

Fall 2007

Adolescent Males Involvement in Pregnancy Prevention: Deliberate Action to Protect Future Goals

Judy Didion

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ADOLESCENT MALES INVOLVEMENT IN PREGNANCY PREVENTION:
DELIBERATE ACTION TO PROTECT FUTURE GOALS

A Dissertation

Submitted to the School of Nursing

Duquesne University

In partial fulfillment of the requirements for
the degree of Doctor of Philosophy in Nursing

By

Judy Ann Didion

December 2007

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Judy Ann Didion

December 2007

**Duquesne University School of Nursing
PhD Program**

APPROVAL OF FINAL DEFENSE OF DISSERTATION

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DATE OF ADMISSION: August, 2001

DISSERTATION TITLE: **ADOLESCENT MALES INVOLVEMENT IN
PREGNANCY PREVENTION: DELIBERATE ACTION TO PROTECT
FUTURE GOALS**

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ABSTRACT

ADOLESCENT MALES INVOLVEMENT IN PREGNANCY PREVENTION: DELIBERATE ACTION TO PROTECT FUTURE GOALS

By

Judy Ann Didion

December 2007

Dissertation Supervised by Professor Rick Zoucha PhD, APRN, BC, CTN

The purpose of this qualitative study was to explore the process of adolescent male involvement in teen pregnancy prevention. Grounded theory method was used to discover the meaning of pregnancy prevention from the adolescent male perspective. Individual interviews were conducted with eighteen 18-year old boys who were seniors in high school. The data collected from the interviews were analyzed using constant comparison and theoretical sampling techniques. The concepts and constructs which emerged from the data analysis depict the social processes of adolescent male relationships in regards to pregnancy prevention.

The findings revealed that these adolescent boys were very involved in the process of teen pregnancy prevention and that they assigned meaning to their experiences with pregnancy risk and prevention within the context of social norms, academic

environment, culture and religion, and societal myths and preconceived notions. Through the psychosocial processes of becoming aware, having goals for the future, being prepared, avoiding risk and using protection, these boys carried out strategies to avoid teen fatherhood.

The substantive theory of 'deliberate action to protect future goals' was derived from the relationships of the concepts that emerged from the data. The study revealed that the boys associated pregnancy prevention with a means to protect and preserve their future goals. This theory explains how these boys managed pregnancy risk. The findings from this study have important implications for adolescent male health services, nursing practice, and public health program planning and policy development.

DEDICATION

I would like to dedicate this study to my husband, Paul Belazis, who has always supported my ambitions for over 25 years. During this dissertation process, he extended his duties as father, editor and husband. Words alone cannot express my appreciation.

I also dedicate this dissertation to my parents, Jerry and Irene Didion. Without the confidence they instilled in me, I could not have fathomed this accomplishment.

I would also like to dedicate this dissertation to my children Thomas Belazis, Michael Belazis and Katie Belazis. They are most important and they are my future. They have given me the joy, grounding and stamina to succeed in life.

Finally, I would like to dedicate this dissertation to all the teenagers who are stumbling through adolescence trying to get it right. May they all grow up to be successful, happy adults.

ACKNOWLEDGEMENT

First, I would like to acknowledge St. Vincent School of Nursing Alumni Foundation and the Zeta Theta Chapter of Sigma Theta Tau International for partially funding this research study. Their support was greatly appreciated.

I would also like to acknowledge my dissertation committee. Dr. Rick Zoucha, my chairperson, ignited the spark for my pursuit in nursing research and provided continuous encouragement along the way. Dr. Pat Fedorka was my first contact at Duquesne and stayed by my side until the end. Dr. Kristy Martyn taught me the essence of grounded theory method. She encouraged me to take the data analysis to a level I could not fathom and her kind, collegial spirit made this process enjoyable and satisfying. I could not imagine a better dissertation committee.

I would like to acknowledge my colleagues who inspired my work with teens. My friend and mentor, Helen Gatzke, lured me into public health, taught me the political ropes and trusted me to succeed. I also acknowledge Ann Locher, who shared her vision for adolescent health and provided me the opportunity to be a part of it. I also acknowledge Kate Malone for her constant encouragement, her extraordinary willingness to provide resources for my research and her never ending love for adolescent boys.

I would also like to acknowledge, Marcia Strall, my best friend, who shares my teenage memories and "the group" who has been cheering me on for over 32 years.

Finally, I want to acknowledge my friend, work colleague and fellow student, Mallie Kozy. The deep conversations, travels to Pittsburgh, late night phone calls, encouragement, consolation, and prodding made this accomplishment attainable and a pleasure. Her loyal support during this six year journey will always be remembered.

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Chapter 1

Introduction

1.1 Introduction

The rate of teen pregnancy and births to teens in the United States declined modestly during the past decade but still exceed that of other industrialized nations (Wertheimer and Papillo, 2004). Since 1991, the percentage of high school students who have had sex decreased from 54 percent to 46.7 percent (Grunbaum et al., 2004).

Although this trend is good news, the level of sexual activity among teens remains high and the risk of an unintended pregnancy continues to be a public health concern. Twenty seven percent of males do not use any protection with first intercourse (Alan Guttmacher Institute, 2002) and 30 percent of males have had six or more sexual partners by their late teens (Sonenstein, 1997).

Nearly 820,000 teenagers become pregnant each year. Eighty percent of these are unintended (National Campaign to Prevent Teen Pregnancy NCPTP, 2005). Fifty percent of adolescent pregnancies occur within the first six months of initial sexual intercourse (Felice, Feinstein, Fisher and Kaplan, 1998). Eighty-one percent of unintended pregnancies result in births to single mothers. Pregnant teens are more likely to drop out of school and experience economic difficulties in their future. Their babies are at increased risk of low birth weight, insufficient health care, growing up without a father, experiencing poor school performance, and being abused and neglected (NCPTP). A teen mother's son is

13 percent more likely to end up in prison and her daughter is 22 percent more likely to become a teen mother (NCPTP).

In the 2006 Youth Risk Behavior Surveillance, a biennial, randomized, national survey conducted by the Center for Disease Control and Prevention, 63.8 percent of all 12th grade teens reported having had sexual intercourse at least once; 62.3 percent females and 60.7 percent males (Grunbaum et al., 2004). Over 14 percent reported four or more sexual partners. Of those that reported being currently sexually active, 63 percent reported that either they or their partner had used a condom during last sexual intercourse. Overall the prevalence of using a condom was higher with 9th grade (69%) and 10th grade (69%) teens than 11th grade (60.8%) and 12th grade (57.4%) teens. In contrast, the use of birth control pills is higher among 11th grade (19.6%) and 12th grade (22.6%) teens than 9th grade (8.7%) and 10th grade (12.7%) teens (Grunbaum, et al).

1.2 Background of Study

Many programs and efforts have been initiated to reduce the rate of adolescent pregnancy in the United States (Franklin and Corcoran, 2000). These programs, however, focus on the female's responsibilities in pregnancy prevention without giving critical consideration to the male partner's involvement in prevention (Ndong, Becker, Haws, and Wegner, 1999). Male involvement in the process of prevention has not been legitimately addressed in the literature or in prevention program planning. Some published research has suggested that teen pregnancy prevention initially focused on females because the pregnancy clearly and immediately affected the lives of these young women (Sanchez-Flores, 2003). One author suggested that males were regarded as irrelevant or viewed as the enemy (Gottsegen and Philliber, 2001). In 1991, Meyer

conducted a systematic review of 71 published articles examining gender and race bias in published research on adolescent pregnancy prevention. Of the 33 articles that focused on single gender, only one was on males. According to Meyer (1991), the research ignored and even minimized the male's contribution to the problem of adolescent pregnancy. Since 1991, the literature has continued to document the absence of adequate research, information or planning related to adolescent male involvement in pregnancy prevention (Sonenstein, 1997).

Scholarly papers have described a “glaring gap” in pregnancy prevention efforts involving teen males and the “lack of systematic information about how males could and should participate in pregnancy prevention efforts” (Sonenstein, 1997, p.1). Recently, the Healthy Teen Network (2005) formerly the National Organization for Adolescent Pregnancy Prevention and Parenting, published a policy statement on the sexual and reproductive health needs of young men and an extensive report that addresses how boys and men factor into teen pregnancy trends. They concluded that the historical emphasis for teen pregnancy prevention has been on reproductive health of females and consequently, they found there is a need to collect high quality data about the experiences of young males' sexual relationships. This data can be used to better understand how to influence teen males' behaviors and to further reduce the rate of teen pregnancy (Marsiglio, Ries, Sonenstein, Troccoli, and Whitehead, 2006).

1.3 Purpose and Aims

The purpose of this qualitative grounded theory research study is to explore the process of adolescent male involvement in pregnancy prevention. The aims of the study are to understand how teen males participate in reducing the risk of an unintended

pregnancy, to explore what adolescent males perceive to be their involvement in decision-making related to the risk of pregnancy, and to develop a more inclusive theory of male involvement in teen pregnancy prevention.

1.4 Research Questions

The proposed research questions for this study are:

1. What is the psychosocial process of adolescent male pregnancy prevention?
2. What do adolescent males perceive to be their involvement in preventing an unintended pregnancy?

1.5 Significance to Nursing

For decades teen pregnancy has been a significant public health issue (Felice et al., 1998; Franklin and Corcoran, 2000; Guttmacher, 2002; Moore and Sugland, 1996; NCPTP, 2005). Nurses have historically tackled this issue in the schools, homes and clinics by providing primary level interventions that educate parents and teens about human sexuality, communication and decision making skills and the risks and consequences of unintended pregnancies. Teen pregnancy can have devastating effects on the physical health, mental health and general well being of adolescents and infants. The short and long-term health repercussions of a teen pregnancy can be staggering and last a lifetime for the teen and baby (NCPTP, 2001) as well as the community. Teen pregnancies result in welfare dependence and poor school performance. It is estimated that every year taxpayers spend \$6.9 billion dollars (\$2,831 per teen parent) on teen childbearing (NCPTP, 1997). The document, Healthy People 2010, outlines goals to improve community health by reducing the rate of teen pregnancy from 68 per 1000 pregnancies to 48 (United States Department of Health and Human Services, 2000).

Since the onset of the HIV epidemic, intense research has been carried out to identify risk and protective factors for teens, and best practices for adolescent sexual risk reduction (Kirby, Lepore and Ryan, 2005; Kirby, 2001). Public health and school nurses have often spearheaded, planned and carried out these prevention programs.

In addition to education, nurses are intensely involved in the care of teen mothers and their babies after delivery. Because of the complexity of teenage parenting and the severe potential health and social consequences that the teen mother and infant may experience, public health nurses continuously tend to this vulnerable population through clinics and home visits by providing support, education, referrals and reproductive services. The ultimate goals for nursing care include physical and emotional health for the mother and infant and the prevention of a second teen pregnancy.

Since the 1990's, there is increased awareness of the profound effects teen pregnancy has on teen fathers. The question of why males had been typically excluded from pregnancy prevention programs remains a puzzle since sexual activity involves two partners (Sonenstein, 1997). Without the involvement of both genders, teen pregnancy prevention efforts will continue to meet obstacles. There is a need for male focused programs that emphasize prevention of unintended pregnancies (Moore and Sugland, 1996). Some suggest that male involvement in family planning provides a sense of commitment and responsibility if there are unintended consequences (Sonenstein, 2000).

Nursing care services traditionally have focused on female reproductive services and mother-baby care; however, recently nurses are providing more male reproductive health services because of the rise in sexually transmitted infections. In addition, school health programs provide nurses with an avenue to educate adolescent males about

reproductive health and pregnancy prevention. Currently, schools and television are reported to be the primary sources of contraception information for males (Sonenstein, 1997). Nurses need to be involved in assuring that these health messages are accurate and appropriate for teen males.

Research on teen male involvement in pregnancy prevention will provide nurses a greater understanding of the social processes related to prevention. It can provide new information about the dynamics of adolescent relationships and how males involve themselves in preventing an unintended pregnancy. This information could become the basis for new theory generation about teen pregnancy prevention and guide nurses and health care providers in their practice.

1.6 Operational Definitions

Adolescent Males: Males who are 18 years old and in high school.

Sexual risk: Any behavior that increases the chance or probability of an unintended pregnancy.

Prevention: Any behavior that decreases the chance or probability of an unintended pregnancy.

1.7 Assumptions

Informants in this study will answer questions honestly.

People who share a common circumstance will experience common meanings and behaviors (Hutchinson, Marsiglio and Cohen, 2001).

People order and make sense of their environment (Hutchinson and Wilson, 2002).

Understanding social psychological processes is the key to understanding behavior and social phenomena (Eaves, 2001).

1.8 Limitations

Because of the nature of this methodology, the findings of this study are specific to the population studied and can only be applied to the situations for which the grounded theory was generated (Glasser and Stauss, 1967).

In summary, adolescent pregnancy has long term devastating effects on the health and welfare of infants, teens and communities. Understanding adolescent male involvement is an essential step for nurses to plan and implement effective prevention programs for teens in the United States. Male involvement has been largely ignored as an important part of the solution to the problem of unintended teen pregnancies. This author proposes a qualitative grounded theory research study for the purpose of exploring teen male involvement in the prevention of an unintended pregnancy. These findings will generate substantive theory that will contribute to nursing knowledge about adolescent pregnancy.

Chapter 2

Review of Literature

2.1 Introduction

The literature related to teen male involvement in pregnancy prevention was reviewed from 1985 to 2006. This time period corresponds with the onset of the HIV epidemic which served as an impetus for research examining the role of males in sexual decision-making and contraceptive use (Edwards, 1994). It also corresponds with the period of time when teen birth rates peaked in the United States (NCPTP, 2001). These two factors, the HIV epidemic and soaring teen birth rates, stimulated a growing concern about adolescent sexual health resulting in the development of teen pregnancy and sexually transmitted infection (STI) prevention program planning, and numerous research studies that examined adolescent sexuality and sexual risk prevention program effectiveness (Kirby, 2001). During this period of time social scientists and public health officials began to critically think about reproductive health for men and their involvement in STI and pregnancy prevention (Sonenstein, 1997).

This review is presented by conceptual areas commonly discussed in the literature related to male involvement in teen pregnancy. These areas include adolescent development, adolescent male sexual activity patterns, gender role differences, teen male access to reproductive services and information, male contraceptive use, and male sexual decision making. The research studies and position papers described in these sections provide the background for the research questions and a basis for the need to explore the

social psychological processes of teen male involvement in pregnancy prevention. They cover experiences, strategies, decision making and relationship interactions and their influences on male pregnancy prevention.

2.2 Adolescent Development

To appreciate the literature specific to adolescent males and pregnancy prevention, it is important to understand the dynamics of adolescent development and how it may influence sexual behavior. Between the ages of 12 and 19, teens experience intense social, cognitive and physical changes resulting from normal growth and development. Although this developmental process continues into the teen's early 20's, the combination of these simultaneous changes creates a sense that human sexual development is most obvious and dramatic during adolescence (Steinberg, 2005).

Most recently, scientists have focused on the changes that occur within the brain during this time of life. The neurological developmental process within the brain can account for many social and emotional changes experienced by teenagers. Between early and late adolescence, the brain undergoes profound growth and eventually becomes more complex and efficient. When examined through Magnetic Resonance Imaging, the brain of a teen in early adolescence appears very different from that of a teen in late adolescents. The prefrontal lobe, which is responsible for higher order functions such as organizing, prioritizing, strategizing and impulse control, is the last part of the brain to fully mature (Weinberger, Elvevag, and Giedd, 2005). Consequently, the teen's ability to think abstractly, hypothetically and reflectively becomes more apparent when a teen reaches the age of eighteen and older (Steinberg, 2005). These cognitive changes

influence their ability to make sexual decisions, set future goals and to understand their own motivations and behaviors (Weinberger et al.).

In a qualitative study by Monsen, Jackson and Livingston (1996) students age 12 to 14 agreed that postponing sexual activity or using protection meant having a future. Yet, another author studied teen behavior at that age and concluded that adolescents who are aware of the risks and consequences of sexual activity continue to take sexual risks (Chapin, 2001). These studies and statistics suggest that what teens know does not always translate into what they do. The relationship between adolescent thoughts and behaviors is complex. It is very important for health care providers to consider adolescent developmental level and how this influences thought processes when planning a health education campaign.

Cognitive changes during adolescence influence the social patterns of teens. An example of social pattern change is the manner in which teens conduct peer relationships. During early adolescence, group peer relationships are very important. In late adolescence, however, the teen begins to gravitate toward intimate individual friendships and relationships with the opposite sex. The teen also shifts from egocentrism to a greater awareness of the world around them. They begin to demonstrate empathy, introspection, consequential thinking and the ability to consider their future.

Along with these social and cognitive changes, teens experience a physical metamorphosis called puberty. They develop secondary sex characteristics and experience sexual feelings and arousal. Many adolescents begin to explore romantic relationships and experiment sexually. For some teen males, sexual intercourse is considered the hallmark to becoming a man (Bell, 2003; Marsiglio, 2003).

There are many factors that influence how a teen moves through this stage of their life. Some of these factors are intrinsic factors such as the teen's communication skills, educational level, mental and physical wellness, self esteem and interpersonal skills. Other factors are extrinsic or environmental such as family influence and support, community support, peer influence, access to information, and availability of reproductive health care (Bell, 2003; Kirby et al., 2005). These intrinsic and extrinsic factors can nurture or inhibit teen development depending upon their positive or negative influence. Consequently, adolescent health and social issues such as teen pregnancy are considered multifaceted.

Spear and Kulbock (2001) reviewed 34 research studies relevant to adolescent health behaviors and concluded that health behavior during adolescence is a multidimensional and complex phenomenon that is influenced by a number of factors such as gender, family structure, peer relationships, personal knowledge, values, age and vulnerability (p.91).

Marsiglio, Hutchinson and Cohan (2001) studied adolescent male social development and focused on the concept of males as procreative beings. They explored the subjective experiences of males as procreative beings in a grounded theory study that included 37 single males ages 16 to 30. This study examined how males become aware of their perceived fecundity, experience themselves as procreative beings and view responsibility. They found that males' procreative consciousness evolves and that they become more aware as they age, talk with friends, attend sexuality education, read books, observe others and accumulate experiences with romantic relationships. The authors

observed that males vary considerably in their procreative feelings and thoughts and their sense of procreative responsibilities.

Adolescent development is an important aspect of adolescent behavior.

Understanding the complexity of the process of adolescent male development provides a basis for understanding their behavior and their role with pregnancy prevention. It is important to take into consideration how adolescents and adults vary and to further explore the turning points in a male's experience that influence sexual responsibility.

Understanding the social psychology of how males develop and perceive their fecundity, and how they learn to negotiate sex, contraception, pregnancy, abortion and fatherhood is critical to the study of both unintended pregnancy and childbearing among young persons who may be ill-prepared to face the demands of full-time parenting. (Marsiglio et al., 2001, p.124).

2.3 Adolescent Male Sexual Activity Patterns

Nationwide, 45.6 percent of high school students in the United States report having engaged in sexual intercourse. Males supercede females and they are significantly more likely than females to have had four or more partners in their lifetime (Grunbaum et al., 2004). Beginning in the 1990's, published position papers and research articles led to an increased public awareness of the importance of male involvement in sexual risk reduction programs. Conclusions from this literature inspired a new campaign that questions current sexuality education programs and reproductive health services for males.

Although the trends of sexual activity for teen males show a decline, surveys and other research studies conclude that male teens continue to participate in high risk sexual

activity. Sexual activity data from the 2002 National Survey of Family Growth showed that 15 percent of boys report having sex before the age of 15 and 26 percent of 15 to 19 year old males who participated in this survey had sex at least four times in the past four weeks prior to their participation (NCPTP, 2004). There seems to be a significant change in sexual patterns after the age of 17 for adolescent males. Bell (2003) concluded that 49 percent of adolescent males have their first sexual experience during their teenage years, usually between ages 16 and 17 and their first partner is close to their own age. He found that only three percent of males, ages 15 to 19 years old have ever fathered a child. When this age group is broken down, however, 18 to 19 year olds have fathered a child at a rate 10 times greater than that of 15 to 17 year olds. This suggests that pregnancy prevention behaviors change for males in late adolescence.

Edwards (1994) has suggested that if men are not involved in contraceptive decisions, they might not feel as responsible for supporting a child after the fact. The United Nations Population Fund (1995) concluded that if men are provided information about prevention and contraceptives, they are more likely to be supportive of their partner's family planning decisions. Sonenstein (1999) published a paper claiming that male involvement is the key to prevention of unintended pregnancies and to future attitudes and behaviors of male teens toward responsibilities of fatherhood. Male involvement is not well understood and the emphasis on its importance is a recent phenomenon (Sonenstein, 2001). Until 2002, only females were included in some major teen sexual behavior surveys such as the National Survey of Family Growth reported by the National Center for Health Statistics (NCPTP, 2004). The historical absence of

national data collection prevented males from being considered an important element in adolescent pregnancy prevention.

Fortunately, institutions such as the Urban League did conduct surveys that provided data on the dynamics of male sexual activity patterns and trends in the 80's and 90's. One important survey, The National Survey of Adolescent Males (NSAM), was distributed in 1988 and 1995 (Urban Institute, 1998). The 1995 NSAM data illustrated that the percentage of male teens who have had sexual intercourse had declined since 1988. In addition, more male teens reported using contraception during their first sexual intercourse experience. These trends paralleled the declining national rate of teen pregnancy in the United States (Sonenstein, Ku, Lindberg, Turner, and Pleck, 1997).

According to some researchers, the cause for the decline in sexual activity has been attributed to the AIDS epidemic and the public awareness associated with this public health issue. Others attribute this change to shifting attitudes about premarital sex and the choice to remain abstinent until marriage (Ku, Sonenstein, Lindberg, Bradner, Boggess and Pleck, 1998). Marsiglio et al. (2006) pointed out that the dramatic reductions in teen pregnancy can be attributed, in part, to the changing patterns of adolescent male sexual activity; the proportion of sexually active teen males has decreased in the last decade.

