Examining the relationship between music videos and sexual risk behavior in African American adolescent females.

Alyssa Gail Robillard  
University of Alabama at Birmingham

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EXAMINING THE RELATIONSHIP BETWEEN MUSIC VIDEOS AND SEXUAL RISK BEHAVIOR IN AFRICAN AMERICAN ADOLESCENT FEMALES

by

ALYSSA GAIL ROBILLARD

A DISSERTATION

Submitted to the graduate faculty of The University of Alabama at Birmingham, in partial fulfillment of the requirements for the degree of Doctor of Philosophy

BIRMINGHAM, ALABAMA

2000
The purpose of this study was to document music video viewing habits in a sample of sexually active African American adolescent females aged 14 to 18 and assess the relationship of music video viewing to sexual risk behavior. This research was conducted as a sub-study of an Human Immunodeficiency Virus (HIV) risk reduction intervention for African American adolescents by Sistas Informing Healing Living Empowering (SIHLE). A survey was designed to assess adolescents' behavioral and psychosocial characteristics, including music video viewing habits, exposure to unfavorable depictions of women, perceived level of influence of music videos, sex-role stereotypes, self efficacy for condom use, and rate of condom use. Media influences are pervasive in American society, and the belief that media influences behavior is widely held. African American female adolescents are more likely than White or Hispanic female adolescents to engage in sexual risk behavior including, for example, inconsistent condom use. This risk behavior manifests in adolescent pregnancy and sexually transmitted diseases including HIV. Identifying factors, such as media exposure, that may contribute to risk behavior is important.

Analyses revealed that viewing rap music videos was associated with less traditional attitudes toward women. The assertiveness associated with rap music videos
may transfer to other behavior; however, it may not be the type of assertiveness that supports protective behavior. The “feminist” attitudes associated with rap music often promote risky sexual behavior and promiscuity. Viewing rhythm and blues (R&B) music videos was also found to be related to perceived exposure to negative images of women in music videos. Although rap music has been highly criticized, both rap and R&B music videos should be further examined. Of importance was the finding suggesting a predictive relationship between exposure to negative images of women in music videos and the perceived level of influence from music videos. These data support the belief that negative images in music videos influence behavior. Further research is recommended.
DEDICATION

This dissertation is dedicated to my family members who have passed from this life to the next, including my grandfather Joseph C. Robillard, my aunt Alice Robillard, my uncle Lionel Gant, and especially my great aunt, Alfretta T. Gant, who instilled in me the importance of education. I feel that your spirit guided me when I was confused and pushed me when I wanted to quit. I thank you all for your unconditional love.

I would also like to dedicate my dissertation to my mother, Sarah S. Robillard, my father, Ruffin Robillard, and my sister, Kourtney. Thank you for your support (both emotional and financial) throughout this process. I love you very much! To my grandmothers, Lorena Robillard and Deborah G. Smith: I am grateful to God that I can share my accomplishments with you, big, small, or not at all, and that you will still be proud. To my entire family: thank you and I love you!

Finally, I thank God for the many blessings I have received. Often I could not recognize how situations were being "worked out" for my good. I will always be reminded that I have blessed assurance.
ACKNOWLEDGEMENTS

I thank the members of my committee for their guidance and support. I have learned so much from this experience, and I am appreciative of your patience and consideration. I sincerely thank each of you, Dr. B. Lee Green, Dr. Connie Kohler, Dr. Sharina Person, Dr. Suzy Davies, and Dr. Min Qi Wang. I could not have asked for a better committee. In addition, I wish to thank the faculty and staff of the Health Behavior Department in the School of Public Health.

I also acknowledge the SIHLE Project for the opportunity to bring my research idea to fruition. I thank everyone who worked with this project from beginning to end, because it was truly a team effort. Working on this project has taught me more than I had ever hoped to learn about research, and for that I am very grateful.

