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CLOSING THE GAP: EXAMINING THE IMPACT OF GENERATIONAL DIFFERENCES IN ACCULTURATION ON EFFECTIVE SEXUAL COMMUNICATION AND SAFE SEXUAL PRACTICES AMONG ASIAN AMERICAN COLLEGE STUDENTS

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CLOSING THE GAP: EXAMINING THE IMPACT OF GENERATIONAL DIFFERENCES IN ACCULTURATION ON EFFECTIVE SEXUAL COMMUNICATION AND SAFE SEXUAL PRACTICES AMONG ASIAN AMERICAN COLLEGE STUDENTS

By

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ABSTRACT

Sexual education in public schools has notoriously provided little guidance to adolescents during their period of sexual growth and exploration. While seeking parental advice on sex may appear as a reasonable alternative, that endeavor can prove to be just as unfruitful—especially in Asian American families. Many Asian American parents and children go through a process known as acculturation, in which individuals of one culture learn and adopt the beliefs and values of another. However, the rate at which parents and children acculturate can vary—leading to acculturation gaps. These acculturation gaps can have implications on parent-child interactions, particularly for sensitive topics like sex. Insufficient sexual communication and education can unfortunately lead to worse health outcomes in adolescents, including sexual ignorance, unsafe sex and even the development of sexually transmitted diseases. Using acculturation measures tailored to the Asian American experience and additional sex communication and risk scales, this study aims to analyze whether differences in acculturation between Asian American children and their parents impact healthy sexual communication and how those conversations, or lack thereof, have affected the sexual practices of emerging Asian American young adults. Findings reveal that Asian American college students had low frequency and low quality conversations about sex with their parents. Also, while sexual behavior may have not been impacted by a lack of sex communication within the family, acculturational conflict did play a significant role in the quality of sex communication between Asian American parents and young adults.

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BACKGROUND

Sex can be an extremely sensitive topic, especially in Asian American households. Despite sex being a natural phenomenon, many Asian Americans perceive sex as an uncomfortable and taboo topic—which can impact how frequently sex is discussed within the home (Kim, 2009). While some Asian American children perceive their parents as "unwilling" to speak about sex, others suggest their parents are "incapable of talking about sexual issues" (Kim, 2009). With such low levels of comfortability in discussing sex, the topic is often ignored, and any dangers associated with risky sex behavior are—at most—implied (Kim, 2009). Because explicit sex education is not being initiated by their parents, Asian American adolescents often rate their sexual health knowledge lower than adolescents from other ethnic groups (Lee et al., 2015). This lack of proper sex communication and education raises significant concerns regarding the sexual health outcomes of Asian American emerging adults. For instance, Asian Americans are least likely to perceive that they are at risk for sexually transmitted diseases (STDs) (Lee et al., 2015). This is especially dangerous because Asian Americans have reported significantly lower rates of human immunodeficiency virus (HIV) and sexually transmitted infection (STI) testing than their non-Asian American counterparts—despite reporting similar rates of risky behavior (Lee et al., 2015). Thus, lower sex education levels and a similar propensity to engage in risky sex may be tied to the lack of parent-child sex communication.

Several studies have found that parent-children communication is a key protective factor that guards against risky sex behavior (Afifi et al., 2008). Much of the current literature has found that the more parents discuss issues, such as sex, pregnancy, birth control and STDs, the more likely their children would "delay their sexual debut" and the less likely they would engage in risky sex behavior (Afifi et al., 2008). However, most of the existing literature assessing

parent-child communication and the sexual behavior of college students is limited to samples consisting of only White or African American students (Lehr et al., 2000). Experiences can vary drastically between the different groups, so additional consideration of specific factors impacting the Asian American adolescent experience would be needed to fully understand the relationship between parent-child communication and Asian American sexual behavior.

A phenomenon that is a key component of the Asian American experience is acculturation. Acculturation is the "process by which migrants to a new culture develop relationships with the new culture," while maintaining elements of their original culture (Tanenbaum et al., 2013, 12). As members of one of the largest and fastest grouping immigrant groups in America, many Asian Americans experience acculturation either as children of immigrants or as immigrants themselves (Lau et al., 2005). Acculturation is not to be conflated with assimilation, which is the "process of cultural absorption of a minority group into the main cultural body" (Tanenbaum et al., 2013, 13). With assimilation, it is implied that the more domineering cultural group enforces the adoption of their values over the cultural minority, as opposed to the blending of values seen in acculturation (Tanenbaum et al., 2013, 13). As such, acculturation can be conceptualized as a gradient—with individuals in their own unique place along a spectrum, after deciding which values they choose to retain from their parent culture and which ones they choose to adopt from the new culture. However, because the acculturation process is so personalized, conflicts can arise and strain relationships when various values from either the parent or new culture misalign or clash between individuals.

