, examining how familism shapes sexual decision-making may provide a different outlook on how cultural values impact sexual behavior. According to Schwartz

(2007), *familism* is defined as a social structure in which the wants and needs of the family are more essential and take priority over the desires of individual family members. Over the past 30 years, researchers have defined familism as a core value family, which places emphasis on commitment to family as one unit (Manago, Greenfield, Kim, & Ward, 2014; Manago, Ward, & Aldana, 2015; Schwartz, 2007). Lefkowitz et al. (2015) argued that family is an important cultural value that relies on interdependence among nuclear and extended families. Although college students face numerous social pressures with risky sexual behavior, familism has been shown to reduce sexual health risks among heterosexuals (Lefkowitz et al., 2015).

Researchers have indicated that the norms and expectations that inform sexual decision-making skills come from a cultural script in human sexuality and that cultural scripts in human sexuality dictate courtship practices (e.g., heterosexual and monogamous) (Manago, Ward, and Aldana, 2015). According to DeLamater (1989), cultural discourses regarding sexual behavior focus on three prominent values: Procreation discourse should take place during marriage for the purpose of procreation, relational discourse emphasizes that sex should occur between two people who are in a committed relationship, and recreational discourse suggests that sex is a pleasurable activity that produces fun and satisfaction. DeLamater concluded that a fourth prominent value known as the sexual double standard indicates that sexual exploration between men and women is highlighted as more acceptable to men than women.

Casual sexual relationships occur before college students enter into marriage, and have fewer restrictions for individuals who are not committed to a spouse (Owen,

Rhoades, Stanley, & Fincham, 2010). Owen et al. (2010) found that Latino college students are more restrictive about sex outside of marriage compared to people of other ethnicities. Given the inconsistent findings for all ethnicities, studies on the role that familism plays in sexual engagement among college students is needed.

### **Background**

The increase in college enrollment and its correlated increase in STD rates is causing national attention for the CDC. According to the CDC (2014), the attention on awareness and prevention of STDs among individuals ages 18 to 24 requires vital communication that provides students with information about the health risks associated with having unprotected sex (Tyler, Schmitz, & Adams, 2015). Tyler et al. (2015) stated that there is an increased risk for sexual activity among college students due to the influence of alcoholic consumption and parties. According to the CDC (2014), nearly half of the 20 million diagnosed STDs are among individuals ages 18 to 24. Early sexual activity among freshman has a higher risk due to their young age, lack of knowledge, and mental preparation about the consequences with engaging in sexual intercourse (Tyler et al., 2015). Seventy-five percent of male and 64% of female college students admitted to engaging in risky sexual behavior during their freshmen year (Pompeo, Kooyman, & Pierce, 2014).

Parents may discuss the risks associated with sexual activity through traditional messages focused on the importance of waiting to have sex until marriage. Moilanen and Raffaelli (2010) stated that the messages shared include the risks associated with sexual engagement, including unwanted pregnancy and STDs. Although abstinence is often a

recommendation shared from parents to their children, familistic values are used to promote awareness, personal responsibility, and the importance of decision-making (Manago et al., 2015). Manago et al. (2014) identified a cultural difference between family interdependence and individual independence. Familism in a traditional culture focuses on practices and values, which are strong characteristics of family interconnectedness (Manago et al., 2014; Manago et al., 2015).

Although other researchers have suggested that early sexual behavior varies among ethnicities (Lefkowitz et al., 2015; Sollitto, Johnson, & Myers, 2013; Tyler et al., 2015), Stein et al. (2014) indicated that Latinos have a lower rate of sexual activity compared to the African American population and also indicated that African Americans reported higher levels of sexual engagement compared to Caucasians. According to the Youth Risk Behavior Surveillance System (CDC, 2013), respondents who identified as Latino had reduced levels of condom use compared to African Americans and Caucasians.

Researchers have suggested that one of the protective factors for students who are at risk for engaging in sexual activity and experiencing negative outcomes from sexual engagement is their connection to family (Rodriguez & Kosloski, 1998). One of the major core values in the Latino culture is familism (Sabogal, Marin, Otero-Sabogal, Marin, & Perez-Stable, 1987; Sayegh & Knight, 2011). Familism in a traditional culture focuses on practices and values, which are strong characteristics of family interconnectedness (Manago et al., 2014; Manago et al., 2015). Researchers have agreed that certain aspects of familism regarding behavior and attitudes have been understudied



(Manago et al., 2015; Schwartz, 2007; Schwartz et al., 2011).

Sex sells (Keller et al., 2006), and the assimilation of diverse cultures in a college setting are impacted by acculturation (Rodriguez & Kosloski, 1998). Individuals who are connected to diverse cultures have the potential to engage in risky behaviors when the influence of cultural beliefs and practices affect decision-making skills (Keller et al., 2006). Therefore, it is important to consider cultural beliefs and practices when investigating the correlation between familism and sexual behavior among college students.

### **Problem Statement**

Individuals who attend a four-year college face a period of academic and personal growth in independence (Foster, Caravelis, & Kopak, 2014). Exposure to social gatherings (e.g., college parties) places college students at risk for using alcohol, engaging in criminal behavior, and experimenting with sexual behavior (Foster et al., 2014). According to LeBlanc, Sutton, Thomas, and Duffus (2014), 40% of first-year students were more likely to engage in high-risk sexual behavior than individuals who did not attend college. These activities include drinking games, marijuana smoking, and parties that have potential for producing consequences related to sexual activity, including STDs, sexual assault, and unwanted pregnancies (Eisenberg, Golberstein, & Whitlock, 2014). College health educators and administrators have limited information about how to identify high-risk sexual behavior, and there is limited information the effects of familism on psychological functioning with college students (Valenzuela & Dornbusch, 1994). According to Muñoz-Laboy (2008), familism is defined as family

values that are held in higher esteem than individual values. Individuals who are shaped by the familial structure share similar interests and make decisions based on family influence as opposed to personal interest (Valenzuela & Dornbusch, 1994).

One major concern for college students who engage in high-risk sexual behaviors is unintended health outcomes such as STDs or pregnancy. According to Manago et al. (2015), in 2013 47% of college students reported having sexual intercourse, and 34% had unprotected sex. In 2010, only 22% of college students who were sexually experienced reported being tested for HIV (Foster et al., 2014). The purpose of the current study was to examine relationships between familism, student demographics, and attitudes about sex. After an extended review of the existing research in this area, I noted a gap in understanding whether students' attitudes about sex influences their decisions to engage in sexual behavior. Because previous researchers studying familism examined traditional college students (Esparza & Sanchez, 2008; Raffaelli & Iturbide, 2009; Sayegh & Knight, 2011), another gap was assessing nontraditional online students who do not live on campus, but still seek to keep their traditional cultural views regarding familism intact. Based on enrollments at collegiate institutions, student bodies are becoming more diversified (Meston & Ahrold, 2010; Miles, Shih, Tucker, Zhou, & D'Amico, 2012), and advancements in technology allow traditional and nontraditional students to make up the student body and share a mixture of cultural values that can influence how students make decisions during their college career.

## **Purpose of Study**

Researchers have focused on alcohol abuse, drug use, and aggressive behavior as it relates to sexual behavior (Esparza & Sanchez, 2008; Way & Robinson, 2003), but there is limited information on whether familism impacts how students make decisions to engage in sexual behavior (Ma et al., 2014). The purpose of this study was to examine the possible correlation between sexual attitudes and familism among college students engaging into sexual intercourse. The reason for examining this relationship was to determine whether cultural values and acculturation impact how students make decisions to engage in sexual activity while enrolled in college. This study focused on nontraditional students enrolled in an online program to determine whether familism contributes to sexual behavior.

## **Research Question and Hypotheses**

### **Research Question 1**

What is the relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (permissiveness attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students?

Null hypothesis 1 ( $H_{10}$ ): There is no statistically significant relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex

(permissiveness attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students.

Alternative hypothesis 1 (H1<sub>a</sub>): There is a statistically significant relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (permissiveness attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students.

## **Research Question 2**

What is the relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (birth control attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students?

Null hypothesis 2 (H2<sub>0</sub>): There is no statistically significant relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (birth control attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students.

Alternative hypothesis 2 (H2<sub>a</sub>): There is a statistically significant relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age,

gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (birth control attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students.

### **Research Question 3**

What is the relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (sexual communion attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students?

Null hypothesis 3 ( $H_{3_0}$ ): There is no statistically significant relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (sexual communion attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students.

Alternative hypothesis 3 ( $H_{3_a}$ ): There is a statistically significant relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (sexual communion attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students.

**Research Question 4**

What is the relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (instrumentality attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students?

Null hypothesis 4 (H4<sub>0</sub>): There is no statistically significant relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (instrumentality attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students.

Alternative hypothesis 4 (H4<sub>a</sub>): There is a statistically significant relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (instrumentality attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students.

**Variables**

The independent variables were familism (as measured by the Attitudinal Familism Scale, in which a higher score suggested a higher endorsement of familism) and demographics (age, gender, marital status, education level, socioeconomic status,

religion, number of sex partners, STI history, and use of protective contraception). The dependent variable was attitudes about sex, as measured by the Brief Sexual Attitudes Scale (BSAS) in which the four subscale scores range from 1.0 to 5.0, and a lower score indicates a higher level of agreement with the items on that scale. For example, for the permissiveness subscale, the lower the score the more permissive the attitudes held by the individual about sex. The score for each subscale served as the dependent variable for each of the research questions (permissiveness for RQ1, birth control for RQ2, communication for RQ3, and instrumentality for RQ4).

### **Theoretical Framework**

College students are faced with internal and external decisions while facing emotional distress and peer pressure on a college campus (Downing-Matibag & Geisinger, 2009). To understand how college students make decisions about sexual behavior based on familism, well-established theories were needed. Downing-Matibag and Geisinger (2009) stated that theories explain how or why something happens based on the variables or issues along with their relationships between the selected theories. The theory that was used for this study was familism. Familism refers to the core values of family and emphasize commitment to family rather than to the individual. Familism was used in this study to identify how familism is related how college students make decisions to engage in sexual behavior (see Stein et al., 2014).

During the 1950s, the term familism was associated with familists, who constituted a sect of Christianity that existed in a small German town influenced by the political views of Althaus (Stein et al., 2014). Over the years, the term familism emerged,

which refers to a social structure in which the wants and needs of the family are far more important and take priority over the desires of the family members (Schwartz, 2007). The structural dimensions of familism include three constructs “to identify spatial and social boundaries, in which behaviors occur and attitudes acquire meaning” (Valenzuela & Dornbusch, 1994, p. 18). The behavioral dimension focuses on the feelings and attitudes about family (Sabogal et al., 1987). Researchers defined the attitudinal dimension as the normative commitment of family members to the family, which exceeds the commitment to an individual’s feelings or beliefs (Luna et al., 1996). The component that links attitudes about sex to familism is the attitudinal structure that focuses on a core component of the attitudinal familism, which asserts that overall attention to the family supersedes individual decisions that impact personal wants or needs (Guilamo-Ramos, Bouris, Jaccard, Lesesne, & Ballan, 2009).

### **Nature of the Study**

This study was quantitative in nature and included a correlational study design to determine predictive relationships between the independent and dependent variables. Correlational studies are used for determining the relationship between the independent and dependent variable within a population (Choukas-Bradley et al., 2014). Multiple linear regressions were used to determine the predictive relationships between the independent and dependent variables in this study.

### **Definitions**

Terms in this study were defined as follows:



*Acculturation*: The process in which members of one cultural group adopt the beliefs and behaviors of another and apply them to their family or individuality (Meston & Ahrold, 2010).

*Attitudes about sex*: An individual's belief about his or her sexuality (Sprecher & Treger, 2015)

*Attitudinal dimension*: The normative commitment of family members to the family, which exceeds the commitment to an individual's feelings or beliefs (Luna et al., 1996).

*Behavioral dimension*: The feelings and attitudes about family (Sabogal et al., 1987). The dimension that merits a deeper understanding of how students make decisions to engage in sexual behavior is the behavioral construct of familism.

*Birth control attitudes*: An individual's attitude to be responsible for providing contraception to protect against pregnancy (Hendrick, Hendrick, & Reich, 2006).

*Contraceptives*: Devices, techniques, or drugs used to prevent conception or impregnation (CDC, 2013).

*Familism*: The principle that family comes before individual choices, and includes showing respect for elders and giving honor to the family name (Menon & Harter, 2012).

*Instrumentality attitudes*: An individual's attitude toward enjoying the act of sex (Hendrick et al., 2006).

*Permissiveness attitudes*: An individual's openness to relationships involving sex (Hendrick et al., 2006).

*Sexual behavior*: A sexual encounter in which two people are physically intimate (e.g., touching, kissing, oral sex, vaginal sex, anal sex) with an individual of the same or opposite sex that may include a romantic or nonromantic relationship (Lewis, Granato, Blayney, Lostutter, & Kilmer, 2012).

*Sexual communion attitudes*: An individual's attitude toward the importance of communicating about sexual matters with a partner (Hendrick et al., 2006).

*Sexually transmitted diseases (STDs)*: Acquired by sexual contact, in which organisms causing STDs pass from one person to another through semen, blood, or vaginal/bodily fluids (CDC, 2013).

*Sexually transmitted infections (STIs)*: An infection that can be transferred from one person to another through sexual contact (i.e., sexual activity that includes kissing, vaginal sex, oral-genital contact, or the use of sex toys (CDC, 2013).

*Structural dimension*: The structural dimension of familism includes three constructs "to identify spatial and social boundaries, in which behaviors occur and attitudes acquire meaning" (Valenzuela & Dornbusch, 1994, p. 18).

### **Assumptions**

I assumed that participants would provide honest answers to the survey questions. This concern was minimized by participants providing anonymous answers to an online survey (see Leiner, 2014). Participants were assured anonymity, and all responses were stored in a secure location (see Leiner, 2014). The survey instruments and testing procedures for each instrument were validated by published researchers. The data will be stored in a secure location.

### **Scope and Delimitations**

The current study was conducted to examine the relationships between familism and sexual behavior among college students. More specifically, I examined whether the relationship between familism (IV), attitudes about sex (DV), and age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception (IV) among online college students. I examined the relationship between these factors to determine the predictive relationship between the variables and to compare the predictive relationships of these variables in online students and traditional college students.

I used a correlational design to determine whether the variables were related (see Creswell, 2008). Correlational research allows researchers to collect significantly more data than conducting an experiment (Creswell, 2008). Although correlational research usually occurs outside of a lab, results are usually applicable to individuals' lifestyles. Although correlational research cannot predict causation between variables, this research design was used to study whether an increase or decrease in the independent variable familism predicted an increase or decrease in the dependent variable sexual behavior.

### **Limitations**

Causality could not be established. The study was conducted to examine the relationship between familism and sexual behavior among college students by using a survey without manipulating the study environment. Correlations were possible in this study because I examined the variables familism and sexual behavior. Although identifying correlations was possible, causality could not be established because this

would have required an experimental design. I was not be able to determine whether the selected variables of interest caused the outcome. Also, the findings may have been different if the study had been conducted using open-ended interviews rather than surveys. Response choices did not indicate why respondents answered a question a specific way, and there was no way to ask follow-up questions about responses.

Issues that generally arise with survey designs are that participants try to please the researcher, lie to make themselves look better, or have mistaken memories about the questions that are asked through the survey. Response bias is a cognitive bias that influences the responses of a participant and may prevent those responses from being truthful or accurate. Response bias typically can have a large impact on the validity of survey or questionnaire studies.

There were limitations anticipated with the use of a participant pool to access participants. Participants were online students who do not participate in a traditional, on-site campus environment and are not traditional students in age either. Therefore, results of this study were not generalizable to traditional populations. However, this was also a benefit because this allowed me to compare the results of this study with similar studies that have been conducted on traditional college students.

### **Significance**

A cultural dimension that differs between some college students is the degree to which the individual places emphasis on family interdependence versus individual independence (Foster et al., 2014). Familism in traditional cultures refers to values and family interconnectedness as a traditional practice in how a person makes decisions

(Manago et al., 2015). Therefore, the significance of this study was to provide more information about sexual behavior in college students based on the social structure of familism. Researchers have focused primarily on alcohol abuse, drug use, and aggressive behavior as it relates to sexual behavior (Way & Robinson, 2003; Esparza & Sanchez, 2008), but college educators have limited information regarding whether familism impacts how students make decisions to engage in sexual behavior (Ma et al., 2014).

Over the past 30 years, familism has been considered a core value in the Latino population (Germán, Gonzales, & Dumka, 2009). For college students, the separation from family during their freshmen year requires a psychological adjustment from earlier social groups (family and friends) to new social groups (new friends) (Muñoz-Laboy, 2008). According to Muñoz-Laboy (2008), familism is defined as a group of family or organization's values held in higher esteem than individual values. Individuals who are shaped by familism share similar interests and make decisions based on the same belief as opposed to personal interest (Valenzuela & Dornbusch, 1994). College health educators and administrators have limited information about how to identify high-risk sexual behavior, and familism may be a predictor that can influence decisions about sexual activity (Ma et al., 2014).

Over past three decades, researchers have conducted several studies that addressed sexual risk-taking in adolescents and adults (Ma et al., 2014; Pompeo et al., 2014; Zhang et al., 2013). Although there are valuable data that support misconceptions of sexual health among college students, sexual risk-taking has caused an increase in STDs at colleges and universities (Derese, Seme, & Misganaw, 2014). I examined what

college students believe and the misconceptions that shape their decision-making regarding sexual behavior so new programs can be designed to promote healthier choices to protect against unwanted pregnancies, STDs, and risky sexual behavior. This study may contribute to positive social change by providing information about how familism and values are related to sexual behavior in college students. Findings may be incorporated into educational programs aimed at educating college students about the ramifications of their sexual behavior.

### **Summary**

Chapter 2 provides a thorough review of the relevant literature on sexual behavior, cultural values, and sexual activity among college students. Chapter 2 provides a comprehensive discussion of the relationship between familism and sexual behavior, issues in measurement of familism, prevalence of sexual behavior among college students, and consequences of sexual behavior among college students.

## Chapter 2: Literature Review

The purpose of this study was to examine the relationships between familism and sexual behavior among students attending a college or university. The aim of the research was to determine whether college students from different cultures make decisions based on the theoretical concept familism. Acceptance of the sociocultural construct of familism has been studied in-depth with the Latino population and has been found to be an influential component in how students make decisions to engage in sexual behavior (Steidel & Contreras, 2003; Stein et al., 2014). This chapter includes an examination of cultural diversity as well as families before the focus is narrowed to the specifics about familism as it relates to sexual behavior in college students from other cultures. Additionally, I examine what college students believe and the misconceptions that shape their decision-making regarding engaging in sexual behavior to identify discrepancies college students make based on their beliefs. The familism scale focused on the college student's view of sexual behavior through the theoretical lens of familism.