I thank all of my family and friends from the bottom of my heart, including my “family” from Xavier University, CHAMP, Inc., Sixteenth Street Baptist Church, Shiloh Missionary Baptist Church (Baton Rouge, LA), and the wonderful friends I’ve made while here at UAB (old and new). I could not have done it without your prayers, support, and encouragement.
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CHAPTER 1

INTRODUCTION

Several factors have been shown to contribute to risky sexual behavior in adolescents, for example, adolescents' attitude of invincibility (Krahe, 1995) and alcohol and other drug use, which can negatively affect sexual decision-making (Levy, 1995). Another important factor believed to contribute is mass media. Many have questioned the likelihood that media, with its sexual and violent themes, may influence adolescent attitudes and behavior (Daves, 1995; Strasburger, 1995; Thompson, 1993). One medium that has become very popular with adolescents is music videos (Committee on Communications, 1996). Music videos incorporate visual images with song lyrics to tell a story about a song (Strasburger, 1995). Although the goal of music videos is to sell music (compact disc [CD] and tapes), music videos have come to be an appreciated form of entertainment as evidenced by the high degree of consumption, particularly by adolescents (Sun, 1986). Many music videos are laden with sexual content (Sherman, 1986; Baxter, 1985), but more often reflect situations where women are presented as submissive, passive, or promiscuous (Sommers-Flanagan, 1993; Seidman, 1992). Considering the popularity of music videos, it is likely that adolescent females witness these images frequently. It is important to consider how young women internalize these images and how these images either encourage or discourage protective behavior in heterosexual relationships. To accomplish this, this study examines music videos and sexual risk behavior in African American adolescent females.
African American Adolescent Females & Sexual Risk Behavior

Adolescents engage in various sexual health-related risk behaviors, for example, early initiation of sex and inconsistent condom use. According to the 1997 Youth Risk Behavior Surveillance (YRBS), reports of sexual risk behavior saw the largest percentages in African Americans; African American females were significantly more likely to engage in sexual risk behavior than either White or Hispanic female students (Kann, 1998).

The consequences of this risk behavior can manifest in episodes of pregnancy and sexually transmitted diseases (STDs), particularly human immunodeficiency virus (HIV). These health issues affect African American female adolescents disproportionately and point directly to the deleterious effects of sexual risk behavior. The effects of adolescent pregnancy provide one example.

Adolescent Pregnancy

Adolescent pregnancy, whether intended or unintended, serves as a marker for unsafe sexual behavior because it indicates an opportunity for exposure to STDs. There are serious consequences associated with teenage childbirth, including emotional, psychological, and financial responsibilities that teenage mothers are not prepared to handle (Maynard, 1996). Although the national birth rates for teenagers has declined, the rate for African American adolescent females remains high, 89.5/100,000 births compared with 52.9/100,000 for all races (Ventura, 1998). Pregnancy is not the only risk associated with unprotected sexual encounters. These encounters also open adolescents to the risk of STDs.
Sexually Transmitted Diseases

STDs are a major public health concern, and they have been targeted as one of the most critical public health problems in the United States (Biro, 1995). STDs are addressed in Healthy People 2010 in Priority Area 25, and significant progress has been made toward reducing the common bacterial STDs in the United States (National Center for Health Statistics, 2000). There is still, however, much to be done. The United States has some of the highest curable STD rates in the developed world (Eng, 1997). These elevated rates are partly due to STDs in adolescents. Adolescents and young adults, the 10- to 24-year-old age group, represent one subgroup of the population that is particularly affected by STDs (Centers for Disease Control and Prevention [CDC], 1995). According to the CDC (1995), this subgroup is at a higher risk for acquiring STDs for many reasons: (a) likelihood of having multiple sexual partners; (b) likelihood of engaging in unprotected intercourse; and (c) likelihood of selecting partners at higher risk. These risk factors are also associated with HIV, which is a STD.

Human Immunodeficiency Virus

HIV is a sexually transmitted disease, but unlike most other STDs, acquisition of HIV, currently, will eventually lead to mortality. HIV is the virus that causes acquired immune deficiency syndrome (AIDS). The first cases of AIDS were reported in June 1981 (CDC, 1981). Within the span of a decade, a cumulative total in excess of 200,000 cases had been reported (CDC, 1992). As of June 1998, a cumulative total of approximately 711,344 cases has been reported (CDC, 1999b). Although a large proportion of the early cases of HIV were in homosexual or bisexual men, the number and proportion
of AIDS cases associated with heterosexual transmission has increased steadily and is still on the rise (CDC, 1992). Women have suffered most from this particular form of transmission. Forty percent of adult and adolescent women with AIDS through June 1999 contracted the virus through heterosexual contact, and 53% of these women are African American (CDC, 1999b).

Because of the 10- to 11-year latency period, it is likely that the majority of adult AIDS cases were infected with the virus as teens (Manoff, 1989; Office of National AIDS Policy, 1996). As the seventh leading cause of death in people between the ages of 15 and 24 (Hoyert, 1999), HIV infection in youth is a serious problem. In the Report to the President, the Office of National AIDS Policy (1996) reported that one in four new HIV infections in the United States is estimated to occur among people under the age of 21. Among African American women age 15-24, HIV infection is listed as the fifth leading cause of death (Hoyert, 1999). Given this, the need to study African American female adolescents is obvious. The failure of this group to engage in safer sex practices has major ramifications.