These conflicts that arise from acculturation differences can be described using the acculturation gap distress model. Acculturation gap distress refers to conflicts that may emerge in immigrant families when the parent and child "differ in the extent to which they (a) adhere to

their culture of origin...and (b) adopt aspects of their new (host) culture" (Phinney, 2010). These conflicts can range from disagreements about attending a concert to deciding which career Asian American children should pursue in the future (Phinney et al., 2005). The prevailing hypothesis is that family conflict arises, because immigrant children tend to acculturate to the new culture faster than their parents—in other words, Asian American children are often considered more "Westernized" than their parents (Telzer, 2010). Differences in the rate of acculturation can add additional stressors and points of contention to a "normal generation gap," and can result in "greater misunderstandings, miscommunications, and eventual conflicts" within the family (Lee et al., 2000). These conflicts can manifest in worse behaviors in immigrant children; a study done by Chen and his colleagues found that parent-adolescent conflicts in Chinese American families were strongly correlated with school misconduct and both antisocial and at-risk behaviors in Chinese American children (Chen et al., 1998). Thus, acculturation can have an impact on both parent-child communication and adolescent misbehavior; given that parent-child communication can have its own effect on adolescent sex behavior, research on how acculturation, parent-child communication and sex risk behavior all interact should be conducted.

While several studies have examined how adolescent sex behavior is influenced by acculturation or parent-child communication, few have studied how the two factors together impact sex behavior. For example, Yuying Tong studied the relationship between acculturation and sexual health behavior, but excluded the role of parent-child communication (2013). Choosing to exclude parent-child sex communication in his analysis of Asian American sex behavior also meant that this research was largely focused on individual acculturation, instead of acculturation conflict (Tong, 2013). While the study provided much insight on how exposure to

American society impacts Asian American adolescent sexual behavior, Tong disregarded the role that parents also play in the sexual education process. The study completed by Lehr and her colleagues did assess the relationship between parent-adolescent sex communication and risk behavior in adolescents, but they did not factor in how acculturation may impact communication within the family (2000). In this case, acculturation may have not been as relevant to their study, considering their sample consisted mostly of African American participants, who—as a group have resided in the U.S. long enough to report high rates of acculturation across generations (Burnett-Zeigler et al., 2013). One study that did complete research how both acculturation and parent-adolescent communication about sex affected immigrant children focused solely on Filipino American adolescents and chose to analyze their sex education levels, rather than their sex behavior or overall sex risk (Chung et al., 2007). So, while the study established that there was a strong correlation between the two target factors on Filipino American sex education, the researchers did not assess the risk adolescents may experience as a consequence of poorer sexual knowledge. The journey of sexual exploration and education can be a complex and challenging process—especially for Asian Americans, who receive minimal support and guidance at home. This study hopes to combine elements of past studies to perform a novel investigation of the relationship between acculturation, parent-adolescent sex communication and risky sex behavior with the goal of improving sexual education and sexual outcomes in Asian American college students.

METHODOLOGY

Participants

The targeted sample of participants for this survey were University of California,
Riverside (UCR) undergraduate students and recent graduates, who self-reported that they were
of Asian American heritage. Participants had to be 18 years of age or older to submit their
response. Recruitment occurred mainly through e-mail communications from the Health
Professions Advising Center on campus, classroom visits for Asian Studies courses and
promotion to Asian American-registered student organizations. Qualifying participants were able
to complete the survey through the secure platform, Qualtrics, using a non-trackable and
anonymous submission link.

Measures

Demographics

Demographic data, including gender, age, ethnicity, sexual orientation and generation status, were collected from the participants. Participants were also asked if they were currently living with their parents and whether they primarily use English or their parent's native language(s) to communicate with their parents.