### **Literature Search Strategy**

To gather information for the primary literature review, I searched the peer-reviewed and scholarly literature from 2007 to 2015. The reasoning for including research from 2007 was to include the findings of Schwartz (2007) who conducted a similar study (applicability of familism with diverse cultures) that served as the foundation for the familism scale that was used in this study. The research system that was used to gather this research was the Walden University Thoreau search system as the primary source for gathering research. The databases that were searched included

EBSCO, Health Science: A Sage Full Text Collection, MEDLINE, and Health and Medical Complete. Google Scholar was also used to locate articles that were not available through the Walden database. To gather these peer-reviewed articles, I selected each study based on relevance of familism and sexual behavior. Although there was a large amount of research that focused on sexual behavior and drug use, these studies were not included because the research question focused on familism and sexual decision-making. The key search words were *familism*, *familism scale*, *attitudinal familism*, *behavioral familism*, *acculturation*, *cultural identity*, *cultural differences*, *gender differences*, *sexuality*, *sexual behavior*, *sexual risk taking*, *sexual decision-making*, *college life*, and *college culture* in various combinations.

### **Theoretical Foundation**

Downing-Matibag and Geisinger (2009) stated that theories explain how or why something happens based on the variables or issues along with their relationships between the selected theories. The theory that was used for this research was familism. Familism is a theory that refers to the core values of family and place commitment to family rather than focusing on individuality (Steidel & Contreras, 2003). Familism was used to identify how familism effects how college students make decision to engage in sexual behavior through examination of the sexual attitudes of online college students (Stein et al., 2014).

### **Familism**

Familism is mainly applicable to the Hispanic population, but there is evidence that other ethnic groups share the behaviors addressed in this theory (Schwartz, 2007).



Familism has been identified as a cultural value that represents one method of how families pay homage to their heritage and honor their family by making decisions that put the family interest before individual needs (Campos, Ullman, Aguilera, & Dunkel Schetter, 2014). College students are faced with internal and external decisions while facing emotional distress and peer pressure on a college campus (Downing-Matibag & Geisinger, 2009). To learn more about how college students make decisions about sexual behavior based on familism, I needed well-grounded theories. During the 1950s, the term *familism* referred to familists, which was a spiritual unification of Christianity that existed in a small German town influenced by the political views of Johannes Althaus (Stein et al., 2014). The views of familists were criticized by the English monarchy who accused them of promoting Puritanism.

Over the years, the term familist was changed to familism, which refers to a model of social organization. According to Rodriguez and Kosloski (1998), the traditional views of familism include trust, loyalty, and family cohesiveness to emphasize the relevance of family. Over the last 50 years, familism has been considered a core value for the Latino culture (Germán et al., 2009; Luna et al., 1996; Ma et al., 2014; Sabogal et al., 1987; Steidel & Contreras, 2003). Although researchers have discovered that the definition of familism was connected with family honor (Sabogal et al., 1987; Schwartz et al., 2011; Schwartz et al., 2013) Germán et al. (2009) stated that family honor means to present acceptable behavior that is satisfactory in the eyes of immediate family and outsiders. A comprehensive definition of familism was constructed by Burgess, Locke, and Thomes (1963) who categorized familism into five parts:

1. the feeling on the part of all members belonging preeminently to the family group above all other groups and that all other persons are outsiders;
2. complete integration of individual activities for the achievement of family objectives;
3. the assumption that land, money, and other material goods are family property, involving the obligation to support individual members and give them assistance when they are in need;
4. willingness of all members to rally to the support of a member if attacked by outsiders; and
5. concern for the perpetuation of the family as evidenced by helping adult offspring in the beginning and continuing an economic activity in line with family expectations and in setting up a new household.

Over the past decade, the applicability of familism with other ethnic groups emphasized family coming before individual choices, showing respect for elders, and giving honor to the family name (Menon & Harter, 2012). The influences that could impact how college students make decisions to engage in sexual behavior are the personal beliefs of students who share the same values as the term familism. Family closeness, values, and beliefs influence how individual's makes decisions based on the perception that their family's image will not be negatively impacted (Valenzuela & Dornbusch, 1994). Valenzuela and Dornbusch (1994) found that familism has been referenced within the Hispanic population and other ethnic groups as it relates to risk-taking behavior. Although developmental skills that are taught in adolescent years to

children, researchers have shown that if these characteristics and traits are not properly developed, these consequences could transfer into adulthood, which could impact how students make decisions while attending college (Higher Education Research Institute, 2003). This risky behavior includes sexual behavior regardless of belief system, gender, and marital status that impacts the complication of making decisions.

During the 1980's, researchers conceptualized familism as a belief, feeling, and value, which are associated with the Latino culture (Sabogal, Marin, Otero-Sabogal, Marin, & Perez-Stable, 1987). Since the mid-1980's, of the concept of familism has become more complex and researchers have now began to look at the relationship of familism as it relates to other cultures (Manago, Ward, & Aldana, 2015; Schwartz, 2007). Although not clearly expressed, there is an implied assumption that familism is primarily applicable to Hispanic people (Schwartz, 2007). This area of research has received a considerable amount of attention in the research regarding the influence of sexual behavior among the Latino population (Guilamo-Ramos et al., 2009; Slesnick, Vazquez, & Bittinger, 2002; Steidel & Contreras, 2003) but limited research about the relationship of familism with diverse ethnic groups has been completed (Li, 2014; Sabogal et al., 1987; Schwartz, 2007). Manago, Ward, and Aldana (2015) defined familism as the feeling of closeness, the ability to develop a positive relationship, and to contribute to the well-being of family whether nuclear or extended. They concluded that familism is built off feelings of solidarity, loyalty, and reciprocity among family members. While there have been discrepancies with the theory of familism, some psychologists began to assert this theory as a unique Latino family concepts (Manago, Ward, & Aldana, 2015).

There is evidence that familism can be applied to ethnic groups other than the Hispanic population. Coohy (2001) discovered that familism was protecting against child abuse for both Hispanics and non-Hispanic Whites. Gaines et al. (1997) identified that Hispanics, African Americans, and Asian Americans were validated by familism. Slesnick, Vazquez, and Bittinger (2002) and Unger et al. (2002) found that the relations of familism for adolescents and young adults that engage in risky behavior are consistent across various ethnic groups. Based on this evidence, one could infer that applicability of familism may be more parallel to other diverse groups rather than focusing on the Hispanic population.

The origins of familism date back to the traditional family institution, in which familism was identified by Valenzuela and Dornbusch (1994) as a multidimensional construct composed of three dimensions known as structural, behavioral, and attitudinal. The structural dimensions of familism uses these three constructs “to identify spatial and social boundaries, in which behaviors occur and attitudes acquire meaning” (p. 18). The conceptualization of the theory of familism has been composed of several different dimensions (Esparza & Sanchez, 2008; Germán, Gonzales, & Dumka, 2009; Luna et al., 1996; Steidel & Contreras, 2003). According to researchers, the three dimensions that receive agreement between researchers are attitudinal, behavioral, and structural (Steidel & Contreras, 2003; Stein et al., 2014)

**Structural dimension.** The structural dimension of familism uses three constructs “to identify spatial and social boundaries, in which behaviors occur and attitudes acquire meaning” (Valenzuela & Dornbusch, 1994, p. 18). Valenzuela and Dornbusch argued

that patterns of kinship are based on structure, geographical proximity, and the size of the family (1994). Guilamo-Ramos et al. (2009) defined structural familism as the actual size (e.g., number of people in the family) intactness (e.g., frequent times family members are in direct contact with each member) and the number of nuclear and extended family members that are in close proximity of family locations.

**Behavioral dimension.** This construct focuses on the feelings and attitudes about family (Sabogal, Marin, Otero-Sabogal, & Marin, 1987). The dimension that merits a deeper understanding of how students make decisions to engage in sexual behavior is the behavioral construct of familism. Feelings and attitudes about family, behavioral influences of peers, family, and religion has some bearing on how students make decisions without leaning on guidance from family members while in a college setting (Manago, Ward, & Aldano, 2015). Coohy (2001) conceptualized behavioral familism as receiving or giving support to family members as opposed to beliefs or attitudes about a behavior. It is important to note that behavioral familism compared to attitudinal familism is not the same in terms of constructs, but does draw from the same foundation of looking at the physical act of providing support from family members. While the attitudinal and structural construct should not be eliminated from this research, the behavior construct will be the primary focus of this study as it relates to how college students engage into sexual behavior while attending a College/University. Way and Robinson (2003) used Familism to look at the effects family and friends had on how Hispanics made decisions, while Peña et al. (2011) identified those tight-knit families who used familism were more likely to receive higher accolades in education and reduce

suicidal behavior.

**Attitudinal dimension.** Researchers defined this dimension as the normative commitment of family members to the family, which succeeds the attention of an individual's feelings or beliefs (Luna et al., 1996). Attitudinal familism has been classified as a cultural value within the Latino population that has strong attachment to his or her family with the nuclear and extended families (Guilamo-Ramos et al., 2009). A core component of the attitudinal familism is the involvement with family and overall attention to the family supersedes individual decisions that impact personal wants or needs (Guilamo-Ramos et al., 2009). According to Stein et al. (2014), fervent feelings and the belief in dependability, support, and unity among family members is a major component of attitudinal familism. Based on past researchers, authors have posited that attitudinal familism is separated into three dimensions known as familial obligations, family meaning, and perceived support (Sabogal et al., 1987; Valenzuela & Dornbusch, 1994).

### **Literature Review Related to Key Variables and/or Concepts**

Over the past decade, the applicability of familism with other ethnic groups emphasizes that family comes before individual choices, showing respect for elders, and giving honor to the family name (Menon & Harter, 2012). The influences that could impact how college students make decisions to engage in sexual behavior are the personal beliefs of students who share the same values as the term familism. Family closeness, values, and beliefs influence how individual's makes decisions based on the perception that there family's image will not be negatively impacted (Valenzuela, A., &

Dornbusch, 1994). Valenzuela and Dornbusch (1994) familism has been referenced with the Hispanic population and other ethnic groups as it relates to risk-taking behavior. Researchers have shown that if these characteristics and traits are not properly developed, these consequences could transfer into adulthood, which could impact how students make decisions while attending college (Higher Education Research Institute, 2003). These risky behaviors include sexual behavior regardless of belief system, gender, and marital status that impacts the complication of making decisions (Higher Education Research Institute, 2003).

Cultural diversity and families is the first topic that was addressed in the literature review as it pertains to the psychological development for peers, family, religion, and communities. The second topic that was covered is familism. As one may take a closer look at familism, it is important to address the three components of familism (e.g., attitudinal, behavioral, and structural) as they relate to this study. The importance of the relationship between familism and sexual behavior is another component of this literature review that provides insight on how individuals are impacted by there cultural values compared to the engagement of sexual intercourse. In order to examine the relationship between familism and sexual behavior, it is important to define sexual behavior so that there is a clear understanding of how this topic impacts this study. In order to explore sexual behavior, topics for this section of the literature review will focus on the prevalence of sexual activity among college students; gender differences, ethnicity differences, and consequences of sexual behavior among college students.

## **Cultural Diversity and Families**

It has been widely cited that social influences of psychological development are impacted by the influences from individuals such as peers, family, religion, communities, and economic social conditions (Juang & Syed, 2010; Sayegh & Knight, 2011; Stein et al., 2014). Researchers have identified that college students have been faced with internal and external decisions while facing emotional distress and peer pressure on a college campus (Downing-Matibag & Geisinger, 2009; Higher Education Research Institute, 2003; Schwartz, 2007). While college students go through a cognitive development phase during their college career, the influences of this information has generated a wealth of knowledge that contributes to theory and research for influencing how familism shapes psychological functioning (Parke & Buriel, 2006). When examining cultural diversity as it relates to college students, Brannan et al., (2013) stated that diversity enhances social development by providing individuals with the opportunity to interact with people from a variety of groups. These researchers also identified that cultural diversity in the workforce requires individuals to become sensitive to human differences while enhancing their ability to make decisions based on their cultural backgrounds. Since the percentage of the college population is expected to grow exponentially by 2050, researchers have argued that it is vital for college students to expand their social circle to help cultivate relationships with social development (Brannan et al., 2013).

Although cultural diversity is a positive measure for social development, two components that often differ based on cultural background are independence and interdependence. Stephens et al. (2012) identified independent families embellish a



perception that prioritizes a family as separate and autonomous. Based on the parenting model, these researchers indicated that independent families are usually from urban areas, highly educated families from industrialized locations, and believe that each member of the family is a singular unit. For interdependent families in the parenting model, Keller et al. (2006) stated that interdependent families honor primacy of family rather than focusing on a particular individual. While interdependency focuses on interrelatedness with family and not solely independence they concluded that families might emphasize independence or interdependence based on their cultural backgrounds.

Kiernan and Mensah (2011) argued those characteristics of relationship with families as well as the implications of child development are typically assessed with a cultural sensitive perspective. Researchers have shown that family relationships are studied by culture, and then subsequently investigated for generality in other cultures to determine if there is any correlation between ethnic backgrounds (Kiernan & Mensah, 2011). However, the similarities and differences across cultures are examined because of the impact cultural elements may have on how individuals make decisions based on the values they were taught in their family (Kiernan & Mensah, 2011). Ethnic identification in the United States has impacted how families acquire resources to maintain a certain lifestyle (Stephens et al., 2012). Roschelle (1997) indicated that diverse families are structured differently than Caucasians families in three aspects: living conditions, social support, and head of household. They concluded that the structure of minority families compared to Caucasians was impacted from having a lower societal status and cultural preferences.

The strength of family values as it pertains to society in minority groups has been stressed by researchers in past research (Luna et al., 1996). While different ethnic groups teach specific values and goals, it was indicated that all cultural backgrounds share a similar interest with educating family members to focus on family rather than place emphasis on individual values and personal desires (Parke & Buriel, 2006). Researchers have indicated that families from diverse racial backgrounds face challenges that require sole support from immediate family members (Eaton & Matamala, 2014). These researchers have presented findings that Latino families use familism as mechanism of holding onto their heritage culture (Eaton & Matamala, 2014). Schwarz (2007) found that familism relates to any ethnic group because this theory emphasizes prioritizing the family over individual.

### **Relationship Between Familism and Sexual Behavior**

Parents may discuss the importance and the risk associated with sexual intercourse (Meston & Ahrold, 2010; Moilanen & Raffaelli, 2010). Although traditional messages communicated in the past focused on the importance of waiting to have sex until marriage, Moilanen and Raffaelli (2010) stated that the messages shared with the rising generation is the risks associated with sexual engagement is centered around unwanted pregnancy and STD's. While abstinence is still a message shared from parents to their children, familistic values are use to promote awareness, personal responsibility, and the importance of decision-making (Manago, Ward, & Aldana, 2015). Manago, Greenfield, Kim, and Ward (2014) identified a culture difference between the degrees of family interdependence versus individual independence. Familism in a traditional culture

focuses on practices and values, which are strong characteristics of family interconnectedness (Manago, Greenfield, Kim, & Ward, 2014; Manago, Ward, & Aldana, 2015). Individual independence is taught as a priority in the United States, which is characterized by individual responsibility and personal choice (Stephens et al., 2012). From a familistic culture, traditionally sexuality has been framed in terms of procreation and family honor (Manago, Ward, & Aldana, 2015), individual cultures emphasize pleasure, romantic relationships, and personal choice (Stephens et al., 2012).

While few researchers have examined the relationship between familism and sexual behavior (Guilamo-Ramos et al., 2009; Manago et al., 2014; Manago, Ward, & Aldana, 2015), acculturation has been studied more deeply to look at how sexual relations impact familistic values (Meston & Ahrold, 2010; Manago, Greenfield, Kim, & Ward, 2014; Manago, Ward, & Aldana, 2015). Acculturation is a process in which members of one cultural group adopt the beliefs and behaviors of another and apply to their family or individuality (Meston & Ahrold, 2010).

Before graduation, high school students make the decision between themselves and families to attend a four-year collegiate institution. Once in attendance to a college or university, college freshmen tend to go through acculturation during their first six months away from home (Moilanen & Raffaelli, 2010). Risky behaviors, such as alcohol use and sexual activity, are a major social concern on college campuses. Eighty percent of students who participated in a recent survey considered the “hookup culture” to be a trending phase among college students to engage in unsafe sexual behavior on college campuses (Manago, Ward, & Aldana, 2015). The definition of “hookup culture” is the

acceptance of uncommitted sex encounters while on a college campus (Garcia et al., 2012).

Researchers have indicated that the norms and expectations that inform our sexual decision-making skills come from a cultural script in human sexuality and that cultural scripts in human sexuality dictate courtship practices (e.g., heterosexual and monogamous) (Manago, Ward, & Aldana, 2015). According to DeLamater (1989), cultural discourses regarding sexual behavior focus on three prominent values: procreation discourses is an assumption in which should take place during marriage for the purpose of procreation; relational discourses emphasize that sex should occur between two people that are in a committed relationship; recreational discourses states that sex is a pleasurable activity that produces fun and satisfaction. He concluded that a fourth prominent value known as the sexual double standard argues that sexual exploration between men and women is highlighted as more acceptable to men verses women.

The complexity of cultural discourse as is relates to familism and sexual behavior is salient among all ethnicities because of the managed message discussed about sexuality rooted in familistic values (Manago, Ward, & Aldana, 2015). When is comes to familistic values, the sexual socialization process begins during childhood, adolescence, then evolving into adulthood (Burgess, Locke, & Thomes, (1963). Although sexual socialization has become a larger platform for expression for all cultures, young people who have active lifestyles interpret and embody messages that have been embedded in values about sex (Morgan, Thorne, & Zurbriggen, 2010) which make decisions to select

people in their inner circle that share the same values that resonate with their own (Brechwald & Prinstein, 2011).

A cultural dimension along with sexual behavior has the degree to differ based on cultural beliefs and values. Manago, Ward, and Aldana (2015) discussed that family interdependence versus individual independence is characterized by values, practices and family interconnectedness. Individual independence is a priority in the dominant cultural influences in the United States (Brannan et al., 2013), whereas sexuality in familistic cultures is a traditional component framed in the context of family honor and procreation (Raffaelli & Iturbide, 2009). In individualistic cultures, the emphasis of romance, love, and individual responsibility provides individuals with the opportunity to make personal choices rather than make decisions based on familistic values (Manago, Ward, & Aldana, 2015). Claxton and Van Dulmen (2013) pointed out that the differences in ethnic sexual experiences for emerging adults in college are coupled with values connected to their culture. Caucasians and African Americans were more sexually active with multiple partners than Latino college students but found that there was not enough substantial difference between any ethnicity to indicate noncommittal sexual relationships (Eisenman & Dantzker, 2006). It was also found that the relationship between familistic values and sexual relationships were more common in European American college students compared to Latino-American college students (Claxton & Van Dulmen, 2013).

Casual sex relationships occur before college students enter into marriage, which holds fewer restrictions to individuals that are not committed to a spouse (Owen et al., 2010). Based on these findings, the researchers conclusions coincided with others that

indicated how Latino college students are more restrictive about sex outside of marriage compared to other ethnicities. Given that there are inconsistent findings for all ethnicities, studies on the role that familism plays in sexual engagement among all college students is needed.

### **Gender and Familism**

The applicability of familism between male and female groups represents a psychological construct that is relevant to diverse ethnic groups (Schwartz, 2007). While familism is characterized by strong identification between nuclear and extended families, there are several studies that have differentiated between male and females relationships within the family. Miles et al. (2012) assessed gender differences on a scale of familism which identified adult Latinos scored significantly higher on roles of separation compared to Latinas (i.e., convinced that males shared different responsibilities in parenting roles). Based on the found differences in roles among six countries (e.g., including the United States and Mexico) researchers reported that the roles of parenting and how values are taught to children in the home vary based on ethnicity (Meston & Ahrold, 2010). More recently, researchers have made attempts to determine if gender differences exist among diverse ethnicities.