"Safer" Sex and Sexual Risk Behavior

The term "safer" sex encompasses sexual activity where the transmission of HIV is reduced. Safer sex includes any method that would prevent the exchange of bodily fluids. Messages to adolescents often emphasize abstinence as the only 100% safe method (Howard, 1992; Kay, 1995; Khouzam, 1995). The American Red Cross (1998) defines safe sex as sexual activities that have no risk of HIV transmission. For sexual activities
where the risk is reduced, not eliminated, the CDC recommends that precautions be taken for protection against the spread of HIV (CDC, 1999a).

Safer sex activities include the correct and consistent use of latex barriers during any type of sexual encounter—vaginal, anal, or oral. Latex barriers (i.e., condoms, dental dams, gloves, etc.) are currently the recommended form of protection because their effectiveness has been tested by the Food and Drug Administration for many years (CDC, 1999a).

The challenge to engaging in safer sex activity involves the correct and consistent use of latex barriers. Considering this description, safer sex can be difficult to achieve. In a study of condom use in African American adolescents, Reitman and colleagues (1996) found that lower self-efficacy to take precautionary action to avoid contracting HIV, higher perceived risk, and male gender were all associated with high risk behavior. This high risk behavior may be a result of negative experiences with condoms as reported by urban, low-income African American, and Hispanic youth (Norris, 1993). Subjects were interviewed about their condom experiences, and the most often reported negative experiences was “always being aware the condom was on.” Females reported most often that “the condom broke.”

Another factor that presents a challenge to safer sex, particularly for females, is the ability to convince or persuade partners to use condoms. This deals directly with a woman’s ability to communicate and negotiate condom use with her partner. Women who are able to effectively communicate and enforce the use of condoms with their partner are significantly more likely to use condoms than are women who do not possess these skills (Catania, 1994; Harlow, 1993). Identifying images of women in the media
who can effectively and assertively communicate and negotiate safer sex with their partners may be a difficult task.

Music and Music Videos as Media Influences

Media influences are pervasive in American society. From movies to television to music, the opportunities for exposure to media influences are many. Therefore, the question of whether media content somehow affects adolescent behavior is a legitimate one. Music and music videos are a particularly interesting media form popular with adolescents (Committee on Communications, 1996). For many adolescents, music is an important badge of identity (Strasburger, 1995). Music also constitutes a medium for social activity. Strasburger and Hendren (1995) state that music plays an important role in the socialization of adolescents. It also helps adolescents to identify with peer groups (Roe, 1990).

There is also concern about the power of music when lyrics are combined with visual images in the format of music videos (Hendren, 1993). Music videos are the visual images seen on television that accompany a song. These images sometimes depict violence, sexism, and sexual promiscuity (Strasburger, 1995). Greenfield and Beagles-Roos (1988) state that music videos are self-reinforcing in that listeners immediately “flash-back” to the visual imagery in the video upon hearing a song.

Sexual imagery is often reinforced. The advent of “feminism” in music has brought to the forefront young female artists who advertise themselves as “bad girls” promoting materialism, violence, and lewdness (Morgan, 1997). This attitude helps to reinforce stereotypes about Black women that are sometimes readily accepted.
According to Wyatt (1997), four stereotypes of Black women exist. These include the submissive stereotype, the mammy, the she-devil, and the workhorse. Of sexual relevance are the submissive stereotype, which suggests that black women are always sexually willing and available, and the she-devil stereotype, which describes black women as “immoral, conniving seductresses who love sex anytime, anywhere, and will do anything to corrupt a man, disrupt his family, and take his money” (Wyatt, p. 33). Most important, these stereotypes have ramifications on how African American women think of themselves. Wyatt advances that these stereotypes are passed along through various means including media. When these stereotypes are repeated, seen or heard frequently, they can become increasingly credible and receive additional confirmation (Wyatt, 1997).

This information evokes questions about the role of music videos in the gender role development of African American adolescent females, a group at risk for sexually transmitted diseases including HIV. According to Erik Erikson’s theory of psychosocial staging, the adolescent years represent a period of identity development (Santrock, 1987). To successfully complete this stage, the adolescent builds a consistent identity from self-perceptions and relationships with others (Santrock, 1994). Gender role development falls within the scope of identity development.