Asian American Family Conflicts Scale (AAFCS)

This scale was developed by Lee and his colleagues (2000) to assess acculturation gaps through the lens of family conflict. This scale was designed with Asian American families in mind, using examples of conflicts that were frequent in Asian American households. The various situations focused on "disagreements in values and practices" (Lee et. al, 2000, 212). For example, one scenario that was posed was "Your parents expect you to behave like a proper Asian male or female, but you feel your parents are being too traditional" (Lee et. al, 2000). For

each situation, participants were asked to indicate how likely the conflict was to occur in their family using a 5-point Likert scale ($1 = almost\ never$ to $5 = almost\ always$), as well as the degree to which the conflict posed a serious problem within the participant's family—also assessed using a 5-point Likert scale ($1 = not\ at\ all\ to\ 5 = extremely$). Scores from each subscale were compiled and averaged to yield two separate sub-scores (AAFCS LIKELY MEAN and AAFCS SERIOUS MEAN). Higher scores on both subscales indicated more familial acculturation conflict.

Family Communication About Sex Scale (FCS)

The Family Communication About Sex Scale was adapted from Miller and his colleagues (1998). The scale was composed of questions that assessed parents-adolescent communication about sex and were tailored to minority families. This measure consisted of two parts. The first section asked participants to indicate whether they had ever discussed a given sex topic with their parents; there were a total of nine topics, ranging from sexually transmitted diseases to reproduction. The second section asked participants to evaluate 10 statements about the quality of those conversations on a 4-point Likert scale (1 = strongly disagree to 4 = strongly agree). As an example, one of the statements participants were asked to score was "I can ask my parent(s) the questions I really want to know about [sex] topics" (Miller et al., 1998). Scores from each subscale were compiled separately, yielding two sub-scores (FCS TALK MEAN and FCS QUAL MEAN). Any questions that were asked in a negative manner, such as "My parent doesn't talk to me about [sex] topics; they lecture me," were reversed scored in analysis (Miller et al., 1998). Higher scores on both subscales were indicative of more open and higher quality communication between parents and their children regarding sex. One modification that was made to the original survey was that questions specific to each parent were not asked. Instead of

distinguishing sex communication between the mother and father figure, our survey chose to only ask about communication with "any parent" to shorten the length of the survey.

Sexual Behavior Questionnaire (SBQ)

This sexual behavior questionnaire was developed by Bishop and Lipsitz (1992) to assess the sexual behaviors of college students. It asks simple questions to assess the sexual activities of participants—for instance, have they had sexual intercourse before. Its contribution to this project was to collect data on the general sexual practices of participants.

Sexual Risk Behaviors Scale (SRBS)

The Sexual Risk Behaviors Scale was developed and tested by Fino and his colleagues (2021) to assess the sexual risk behaviors of university students in the United Kingdom (UK). It contains 6 short questions, each targeting a specific risky sex behavior and scored on a 5-point Likert scale (1 = never to 5 = very often). The behaviors they chose to measure were unprotected vaginal sex, unprotected anal sex, unprotected oral sex, sex under the influence of alcohol, sex under the influence of drugs and sex with a stranger (Fino et al., 2021). The scores were compiled and averaged, with higher scores indicating more frequent risky sexual behavior. The scores were also shown to significantly predict the odds of being diagnosed with a sexually transmitted infection within the last year (Fino et al., 2021). Although this measure was tailored to university students in the UK, it proved to have satisfactory reliability and asked questions that were not specific to the sexual behaviors of UK students—thus making those questions generally applicable to American college students as well.

Statistical Analysis

Upon collecting the data through the secure platform Qualtrics, all survey responses were uploaded to the Statistical Package for the Social Sciences (SPSS) software for analysis.

Subscores for each scale were averaged to obtain composite scores. For each of the composite scores, Pearson correlations and independent statistical t-tests were run to test for significance.

RESULTS

Demographics & Scale Scores

In total, 108 responses were collected. However, the total number of responses for each question varied, as participants were given the option to elect not to respond to a given question—these responses were omitted from analysis for that given question. Approximately 63% of participants identified as female, 37% identified as male, and none identified as nonbinary. All participants were above the age of 18, with most being 21 (34%) at the time of survey collection. Many ethnicities were represented in the sample collected, with the three main ethnic groups represented being Filipino Americans (26%), Chinese Americans (23%) and Vietnamese Americans (22%). Additionally, 76% of participants identified as straight, 20% as bisexual, and 1% identifying as gay. Most of the participants also considered themselves second generation immigrants (73%), meaning that they had at least one parent who was not born in the United States. The majority of respondents also stated that they were currently living with their parents (62%). With regards to the primary language of communication used between the participant and their parents, 63% reported speaking to their parents in English, while the remaining 37% use their parent's native language. In terms of sexual activity, only 67% of participants indicated that they have had sexual intercourse before. Table 1 summarizes this demographic data collected.