2.4 Gender Role Differences

Many of the published articles confirm that there is a difference between teen male and female patterns of sexual activity. Gender has been consistently associated with teens' intentions to engage in sexual activity and their use of contraception. There are differences between males and females in attitudes about teen relationships,

contraception, motivation and perception of consequences related to sexual activity (Nahom, Wells, Gillmore and Hoppe, 2001). The reason for these differences is not clearly understood.

Overall, male students in high school are more likely to have sex than female students. They are also more likely to have more frequent sex; four or more partners, and more likely than females to have overlapping sexual relationships (NCPTP, 2003; Kaiser Foundation, 2002; Klitsch, 2002)

One study by Nahom et al. (2001) found that more boys than girls reported having engaged in sexual intercourse at an earlier age but that girls exceeded boys in 10th grade. The author suggested that girls may have more family or community support than boys in delaying intercourse until a later age and that boys experience a different pressure. The findings imply that girls and boys may experience different social processes regarding the initiation of sexual intercourse and they need different information and skill training when learning about prevention. A better understanding of these social processes is important for gender specific pregnancy prevention program development.

Overall 14 percent of sexually experienced teen males ages 15 to 19 have reported getting a girl pregnant. This report varies according to ethnic background: 22% African American, 19% Hispanic and 10% Caucasian. In 1995, 40 percent of teen males expressed the belief that getting a girl pregnant makes one feel like a man (Sonenstein et al., 1997). In a different survey, however, only four percent of adolescent men report that getting someone pregnant would make them feel like men (Alan Guttmacher, 2002). There are conflicting reports in these two surveys.

Attitudes about sexual risk and the consequences of an unintended pregnancy also seem to differ between males and females. More girls than boys think about what life would be like if there was a pregnancy and half of males age 12 to 19 agreed that teen boys often hear the message that an unintended pregnancy is not a big deal (NCPTP, 2003). Teenage boys are more likely than teen girls to think that it is embarrassing for teens to admit that they are virgins (24% vs. 14%) (NCPTP 2002) and males report feeling more pressure to have sex than their female peers (NCPTP, 2003). These differences in attitudes may influence how the two genders approach family planning decisions and sexual risk taking.

Jensen, DeGaston and Weed (1994) found that teen males identified more social pressures encouraging sexual activity while females reported social pressures to remain abstinent. The study did not elaborate on the reasons for this perceived pressure.

In this same study, females felt sexual activity would affect their future goals. This was not a major concern for the males. Other research studies suggest that teen females feel more responsibility because of their perceived role as the primary infant caregiver. Their perception of the consequences of an unintended pregnancy is much different than the male's perception. A qualitative phenomenological study found that males and females perceived pregnancy prevention activities from different perspectives. Focus groups revealed that male teens were less serious than the females about the prevention program (Didion & Gatzke, 2004). Findings from other focus group studies concluded that both males and females assert that males think less about pregnancy prior to having sex than do females (Sugland, Wilder & Chandra, 1997).

The literature suggests that the basic conditioning factor of gender influences the outcome of sexuality education and prevention programs. Although there is an unstated consensus that gender is a meaningful category by which adolescent sexual behaviors can be distinguished, it is important to recognize that gender specific behavior is grounded within biological and social characteristics. There are many questions about what shapes gender differences and what determines masculine and feminine norms. Social context and culture are major contributing factors in these differences. One author proposes that researchers move beyond gender differences and focus on how gender promotes or undermines adolescent sexual health in the United States (Tolman and Harmon, 2003).

Experimental research studies evaluating teen pregnancy prevention educational programs have suggested that program effectiveness differs for males and females (Manlove, Terry-Humen, Papillo, Franzetta, Williams & Ryan, 2001). The CAS(Children's Aid Society)-Carrera program, which has been touted as a very successful national teen pregnancy prevention program for 13 to 15 year olds, had a significant impact on contraceptive use and delayed sexual activity for inner city female teens but not males (Philliber, Kaye, & Herrling, 2001). The author concluded that the program had a different level of impact on males because 1) some young men were already sexually active when they entered the program and needed to be enrolled at a younger age, 2) there are strong social norms among the inner-city males that stress the benefits of sexual activity and early fatherhood, and 3) young men had difficulty discussing sexual risks with their sexual partners who were not also enrolled in the program (Philliber, Kaye, Herrling and West, 2002). It was evident from this program

evaluation that planners need to understand the unique issues of teen males when developing pregnancy prevention programs.

2.5 Teenage Male Access to Reproductive Services and Information

National and international concern has been voiced about the level of adolescent male knowledge of human sexuality, reproduction and sexual decision-making. Access to reproductive information and parent education for male adolescents is limited (The Urban Institute, 2002b). Sonenstein (2001) suggested that young men receive insufficient encouragement, information, skills and health care to prevent teen pregnancy and promote sexual health. Although trends are improving and teenage boys are receiving more information at an earlier age, they still are not getting the full message about reproductive health topics (Urban Institute, 2002a).

Access to human sexuality knowledge for young males is often untimely (Urban Institute, 2000). Although 98 percent of all teenage boys have had some formal sexuality education, only 78 percent of white males report receiving this education before having sexual intercourse. This poor timing is even more pronounced among the Hispanic (68%) and African American (54%) adolescent males. In addition to untimely access to information about human sexuality, education for adolescent males is reported to be less comprehensive compared to females. Teen males often receive less information on contraceptives, sexually transmitted infections, and refusal skills (Urban Institute). There are also reports that parent education differs for males. Less than one in five males, compared to one in three females, first learned about sex from a parent. Schools and television appear to be the primary source of contraceptive information for teen males (Sonenstein, 1997). How much material is covered and the accuracy of the information is

of major concern since incorrect use of condoms is a common phenomenon. In a survey of teen males age 15 to 19, it was noted that 10 percent of males did not know that it is risky to wait until just before ejaculation to use the condom, 25 percent did not know how to hold the condom as they withdraw and 33 percent did not know that oil-base lubricants can cause a condom to break (Bell, 2003).

From a public health point of view, educational resources for teen males are an important aspect of teen pregnancy prevention. Gottsegen and Philliber (2001) suggest that males who participate in sexual education are less likely to be sexually active at a younger age and more likely to have fewer partners and consistently use condoms. Their research found that adolescent males respond positively to educational efforts aimed at increasing sexual responsibility.

Access to reproductive health services is essential for teen males because these services provide contraception education and sexual health services. Today, women are afforded greater access to specialized reproductive health services than men. An analysis of the 1995 NSAM discovered that only 39 percent of the 71 percent of the 15 to 19 year old males who received a physical examination in the past year had a discussion about reproductive health, as it is not included in routine health care (Porter and Ku, 2000; Urban Institute, 2002b). Only one third of adolescent males reported talking with their health care provider about a reproductive health topic (Bell, 2003). This suggests that the chance that teen males are receiving medically accurate reproductive health information from a health care provider is very slim (The Urban Institute).

Efforts of family planning clinics to serve males have grown substantially but still serve few males overall (Sonenstein, 1997). Title X funding includes reproductive health

services for teen males, yet only two percent is allocated for male health clinics and other programs that serve males (Sonenstein, 1998). In 1994, the International Conference on Population and Development in Cairo Programme of Action mandated that programs must be developed to make information, counseling and services for reproductive health accessible to adolescent males (Alan Guttmacher Institute, 2002). At this conference, many program planners did not have a clear understanding of appropriate male reproductive health services; consequently, the conference identified three priority areas: 1) screening services for contraception and clinical services, 2) education and 3) counseling and clinical diagnosis and treatment (Ndong et al., 1999). Today, health care professionals still do not fully understand the unique requirements for effective male reproductive education and health services (Bell, 2003). Knowing the social processes that take place with sexual decision-making by adolescent males is an important first step. This information is essential for planning educational programs and reproductive services.

2.6 Male Contraceptive Use

It is encouraging to note that in a comparison study of the 1988 and the 1995 NSAM, 15 to 19 year old males were less sexually active, (60 percent to 55 percent), and reported an increased use of condoms with last intercourse (57 percent to 67 percent). There is evidence that males have played an increased role in contraception and sexually transmitted infection prevention (Sonenstein, 1997). The overall proportion of teen males who had sex without condoms in the previous year declined from 67 percent to 57 percent (Kaplan, Feinstein, Fisher and Klein, 2001). The condom is the favored choice of young men at first intercourse. This is good news, however, it is tempered by the fact

that these changes were not the same for Hispanic and African American males and that 45 percent of adolescent males do not use a condom every time they have sexual intercourse (Kaplan et al.; Ku et al., 1998).

Males age 15 to 17 use condoms more often than older males. As the use of condoms declines in late adolescence, the risk of an unintended pregnancy and sexually transmitted disease increases. Females are more inclined to rely on oral contraceptives as they get older because they do not trust condoms as an effective contraception method (Leland and Barth, 1992). Although oral contraception is an effective means to reduce the risk of pregnancy, these couples are not protected from sexually transmitted infections. None of the current studies describe how these decisions are made between teenage couples; therefore, little is know about the process of condom and contraceptive negotiation for this age group (Bell, 2003).

2.7 Sexual Decision Making

Men have been described as the "silent partner" in pregnancy prevention and most of the contraceptive focus had been on women until the outbreak of AIDS and the enforcement of child support laws. Since these issues have come to the forefront, more men have become more involved in pregnancy and sexually transmitted infection prevention (Edwards, 1994). A variety of studies have focused on different aspects of male sexual decision-making. These studies include social and psychological influences, outcomes of decision-making, and trends in decision-making.

Male characteristics such as age, socioeconomic status, family structure and level of education had a strong impact on contraceptive decision-making. Less educated youth

and those who lived with step parents were less likely to use contraception (Manning, Longmore, and Giordano, 2000; Tanfer et al., 1993).

When examining the relational influences of male sexual decision-making, it was found that typically females rather than males based their decision making on the influence of relationship factors. Female contraception decision making was influenced by their partner's decision about the use of contraception (Christopher and Cate, 1985; Manning et al., 2000). More recent studies, however, found that decision making about contraception changed based upon the length of the male and female relationship. As the relationship grew longer, the use of condoms diminished for males. The reason for this decision making was not clear, however, the authors speculate that it could be related to the female using oral contraception and that the couple's level of trust is such that they are no longer concerned about acquiring a sexually transmitted infection. Either way, the nature of the relationship may influence male sexual decision-making (Ku et al., 1994; Tanfer, Grady, Klepinger & Billy, 1994).

Some of the literature supports the premise that males tend to focus on physical factors more than relational factors. One author reports that sexual intercourse for males is driven largely by the need for physical pleasure and the desire to increase their status among same-sex friends (Gage, 1998). An analysis of data collected from the 1988 NSAM found that males could be categorized into two groups: the delayers and the anticipators. These two groups based their sexual decision-making on different non-relational reasons. Delayers made their decisions regarding initiation of sexual intercourse based on weighing the costs and benefits. The anticipators participated in higher risk activities and generally explained their absence of sexual activity as lack of

opportunity (Forste & Haas, 2002). These findings promote the stereotype that males are not taking responsibility for their actions and that females must take control within the relationship. This stereotype has been contradicted, however, by a report suggesting that teen males who received reproductive health education demonstrated more responsibility toward contraceptive use and sexual risk taking (Grady, Tanfer, Koray, Billy and Lincoln-Hanson, 1996).

A qualitative study by Gilmore and DeLamater (1996) discussed the findings from focus group interviews of 27 African American males, ages 15 to 19. The researchers in this study concluded that an African American adolescent male's understanding and expression of his sexuality reflects a socially constructed interpretation of the individual. In this study, the males viewed sexual behavior, sexual partners and condom use as a complex script governing heterosexual interactions. Decisions regarding sexual behavior correlate with how the young man perceives the woman. There are many questions that remain unanswered related to the social context of adolescent sexual decision-making.

2.8 Summary

The literature review describes the importance of understanding male involvement in pregnancy prevention. Recently, there has been a decline in teen pregnancies and a concurrent change in adolescent male sexual patterns. The literature notes an increase use of condoms among young male teens and a decrease in the number who have had sexual intercourse by 12th grade (Grunbaum et al., 2004). These sexual pattern changes suggest that teen males have had an impact on the declining rates of teen pregnancies (Marsiglio et al., 2006).

How males have made this difference and their contribution to the decline in teen pregnancy is not well understood. Important issues have been discussed in the literature that may influence sexual decision making and behaviors in teen males. The dynamics of adolescent male development influences their social, cognitive and emotional behaviors (Weinberger et al., 2005). Better access to reproductive health services and medically accurate information could further promote sexual responsibility (The Urban Institute 2002b; Marsiglio, 2006). Greater understanding of gender differences when planning prevention programs could improve the effectiveness of outcomes for males (Philliber et al., 2002).

Sanchez-Flores (2003) proclaims that “ Meaningful male involvement strategies engage young men in the process of discovering positive aspects of being a man in society, recognize that young men contribute positively to their communities and remind them of the critical role they play in reducing teen pregnancy” (p.6). Sonenstein (2000) concludes that it is unrealistic to expect teen males to be responsible fathers if they are not included in sexual decision-making, education, and family planning. She also stated that pregnancy prevention programs can only be successful if health care providers more clearly understand the male’s perspective on reproductive behaviors (Sonenstein, 1997).

Today policy makers stress the importance of developing male involvement programs and accessible reproductive health services for teen males. Until nurses and other health care providers understand what teen males perceive to be their involvement in pregnancy prevention and the social processes that take place in teen male and female relationships related to pregnancy prevention, it is difficult to appreciate the role of teen

males in pregnancy prevention and to institute effective programs that will promote male involvement in teen pregnancy prevention.

Chapter 3

Study Design

3.1 Methodology

Grounded theory approach was selected as the methodology for this study because it lent itself to the study's purpose: to understand the psychosocial processes of male involvement in teen pregnancy prevention. Grounded theory is based upon the belief that human beings define themselves through social interaction with other people (Hutchinson and Wilson, 2002). This is called social interactionism. Through social interaction, people create shared meanings which become their reality (Patton, 1990). Grounded theory method provides a means to explore the social processes and meanings of adolescent pregnancy prevention from the male perspective.

Grounded theory method was developed for the purpose of studying social phenomenon (Glasser and Strauss, 1967) and the social processes present in human interactions (Hutchinson and Wilson, 2002). Adolescent pregnancy is a social phenomenon and to understand this social problem it is important to understand the social interactions or processes that lead to an unintended pregnancy. In this study the researcher sought to understand the social experiences of teen males in relation to pregnancy prevention.

Qualitative research is used to explore substantive areas that are otherwise not adequately understood. Grounded theory is a qualitative research method that is especially useful when little is known about how a group behaves in relation to a specific

problem (Hutchinson and Wilson, 2002; Strauss and Corbin, 1998). It is a method of research that emphasizes the importance of developing an understanding of human behavior through an inductive process of discovery.

Grounded theory approach includes systematic data collection and analysis. It is based upon the notion that the meanings of life issues arise out of social interaction with people and that people sharing common circumstances have a common social psychological issue that is not always clearly articulated (Hutchinson and Wilson, 2002). Grounded theory method provides the researcher the means to discover these common issues.

The systematic approach of grounded theory method entails the use of concurrent data collection, constant comparative analysis, theoretical sampling, and memoing (Elliot and Lazenbatt, 2005). This approach provides a means for nurses to generate theory that is grounded in the emerging data and will explain the psychosocial processes that present within human interaction. The findings from a grounded theory study identify and conceptualize the basic social processes that individuals use to resolve their key issue (Cutcliffe, 2005).

In this study, the researcher sought to understand the psychosocial processes involved with adolescent males and pregnancy prevention. Data was collected by conducting individual interviews with high school males who are 18 years old. The researcher conducted the interviews and explored how adolescent males made sense of their environment within the context of relationships with females, family and friends; their perception of sexual relationships with females; how they handled sexual risk; and how they involved themselves in the process of pregnancy prevention.

Data collection by individual interviews is an effective way to explore the complexity of young males' subjective lives because they provide a forum for the participant to express explicitly how they make sense of their environment (Hutchison, Marsiglio and Cohen, 2002, p.43). Hutchinson et al. (2002) found that qualitative research with males using individual interviews is indispensable because it is best suited to reveal the social psychological processes underlying males' experiences with sexuality, contraception and fatherhood (p.42). Previous qualitative research studies demonstrated that typically young men are very willing to share their stories about their sexual and procreative experiences (Marsiglio, 2003).

The intent of the interview in this study was to discover the core variables or basic social processes that emerge in relation to teen pregnancy prevention and sexual risk taking (Hutchinson and Wilson, 2002). These variables and processes become the basis for the generation of a theory about male involvement in pregnancy prevention.

Strauss and Corbin (1998) indicated that data collection, analysis and eventual theory generation stand in close relationship with one another in grounded theory. In other words, as researchers collect the data, they concurrently analyze the data, the analysis directs additional data collection and this constant comparison of data continues until common patterns emerge and a theory is derived. This entire process requires purposive and theoretical selection of informants for data collection, data validation and emerging theory substantiation.

At the beginning of the data collection process, the researcher used purposive sampling to select the informants for the interviews. Purposive sampling is the process of selecting participants who are knowledgeable about the issue, willing to participate and

most likely to provide data about the phenomenon of inquiry. In this study, the researcher sought high school students who were 18 and older because they are most likely to have had experience with male-female relationships or to have had friends who have had these experiences. Also, in late adolescence the teen is more likely able to reflect upon and discuss their experiences (Sternberg, 2005).

Once data collection was initiated and the analysis began, the researcher used theoretical sampling. This type of sampling is controlled by the emerging data. As data is continuously compared to previously collected data for commonalities, categories and concepts, the researcher decided what data to collect next and sampled accordingly. This constant comparative analysis of data from theoretical sampling is the central focus of grounded theory (Coyne, 1997, p.623).

The emerging data drove the number of informants required for this study. Interviews continued with the informants until the data reached saturation and key categories were developed (Knafi and Deatrick, 2005).

3.2 Researcher's Relationship with the Community

For the past eight years, the researcher has been working with teachers, school nurses and administrators in nine co-ed public high schools in a rural county as well as with the school nurse at one urban parochial all boys high school. The researcher's role, titled Adolescent Pregnancy Prevention Specialist was developed in collaboration with the local public health department and entailed the development and implementation of teen pregnancy prevention programs in the schools and community. Through this work, the researcher has had the opportunity to interact with teenagers and to develop relationships with teachers, school nurses and school administrators.

Because of the researcher's work at the schools, rapport and support had been developed among the teens, teachers, school nurses and principals. These relationships were important for this study because it added credibility to the research and assisted to assure the teens and school administration that the researcher would not deviate from the study's intent, would use the data for appropriate program improvement and would follow all of the ethical guidelines that protect human subjects during the interview process.

3.3 Setting

The setting for the data collection was an all-boys parochial high school in the Midwest. Two high schools identified as schools that were willing to participate in this research study. These identified high schools were a parochial all-boys urban high school and one rural co-ed public high school. Both high schools offered access to informants who could provide the data to answer the research questions. This setting was convenient for the participants and had adequate interview space that assured confidentiality protection for the informants. They provided a safe environment for those informants who might have felt apprehensive about meeting the researcher at a different location. The researcher chose not to meet with the teens outside of school after conferring with the school administrators and school nurses. As people who are knowledgeable about this age group, it was their opinion that most of these teens were involved in after school activities and/or work. Also, because many live in the rural settings, after school transportation could be a barrier.

Initially, the researcher sought informants at the parochial high school. This is the school with the largest male population. As the study progressed, the researcher

recruited enough information-rich participants to reach data redundancy and to answer the research questions; she did not pursue additional informants from the remaining school.

The individual interviews were scheduled during study hall or lunch hour so the informants did not miss class. The interviews took place in an empty classroom in the school so convenience and privacy could be provided to the informant. The settings for data collection are important to consider because they will influence what is shared by the informants (Cote-Arsenault and Morrison-Beedy, 2005).

3.4 Informants

Inclusion Criteria

The inclusion criteria for the informant selection was males, 18 years or older at the time of the study, attendance at one of the identified high schools, and willingness to participate in the study. The researcher chose this inclusion criteria based upon the national trends of male sexual activity patterns, cognitive development issues and the social experiences of high school. This criteria was selected to enlist informants who had a broad spectrum of perspectives required to answer the research questions (Cote-Arsenault and Morrison-Beedy, 2005).

The statistics for male sexual activity denote a dramatic increase in the number of males who have experienced sexual intercourse by the age of 18. In addition, the rate of unintended pregnancies is highest for teens 18 and 19 years old (Grunbaum et al., 2004). These statistics suggest that older high school teens will have had more social experiences with female relationships and can provide perspectives of the variety of social processes involved in managing these relationships. Sexual activity is not a

prerequisite for participation in this research. Sexual abstinence is considered to be one of the social processes included in this research inquiry.

The cognitive level of development for older adolescents is much different than teens in the early stages of adolescence. The cognitive skills of 18 year olds are much more developed (Sternberg, 2005; Weinberger et al., 2005). Older adolescents can think more abstractly and develop a skill called metacognition. This capability allowed this age group to more readily discuss and describe their thought processes and behaviors in relation to their involvement with pregnancy risk reduction; and to contemplate their rationale for the decisions they have made in their social relationships (Sternberg, 2005).

Finally, the researcher chose males 18 years and older who still attend high school because this group had experienced the majority of their social life within the context of a junior and senior high school setting. The researcher is interested in exploring teen male involvement in sexual risk taking within this context verses post high school employment or college where teens are experiencing different social relationships and possibly manage sexual risk taking differently because of this post high school social context.

3.5 Data Collection

Human Subjects Protection

Prior to data collection, the researcher received approval from Duquesne University's Institutional Review Board for the Protection of Human Subjects (IRB). The IRB application included administrative approval letters from all of the participating schools where informants were recruited and interviewed.