For African American adolescent females who are frequently exposed to music videos which depict women negatively (i.e., as passive, submissive, materialistic, or sexual objects), these images may play a part in their identity development. These images may also play a part in developing unhealthy gender roles and determining how young
women in this population view themselves and consequently behave. The theoretical basis for this concept follows.

Theoretical Basis for Examining Music Videos in Relation to Sexual Behavior

Several theories have informed the hypotheses examined in this study. The conceptual model relating music videos to sexual risk behavior, and upon which this study was based, suggests a relationship between music video viewing and sexual behavior as mediated through gender roles and self-efficacy for condom use (which involves convincing or persuading a partner to use condoms).

Cultivation theory was initially used to research the effects of television on violence (Griffin, 1994). According to this theory, the effect of exposure to the same messages produces cultivation—or "a common world view, common roles, and common values" (Severin, pp. 31-35). Simply, this theory hypothesizes that watching a large amount of television will be associated with a tendency to hold specific and distinct perceptions of reality that are in line with the most consistent and pervasive images and values of the medium (Shanahan, 1999). In terms of this study, consumption of a large amount of music videos (with high sexual content) will be associated with a tendency for adolescent girls to hold specific perceptions concerning the sexual roles of women.

The theory of gender and power, developed by R.W. Connell (1987), describes three major structures that characterize gender relationships between men and women: the sexual division of labor, the sexual division of power, and the structure of cathexis, which involves emotional attachments (Connell). These structures are all very closely related. The sexual division of labor manifests in "women’s work,” which is closely
related to the sexual division of power and manifests in female adolescents being more psychologically, economically, and socially dependent on their male partner (Wingood, 1999). This structure suggests that young women may be placed at risk for HIV infection because of an inability or fear associated with effectively discussing sexual risk issues with their partners. The structure of cathexis is based on the principle of emotional investment in gender difference (Hollway, 1994). It assigns “correct” behavior according to traditional gender roles. It may encourage a young woman to believe that condom use is inappropriate in “committed” relationships.

Social cognitive theory explains behavior as dynamic and dependent on environmental and personal constructs that influence each other simultaneously (Glanz, 1995). Observational learning is a construct that relates to role modeling. In the present study, women in music videos may act as role models through which adolescents learn how to behave. Another construct of particular relevance to this study was that of self-efficacy. Self-efficacy is the belief an individual holds about being able to perform a given task. According to Bandura (1993), the developer of this theory, success in relation to HIV control requires strong self-belief in one’s efficacy to exercise personal control (Bandura, 1993). Self-efficacy is examined in this study in relation to the adolescent’s ability to use condoms (which would involve convincing or persuading a partner to use condoms).

**Music Videos and Safer Sex in African American Adolescent Females**

This study examined the association of music video viewing (including genre, negative exposure to music videos, and level of influence), gender roles, self-efficacy for condom use, and risky sexual behavior among a sample of African American female
adolescents. Some music videos, including, and in some cases especially, rap music videos, depict women very negatively. It is important to examine the possibility that the combination of sexually oriented visual images and lyrics with the popularity of the music video medium may have deleterious effects on the sexual health of African American adolescent females who view them. Also, the information gained through this study may have ramifications for health education through the development of STD/HIV prevention interventions that incorporate the impact of media with this group.

A survey designed to assess behavioral and psychosocial characteristics, including music video watching habits, the perceived depiction of women in music videos, influence of women in music videos, attitudes toward women (gender roles), self-efficacy for condom use, and safer sex practices (consistent condom use or abstinence) was used to collect the data for this study. This survey also assessed parental communication, social support, religiosity, STD history, partner communication, attitudes about condoms, self-efficacy for correct condom use, fear from negotiating condom use, HIV/AIDS knowledge, ethnicity, television and movie watching habits, self-esteem, body image satisfaction, personal control, depression, worry about acquiring STDs or HIV, healthy or unhealthy relationships, abuse from partner, violent activity, pregnancy, and contraceptive behavior. A baseline survey was administered to African American adolescent females prior to randomization in a culturally-sensitive HIV risk reduction intervention called Sistahs Informing Healing Living Empowering (SIHLE). This larger study, SIHLE, utilized an experimental design. The proposed study seeks to answer the following research questions using data from the baseline survey:
1. What are the music video viewing habits of this population (including frequency of viewing, most watched genres, channels accessed, norms while viewing, and listening and viewing similarities)?

2. How does this population rate their level of exposure to negative portrayals of women in music videos?

3. How does this group rate their level of personal influence (on dress and behavior around men) from women in music videos?