TABLE 1. Demographic Data		
Variable	N	Valid Percent (%)
Gender		
Male	38	36.9
Female	65	63.1
Non-binary	0	0
Age		
18	6	5.9

19	16	15.7
20	21	20.6
21	35	34.3
22	15	14.7
23	6	5.9
24	1	1.0
25	2	2.0
Ethnicity		
Chinese	25	23.1
Filipino	28	25.9
Hmong	1	0.9
Indian	14	13.0
Japanese	11	10.2
Korean	10	9.3
Taiwanese	5	4.6
Thai	1	0.9
Vietnamese	24	22.2
Sexual Orientation		
Straight	75	75.8
Gay	1	1.0
Bisexual	20	20.2
Uncertain	3	3.0
Generation Status		
1 st	15	14.4
2^{nd}	76	73.1
$3^{\rm rd}$	5	4.8
$4^{ m th}$	5	4.8
Unsure	3	2.8
Are you currently living with your parents?		
Yes	54	62.1
No	33	37.9
Primary Language of Communication		
Parent's native language	33	36.7
English	57	63.3
Have you had sexual intercourse?		
Yes	56	66.7
No	28	33.3
	•	

As detailed in Table 2, on average, respondents reported relatively low levels of familial conflict, as well as low levels of sex communication. On the AAFCS—Likelihood subscale, participants had a mean of 2.69, meaning that the likelihood of various conflicts arising within their family ranged from "once in a while" to "sometimes." On the AAFCS—Seriousness subscale, participants had a mean of 2.30, indicating that the degree to which conflicts posed serious problems within the family ranged from "slightly serious" to "moderately serious." As for the FCS—Talk subscale, respondents reported that, on average, they had only spoken with

their parents on 2 or 3 of the 9 sex topics presented (M = 2.45). The quality of those conversations or the approach in which their parents would initiate them, measured by the FCS—Quality subscale, was reported to have an average of 1.9—meaning that most disagreed that their conversations with their parents were open and receptive. This sample population was also very low risk, in terms of their sexual behavior. With a mean of 1.57 on the SRBS scale, participants had "never" or "rarely" engaged in risky sex behavior.

TABLE 2. Descriptives of Each Measure									
	N	Mean	Std. Deviation						
AAFCS – Likelihood	91	2.69	0.90						
AAFCS – Seriousness	91	2.30	0.82						
FCS – Talk	91	2.45	2.40						
FCS – Quality	91	1.9	0.60						
SRBS	86	1.57	0.62						

Pearson Correlations and Independent T-Tests

Pearson correlations were also performed. Significant negative correlations were found between the means of the AAFCS—Seriousness and FCS—Quality scales (r = -0.289, p < 0.01) and the means of the AAFCS—Likelihood and FCS—Quality scales (r = -0.324, p < 0.01). There were also significant positive correlations identified between the means of the AAFCS—Seriousness and AAFCS—Likelihood scales (r = 0.91, p < 0.01) and between participants ever having sex and the SRBS scale (r = 0.667, p < 0.01). No other Pearson coefficients were found to be significant with a p-value less than 0.05. These findings are summarized in Table 3.

TABLE 3. Bivariate Pearson Correlations Between Different Measures										
Scales/Factors	AAFCS - Likelihood	AAFCS - Seriousness	FCS - Talk	FCS - Quality	Have you had sexual intercourse?	SRBS				
AAFCS – Likelihood	_	0.910*	-0.195	-0.324*	0.033	0.042				

AAFCS – Seriousness	_	-0.199	-0.289*	0.062	0.060
FCS – Talk		_	0.451*	0.105	0.167
FCS – Quality			_	-0.014	0.026
Have you had sexual intercourse?				_	0.667*
SRBS					
* <i>p</i> < 0.01					

Several independent t-tests were also performed between various binomial variables and the measures used in this survey (Table 4). When looking closer at several sex topics from the FCS--Talk subscale, participants with parents, whom they have discussed contraceptives, reproduction and when to start having sex, were found to have rated their conversations about sex as more open and receptive than those who did not discuss those topics with their parents (p < 0.02). For participants that reported that they had discussed reproduction and/or having babies, they were also found to experience less acculturation conflict on both the AAFCS—Likelihood and AAFCS—Seriousness subscales (p < 0.05) compared to those who have not discussed the topic with their parents.