All participants were informed that participation was voluntary and that they had the right to withdraw from the study at any time. Each participant was required to sign an

informed consent which contained the investigator's contact information, and described the purpose of the study, the risks and benefits, compensation, confidentiality measures and the right to withdraw (See Appendix 4). The school administration also required that the participant's parent or guardian also signed the informed consent. This was done prior their adolescent's participation in the study.

In order to minimize the risks to the human subjects and to protect their confidentiality the researcher did not associate any of the data collected in the study with the identity of the participants. The data was kept separately from the consent forms in a locked file cabinet in the researcher's office to assure confidentiality. The informants were assigned a pseudo name for purposes of data analysis, discussion and publication. Demographic data which could potentially be identifying data was only reported as a group. The audiotapes and transcripts did not contain identifiers and were labeled by the corresponding interview number. Once the audio data was transcribed, and the researcher has completed all research activities, the tapes will be shredded. The transcriptionist signed a confidentiality form to assure confidentiality and human subject protection (see Appendix 3). Verbatim quotations were used for reporting data but no names or identifying information was attached to ensure that confidentiality was maintained at all times. All audio recordings, written materials and consent forms are stored in a locked file in the researcher's office. Once publications are completed, the audio tapes and transcripts will be shredded and the computer files of the data will be erased.

Recruitment

Once the researcher received approval through Duquesne University's Institutional Review Board for the Protection of Human Subjects and the high school administration, the researcher began the process of recruiting informants. The researcher sought out informants in collaboration with the school nurse at the high school. This school nurse was highly regarded by the students as an adult they could trust. She did not have any teaching responsibilities with these participants so there was no concealed pressure to participate in the study. During home room the researcher and the school nurse presented information about the study and described the purpose of the study, the inclusion criteria for participation, the time commitment required of the participant, the process of informed consent, confidentiality assurance and the process of signing up to volunteer. They also informed the teens that refreshments would be provided and they would receive \$10.00 at each new interview for their time and effort. Incentives not only helped with recruitment of participants but also acknowledged the participant's contribution, their expertise and their wisdom as a critical component of the research (Morse, 2005).

Within the first week of recruitment, the researcher had 19 males who met the inclusion criteria volunteer to participate in the study. The researcher called each volunteer individually to set up an appointment for the interview that best met their schedule. At that time, the researcher sent a copy of the informed consent home with the student so they could discuss the study and acquire their parent or guardian's signature. Although these students were considered legal adults, the school policy required that all research at the school must follow procedures that apply to minors. One potential

informant decided not to participate when the researcher called him to schedule an appointment. The other eighteen remaining informants were willing to participate and comprised the sample for the study.

Once students were contacted and had expressed their willingness to participate in the study, the researcher scheduled the interviews. All of the informants were very enthusiastic about the interview and the opportunity to tell their stories. As the study continued, four additional adolescent males at the high school contacted the school nurse to volunteer because they were turning 18 later in the semester and would be eligible to participate in the study. The researcher did not need to recruit these additional informants. Also, since the researcher was able to recruit enough informants for the study at the first high school, the males from the second high school were not recruited for the study.

Data collection continued until reaching saturation. The researcher found that saturation was occurring at the 14th interview. Although this was prior to the 18th interview, the researcher continued the interview process because the informants expressed a strong desire to participate in the interview and because the latter interviews were used for validation of previous findings.

Interview Process

On the day of the scheduled interview, the researcher met the informant in the school nurse's office and they went to a private classroom. The researcher assured that each informant was of the age of majority by looking at an identification card that had a photograph and their date of birth. If they were a minimum of 18 years old, the researcher checked to be sure they had their signature and their parent/guardian's

signature on the informed consent. Once this was verified, the researcher gave the informant a copy of the informed consent, reviewed the confidentiality clause and the audio taping process, and reminded them that they did not have to answer a question that made them feel uncomfortable. Once this was completed and questions were answered, the researcher started the interview.

The researcher conducted all of the interviews. Each interview lasted approximately 45 minutes, depending upon the class schedule. Whenever time ran out, the interviewer offered to meet the informant another time if they were not finished with their story. None of the informants expressed the need to meet again.

At the end of each interview, the researcher explained to the informant that there may be times after the data is analyzed when it is important to talk with the informant a second time in order to clarify or expand on the information that was discussed in previous interviews. All of the informants expressed a willingness to meet again if the need arose. In grounded theory research it is not unusual for the researcher to seek out a second interview to validate, clarify, and refine emerging data, categories and concepts because it is part of the process of theoretical sampling and constant comparative analysis that is so important in grounded theory method (Chiovitti and Piran, 2003). However, in this study, the researcher did not need a second interview with the males. The researcher found that data saturation was occurring at the 14th interview. Therefore, the researcher used the last four interviews to validate, clarify and refine the emerging data.

During each interview, the researcher used two tape recorders. This provided a back-up when a recorder malfunctioned and it also provided the researcher access to the audio tape data while the transcriptionist was completing the typing. This allowed for

more immediate data analysis and assisted the research to analyze each interview prior to the next interview. Once the audiotape was transcribed and checked for precision by the researcher, the extra audiotape was erased. The remaining audiotape will be shredded after all research activities are completed.

The researcher began all of the interviews by asking the informant demographic questions (see Appendix 1). These questions were categorical, easy to answer and served as an ice breaker for the researcher and the informant. The informant was reminded that their name was not be associated with their answers and the paper was identified with the interview number. The purpose of the demographic questions was to compile data that described the informants and provided the researcher a means to better understand the population and interview remarks.

The demographic questions collected general information about age, religious affiliation, ethnic background, paternity status, current grade level, and future plans after high school. Questions related to fatherhood and sexual activities were modeled after the National Youth Risk Behavior Surveillance (Grunbaum et al., 2004). These questions were incorporated in the interview body after the researcher established a rapport with the informant. The answers to these questions gave the researcher a general understanding of the informant's past and current sexual experiences, their future plans and their paternity state. They were always asked about their future plans after high school because the literature suggests that future goals can influence the level of adolescent risk taking (Kirby, 2001).

The interviewer used a semi-structured interview guide (see Appendix 2) during the interview process. This guide was an important tool because it kept the researcher

focused on the purpose and aims of the study. The researcher did not ask the questions as a list in the guide but strategically incorporated the questions within the conversation in order to prevent the guide from limiting spontaneity and become a constraining force (Hutchinson et al., 2002). It was important to be aware of this constraint during the interviews and to let the data determine the subsequent questions. It is critical in grounded theory to allow the data to guide the interview. Therefore, the researcher did not rely solely on the interview guide but ultimately allowed the data that emerged from the researcher and participant interaction determine the direction of the interview. As a strategy to manage lulls in the conversation and minimize discomfort, the researcher listed statements and techniques in the interview guide to use when the interviewer sensed confusion or discomfort from the informant (Hutchinson et al; Marsiglio, 2003).

The interview guide began with a sample introductory statement that restated the purpose of the interview. The researcher did not read this introductory statement word-for-word but included the content at the beginning of the interview. The guide consisted of sample open-ended questions that began with general questions about the informant's background and gradually led to more specific questions about male-female relationships, sexual activity patterns, the process of sexual decision making and the social processes involved with pregnancy prevention issues (Hutchinson et al., 2002). The interview questions were broad to prevent the researcher from leading the participant's thoughts or influencing their ideas. This was an important grounded theory methodology stance (Chiovitti & Piran, 2003). The guide included questions to illicit thoughts about how and if males strategize to prevent a pregnancy, thoughts about when and why males

become sexually active, perceptions about a teen pregnancy, and how males are involved in adolescent pregnancy prevention and sexual decision-making.

Data collection took place over a 12 week period of time. In order to complete concurrent analysis and constant comparison of data, the researcher scheduled an average of 1-2 interviews per week. This allowed for theoretical sampling of data based upon previous interviews and data analysis. As a result, the interview guideline questions evolved over time as the informant's answers sharpened the focus of the research inquiry (Cote-Arsenault and Morrison-Beedy, 1999). Some of the emerging data which became part of the interview guide over time included questions about family structure, influential factors in the informant's life, conflicts with religious or family values, broader influential factors other than peers, patterns of dating behaviors, committed relationships, and specific prevention strategies. The researcher found that the informants were very willing to discuss the intimate details of their relationships and considered sexuality an important issue in their lives. The tone of the interviews was matter of fact and comfortable. These interview behaviors provided validation for the researcher that the informants were comfortable discussing the topic, that this topic was a good fit for this population and that they considered teen pregnancy an important issue.

Saturation was determined when the data reached a repetitive point (Ciovitte & Piran, 2003) and categories and concepts were fully developed (Knafi and Deatrick, 2005). Data saturation determined the final sample size of 18 informants.

3.6 Data Analysis and Management

Data analysis and management for this grounded theory study was based upon the methods of Glaser and Strauss, described by Hutchinson and Wilson (2001). After each

interview, the tapes were transcribed and the researcher analyzed and coded the data before the next interview. The audiotapes interviews lasted 45 minutes and provided 179 pages of data for analysis. During the analysis, the researcher asked neutral and open questions about the data such as “What is happening in the data?” to avoid forcing data and to allow concepts to emerge (Cutcliffe, 2005). In addition, the researcher asked standard questions about the data that were designed by Chiovitti and Piran (2003, p. 432).

What does the action in the data represent?
Is the conceptual code or label part of the informant’s vocabulary?
In what context is the code or action used?
Is the code related to another code?
Is the code encompassed by a broader code?
Are these code patterns similar?

As concurrent data analysis and collection continued the researcher compared the analysis of one set of data with another until categories developed from the data. This is called selective coding. Throughout the cycle of data collection and analysis, the researcher compared these new categories and checked to see if the previous categories remain constant with the new data.

Data was managed using Atlas.ti software. This is a computerized data management system that facilitated the qualitative data analysis by organizing the large bodies of textual data. This tool assisted the researcher to more efficiently organize and code data, create memos, categorize the data and eventually develop constructs and a beginning theory. Atlas.ti has been used in a variety of qualitative nursing research studies across the country (Atlas.ti, 2006).

During the data analysis, the researcher conducted three levels of coding (Hutchinson and Wilson, 2002). Level I, called substantive coding, is an iterative process

where the researcher analyzes the words of the informant line by line. As the level I data emerged into categories, Level II coding examined the data at a more abstract level and the researcher compared categories within the data. Level III coding is called theoretical coding. At this level, the researcher began to identify emerging relationships between the categories which formed relationships, theoretical concepts and constructs that brought to light and explained the basic social process related to the problem. This basic social process included the core variables that became the basis for theory development. The identified concepts, categories, and basic social process were grounded with data from the interviews and were coded accordingly to assure that comparisons were accessible, feasible and continuous during the analysis and interpretation phases. The constant comparative process took place during all levels of the coding which led to theoretical sampling, the central tenet of grounded theory (Coyne, 1997).

During data collection, the researcher kept a detailed journal to memo information such as post interview comments, researcher reactivity, and researcher views of the phenomenon. Memoing is an important part of grounded theory method. These memos were used by the researcher for concurrent data analysis, theoretical sampling, and self-identification of researcher bias.

Memoing provided a means to analyze the effects of reactivity during the interviews. Reactivity is the response of the researcher and the participants to each other during the study. Reactivity is an inherent element of qualitative research and memoing helps the research analyst to maintain distance from the data. (Strauss and Corbin, 1998).

Memoing also allowed the researcher to reflect upon personal values, attitudes, behaviors and past experiences (Strauss and Corbin, 1998) which could influence the

interpretation of the data. It provided a venue for the researcher to record observations about participants such as mood and body language. It was also a place for the researcher to note their insights and analytical ideas throughout the data collection process. The researcher used memoing for process evaluation during data collection to improve interview techniques or to modify the interview guideline. It added credibility to the findings of the study.

3.7 Informant Demographics

All of the informants in the study were 18 year old males and currently completing their 12th year of high school (see Table 3.1). All attended a Catholic all-boys high school in an urban area of Ohio. Prior to high school, these males completed grade school in a variety of neighborhoods in rural, suburban and urban locations which attributed to the diversity of their family and social backgrounds.

Although the high school selected for the data collection was a Catholic sponsored high school, not all of the males were affiliated with a Catholic Church. Thirteen of the informants who participated in the study considered themselves practicing Catholics which comprised 72% of the group. Twenty eight percent did not affiliate themselves with the Catholic Church. Of this 28%, two stated that they were no longer practicing Catholics but did not affiliate with another religion, one male was Presbyterian, one Methodist and one said they did not have any religious affiliation (see Table 3.2).

Eighty three percent of the informants identified themselves as Caucasian. Within the Caucasian group there was one male, who was a first generation immigrant from Germany and two others males that affiliated themselves with Polish ancestry. Of the

17% minority group, one was Korean, one was Hispanic and the other had an African American and Mexican heritage (see Table 3.3).

During the interview, the informants discussed their past sexual involvement. Sixty one percent reported having had sexual intercourse while 39% said they had chosen to remain abstinent until marriage (see Table 3.4). According to the National Youth Risk Behavior Surveillance of 2005, 70.4% of males in 12th grade in Ohio reported having had sexual intercourse and nationally 63.8% had reported having had sexual intercourse (National Center for Chronic Disease Prevention and Health Promotion, 2007; Center for Disease Control and Prevention, 2006). This particular informant population was slightly lower than the national average and almost 10% lower than the state average.

None of the informants in this study were teen fathers. Many had experienced pregnancy "scares" and one had supported his girlfriend through an abortion. These informants were in their senior year of high school, looking forward to graduation and all were planning for college or a technical career after graduation. 16 or 90% of the participants planned to attend college. Of the remaining two male participants, one planned to attend a culinary or horticultural program and the other hoped to be accepted in the Naval Academy (See Table 3.5).

3.8 Summary

Grounded theory approach was selected as the methodology for this research because it lent itself to the purpose and aims of this study. Eighteen individual interviews were conducted with 18 year old males from an all-boy parochial high school in the Midwest. These interviews took place over a 12 week period and the researcher used purposive

Table 3.1 - Demographic Characteristics of the Individual Informants

Informant	Religious Affiliation	Sexually Active*	Ethnicity
001 Dan	Catholic	No	Caucasian, Polish, German
002 Gary	Catholic	Yes	Korean
003 Sam	Catholic	Yes	Caucasian
004 Rob	Catholic	Yes	Hispanic
005 Derek	Presbyterian	Yes	Caucasian
006 Tim	None	No	Caucasian
007 Ralph	Catholic	Yes	Caucasian
008 Joe	Non practicing Catholic	Yes	Caucasian
009 Josh	Catholic	No	Caucasian
010 George	Catholic	No	Caucasian
011 Joel	Non practicing Catholic	Yes	German, first generation US Immigrant
012 John	Catholic	No	African American and Mexican
013 Richard	Catholic	No	Caucasian
014 Vince	Catholic	Yes	Caucasian
015 Steve	Catholic	Yes	Caucasian
016 Michael	Catholic	Yes	Caucasian
017 Paul	Catholic	No	Polish
018 Thomas	Methodist	Yes	Caucasian

* Defined as having ever had sexual intercourse

Table 3.2: Overall Religious Affiliation

Religious Affiliation	Total
Practicing Catholic	13
Non Practicing Catholic	2
Presbyterian	1
Methodist	1
Agnostic	1

Table: 3.3 Overall Ethnic Backgrounds

Ethnic Background	Total
Polish	2
German First Generation	1
Korean	1
Hispanic	1
Caucasian	12
African American/Mexican	1

Table 3.4: Overall Sexually Active

Sexually Active*	Total	Percent
Yes	11	61%
No	7	39%

* Defined as having ever had sexual intercourse

Table 3.5: Plans for after Graduation

Future Plans	Total	%
College	16	90%
Trade School	1	5%
Military	1	5%

sampling to recruit the informants. Procedures were developed to protect human subjects and approved by Duquesne University's Institutional Review Board for the Protection of Human Subjects prior to beginning data collection. Selection of the informants and individual interviews continued until data saturation.

The researcher used a semi-structured interview guide that included demographic questions and open ended questions related to the purpose and aims of the study. Data was analyzed concurrently with the data collection so that constant comparison could take place. As data collection continued, the interview questions changed based upon the emerging data. This is a result of theoretical sampling which is essential to grounded theory method.

During data analysis, the researcher used Atlas.ti, data management software to assist in coding the data at the different levels of categories, concepts and constructs. The emerging data from the systematic data collection, concurrent data analysis and theoretical sampling became the basis for theory development.

Chapter 4

Analysis, Results and Findings

4.1 Introduction

This chapter presents findings generated from data collected from individual interviews with the key informants. It includes an overview of the basic social process, the framework for the analysis of data, the coding method and theoretical sampling processes, the contextual and process categories, and the conceptual relationships of these categories that led to the discovery of the basic social process that answers the study's research question. All data in this chapter are direct quotes from the informants.

4.2 Overview of the Basic Social Process: Deliberate Actions to Protect Future Goals

The boys in this study avoided becoming a teen father through "deliberate actions to protect their future goals." The boys described the importance of preserving and protecting future goals and noted that an unintended pregnancy would ruin what they would be striving for and "stop their goals". They described how they prepared for and carried out strategies to either avoid sexual intercourse or consistently use birth control methods as means to protect their plans for the future. They discussed how they became aware of the consequences of an unintended pregnancy and the strategies to prevent a pregnancy by learning from others over time. They described how they learned from their parents, siblings, peers, partners, media, and relatives. They also learned through

personal experiences with pregnancy scares. They acted on this increased awareness by preparing for sexual avoidance and/or birth control strategies. They created goals for their future and ultimately carried out deliberate actions to protect these goals by avoiding risk and using protection.

The substantive theory, "deliberate actions to protect future goals" explains how the teen boys in this study interpreted the meaning of pregnancy prevention and how they managed to avoid pregnancy. To understand how this theory evolved and the conceptual relationships, it is important to discuss the framework for data analysis, the contextual factors which depicted the structure and environment of these boys' world, and the psychological social processes that these boys described during the interviews.

4.2 Framework for Data Analysis, Coding Method and Theoretical Sampling Process

The process of data analysis in this study was based on grounded theory method and symbolic interactionism which is the core of grounded theory. Symbolic interactionism is based upon the premise that "human beings act toward things on the basis of the meanings that the things have for them" (Blumer, 1969. p. 2). It emphasizes that meaning has an essential role in the formation of behavior. Symbolic interactionism explains human conduct. In symbolic interactionism meaning is viewed as arising in the psychosocial processes or interactions between people (Blumer). By examining and interpreting the psychosocial processes of the adolescent males in this study, the researcher was able to understand the meaning of pregnancy prevention from their perspective. As an explanatory framework, symbolic interactionism enables researchers

to explain rather than merely describe the behaviors of the actors in their worlds (Klunklin and Greenwood, 2006, p.40).

The nature of human action is to find meaning within the context of social interaction. Blumer (1969) argued that meaning is not intrinsic to an object nor is it derived from sensations and attitudes that are perceived by the individual in relation to the object. It is derived by the person from that interaction and through self interaction and interpretation of the meaning (p.5). Human beings are actors not responders. They interpret meaning and act accordingly. "Their action is based upon the basis of what they note, how they interpret and assess what they note, and what kind of projected lines of action they map out"(Blumer, p 16).

As the researcher collected data in this study, data collection focused on the interactions described by the teen male participants in relation to pregnancy prevention. Through concurrent data analysis, the researcher was able to gain a deeper understanding of how these young boys interpreted and assessed their interactions and acted accordingly. Through their stories, the researcher learned how they interpreted the meaning of pregnancy risk and prevention and how they chose to manage risk and prevention.

During the data analysis process, the researcher analyzed each interview, coded the data, noted relationships with the coded data and used theoretical sampling to validate the findings and to assess their "fit" with the emerging concepts. Using symbolic interactionism as a philosophical basis and the iterative process of grounded theory method assured that the researcher's interpretations remained grounded in the data.

During line by line coding, the researcher initially identified 107 codes from the data. These codes were analyzed for relationships and categorized accordingly. The researcher also determined if the codes and categories were contextual or process oriented. It was important to distinguish between the two orientations because context codes described the structure of the environment with which actions took place and process codes described how the teen boys acted within the context. Strauss and Corbin (1998) noted that it was important to consider both aspects when interpreting data in a grounded theory study because individuals will align their actions to the situation at hand. As situations change actions and interactions will also change. In this study, recognizing and understanding the structure and context allowed the researcher more accurately interpret and explain the psychosocial processes that took place among the male participants related to adolescent pregnancy prevention.

Initially the coded data was organized into 20 categories. With additional analysis, these categories were collapsed into 8 contextual categories and 5 major psychosocial processes. In the final analysis, 4 of the contextual categories became subcategories of one of the process categories which resulted in 4 core contextual concepts and 5 core process concepts. The contextual core concepts were social norms, academic environment, culture and religion, and myths and preconceived notions. The 5 core process concepts were becoming, having goals, being prepared, avoiding risk and using protection. These core concepts became the basis for substantive theory development, deliberate action to protect future goals.

4.3 Contextual Core Concepts

The contextual core concepts that emerged in this study depict the structure and environment of the teen boys that participated in the study. The psychosocial processes that emerged from this data analysis reflect the actions or behaviors that these boys carried out in relation to pregnancy prevention based upon their particular situation or context. The context can influence adolescent decision making and behaviors. Kirby, Lepore and Ryan (2005) discuss the relevancy of contextual or environmental factors on adolescent sexual decision making. They noted that some of these factors can increase the risk of an unintended pregnancy and others can discourage behavior that could lead to a pregnancy. These factors are referred to as risk factors and protective factors respectively.

In this study, none of the informants were teen fathers. Many had experienced pregnancy scares and one had supported his girlfriend through an abortion. The informants described many protective factors in their lives that influenced their behaviors of avoiding pregnancy.

These factors were identified in the data analysis and organized into four contextual core constructs or concepts. These were social norms, culture and religion, academic environment, and myths and preconceived notions about male involvement. These concepts were informed by the coded data and related to the social environment and situations of these teen male participants.