4. Are there differences among girls whose music video preferences differ?

Hypothesis 1: Girls whose preference is rap music videos will differ significantly from girls whose preference is rap and R&B music videos combined and from girls whose preference includes genres other than rap and R&B on the following characteristics: self-reported exposure to negative images of women in music videos, perceived personal influence of music videos, sex-role stereotyping, self-efficacy for condom use, and rate of condom use in the past 6 months.

5. Is self-reported negative exposure to music videos correlated with any genre(s) of music video?

Hypothesis 2: Negative exposure will have a strong positive correlation (reliability greater than .70) with (a) hrs/week of rap music videos watched, (b) hrs/week of R&B music videos watched, and (c) hrs/week of rock/pop music videos watched and negative exposure will have no correlation with (a) hrs/week of alternative music videos watched; (b) hrs/week of jazz music videos watched, (c) hrs/week of country music videos watched, and (d) hrs/week of gospel music videos watched.
6. When age is controlled for, is self-reported exposure to negative images in music videos predictive of perceived personal influence of music videos, sex-role stereotyping, self-efficacy for condom use, rate of condom use, ever being pregnant, or ever having an STD?

Hypothesis 3: Self-reported exposure to negative images in music videos will be predictive of perceived personal influence of music videos, sex-role stereotyping, self-efficacy for condom use, rate of condom use in past 6 months, ever being pregnant, and ever having an STD, when adjusted for age.

7. When age is controlled for, is music video preference predictive of perceived personal influence of music videos, sex-role stereotyping, self-efficacy for condom use, rate of condom use, ever being pregnant, or ever having an STD?

Hypothesis 4: Music videos preference will be predictive of perceived personal influence of music videos, sex-role stereotyping, self-efficacy for condom use, rate of condom use in past 6 months, ever being pregnant, and ever having an STD, when adjusted for age.

8. When age is controlled for, is there a difference in girls' social construction of reality, (i.e., reality of women in music videos versus women in real life) depending on viewing frequency?

Hypothesis 5: An increase in reported video frequencies will be associated with an increase in perceptions that women in music videos are like women in real life, when adjusted for age.
Terms Relevant to the Study

Sexually transmitted diseases (STDs): Viral and bacterial infections that can be transmitted through sexual contact (i.e., vaginal, anal, or oral contact).

Human immunodeficiency virus (HIV): The virus that causes disruption of the immune system in humans and eventually leads to acquired immune deficiency syndrome (AIDS). HIV is also classified as an STD.

Music videos: The visual images seen on television that accompany a song. These images sometimes depict violence, sexism and sexual promiscuity (Strasburger, 1995).

Music video genres: Distinctive categories of music and music videos that are separated into groups. For the purpose of this study, genres include alternative, country, gospel, jazz, R&B, rap, and rock/pop.

Rap music: Genre of music that is characterized by talking to a musical beat (Strasburger, 1995).

Negative characteristics of women in music videos: Images of women in passive, promiscuous, or submissive roles. It also includes images of women as sex objects or women using sex to gain material possessions.

Gender roles: Traditional societal expectations of males and females. The male and female roles in American society traditionally dictate male dominance over females. Thoughts such as these may lead men to believe they are entitled to power in male-female relationships. Females may sometimes expect that men will take on this role.

Safer sex: Any methods or devices to prevent or reduce the transmission of sexually transmitted diseases, for example, abstinence or the consistent use of latex condoms.
**Self-efficacy for condom use:** The young woman's personal belief regarding her ability to mediate the use of condoms by her partner. It involves confidence in her ability to persuade or convince her partner to use condoms, and it would also involve refusing sex if a partner were unwilling to practice safer sex using condoms. Finally, it would include a woman’s belief that she could easily suggest using condoms even if they had not been used in the past. Self-efficacy for condom use by this definition would require that a woman communicate openly with her partner.

**Limitations**

In terms of generalizability, this study is limited by the fact that it focuses on a very specific subset of the adolescent population. Only sexually active African American adolescent females between the ages of 14 and 18 were recruited for the study; therefore, this research cannot be generalized to adolescents outside of this age group. However, the need for further research among minorities and adolescent females with regard to HIV has been well documented in the literature (Overby, 1994; Stanton, 1994; Wingood, 1992). The researcher must also acknowledge that the information gained from this research cannot be applied to non sexually active young women as their attitudes and perceptions regarding music videos may be as different because their sexual behavior. In addition, the cross-sectional research design severely limits causal inferences. Other limitations are discussed in Chapter 3.

