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**APPC and Ohio State researchers help understand the influence of maternal sexual communication on adolescent risky sexual behaviors**

When mothers engage in frequent sexual discussions with their teenagers but fail to express clear disapproval of teenagers’ sexual involvement, their efforts are more likely to result in greater risky sexual involvement by their teen, according to a new study published in the *Journal of Adolescent Health*. The study was conducted by Atika Khurana, postdoctoral fellow at the Annenberg Public Policy Center and Elizabeth C. Cooksey, Professor of Sociology and Associate Director of the Center for Human Resource Research at the Ohio State University.

The authors used data on 5,472 adolescents from Waves 1 (1994-95) and 3 (2001-02) of the National Longitudinal Study of Adolescent Health (Add Health), all of whom were sexually experienced and younger than 23 years of age at the latter time point. Frequent mother-teen discussions about sexual topics when coupled with lack of (adolescent perceived) maternal disapproval was found to be associated with a greater number of lifetime sexual partners reported by the adolescent, 5-6 years later. This effect held true regardless of whether the adolescent had been a virgin or was already sexually experienced at the time when maternal sexual communication was assessed.

“Mothers who engage in frequent sexual communication can influence their teenagers’ sexual behaviors, but the nature of this effect can vary based on how the adolescent perceives these messages” noted Atika Khurana, lead author of the study. “If the adolescent does not perceive maternal disapproval of sexual involvement, then he or she may misinterpret frequent maternal sexual communication to signify maternal approval or expectation of sexual involvement.”

The combined effect of perceived maternal disapproval and frequent maternal sexual discussion on inconsistent condom use and STI diagnosis over the past 12 months was only significant for adolescents who were sexually experienced at the time when sexual communication was assessed, however. Therefore, to be effective in promoting responsible sexual behaviors, maternal sexual discussions need to be tailored to the sexual experiences of the adolescent. “Mothers communicating disapproval of teenagers’ contraceptive use when the adolescent is

already sexually experienced can do more harm than good, as far as consistency of contraceptive use is concerned,” Khurana said.

“The mixed evidence surrounding the influence of maternal sexual communication on adolescent sexual behaviors stems from the fact that past research has inadequately accounted for the impact of other confounding variables,” said Elizabeth Cooksey, co-author of study. “The impact of mother-teen sexual communication on adolescent sexual behaviors needs to be examined in relation to other variables that can potentially alter its effect, such as the openness and mutuality of the communication process as well as its content and timing,” Cooksey noted.