4.3 Social Norms

The boys in this study indicated that social norms and media influenced their sexual knowledge, decisions, and actions. How society portrays teen involvement in

sexual activity was discussed extensively by the boys. They talked about current social norms for teens and whether sexual activity was considered acceptable or not acceptable for teens. They discussed how adolescent males view teen sex, how the media portrays and influences teen sexual behaviors and how adults view teen sex.

Rob and George talked about how their peers think it is acceptable and expected for teens to be sexually active but that some teens ultimately make their own choices in spite of what is expected. Rob who is sexually active said, "It's not looked down upon anymore. So they (teens) feel like it's ok and something they should be doing." George who is not sexually active added that this norm is such that some of the guys believe it is a stigma to be a virgin. He said, "Just in our group of friends, I get this feeling like people say they had sex, but they really have not. They don't want to be considered the people that haven't had sex or that they are a virgin still."

Derek, who is not sexually active, talked about why it is a stigma to be considered a virgin in some peer groups. He said, "They (other teen boys) think you are not man enough I guess or doing whatever is the conformity of society." Ralph, who is sexually active, discussed how social norms have a strong influence on whether teens consider becoming sexually active. He discussed what happens when teens go to a new school or start to hang out with a new group of friends. He said,

"Once everyone gets together and starts to realize what is going on and what people have done and what everyone is doing. They don't feel obligated to catch up, but more so they feel a little left out."

Gary, who was also sexually active, qualified how teens ultimately make their decision. He said:

Yes, it's (sex is) pretty normal. They (couples) don't really go into depth about it but they feel it's ok. I have known some couples who have been dating for like a

year and I don't think they were sexually active, so I think it goes both ways.

Thomas who was also sexually active made a statement that was in agreement with Gary. He said school environment is supportive and called it "a brotherhood". He said, "...everyone just treats everyone the same and everyone is pretty cool with their group." He did not seem to think that teens would feel uncomfortable to make a choice that is different from the norm.

In addition to overall societal views about teen sex, one boy discussed how the norms have particularly changed for girls and seemed concerned with how this influences guys. Sam, who was also sexually active, discussed how teen girls no longer play hard to get with guys and that they are more open about their sexuality as portrayed by the way they dress and act. Sam said:

Girl-wise, I think girls are getting more and more easy. Girls, what they wear, their little skirts, and stuff like that I think they advertise themselves as being easy, it's like I said about the world today, you see it every place and then they are being influenced by that. From what I have seen from my friends, I've seen girls engaging with people that they probably want, but after the time they do regret it. I know tons of girls that do stuff and the next day wake up and say 'what did I do?'

Another aspect of societal influence the teen boys alluded to was how the media influences teen boys especially at a younger age. John and Paul who chose to be abstinent commented on how younger teens learn from the media. Paul said, "They (younger teens) only listen to what they see on TV and what they hear on the radio." John verified that he received most of his information about sex from the media, "Like TV and movies and stuff like that."

The social norms that emerged from the data were that most teens were sexually active, it was acceptable for both genders to be viewed as sexually active, and in some

situations it was viewed as a stigma to be considered a virgin. When the teen boys discussed how their parents and other adults view teen sexual norms, it was a very different viewpoint. The boys talked about how their parents were not in touch with what was really happening among teenagers. Joel said that many adults don't know what teens are doing, don't think they are having sex and don't address it. He said, "It is a balance of everything and as long as American society is so closed minded and prudish there is not much that is going to happen. Teens live in their own world." Another boy discussed how adults deny that teens are having sex and consequently there is little discussion with their children about these issues. Michael said, "Yes, they don't understand what is going on because no one is talking to them about it." The boys thought that adults viewed teen sexual norms very differently from the real situation. The teens described that there was neither awareness nor an expectation by the adults that teens were or should be having sex.

The mixed messages between teen social norms and adult social norms add to the complexity of understanding all the contextual influences on how boys involve themselves in pregnancy prevention. The boys in this grounded theory study described how they received messages from teen society and the media saying that sexual activity is acceptable and even expected yet these messages influenced some but not all the boys to be sexually active.

4.5 Culture and Religion Norms

In this grounded theory study, cultural and religious norms were perceived as strong influences for some of the boys, but not for others. The all-boys high school that the informants attended was Catholic and taught the Catholic value that sex should not

take place until marriage. The boys discussed whether these values influenced their choices. The majority of the boys (72%) were practicing Catholics and most of them (54%) were sexually active which suggests that religion was not a consideration for them in deciding to have sex (see Tables 3.1 and 3.2).

Richard who was raised Catholic explained that he felt that the Catholic values taught at the school did not influence he or his Catholic friends to remain abstinent. George who was Catholic said, "If I have already made my decision pretty much I don't think someone could stop me from sticking to it. I don't think my religion has had an effect on my decision."

Another boy who was Catholic discussed how religious messages actually made him want to rebel and have sex. Rob said,

I think it makes it [sex] more desirable, because they kind of like shame you, and say you shouldn't do this because it's wrong, so its kind of a rebellious feeling. That's how I felt early on, but then once you get into a relationship you don't really worry about it. Like, I didn't really check the bible or any of that stuff on what I shouldn't be doing.

Tim who was not Catholic explained how he believed religious values did not influence most teens' sexual behaviors and that societal messages about teen sex were stronger:

No, they [teens] don't feel like it is a rule they are breaking, everyone is doing it so it is not like it is that bad. I would say that any Catholic views on sex and stuff would not affect a lot of people. It may to a couple of kids here and there, but nothing really hardly at all.

Although many of the boys did not feel their Catholic values influenced their decisions about being sexually active, there were some boys who chose to remain abstinent and described how their religion was a very strong influence. Richard said, "I was raised Catholic so I really feel strongly about that. I do let my morals get in the way.

People know how I feel about drinking, smoking and sexual relationships." Josh talked about how "It is sort of carried out through the whole family about waiting until marriage. It's Catholicism".

Only one boy discussed how his cultural background gave him a different perspective about pregnancy prevention. Joel was a first generation immigrant from Germany. His mother was from Germany and moved him to the United States at the age of seven. Joel frequently returns to Germany in the summers to visit relatives. He says he has many ties to the German culture. He stated:

Over there [Germany] it {sex} is more accepted and anyone will talk about it anywhere. Here it's like people tell you, you can't talk about it. I have tried to talk to my Dad [who is from the USA] about it and he is like no not until marriage and no alternative. Very few people here are open to anything. Over there they are open to pretty much anything and if you enjoy it, try it, and keep doing it.

Joel was sexually active and his mother discussed pregnancy prevention with him and also provided him access to condoms. Joel's father, who grew up in America, supported abstinence until marriage and would not discuss other options with Joel.

Cultural and religion influenced how some of the boys in this study made decisions about becoming sexually active. Religion was a protective factor for a few of the boys but the majority of the boys were not strongly influenced by their religious upbringing. In fact, one boy expressed a desire to rebel against the religious values he was taught. Culture was a strong influence for one of the boys but was not identified as a major factor for the rest. In addition to the social, cultural and religious norms, the academic environment was another structured setting the boys discussed in relation to pregnancy prevention.

4.6 Academic Environment

Many of the boys described how their academic environment had influenced their motivation, accountability and goals. They suggested that their academic environment fostered a climate of responsibility. They compared their school setting with what they knew about the public schools and referred to their school as special and elite. They described how the school set high expectations and demands for each student and how this type of setting motivated them to stay on task and succeed. When discussing their neighborhood friends who attended the public school they viewed their lives as very different as if they were privileged or were at an advantage. The informants spoke about the rigor of their high school and how the demands of the curriculum required them to stay very busy and to focus on meeting goals. Derek said:

This school is more academically driven and it's a private school so the kids are coming from families that can afford to go to private schools and their parents would drive them to succeed.so schools like the public schools, they are like, you can try at school but you don't have to, you can just graduate. They are not telling them that they can be anything and they are not making them goal oriented.

Tim added,

A lot of my friends from public school that I still hang out with say there is different stuff going on because they have girls at the public school. They can talk to them whenever they want. They have more social time between them than we have. I think in my opinion they are moving pretty fast, even faster in public schools.

Steve stated, "... if it wasn't for the people who you were around and the motivation that you were getting from them.... we got all this work to do and I am going to get kicked out if I don't finish."

They talked about how they chose to attend the parochial school. For some of the boys it was their choice, for others it was a choice their parents made for them. They

discussed how the all-boy environment was less distracting. When discussing the knowledge they acquired about sexuality and pregnancy prevention, the boys talked about how the setting influenced their behavior more so than the formal sex education process.

John, whose mother was African American and father was Mexican American talked about how his mother insisted he should attend an all-boys private school because it demanded more academic work and would be less distracting. He talked about how this setting influenced his sexual decision making.

They don't really talk about that [sex] here, but it's kind of a big influence I guess because it's a college prep school, they tend to keep you busy. My Mom had said that she didn't want me getting distracted by girls; she wanted me to worry about school.

Academic demands, high expectations and structured time were viewed as protective factors. The boys in this study felt that their academic environment was a powerful aspect of their success because they were busy focusing on school success, social time with females was restricted to after school and week-ends, and the school had high expectations for the boys and required them to be goal oriented. The social, religious, cultural and academic settings structured the context and influenced how some of the boys in this study interpreted risk, teen fatherhood and pregnancy prevention. Other contextual factors that may have influenced how these boys acted were the myths and preconceived notions that persist about male involvement in pregnancy prevention.

4.7 Myths and Preconceived Notions about Male Involvement

Myths and preconceived notions about males and sexual activity were described by the boys in this study. They discussed how societal ideas about males and pregnancy prevention were upsetting to them. These ideas stereotyped male behavior and

perpetuated certain behaviors in younger teens. Rob talked about the myth that all teens are sexually active and that males are irresponsible. He said:

I think a lot more people are (abstinent) than you think. I think the same with the girls, alot more than everyone thinks. Some people don't know this and that kind of gives men a bad stereotype when it comes to that, like we kind of force women into it. I don't think so, I think it's about the same either way, I think women can entrap men just as easily as men can entrap women. I think overall, they respect each other a lot, more than people think.

Paul said:

I think sometimes the guy gets the bad rap for no apparent reason and it is always the guy's fault. Like I said earlier, some guys will go as far as the girl will let him go and sometimes she won't stop him and it will keep going. The girls expect that every time and when something does happen he will get blamed for it and I think that is a double standard that has to change.

Paul and Derek discussed how these preconceived notions can influence younger teens to become sexually active at a younger age. Derek said, "...it's getting worse and worse. I know people like around junior high, not grade school, I don't know anybody doing it in grade school but around in seventh or eighth grade that kind of stuff spreads pretty quick. Paul stated, "I think the junior high kids are starting to do it more because they think it is going on. More because people keep saying it is and they think they have to fit in".

Myths and preconceived notions about how teen males behave in relationships influence some boys' decisions about sexual activity. These myths are barriers for teens that want to be abstinent but don't feel like they are fitting in. They also create a stigma about how boys act with girls and set up false expectations that boys are always risk takers and irresponsible. The boys in this study recognized that these myths and preconceived notions are important contextual factors to recognize and that they can

increase risk by influencing how younger teen males learn about how male's involve themselves in pregnancy prevention.

4.8 Summary of Contextual Core Concepts

Social norms, culture and religion, academic environment, and myths and preconceived notions are the core contextual concepts that emerged from the data. These concepts set the stage for the psychosocial processes described by the teen boys in this study. These concepts explain the environment and structure that preceded the boys' interactions and influenced how they took actions to avoid becoming a teen father. Recognizing the contextual factors allowed the researcher to begin to understand the social norms surrounding these teen males related to teen sexual activity, the religious and cultural influences these boys experienced, how the academic setting influenced goal setting and future planning, and what myths and preconceived notions about male sexual activity and pregnancy prevention actions persisted within their social environment. It also allowed the researcher to better understand the protective and risk factors that existed in these boys' lives. With this in mind, the researcher could better interpret the psychosocial processes that were described by the boys, understand how the boys interpreted the meaning of pregnancy prevention and how they carried out deliberate actions to avoid an unintended pregnancy.

4.9 The Psychosocial Core Processes

Four psychosocial processes emerged from the data as the boys discussed how they were involved in pregnancy prevention. These processes were becoming aware, having goals, being prepared, avoiding risk and using protection. The processes and the data supporting these processes are illustrated in Table 6.

4.10 Becoming Aware

The construct of becoming aware was derived from multiple concepts that related and were categorized during the data analysis. The teen boys revealed that they became aware of pregnancy risks, consequences, avoidances strategies and contraception by learning from others, thinking about pregnancy scares, acquiring knowledge about sexuality, communicating, and committing to good relationships. The construct of becoming aware is multifaceted and encompasses the characteristics of developing over time, continuously changing and having a reciprocal relationship with protection and risk. As the teen boys became more aware they discussed how they better understood pregnancy risks, relationship expectations, communication skills, fatherhood responsibilities, consequences of an unintended pregnancy, life goals and strategies for risk avoidance and pregnancy prevention. Some of the teen boys described how their knowledge about risk and prevention increased over time as they aged and acquired more experiences. This process of becoming aware is constant, dynamic and expansive in nature.

Learning from Others

The teen boys described how they became aware through the process of learning from others. They learned from their parents, siblings, relatives and peers through direct and indirect communication and through observation of others' experiences. The boys agreed with some messages, disagreed with others (sometimes strongly), and had difficulty understanding some of the messages. For some boys, they learned and understood the messages over time.

Table 4.6: Deliberate Actions to Protect Future Goals: Relationship of Core Psychosocial Process Concepts to Attributes and Data

Core Process Concept	Attributes/Definition of Concept	Direct Quotes From Participants
Becoming Aware	Learning from others over Time Parents Siblings Relatives Peers Pregnancy Scares Communicating with Partner Committed Relationships	"Learned along the way" "I have a really open relationship with my Mom ..." "I guess from him [cousin], I can see what I don't want to do. I just seriously want to do things the right way". "I have had guys come up to me and talk to me about it, because they know that I have been with my girlfriend for four years and that I have experienced all kinds of things with her."
Having Goals	Priority setting Career planning Financial stability Settling down, Steadiness Completion of college	"I would like to have kids around the time I get done getting my Masters or PhD." "I've got to worry about my grades right now so I can actually support a family when I get to that time..."
Being Prepared	Carefully preparing Always making sure Deciding what to do if something goes wrong	"They always have condoms with them and they don't want to take any chances of anything happening." " we were definitely saying that we would not do it until we were both ready".
Avoiding Risk	Steering away from higher risk situations Getting away from a risky situation Staying busy with other activities Choosing to socialize with peers who also avoid risk Avoiding dating relationships with girls	I will still hang out with them and they might be smoking or dipping and I will be like I will catch you guys later." "My sister and I, we're both the same. We really don't date or like to have a serious relationship with people."
Using Protection	Mutually choosing Using Withdrawal, Condoms, or Condoms and Birth Control	"I guarantee everyday at school they are talking about close calls and stuff like that. It is very positive and everyone is trying to work on it." "So I think pregnancy prevention is 50/50. We both kind of lean on each other." "I think it's mostly a male thing, a condom."

4.11 Learning from Communicating with Parents over Time

Some of the boys described how they learned from their parents about fatherhood and pregnancy prevention issues. Some experienced very comprehensive discussions with their parents while other only heard their parents talk about morality and rules regarding teen sexual behavior. Some of the parents were very direct, some indirect and others had experiences that influenced the boys. The boys described their personal reactions to these interactions as ranging from comfort and interest to discomfort, disinterest and at times anger.

Appreciating Direct Parent Messages

Josh discussed how his parents have spoken to him about sexual responsibility and fatherhood for the past few years and how this has increased his awareness about the issues. He said:

We have talked about it a lot of times. It was around my seventh and eighth grade year. We have discussed it several times and they tell me to know what I am doing and to make the right decisions and they tell me the consequences like if you get someone pregnant and the responsibility of taking care of the child.

Steve talked about the protective nature of his girlfriend's father and how he has talked to her directly about birth control options. Steve's girlfriend's father was demanding that she consider using protection to avoid the risk of a pregnancy. Steve said, "Her Dad is freaking out that we are still together and told her if she is going to stay with me then she is going on birth control."

Another boy discussed how his parents' messages were very strong and insistent about not having girlfriends in high school. John talked about how his parent's messages eventually influenced him to value the protective environment of an all boys high school. John's mother was African American and his father Hispanic and they were very

concerned about his academic success. They viewed dating as a barrier to this success.

John said:

.....my Mom had said that she didn't want me getting distracted by girls; she wanted me to worry about school. it's good. It's not like they don't want me dating at all, it's just they want me to realize that school is important and that having a boyfriend or a girlfriend can wait for when you get older and realize that you need school to actually go far in life. ... my mom used to tell me that I could have a girlfriend when I was 16 and she told that to my sisters. When I was younger I used to be angry about it, but now I realize that it was a good thing.

Messages Learned by Parent Experiences

Other teen boys talked about how their parents' experiences as a teenager made them more insistent with them about pregnancy prevention. Joe's mother was young when she had him and discussed how difficult it was to raise a child at a young age. He said:

My parents were pretty young. They had me when I think they were 20....yeah they worry. I have a really open relationship with my Mom and I kind of just told her [that I was sexually active] and she just made sure we were both using protection to be safe.....

Steve became aware of the importance of contraception because of his personal experience he had with his father and his mother's direct messages. His negative experience growing up without a father influenced his values about fatherhood responsibilities. He said,

I didn't want to be like my Father. My Mother and Father were never married and I didn't want to be like him. He said that I wasn't even his and they did a test and proved that I was his. My Mom basically threw a bunch of condoms at me and told me to give them out to my friends to keep them safe.

Uncomfortable with Direct Messages from Parents

Some of the boys talked about how uncomfortable it was to discuss sexuality with their parents and that their parents usually "sat them down" and talked to them rather than

the teen boys seeking out their parents for information. Sam described how awkward he felt with his experience with his parents. He said:

I actually wasn't active at the time but some parent thought we were, so they called my parents. They told my parents. I came home and they sat me down that's why we had the talk when I was in 8th grade. They sat me down and told me about sex and stuff. At the time, I wasn't sexually active, but my parents sat me down and talked to me about it. It was very awkward, especially because they were accusing me of being sexually active, when I wasn't. No, it wasn't going to happen. Yea it was pretty awkward.

Sporadic Messages from Parents

Some of the boys described how they didn't have open conversations with their parents; however, their parents occasional conveyed a messages to let their sons know how they expected them to behave when dating girls. These messages were very short remarks and often covered with humor. Derek said, "We [parents and informant] have [talked] but not extensively. Just like random comments before I go out to prom or something ... (laugh) like my dad would say don't be stupid tonight, you know stuff like that."

John talked about his conversations with his mother. He said:
Like when she sees a documentary or something she will let me know and tell me that I better not be doing that or something like that, she is serious but you can also tell that she is playing around at the same time. She lets me know in like a humorous sort of way.

Tim talked about how his father only brought the topic up when Tim had a girlfriend. He said:

...my Dad will like when I had my girlfriend he talked to me about it, but now that I am not dating anyone he is not going to worry about it until I get another one. My Mom just like trusts me. She is like telling me not to be stupid I guess.

Sparse Learning from Parents

Some of the boys did not think they learned from their parents and felt it was very

difficult to talk with them. They suggested that it was easier to talk to a girlfriend or teacher. Rob stated,

I don't think it comes up in any families; maybe one or two, just because the parents are very aware. Most parents don't want to talk about it, they just figure that you would figure it out on your own.

Joel exclaimed,

Yes, when they sat down and talk about it I was just like oh my god stop. That is what everyone's reaction is. I don't let either of them influence me. I make my own decisions.

Gary said, "I think it's kind of harder to go to your parents to talk about something than I think it is to talk to a teacher about it."

Sam who was sexually active described how it was much easier to talk about the issues with his girlfriend and that it was very difficult to talk to parents. He said,

The hardest thing is talking to my parents about it. It was the most awkward thing to talk about it with your parents. It was very awkward because you know it's kind of weird. With her [his girlfriend] I was more comfortable, I was more laid back and we could communicate, but with my parents it was hard.

Learned from Parents without Talking to Parents

In lieu of all of these ways that the boys learned from their parents, one boy talked about how he understood his parents' values even though they had never talked about them and that this influenced him to not let them down by disappointing them with his behavior. Thomas said:

I have never asked and I never really talked to my parents it was a given just the Way that I was raised. They didn't have to say it. It is hard to explain. I know where they stood and that they would be disappointed.

Summary of Learning from Parents

The teens learned from their parents from a variety of ways. They identified

direct conversations, indirect sporadic discussions, learning from their parents' experiences and learning from just being around their parents. Some of the boys accepted their parents' messages while others accepted some of the messages or rejected the entire message. In all cases, they described how their parent interactions increased their awareness of their parents' values, their own values, fatherhood issues and pregnancy prevention strategies.

4.12 Learning from Siblings, Protecting Each Other

The boys also discussed how they became aware by learning from their siblings about relationships and sexuality issues. They described how their brothers and sisters talked to them and attempted to protect them from making poor choices. They learned about the consequences of a pregnancy and strategies for prevention. Some of the boys in this study described how they talked to their brothers and sisters in order to protect and advise them about dating, risk taking and prevention.

Learning from Siblings with Direct Conversations

Some of the boys described how their siblings were very strong influences in their lives. John described how his sisters' messages strongly influenced him to avoid a relationship during high school because it would distract him from his school work. "My two sisters both talked about, well they taught me to not get a girlfriend and taught me how to keep my mind on school and how a girl may, well I don't want to say ruin my plans, but just will make things more hectic".

Josh talked about his brother's strong influence and how his entire family's values swayed his choice to avoid sex until marriage. He stated,

I talk to my brother. It is sort of carried out through the whole family about waiting until marriage. I know my sister has not had sex. I don't know about my

brother. It's sort of a thing that we have in our family. Just wait until you get married.