The following chapters provide a detailed review of the literature related to music videos and sexual behavior in African American adolescent females, a discussion of the
methodology for this study (including statistical analyses), the results of the study, and finally a discussion section presenting the relevance of the findings.
CHAPTER 2
LITERATURE REVIEW

The purpose of this study was to examine the association of music video viewing, gender roles, self-efficacy for condom use, and safer sex practices among a sample of African American female adolescents. This chapter presents a review of topics relevant to this study. The topics discussed here are all important considerations for this study and are discussed as they relate to the study population—African American adolescent females. They include HIV risk behavior, adolescent pregnancy, and STDs in adolescents, particularly HIV. In addition, media influences (particularly music videos), gender roles, and self-efficacy for condom use (as defined by this study) are also discussed. Finally, behavioral theory as it applies to the research questions proposed in this study is discussed.

HIV Risk Behavior in African American Adolescents

As evidenced by the incidence of unintended pregnancies and STDs in adolescents, individuals in this age group do engage in HIV risk behavior. High-risk sexual behavior in adolescents has been characterized by multiple sexual partners (Santelli, 1998; Hatcher, 1994) and unprotected intercourse (Heffernan, 1996; Reitman, 1996). High-risk sexual behavior has also been linked to sex while engaging in alcohol and drug use (Hingson, 1990).
Several studies have examined high-risk sexual behavior with a substantial population of African American adolescents. In a study conducted by Levy and colleagues (1995) in a large metropolitan midwestern epicenter, researchers sought to fill a void by examining HIV risk behavior in 7th, 8th, and 9th grade students. Forty-nine percent (n = 419) of the sample was African American. Fifty-four percent of the African American students reported ever having sex, with 31% of these students reporting never having used a condom. Researchers found that males, 8th and 9th grade, Black race/ethnicity, and licit or illicit drug use were all significantly related to sexual activity, suggesting that younger adolescents are in need of comprehensive HIV risk-reduction programs. Likewise, in a study of minority adolescents, ranging in age from 11 to 16, African American students made up 31% of the total sample representing 555 students (DiClemente, 1991). In this sample, only 36% of African American students reported consistent condom use. These researchers also recommend that younger adolescents receive comprehensive HIV risk-reduction programs.

Low-income African American students (n = 195) with a mean age of 15.3 years completed surveys regarding HIV knowledge, health-related attitudes, sexual behavior, and contraceptive decisions (St. Lawrence, 1993). Forty-nine percent of the sample was female. Of those who had engaged in sexual behavior during the past 6 months, only half reported using a condom during intercourse. Despite this, girls in this study endorsed more positive attitudes about condoms and their effect on the sexual experience and perceived themselves to have greater self-control than boys in sexual situations. These attitudes, however, were not wholly reflected by all females in this population in terms of protective sexual behavior through the use of condoms.
In an STD clinic-based study, 456 adolescents aged 13 to 19 voluntarily participated in a study requiring an interview as well as an HIV test (Heffernan, 1996). Forty-eight percent of the total sample consisted of women, and 59% of the total sample was African American. Vaginal intercourse was the sex behavior engaged in most often; however, 57% reported “rarely or never” using condoms. Only 3% of women reported using condoms “always.” Four percent of the women reported trading sex for money or drugs. The authors suggest that the HIV/AIDS epidemic in urban adolescents is fueled by many factors, including the relatively high prevalence of HIV infection in the community as well as drug use. This could have negative implications for women who decide to trade sex for money or drugs.

In a study examining sexual practices and intentions, Stanton and colleagues (1993) found that a high percentage of the low-income, urban African American pre- and early adolescents in their study were engaging in or intending to engage in high-risk sexual behavior. The sample consisted of 351 African American youth aged 9 to 15. Thirty-five percent of the entire sample reported being sexually active, while 20% of the non-sexually active subjects thought it likely that they would become sexually active within the next 6 months. It is important to note that age and grade level were highly correlated with sexual status overall. Among those sexually active, 25% reported having 4 or more partners during the past 6 months, with 31% reporting not using a condom at last intercourse.

DiClemente, Lodice, et al. (1996b) conducted a study with 264 African American adolescents and young adults aged 12 to 21 who were recruited from public housing developments. Sixty percent of the sample was female, half of whom were sexually active.
Both the mean and median age of first intercourse was 13 years, and the median number of lifetime sex partners reported was “6 or more.” Only 33% of sexually active females in this study reported using condoms every time they engaged in sexual intercourse, reflecting a sizeable proportion of young women engaging in risk behavior.