TABLE 4. Independent T-Tests									
	Co	ntraception [Гalk		No C				
	N	Mean	SE		N	Mean	SE	<i>p</i> -value	
FCS – Quality	33	2.19	0.10		58	1.74	0.07	< 0.001	
	Reproduction/Baby Talk				No Reproduction/Baby Talk				
	N	Mean	SE		N	Mean	SE	<i>p</i> -value	
AAFCS –	44	2.50	0.14		47	2.86	0.12	0.03	
Likelihood									
AAFCS –	44	2.13	0.13		47	2.46	0.11	0.02	
Seriousness									
FCS – Quality	44	2.04	0.08		47	1.77	0.09	0.02	
	"When to Start Sex" Talk				No "Wh	en to Start S	ex" Talk		

N

62

Mean

1.78

SE

0.07

p-value

0.001

SE

0.10

N

29

FCS – Quality

Mean

2.17

For the variable, in which participants were asked whether they were currently living with their parents, those that lived with their parents discussed significantly more sex topics, had higher perceived quality of sex conversations with their parents, and engaged in less risky sex, compared to those who were not living with their parents ($p \le 0.05$; Table 5).

TABLE 5. Independent T-Test for "Living with Parents"									
	Living with Parents Not Living with Parents								
	N	Mean	SE	N	Mean	SE	<i>p</i> -value		
FCS – Talk	49	2.80	0.36	30	1.83	0.41	0.04		
FCS – Quality	49	1.98	0.08	30	1.74	0.12	0.05		
SRBS	47	1.49	0.08	29	1.76	0.12	0.03		

The language in which participants communicated with their parents was also shown to play a role in the number of sex topics that were discussed; participants who communicate with their parents primarily in English had discussed approximately 3 health topics, while those who communicate using their parent's native language only discussed about 2 health topics with their parents (p = 0.04; Table 6).

TABLE 6. Independent T-Test for "Primary Language of Communication"									
Communicate in Parent's Native Language					Comn	nunicate in E	English		
	N	Mean	SE		N	Mean	SE	<i>p</i> -value	
FCS – Talk	33	1.82	0.34		57	2.75	0.34	0.04	

DISCUSSION

Findings show that both frequency and quality of parent-child sex communication were fairly low among Asian American college students, and acculturational differences played a significant role in contributing to poor sex communication. On average, participants were sometimes likely to experience familial acculturation conflict, and the seriousness of potential problems that arise from those conflicts was found to be slightly or moderately serious. Although

the means for both generally indicate low acculturation conflict, results from both subscales were shown to have a significant relationship with the quality of sex communication between Asian American college students and their parents. These significant results from the Pearson correlation are consistent with the study hypothesis that acculturational differences can be associated with poorer sex communication; that is, the more likely participants experienced acculturation conflict and the subsequent problems that arose from them, the lower they rated the quality of their sex conversations with their parents. This finding is also consistent with other studies reporting the lack of sufficient sex communication among Asian American families (Kim, 2009). While many interventions that are currently being developed to improve parentchild communication concentrate efforts on improving parent knowledge about sex, the significant relationship between acculturation and poor sex communication suggests that a better starting point for Asian American families may be addressing acculturation conflict (McKay & Fontenot, 2020). For example, tackling acculturation conflict may help shift adolescent preferences away from wanting to receive sexual education in their schools to wanting it from their parents—as minimizing conflict can make the home environment much more welcoming and facilitate proper and complete discussions about sex (Lee et. al, 2013). It may be worth investigating and developing such strategies that address acculturation conflict directly if researchers and policy makers want to develop tailored interventions to improve sex communication among Asian American families.

The sample was also very low risk, considering that Asian Americans were thought to have similar risky sex behavior when compared to their non-Asian American counterparts (Lee et al., 2015). With a mean score on the SRBS of 1.5, participants reported rarely engaging in risky sex behavior. Having a sample that was so low risk for sexual behaviors could explain why

no significant relationships were found between sex risk and the acculturation conflict or sex communication scales. The only correlation for which the relationship was positively significant with risky sex behavior was for the variable asking participants whether they have had sex. However, this was expected, as one must have had sex before engaging in risky sex behavior. Nevertheless, the potential for high levels of sex risk behavior in Asian American college students should not be fully dismissed; obtaining a larger and more comprehensive sample may shed more light on the true relationship between sexual risk behavior and acculturation and/or poor sexual communication among Asian American families. Other positive significant relationships were found between subscales of the same scale (i.e. AAFCS—Likelihood and AAFCS—Seriousness), which can be interpreted as a form of validation for the scales used in this study.