Paul's brother was also a strong influence in his choice to avoid sexual activity. He said,

I have had this conversation with my older brother too. He is the one that usually initiates those conversations because he works with guys. I have learned mostly through my education here and my brother rambling because he talks about natural family planning, abortion and birth control nonstop because he is in the Newman Club at college.

Protecting Siblings

Paul also talked about how he wants to be "protective" of his younger brother and older sister. He worries about them and doesn't want them to make a mistake. He said:

I get worried about my younger brother sometimes. I will tell him not to be stupid and make mistakes, but I don't pressure him about it everyday, but every now and then. I will have a conversation with him or when I know he is doing something with a bunch of girls is usually when I say things. Maybe like twice a year or something. It is not a huge subject with me. I have talked with my [older] sister a little bit about it. Even though I am younger than her I still have the protective nature with her. I have told my [younger] sister as of right now she is in the seventh grade and she is too young to even have boyfriends. If she has a boyfriend she has to bring him to meet me first.

4.13 Learning from other Relatives by Observation and Direct

Communication

In addition to learning from their immediate family, some of the boys described how they learned from other relatives such as grandparents and cousins. Some learned by open discussions with them while others learned from seeing their relative struggle with the consequences of an unintended pregnancy.

Observing Experiences with an Unintended Pregnancy

Derek described how his cousin's girlfriend became pregnant before graduating from high school and how this made him think twice about taking risks. He said:

I actually have an older cousin who was going to be in the Air Force and she (his wife) was pretty smart too. Like he was bent on being a pilot in the air force and it just kind of all stopped , stopped their goals pretty much. She probably would have had a better life than they are having now. Now they are living in a pretty small house with two kids and money is tight. They are getting help from the rest of the family if they need it but they are struggling.

Steve talked about his two cousins and their struggles with teen pregnancy. He said, "I have a couple of cousins who had kids when they were like 17. They both had to drop out of high school and one of them lived in his parent's garage for awhile."

Sam talked about how he learned from seeing his cousin as a teen father. "I guess from him, I can see what I don't want to do. I just seriously want to do things the right way".

Direct Communication from Grandparent

One of the boys talked about his relationship with his grandfather and how this has shaped his life values and goals. He described how he learned many lessons about becoming an adult such as financial independence, balancing fun and work and becoming responsible. He said:

Grandfather, he is huge in everything; he probably plays more of a role in talking with me about everything in general than anyone else in my family. He makes sure I focus on grades before anything else. And he makes sure I am planning everything right and he watches out to make sure I am going through the right steps.

Summary

The boys in this study valued their relationships with their relatives and accepted their support and learned from their mistakes. They spoke about these individuals with high regard and were influenced by their discussions and examples.

4.14 Learning from Peers, But Not “Obligated to the Group”

Peers are often considered a strong influence for how adolescents make decisions about their behaviors and how they manage their lives (Kirby, 2005). The boys in this study disclosed that their peers at times had more influence than their families. Gary compared the strength of peer influence to family influence. He said, "I think it [home] has had a lot to do with it, but I don't think it's the deciding factor. I think we rely more on our peers when it comes to those situations". It was common for the boys to seek out advice from their peers, give advice to their peers, feel pressured by their peers and sometimes succumbed to this peer pressure. Most of the boys did not feel that the pressure was so great that they had to succumb to the pressure. They seemed to be comfortable making their own decision and did not feel "obligated to the group".

Seeking Out Advice from Peers

Ralph described how he and his girlfriend sought out information from peers before they became sexually active. He said,

She said that she knew a few girls who had gone through like a few scares. There were a few of her friends that said if any thing came up or there were any kind of scares that you can go to Planned Parenthood and you can either talk with them and they will figure out a way to get you some kind of help or they will find some option to help you out.

Giving Advice to Peers

Sam, who is sexually active, often is asked for advice from other guys. He said,

I have had guys come up to me and talk to me about it, because they know that I have been with my girlfriend for four years and that I have experienced all kinds of things with her. They have asked me what they should do, what do I think, this happened, that happened, so yes, they have discussed it a lot with me about what to do and stuff like that.

Feeling Peer Pressured

Tim who had not been sexually active described how peer advice can turn into peer pressure and that it can be a stronger influence than family. He said,

They are advising each other but also pushing each other to go a step ahead and a base ahead I guess. I don't know what terms people are using these days, but they encourage you to go a lot further than the previous. ...after talking with them [peers] and hearing what they say about it and what experiences they have had about it I feel they have had the most influence on me, rather than my parents. They talk to me a lot more about it.

Ralph agreed that peer pressure was a concern. He said,

...one feels left out if they are not doing what their peers are doing. The peer group being around makes a big difference. It was getting toward my sophomore year so it was totally different kids and I was sixteen at the time and now I am eighteen. I was still getting pushed, but not nearly as much as now. Once everyone gets together and starts to realize what is going on and what people have one and what everyone is doing. They don't feel obligated to catch up, but more so they feel a little left out. Yes it is an expectation there are always people pressuring you. They are like, do you have a girlfriend and what all are you going to do? Be careful but you have to do this and this, you want to do this. I know there is a lot of pressure even around here. There is a guy that has not done anything yet and he will get a lot of crap given to him. There will be little comments thrown in, but not ragging them too bad. But there is a lot of pressure.

Recognized Peer Pressure but not "Obligated to it"

Some of the other boys recognized that there was peer pressure but did not let this influence their decisions. Derek who was sexually active said, "Now of days, I think there is a lot of pressure to become sexually active, but personally in my relationships it hasn't been that big of a deal." John who was not sexually active said:

I have like seven really close friends, and I think maybe two or three of them have been sexually active, so its not really a big thing for me to be pressured, but all around I think probably if you told someone that you haven't been sexually active yet then they would probably say something, but they would just not worry about it after that.

Gary said

I think it all depends on the couple really. I mean like you are going to be influenced by your peers and they are going to joke around with you maybe, but when it comes down to it, it's the couple's decision. We have our groups but we are not , what's the word, obligated to that group.

Denied Peer: "Personal Choice"

A few of the other informants denied that peer pressure existed in their circle of friends. Joel stated, "I don't really feel any pressure. None of my friends really make fun of them because it is their choice." Steve said, "No. I don't ever see anyone get stressed into it or like pressured into it, it's more just like a personal choice to me".

Peers continue to play an important role in creating a sense of normative behavior in adolescence lives (Hampton et al, 2005). In this study some of the boys talked about how they learned from their peers and taught their peers about sexual risks and prevention strategies. One boy discussed how peer advice could easily become peer pressure and this can be a strong influence for sexual decision making. Other agreed that peer pressure existed but they did not feel obligated to follow the crowd. In this study, the boys became more aware of prevention strategies and social norms by listening to their peers. This was an important source of information. From a symbolic interactionist perspective, family and peer relationships provide a rich climate for adolescent socialization and increased awareness and learning emerges from these interactions.

4.15 Thinking about Pregnancy Scares: Learning from Personal and Peer Experiences

A pregnancy scare can be a turning point in a male's life where they begin to develop procreative awareness (Marsiglio and Hutchinson, 2002). The boys in this study described how experiencing or hearing about a pregnancy scare was a powerful way for

them to become aware of the realities of becoming a father. These experiences were frightening and many of the boys talked about how they worried about the consequences of a pregnancy and how it would change their future plans. After the pregnancy scare many of the boys talked about how they changed their behaviors to avoid future pregnancy scares.

Learning from Peer Experiences

Derek discussed how learning about his friend's pregnancy scare made him realize that pregnancy would significantly interfere with future goals. He said:

The first time I really met somebody that had a pregnancy scare was my good friend that told me about it and coming from him I totally did not expect it at all. That would really ruin your life. I mean not ruin your life but it would stop any \ type of goals that you had. It would not have been good for him if that had happened. It's just my knowledge of that situation and how much it could really ruin like what I would be striving for.

Gary described his friend's experience with a pregnancy scare. He said, "They did use protection but I think the condom broke and they were of course terrified, you could just see it on their faces. They would just sit there and nothing was registering." Sam talked about his friend and said, "I have talked to many of the guys, well a couple of guys already this year that have already went to Planned Parenthood to get that pill [morning after pill]."

Learning from Personal Experiences

Some of the boys learned about the risk of pregnancy from personal experiences of a pregnancy. Some of the boys went through these scares with their girlfriends and others heard about a friend's experience. These experiences were very emotional for the boy and girl involved and consistently resulted in a state of high anxiety and constant worry. This state made it difficult for some of the boys to concentrate on their work or

studies during the day. The experience resulted in a change in the way the boys thought about pregnancy prevention strategies. The boys discussed how constant worry happened frequently among the boys even if they were using effective protection.

Steve discussed the **constant** worry and anxiety about getting his girlfriend pregnant even after using protection strategies. He said:

I worry about it quite a bit. I had a girlfriend for three years and we were sexually active for a while. It was pretty scary, like days after you were just like 'oh my God'. I even have friends who get pretty strung up about it. She was on the pill and we always used a condom and stuff like that, but even then we were still scared.

Sam talked about what he and other guys thought about when they were worried about becoming a father. He said,

If not their first time, second or third time, I think they have to contemplate and think what if she does get pregnant, what am I going to do and stuff like that. I had a scare once. And I was really, really young when it happened. . . .the next time it happened it was totally different, you know I put my things in order I made sure everything was right. She was actually on the pill, but at the time we weren't totally educated and we were still scared. . . we were kind of scared and she waited, waited, waited. It was kind of like a month thing and she waited for her period. I was scared constantly; I could not get it off my mind that whole month. I was contemplating what was going to happen if I did have a baby. How were my parents going to react and how was my life going to be. It was a stressful time.

Summary of Pregnancy Scare Experiences

The fear of pregnancy was a powerful emotion these boys experienced. They discussed how this fear was relentless and that it provoked constant worry and anxiety. The boys were uncertain about the effectiveness of pregnancy prevention strategies and were continuously concerned about ruining their future. They did not discuss their concern about fathering skills, they discussed concern about having to change their plans and give up their goals. The boys learned from their peers' experiences and their

personal experiences from a pregnancy scare. These experiences increased their awareness about the reality of becoming a father and motivated them to institute or to change pregnancy prevention strategies.

4.16 Acquiring Knowledge about Sexuality

In addition to learning from others as a way to become aware, the boys also discussed other ways they acquired and did not acquire knowledge about relationships, contraception and pregnancy risks. They discussed how there was an assumption that boys know what to do yet there are few formal processes for learning about these issues. They discussed how it was difficult to acquire knowledge and expressed a desire to have more opportunities in their school setting to learn about relationships and pregnancy prevention.

Learning over Time: "figuring guys would know"

The boys talked about how they acquired the knowledge over time. They could not identify a specific formal process of learning but assumed that most guys just knew the information. Gary said:

I don't think it's more the course work, I think it's more through everything else that we just kind of learn about it. It's not something really taught to us but we just kind of know about it. I think we are kind of self taught about that stuff.

Vince said, "I just learned along the way". He could not identify any specific way he himself learned about the topics. Dan who was not sexually active said, "I figure they (guys) would know what to do". Derek said,

I don't think anybody really wants to have a kid their senior year in high school. So everyone is either not sexually active or they are taking precautions against it. I'm pretty sure everybody would be aware of that. Maybe that's just in our school. I think there is a lot more of that going on at public schools.

Learning Over Time: Relying on Girlfriend's and Other's Knowledge

Paul relied on his girlfriend to know what to do and to tell him what to do. He said, "I think it is just something that we learn along the way but we need to be told what to do in some situations, I think, because we are kind of a little slow."

Expressing a Desire to Learn More: "beneficial to give them information"

During the interviews, some of the boys expressed the desire to learn more about relationships and pregnancy prevention. They talked about how they wished more information was presented in the high school setting. Tim said:

I think for the most part, we are pretty educated and would like to know what is going on as far as if the girl is on the pill. Either you read about it or you hear about it from friends or older brothers.

Sam talked about how he thought there should be more information available for teens and that telling them "not to do it" is not enough information. He said:

I think it is more helpful, obviously in this day of age, with society and MTV and stuff everything is based around sex. So I think it would be more beneficial to help someone, trying to protect themselves, more than telling them not to do it, you can't do it, wait, wait, wait because that most likely is not going to happen. I think it is more beneficial to give them information on how to keep themselves safe, what to do and stuff like that and if they were going to go the next step, the proper way to protect yourself. I think that's the best way to go.

Rob added:

I think we just need more school programs. Even in the Catholic schools, any school system. Not necessarily like going around and saying 'here everybody take a condom', but more informing them, not in a formal way, because I know some of the teachers teach it in kind of like formally, they should just talk with the students...asks us questions and people are going to honestly answer what they feel. Some people might feel uncomfortable, but it's an uncomfortable subject to talk about with anybody. You are going to have to talk about it with the person that you are going to be sexually active with so, so I guess it not only prepares them to be prepared, but it's also a way of prevention because they understand it more just by hearing it.

Summary of Acquiring Knowledge

The boys described how they learned over time but did not seem confident with

the level of knowledge they had acquired. They saw themselves as educated, but slow and that they needed more information and wished they could have more lessons in their educational setting. There was a basic assumption that the guys just knew what to do but they could not specifically give examples of how they learned or became aware of what to do.

4.17 Communicating with Partners Directly and Indirectly

Communicating with partners was an important way for many of the boys to get to know their girlfriend and to become more aware of risks and prevention strategies prior to making decisions about sexual intimacy. The boys in this study communicated directly and indirectly with their girlfriends. As a result of these conversations with their girlfriends, they talked about feeling "more comfortable" with each other, knowing "the right thing to do", and setting "a plan" to "be safe".

Communicating with Partners: More Comfortable

Paul talked about his relationship with his second serious girlfriend and how he found it easier to communicate with her because he had discovered in his first relationship the importance of communicating to partners. He valued the importance of knowing a person before making decisions about having sex. He said:

I think it was a little easier to discuss it [sex] because I didn't feel like anxious. Because I knew it was an important thing, it was a big deal. It was a little easier, I guess. The second person was a little more open to discussing it. It grew like the other one did, but like I guess it grew faster because she was a little more open about talking about prevention. Just talking about it. Just being comfortable with the other person, you can't really have an intimate relationship without knowing anybody, probably be together a long time and knowing the other person. You have to be comfortable with them to the point where you would be able to talk about anything.

Communicating with Partners: Doing what is Right and Setting a Plan

Some of the male informants described how they talked with their girlfriends regularly over a long period of time before initiating sexual intercourse and how that helped them prepare for pregnancy prevention. Rob said:

The first girlfriend who was on birth control, as our relationship grew, well when we first started dating, the first six months, we didn't really talk about it, and we just hung out with each other. Then when we started getting more serious, we finally just talked about it a little bit then it grew into talking about it more, like what should we do in this situation if it were to occur, so it just came up by itself, we didn't just say 'oh well we're dating now, we got to have a plan.

Ralph also had regular conversations over a long period of time with his girlfriend before becoming sexually active. He said:

It was about a year into the relationship. So we had definitely been around each other for a long time. It was something that had come up in conversation a couple of times. But we just kind of talked about it and like we don't want to rush into things. One night we just started talking about it. She said that whenever we did have sex we wanted to make all of the right preparations and everything so we made sure we had all the stuff we needed like condoms and all that kind of stuff so we could make sure we were playing it safe and all that stuff. So we talked about it before we did anything to make sure we were playing it safe.

Direct Communication

Some of the boys talked about how easy it was to talk with their girlfriends and that the openness varied in different relationships. For some this was an easy process for others it was more challenging. Gary talked about how open his girlfriends were to discussions about pregnancy prevention. He commented, "I think it's pretty open. ... I have discussed it with past girlfriends, but we were open about it and we were safe about it. It was pretty much mutual. It was open." Vince had direct and open conversations with his girlfriend and chose not to have sex. He said, "We actually talked about it a lot, just like way back when we were just starting to date and we were like no, we felt like it

wasn't a good enough time." Richard who also chose not to be sexually active talked about he directly approached the topic when he dated a girl. He said:

Actually all of the girlfriends I have had except one had no problem whatsoever with that. I just said it straight out that I was not going to be having sex until I am married. None of them had a problem with that. Most of them felt relieved because guys want sex naturally more than girls do I am sure. They are thinking that guys want them as a sexual object and they are happy when they are valued as a person more than an object. They respect you more. When I personally go into a relationship I don't try to bullshit anyone.... I just say it straight out that I was not going to be having sex until I was married.

Less Direct and Indirect Communication

Most of the boys in the study communicated with their girlfriends in a direct open way and talked for a long time before making decisions about having sex. A couple of the boys talked about how their conversations were less direct and more intuitive. Vince made the point that experience changed the amount of required communication between partners prior to choosing to have sex. He said, "If a girl is a virgin you would talk about it more. If not, it's sort of assumed and spontaneous."

Ralph never talked directly with his girlfriend because he had a strong suspicion that she was not ready to be sexually active. He said:

...my ex girlfriend wasn't ready yet. It was her decision. I wanted to, but she didn't. We never talked about it and I never told her that this is what I wanted to do, but in my head I thought I am never going to force this on her and I knew she was not ready.

Paul expressed that male-female communication was confusing at times. He said, "...some guys will say she is giving a hint and you are like no she is not". Michael said, "Doing things right. It almost seems like the guy almost never does anything right. Like you say one thing and the girl will take it the complete opposite".

Steve added:

...from an all guy school perspective and everything, we don't get to relate to a whole lot of girls here. That was probably one of the big things, it wasn't so much I had a problem with, but I had a bunch of friends who were in relationships where they were like "man she won't stop crying and all this crap" and I was like dude, I mean just comfort her or something, I mean come on. My mom says I got my intuition from her, because I know how to help girls with their feelings and stuff.

The boys in this study valued communicating with their girlfriends because it was a way for them to feel more comfortable, become more aware of their girlfriend's intentions and concerns, and to make a pregnancy prevention plan in case they chose to become sexually active. Some of the boys talked about how easy it was to communicate to their girlfriends while others were confused about how to interpret their girlfriend's responses. They communicated through direct and indirect methods and became more comfortable with the process as they communicated over time and/or experienced more relationships

4.18 Committing to a Good Relationship

The final core concept that emerged related to the construct of becoming aware was committing to a good relationship. The boys in this study discussed how they were committed to their relationship for a long time prior to becoming sexually active. These boys talked about dating their girlfriends for months and some for years before becoming intimate. The process was an important process of becoming aware. Communicating to each other was part of this commitment but also spending time in a long term relationship was an important aspect. Committing to a good relationship, verses having one night stands, was important to the boys in this study.

Rob, who had decided not to be sexually active with his girlfriends, discussed how knowing them over time was an important part of making that decision. He said:

I didn't feel like I knew them well enough. Like something I wanted to share with them. I liked being around them, but I didn't feel like I was that comfortable enough around them to become sexually active with them. Most of them (guys) aren't. If they can't commit to that [a relationship] then they don't feel like they can commit to a sexually active relationship.

John said,

Most of the guys aren't like, like they don't go out and sleep with a bunch of girls, most of them have a steady girlfriend that they have been with for years and mainly stay with that one girl and try to do school at the same time. So they're trying to make a future for themselves and have a girlfriend at the same time.

Sam said,

Me personally, I think [having numerous sexual partners] it's gross. I have been with my girlfriend for four years and to be with another girl, I'm just not into it. I know other guys, it's not a competition, but it's almost like this is how many girls I've slept with. So, I think it's dirty, but to a lot of people, depending on who you did hook up with, think it is so called cool. I guess we thought we were ready. We were dating for a couple of years and stuff like that. Yea we talked about. I don't regret it. I thought we waited a long time and obviously I love her, so I don't regret it.

Joe talked about how a good relationship was one based on trust. He said,

Trust. I know that is a big thing with me when you go into a relationship it should be a trusting one not just a bang, bang relationship and do what ever and party relationship. That is what I look for.

Richard valued the importance of taking time to get to know someone before becoming sexually active or committing to the relationship. He also discussed how this process can be very disappointing at times because you may find out that the person you have committed to over a long period of time is not the right person for you. He talked about how this makes him feel like he has wasted a lot of time. He said,

It takes time to get to know someone well. They can seem like the nicest person but it takes awhile to find out their true morals and true values. Then you realize

you have just wasted six months of your life pursuing this. I actually thought that with my last girlfriend that I dated the longest. I was falling head over heels for her and she started getting in trouble. She would run away from home and her parents would have to call the cops to get her home. She would then call me and ask me to help her out. I was not going to help her out and get involved with her family matters. I can't do that and it is not my position to. I was crazy about this girl but I was too young to worry about.

The boys in this study became more aware through the process of committing to a good relationship. This process allowed them to get to know their girlfriends, develop trust and to make decisions about the future of their relationship. Some of the boys talked about how most of guys don't go out a "sleep with a bunch of girls" and that this was "gross" The boys valued a committed relationship as an antecedent to committing to a sexual relationship.

4.19 Summary of the Construct Becoming Aware

The construct of becoming aware is built from multiple core concepts: learning from others, acquiring knowledge, communicating to partners and committing to a good relationship. This construct is dynamic and changes over time. Becoming aware is part of the process of formulating identity and self (Marsiglio, Hutchinson and Cohen, 2001). The adolescent boys in this study derived meaning from the psychosocial processes of becoming aware and through self interaction and interpretation. These processes increased their awareness of pregnancy prevention and the boys talked about how they took actions accordingly.

4.20 Having Goals for the Future

A second major construct that emerged from the data was "Having Goals for the Future". This was an overriding theme that was consistently talked about as the boys discussed teen pregnancy. They discussed pregnancy prevention in terms of protecting

goals and pregnancy in terms of ruining goals. One boy talked a boy he knew who recently became a teen father. "There is a guy that I have known for a while. We are not friends or anything, but I know him. He is a really good athlete, but he has screwed up his life right there."