The Youth Risk Behavior Surveillance (YRBS) was developed by the CDC in collaboration with federal, state, and private-sector partners (Kann, 1998). YRBS provides national data on youth risk activity for students in grades 9 through 12 and gives insight on areas of concern for adolescents. An area of particular concern is that of “sexual behaviors that contribute to unintended pregnancy and sexually transmitted diseases (including human immunodeficiency virus)” (p.18). According to YRBS, African American female students were significantly more likely than Hispanic and White female students to have had sexual intercourse, to have initiated sexual intercourse before the age of 13, and to have had 4 or more sex partners during their lifetime (Kann, 1998).

A study devoted solely to minority female adolescents examined HIV risk behavior among an urban population of sexually active young women (Overby, 1994). The sample consisted of 69 subjects age 13 to 19 who were interviewed at a pediatric community hospital clinic. The sample was 90% African American. Condom use among this sample was relatively low. Sixty-four percent reported using condoms one-half of the time or less when they had sex. The median total number of sexual partners reported was 3 with a mean of 6 partners. The mean was likely elevated because the range of total number of sexual partners was 1 to 60. The researchers found that although subjects were concerned about AIDS risk and engaged in high-risk sexual activity, most perceived themselves to be at low personal risk because of current monogamy, lack of intravenous-
drug use, and implicit partner trust. The researchers concluded that young, sexually active, minority women living in areas of urban poverty are currently at greatest risk of heterosexual HIV exposure.

These studies document the HIV risk behavior reported by African American adolescent females. In addition to behavioral factors that contribute to HIV risk, psychosocial factors are also important considerations that place African American adolescent females at risk for contracting HIV.

Psychosocial Factors Related to HIV Risk Behavior

It has been well established that high levels of HIV-related knowledge do not necessarily segue to high levels of self-protective behavior in adolescents (Becker, 1988; DiClemente, 1991; Stanton, 1994). Psychosocial factors that attribute to HIV risk in African American adolescents should not be overlooked. Many studies have reported factors associated with high risk behavior in African American adolescent females. These include low assertive self-efficacy (Reitman, 1996; DiClemente, Lodico, et al., 1996); high perceived risk (Reitman, 1996); perceived peer nonsupport of condom use (DiClemente, Hansen et. al., 1996); and unfavorable attitudes toward condoms, including beliefs that condoms are ineffective or that they will negatively affect sexual enjoyment (St. Lawrence, 1993; DiClemente, 1996b; Overby, 1994). Other important factors are beliefs relating to relationship dynamics, including the perception that condom use negatively affects relationship trust as well as a belief that condoms are unnecessary in committed relationships (Overby, 1994). Wingood and DiClemente (1992) present several cultural, gender, and psychosocial influences that affect HIV risk behavior. These
include sex-role socialization, normative influences in adolescent heterosexual relationships, self-efficacy, empowerment, and gender roles. The sex-role socialization of African American adolescents puts an emphasis on adult responsibilities which leads to a "sense of competence and independence." The researchers state that "growing up fast" with regard to responsibility may not transfer to dealing effectively with highly charged sexual situations, and that normative influences in adolescent heterosexual relationships would suggest that a young woman's boyfriend may be the most influential person in her life. This would mean that condom use would primarily be dictated by the male partner in the relationship. Lowered self-efficacy in African Americans is partly a result of inequality (Hughes, 1989). For African American women, this inequality is expressed as powerlessness, particularly in relationships. In relationships, it may be difficult to challenge the traditional gender rules—power imbalances in favor of the male partner. Wingood and DiClemente (1992) also infer that the lack of tailored messages focusing on unity and racial identity is also an important factor contributing to HIV risk. These factors also may contribute to the incidence of pregnancy among African American adolescent females.

Pregnancy in African American Adolescent Females

Adolescent pregnancy serves as a marker for unsafe sexual behavior because it indicates an opportunity for exposure to STDs. When compared with that in other ethnic groups, the rate of teen pregnancy in African American adolescents is much higher (Ladner, 1987; Ladner, 1992). Although the consequences of adolescent pregnancy do not differ across ethnic groups, African American females experience poor birth
outcomes more frequently (Ventura, 1998), including intrauterine growth retardation, prematurity, low birth weight, and increased neonatal morbidity and mortality (Allen Guttmacher Institute; McAnerny, 1990; Rabin, 1991; Zuckerman, 1984). Medical complications for which pregnant adolescents are at risk include pregnancy-induced hypertension, anemia, and premature labor (Allen Guttmacher Institute; Brooks-Gunn, 1986; Davidson, 1991; Zabin, 1993). Adolescent sexual activity results in an estimated one million teen pregnancies per year (Allen Guttmacher Institute, 1994).