As for specific t-tests that were carried out for key variables, a general comparison between participants who have spoken about a given sex topic and those that have not revealed that those who have talked to their parents about a particular sex topic at least once reported higher quality conversations about sex with their parents. Talk of contraception, reproduction and when to start having sex all resulted in higher ratings from participants; this suggests that when sex topics were initiated among immigrant families, participants were more receptive and appreciative of the content than those who did not have the chance to discuss those topics with their parents. This is a key finding that suggests that Asian American parents should try to overcome their fears or hesitancies of initiating conversations about sex topics, as it can encourage quality conversations in the long run.

With regards to the variable asking whether participants were currently living with their parents, it was expected that individuals not currently living with their parents were engaging in

riskier sex. However, while the t-test did return as significant, the differences between both groups was relatively minimal, considering that those who were living with their parents and those who were not both had SRBS means that ranged between "almost never" and "rarely" had risky sex. It was also expected that those living with their parents were likely to engage in approximately 1 more sex topic with their parent and perceive their sex communication as higher quality than those who were not living with their parents. This suggests that more contact and proximity with their parents allows for more conversations about sex to be initiated and for those conversations to be received better by Asian American children. To improve sex communication for those who do not currently living with their parents, more phone calls or visits to maintain consistent contact might encourage more fruitful conversations within Asian American families around sex.

One last finding was that participants who communicated with their parents in English were more likely to discuss more sex topics than those who communicated with their parents in their native language. Generally, 65% of U.S-born Asian Americans only speak English at home, while only 34% of their non-U.S.-born parents speak English at home (Budiman & Ruiz, 2021). Despite the language barriers, this finding suggests that when parents made the effort to speak in English—their child's preferred language—they were able to initiate more conversations about sex with them than in families that primarily communicated in their native, non-English language. For Asian American families that struggle to effectively use English as a main form of communication, perhaps the development of English-learning resources catered to sexual education can be provided to Asian American parents to mediate effective sex communication within the family.

Limitations & Future Directions

This study had several limitations. Participants were largely recruited at UCR, so the pool of Asian American participants sampled may not have been representative of Asian American college students nationally. This may have also been the reason as to why our sample reported very low rates of sex risk behavior; as a result, future research should consider expanding survey reach to gain a more comprehensive understanding of the sexual risk behavior of Asian American college students. Second, although the measures selected to be a part of this study's survey were tailored to Asian Americans and/or minority groups, aggregating the experiences of all Asian Americans and minorities under a single scale can mask the nuances that members of a particular ethnicity face in parent-child communication or in their sexual behaviors. For instance, the acculturation experience can differ between East Asians and Southeast Asians—since members of the former group mostly came to the U.S. as immigrants, while members of the latter group largely entered the U.S. as refugees of war (Kula et al., 2021). While asking participants to disclose their ethnicity was included to resolve this limitation, no ethnic group in this study met the sample-size threshold to allow for disaggregated analyses by Asian American ethnicity. As a result, future researchers may want to explore and develop specific acculturation measures tailored to the experiences of specific Asian ethnicities. Third, the use of scales, in general, may not be as comprehensive as other data collection methods, such as interviews. Although Likert-scales were defined for each scale, variables like "moderately serious" or "somewhat likely" are ultimately relative, and differences in interpretation between participants may have skewed data results. Although interviews may be more time consuming, they may offer a more thorough understanding of the communication dynamics between Asian American college students and their parents. Finally, while this study sought to investigate the effects of

acculturation on parent-child sex communication, only the child's perspective was shared in this study. Future research should explore Asian American parents' perspectives in initiating or engaging in conservations about sex with their children and how they believe their words—or lack thereof—are impacting the sexual behaviors of their children.

CONCLUSION

Sex is an especially difficult topic to discuss among Asian American families, and acculturation conflicts can further complicate those conversations. Acculturation conflict has been shown to have significant effects on familial sex communication, so finding ways to bridge the gap between Asian American parents and their children may help destigmatize sex among families. If these communication gaps are not resolved, Asian American adolescents may be at risk of engaging in poorer sexual health outcomes. While the findings of this study did not indicate any correlation between sex risk behavior with either acculturation or poor sex communication, existing literature strongly suggests researchers to still be wary of the effect acculturation and poor sex communication may have on the sexual behaviors of Asian American young adults and to develop potential interventions. Implications between acculturation conflict and poor sex communication may also exist for Asian American parents, who may be struggling to initiate tough conversations for a topic they were also conditioned to ignore or silence. Thus, there is a strong need for strategies that either resolve acculturation conflicts or improve familial sex communication, specifically among Asian American families, if researchers and policymakers hope to effectively support Asian American adolescents and young adults in their sexual development and exploration journeys.

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