"Aspirations for the future" was considered a protective factor for the boys and reaching their goals was described as a result of pregnancy prevention. Some of the boys also talked about lack of having goals or "thinking that you were not going to amount to anything" as a precursor to risk taking behavior and teen pregnancy. Derek talked about his old friends from grade school. He said:

I don't hang out with many of them now a day. I do see some of them every once in a while. ...from my junior high there were kids that were probably definitely like, I mean if they didn't change their ways they were bent to have a child before they got out of high school. They are not even thinking about or even realize how close they were to having a kid. It's not that they don't care about anything It's almost like they've been brought up to think they were not going to amount to anything...like it was not an option for them. Yea, like they wouldn't think like if they had a child like what they would have to do. Like maybe they are I may not be right but that was the impression I got.

This construct of having goals for the future was grounded in data that included concepts of priority setting, goal setting, career planning, financial stability, settling down, steadiness, completion of college and beginning a career. The boys in this study talked about how they saw themselves as a father only after achieving their goals first. One boy, Derek, said he wanted to pay off his first house before he had any children because before that "It could ruin what I'm striving for". Another boy, Ralph, said, "I would like to have kids around the time I get done getting my Masters or PhD." Joel said, "Right now I have too much to see and do. You can't do that with a family. I want to travel and see the world. When you want a family and you want to settle down." John

said, "Maybe after college and I have a good job and a house." Richard said, "I have a million things to be doing. I've got to worry about my grades right now so I can actually support a family when I get to that time..."

It was evident that the boys in this study had learned to set goals and that these goals were very important to them. The process of goal may have stimulated the boys to think about how to delay fatherhood and to protect what "they were striving for". Paul talked about the boys at the school and said, "I think most of the kids are pretty smart about it. They all have aspirations for their future like going to college and getting a good job and don't really want to raise a kid when they are getting out of high school."

4.21 Being Prepared to Protect their Goals

Along with becoming aware and planning future goals, being prepared emerged from the data as an important concept of the substantive theory "deliberate actions to protect future goals. As the boys found meaning of pregnancy risk and prevention, they took actions to prepare for pregnancy prevention strategies. They talked about being prepared and what this process entailed by using words such as "careful preparation", "always make sure" and "what to do if something happens. They described using cautious, deliberate and thoughtful behaviors as they prepared for avoiding an unintended pregnancy.

Preparing to use contraception and barriers

The boys described how they prepared for sexual avoidance and for using protection. They discussed preparation strategies with their girlfriends and how they did not rely on their girlfriend to be prepared. They believed it was their responsibility in the long run.

Ralph talked about how the guys he knew were prepared to use contraception. He was certain that his friends would not take any chances and would always access protection if needed. He said,

I know a lot of guys even the single ones that go to parties and meet people. They always have condoms with them and they don't want to take any chances of anything happening. They will always make sure they have them or find a way of getting them. John said, "...most guys here are sexually active and they do use protection and they try to prevent it".

Being Prepared by Relying on a Girlfriend

Rob, talked about how he is always prepared to prevent a pregnancy but that some guys are not as prepared and may tend to rely on their girlfriend using birth control pills. He said,

I think a lot of people are very unprepared. I think they kind of count on the girl to be prepared. The heat of the moment is a completely different mind set than thinking about it before hand and then thinking about it afterwards. Afterwards, they are probably going to be devastated and really scared about what's going to go on and that's not good for a relationship.

Preparing to Remain Abstinent because of Lack of Preparation of Being a Father

Tim, who chose to be abstinent, described how he wasn't prepared to become a father so he wasn't willing to take the risk of having sex. He said:

I wasn't prepared for the responsibility I guess. Just like knowing I am in charge of making a big mistake that can ruin my life. I wasn't and I am still not prepared. In my book, of course I am not. I am just a senior and don't have anyway to support someone.

Readiness verses Being Prepared

Sam, who is sexually active, talked about how being "ready" to have sex is different than being prepared to have sex. He talked about younger teens and how they think they are ready to have sex but are not prepared to prevent a pregnancy. He said:

For their first experience, they are probably ...ready, I don't know if

you are ever ready your first time but I guess if they are willing to do it, they are probably ready. To experience it, it's all out there like I said this world is just based all around that. I think they are ready to get that feeling to know what it is to be included in that group of knowing what they are talking about sex. I think they are ready. I think they themselves, they think they are ready physically. The responsibilities of having a child, no way. And STD's and stuff like that all comes with it too. No they are not ready yet. They just want the feeling or stuff like that.

Joe also discussed how he would deal with the situation if his girlfriend got pregnant. He said, "...if there was one, there would probably be an abortion."

Preparing for emerged from the data as a process these boys went through to prevent a pregnancy and also to deal with a possible pregnancy. Many of these boys were prepared to remain abstinent or to use protection. They were also prepared to problem solve with their girlfriends in case there was a possible pregnancy. Some were prepared to seek out the morning after pill or even an abortion if a pregnancy scare came to pass. Some of the boys were uncertain about their preparation. They saw different levels of preparation. They talked about being prepared to use protection and because they were not prepared to take care of a baby.

Preparing for Contraception Failure

The boys discussed how they researched options and prepared for problem solving in case there was contraceptive failure. Vince described what he did to problem solve and void a pregnancy:

Most guys just usually wear a condom and then the only time anyone really worries about anything is if the condom ends up breaking. I was worried and I called someplace to find the morning after pill and I couldn't get it because it was Friday and they close on Thursday and weren't open till Monday. So then I called the help line and the lady asked, when was her last period, and then she was just like don't worry. I just did that to try to solve the problem for my girlfriend.

Tim talked about his friend's experience with a pregnancy scare and how he was problem solving to prevent becoming a teen father. Tim said,

He was like if anything happens I am going to go to Michigan to get an abortion. What was going right through his head; things will change and if it really did happen, what if he did have a kid and all of the things that might happen?

Thomas' girlfriend did get pregnant because of contraception failure. He discussed how he problem solved and dealt with the realities of becoming a teen father. He talked about how he prepared for whatever she chose; to abort or to have the baby. When she first found out she was pregnant, he encouraged her to talk with her parents even though she was afraid. He said:

Pretty much the only support she had was me. She would just cry on the phone multiple times. Even her brother didn't even know. Eventually, her parents found out and they took her to have an abortion. If she would have kept the baby, I would have definitely picked up a second job and I would have done everything.

4.22 Summary of Being Prepared

The boys in this study describe the process of being prepared to avoid an unintended pregnancy. They prepared by carrying condoms, relying on their girlfriends to use contraception, recognizing their own lack of preparation to be a father and preparing to avoid having sex, recognizing that readiness for sex is not preparation for pregnancy prevention and preparing for contraception failure by knowing about the morning after pill and abortion resources. This process was an important step toward carrying out actions to avoid risk and to use protection.

4.23 Avoiding Risk

Avoiding risk emerged from the data as a strategy some of these boys chose to prevent pregnancy. Avoiding risk included actions steering away from entering high risk situations, getting away from a risky situation, staying busy with other activities,

choosing to socialize with peers who also avoid risk and avoiding dating relationships with girls.

Avoiding Situations that may be High Risk

Richard, who is abstinent, talked about how he and his brothers avoided high risk situations. He said:

My one brother is in graduate school for medical college. He is smart enough to stay away from that kind of stuff. My other brother doesn't talk about it but we know what we are supposed to do. People know how I feel about drinking, smoking and sexual relationships. My friends know how I feel about it and they don't pressure me. I will still hang out with them and they might be smoking or dipping and I will believe I will catch you guys later.

Joe was dating a girl who was a teen mother. He was not the father of this child.

The researcher asked him if he was concerned about the risk of a second pregnancy and he responded,

Well we brought it up a few times. She was sexually active quite a bit and you can tell. We are working on it. I know I want it and I know she wants it, but we try to work around it. There is foreplay and that is more of a tease. We have been trying to stay away from it totally for the most part because the baby is around and that makes it a lot easier.

John spoke about how this all boy environment is less distractive and makes it easier to avoid risk and distraction. He said,

Yeah in a public school you have boys and girls, and you are surrounded by girls everyday and you think more about girls then you do here because you are just surrounded by guys so you really concentrate more on school and friends I guess and not really getting into relationships.

Getting away from a risky situation

Derek described how he and his girlfriend avoided risk by leaving when things got too risky. He said:

Like you may be in a place with a bunch of friends and you kind of wonder off with somebody and say 'we should probably head back or you know'....Yea, so..

Well nothing would have happened without a condom. I wouldn't have gone that far without using some protection.

Steve talked about feeling pressured by his girlfriend who wanted to have sex. He said, "I didn't really like her too much so I kind of just backed off on that one".

Staying busy with other activities

George talked about how busy he was and that he didn't have time to have relationships with girls. He said:

For me it was that I didn't have that much time and I was doing a lot of stuff like during the day. I had practice and after that a lot of homework due to the college classes I have taken. When I got time it was like twenty minutes to talk to my girlfriend and she lived really far away, so we didn't see each other.

Socialize with peers who also avoid risk

Richard talked about how it was easier to hang out with people who had the same values. He said:

I have friends that are Catholic and we just have a good time and don't have to worry about that because we are on the same page. It is kind of a given. We don't put ourselves in those positions.

Avoiding Dating Relationships with Girls

Another strategy to avoid risk was avoiding dating relationships. Dan, who was not sexually active, described how he and his sister both avoid dating.

My sister and I, we're both the same. We really don't date or like to have a serious relationship with people. Some say you guys are kind of weird. People say why don't you go out and date people and I say naa...I don't have time.

Joel described his friend who also avoids dating to avoid any risks. He said, "My one friend is just like anti dating and won't date for any reason. It just brings too many complications."

Through the processes of avoiding and leaving high risk situations, staying busy

with other activities, socializing with peers with like values and delaying dating in high school, these boys were able to avoid risk and prevent pregnancy. All of the boys who were avoiding risks talked about their future goals and how they were focused on achieving them.

4.24 Using Protection

In addition to avoiding risk to avoid a pregnancy, some of the boys who were sexually active talked about using protection to avoid a pregnancy. The data from the boys' interviews revealed that using protection was a dynamic, mutual and diverse process.

Dynamic Process of Using Protection

During the interviews the boys described how they became more aware of the risks and strategies for pregnancy prevention through their social interactions and as a result they modified their behaviors and they used more consistent and effective protection methods.

Tim talked about this dynamic process. He said:

People are wearing protection. I guarantee everyday at school they are talking About close calls and stuff like that. It is very positive and everyone is trying to work on it. I guess that's a good thing. They are really careful.

Mutual Process of Using Protection yet the guy's responsibility

The boys also talked about how the process of using protection was based on a mutual choice between themselves and their girlfriends but they also described situations where they needed to take the lead.

Ralph talked about how you knew what the girl's choice was in relation to protection even if there was no direct communication about the subject. He said,

Most time it is more of like a mutual thing. If you are with a girl and even if you don't talk about it you can tell what their views are just by being around them. You can tell how they think and how they talk about the subject. I think it is most of the time a mutual thing.

Rob discussed how it should be a mutual responsibility and that relationships should have agreement. However, he talked about how he has had to take the responsibility of stopping sexual activity before it went too far because they did not have protection available. He said:

I think I have a lot more self control than most people my age when it comes to guys or girls, because there has been times where we didn't have one [condom] and we were going to do it anyway, and I was the one to stop it, because I didn't want to take that chance. I think it's 50/50, because a relationship is 50/50. So I think pregnancy prevention is 50/50. We both kind of lean on each other.

Derek also described how using protection should be a mutual process but the guy should take responsibility. He said:

I think the guy would normally be the one that would bring it up [birth control]. Maybe it's just because I'm a guy but ...I'm sure that most people would stop themselves before something would happen like that. So, maybe it would be more of a mutual thing but I know as a guy I wouldn't have unprotected sex.

The process of using protection included a diverse array of pregnancy prevention methods. The boys described using withdrawal, condoms, and birth control pills. While they were preparing for pregnancy prevention, a few of the boys talked about what they would do if their protection method failed and discussed the options of using the morning after pill or an abortion.

Using Withdrawal

Vince described how he used the withdrawal method to protect against a pregnancy. He did not seem to be aware of its low efficacy rate and was confident that this was an effective method. His girlfriend was afraid she was pregnant but he was

confident that she could not be pregnant. He said, "I don't know, it was more her being scared than me. I wasn't really worried for some reason because I just didn't think I actually came inside of her. So I was sure there was nothing wrong."

Using Condoms

Some of the boys talked about how they always used a condom. When asked if it was difficult to introduce the use of a condom in a relationship, Joel said, "I am just used to it. It doesn't take that much effort."

Gary commented,

I think a lot of kids take the necessary precautions, I don't think they are stupid about it. Nobody wants to take that risk and if you do you're considered stupid. So I don't think guys are afraid to take that responsibility, either by saying something to them [girls] or using a condom. Yea, it's normal. It's not embarrassing. There is a maturity aspect of it, but overall if you are going to take the responsibility to have sex then you are going to take the responsibility to go out and get the proper whatever or so.

Sam talked about how he and his girlfriend discussed using protection but how he thought girls rely on guys to carry a condom. He said:

We told each other really that we weren't ready for a kid. I guess we thought, we consider that protection for me and plus she was on the pill, that our odds were with us. I don't think they [guys] rely [on the girl]. I think it's mostly a male thing, a condom. I think that's basically what it is. I know they have female condoms and stuff like that but I think it's males. They rely on the male to carry the condom.

Using Birth Control Pills and Condoms

Rob talked about how he decided to use a condom even if his girlfriend was on birth control. He didn't think you could be too careful. He said:

In both relationships, we agreed that we would still use a condom. We agreed that we wouldn't have sex if we didn't have one as back up, because you can say you are on birth control, and you really don't know even though you might trust the other person, but you can never be too preventious.

The data revealed that these boys were very aware of the importance of using protection and although they believed this process should be a mutual process, they also believed it was their responsibility to carry out this process. They described using a variety of protection methods and discussed plans to avoid being a teen father if these methods failed.

4.25 Summary of Psychosocial Core Concepts

The adolescent males in this study assigned meaning to their experiences with pregnancy risk and prevention within the context of social norms, academic environment, culture and religion and societal myths and preconceived notions. Through the psychosocial processes of becoming aware, having goals for the future, being prepared, avoiding risk and using protection they carried out deliberate actions to protect their future goals. These actions were based upon their interpretation of the context and psychosocial processes they experienced. .

4.26 Beginning Theory: The Basic Psychosocial Process: Deliberate Responsible Actions to Protect Future Goals

The informants strongly related pregnancy prevention to protecting their future. The substantive theory or basic social process that emerged from this study, "deliberate action to protect future goals" is illustrated in Figure 4.1. This theory explains how these boys interpreted the meaning of teen pregnancy and how they carried out strategies to prevent an unintended pregnancy. This beginning theory was derived from the data and is comprised of the relationships of the contextual core concepts and psychological social process core concepts that clustered from the data during the analysis. The theory of "deliberate actions to protect future goals" is a dynamic interaction system that evolves as

the contextual factors and psychosocial processes change and develop over time. This system or theoretical scheme explains how the teen boys in this study involve themselves in pregnancy prevention strategies. The contextual concepts; social norms, religion and culture, academic setting, myths and preconceived notions are the structural and environmental factors that are antecedents to the process concepts. These antecedent factors influence the core psychosocial processes of becoming aware, having goals, being prepared, avoiding risk and using protection. These antecedent factors change and develop over time resulting in changes in interactions and the psychosocial processes carried out to avoid an unintended pregnancy.

The psychosocial processes are also dynamic and interdependent. They can occur sequentially or simultaneously. As the teen boys increased their level of awareness, had more goals or became better prepared the actions to avoid risk or used protection changed.

The data suggested that the boys viewed teen fatherhood as ruining or stopping their goals and they viewed pregnancy prevention as protecting their future goals. The substantive theory "deliberate actions to protect future goals" is linear or directional in nature. Figure 4.1 illustrates this process and the arrows depict the directional relationships of the concepts. The context influences awareness which in turn influences having goals and being prepared which ultimately influences avoiding risk and using protection. The data strongly suggested that the presence of future goals in these boys'

Deliberate Action to Protect Future

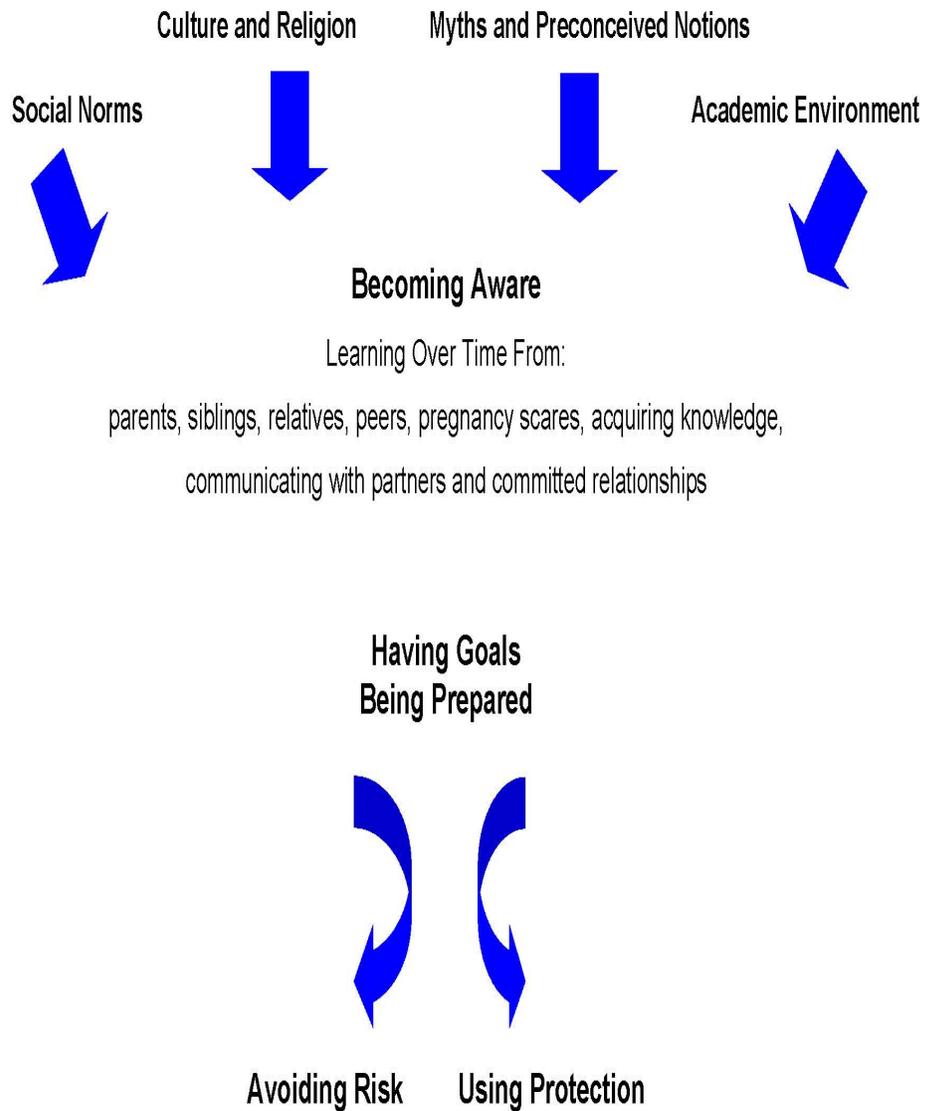


Figure 4.1 Deliberate Action to Protect Future

lives resulted in deliberate actions to protect these goals. It also suggested that these goals grew over time and that as future goals become more realistic, established and important; deliberate actions become more consistent and the level of protection becomes more comprehensive. Deliberate action to protect future goals explained how the boys in this study interpreted pregnancy prevention and how they became involved in the process of pregnancy prevention.

Chapter 5

Discussion of Findings

5.1 Introduction

The purpose of this qualitative research study was to explore adolescent male involvement in pregnancy prevention. Grounded theory method enabled the researcher to identify how adolescent males prevent an unplanned pregnancy, to better understand their perceived involvement in pregnancy prevention and to generate theory explaining male involvement in pregnancy prevention. The inductive process of this qualitative study revealed a substantive theory explaining how this group of teen boys successfully avoided becoming teen fathers. It revealed a process of deliberate actions carried out by the boys to protect future goals which resulted in pregnancy prevention.

The findings from this study are grounded in extensive data collected from 18 interviews conducted with adolescent boys who were 18 years old and attended high school. Data was analyzed concurrently with the interviews to allow for constant comparison and theoretical sampling. Rigorous analysis took place over a ten month period. This analytic process was a recursive process of coding, categorizing, constant comparison, linking categories, identifying core categories, relating core categories and identifying a basic social process. It enabled the researcher to derive substantive theory from the data.

The data, which were direct quotes from the interviews, were presented in Chapter 4 along with the contextual and process concepts that emerged from the data

analysis. These concepts became the foundation for the substantive theory that explains the social processes that took place as the adolescent boys in this study managed teen pregnancy prevention. The theory includes the contextual concepts of social norms, culture and religion, academic environment, and myths and preconceived notions; and the psychosocial processes of becoming aware, having goals, being prepared, avoiding risk, and using protection. Figure 4.1 illustrates the conceptual relationships that comprise the substantive theory "deliberate actions to protect future goals". This chapter will discuss the findings from this study in relation to the literature. It will discuss how the context relates to the psychosocial processes used to manage pregnancy prevention as well as how the boys carried out strategies for prevention. Social theories related to the findings will be discussed to further explain the application and the "fit" of the substantive theory with current theories and frameworks. The chapter will describe how males are involved in pregnancy prevention, their management strategies and how the myths and preconceived notions of male involvement prevail in spite of these actions. Chapter 5 will also discuss the implications of these findings for nursing practice, education and policy development; recommend areas for future research; and present the overall conclusion for this study.