Juang and Syed (2010) studied 290 students (e.g., Asian American n=77, Latino n=35, Mixed ethnic n=63, Caucasian n=80, African American n=20, Other n=11), to understand the influence of gender from familism and how it is impacted by family cultural socialization. It was concluded that males exercised more freedom on a college campus compared to females that held onto cultural traditions. The researchers indicated

“after adding family cultural socialization to the model the previously significant main effect for ethnicity became non-significant,  $F(3,207) = 1.32, p = .27, \eta^2 = .02$ .” (Juang & Syed, 2010, p. 350). Therefore, the researchers had identified that there was no statistically significant differences between ethnicities for gender on how it impacts family cultural socialization.

Schwartz (2007) used the Attitudinal Familism Scale to measure familism. They indicated that “Hispanics,  $M = 3.57$  on a 1-5 scale; non-Hispanic Whites,  $M = 3.45$ ; and non-Hispanic Blacks,  $M = 3.61$  demonstrated strong correlations with measures of “vertical collectivism” (p.106). Vertical collectivism is defined as the respect for and humble submission to authority figures and family members. Based on gender differences for this particular study, familism was applicable to both Hispanics and Non Hispanics. One component that was identified in this study was the level of acculturation with familism. Schwartz (2007) suggested the correlations of familism to vertical collectivism represent how acculturation impacts the value system with Hispanics and Non Hispanics. They concluded that there are no statistically significant differences between Hispanic and Non Hispanic cultures regarding familism.

### **Issues in Measurement of Familism**

Over the past 20 years there have been several irregularities regarding deficiencies with familism in research and the invariance with how this construct is measured (Luna et al., 1996). Researchers have recommended numerous items, variables, and instruments that have claimed to measure familism along with analyzing the items and variables in the instrument (Luna et al., 1996; Miles et al., 2012; Steidel & Contreras,

2003). Heller (1970) used the attitudinal familism scale to measure family solidarity. The scale measures the attitudinal familism construct to measure whether attitudes are linked to family solidarity and if family members make decisions based on the feelings of other family members. Researchers continually form measures based on the diverse definitions of familism without providing proper references about issues with internal reliabilities (Miles et al., 2012). Not only is the measure development issues rarely mentioned but researchers have also limited their discussion about internal validity, external validity, and population characteristics (Stein et al., 2014).

Stein et al. (2014) noted the measures of familism range from simple to complex, which consider structural familism to be measured separate from attitudinal and behavioral familism. While other researchers have started to view familism as a multidimensional construct, (Coohey, 2001; Luna et al., 1996; Steidel & Contreras, 2003) numerous scales have been designed to measure familism for not only the Hispanic population, but also varying ethnicities (e.g., Caucasians, African Americans, Anglo Americans, Puerto Ricans, Latinos, and Mexican Americans). While researchers have found determined results about these varying populations, it is unclear if these measures of familism are also used for people of different racial background or if they are culture-specific (Manago, Ward, Aldana, 2015). Given the varied group of discrepancies, the examples below will examine various ways to measure familism with not only Hispanics, but also Non Hispanic populations in the literature.

Researchers that have quantitatively assessed familism in Latino and Non-Latino populations have often used behavioral familism as a counterpart to attitudinal familism



(Manago, Ward, & Aldana, 2015). Researchers typically provide questions to participants of the study that asks, “How many people live within a one-hour drive from you”, which measures proximity of distance that family members live within close proximity.

Manago, Ward, and Aldana (2015) identified family members who live in close proximity of one another show a positive strong correlation with higher attitudinal familism values. The following researchers used the measurement of behavioral familism and separated this measure from attitudinal familism to see if behavioral positively correlates with attitudinal.

Miles et al. (2012) measured behavioral familism with a variable: number of times per week family members spoke through the telephone that do not live in there household (six point frequency scale). Not only did the researchers use this single variable, but also used structural familism as a variable to determine the number of adults living within a one hour drive of relatives (six point from none to 20). In 2014, Maliszewski and Brown measured behavioral familism by asking specific questions regarding size of family and intactness of family through how often one may stay in contact with family members that do not live in the same household. One variable used in this longitudinal study for behavioral familism was the development of attachment to family members (e.g., parents, siblings, grandparents, aunt/uncle’s, and cousins) that include personal time spent with individuals that do not live in close proximity that do not live in the same household (Morgan, Thorne, & Zurbriggen, 2010). These authors found that supporting attachment, revolved around individuals that not hold the same values and beliefs, but also has a strong relationship built around support, unity, and

socialization. Behavioral familism continues to build on strong emotional relationships regardless of distance between relatives or family members not living in the same household (Campos, Ullman, Aguilera, & Dunkel Schetter, 2014). In order for this relationship to continue to grow within the variable of behavioral familism, researchers have identified that attitudinal familism positively correlates with one another regardless of time or distance a part from family.

While researchers have indicated that attitudinal familism is more complex and divergent due to the varied definitions of this construct, behavioral familism is relatively straightforward to measure (Manago et al., 2014). Some of the original scales that were developed to measure all three constructs (e.g., attitudinal, behavioral, and structural) in familism have continually evolved over the pasts 40 years (Manago et al., 2014). In 1970 Heller (1977) designed a familism 15-point that incorporated questions from each construct of familism (i.e., attitudinal, structural, and behavioral). Sabogal et al. (1987) designed a familism scale that was comprised of familial obligations, perceived support from the family, and family as referents. By 2003, Lugo Steidel and Contreras (2003) argued that past conceptualizations made by previous researchers were unsuccessful with capturing the key aspects of familism.

It is evident that researchers have identified attitudinal familism as a family functioning component that predicts psychological functioning whereas behavioral familism interprets individual behavior. Manago et al. (2014) stated that attitudinal versus behavioral familism argues that both constructs guide behavior, which serve as cognitive frames for comprehending behavior. In order to quantify measures of behavioral

familism, the new familism scale uses all three dimensions (e.g., attitudinal, behavioral, and structural) in order to interpret psychological functioning of behavior (Miles et al., 2012).

### **Defining Attitudes About Sex**

Throughout the remainder of this literature review, several indices of attitudes about sex were referenced and used to provide an in-depth look at how researchers have defined and examined sexual behavior. Attitudes about sex are critical factors when discussing the role of individual decision-making as they influence behavior. According to Twenge, Sherman, and Wells (2015), attitudes about sex impact a variety of outcomes, which include STDs, abuse and assault prevention, mental health, and relationship outcomes. Attitudes about sex are defined as an individual's belief about a person's sexuality, which is demonstrated by behavior that is based on cultural views and previous sexual experiences (Sprecher & Treger, 2015). Researchers have shown that attitudes about sex, such as sexual conservatism could potentially explain cultural differences in sexual desire as well as sexual guilt and may even account for gender and ethnic differences in sexual attitudes and behavior (Sprecher & Treger, 2015). Twenge, Sherman, and Wells (2015) defined a sexual attitude as a specific way someone thinks about a particular sexual behavior that influences how a person views this action whether to be positive or negative. Since these attitudes vary based on genetics, it has been determined that attitudes toward premarital sex and same sex sexuality varies based on mental and physical health (Twenge, Sherman, & Wells, 2015).

Lewis et al. (2012) defined sexual behavior as a sexual encounter, in which two

people are physically intimate (e.g., touching, kissing, oral sex, vaginal sex, anal sex) with an individual of the same or opposite gender that may be in a romantic or non-romantic relationship. Some authors have suggested that risky sexual behavior is sexual intercourse (e.g., oral sex, vaginal sex, anal sex) between same genders or opposite genders that does not use contraceptives (e.g., condoms) to protect against pregnancy and STDs (Claxton & Van Dulmen, 2013; Garcia et al., 2012; Guilamo-Ramos et al., 2009).

Garcia et al. (2012) stated that sexual behavior is becoming progressively engrained in college culture, which reflects sexual predilections and changing social sexual scripts among college students. Sexual behavior is defined as interpersonal relationships categorized by romantic or non-romantic relationships that include penetrative intercourse, kissing, and oral sex (Garcia et al., 2012). However, researchers have suggested that sexual behavior not only occurs in traditional relationships, but also in the Hookup Culture for college students (Garcia et al., 2012). Researchers have postulated that contemporary sexual behavior (e.g., hookup culture) is best understood as the convergence of social forces through the development period of emerging adulthood which introduces a wide array of intimate interactions between partners while attending a college (Fielder & Carey, 2010; Vrangalova & Savin-Williams, 2012).

Vrangalova and Savin (2012) defined sexual behavior as the same sex or opposite sexes engaging into sexual intercourse, which include penetrative sex, oral sex, and anal sex. While sexual encounters outside of committed relationships are referenced as casual relationships among youth and adults, Wentland and Reissing (2011) identified that college and university students spend more time in casual sexual relationships (CRS) than

time spent in romantic relationships. While there is a range of explanations addressing how interpersonal relationships contribute to sexual behavior during college, sexual behaviors are typically modeled as a learned behavior through trial and error (Harkness, Mullan, & Blaszczynski, 2015). Harkness, Mullan, and Blaszczynski, (2015) identified that sexual behavior among college students was associated with watching pornography. Although not all college students watch pornography, the risk associated with viewing pornography may influence sexual behavior or desires to engage in sexual intercourse among college students. In the available literature, the definition of sexual behavior is similar from study to study, which allows researchers to interpret the results to correlate with findings.

While researchers have examined both sexual attitudes and sexual behavior, it has been determined that understanding the interplay between both attitudes and behavior provides the insight into the mechanisms of changes over time (Twenge, Sherman, & Wells, 2015). In order to grasp how sexual attitudes and behavior highlight the importance of how individuals make decisions, Sprecher and Treger (2015) found that sexual attitudes are a strong predictor of sexual behavior.

**Sexual activity and college students.** Colleges and universities have reported and increase of sexual activity among freshmen students over the last 20 years (Schwartz et al., 2011). Estimates range from 47% to 73% of college students who attend a two-year and four-year college reported engaging in sexual activity during their freshmen year of college (CDC, 2013). Huang, Jacobs, & Derevensky (2010) reported college students ages 18 to 25 years old reported that sexual activity is steadily increasing among male

and female students.

**Prevalence of sexual behavior among college students.** College students reported high rates of sexual activity during their freshman year of college compared to upperclassmen (Fielder & Carey, 2010). Estimates within the freshman population have ranged from 51% to 75% of college students that report engaging into sexual behavior (e.g., oral, vaginal, and anal sex) in the United States (CDC, 2013). According to the CDC (2013), 51% of students reported having sex prior to attending college and 60% of students reported engaging into oral, vaginal, and anal sex by the end of their first semester in college.

Sixty nine percent of college students used condoms in vaginal intercourse (Fielder & Carey, 2010). It was also reported that 56% of college students reported engaging in oral sex during the first semester of college (Fielder & Carey, 2010). Since the 1990's, unintended pregnancy, births, and STD's have seen a shift with college students engaging in sexual activity. Finer and Zolna (2014) stated that the rates of sexual behavior remains at 48% in 2013 with a projected increase to 54% by 2020. According to the CDC (2014), 34% of male college students reported having more than four partners during their college career compared to 32% females that reported having more than four partners while in college. Despite the high levels of sexual engagement among college students many college students do not receive STD counseling during their first year of college (Finer & Zolna, 2014). It is estimated that 56% of female college students between the ages of 19 to 25 tested positive for and STD during the transition from high school to college in a national survey (CDC, 2014).

**Gender differences.** Owens et al. (2010) found that males were more likely to engage in sexual activity at an earlier age compared to females and reported higher rates of non-contraception use. They also stated that females were less likely to have multiple sex partners and fewer STD's compared males. The Hookup Culture for college students impacted the sexual experience between male and female due to consensual terms of sex with no commitment. It was determined that male students were more likely to initiate consensual sex with no commitment of a future relationships compared to females. Over the last 30 years, researchers have reported an estimated 74% of female college students learned about oral contraception (i.e., birth control) to protect against unintended pregnancy, STI's, and STD's (CDC, 2013; Else-Quest et al., 2012; Finer & Zolna, 2014; and CDC, 2014).

The CDC (2014) indicated that 77% of female college students (e.g., ages 19 to 24) discussed contraception with their health care provider compared to 45% of male college students. They reported that 22% males and 14% of females reported not using some form of contraception with their partner. Researchers have shown over the last several years that condom usage for males and females at their first sexual encounter experience were more likely to use contraception (CDC, 2011). Based on contraception usage among male students (66%) and female students (53%) stated that they used a condom during their last sexual intercourse, which equates to two-thirds of the student population (CDC, 2011).

Another component that differences between genders is the social script of "sexting." According to Hinduja and Patchin (2010), sexting is defined as the exchange

of explicit images or video messages sent by a mobile phone. They reported that one in ten teens or young adults between the ages of 13 to 24 shared an explicit message (i.e., naked photo or video) of themselves or someone else via digital communication. While college males are more than twice as likely to have multiple partners during their college career, the use of technology provides students with the possibility of influencing sexual behavior patterns (Claxton & Van Dulmen, 2013).

**Consequences of sexual behaviors among college students.** As high school students make the transition from parental guidance to free will and freedom on a college campus, there are different levels of risky behavior that a vast majority of college students are affiliated with during their freshmen year of college (Liao et al., 2015). According to the findings of the National College Health Risk Behavior Survey, eight out of ten college students between the ages of 18 and 24 admitted to engaging into sexual intercourse within the first three months of college (Ward et al., 2014). These researchers also stated that 25% of students surveyed admitted to having six or more partners prior to attending college and used adequate precautions to protect against STDs and unwanted pregnancies (Ward et al., 2014). Although the consequences of risky sexual behavior places students at risk for contracting an STD, STI, or unwanted pregnancy, it is important for college students to be knowledgeable about the college or university they are attending as it pertains to the risk involved with the campus.

**Sexually transmitted diseases (STDs) and sexually transmitted infections (STIs).** STD/STIs are one of the major health concerns for students on college campuses (Uecker & Regnerus, 2010). Over 100 million STIs occur each year in individuals under



the age of twenty-five. According to World Health Organization (2011), there is an estimated 34 million people living with HIV and 42% of newly diagnosed individuals who suffer with HIV/AIDS between the ages 15 to 24. Proportional increases in the number of STD cases of heterosexual transmission among people 20 to 49 were found to be infected before the age of 20 (CDC, 2014).

National estimates for the prevalence of STDs among college students indicate that 18.9 million new cases occur each year in the U.S. (CDC, 2015). Nearly half of the cases that occur each year in the U.S. represent 25% percent of the population that is sexually active. Mehra et al. (2012) stated that approximately 97% of people in the reproductive age in Uganda were informed about at least one method of contraception to protect against STDs and pregnancies. However, the CDC reported that knowledge about STDs and pregnancy has limited influence on behavior, which is unclear with research (Mehra et al., 2012). Many researchers have identified factors that causes STD rates and pregnancy to increase on college campuses is socio-demographics, age at sexual debut, alcohol, partner type, and knowledge about contraception influence how students make decisions about engaging in sexual behavior (CDC, 2014; Huang, Jacobs, & Derevensky, 2010; Mehra et al., 2012).

STD's remain a major public health concern on college campuses especially for those between the ages 18 and 24 (Huang, Jacobs, & Derevensky, 2010). According to the CDC (2014,) the human papillomavirus (HPV) is the most common STI among teens between the ages of 14 and 19 in the U.S. Young adults between the ages of 20 to 24 accounted for most of the reported cases of Chlamydia and Gonorrhea and places females

at greater risk than men for these STIs (CDC, 2013). Despite the high rates of infection, researchers have linked high infection rates with pregnancy complications, pelvic inflammatory disease (PID), and infertility (CDC, 2013). Although one third of the young adult population between 19 and 25 reported having a discussion about STIs, 45% of female population account for this discussion with health providers within the last three years (CDC, 2014). The CDC found that 37% of young adult men reported receiving a STI screening compared to 70% of young adult women in the past year (CDC, 2014). It was also reported that 56% of females who receives the screening was unaware that this was not part of a routine examination (CDC, 2013). Huang, Jacobs, and Derevensky (2010) stated that and estimated 34,000 young adults in the U.S., were currently living with Human Immunodeficiency Virus (HIV).

According to Fielder and Carey (2010) sexual behavior consistently involves risk for physical and mental health. Some of the physical health consequences that college students face are unintended pregnancy, STIs, STDs, and sexual assaults (Fielder & Carey, 2010). Huang, Jacobs, and Derevensky (2010) reported that some college athletes engage in unprotected sex during the first semester of school. They concluded that 10.2% of male students reported having unprotected sex, while 7.9% of female athletes had a lower prevalence rate of unprotected sex. Due to the widespread of hormonal contraceptives on college campuses, the CDC (2014) reported that unintended pregnancy rates had a lower prevalence rate compared to STIs and sexual assaults.

**Gender stereotypes.** According to traditional “sociocultural expectations” men were more likely to be sexual experienced with multiple partners and had engaged into

more causal sex than women due to the “double standard” concept (Claxton & Van Dulmen, 2013). Claxton and Van Dulmen (2013) defined the double standard as a concept that women are more likely to feel guilty and anxious to engage in causal sex. Ahrold and Meston (2010) stated that men are more likely to engage in causal sex compared to women because men did not share the same feelings of guiltiness and anxious toward the perception of others. The notion that health outcomes are left to chance among college students is a relevant issue that places students at risk on college campuses (Burnett et al., 2014). According to Burnett et al. (2014) college students who engage into risky behaviors reported exhibiting denial about their risk and 50% of students had reported having unprotected sex. In a study of college students, Burnett et al. (2014) found a positive association between perception and sexual risk behaviors. The prevalence of STDs that college students could acquire through risky sexual behaviors reported high levels of denial in order to have unprotected sex in romantic and non-romantic relationships.

**Pregnancy.** The incidence of unintended pregnancy has been a key indicator of reproductive health among sexually active men and women in the United States (Finer & Zolna, 2014). The U.S. Department of Health and Human Services (DHHS) stated that in order to prevent unplanned pregnancies, the goal is to reduce the incidence of unintended pregnancy among the age groups 18 and 24 (Finer & Zolna, 2014). Based on the proportion of pregnancies that have occurred in the U.S., the incidence rates for unintended pregnancies were lower among women with a college degree (Finer & Zolna, 2014). These researchers also identified that women who had not complete high school

had a significantly higher rate of unintended pregnancy compared to women attending college (Finer & Zolna, 2014).

Thirty percent of teenage girls who drop out of school attributed it to pregnancy and parenthood (National Conference of State Legislatures, 2010). According to the NCSL (2010), educational achievement affects income for teen mothers over a lifetime and two-thirds of families that are started from an unintended pregnancy are considered poor and one in four will require welfare during the first three years of the child's life (NCSL, 2010). According to Finer and Zolna (2014), community college students who give birth while attending school are 65% less likely to complete their degree than women who are not pregnant attending school. For college women, 50% of women who have an unintended pregnancy will repeat their current grade level and are more likely to drop out of school (NCSL, 2010).