5.2 Discussion of Contextual Findings

Male involvement in teen pregnancy prevention has not been explored extensively in the literature. Traditionally females have been the focus of teen pregnancy prevention programs and research. Lately, there has been an emphasis to carry out research in this area because of the recent decline in teen pregnancy rates that have been partially attributed to the changes in male sexual behavior (Sorenstein, 2006). These changes

include fewer teen males having sexual intercourse, increased use of condoms and fewer teen males having multiple partners.

The findings from this study are timely and demonstrate that teen boys are active participants in the process of pregnancy prevention. They revealed how the boys in this study carried out strategies for prevention and explained how the boys interpreted the meaning of pregnancy prevention in their lives. The researcher discovered that there was both individual and shared meaning among the participants in relation to pregnancy prevention. There were differences in the way the boys carried out pregnancy prevention strategies. For example, some of the boys were sexually active and used protection while others avoided risk and remained abstinent. Some of the boys became aware by communicating with their parents while others did not. However, the similarities were apparent in how they took into account their future goals, how they thought about the consequences of an unintended pregnancy and how they demonstrated consistent, responsible actions and determination to avoid becoming a father at this time in their lives. They construed that an unintended pregnancy would "ruin their life" and "stop their goals". With this interpretation in mind, they carried out strategies to protect their future goals. The insight gained from the data explains the social phenomenon of teen male involvement in pregnancy prevention for this group of boys.

Numerous studies have been conducted examining the demographics of teen pregnancy in general, the causes of teen pregnancy and the effectiveness of prevention interventions. Most of these studies included either female and male participants or females only. Some of the studies examined gender differences but very few studies included adolescent males only. The majority of the research in the literature has focused

on the context of pregnancy risk and prevention. There has been little research exploring the psychosocial processes of males in relation to pregnancy prevention (Marsiglio & Hutchinson, 2002). The contextual factors that the research has queried are often referred as environmental factors, risk factors, protective factors, antecedent factors and/or contributing factors. None of these factors have been identified as single causal factors of teen pregnancy. In fact, health practitioners, researchers and policymakers now recognize that teen pregnancy is a multifaceted problem that requires multilevel solutions and interventions addressing both context and social processes (Kirby, 2005).

It has been important to study the contextual factors because how males perceive and assign meaning to their experiences stems from the influence of larger social patterns, cultural milieus and value orientation (Marsiglio & Hutchinson, 2002). Although the literature is not conclusive about cause and effect, it does suggest that the contextual factors have a strong enough influence to risk and/or protection to warrant consideration, modification and or enhancement as a means to facilitate pregnancy prevention behaviors (Kirby, Lepore & Ryan, 2005).

In this study the contextual factors that emerged were social norms, academic environment, culture and religion and myths and perceptions. The boys in the study discussed how these factors shaped their perspectives on risk taking and pregnancy prevention. There are many research studies that also discuss how these factors influence teen behavior.

Strouse, Buerkel-Rothfuss and Long (1995) and Steele (1999) conducted research studies focusing on how social norms created by the media influenced sexual behavior in adolescents. Although their research was not specific to teen males, they did learn that

adolescents interact with media all day long (Steele). They watch TV, listen to the radio, read magazines, talk on their cell phones and discuss all of this with their friends at school. They select media that is relevant to their life and rely on media to learn about sexual issues. They discussed how sex is portrayed in all of the media; television, movies and music and that every day products are sold by using sexual messages in commercials, videos, flyers and billboards. The findings in the literature were similar to the findings in this grounded theory study. The participants identified the media as an important source for knowledge acquisition and also as a source for males, especially younger teen males, to learn about the social norms for sexual activity. These 18 year-old boys were concerned that younger boys did not recognize that the media did not always provide correct information and often exaggerated what was really going on. They feared the younger boys misunderstood the social norms of adolescent sexual behavior because of the messages they were hearing from the media and that these youth would base their perspectives and behaviors on these misconceptions. They also discussed how sex prevails in our pop culture yet public discussions are whispers and conversations are often censored and discouraged which allows the misconceptions to persist. The extent of how media shapes the lives of teens is not known, very complex, and intersects with other competing influences such as family, friends, school and society in general (Steele).

Another contextual factor identified in this study was religion and culture. The boys in this study came from a variety of religious backgrounds but due to the fact that their high school was a Catholic High School, all the boys were exposed to Catholic values on a daily basis. During the interviews some of the boys talked about how their religious values strongly influenced their behaviors but for most boys, these values did

not influence their behavior in relation to sexual activity. Kuther and Higgins-D'Alessandro (2000) discussed how moral reasoning and moral behavior often breaks down because the individual views the issue as a personal choice rather than a moral issue. This view was illustrated with one of the boy's comments about the conflict between religious messages and premarital sexual activity. He said, "No, they don't feel like it is a rule they are breaking, everyone is doing it so it is not like it is that bad." The boys did not view sexual activity as a moral issue which had good and bad choices; they viewed it as "natural" and a personal choice.

Rotosky, Wilcox and Wright (2004) reviewed 50 research studies on the impact of religion on adolescent sexual behavior. These studies included males and females. Religion was identified as having some affect on teen sexual activity before the age of 18. The findings suggested that males from a religious background were less likely to have sex before 18 but were also less likely to use contraception if they did have sex. One needs to consider whether teens view the morality of having sex and using contraceptives differently. The teens in these studies may have viewed contraception as morally wrong and having sex as a personal choice. This is an area that cannot be addressed with the findings from this study but would be an important area for future research. Some of the boys in this grounded theory study chose not to be sexually active because of their religious background but none of the boys were sexually active without using protection.

Contextual factors such as culture, race and socioeconomics are frequently discussed in the literature as important issues related to sexual risk taking (Kirby, 2005); however, the data from this study did not provide insight into how they related to these boys' experiences. The boys were from a variety of cultural, economic and racial

backgrounds but only one boy discussed his cultural background and how it shaped his views on pregnancy prevention. He strongly believed that his culture provided him with a better understanding and awareness of the issues related to sexuality and pregnancy. He was born in Germany and moved to the United States as a child but continued to travel back to Germany each summer. He talked about how Germans had open discussions about sexuality at home and in the schools and how the United States considered this a very private topic. He perceived this as a barrier for teens in the United States. It is interesting to note that these cultural differences are discussed in the literature and that statistics support that there is a difference in the teen birth rates in that the United States' rate is four times greater for girls age 15-19 compared to Germany: 41 verses 11 per 1000 respectively (United Nations Statistics Division, 2004). It is most important to note that cultural differences can be a strong influence in how teens ascribe meaning to pregnancy prevention.

The academic environment surfaced as an important protective factor for the boys in this study. They described the academic environment as very demanding, orienting them towards goals, setting high expectations while protecting them from too much down time and female distractions. Many research studies have examined the relationship of academic achievement to teen risk taking behaviors. Kirby (2002) reviewed multiple studies that examined the impact of school involvement, school characteristics, and school based programs on sexual risk-taking. None of these studies identified a magic formula for teen success but they did demonstrate that youth who dropped out of school were more likely to become a teen parent, youth who planned to attend college had a greater use of contraception, and schools that mimicked communities of poverty and

social disorganization had higher rates of teen pregnancy. Future goals, structured environments and access to resources surfaced as important protective factors for teens. Kirby added that many social scientists and educators have suggested that school impacts adolescent sexual behavior because it structures time, increases student exposure to risk reduction ideas, can increase communication skills that in turn improve negotiation and refusal skills, can increase student belief in their futures, and motivates them to set goals.

This inductive study discovered the contextual factors that shaped these boys' point of views about pregnancy prevention. The boys identified a number of protective contextual factors that influenced their perspectives and actions related to pregnancy prevention. It is impossible to determine which one of these factors was more or less influential because the social forces were interrelated and dynamic. The strategies that emerged; becoming aware, making goals, becoming prepared, avoiding risk and using protection reflect how these social forces shaped their actions to be responsible and deliberate.

Grounded theory method enables the researcher to focus on the social psychological processes of individuals undergoing life events while recognizing that the phenomenon of interest can be rooted in layers of context that may be hidden from view (Benoliel, 1996). The theories of social capital, possible selves and goal setting are closely related to the phenomenon that emerged from this study. Discussing these theories in relation to the findings from this study is useful in understanding how these boys successfully protected their goals and how these theories provide transparency to the links between the context and psychosocial processes that emerged from the data.

5.3 Discussion of Social Theories: Social Capital

The concept of social capital can be considered when explaining how the academic, religious, cultural and social norms influenced the successful actions of the boys in this study. Coleman (1988) describes social capital as resources for individuals moving toward actions and achievements. He claims that social capital makes possible achievement of ends that in its absence would not be possible (s98). Social capital has been identified in the research as having a positive relationship for youth and academic success (Coleman, 1988; Runyan, Hunter, Socolar, Amaya-Jackson, English et al, 1998; Terrion, 2006). Social capital consists of relations among persons and its power is dependent upon the strength of these relationships. It can provide information, incentives and a sense of obligation for the recipient. Social capital provides a structure for action and leads to the creation of human capital which in turn increases skills and capabilities of the individual.

The boys in this study talked about the rigor of their academic setting and the expectation for success that were put in place by their families, school teachers and administration. They also described their committed relationships with their girlfriends and their reliance for information from their peers. Social capital is derived from social relationships and can be drawn upon as needed (Runyan, Hunter, Socolar, Amaya-Jackson, English et al, 1998). In this study, the relationships the boys' experiences reflected a strong source of social capital available to them and could have been influential in their ability to avoid fatherhood.

5.4 Discussion of Social Theories: Possible Selves

Protection of future goals emerged from the processes that these boys discussed in

the interviews. These boys displayed a future time perspective as they described their plans post high school graduation and their vision for themselves as a father in the future. As 18 year old seniors in high school, it is noted that this is a transitional time of their lives where they are faced with moving out of the role of an adolescent high school student to a new role as a young adult in the workplace, college or armed forces. What was clear from the data was how these boys were envisioning a future for themselves. Some of the boys talked about how they had a different perspective about pregnancy prevention because of their future goals. They also described friends from their childhood neighborhoods who were taking many risks and did not see much of a future for themselves. One boy's comment,

Yea, so schools like the public schools, they are like, you can try at school but you don't have to you can just graduate. They are not telling them that they can do the same thing and they are not making them goal oriented.

The idea of seeing a future for oneself emerged from the data as a valuable asset that kept these boys on track with their studies and their future plans.

Markus and Nurius (1986) introduced the concept of "possible selves" to describe a type of self-knowledge that pertains to how individuals see themselves in the future. It reflects the individual's interpretation of their self, their self-perception of their potential, and their vision for their future. They described how these selves could be the ideal selves or the feared selves. In this study the data revealed that the ideal self was a college graduate who has traveled the world and decides to become a father once he is settled with a wife and a home; whereas, the feared self was a teen father who had to "reanalyze their life". The concept "possible selves" provides an essential link between self-concept and motivation (Markus and Nurius) and provides an explanation to the motivation of the

boys in this study to "take deliberate actions to protect their future goals".

Envisioning a possible self allows one to connect specific actions to a motive. It provides a specific cognitive representation of one's self in the future that is less abstract and more concrete. Envisioning tangible goals is beneficial because many teens lack the cognition to perform abstract thinking until they further develop physically, emotionally and cognitively. "Possible selves" personalizes a goal to a particular individual achieving that goal rather than an abstract goal hanging loosely in the future. The goal is discussed in terms of **my** goal versus **a** goal.

Studies about how "possible selves" relate to teen pregnancy prevention do not currently exist; however, there have been studies that examined self and possible self during transition to fatherhood and to youth delinquency (Oyserman and Markus, 1990; Straus and Goldberg, 1999). These studies found that how men view themselves before and after the birth of their first child is relevant to fatherhood role transitioning and that having a balance between expectations and fears were related to youth who were not delinquent. This suggests that youth who perceived an ideal self more often than a feared self were more motivated to achieve their goals. Those youth who perceived a future self as "one of crimes and drugs claimed 'depressed', 'alone' or 'a junkie' as expected selves" and rarely mentioned achievements such as school or jobs (Oyserman & Marcus, 1990, p. 122). Self knowledge and self concept is complex and important in regulating behavior. The development of self is a process and is "how individuals think about their potential and their future" is an important aspect of this process (Oyserman & Marcus, 1986, p.954). The boys in this study envisioned themselves as successful adults and took actions to assure this success. Future studies should examine when youth begin

to recognize a "possible self" and examine programs that can foster and enhance this sense of self.

5.5 Discussion of Social Theories: Goal Setting

A final theory that relates to the findings in this study is goal setting theory. Goal setting is believed to be a motivational factor in learning (Hilgard and Bower, 1975) and lack of planning has been implied as a cause for unwanted pregnancies (Moore and Davidson, 2006). The findings in this study revealed a substantive theory of deliberate actions to protect future goals. This theory is based upon the processes of making goals and being prepared. There is a logical fit between this theory and goal setting theory. These 18 year old males carried out the process of goal setting and subsequently protected these goals by avoiding risks and using protection.

The findings suggest that the boys in this study displayed a high level of cognitive function. They were able to think hypothetically and reflect upon how consequences would change their goals. The ability to set goals is a manifestation of formal operational thinking and may be positively related to sexual risk reduction decisions. Setting goals can lead to purposeful, responsible action (Moore & Davidson, 2006). This is coherent with the substantive theory of how these boys took action to protect their goals and ultimately avoided pregnancy.

Younger teens and goal setting is often a focus in the adolescent development and sexual risk literature. The relationship of pregnancy risk and adolescent development has been widely discussed in the literature (Steinberg, 2005). Younger adolescents are considered higher risk because they have limited abilities to understand cause and effect, lack future time perspective and perceive themselves as invulnerable. This type of

cognitive development decreases their ability for formal operational thinking which is considered a requirement of goal setting. Piaget (as cited in Moore & Davidson, 2006) suggested that behavior and attitudes are highly dependent upon cognitive development and Kohlberg (1984). theorized that moral reasoning is a variable of cognitive development. An adolescent's ability to think abstractly, hypothetically and reflectively becomes more apparent when a teen reaches the age of eighteen and older (Steinberg, 2005). The boys in this study discussed how they learned over time about relationships and as they grew older, their perspective of pregnancy prevention changed and their responsible actions evolved. One boy discussed how younger boys may be physically ready to have sex but not really ready to handle the consequences. This suggests that their ability to set goals and to reflect on the consequences of their goals was a skill that developed over time.

How soon young men develop this skill cannot be determined since youth development is individualized and takes place over a continuum. One group of researchers suggested that future thinking can be linked with pregnancy risk in teens as young as 12-14 years-old. Monsen, Jackson and Livingston (1996) found that teens this age interpreted postponing an unintended pregnancy as having a future. This way of thinking is very similar to that which was described by the boys in this study. It would be interesting to replicate this study with youth at middle and early adolescence and to compare how they viewed male involvement in pregnancy prevention, their interpretive meaning of pregnancy prevention and their actions in response to this meaning.

Social capital, possible selves and goal setting theory further help to explain the process of deliberate actions to protect future goals. There is "fit" between these theories

and the substantive theory discovered in this study.

5.6 Strategies for Prevention: How Males Involve Themselves in Pregnancy Prevention

The psychosocial processes that emerged from this study depicted how these adolescent males involved themselves in pregnancy prevention. They protected their goals and avoided teen fatherhood by being aware, having goals, being prepared, avoiding risk and using protection. Figure 4.1 illustrates that these processes are dynamic, interrelated and evolve over time as contextual issues change. They are linear in nature but can happen simultaneously or sequentially. Table 6 demonstrates the phases of these processes and the data that supports these phases.

5.7 Phase 1: Becoming Aware

The first process or phase, becoming aware, includes the attributes of learning from others over time, experiencing pregnancy scares, acquiring knowledge, communicating with partner and committing to a good relationship. These boys became aware of the sexual risks, consequences of teen fatherhood, their goals and protective strategies from a variety of sources. As they became more aware, they were able to set goals, be more prepared and carry out actions to prevent an unintended pregnancy. During this process of becoming aware, they began to recognize and compare their values to social norms and expectations; and develop their attitudes about choosing to become sexually active, remaining abstinent, committing to a relationship and using protection. According to Mead, individuals learn about their selves through social interactions and reflection (Reck, 1964) and as they find meaning in this process, they plan their actions

(Blumer, 1969). From a symbolic interactionism perspective, the self is continuously evolving which explains why the process of becoming aware is continuous and dynamic.

Marsiglio and Hutchinson (2002) conducted an expansive qualitative study using grounded theory method to explore teenage and young adult men's lives as sexual and procreative beings. They describe self as a social construction of countless social experiences that individuals have endured, interpreted and assimilated (p.12). In their study, which was based upon interviews with 37 single males age 16-30, they found that exploring self-awareness was a logical starting point for understanding young men's lives more fully as persons capable of fathering a child. Although the intent of their study differed from this grounded theory, its findings do provide some insight into the subjective experiences of young males. They found that as males become more aware through learning from others or experiencing a pregnancy scare, they began to shift the way they thought, felt and acted with respect to the realm of procreation (p.110). Procreative responsibility is one finding that emerged from their study. This concept includes responsible use of contraception and prevention strategies. The findings in this study were very similar to Marsiglio and Hutchinson's findings related to how becoming aware changed these males' views and behaviors about sexual responsibility and pregnancy prevention.

The boys in this study discussed how they learned about sexuality, risk and prevention from a variety of individuals. These sources of learning included parents, siblings, other relatives, peers, and partners. Some of the boys discussed how they also learned aspects of human sexuality in their academic classes. The findings suggest that

they learned about consequences of risk, prevention strategies, relationship approaches and future aspirations bit by bit over time.

The boys described how they learned from their parents and this learning ranged from direct parent messages to very few and indirect messages. Many of the boys described hearing sporadic messages and feeling uncomfortable having these discussions with their parents. None of the boys described consistent, comprehensive discussions about sexuality with their parents but all of them knew what their parent's attitudes and values were in relation to premarital sex and pregnancy prevention.

Public policy promotes parent-teen discussions and expects that these discussions be the major source of information for teens. In order to promote this policy, many public education programs have been discouraged to provide human sexuality and pregnancy prevention information in the classroom because of the expectation that teens should talk with their parents. Yet, this political correctness has resulted in the persistent lack of information for teens because many teens do not have these conversations with their parents (Roche, Mekos, Alexander, Astone, Bandeen-Roche & Enminger, 2005).

Traditionally parent-teen closeness has been found to have some role in protecting adolescents from involvement in sexual risk behaviors if the quality of the relationship as perceived by the teen is an important factor (Miller, 2002). Hampton, Watters, Jeffrey and Smith (2005) examined how parent approval or disapproval influenced sexual behavior with 10-12th grade teens and found no relationship. They learned that teens preferred to learn about pregnancy prevention by their school and friends over their parents. Roche, Mekos, Alexander, Astone, Bandeen-Roche and Ensminger (2005), examined discussion and parental controls and their influence on teen sexual activity and

found that setting structure and rules was much more important for teen behavior than parent-teen discussions.

In this study, the boys were resourceful and sought out many sources of what they perceived as reliable information in order to learn about these issues. Many of the boys described how they talked with their siblings about these issues and how there was a protective quality between siblings. It was apparent that the boys also relied on their peers and other adults for advice and information. They often asked more experienced peers advice about pregnancy prevention and relationships and at times if there was a crisis such as a pregnancy scare they sought out health professionals for advice. These boys exhibited competent and capable information seeking skills.

They also learned from their partners as they committed to a good relationship. The boys discussed how they dated for many months and even a year discussing the issue of becoming sexually active prior to engaging in sex. They discussed their relationship and their feelings about having sex, talked about pregnancy prevention, and learned to "trust one another" before they became intimate. This seemed to be the social norm of dating with this group of adolescent boys. Becoming aware of each other was an important part of this process.

In society, access to reproductive information and parent education for male adolescents is limited and often untimely (The Urban Institute, 2002b). Males are not accessing reproductive health services on a preventative basis and primary care providers are not consistently asking boys about their sexual health with routine visits. Almost one third of teen males have not received preventative health services in the past year. Of the two thirds who have received care only 25% received counseling on birth control or

sexually transmitted infections. Only 5% of teen males have gone to a family planning clinic within the past year (NCPTP, 2006). Improving access to reproductive information and services was indicated from the findings in this study. These boys were able to acquire information but the process was strenuous, sporadic and had to be carried out over a long time. How to provide better reliable access to reproductive information for males is a concern that needs to be addressed with future research and nursing interventions.

Experiencing or hearing about a pregnancy scare was another way these boys became aware of the risks of an unintended pregnancy. The boys described their anxiety and lack of confidence with contraception use. They experienced constant worry each month which heightened their awareness and led to actions that were more protective such as dual contraception or developing refusal skills. This phenomenon of constant worry and anxiety was discussed as a very common issue among these boys. They would discuss their worries with their peers but never mentioned if they discuss these worries with a parents or other adult. This is an added stress in the lives of adolescents that persists without adult, parent and health care worker awareness.

Many of the boys described how the scare changed their thinking and actions. Marsiglio and Hutchinson (2002) discovered a similar phenomenon with their interviews with males and called this a turning point. Pregnancy scares along with pregnancies, abortions, fertility issues, miscarriages and births were considered turning points in identity for many of these young males. These experiences prompted a critical shift in their identity which brings about new insights into an individual's goals and relationships.

Pregnancy scares were negative experiences that prompted the boys in this study

to think differently. Other negative experiences that influenced the boys were hearing about and/or observing friends or relatives dealing with an unplanned pregnancy. Many of the boys discussed how seeing and hearing about these experiences made them think twice about taking chances and ending up living that same life. Martyn and Hutchinson (2001) discussed similar findings in a qualitative research study that explored how adolescent females avoided teen pregnancy. They discovered that these females recognized negative messages and negative social- psychological scripts in their lives, rejected these scripts and were determined to be different. Like these girls, the boys in this study were determined to create a better life for themselves after they became aware of the consequences that pregnancies have on others' lives.

Acquiring knowledge other than seeking out advice and information from friends and relatives was noted as a challenge for many of the boys in this study. The boys who were not sexually active assumed that those who were active knew what they needed to know. Those boys that were sexually active expressed a strong desire for greater access to information. They talked about wanting more information presented in their classes in school about human sexuality, pregnancy prevention strategies, dating relationships and communicating to females. They noted that the information that was presented was very brief and was laden with morality messages. Consequently, many of them resorted to media and books in addition to their peers to learn and find information.

There are few topics in our society that are as 'taboo' as sexual health (American Social Health Association, 1994, p.1). Sexuality education has been a controversial topic for the past decade. With the abstinence only movement, trends have been to move away from comprehensive sex education to a "just say no" approach. The federal government

has distributed over \$50 million dollars of funding to support abstinence-only until marriage education programs (Trenholm, Devaney, Fortson, Quay, Wheeler & Clark, 2007). As a result, today's public school curricula do not regularly include birth control and family planning content and in private and parochial schools where education is value based, this content could easily be dropped from the curriculum. The boys in this study were able to draw upon their social capital to find the information they sought. Youth who do not have this social capital and are faced with limited resources may not be able to reach the same level of awareness as the boys in this study.

Becoming aware was a vital part of the process of protecting goals and avoiding an unintended pregnancy. These boys demonstrated the ability to tap their social capital as they sought out information and advice about dating, risk taking consequences, and prevention strategies from individuals in their lives. These boys were able to increase their level of awareness in spite of limited public access to comprehensive sexuality information. As their awareness level grew, they developed new and different perspectives about pregnancy risk and prevention which influenced future actions.

5.8 Phase 2: Having Goals

The boys in this study described their goals for the future at length. They talked about priority setting, career planning, financial stability, settling down, steadiness and completing college as important goals to achieve before becoming a father. These boys envisioned an ideal possible self and were determined not to change these goals. This is in strong contrast to young males who have few goals for themselves and do not perceive an "opportunity cost" if they have sex at an early age and a pregnancy results (Furstenberg, Morgan, Moore and Peterson, 1987).

The boys in this study had goals that were amenable to pregnancy prevention. It has been suggested that there are many boys in society that have goals that are not amenable to pregnancy prevention. Some young men have a goal to protect their "masculinity" and "hypermasculinity" and consequently are motivated to become very sexually active and for some, become a father at a young age (hooks, 2004; Marsiglio, 2002). In these cases having goals leads to risky sexual behavior which is much different to the boys in this study.

Marsiglio (2003) described how masculinity is a social construct and that understanding the psychosocial processes that build this concept can help program planners devise strategies to encourage young men to embrace a mindful approach to sex, contraception and fatherhood. The findings in this study suggest that these boys defined masculinity as planning and protecting goals for a future that includes a career, economic independence and for most; a family.

5.9 Phase 3: Being Prepared

The boys in this study talked about being prepared. They used words such as: "careful preparation, always making sure, and what to do if something goes wrong". Preparation was discussed between partners as they discussed whether to become sexually active. They discussed how they "wanted to be ready". Some of the males talked about carrying condoms with them all the time "just in case". These boys understood the importance of being prepared. One boy discussed how much more prepared he is since he experienced a pregnancy scare. This is an example of how becoming aware led to a new insight and behavior change. The process of preparing did not just relate to contraception and protection. The boys who chose to be abstinent also

prepared for this action by choosing where to be and who to hang around with before they went out for the evening. Planning and preparation are natural extensions of having goals.

5.10 Phase 4: Avoiding Risk and Using Protection

The final phase in this process is taking action to protect future goals and prevent an unintended pregnancy by carrying out the actions of avoiding risks or using protection. All of the boys discussed these options and chose their personal option. Some talked about peer pressure related to their choice but this was not a strong enough influence to change their minds. They carried out these deliberate actions and considered it their responsibility. One boy discussed how he would ultimately take the responsibility and would not rely on his girlfriend to manage the pregnancy prevention strategies.

Many of the boys discussed how pregnancy prevention was a "shared" or "mutual" responsibility and that they as a couple "leaned on each other" to carry out these actions. The findings in this study depicted a process of deliberate action to protect future goals that consisted of four phases: becoming aware, having goals, being prepared and avoiding risk/or using protection. This basic social process emerged from the data and showed how these young boys found meaning regarding pregnancy prevention. These young men were highly involved in these processes and successfully avoided teen fatherhood. They were influenced by the academic setting, social norms, culture and religion and the myths and preconceived notions they experienced. This dynamic process was interrelated and evolved over time. Through these psychosocial processes, these boys learned about their "self", developed their "self" and based actions accordingly.

5.11 Dispelling the Myths about Teen Males and Pregnancy Prevention

The findings from this study contradict many of the myths and preconceived notions that persist in society about male involvement in pregnancy prevention. The boys in the study talked about how people think guys will force girls to do something they don't want to do, take the blame if anything happens, only remain abstinent because of lack of opportunity, and that the majority of boys in junior high school are sexually active. They indicated that many people think males are not responsible and are not involved in teen pregnancy prevention.

There has been a long standing tendency to consider teen pregnancy a girl's problem (Troccoli & Whitehead, 2006). The saying "Boys will be Boys" suggests that males are not capable of being responsible individuals. Social norm is such that it could discourage male involvement. The National Survey of Adolescent Males revealed that adolescent males believe it is their responsibility to prevent teen pregnancy (Sonenstein, 1997). The findings from this study suggest the importance of focusing on males as well as females when designing pregnancy prevention programs because the processes of pregnancy prevention such as learning from partners, communication with partners, planning with partners and mutually using protection or choosing to remain abstinent, are interactive and involve both, the guy and the girl. Successful avoidance of pregnancy requires the ability to develop relationships, negotiate plans and preparation, and to make decisions about contraception (Troccoli & Whitehead, 2006).

5.12 Implications for Nursing Practice

This grounded theory adds to the nursing body of knowledge concerning pregnancy prevention, male involvement in pregnancy prevention and male reproductive

health services. This study revealed the psychosocial processes that males experienced in relation to pregnancy prevention. It also revealed the substantive theory of deliberate actions to protect future goals which depicts how these males interpreted pregnancy prevention. These findings provide new insights into how some males avoid pregnancy and to what health professionals can do to support this action. The boys in this study struggled to find reliable information and advice about sexuality issues. Nurses can take the lead in connecting with male teens when they see their primary care physician or visit the school nurse. Nurses can better assess the needs of the boys, provide information and resources, and promote sexual health. Nurses can play a major role in reducing the anxiety level and diminish the stress and uncertainty these boys are experiencing by educating them about the efficacy of contraception and facilitating access.

Benoliel (1996) described how nurses need to broaden their current practice definition from the nurse-patient relationship to the greater social cultural context. Public health nurses can use the information from this study to institute community wide programs that appreciate and promote male responsibility in pregnancy prevention, provide positive environments that foster goal setting and self development, work with school curricula to incorporate comprehensive approaches to human sexuality and to develop parent programs that teach the parents how to communicate and talk to their son about sexuality issues.

Nurses, especially in the schools, have an opportunity to influence public education programs and health systems to better meet the needs of adolescents and children. It is important for nurses to not only advocate for comprehensive human sexuality education as part of the curriculum, but to support the teachers that teach this

content so they can provide accurate information and they emphasize male involvement as well as female involvement in pregnancy prevention.

These findings dispel many of the myths of male involvement in teen pregnancy prevention and provide compelling data that supports sexual history taking as a routine part of the nursing assessment, education about contraception and barrier protection, support for boys who choose to remain abstinent, education about strategies to deal with peer pressure and condom access for boys who are choosing to be sexually active.

5.13 Implications for Nursing Education

These research findings have important implications for nursing education and learning about adolescent health, preventative services and public health. These findings add to the body of nursing knowledge in the realm of adolescent health and nursing education should incorporate these findings into the nursing curriculum. Future nurses need to be taught about the social processes that teen males experience as they become involved in relationships with the opposite gender and manage sexual risks and pregnancy prevention. They need to learn how to interact with teen males in relation to human sexuality education and pregnancy prevention; and how teens access reproductive information and manage their sexual relationships. Future nurses need to learn how to interact with parents of teens and to lead parent education programs that could enhance teen-parent communication. This coincides with family focused care that is currently a focus in nursing education.

These findings also support the need for nursing education to include strategies for system development in the area of adolescent health. Future nurses need to learn how to develop better reproductive health care programs and systems for teen males that will

facilitate the psychosocial processes found in this study and support teen males as they manage risks and take action to protect their future goals.

In addition, these findings support the need for nursing education to recognize and teach about the psychosocial and contextual influences that are risk and protective factors for teens. It is also essential that future nurses understand the complexity of public health problems such as teen pregnancy and to recognize that these problems require strategies that are multifaceted and include social as well as educational interventions.

5.14 Implications for Policy Development

In recent years there have been more efforts to help young men avoid unintended pregnancies; however, the type of involvement is still unclear and the funding for programs is less clear (Sonenstein, 2000). Public policy related to teen pregnancy prevention has been challenged by the sensitive nature of human sexuality education and family planning. Because of this, it has been a controversial issue in the legislative arena and policy has been set based upon political correctness and with little consideration of the research about program effectiveness (Kirby, 2001). The findings in this study can provide convincing data for policymakers as they make decisions about future program funding because they emerged directly from teen males themselves. The boys in this study provided insight into how they (and possibly other boys) avoid teen pregnancy and their need for information access and reproductive health resources. Program development in the areas of male responsibility in pregnancy prevention could be supported by the results of this research. Currently most programs for males focus on fatherhood after pregnancies have occurred. Prevention programs need to be

incorporated into schools, neighborhoods and agencies that provide males with opportunities to build self esteem, a sense of future and an awareness of a possible self.

In addition, adolescents need access to human sexuality education. The findings in this study suggest that the boys struggled to learn about pregnancy risks and strategies to prevent pregnancy. The boys succeeded in finding out this information but many still use methods of protection that have minimum protection against pregnancy such as the "withdrawal" method. The boys also experienced constant anxiety and worry each month because they were not confident with their prevention strategy. These findings suggest that the boys are not getting a comprehensive education in this area and that policy changes need to take place that will support comprehensive human sexuality education so that males can make better decisions and take fewer risks. "If males are going to be held responsible for any children they produce than it is time to spend more public resources on helping them to avoid unintended pregnancies" (The Urban Institute, 1998, p.1).

5.15 Recommendations for Future Research

Very few studies have explored teen male involvement in pregnancy prevention. The findings from this study have expanded the body of knowledge concerning the contextual and psychosocial processes of male involvement in pregnancy prevention. Further research of this kind needs to be conducted with other groups of adolescent boys such as; teen boys of different age groups, cultural backgrounds, religious backgrounds, socioeconomic levels and academic environments. Further research should replicate this study with youth at middle and early adolescence and compare how they viewed male involvement in pregnancy prevention, how they interpret the meaning of pregnancy prevention and their actions in response to this meaning.

Future research should focus on the influences of the contextual factors on teen boys and what modifications nurses can make with these factors in order to provide greater protective factors. One example is to measure the effectiveness of human sexuality education and male responsibility actions for pregnancy prevention. There is also a need to explore how nurses can provide more reliable information and better access to reproductive healthcare.

It is also important to further explore the relationship of future goal orientation and pregnancy risk. The concept of future orientation and its relationship to male involvement in pregnancy prevention needs further exploration. In addition, future studies should further examine the concept of "possible self" and pregnancy risk. Self knowledge and self concept is complex and important in behavior regulation (Oysterman & Marcus, 1986, p. 954). Future research exploring the process of "self" development and self concept and their relationship to risk taking behavior would provide important information for program planning and policy development.

Finally, this study resulted in the development of a beginning substantive theory that explains how these teen boys managed pregnancy prevention. This theory needs to be evaluated in future research to determine its pragmatic use with other populations; including those populations who have not avoided a teen pregnancy.

5.16 Conclusion

The importance of exploring ways to enhance male involvement in pregnancy prevention has been undervalued for many years. As the push for responsible fathering continues, it is essential that a parallel push for male involvement in pregnancy prevention is at its side. Increasing the public's awareness has been the first step and now

research and program development are quickly following along. It was in 2000, when the Urban Institute first wrote a vision illustrating the fundamental belief guiding the effort for male sexual and reproductive services. After seven years, only the tip of the iceberg has been revealed. To carry out this vision, research needs to continue in this area, policies need to be changed and programs need to be developed. The Urban Institute wrote:

All males will grow and develop with a secure sense of their sexual identity, an understanding about the physical and emotional aspects of sexual intimacy, and attitudes that lead to responsible behavior. Achieving the goals will result in men postponing sexual intercourse until they are emotionally mature enough to manage the physical and psychological aspects of sexual intimacy. When they have sexual intercourse it will occur with as little risk as possible to either themselves or their partner (Sonenstein, p. 27).

This study is a beginning contribution to the movement of this vision toward fruition. The research study with these teen boys revealed that they were very involved in the process of pregnancy prevention. They assigned meaning to their experiences with pregnancy risk and prevention within the context of social norms, academic environment, culture and religion and societal myths and preconceived notions. Through the psychosocial processes of becoming aware, having goals for the future, being prepared, avoiding risk and using protection they carried out deliberate actions to protect their future goals. The boys in this study related pregnancy prevention to protecting their future.

The substantive theory of deliberate action to protect future goals explains how these boys interpreted the meaning of teen pregnancy and how they carried out strategies to prevent an unintended pregnancy. This research indicates that teen boys want to be sexually responsible and are deliberately seeking out ways to carry out responsible

actions to avoid an unintended pregnancy. The findings from this study provide nurses and other health care providers with a new perspective on ways to intervene with adolescent boys and pregnancy prevention.

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Appendix 1

Demographic Questions

The researcher will ask these questions at the beginning of the interview and fill in the answer.

Date: _____

Age: _____

Date and Year of Birth: _____

Religious Affiliation: _____

Grade Level: _____

Ethnic Background: _____

Do you have any plans for after high school? What are they?

The following questions will be asked within the body of the interview once the researcher develops rapport with the informant.

Have you ever had sexual intercourse? If so, how recent was this?

Have you ever had a relationship with a girl that resulted in a pregnancy?

Have you ever fathered a child?

Appendix 2 Interview Guide

Sample Introduction. This is not to be read word-for-word but to be used as a guideline.

Hello. My name is Judy Didion. You may recognize me with the “Baby Think It Over” program. I was the nurse from the health department that came to your school and helped the teachers pass out the computerized babies.

I am currently working on my PhD in nursing at Duquesne University in Pittsburgh. Part of the requirements for this degree is to conduct a research study. My interest has been teen pregnancy prevention. As a nurse in public health and as a mother of two sons (one is 20 and the other is 16), I have become very concerned about teenage males and their risks of unintentionally becoming a father. I am here today to ask you questions about what it is like for a teen male when it comes to relationships and the risks of pregnancies.

I do not have any expectations. I do not assume that you have had sex, or that you have not had sex. I am not assuming that you are currently sexually active. I am assuming that since you are 18 and an upper classman in high school, that you have some ideas about what it is like for teen males with this issue of pregnancy prevention. I value your thoughts about this topic. I hope that through my study I will have a better idea of what teenage guys go through or think about when it comes to the risks of pregnancy

Before we get started I want to remind you that this interview is being audio taped. There are two recorders so that I will be able to listen to one tape while the other tape is being transcribed. These tapes will be typed out by a secretary and no one will be able to identify you from this conversation. No one will hear these tapes except the

secretary and myself. If you feel uncomfortable with any of the questions you do not have to answer them. You also have the option of ending this interview at any time you so desire. I would like to start the interview asking you a few questions about yourself.

Demographic Questionnaire (Appendix 1)

Please note that these questions are samples and will change as the data is collected and analyzed. Concurrent data analysis leads to new questions as the interviews progress. Contextual questions will lead to process questions. Sample process questions are included in the guidelines

Sample Opening Interview Questions to Develop a Repore

Tell me a little bit about yourself. (interests, hobbies etc)

How is school going? What is it like being a student at _____ school?

Tell me what it is like to make friends with girls your age?

Sample more specific questions that relate to the research questions

What is the social life like here? Are there opportunities to meet girls? Do many of your friends go out with or date girls?

Do you go out with girls or have a girl friend?

Do many of your friends have steady girlfriends?

What's it like today when you have a relationship with a girl?

Tell me some of your thoughts about relationships.

Tell me about your dating patterns. (Hutchinson et al., 2002)

Describe your history of hanging out and having relationships with girls. (Marsiglio, 2003)

If a relationship with a girl gets to the point of physical intimacy,

What happens next?

What do you think about?

How do you go about discussing your relationship? What do you talk about?

Does the issue of having sex come up?

How do you handle this?

How do your friends handle this?

Does the issue of pregnancy come up?

Do you think about it?

Do other guys think about it?

How do you deal with this?

Are many guys having sex?

Have you ever had sexual intercourse? If so, how recent was this?

Was the risk of pregnancy on your mind?

(If so) What do you do about it?

What kinds of issues cross your mind; what do you become concerned about?

What do you do about these issues? How do you go about this?

What do you expect of the girl? What should she take care of?

What do you consider to be your responsibility?

How do you decide who should take care of what?

What is difficult about dealing with this issue?

How did you learn to deal with these issues?

Have you ever had a relationship with a girl that resulted in a pregnancy?

What was this like for you?

What did you do? How did you handle this?

Have you ever fathered a child?

What was that like for you?

Do you and your guy friends talk about sex, contraceptives, or pregnancy with each other or with a girlfriend? (Marsiglio, 2003) If so, how is the subject brought up? How do you bring the subject up?

What level of responsibility do guys take when it comes to pregnancy prevention in comparison with the girls? If there is a difference ask, why do you think there is a difference?

What are some of the things that get in the way or make it hard to manage the risks of a pregnancy?

Have you or a friend had any pregnancy scares? What was this like for you/that person?

What did you/they think about? What went through your mind?

Are you ready to become a father? Why or Why Not? (Marsiglio, 2003)

Reminder for researcher and trouble shooting strategies

Use preparatory statement with any of the following: This is a very personal question and you don't have to ask it if you don't want to. (Hutchinson et al., 2002)

If at any time the conversation lulls because of discomfort, try the following:

1. Use acknowledgement statements such as:

I know this is tough. I don't know how to make this more comfortable for you. I'm just trying to get a sense of what you were experiencing.

2. Go back to a less sensitive question. (Hutchinson et al., 2002)

3. Generalize previous interview data to help the informant feel accepted. Some guys tell me x and y; what are your thoughts? (Hutchinson et al., 2002), p. 50)

4. Share a story about another interview to stimulate thinking (Marsiglio, 2003)

Clarify terminology that may have different meanings to different people such as "safer sex" Hutchinson et al., 2002).

Appendix 3
Confidentiality Statement

Date: _____

I _____ will not disclose any information discussed in the interviews. I agree that discussion by individuals in the focus group remains confidential. I will not disclose any participant's names or discuss comments to individuals outside of this focus group.

Transcriptionist



Appendix 4
Informed Consent

DUQUESNE UNIVERSITY

600 FORBES AVENUE ♦ PITTSBURGH, PA 15282

CONSENT TO PARTICIPATE IN A RESEARCH STUDY

TITLE: Teen Pregnancy Prevention from the Adolescent Male's Perspective: A Grounded Theory Approach

INVESTIGATOR: Judy A. Didion MSN, RN
Collier Building, Arlington Avenue
Toledo, Ohio 43608
419-383-5804

ADVISOR: Dr. Rick Zoucha
Duquesne University
School of Nursing
521 Fisher Hall
Pittsburgh, PA 15282
412-396-6545

SOURCE OF SUPPORT: This study is being conducted as partial fulfillment of the requirements for the doctoral degree in Nursing at Duquesne University. This study is partially funded for \$1000.00 by Sigma Theta Tau International, Zeta Theta Chapter-at-Large.

PURPOSE: You are being asked to participate in a research study that seeks to investigate **teen pregnancy prevention from the adolescent male's perspective**. You will be asked to participate in individual interviews with me. The interviews will be audio taped and transcribed. These are the only requests that will be made of you.

RISKS AND BENEFITS: All measures to protect your confidentiality will be instituted. There are no risks involved in the participation of this study.

COMPENSATION:

Participant will receive \$10.00 and refreshments for their time and effort. Participation in the project will require no monetary cost to you.

CONFIDENTIALITY:

Your name will never appear on any data collection form or transcript. No identity will be made in the data analysis. All audio recordings, written materials and consent forms will be stored in a locked file in the researcher's office. Your name will never appear on any surveys or research instruments or articles. Verbatim quotations may be used with publications but no names or identifying information will be attached to ensure that confidentiality will be maintained at all time. No identity will be made in the data analysis. All information relating to this study will be destroyed upon completion of all activities related to this study. The transcriptionist hired to transcribe the audio cassettes will sign a confidentiality agreement and will not have access to your name.

RIGHT TO WITHDRAW:

You are under no obligation to participate in this study. You are free to withdraw your consent to participate at any time. You do not have to answer any questions that make you feel uncomfortable. They may leave the interview at any time. Participation is completely voluntary. Choosing to participate or not to participate will not affect grades or academic standing. The interview will be conducted during school time with the permission of your principal.

SUMMARY OF RESULTS:

A summary of the results of this research will be supplied to you, at no cost, upon request.

VOLUNTARY CONSENT:

I have read the above statements and understand what is being requested of me. I also understand that my participation is voluntary and that I am free to withdraw my consent at any time, for any reason. On these terms, I certify that I am willing to participate in this research project. I understand that should I have any further questions about my participation in this study, I may call Dr. Paul Richer, Chair of the Duquesne University Institutional Review Board (412-396-6326), Dr. Rick Zoucha, School of Nursing (412-

396-6545 or Judy Didion, Principle Researcher
(419-874-6066).

Participant's Signature

Date

Parent Signature

Date

Researcher's Signature

Date