### **Linking Familism and Sexual Attitudes**

The relationship between the three constructs of familism work together in the presence of the belief in priority of family (Manago, Ward, & Aldana, 2015). Based on the mitigation of risk behaviors or increase in positive behaviors, researchers have studied outcomes that link familism and physical health (Kim, Knight, & Longmire, 2007; Sayegh & Knight, 2011). Several researchers have studied reducing the effects of risky and harmful behaviors (e.g., tobacco smoking, alcohol consumption, drug use and sexual engagement) that impact physical health (Germán, Gonzales, & Dumka, 2009; Guilamo-Ramos et al., 2009; Maliszewski & Brown, 2014; Manago, Ward, & Aldana, 2015). It should be noted that familism with sexual attitudes is minimal and using more

research to examine findings regarding this gap in the literature can provide more insight about the correlation between sexual attitudes and familism (Maliszewski & Brown, 2014; Manago et al., 2014; Manago, Ward, & Aldana, 2015).

Schwartz et al. (2011) examined cultural values, religious belief practices and four types of health risk behaviors (e.g., alcohol use, unsafe sexual behavior illicit drug use, and impaired driving), which are known factors among college students that cause illnesses, unintentional injuries, and deaths in the United States. They found that the factor scores generated by Multigroup Acculturation Scale (2011) measured the separation between heritage and culture.

In addition to measuring familistic values, Schwartz et al. (2011) used the Youth Risk Behavioral Surveillance Survey (YRBSS) to measure health risk behaviors. The scores on this measure were highly consistent ( $\alpha = .90$ ) and Schwartz identified that the construct of validity were moderately and correlated between diverse groups in the study ( $r = .56, p < .001$ ) at statistically significant levels compared with U.S cultural practices. The rationale for examining familistic values and sexual behavior was to determine if there were significant difference in health risk behaviors among race/ethnicity and gender (Schwartz et al., 2011). It was reported that men received higher rates in all behavior in which gender had significant differences among all participants in the study. The two variables for sexual behavior that were examined are sexually active (yes or no) and the number of pregnancies (women reported the number of times of being pregnant; men reported the number of times getting a female pregnant). The variables for sexual behavior were found to significantly positively correlate with college dropouts ( $r = .37, p$

< .01) and drug use ( $r = .65, p < .001$ ) among participants from the 30 college/universities across the United States (Schwartz et al., 2011).

According Fielder and Carey (2010) they defined “hookups” as individuals who accept or encourage casual sexual relations that can occur within one night (e.g., one night stands) or multiples nights that provide physical and emotional pleasure with no long-term commitment. Although most research that has been conducted about hookups has focused on American college students, but hookups are not limited to college campuses. Fielder and Carey (2010) investigated eight dimensions of “hookups” that either have had conflicting results or has not been well researched. According to the authors, 98% of all sexual behavior among the study participants was involved with kissing; 85% of the participants stated that attractiveness correlated with 69% of participants engaging into vaginal sex. The two variables used for this study was hookups (e.g., partners, motives, sexual behavior, alcohol use, and emotional consequences) romantic interactions (e.g., motives, alcohol use, and emotional consequences). Based on the results, Fielder and Carey (2010) concluded that specific sexual behavior among college students had reach 60% of the sample, which experiences vaginal, oral, and anal sex within the hookup variable. The correlation between sex hookups and alcohol were significantly high, which increased the risk for sexual victimization for each participant in the study (Fielder & Carey, 2010).

DiBello et al. (2015) suggested that familism was a protective factor among Hispanic maladaptive behaviors. Although the researchers hypothesized that familism would be associated with lower alcohol consumption between male and female,

maladaptive behaviors would also have lower rates suggesting that familism is a protective factor. DiBello et al. (2015) utilized three instruments (i.e., Attitudinal Familism Scale, Daily Drinking Questionnaire, and Rutgers Alcohol Problem Index) to measure one's attitudes toward family, to measure alcohol consumption on average, and to measure how often participants experienced alcohol related-problems. The three variables gender, ethnicity, and familism were linked to maladaptive behavior and were used to measure whether or not there was a significant difference with behavior (DiBello et al., 2015). The authors concluded that there was a positive association between gender and maladaptive behavior while ethnicity and familism also showed a positive association with Hispanics. They also indicated that the Hispanic individuals of this study showed higher levels of familism, which is due to more female Hispanic participants than male Hispanic participants (DiBello et al., 2015).

In addition to the examining familism and cultural values, previous researchers suggested that assimilation is related to sexual activity for diverse ethnic groups that are exposed to Americanize culture (Campos et al., 2014; Des Rosiers et al., 2013; Dir, Cyders, & Coskunpinar, 2013; Sollitto, Johnson, & Myers, 2013). For example, Des Rosiers et al. (2013) stated that individuals with low acculturation predicted minimal sexual activity and a delayed interaction with engaging into sexual intercourse. Additionally, Des Rosiers et al. (2013) found that if families from a familistic background became assimilated to American culture, these individuals were more susceptible to engage in sexual intercourse compared to families that had low assimilation. Similarly, Sollitto, Johnson, and Myers (2013) identified that students who

had higher levels of assimilation, classroom connectedness, and strong peered relationships with students had stronger behaviors for student engagement. Additionally, more-assimilated students reported having a higher frequency of sexual intercourse and condom use compared to those who have a lower assimilation (Des Rosiers et al., 2013).

Researchers have examined the relationship between assimilation and sexual behavior among college students. For example, Dir, Cyders, and Coskunpinar (2013) found that sexting and alcohol use are related and has the ability to predict sexual hookups between high levels of assimilation compared to low levels of assimilation. For students that come from a familistic background, low levels assimilation has less risk for sexual activity compared to those individuals impacted by acculturation (Schwartz et al., 2013). Latino youth who were born in the United States were found to be more susceptible to engage in early sexual activity if they were born and raised in English speaking homes (Schwartz et al., 2013). Although these findings have not been by other researchers, individuals that are raised in English speaking homes requires further exploration about individuals that speaking in their native language to compare whether or not these individuals engage into early sexual behavior.

The effects of assimilation on sexual intercourse among college students seem to have varying results based on the variables use to study sexual outcomes (DiBello et al., 2015). Researchers have argued that low assimilation may protect against sexual intercourse, but once sexual intercourse has begun, reduced condom use may occur between both participants (DiBello et al., 2015; Dir, Cyders, & Coskunpinar, 2013; Schwartz et al., 2013). Schwartz et al. (2013) stated that individuals who engage into



sexual intercourse are at greater risk for STD's and unplanned pregnancy when no form of contraception is utilized for both partners (i.e., condom use and birth control).

### **Gender/Ethnicity and Sexual Behavior of College Students**

One in three Americans in the U.S. identify themselves as a member of a minority ethnic group (Ahrold & Meston, 2010). The psychosocial aspects of sexuality have not been explored in-depth for diverse ethnic groups regarding sexual attitudes and behaviors that attend four-year colleges or universities. While there is reason to believe that gender roles and sexual behavior for college students are linked to cultural values, socioeconomic factors, and cultural heritage, researchers have been attempting to indicate significant differences in sexual behavior between the diverse groups of students in attendance at a four-year college (Ahrold & Meston, 2010).

The spectrum of liberality in attitudes toward how individuals may classify their sexuality (i.e., heterosexual, homosexual, bisexual, asexuality, polysexuality, pansexuality, and transexuality) differs between gender and ethnicity. Researchers have indicated that gender roles may be shaped by familistic values (e.g., cultural values) in which the role of gender may vary between sexual activity and customary beliefs of the family (Ahrold & Meston, 2015; Claxton & Van Dulmen, 2013). Ahrold and Meston, (2015) investigated whether there was a statistically significant difference between ethnic groups and gender with sexual attitudes. Their goal was to determine if the higher levels of mainstream acculturation and lower levels of heritage acculturation would predict sexual behavior among colleges (Ahrold & Meston, 2015). These authors found that there were more liberal views towards homosexuality in women of all ethnicities than in men

and men were more liberal about casual and extramarital sex than women. The major difference between attitudes and behaviors towards sexuality and behavior in college was more due to gender than other factors (Ahrold & Meston, 2015).

Else-Quest et al. (2012) identified the stereotype of women is more emotional than men, which is contemporary of North American culture. They argued that the magnitude of differences between genders that exists is based on the circumstances that the genders are faced with each day. While many college students are faced with decisions that have positive and negative outcomes, social experiences in college are situation-based and concluded that women express more emotional intensity, but mixed evidence shows there is a variation in emotional experience among gender that creates differences between male and female.

### **Summary**

There are several areas in the current literature that could use further examination based on this literature review. First, the concept familism as it relates to sociological/family support is used in several different ways in the literature. Researchers in several fields have referred to familism from an attitude/belief aspect and center familism around the Latino culture, whereas others include structural and behavioral elements from the concept familism. Although familism has three components (e.g., attitude, behavioral, and structural), the divergent beliefs about familism are viewed to be unique with the Latino cultural and limited in the discussion about familism being identified in other ethnic backgrounds. As researchers move forward to study this concept, investigations should be used to provide a more suitable definition that does not

limit familism to the Latino culture, but to include other ethnicities from the population.

The second area in the literature that requires growth for familism is other using different methods of measurement for this concept. Although researchers have tried to use various methods to identify each construct, these measurements have been poorly expounded in the development methods. Based on the literature, it is vital for researchers to use more comprehensive, reliable, and valid instruments to assess diverse populations regarding familism. Additionally, the newer quantitative measures of familism have been used in previous research to capture small characteristics, but if researchers do not clearly define how to assess diverse populations, this will limit how the research moves forward. By making these changes, researchers would have a more in-depth look at how the experiences of diverse cultures make decisions based on the familism concept.

The third area in the familism literature that needs further review is how acculturation impacts diverse ethnic groups during their first semester in college. If researchers use additional resources to assess acculturation differences between diverse members and genders of different ethnicities, further research will provide an in-depth look at acculturation and how college students face these changes once leaving from a familistic environment to a diverse college/university campus. Previous studies have shown that high familistic beliefs are not always true to be stress free because of the demand to meet higher performance measures and expectations within the familistic culture for the family. Considering that the concept familism protects against risky behaviors, the area that needs further investigation to understand if familism causes too much stress or pressure for family members to excel in academia and other fields of

accomplishment. While the majority of this research must focus on diverse populations, future research could expand on investigating whether gender in a college setting are impacted by acculturation along with familism and how they impact academic achievement, sexual behavior outcomes, and health risk in the college.

Since the participants in this study will be 18 and older, this study will use the Walden Participant Pool in order to examine cultural diversity as well as families and narrow the focus to the specifics about familism as it relates to sexual behavior in college students from other cultures. Since this correlational study will utilize a survey method, which is usually inexpensive and provide researchers with the ability to gather large amounts of data in a short period of time (Losada et al., 2010).

### Chapter 3: Research Method

Casual, consensual sexual encounters among college students have been identified as the hookup culture, which is prevalent on college campuses (Napper, Montes, Kenney, & LaBrie, 2015). Although unsafe sexual behavior impacts college students on campuses across the world (Bersamin, Paschall, Saltz, & Zamboanga, 2012; Brown-Rice & Furr, 2015; Napper et al., 2015) a number of factors including unsafe sexual behavior, unwanted pregnancies, transmission of STIs/STDs, and inadequate knowledge about campus risks could potentially impact the health of college students (LaBrie et al., 2014). Although traditional messages communicated from parents have primarily focused on the importance of waiting to have sex until marriage, Moilanen and Raffaelli (2010) stated that the messages shared with the rising generation regarding the risks associated with sexual engagement are centered around unwanted pregnancy and STDs. Although abstinence is still a message shared from parents to their children, familistic values are used to promote awareness, personal responsibility, and the importance of decision-making (Manago et al., 2015). Manago et al. (2014) identified a cultural difference between the degrees of family interdependence versus individual independence. Familism in a traditional culture focuses on practices and values, which are strong characteristics of family interconnectedness (Manago et al., 2014; Manago et al., 2015). Although familism places emphasis on positive family relationships, one struggle for college students is the separation from family after moving to a college/university (DiBello et al., 2015).

DiBello et al. (2015) identified that having a positive family relationship and enriched values that have been taught throughout a child's upbringing is often challenged

when leaving a stable environment to attend a college. Familism is not only important within the Hispanic community, but is also embraced by people of other ethnicities (Steidel & Contreras, 2003). Researchers have demonstrated that familism is used to defend against risky behaviors and that women tend to participate in risky behaviors less than men (Bersamin et al., 2012; DiBello et al., 2015). In this chapter, I discuss the research design and rationale, methodology, population, sampling procedures, procedures for recruitment, data collection, instrumentation and operationalization of constructs, data analysis plan, threats to validity, and ethical procedures.

### **Research Design and Rationale**

To examine the relationship between the independent and dependent variables of this study, I used a quantitative correlational design. The independent variable was familism level and the dependent variable was self-reported sexual behavior. Demographic variables were included as covariates, which included age, gender, marital status, place of residence, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception. I examined the views of familism for each college student to determine whether the cultural value of familism impacted how students make decisions regarding sexual activities.

A correlational study design is used to determine whether the variables selected for the study are related to one another (Creswell, 2008). Correlational research allows researchers to collect significantly more data than when conducting an experiment (Creswell, 2008). Although correlational research usually occurs outside of a lab, results are usually more applicable to individuals' lifestyles. Another benefit of correlational

research is that it opens up further research for scholars to examine the phenomenon or relationship of the variables in an in-depth approach. For researchers to determine the strength and direction of the relationship between variables, correlational research is used to obtain the findings of the study so scholars can take an in-depth look at causation. Although there are advantages of using a correlational study, correlational research is limited to only uncovering the relationship between variables and cannot provide a conclusive reason for why there is a relationship or establish causation between variables (Creswell, 2009).

Creswell (2009) argued that correlational research is unable to reveal which variables influence the others. The correlational design was used to study whether an increase or decrease in the independent variable familism predicted an increase or decrease in the dependent variable sexual behavior. Correlational studies can be conducted by using naturalistic observation, survey method, or archival research (Losada et al., 2010). If a researcher is using naturalistic observation, he or she needs to view the variable of interest in its natural environment without manipulation. In some cases, this collection of data could provide researchers with the opportunity to further the research for the selected variable. The downfall of using this method is that it could be time consuming and expensive to conduct this type of research. Selecting the naturalistic method would require the researcher to have sufficient funding to conduct this type of study.

Survey methods are usually inexpensive and provide researchers with the ability to gather large amounts of data in a short period of time (Losada et al., 2010). The survey

method is more flexible than naturalistic observation and archival research. For researchers who decide to employ this method, one constraint to consider is that participants can affect the outcome of the study (Huebner & Perry, 2015). Issues that generally arise with the survey method include participants trying to please the researcher, lying to make themselves look better, or having inaccurate memories about the questions that are asked through the survey (Huebner & Perry, 2015).

If the researcher decides to use archival research, large amounts of data can be collected, which reduces the struggle of collecting data for the study (Campbell & Stanley, 1963). Although this provides the researcher with enormous data, the research has no control over how the data was collected, and previous research may be unreliable. The time constraints that could have impacted how data were collected included when students are in attendance at the selected college (see Campbell & Stanley, 1963).

Sayegh and Knight (2011) stated that correlational research allows researchers to collect more data and conduct more in-depth studies to examine the relationships between variables. These authors conducted a study using a correlational design and found that this allows researchers to study phenomena or a relationship. Although familism has been studied in-depth in the Hispanic population, Schwartz (2007) indicated that future research should address how familism impacts other cultures. There was limited research about how familistic views impact decisions college students make regarding sexual behavior (Wentland & Reissing, 2011), and the current study was conducted to investigate the relationship between familism and sexual behavior for students on a college campus.



## **Methodology**

### **Population**

The participants for this study were drawn from college students age 18 and older attending Walden University. The enrollment of Walden University is more than 52,600 students from all 50 U.S. states and more than 155 countries. Students who are enrolled at Walden University are pursuing bachelor's, master's, and doctoral degrees in various disciplines (i.e., health sciences, criminal justice, nursing, public health, counseling, and other disciplines). The purpose for choosing this university was the diverse population of students from different cultural backgrounds and geographical locations. To gain permission from Walden University to use the Walden Participant Pool, I had the institutional review board (IRB) reviewed the research design and process for this study.

### **Sampling Strategy**

The sampling strategy that was used for this study is a convenience sampling strategy. A convenience sampling strategy is a method of drawing representative data by selecting participants due to the ease of volunteering, availability, or easy access to participate (Leiner, 2014). The advantage of using this type of sampling is the availability and speediness with how data can be gathered. The disadvantage of using this type of sampling is that the sample may pose potential problems for not representing the population as a whole and may cause volunteers to be biased about their responses. The eligible criteria that was used for this convenience sample is that participants must be over the age of 18 years and a student at Walden University. If these participants are a

student with Walden University, then they must setup an account with the Walden participant pool in order to complete this survey.

### **Power Analysis**

In order to determine the appropriate sample size for this study a power analysis was conducted. An alpha level of .05 and power of .80 was used to calculate the sample size. Since I utilized more than one instrument for this study, the goodness-of-fit-tests along with the A priori was used to compute the required sample size needed for the sample population. According to Danube, Vesico, and Davis (2014), the G-Power analysis can be used to compute the effect size, alpha, and power to determine the sample size needed for the study.

### **Sample Size**

I utilized G-Power to calculate the sample size for my study as described below using an A Priori calculation for a linear multiple regression determine how many participants would be needed for this statistical test. After completing the power analysis calculations, it was determined that 118 participants are needed for the sample population in order to conduct the multiple regressions. Based on the computation of the goodness-of-fit-test, the power (0.80), alpha (0.05), medium effect size, which is (0.15) which is usually the medium effect size is the norm (Danube, Vesico, & Davis, 2014), and number of predictors (10) were calculated using G\*Power to determine the actual sample size required for this study, which is 118 participants. Since the sample size is not significantly larger than 120, which would be required for a multiple regression, it would be appropriate to use the sample size of 118 so that the study would have enough data to

determine whether to accept or reject the null hypothesis. Another step in this process would be to gather gender distribution, which would require having half male and half female participants that take the survey.

### **Procedures for Recruitment, Participation, and Data Collection**

**Recruitment.** In order to participate in this study, the Walden Participant Pool is a virtual bulletin board that provides researchers with the opportunity to connect researchers with participants. By posting this research study on the Participant Pool, active members in the Walden community have the opportunity to participate in this research study. While this is a great resource for researchers, participants who are members of the Walden Participant Pool are made up of diverse students and faculty members that could potentially participate in this study.

**Participation.** In order to participate in this study, participants are required to be a Walden University student. Participants who also meet the criteria of being over 18 will be provided an explanation of the study on the Walden Participant Pool website. Since this study will not compensate participants, each participant will be informed about his or her participation and that this study is completely voluntary and that all information collected will be stored on a secure server and remain confidential (participant names will not be collected). Regarding informed consent, it has been determined that the easiest method for providing informed consent to students in this process would be to include this as the first page of the survey and participating in the survey would indicate informed consent. Participants would be informed through this process that their participation is

voluntary, will not impact their relationship with the university, and that they can stop participating at any time.

**Data collection.** The data collection method for this correlational survey used informed consent, a demographic survey, as well as closed-ended questions, and a self-administered online survey. The questionnaire was distributed through Survey Monkey, where all information will be submitted and stored upon completion by each participant of the survey. Albaum and Smith (2006) defined that Survey Monkey is a web-based software that allows user the ability to create surveys or generate reports without having prior knowledge or experience with programming. Survey Monkey enables the user to create a survey in an online environment, which can provide feedback with a downloadable report to examine findings from the survey (Albaum & Smith, 2006).

Typically, this web-based software program is used to aid researchers, report results, or to create polls (Albaum & Smith, 2006). Albaum & Smith (2006) state that Survey Monkey is a secure web based program that is encrypted with user-id and password protection, which will only allow individuals that are given access to complete the survey online. This web-based program can be used on PC or MAC computers, which allows flexibility with participants who may be operating these types of devices.

The online survey was chosen as a way to capture confidentiality so information will not have to be stored in a file cabinet. Because this research study stored all information on a secure site, this eliminated the risk for any information to be comprised. According to Yu et al. (2015) a study was conducted by these researchers by recruiting participants to take an online survey about the risk of men having sex with men (MSM)

and the risk associated with contracting HIV. In order to keep results confidential, the researchers decided to conduct an online survey to see if they could receive more input from MSM and receive positive feedback from administering this survey online. The purpose of this study was to examine the relationship between familism and sexual behavior among college students. In this process, students that are a part of the Walden Participant community tool will be sent the survey directly to the school email account along with a detailed description of the purpose of the survey. Participants who decide to complete and submit the survey online will provide informed consent by submitting the online survey through Survey Monkey. Once all participants have completed the survey, this information will be stored on a secure website that keeps all information stored.

### **Instrumentation and Operationalization of Constructs**

#### **Instruments**

Instruments were chosen to quantitatively measure the independent variable familism and the dependent variable sexual attitudes to determine the relationship between both variables (Lugo Steidel & Contreras, 2003; Schwartz et al., 2007). Although previous researchers have focused on the Latino population, the same instruments will be used to measure and assess participants in this study. According to Creswell (2009), the researcher must provide information about the research that is being utilized for the study. By using a published tool, the researcher must receive approval from the person(s) that created the instrument before moving forward to conduct the study.

**Demographic questionnaire.** A sociodemographic questionnaire was included in this study to obtain background information for each participant in the study. The items that have been included in this questionnaire are age, grade level classification, gender, race/ethnicity, religious affiliation, and country of origin. The demographic questionnaire for this study was used from a previous study, which will use these listed variables (Table 1) to decipher between each participant of the study to examine the relationship between familism and sexual behavior. The variables for this study were coded as the following (i.e., age-age, Education Level-EDU, gender-GEN, race/ethnicity-ETHN, religious affiliation-REL, number of sex partners- SEX Part, STI history- STI Hist, protective contraception- PC).

**Measure of Attitudinal Familism Scale.** The *Attitudinal Familism Scale* (Lugo Steidel & Contreras, 2003) will be used to assess familism in this study (see Appendix C for permission letter). This scale consists of 18-items assessing familial support, familial interconnectedness, familial honor, and subjugation of self to family (Lugo Steidel & Contreras, 2003). The instrument uses 10-point Likert scale that ranges from one (strongly disagree) to 10 (strongly agree) to measure each of the 18-items in the Attitudinal Familism Scale.

According to Lugo, Steidel, and Contreras (2003) this instrument was developed and validated using Hispanic adults in Cleveland, Ohio. Since the validation of this instrument was originally found reliable and valid when used with Hispanics, the Cronbach's alpha was used for internal consistency, confirmatory factor analysis for construct validation, and internal consistency reliability assessment for stability. Since the

population differs from the original population, a retest for the selected population for this study was conducted to determine reliability and validity compared to the original overall score, which ranges from .70 to .80. By using this survey, one will determine if the same measures within the structure of familism is consistent with other acculturation levels, ages, and ethnicities. Regarding reliability, Lugo, Steidel, and Contreras (2003) identified Cronbach's alpha for the factors were .80 for the overall score. According to Lugo, Steidel, and Contreras (2003) Familial Support (.72), Familial Interconnectedness (.69), Familial Honor (.68), and Subjugation of Self for Family (.56) were subscales that were inter-correlated by computing the overall mean for the whole scale. The results determined that a higher score suggested a higher endorsement of familism. In order to test validity of the scale, a correlation was conducted between all familism scores, which would determine whether that is a positive or negative correlation between linear acculturation scores and overall familism (Lugo Steidel & Contreras, 2003). The results of the test for validity found that there was a significant negative correlation between linear acculturation score and overall familism (Lugo Steidel & Contreras, 2003).

**Measure of the Brief Sexual Attitudes Scale.** *The Brief Sexual Attitudes Scale* (Hendrick, Hendrick, & Reich, 2006) will be used to assess attitudes about sex in this study. Since this instrument is listed in the Measurement Instrument Database for the Social Sciences (MIDDS) permission was not necessary as the Institute for Business (administrator) grants privilege for anyone to use instruments published on this site. This scale consists of 23-items rated on a five-point likert scale that ranges from strongly agree to strongly disagree. Currently, the BSAS scale breaks the score into four subscales (i.e.,

Permissiveness, Birth Control, Communion, and Instrumentality), which Cronbach's alpha is listed below in each of the subgroups, which range from 1.0 to 5.0. (Lower score indicates a greater amount towards that attitude) The permissiveness subscale measures an individual's attitude that is open to relationships regarding sex (Hendrick, Hendrick, & Reich, 2006). The Birth Control subscale measures an individual's attitude to be responsible for providing contraception to protect against pregnancy (Hendrick, Hendrick, & Reich, 2006). The Communion subscale measures an individual's attitude toward the importance of melting together with their sex partner (Hendrick, Hendrick, & Reich, 2006). The Instrumentality subscale measures an individual's attitude toward enjoying the physical sex (Hendrick, Hendrick, & Reich, 2006).

According to Hendrick, Hendrick, and Reich (2006), this instrument was developed and validated to assess multi-dimensional attitudes toward sex. These authors conducted reliability and validity analyses using a population of 79 undergraduate students from a human sexuality class from a large southwestern university. The Cronbach's alpha for the overall score is .80 and the subscales were Permissiveness =.95; Birth Control =.88; Communion =.73; and Instrumentality =.77. In order to determine validity and reliability, internal consistency reliability will be calculated with Cronbach's alpha with the sample to determine if they match, are close or are better than the original subscale scores. Since this scale had to be revalidated from its original 43-item instrument, this 23-item instrument was validated and results indicated better psychometric properties than the longer Sexual Attitudes Scale (Hendrick, Hendrick, & Reich, 2006). Based on the subscale intercorrelations and correlations for BSAS,



Hendrick, Hendrick, and Reich (2006) found that the lack of racial, ethnic, and socioeconomic diversity will be needed for further research with this instrument. For the subscale item birth control, the alpha for this subscale was excellent, but the correlation of .57 reflects inconsistencies among college students use of birth control and their attitudes about it.

### **Operationalization**

The independent variables will be coded as below (see table 1):

Table 1

*Demographic Variables*

Variable	Coding	Value
Age	Age	0=18-up
Education Level	EDU	0=Highschool/GED 1=Undergraduate 2=Masters 3=Doctoral/PhD
Gender	GEN	0= Male 1=Female
Ethnicity	ETHN	0= White 1=Black or African American 2=Hispanic or Latino 3= Native Hawaiian or Other Pacific Islander 4= American Indian or Alaskan Native 5= Asian 6=Two or more races 7=Unknown
Religious Affiliation	REL	0=Baptist 1=Catholic 2=Methodist 3=Protestant 4=Atheist 5=Jewish 6=Muslim 7=Buddhist 8=Other
Number of Sex Partners	SEX Part	0= Number of Sexual Partners
STI History	STI H	0=No 1=Yes
Protective Contraception	PC	0=No 1=Yes
Familism (IV)	FAM	0= Familial Support 1=Familial Interconnectedness 2= Familial Honor 3= Subjugation of Self for Family

Attitudes about Sex (DV)	AS	Permissiveness 1.0 – 5.0 Birth Control 1.0 – 5.0 Communion 1.0 – 5.0 Instrumentality 1.0 – 5.0
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Notes

### **Data Analysis Plan**

Once the data-collecting period concluded, the online survey provider offered the data in the Statistical Package for the Social Sciences (SPSS, 22.0) software program format to facilitate analysis. According to Frankfort-Nachmias and Nachmias (2008) it is vital for researchers to use data cleaning, which entails the proofreading of data with the intent to catch and correct errors. Data editing and cleaning is vital process in the data analysis process so that if there is any missing data that this will not interfere with the analysis (Frankfort-Nachmias & Nachmias, 2008). Patton (2002) stated that measurement errors can impact validity, which a concern with assurance that the researcher is measuring the correct variables. In order to assure validity, the SPSS document that will be collected from the Survey Monkey will be checked and edited for missing information prior to conducting the analysis. If participants of the study have unanswered responses to the survey, these questions will be coded as incorrect.

The data analysis for this study includes descriptive statistics such as means, standard deviation and frequency. The alpha will be set as a  $p=.05$  provided that assumptions of normality are met. The purpose of this study is to determine whether or not there is a correlation between attitudes about sex and familism among college students engaging into sexual intercourse. By using descriptive statistics to analyze each participants demographic information in order to find the mean, mode, median,

frequencies and percentages who responded to the survey. The t-tests for this study was used to determine the p-value that indicates how likely one can either accept or reject the null hypothesis (Field, 2013). The Pearson correlation coefficient was used for this study to determine the strength and direction of the linear relationship between the variables sexual attitudes and familism. According to Field (2013) the measures of the correlation coefficient is a number between -1 and +1 that represents the strength of the correlation. If the correlation coefficient of zero is discovered, this measure signifies that there is no linear relationship between both variables (Field, 2013). The strength and direction of the relationship that is closer to -1 and +1 signifies that there is a closer relationship between both variables (Field, 2013). The last statistical test that will be utilized for this study is a linear regression. A linear regression was used for this study to determine the extent of the linear relationship between the dependent and independent variable.

The criteria for inclusion of the independent variables for this study focused on their significance in order to control for confounding variables. According to Field (2013) a specific usage of a covariate is a secondary variable that could affect the relationship between the dependent and independent variable. Since the dependent variable for this study is attitudes about sex and the independent variable is familism, the inclusion of the covariates could improve or affect the relationships of the variables, which could ultimately impact the null hypothesis.

## **Research Questions and Hypotheses**

### **Research Question 1**

What is the relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (permissiveness attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students?

Null Hypothesis 1 ( $H_{10}$ ): There is no statistically significant relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (permissiveness attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students.

Alternative Hypothesis 1 ( $H_{1A}$ ): There is a statistically significant relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (permissiveness attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students.

### **Research Question 2**

What is the relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level,

socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (birth control attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students?

Null Hypothesis 2 ( $H_{2_0}$ ): There is no statistically significant relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (birth control attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students.

Alternative Hypothesis 2 ( $H_{2_A}$ ): There is a statistically significant relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (birth control attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students.

### **Research Question 3**

What is the relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (sexual communion attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students?

Null Hypothesis 3 (H3<sub>0</sub>): There is no statistically significant relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (sexual communion attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students.

Alternative Hypothesis 3 (H3<sub>A</sub>): There is a statistically significant relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (sexual communion attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students.

#### **Research Question 4**

What is the relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (instrumentality attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students?

Null Hypothesis 4 (H4<sub>0</sub>): There is no statistically significant relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex

(instrumentality attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students.

Alternative Hypothesis 4 (H4<sub>A</sub>): There is a statistically significant relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (instrumentality attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students.

### **Threats to Validity**

Since correlational research does not allow researchers to manipulate the independent and dependent variables, one of the biggest threats to validity is how participants in the study can affect the results (Creswell, 2009). In some cases, participants have the potential to lie to make themselves look better or have mistaken memories which impact how participants answer questions throughout the survey (Campbell & Stanley, 1963). Another threat to validity that could possibly impact the study is how participants interpret the questions of the survey. Although there are college students that will be completing these surveys, some students may not be fluent in English, which may cause problems with interpretation. One threat that could possibly impact the results is the Attitudinal Familism instrument that was designed for the Latino population (Lugo Steidel & Contreras, 2003). Although the original study was designed for this population, the study will be comparing to see if the results are similar based on other diverse ethnicities.



According to Creswell (2009) researcher bias also known as experimenter bias is a process in which the person conducting the research has the potential to influence results in order to portray a certain outcome. Although in certain cases, bias may occur from experimental error and failure to identify all possible variables that could impact the study (Creswell, 2009). Creswell (2009) also identifies that researcher bias can occur when the researcher may select subjects that are more likely to provide specific results that are desired by the researcher as opposed to the normal processes that govern science. One of the major weaknesses for using a convenience sample that threatens validity of the research is when using this sample it is not a true representation of the entire population (Leiner, 2014). According to Leiner (2014) another significant disadvantage about using a convenience sample is the limitation in generalization and inference making about the entire population. Although the convenience sample for this study cannot speak for the entire population, the results have the potential to lower external validity. Therefore, making sure that the selection bias will be noted can help to ensure that the analysis and discussion of results can be validated. If researchers make inaccurate generalizations, one can create external validity threats within the study (Creswell, 2009).

### **Ethical Procedures**

For this study, the data collection protocols and procedures were submitted to Walden University for review and approval from the IRB **11-04-16-0305346**. Once full approval was given by the IRB, then the study was able to move forward to gather data. Since the study population were college students 18 and up, there were ethical consideration made to ensure protection of personal data resulted in no names being

collected in the survey with minor demographic information collected. Although I am not looking specifically for participants who are in protected population, all participants from the Walden participant pool were given the true purpose of the study and allowed the right to or not to participate in this study. It is also imperative that the conflict of interest is addressed to assure that there is zero tolerance that the participants of this survey were influenced by the researcher to make decisions based on the survey questions for the study. Although it is important to address ethical concerns, the goal is to avoid creating ethical problems that influence myriad decisions for each participant and inform participants that the participation in this study is completely voluntary. Because this study involves questions about sexual behavior, students were given assured confidentiality if they so choose to participate in the study.

For clarification purposes, each participant in this study will be informed on the step-by-step process of maintaining confidentiality and then given access to the questionnaires on Survey Monkey. The data that will be collected from the survey will be stored in a secure database of Survey Monkey, which will be user ID and password protected so that no confidential data will be compromised. The participants will be asked to confirm their understanding of the information that has been provided to them prior to completing the questionnaires to ensure competency. In addition, the informed consent for this study was carefully explained so that each participant wont feel coerced into making decisions, but to answer each question based on their personal encounters and feelings. Once data was collected from the participants of this study, I had complete access to all data that will be stored in Survey Monkey secured database. Upon analyzing

all data, the data was destroyed once the study had been completed and defended by the researcher.

### **Summary**

For this chapter, a description of the methodology for this quantitative correlational study was given for examination of the selected sample population. For each component of this study, the examination of the relationship between familism and sexual behavior of college students was to determine whether this is a relationship and also see if these two variables have any impact on one another. For chapter four, this chapter focused on the results of the analysis conducted for each statistical test for this study. Once all data was collected via Survey Monkey, this data was analyzed and reported through descriptive statistics to determine the results of the study.

## Chapter 4: Results

The objective of this quantitative research study was to examine the relationship between familism and sexual attitudes among college students. The theoretical construct of familism was used to study the relationship between familism, demographics, and attitudes about sex (as measured by the Brief Sexual Attitudes Survey (Hendrick et al., 2006). The Familism Scale (Steidel & Contreras, 2003) was used to measure the level of an individual's familism, and the Brief Sexual Attitudes scale was used to determine individual attitudes toward sex according to the four subscales: Permissiveness, Birth Control, Communion, and Instrumentality.

The sample consisted of college students age 18 and older recruited from the Walden Participant Pool. Statistical analyses of the data included descriptive statistics (means, standard deviation, and frequencies), Pearson's correlational test, and multiple linear regression models to determine whether there were relationships between the independent variable (familism) dependent variable (attitudes about sex) and demographics (age, education level, gender, religious affiliation, ethnicity, U.S. citizenship status, sexually transmitted infections history, and protective contraception). This study included four research questions and hypotheses.

### **Data Collection**

The target population for this study was Walden University students age 18 and older. The participants' ages ranged from 18 to 68. Participants were enrolled either as undergraduate or graduate students. I used G-Power to calculate the sample size, including an a priori calculation for a linear multiple regression to determine how many

participants would be needed for this study. After completing the power analysis calculations, I determined that 118 participants were needed to conduct the multiple regressions. Based on the computation of the goodness-of-fit-test, power (0.80), alpha (0.05), medium effect size (0.15), and number of predictors (10), I determined the sample size required for this study was 118. Because the sample size was not significantly larger than 120, which would be required for a multiple regression, it was appropriate to use the sample size of 118 to determine whether to accept or reject the null hypotheses.

Participants who agreed to take part in this study completed an online consent form through the electronic survey tool as the first item in the survey. Three surveys were administered through SurveyMonkey to each participant (Familism Scale, Brief Sexual Attitudes Scale, and demographic form). The responses from the survey were collected over five months between December 2016 and April 2017.

### **Results**

Statistical analyses were conducted using the Statistical Package for Social Sciences (SPSS) Version 21.0. The data were downloaded and screened. Of the 121 participants who entered the survey, three opted not to complete the survey. These individuals were removed from the final data analyses. The final sample consisted of 118 respondents. Using the explore feature of SPSS, I inspected the data for outliers and normality of distribution. I found no extreme outliers, and the data were normally distributed on most variables (see Osborne, 2011). The data were then examined for missing data. I determined that the missing data were not enough to be detrimental to analyses, so no processes were completed to replace missing data (see Osborne, 2011).

The independent variables were recoded and/or dummy variables were created to conduct the specified analyses such as converting categorical or linear variable values into binary values. A total of 118 cases were used in the analyses.

### **Demographics of Sample**

The mean age of the respondents was 30.92 years old ( $SD = 11.213$ ). The respondents ( $N = 118$ ) were primarily female (58.7%), Baptist (43.1%), and graduate students (62.4%). Most were born in the United States (90.8%), and 34.9% identified as Black. Of these participants, 71.3% indicated they had never contracted an STD, and 25.7% reported they never used condoms. Table 2 contains a detailed breakdown of the demographics of those who completed the survey.

Table 2

*Demographic Characteristics (N = 118)*

Independent variable		Frequency	Percentage
Age (M=30.92)	18-19	24	22.0
	20-29	31	25.17
	30-39	31	25.17
	40-49	16	15.6
	50-59	5	4.5
	60+	2	1.8
Gender	Male	51	41.3
	Female	70	58.7
Religious affiliation	Baptist	47	43.1
	Catholic	14	12.8
	Protestant	4	3.7
	Atheist	5	4.6
	Jewish	3	2.8
	Muslim	3	2.8
	Buddhist	4	3.7
	Other	29	26.6
Education level	Undergraduate	47	37.6
	Graduate	74	62.4
Ethnicity	White	29	24.8
	Black	40	34.9
	Hispanic	6	5.5
	American Indian	9	8.3
	Asian	5	4.6
	Two or more / Other	26	22.0
Born in US	No	10	9.2
	Yes	111	90.8
STI history	No	87	71.3
	Yes	34	28.7
Protective contraception	Never	32	25.7
	Yes, some of the time	52	44.0
	Yes, Always	35	30.3

### **Reliability of Familism and BSAS Instruments**

The two survey instruments (Familism Scale and Brief Sexual Attitude Scale) were each tested for reliability. The reliability was tested through the internal consistency of the survey results among the sample of participants to ensure the instruments performed correctly during the study (see Steidel & Contreras, 2003). The Cronbach's alpha reliability measure was used to determine the internal consistency of the scores of the study variables of familism and brief sexual attitudes as measured by different dimensions in the respective survey questionnaires.

As shown in Table 3, I observed that all of the Cronbach's alpha scores were greater than 0.7, implying that the Familism ( $\alpha = 0.83$ ) and BSAS ( $\alpha = 0.85$ ) instruments all had acceptable reliability and were internally consistent in measuring the variables of familism and attitudes about sex (see Steidel & Contreras, 2003). This indicated that the responses of the 118 participants in each of the survey questions were reliable and internally consistent. According to Steidel and Contreras (2003), the reliability analysis was conducted for a previous study regarding the familism scale. Results of the study indicated the Cronbach's alphas for the factors were .83 for the overall scale, .72 for Familial Support, .69 for Familial Interconnectedness, .68 for Familial Honor, and .56 for Subjugation of Self for Family. All subscales were intercorrelated.



Table 3

*Cronbach's Alpha Reliability Statistics of Familism and BSAS*

	Cronbach's Alpha	N of Items
Familism	0.83	18
BSAS	0.85	23
Familism (Hendrick, Hendrick, Reic	0.83	18
BSAS (Steidel & Contreras)	0.85	23

The reliability analysis from this study is consistent with the results of other researchers. Stediel and Contreras (2003) stated that Cronbach's Alpha overall score would not be higher than .83 because Familial Support and Subjugation of self did not correlate at statistically significantly levels with linear acculturation scores. Hendrick, Hendrick, and Reich (2006) found the overall alpha for the Brief Sexual Attitudes Scale to be .85 and the subscales were as follows: Permissiveness = .95; Birth Control = .87; Communion = .79; Instrumentality = .80. Therefore it can be concluded that the instruments held to the same reliability as in previous studies (Braun-Courville & Rojas, 2009; Hendrick, Hendrick, & Reich, 2006; Stediel & Contreras, 2003; Villarreal, Blozis, & Widaman, 2005).

### **Frequencies of Responses on Instruments**

For the *Familism* and *Brief Sexual Attitudes* scales, respondents were asked to indicate their level of agreement with the survey items. The Familism scale used a 10-point Likert-scale that ranged from Strongly Agree (10) to Strongly Disagree (1). The

BSAS scale used a 5-point Likert Scale, ranging from Strongly Disagree (5) to Strongly Agree (1). Frequency distributions were conducted on all survey items and grouped according to familism and BSAS subscale for the four categories (i.e., permissiveness, birth control, communion, and instrumentality).

The mean frequency for each survey item regarding the Familism survey is reported in Table 4. As Table 4 illustrates, most student's somewhat agree with most of the survey items. However, student's disagree they should help out around the house without expecting an allowance ( $\bar{x} = 3.39$ ), if their under the age of 18 they should give almost all their earning to their parents ( $\bar{x} = 3.29$ ), they should live with their parents until their married ( $\bar{x} = 3.34$ ), and they obey there parents even when they believe they are wrong ( $\bar{x} = 3.58$ ).

Table 4

*Mean Frequencies of Familism Survey*

Survey Item	Mean
Children should always help their parents with the support of younger brothers and sisters, for example, help them with homework, help the parents take care of the children, etc. (n = 118)	4.82
The family should control the behavior of children under the age of 18. (n = 118)	4.97
A person should cherish the time they spend with his or her relatives. (n = 118)	4.19
A person should live near his or her parents and spend time with them on a regular basis. (n = 118)	4.10
A person should always support members of the extended family, for example, aunts, uncles, and in-laws, if they are in need, even if it is a big sacrifice. (n = 118)	4.02
A person should rely on his or her family if the need arises. (n = 118)	3.89
A person should feel ashamed if something he or she does dishonors the family name. (n = 118)	4.13
Children should help out around the house without expecting an allowance. (n = 118)	3.39
Parents and grandparents should be treated with great respect regardless of their differences in views. (n = 118)	4.59
A person should often do activities with his or her immediate and extended families, for example, eat meals, play games, or go somewhere together. (n = 118)	4.25
Aging parents should live with their relatives. (n = 118)	4.13
A person should always be expected to defend his/her family's honor no matter what the cost. (n = 118)	4.50
Children below 18 should give almost all their earnings to their parents. (n = 118)	3.29
Children should live with their parents until they get married. (n = 118)	3.34
Children should obey their parents without question even if they believe that they are wrong. (n = 118)	3.58
A person should help his or her elderly parents in times of need, for example, help financially or share a house. (n = 118)	4.43
A person should be a good person for the sake of his/her family. (n = 118)	3.89

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*Note.* The Likert scale used for survey items included Strongly Disagree (1) – Strongly Agree (10)

The mean frequency for each survey item regarding the BSAS survey is reported in Table 5. As Table 5 illustrates, most students neither agree nor disagree with most of the survey items. However, participants of the study did agree that birth control is a part of responsible sexuality ( $\bar{x} = 2.19$ ), a woman should share responsibility for birth control ( $\bar{x} = 1.98$ ), a man should share responsibility for birth control ( $\bar{x} = 2.42$ ), a sexual encounter between two people deeply in love is the ultimate human interaction ( $\bar{x} = 2.57$ ), and sex is best when you let yourself go and focus on your own pleasure ( $\bar{x} = 2.63$ ).

Table 5

*Mean Frequencies of BSAS*

Survey Item	Mean
I do not need to be committed to a person to have sex with him/her. (n = 118)	3.09
Casual sex is acceptable. (n = 118)	3.22
I would like to have sex with many partners. (n = 118)	3.50
One-night stands are sometimes very enjoyable. (n = 118)	3.25
It is okay to have ongoing sexual relationships with more than one person at a time. (n = 118)	3.52
Sex as a simple exchange of favors is okay if both people agree to it. (n = 118)	3.19
The best sex is with no strings attached. (n = 118)	3.25
Life would have fewer problems if people could have sex more freely. (n = 118)	3.20
It is possible to enjoy sex with a person and not like that person very much. (n = 118)	3.19
It is okay for sex to be just good physical release. (n = 118)	2.81
Birth control is part of responsible sexuality. (n = 118)	2.19
A woman should share responsibility for birth control. (n = 118)	1.98
A man should share responsibility for birth control. (n = 118)	2.42
Sex is the closest form of communication between two people. (n = 118)	2.78
A sexual encounter between two people deeply in love is the ultimate human interaction.	2.57
At its best, sex seems to be the merging of two souls. (n = 118)	2.70
Sex is a very important part of life. (n = 118)	2.82
Sex is usually an intensive, almost overwhelming experience. (n = 118)	2.94
Sex is best when you let yourself go and focus on your own pleasure. (n = 118)	2.63
Sex is primarily the taking of pleasure from another person. (n = 118)	2.82
The main purpose of sex is to enjoy oneself. (n = 118)	2.84
Sex is primarily physical. (n = 118)	2.83
Sex is primarily a bodily function, like eating. (n = 118)	2.76

*Note.* The Likert scale used for survey items included Strongly Agree (1), Agree (2), Neither Agree nor Disagree (3), Disagree (4), and Strongly Disagree (5).

**Differences Between Groups**

Independent sample t-tests were conducted to determine if there were statistically significant differences between responses of individuals who fell into different demographic variables (male vs. female, white vs. non-white, and STD vs. No STD). Tables 6 through 8 contain the results of those t-tests for the following groups: Male vs. Female, White vs. Non-white, and STD vs. No-STDs and list results for instances where there were statistically significant differences between those groups.

**Male vs. female.** There were statistically significant differences between men ( $M = 28.09$ ,  $SD = 6.090$ ) and women ( $M = 24.03$ ,  $SD = 8.660$ ) on the permissiveness

measures,  $t(106.999) = 2.374, p < .05$ . The magnitude of the difference was small ( $\eta^2 = .05$ ). There were statistically significant differences between men ( $M = 16.18, SD = 3.576$ ) and women ( $M = 14.53, SD = 3.754$ ) on the instrumentality measures,  $t(107) = 2.299, p < .05$ . The magnitude of the difference was small ( $\eta^2 = .05$ ). There were statistically significant differences between men ( $M = 70.24, SD = 9.063$ ) and women ( $M = 65.73, SD = 11.483$ ) on the total Brief Sexual Attitudes Survey scores,  $t(107) = 2.196, p < .05$ . The magnitude of the difference was small ( $\eta^2 = .04$ ). Table 6 contains the results of the t-tests for males versus females.

Table 6

*Results of t-test and Descriptive Statistics for Male vs. Female*

	Levene's Test for Equality of Variance				t-test for Equality of Means				
	F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference	
								Lower	Upper
Equal Variances Assumed	3.600	.060	2.196	107	.030	4.510	2.053	.439	8.581
Equal Variances Not Assumed			2.288	105.505	.024	4.510	1.971	.602	8.418

### **White vs. Non-White**

After completing the t-Test for whites versus non-whites, the results concluded that there were no statistically significant differences between whites and non-white participants on any measures for the Familism and BSAS scale (see table 7).

Table 7

*Results of t-test and Descriptive Statistics for White vs. Non-White*

	Levene's Test for Equality of Variance				t-test for Equality of Means				
	F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference	
								Lower	Upper
Equal Variances Assumed	3.017	.085	1.010	107	.315	2.407	2.383	-2.316	7.131
Equal Variances Not Assumed			1.162	58.378	.250	2.407	2.072	-1.740	6.555

**STD vs. No STD**

There were statistically significant differences between those with STDs ( $M = 24.96$ ,  $SD = 7.983$ ) and those without STDs ( $M = 29.45$ ,  $SD = 6.228$ ) on the permissiveness measures,  $t(106) = -2.805$ ,  $p < .01$ . The magnitude of the difference was medium ( $\eta^2 = .06$ ). There were statistically significant differences between those with STDs ( $M = 66.30$ ,  $SD = 11.072$ ) and those without STDs ( $M = 71.16$ ,  $SD = 9.140$ ) on the total Brief Sexual Attitudes Survey scores,  $t(106) = -2.165$ ,  $p < .05$ . The magnitude of the difference was small ( $\eta^2 = .04$ ) (see table 8).

Table 8

*Results of t-test and Descriptive Statistics for STD vs. No STD*

	Levene's Test for Equality of Variance		t-test for Equality of Means						
	F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference	
								Lower	Upper
Equal Variances Assumed	1.015	.316	-2.165	106	.033	-4.863	2.246	-9.316	-.409
Equal Variances Not Assumed			-2.349	66.723	.022	-4.863	2.070	-8.996	-.730

**Research Question 1**

What is the relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (permissiveness attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students?

H1<sub>0</sub>. There is no statistically significant relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (permissiveness attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students.

H1<sub>A</sub>. There is a statistically significant relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity,

marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (permissiveness attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students.

**Pearson correlation.** In order to answer Research Question 1 and determine if the null hypothesis should be rejected or retained, a Pearson Correlation analysis was first conducted to examine the relation of the independent variable Familism and the demographic variables (age, gender, marital status, place of residence, socioeconomic status, religion, number of sex partners, STI history, and use of contraception). The results indicated no statistically significant correlations between the total Familism scale and the demographic variables. There was a statistically significant correlation between total Familism and Permissiveness,  $r = -.265$ ,  $n = 118$ ,  $p < .01$ . This is a small correlation suggesting a weaker relationship between the two variables. The coefficient of determination indicated that only 7% of the variance in the scores is explained by the relationship between these two variables. Essentially, the higher the score on Familism the slightly less likely one is to express permissive attitudes toward sex.

**Multiple regression.** In order to further examine permissiveness (i.e., attitudes about sex) a multiple linear regression analysis was performed to investigate whether the independent variables were a statistically significant predictor of permissiveness (i.e., attitudes about sex). This analysis required the use of a hierarchical multiple regression model. In the hierarchical multiple regression mode, the independent variables of Familial Interconnectedness, age, religious affiliation, and STD status were entered into



the regression model to account for any contribution with the dependent variable permissiveness. A level of significance of 0.05 was used in the hypothesis testing. No variables were correlated above a .7 so all were included in the interpretation of the model.

When considered together, the model of the independent variables listed above were statistically significant,  $F(4, 99) = 9.699, p < .001$ . The combination of these variables explained 25% of the variance in the dependent variable permissiveness, adjusted  $R$  square = .253. However, the amount of variance explained decreased by another 2%, which is a very nominal decrease. As demonstrated below in Table 9, all the independent variables included in the model did reach a statistically significant level of prediction.

Table 9

*Regression Results of Familial Interconnectedness, Age, Religion, Presence of STDs*

Model	Unstandardized		Standardized		Sig.
	B	STD. Error	Beta	t	
(Constant)	31.331	3.618		8.659	0.0001
Familial Interconnectedness	-.234	.058	-.352	-4.034	0.0001
Age	-.131	.060	-.188	-2.189	.031
Religious Affiliation	.400	.193	.178	2.073	.041
Presence of Sexually Transmitted Disease	3.562	1.500	.207	2.376	.019

*Note.*  $F(4, 99) = 9.699, p < .001$

All of the variables contributed to the regression model at statistically significant levels. Those variables were familial interconnectedness ( $\beta = -.349, p < .001$ ), age ( $\beta = -.178, p < .05$ ), religious affiliation/denomination ( $\beta = .191, p < .05$ ), and STD Status ( $\beta = .212, p < .05$ ). The results indicated that there were statistically significant relationships between these variables and permissiveness. There was a statistically significant correlation between total Familism and permissiveness,  $r = -.265, n = 118, p < .01$ . Based on the statistical analysis, it can be seen that there is a statistically significant relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number

of sex partners, STI history, and use of protective contraception), and attitudes about sex (permissiveness attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students. We therefore reject the null hypothesis and accept the alternative hypothesis.

### **Research Question 2**

What is the relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (Birth Control attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students?

H1<sub>0</sub>. There is no statistically significant relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (Birth Control attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students.

H1<sub>A</sub>. There is a statistically significant relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (Birth Control attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students.

**Pearson correlation.** In order to answer Research Question 2 and its hypotheses, a Pearson Correlation analysis was first conducted to examine the relation of the independent variable familism and the demographic variables (age, gender, marital status, place of residence, socioeconomic status, religion, number of sex partners, STI history, and use of contraception). The results indicated no statistically significant correlations between the total Familism scale and the demographic variables. There was a statistically significant correlation between total Familism and Birth Control attitudes,  $r = .20$ ,  $n = 118$ ,  $p < .05$ . This is a small correlation suggesting a weaker relationship between the two variables. In fact, the coefficient of determination indicated that only 4% of the variance in the scores is explained by the relationship between these two variables. Essentially, the higher score on Familism means being slightly less likely to express Birth Control attitudes.

**Multiple linear regression.** In order to further examine birth control (i.e., attitudes about birth control) a multiple linear regression analysis was performed to investigate whether the independent variables were a statistically significant predictor of Birth Control (i.e., attitudes about birth control). This analysis required the use of a hierarchical multiple regression model. In the hierarchical multiple regression mode, the independent variables (familial interconnectedness, age in years, religious affiliation, presence of sexually transmitted diseases, birth control, communion, ethnicity, instrumentality, and number of sex partners) were entered into the regression model to account for any contribution with the dependent variable permissiveness. A level of significance of 0.05 was used in the hypothesis testing. No variables are correlated above

a .7 and all were included in the model. It should be noted that some of the independent variables included in the regression model are more strongly correlated with the dependent variable.

Since the independent variables have a stronger correlation, I selected the coefficients model for the multiple linear regression to account for statistically significant correlations between the independent and dependent variables. When considered together the model of the independent variables listed above were statistically significant,  $F(9, 91) = 5.319, p < .001$ . For this regression, the  $F$  value increased as a result of the deletion of the independent variable (i.e., familial support, familial honor, subjugation of self, education, gender, and use of conception). Increases in this category suggest that the deletion of this item was a methodologically and statistically sound decision. However, the amount of variance explained increased by another 3%, which is a very nominal increase. Additionally, it is demonstrated below in Table 10, all the independent variables included in the model did reach a statistically significant level of prediction. This aspect of the results supports the deletion of the independent variables. The combination of these variables explained 28% of the variance in the dependent variable permissiveness, adjusted  $R$  square = .280. The  $F$  value increased, the level of significance of the model increased, and the amount of variance explained increased as a result the deletion of the independent variables.

Note.

Table 10

*Regression Results of Familial Interconnectedness, Age in years, Religious affiliation, Presence of sexually transmitted diseases, Birth Control, Communion, Ethnicity, Instrumentality, and Number of sex partners*

Model	Unstandardized		Standardized		t	Sig.
	B	STD. Error	Beta			
(Constant)	31.331	3.618			8.659	0.0001
Familial Interconnectedness	-.234	.058	-.352		-4.034	0.0001
Age	-.131	.060	-.188		-2.189	.031
Religious Affiliation	.400	.193	.178		2.073	.041
Presence of Sexually Transmitted Disease	3.562	1.500	.207		2.376	.019
Birth Control	.276	.168	.140		1.639	.104
Communion	-.184	.233	-.080		-.792	.430
Instrumentality	-.189	.180	.138		1.606	.112
Ethnicity	.307	.310	.092		.989	.325
Number of Sex Partners	.006	.005	.116		1.304	.195

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of these items was a methodologically and statistically sound decision. The results indicated that there were statistically significant correlations between the variables (familial interconnectedness, age, religious affiliation/denomination, and presence of sexually transmitted diseases) that contributed to overall Birth Control. Only one of the variables was statistically significantly contributed to the regression model, familial interconnectedness ( $\beta = -.275, p < .01$ ).

However, several of the variables approached statistical significance. Those variables were Birth Control ( $\beta = .156, p = .08$ ), Age ( $\beta = -.164, p = .068$ ), Religious Affiliation/Denomination ( $\beta = .162, p = .072$ ), and the Presence of Sexually Transmitted Diseases ( $\beta = .176, p = .054$ ). Based on the results, two variables were selected for deletion in the next regression model. Those variables were Communion ( $\beta = -.080, p = .430$ ) and Ethnicity ( $\beta = .092, p = .325$ ). There was a statistically significant correlation between Total Familism and Birth Control,  $r = .20, n = 118, p < .01$ . We therefore reject the null hypothesis and accept the alternative hypothesis.

### **Research Question 3**

What is the relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (Sexual Communion attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students?

H1<sub>0</sub>. There is no statistically significant relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity,

marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (Sexual Communion attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students.

H1<sub>A</sub>. There is a statistically significant relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (Birth Control attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students.

**Pearson correlation.** In order to answer Research Question 3 and its hypotheses, a Pearson Correlation analysis was first conducted to examine the relation of the independent variable Familism and the demographic variables (age, gender, marital status, place of residence, socioeconomic status, religion, number of sex partners, STI history, and use of contraception). The results indicated no statistically significant correlations between the demographic variables and the familism scale. There was no statistically significant correlation between Total Familism and Communion,  $r = .094$ ,  $n = 118$ ,  $p < .353$ .

**Multiple linear regression.** In order to further examine Communion (i.e., attitudes about sex) a multiple linear regression analysis was performed to investigate whether the independent variables were a statistically significant predictor of Communion (i.e., attitudes about sex). This analysis required the use of a hierarchical



multiple regression model. In the hierarchical multiple linear regression mode, the independent variables (Familial Interconnectedness, Age in years, Religious affiliation, Presence of sexually transmitted diseases, Birth Control, Communion, and Instrumentality) were entered into the regression model to account for any contribution with the dependent variable permissiveness. A level of significance of 0.05 was used in the hypothesis testing. No variables are correlated above a .7 and all were included in the interpretation of the model. It should be noted that some of the independent variables included in the regression model are more strongly correlated with the dependent variable. Since the independent variables have a stronger correlation, I selected the coefficients model for the multiple linear regression to statistically significant correlation between the independent and dependent variables. When considered together the model of the independent variables listed above were statistically significant,  $F(5, 98) = 8.429$ ,  $p < .001$ .

The combination of these variables explained 25% of the variance in the dependent variable permissiveness, adjusted  $R$  square = .265. Please note, the  $F$  value increased as a result the deletion of the independent variables. Increases in this category suggest that the deletion of these items was a methodologically and statistically sound decision. However, the amount of variance explained decreased by 3%. This is a very nominal decrease. Additionally, as will be demonstrated below in Table 11, most all the independent variables included in the model did reach a statistically significant level of prediction. This aspect of the results supports the deletion of the independent variables. Several of the variables were statistically significantly contributed to the regression

model. Those variables were Familial interconnectedness ( $\beta = -.352, p < .001$ ), Age ( $\beta = -.188, p < .05$ ), Religious Affiliation/Denomination ( $\beta = .178, p < .05$ ), and the Presence of Sexually Transmitted Diseases ( $\beta = .207, p < .05$ ). Two variables did not indicate changes in the dependent variable at statistically significant levels, Communion ( $\beta = .140, p = .104$ ) and instrumentality ( $\beta = .138, p = .112$ ). The correlation between Total Familism and attitudes toward sexual communion was not statistically significant,  $r = .094, n = 118, p = .353$ . The results indicated that there were no statistically significant correlations between the Demographics variables (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception) and the Familism scale. Therefore, I retained the null hypothesis.

#### **Research Question 4**

What is the relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (Instrumentality attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students?

H<sub>10</sub>. There is no statistically significant relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (Instrumentality

attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students.

H1<sub>A</sub>. There is a statistically significant relationship between familism (as measured by the Attitudinal Familism Scale), demographics (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception), and attitudes about sex (Instrumentality attitudes, as measured by the subscale of the Brief Sexual Attitudes Scale, BSAS) among online college students.

**Pearson correlation.** In order to answer Research Question 4 and its hypotheses, a Pearson Correlation analysis was first conducted to examine the relation of the independent variable Familism and the demographic variables (Age, Gender, Marital status, Place of residence, Socioeconomic status, Religion, Number of sex partners, STI history, and Use of contraception). The results indicated no statistically significant correlations between the demographic variables and the familism scale. There was no statistically significant correlation between Total Familism and Instrumentality,  $r = -.09$ ,  $n = 118$ ,  $p = .402$ .

**Multiple linear regression.** In order to further examine Instrumentality (i.e., attitudes about sex) a multiple linear regression analysis was performed to investigate whether the independent variables were a statistically significant predictor of Instrumentality (i.e., attitudes about sex). This analysis required the use of a hierarchical multiple regression model. In the hierarchical multiple regression mode, the independent variables (Familial Interconnectedness, Age in years, Religious affiliation, Presence of

sexually transmitted diseases, Birth Control, Communion, and Instrumentality) were entered into the regression model to account for any contribution with the dependent variable permissiveness. A level of significance of 0.05 was used in the hypothesis testing. No variables are correlated above a .7 and all were included in the interpretation of the model. It should be noted that some of the independent variables included in the regression model are more strongly correlated with the dependent variable. Since the independent variables have a stronger correlation, I selected the coefficients model for the multiple linear regression to statistically significant correlation between the independent and dependent variables.

When considered together the model of the independent variables listed above were significant,  $F(5, 98) = 8.429, p < .001$ . The combination of these variables explained 25% of the variance in the dependent variable permissiveness, adjusted  $R$  square = .265. Please note, the  $F$  value increased as a result the deletion of the independent variables. Increases in this category suggest that the deletion of these items was a methodologically and statistically sound decision. However, the amount of variance explained decreased by 3%. This is a very nominal decrease. Additionally, as will be demonstrated below in Table 11, most all the independent variables included in the model did reach a statistically significant level of prediction.

Table 11

*Regression Results of Familial Interconnectedness, Age in years, Religious affiliation, Presence of sexually transmitted diseases, Birth Control, Communion, Instrumentality*

Model	Unstandardized		Standardized		Sig.
	B	STD. Error	Beta	t	
(Constant)	31.331	3.618		8.659	0.0001
Familial Interconnectedness	-.234	.058	-.352	-4.034	0.0001
Age	-.131	.060	-.188	-2.189	.031
Religious Affiliation	.400	.193	.178	2.073	.041
Presence of Sexually Transmitted Disease	3.562	1.500	.207	2.376	.019
Communion	.276	.168	.140	1.639	.104
Birth Control	-.184	.233	-.080	-.792	.430
Instrumentality	.289	.180	.138	1.606	.112

*Note.*  $F(5, 98) = 8.429, p < .001$ .

Several of the variables significantly contributed to the regression model. Those variables were familial interconnectedness ( $\beta = -.352, p < .001$ ), Age ( $\beta = -.188, p < .05$ ), Religious Affiliation/Denomination ( $\beta = .178, p < .05$ ), and the Presence of Sexually

Transmitted Diseases ( $\beta = .207, p < .05$ ). Two variables did not significantly predict changes in the dependent variable, Communion ( $\beta = .140, p = .104$ ) and Instrumentality ( $\beta = .138, p = .112$ ). The correlation between Total Familism and attitudes toward instrumentality was not at all significant,  $r = -.09, n = 118, p = .402$ . The results indicated that there were no statistically significant correlations between the Familism Scale and the demographics variables (age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception). Therefore, we retain the null hypothesis.

### **Summary**

In conclusion of chapter four, the results indicated the regression model that includes familial interconnectedness, age, religious affiliation/denomination, and the presence of sexually transmitted diseases accounts for 25% of the variance in permissiveness scores. The negative contribution of familial interconnectedness suggests that the higher I score on familial interconnectedness the lower my likelihood of scoring higher on attitudinal measures of permissiveness. The negative contribution of age suggests that the higher my age the lower my likelihood of scoring higher on attitudinal measures of permissiveness. The positive contribution of religious affiliation suggests that if a religious practice is present I am less likely to score higher on attitudinal measures relating to permissiveness. Lastly, the positive contribution of presence of sexually transmitted diseases suggests that if a STD is present I am less likely to score higher on attitudinal measures relating to permissiveness.

The results indicate that the higher a person scores on Familism, they are slightly less likely to score lower on attitudinal measures related to permissiveness and birth control. The results shows that the closer one is to their family, they are less likely to favor permissiveness. The results also show that the closer one is to their family, the less likely they are to answer favorably toward the attitudinal measures toward birth control. Regarding sexual communion and instrumentality, the results indicated that there is no significant relationship between Familism and these variables. In chapter 5, the discussion offers and interpretation of the study's findings, limitations, implications for social change, and recommendations for future studies.

## Chapter 5: Discussion, Conclusions, and Recommendations

In this quantitative study, I used the Familism Scale (Steidel & Contreras, 2003) and Brief Sexual Attitudes Scale (Hendrick et al., 2006) to examine the relationships between familism and sexual attitudes among college students. The demographics of age, gender, ethnicity, marital status, education level, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception were collected to further examine relationships. To begin analyzing the collected data, I performed Pearson correlations to measure the relationship between all of the variables, and multiple linear regression to determine whether there were statistically significant relationships between familism, sexual attitudes, and demographic variables specified in the research questions. The results showed that two of the alternative hypotheses were supported by the data analysis. Once the analysis of the data was completed, the results indicated a statistically significant relationship between the variables familial interconnectedness, age, religious affiliation/denomination, and the presence of sexually transmitted diseases.

### **Interpretation of Findings**

#### **Research Question 1**

In regard to Research Question 1, the null hypothesis was rejected and the alternative hypothesis was accepted as there were statistically significant results that indicated that an individual's familial interconnectedness was related to his or her attitude toward sex. This finding adds to the research in this area due to the fact that although there have been several studies conducted about familism, (Maliszewski & Brown, 2014; Manago, et al., 2015; Schwartz et al., 2011), previous researchers did not evaluate



attitudes about sex for online college students.

Schwartz et al. (2011) concluded that cultural values along with familial interconnectedness impact how individuals make decisions regarding sexual behavior. According to Steidel and Contreras (2003), familial interconnectedness among individuals who score on this scale show that they are both physically and emotionally close to family and suggest individuals who make decisions to engage in risky behavior usually consult with family members before making a decision. If previous researchers have provided similar results regarding attitudes about sex, results concluded that individuals who lack familial interconnectedness scored higher with sexual expression from a public health perspective. However, it appears from the current study that women showed stronger familial interconnectedness and scored higher on familism, which was consistent with the work of previous researchers who concluded that men were more likely to be sexually experienced and engage in more casual sex than women (Arnold & Meston, 2010; Burnett et al., 2014; Claxton & Van Dulmen, 2013).

Although I hypothesized that the demographics and attitudes about sex would not be related to familism at statistically significant levels, the literature supported that there was a relationship between familism and attitudes about sex (Schwartz et al., 2011; Steidel & Contreras, 2003). According to the results of the current study, a person who is closer to family will not become involved in a particular behavior. In addition, the contribution of familial interconnectedness suggests that the higher the score on familial interconnectedness, the lower the likelihood of scoring higher on attitudinal measures of permissiveness.

Further testing indicated that those who scored higher on Interconnectedness ( $M = 23.33$ ,  $SD = 8.112$ ) scored lower on measures of permissiveness compared to those in the medium Interconnectedness ( $M = 30.45$ ,  $SD = 7.099$ ) and low Interconnectedness groups ( $M = 28.80$ ,  $SD = 4.162$ ). Based on the results of my statistical analyses, those lower in familial interconnectedness had more permissive attitudes toward sex. However, there seemed to be an interconnectedness threshold where scores on permissiveness were relatively similar based on levels of permissiveness.

### **Research Question 2**

For Research Question 2, the findings indicated that the null hypothesis needed to be rejected and the alternative accepted. The results indicated that both men and women take adequate precautions to protect against unwanted pregnancies and STDs. Previous researchers stated that individuals who slept with more than six partners in a year took adequate precaution to protect themselves against STDs and unwanted pregnancies (Liao et al., 2015; Ward et al., 2014). Although these individuals are aware of the risk associated with having sex in college, they may hold the belief that both men and women should be held accountable for providing protection against unwanted pregnancies and diseases (Liao et al., 2015). According to Fielder and Carey (2010), higher levels of adherence to familism and sexually assertiveness in romantic relationships does not necessarily contribute to a high permissiveness score on birth control. This may be due to a focus on the familial interconnectedness of the relationship. The results indicated that the correlation between Total Familism and birth control was statistically significant ( $r = .20$ ,  $n = 100$ ,  $p = .05$ ). This was a small correlation suggesting a weaker relationship

between the two variables. The coefficient of determination indicated that only 4% of the variance in the scores was explained by the relationship between these two variables. Based on the current results, the higher the Familism score, the lower the scores on attitudinal measures related to birth control.

### **Research Question 3**

In Research Question 3, the findings supported the null hypothesis that there is no significant relationship between familism, demographics, and sexual communion. Although the results did not indicate rejection of the null hypothesis, previous studies (CDC, 2014; Fielder & Carey, 2010; Owens et al., 2010) indicated that engagement in sexual activity contributed to the hookup culture, which allows male and female students to have consensual sex without any commitment. This means that familism, demographics, and sexual communion do not correlate, meaning that there is no predictive relationship with individuals' attitudes about sex. Statistical findings suggest that women who are romantically involved do not view sexual communion as a risk (Burnett et al., 2014; Campos et al., 2014). The correlation between Total Familism and attitudes toward sexual communion was not significant ( $r = .094$ ,  $n = 100$ ,  $p = .353$ ). There was no relationship between these two variables. According to Hendrick et al. (2006), men and women who voiced their opinion about sexual decisions believe that sexual communion is agreed upon by both parties. According to the findings of the current study, there was no significant correlation between sexual communion and familism.

#### Research Question 4

Research Question 4 was similar to Research Question 3. The findings supported the null hypothesis that there is no statistically significant relationship between familism, demographics, and instrumentality. A review of the literature showed that both men's and women's enjoyment of physical sex differs based on their relationship with their partner (Owens et al., 2010). Over the last 30 years, researchers reported that an estimated 74% of female college students start out involved in romantic relationships, which impacts their enjoyment of sex, whereas males tend to focus on consensual terms of sex with no commitment (Owens et al., 2010).

The findings of the current study indicated that the correlation between Total Familism and attitudes toward instrumentality was not statistically significant ( $r = -.09$ ,  $n = 100$ ,  $p = .402$ ). After carefully reviewing the analysis of instrumentality, I concluded that instrumentality ( $\beta = .138$ ,  $p = .112$ ) was not a significant predictor of permissiveness. Further examination of Instrumentality (i.e., attitudes about sex) through a multiple linear regression analysis indicated whether the independent variables were a statistically significant predictor of Instrumentality (i.e., attitudes about sex). This analysis indicated that most of the independent variables included in the model reached a significant level of prediction. This aspect of the results supported the deletion of the variable instrumentality because it was not a statistically significant predictor of attitudes about sex. Other research findings suggested that familial interconnectedness is a valid predictor of the familism construct (Schwartz et al., (2011). However, instrumentality did not have any correlation with familism and permissiveness as it pertained to attitudes about sex.

### **Limitations of the Study**

Limitations of this study and interpretation of the findings were done within the context of these limitations. The surveys that were used for this study were from previous researchers who conducted reliability and validity analyses to validate their instruments regarding familism and attitudes about sex. Previous data was available in regards to reliability and validity for both surveys to yield valid information. The length of the demographic, familism, and brief sexual attitudes survey combined with the lack of understanding of the survey items and/or terms by the participants completing the survey may have been a limitation to this study. In turn, this may have impacted how participants of the survey answered questions or may have felt fatigue due to the length of all three surveys combined.

Generalizability was not limited by the response rate ( $n = 118$ ) because the study did obtain the desired number of calculated responses based on power analyses ( $n = 118$ ). A major limitation in this study, which could explain the results that were not statistically significant, was the small sample size. While 118 participants was the estimated sample size needed to obtain at least 80% power, there was still a large margin of error for each statistical test. It could be that a larger sample size that conferred 95% power would have resulted in statistically significant findings (Field, 2013). While the data collected through an external site, it is unknown whether the participants had questions about the survey or if they had questions about any other portion of the survey. It is also unclear if the participants in the study were uncomfortable at times answers questions about their sexual experiences. Specifically, although there were 118 participants that completed the

survey, it is unclear if these participants felt comfortable with the research topic. Respondents being from the Walden Participant pool also limited the generalizability of this study. The limitations with using the Walden Participant pool was the limited access due to not being able to advertise to students about the study, which generalizability was limited with students who are only online students who are not participating in a traditional, on-site campus environment and are not “traditional” students in age as well. This may have skewed the results of this study not necessarily generalizing well to other populations. However, this is also a benefit as this can result in the ability to compare the results of this study (with this specific population) with similar studies that have been conducted with more traditional college students.

As mentioned in Chapter 3, this research study utilized convenience sampling to gather useful data and information that would not had been possible using probability sampling techniques (Leiner, 2014). The convenience sampling does not lend itself to being generalized to a complete population other than the one that responded (Leiner, 2014). The participants in this study were students from undergraduate and graduate programs of Walden University. While the mean average of students who participated in this study was 30.92, the convenience sampling may not be a true representative of the population being study (Lenier, 2014). According to Leiner (2014) there were three limitations for using the convenience sampling strategy, which is highly vulnerable to selection bias and influences beyond the researcher; high level of sampling error; and studies have little credibility due to the bias of the strategy. Although response bias is a cognitive bias that influences the responses of a participant in a study from being truthful

or accurate response, the response bias typically can have a large impact on the validity of surveys or questionnaires (Leiner, 2014).

Since the research study was posted online and required the sample population to elect to participate in the study, I cannot help but think that this could have had an effect on the results. Although the participants were given the proper information, I believe that the participants of this study could have benefited from having someone answer any questions about the survey instruments and the items. The research topic that was used for this study could make some individuals feel uncomfortable; even participants that consented to taking the survey. As mentioned in Chapter 2, various cultures make decisions differently regarding sexual attitudes about sex. Although I was unable to have conversations with the participants who participated in the study, the expression of anonymity was clearly explained in the consent form and that all information shared would be maintained in a secure location. While it took me several months to collect the data, perhaps participating in this study created a dialogue that the participants could have with family and friends on how they make decisions about engaging in sexual intercourse. The questions on the Familism and Brief Sexual Attitudes survey were very specific about examining cultural awareness, family connections, and attitudes perceived about sex. Thus, while some of the results were not statistically significant, the application of connecting the topic of sexual attitudes with familistic principles may have impacted social change on an individual level. Furthermore, if participants had the opportunity to ask the researchers questions for clarity during taking the survey, results may have varied from person to person.

### **Recommendations**

The strengths of this study were grounded and used validated instruments that were specific to the research topic. Regarding recommending further exploration, there are several approaches that need to be taken based on gathering an in-depth approach to identifying the correlation between sexual attitudes and familism. First, it would be interesting to see if the same results would be yielded if the participants were surveyed in a face-to-face setting such as a college forum where diverse groups of students could come together (i.e., Walden Residency). Again, the student body may be more welcoming with discussion among peers and could possibly affect the results. On the reverse side of that, the study could possibly be done as a mixed method study to collect the data using survey along with interviewing some participants about the information provided about their beliefs and actual behaviors.

The second area would be to explore the concept of familism as it relates to familial interconnectedness. Researchers in several fields have referred to familism from an attitude/belief aspect and center familism around the Latino culture, whereas others include structural and behavioral elements from the concept familism. Although familism has three components (e.g., attitude, behavioral, and structural), the divergent beliefs about familism are viewed to be unique with the Latino cultural and limited in the discussion about familism being identified in other ethnic backgrounds. As researchers move forward to study this concept, investigations should be used to provide a more suitable definition that does not limit familism to the Latino culture, but to include other ethnicities from the population.



The third area in the literature that requires growth for familism is other using different methods of measurement for this concept. Although researchers have tried to use various methods to identify each construct, these measurements have been poorly expounded in the development methods. Based on the literature, it is vital for researchers to use more comprehensive, reliable, and valid instruments to assess diverse populations regarding familism. Additionally, the newer quantitative measures of familism have been used in previous research to capture small characteristics, but if researchers do not clearly define how to assess diverse populations, this will limit how the research moves forward. By making these changes, researchers would have a more in-depth look at how the experiences of diverse cultures make decisions based on the familism concept.

The fourth area in the familism literature that needs further review is how acculturation impacts diverse ethnic groups during their first semester in college. If researchers use additional resources to assess acculturation differences between diverse members and genders of different ethnicities, further research will provide an in-depth look at acculturation and how college students face these changes once leaving from a familistic environment to a diverse college/university campus. Previous studies have shown that high familistic beliefs are not always true to be stress free because of the demand to meet higher performance measures and expectations within the familistic culture for the family. Considering that the concept familism protects against risky behaviors, the area that needs further investigation to understand if familism causes too much stress or pressure for family members to excel in academia and other fields of accomplishment. While the majority of this research must focus on diverse populations,

future research could expand on investigating whether gender in a college setting are impacted by acculturation along with familism and how they impact academic achievement, sexual behavior outcomes, and health risk in the college.

The last recommendation for further examination to gather a specific group of participants from ethnicities listed in the demographic portion of the survey to determine if attitudes about sex are connected to specific cultures. This was not looked at in this study as participants were only asked to identify their specific ethnicity. There are a number of variables that can lead into sexual decision-making such as size of family, desire to reproduce, beliefs about birth control, employment, and desire to be married. If a person is not employed with a job, this person may not have a desire to start a family, which impacts their decision for using birth control. Furthermore, if participants are infertile, they may not see a point in using contraceptives with their significant partners. Also, as mentioned the selected sample size could have impacted the results and affected the power selected for this study. Finally, another way that this study could be reimaged is to use a mixed method approach and get a detailed insight on participants view on sexual decision-making.

### **Implications for Social Change**

One of the fundamental principles of public health is to prevent unhealthy behavior and provide communities with uniform approaches to live healthier and successful lives (Valente & Pitts, 2016). According to Valente and Pitts, the public health field is a profession that promotes an environment in which the world can be healthy. While the aim of these preventative strategies is to educate and provide prevention

services, public health professionals take into account that biological cause, social attitudes, and behavioral factors impact how public health professionals address social change (Valente & Pitts, 2016). As mentioned in Chapter 2, the attitudes about sex are defined as an individual's belief about a person sexuality, which is demonstrated by behavior that is based on cultural views and previous sexual experiences (Sprecher & Treger, 2015). The results of this study have the potential to lead to a positive social change by adding to the general knowledge base in the field of public health. Additionally, the results of this study could inform community health centers interested in using educational approaches to educate community members and college institutions on how students make decisions about sex.

Public health professional have typically encouraged people to live healthier lives and to make sound decisions to take charge of their health in a small manner. Empowerment is the essential tool that public health practitioners strive for to not only empower individuals, but also communities (Valente & Pitts, 2016). The implications for social change for the practice of public health have the potential to lead to positive social change by bringing awareness to professional organizations seeking to improve how to educate individuals on making healthier decisions as it pertains to sexual behavior. By increasing the awareness at the professional and individual level of public health, this could lead to positive social change by guiding, increasing, and enhancing training and development efforts for improving quality health education.

Based on the results of this study, I have planned to present this information to Roanoke-Chowan Community College as well as the Hertford County Community

Health System in order to educate individuals on sex education should be provided to student before attending college. For the public health discipline, I recognize that the younger population (i.e., future leaders) needs to be well informed about what they may face in relationships regarding sexuality and sexual behavior. I believe that it is important to educate individuals on the risk associated with risky sexual behavior because the decisions they make can impact their future health and well-being. The findings of this research provide individuals in the discipline of public health to do more with comprehensive sexual health education. It is appropriate to say that it is time to have healthy discussions about taking personal responsibility for their health and overall well-being.

### **Conclusion**

It is important for knowledge gained to be disseminated so that people have the best chance at making decisions for living a better quality life. The results in this research can be argued that they are linked to cultural differences among ethnicities. It may be that the sample size of the research was too small to make an association between the selected variables for this study. Since recent research has changed over the past few years regarding attitudes about sex, there is no denying that acculturation impacts how people make decisions about sex. Regarding the gaps in the literature (i.e., how familism impacts attitudes about sex and assessing nontraditional students and how familism impacts their college experience) the research identified that there was a statistically significant correlation between familism and permissiveness as it pertains to nontraditional (i.e., online students) students.

I look forward to seeing future researchers take an in-depth look at diverse cultures regarding attitudes about sex. While there is work to be done to empower this population by examining sexual decision-making, the rise of STIs and STDs continues to affect the population as a whole throughout the world. Researchers have shown that this problem will not correct itself; so further research should be done to examine individual populations. Based on the results of this research study, the participants of this study informed that their needs to be more focus on sexual health decisions among all populations and not just a specific ethnicity. It is clear that familial interconnectedness, age, religious affiliation, and the presence of STDs are significantly predictive of changes in attitudes toward permissiveness behavior. Hopefully, future research of the current study can continue to better understand college students' attitudes about sex.

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## Appendix A: Consent Form

You are invited to take part in a research study about examining whether familism is related to sexual behavior in college age students. This information is vital because this can be used to inform programs aimed at encouraging safer sexual and preventative measures to college students. The researcher is inviting participants who are Walden University students. Participants who also meet the criteria of being over 18 will be provided an explanation of the study on the Walden Participant Pool website. This form is part of a process called “informed consent” to allow you to understand this study before deciding whether to take part.

This study is being conducted by a researcher named Joseph D. Rampersad, who is a doctoral student at Walden University. You might already know the researcher as a former classmate or student, but this study is separate from that role.

### **Background Information:**

Researchers have primarily focused on alcohol abuse, drug use, and aggressive behavior as it relates to sexual behavior (Esparza & Sanchez, 2008; Way & Robinson, 2003), but there is limited information regarding if familism impacts how students make decisions to engage in sexual behavior has not received an in-depth looked at the relationship to engaging in sexual behavior. The purpose of this study is to determine whether or not there is a correlation between sexual behavior and familism among college students engaging into sexual intercourse.

### **Procedures:**

If you agree to be in this study, you will be asked to:

- You will be asked to complete the Demographic questionnaire, which is age, gender, marital status, place of residence, socioeconomic status, religion, number of sex partners, STI history, and use of protective contraception. This portion of the survey will take approximately 5 to 10 minutes to complete.
- You will be asked to complete the Attitudinal Familism Survey. This scale consists of 18-items assessing familial support, familial interconnectedness, familial honor, and subjugation of self to family (Lugo Steidel & Contreras, 2003). The instrument uses 10-point Likert scale that ranges from one (strongly disagree) to 10 (strongly agree) to measure each of the 18-items in the Attitudinal Familism Scale. This survey should take approximately 15 to 20 minutes to complete.
- You will be asked to complete a Student Sexual Risk Scale, which is a 38-question survey that uses a 3-point Likert scale (i.e., Agree- A, Undecided- U, and Disagree- D) that evaluates the degree of risk for individuals who engage in unsafe behavior that exposes them to HIV. This portion of the survey should take approximately 20 to 25 minutes to complete.

Here are some sample questions:

- Children should always help their parents with the support of younger brothers and sisters, for example, help them with homework, help the parents take care of the children, etc.

1	2	3	4	5	6	7	8	9	10
strongly		disagree		somewhat	somewhat		agree		strongly
disagree				disagree	agree				agree

- A, U, D 8. I would try to use a condom when I had sex.

A = Agree, U = Undecided, D = Disagree

- What is your gender: Male/Female

#### **Voluntary Nature of the Study:**

This study is voluntary. Everyone will respect your decision of whether or not you choose to be in the study. No one at Walden University will treat you differently if you decide not to be in the study. If you decide to join the study now, you can still change your mind later. You may stop at any time. Only Walden Students can volunteer to participate in this study.

#### **Risks and Benefits of Being in the Study:**

Being in this type of study involves some risk of the minor discomforts that can be encountered in daily life, such as fatigue, stress, becoming upset, or questions concerning sexual decision-making/preference. Being in this study would not pose risk to your safety or wellbeing. The benefits to the larger community will provide value insight to administration about how college students make decisions to engage in sexual activities.

#### **Payment:**

Since this study will not compensate participants, each participant will be informed about his or her participation and that this study is completely voluntary and that all information collected will be stored on a secure server and remain confidential (participant names will not be collected).

#### **Privacy:**

Any information you provide will be kept confidential (note that while anonymity is preferred, it only applies in studies in which no one, not even you as the researcher knows who participated, i.e. a survey with consent implied through completion of that survey). The researcher will not use your personal information for any purposes outside of this research project. Also, the researcher will not include your name or anything else that could identify you in the study reports. Data will be kept secure in the SurveyMonkey database, which requires user identification and password

encryption to enter the database. The data will be kept for the duration of the study and will be destroyed upon completion of the study, as required by the university.

#### **Contacts and Questions:**

You may ask any questions you have now. Or if you have questions later, you may contact the researcher via phone: **(252) 287-9271** or email:

**[Joseph.Rampersad@waldenu.edu](mailto:Joseph.Rampersad@waldenu.edu)**. If you want to talk privately about your rights as a participant, you can call Dr. Leilani Endicott. She is the Walden University representative who can discuss this with you. Her phone number is **(612) 312-1210**. If participants are likely to be outside the US, add dialing instructions for reaching Dr. Endicott's USA number and/or a local contact who is willing to serve as a Research Participant Advocate in the local language. Walden University's approval number for this study is **11-04-16-0305346** and it expires on **Friday, November 3, 2017**. Please print or save a copy of this consent form.

#### **Obtaining Your Consent**

In order to protect each participant's privacy, no privacy signatures will be collected and your completion of the survey would indicate your consent, if you so choose to participate. If you feel you understand the study well enough to make a decision about it, please indicate your consent by clicking on the survey, completing the survey, and submitting the survey.



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## Appendix B: Sociodemographic Questionnaire

1. What is your age?
2. Grade level classification: 0= Undergraduate 1= Graduate
3. Gender: 1= Female 0= Male
4. What is your religious affiliation?  
0= Catholic 1= Protestant 2= Baptist  
3= Atheist 4= Other 5= Jewish 6= Muslim 7= Buddhist 8= Other
5. What is your race? 0= White  
1= Black or African American  
2= Hispanic or Latino  
3= Native Hawaiian or Other Pacific Islander  
4= American Indian or Alaskan Native  
5= Asian  
6= Two or More races  
7= Unknown
6. Were you born in the United States? 1= yes 0=no
7. How many sexual partners have you had in your lifetime? \_\_\_\_\_ (Number of Sexual Partners.)
8. Have you ever contracted a STI/STD in your lifetime? 0= No 1= Yes
9. Do you use protective contraception during sexual intercourse? 0= No 1= Yes



## Appendix C: Attitudinal Familism Scale

**Please circle the response that best describes your personal views about each particular statement. Please answer as honestly as possible. Please respond by using any of the numbers between 1 and 10.**

1. Children should always help their parents with the support of younger brothers and sisters, for example, help them with homework, help the parents take care of the children, etc.

1	2	3	4	5	6	7	8	9	10
strongly		disagree		somewhat	somewhat		agree		strongly
disagree				disagree	agree				agree

2. The family should control the behavior of children under the age of 18.

1	2	3	4	5	6	7	8	9	10
strongly		disagree		somewhat	somewhat		agree		strongly
disagree				disagree	agree				agree

3. A person should cherish the time they spend with his or her relatives.

1	2	3	4	5	6	7	8	9	10
strongly		disagree		somewhat	somewhat		agree		strongly
disagree				disagree	agree				agree

4. A person should live near his or her parents and spend time with them on a regular basis.

1	2	3	4	5	6	7	8	9	10
strongly		disagree		somewhat	somewhat		agree		strongly
disagree				disagree	agree				agree

5. A person should always support members of the extended family, for example, aunts, uncles, and in-laws, if they are in need, even if it is a big sacrifice.

1	2	3	4	5	6	7	8	9	10
strongly		disagree		somewhat	somewhat		agree		strongly
disagree				disagree	agree				agree

6. A person should rely on his or her family if the need arises.

1	2	3	4	5	6	7	8	9	10
strongly		disagree		somewhat	somewhat		agree		strongly
disagree				disagree	agree				agree

7. A person should feel ashamed if something he or she does dishonors the family name.

1	2	3	4	5	6	7	8	9	10
strongly		disagree		somewhat	somewhat		agree		strongly
disagree				disagree	agree				agree

8. Children should help out around the house without expecting an allowance.

1	2	3	4	5	6	7	8	9	10
strongly		disagree		somewhat	somewhat		agree		strongly
disagree				disagree	agree				agree

9. Parents and grandparents should be treated with great respect regardless of their differences in views.

1	2	3	4	5	6	7	8	9	10
strongly		disagree		somewhat	somewhat		agree		strongly
disagree				disagree	agree				agree

10. A person should often do activities with his or her immediate and extended families, for example, eat meals, play games, or go somewhere together.

1	2	3	4	5	6	7	8	9	10
strongly		disagree		somewhat	somewhat		agree		strongly
disagree				disagree	agree				agree

11. Aging parents should live with their relatives.

1	2	3	4	5	6	7	8	9	10
strongly		disagree		somewhat	somewhat		agree		strongly
disagree				disagree	agree				agree

12. A person should always be expected to defend his/her family's honor no matter what the cost.

1	2	3	4	5	6	7	8	9	10
strongly		disagree		somewhat	somewhat		agree		strongly
disagree				disagree	agree				agree

13. Children below 18 should give almost all their earnings to their parents.

1	2	3	4	5	6	7	8	9	10
strongly		disagree		somewhat	somewhat		agree		strongly
disagree				disagree	agree				agree

14. Children should live with their parents until they get married.

1	2	3	4	5	6	7	8	9	10
strongly		disagree		somewhat	somewhat		agree		strongly
disagree				disagree	agree				agree

15. Children should obey their parents without question even if they believe that they are wrong.

1	2	3	4	5	6	7	8	9	10
strongly		disagree		somewhat	somewhat		agree		strongly
disagree				disagree	agree				agree

16. A person should help his or her elderly parents in times of need, for example, help financially or share a house.

1	2	3	4	5	6	7	8	9	10
strongly		disagree		somewhat	somewhat		agree		strongly
disagree				disagree	agree				agree

17. A person should be a good person for the sake of his/her family.

1	2	3	4	5	6	7	8	9	10
strongly		disagree		somewhat	somewhat		agree		strongly
disagree				disagree	agree				agree

18. A person should respect his or her older brothers and sisters regardless of their differences in views.

1	2	3	4	5	6	7	8	9	10
strongly		disagree		somewhat	somewhat		agree		strongly
disagree				disagree	agree				agree

## Appendix D: Brief Sexual Attitudes Scale

**BRIEF SEXUAL ATTITUDES SCALE**

Listed below are several statements that reflect different attitudes about sex. For each statement fill in the response on the answer sheet that indicates how much you agree or disagree with that statement. Some of the items refer to a specific sexual relationship, while others refer to general attitudes and beliefs about sex. Whenever possible, answer the questions with your current partner in mind. If you are not currently dating anyone, answer the questions with your most recent partner in mind. If you have never had a sexual relationship, answer in terms of what you think your responses would most likely be.

For each statement:

- A** = Strongly agree with statement
- B** = Moderately agree with the statement
- C** = Neutral - neither agree nor disagree
- D** = Moderately disagree with the statement
- E** = Strongly disagree with the statement

1. I do not need to be committed to a person to have sex with him/her.
2. Casual sex is acceptable.
3. I would like to have sex with many partners.
4. One-night stands are sometimes very enjoyable.
5. It is okay to have ongoing sexual relationships with more than one person at a time.
6. Sex as a simple exchange of favors is okay if both people agree to it.
7. The best sex is with no strings attached.
8. Life would have fewer problems if people could have sex more freely.
9. It is possible to enjoy sex with a person and not like that person very much.
10. It is okay for sex to be just good physical release.
11. Birth control is part of responsible sexuality.

12. A woman should share responsibility for birth control.
13. A man should share responsibility for birth control.
14. Sex is the closest form of communication between two people.
15. A sexual encounter between two people deeply in love is the ultimate human interaction.
16. At its best, sex seems to be the merging of two souls.
17. Sex is a very important part of life.
18. Sex is usually an intensive, almost overwhelming experience.
19. Sex is best when you let yourself go and focus on your own pleasure.
20. Sex is primarily the taking of pleasure from another person.
21. The main purpose of sex is to enjoy oneself.
22. Sex is primarily physical.
23. Sex is primarily a bodily function, like eating.

**Note.** The BSAS includes the instructions shown at the top. The items are given in the order shown. The BSAS is usually part of a battery with items numbered consecutively. For purposes of analyses, we have A=1 and E=5. (The scoring may be reversed, so that A = strongly disagree, etc.) A participant receives four subscale scores, based on the mean score for a particular subscale (i.e., we add up the 10 items on Permissiveness and divide by 10). An overall scale score is really not useful unless you have the total score for all four subscales.

<b>Items</b>	<b>Scoring Key</b>
1-10	Permissiveness
11-13	Birth Control
14-18	Communion
19-23	Instrumentality

## Appendix E: Approval Letter Familism Scale

**Joseph Rampersad** <joseph.rampersad@waldenu.edu>

Jan 6 ☆



to jgrau ▾

Good Afternoon Dr. Grau,

My name is Joe Rampersad and I am a PhD Candidate in the Public Health Program for Walden University. I am emailing you today to ask you for your permission regarding the Attitudinal Familism Scale (Lugo Steidel & Contreras, 2003). Currently, my focus is to examine the relationship between familism and sexual behavior among college students. I would appreciate your approval for using this scale and any documentation you can provide on how to properly use this scale.

Again, thank you so much for your time and help with this matter and I hope to hear from you soon.

Best Regards, Joe Rampersad

**GRAU, JOSEFINA** jgrau@kent.edu via ksuprod.onmicrosoft.com

Mar 28 ☆



to me ▾

Hello Joseph,

I apologize for the delay in responding. You have permission to use the familism scale. I attached the English and Spanish version of the scale as well as the paper describing the computation of scores. The scale assesses 4 subcomponents of familism that are significantly intercorrelated. In part given the small number of items in each of the subscales, the internal consistency of some of the subscales is often not high, especially in small samples. Therefore, the scale has been most often used by deriving one overall score (mean of all 18 items, with Alphas greater/equal .80).

Please let me know if you have additional questions. Good luck with your research,

Josefina

---

Josefina M. Grau, Ph.D.  
Associate Professor



## Appendix F: Approval Letter

**Joseph Rampersad** <joseph.rampersad@waldenu.edu>

Jun 3 (4 days ago) ☆

to dana.dehart ▾

Good Morning Dr. DeHart,

My name is Joe Rampersad and I am a PhD Candidate in the Public Health Program for Walden University. I am emailing you today to ask you for your permission regarding the Student Sexual Risks Scale (DeHart, D. D., and Birkimer, J. C. 1997). Currently, my focus is to examine the relationship between familism and sexual behavior among college students. I would appreciate your approval for using this scale and any documentation you can provide on how to properly use this scale.

Again, thank you so much for your time and help with this matter and I hope to hear from you soon.

Best Regards, Joe Rampersad

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**DEHART, DANA** <DANAD@mailbox.sc.edu>

Jun 3 (4 days ago) ☆

to me ▾

Yes, no problem using the scale, as long as it is cited properly. I am including the original article as well as a copy of the items. Please let me know if you need anything else, and best wishes for your research!

**From:** Joseph Rampersad [mailto:[joseph.rampersad@waldenu.edu](mailto:joseph.rampersad@waldenu.edu)]

**Sent:** Friday, June 03, 2016 9:54 AM

**To:** [dana.dehart@sc.edu](mailto:dana.dehart@sc.edu)

**Subject:** Permission