The majority of teenage pregnancies are unintended (Henshaw, 1998). For African American females 15 to 19 years of age, the birth rate is 89.5/100,000, births as compared with 52.9/100,000 for all races. The elevated birth rate in this group suggests marked sexual risk behavior.

Sexually Transmitted Diseases in African American Adolescent Females

STDs continue to be a major public health threat for adolescents (Brabin, 1996; Levison, 1992; Marwick, 1997), and they are a common problem particularly for African American adolescents (Lane, 1999).

The issues of race and region are important considerations of STDs. For African Americans and other minorities, STD rates continue to be much higher than for white Americans (CDC, 1995). For example, according to the 1994 Summary of Notifiable Diseases, United States, African Americans had over six times as many reported cases of gonorrhea as White Americans (CDC, 1994). The southern region of the United States has also had consistently higher rates of gonorrhea, and possible reasons may include the following: (a) differences in the racial and ethnic distribution of the population,
(b) poverty, and (c) the availability and quality of health care services (CDC, 1995). African American females also experienced Chlamydia trachomatis infection six times more often than their age-matched White counterparts (CDC, 1998b). This may be due in part to a physiologically increased susceptibility to infection caused by increased cervical ectopy and lack of immunity (CDC, 1999c).

Those subgroups of the population particularly affected by STDs include females and infants, adolescents and young adults, and minorities (CDC, 1996). Although adolescents as a whole are affected by all STDs, gonorrhea and chlamydia affect adolescents disproportionately (CDC, 1996). African American females aged 15 to 19, had rates of gonorrhea approximately 23 times higher than white females in this same age group in 1997 (CDC, 1999c). This highlights the need to focus attention on African American adolescent females who are engaging in large amounts of high-risk sexual behavior.

**HIV in African American Adolescent Females**

The threat of HIV infection in African American adolescents is causing increasing concern. Because of the 10- to 11-year latency period, it is likely that the majority of adult AIDS cases were infected with the virus as teens (Brooks-Gunn, 1988; Karon, 1996). Twenty-one percent (21%) of all AIDS cases in Black females are reported for women age 20 to 29 (CDC, 1998a). In a seroprevalence study conducted among adolescent attendees of a STD clinic in Mississippi, researchers found that rates of HIV infection among Black adolescents were 3.5 times higher than among Whites (Young, 1992). In another seroprevalence study conducted among applicants for U.S. Military Service, the prevalence among Black teen applicants was greater than that among White or
Hispanic teen applicants. Most alarming was the prevalence among Black teen females (0.77/1000), which was four times higher than that of White teen males (0.18/1000; Burke, 1990). Also, survey results of Job Corps students conducted from January 1988 to December 1992 revealed that HIV seroprevalence more than doubled from 3.2 to 6.6 per 1000 (Conway, 1993). More recent data suggest that trends in AIDS incidence show the HIV epidemic among young people to be spreading fastest among heterosexual contacts, especially women and Blacks (Denning, 1997). A study by Heffernan and colleagues (1996) examined the HIV-risk related behaviors in a sample of adolescents attending an STD clinic. They also tested adolescents for HIV. Of the 220 adolescent women in the study, 4.1% were found to be HIV positive. Researchers concluded that the high risk of HIV infection in young women in this study was due to high-risk sex related to drug use and the exchanging of sex for money (Heffernan, 1996). Based on current seroprevalence data, the CDC reports HIV infections from 31 states through June 1998. These data show that 26% of all cases of HIV infection are reported in 13- to 24-year olds (CDC, 1998a).

Sexual risk behavior in adolescents has been well established, and it leads to many detrimental outcomes for youth. The goal of this study was to determine the relationship between music videos and safer sex among a sample of African American adolescent females. The content of media sources, such as music videos, may contribute to adolescents experiencing consequences such as unintended pregnancy and STDs, particularly HIV.
Media Influences

Since its inception, the media have always been viewed as a form of entertainment. There is great concern, however, that this form of entertainment has also become a vehicle for behavioral influence. According to DeFleur and Ball-Rokeach (1982), media content shapes cultural norms and in this way indirectly affects behavior. This may be particularly true for adolescents who are trying hard to define themselves at this stage in their lives.

Media use among adolescents is not equally distributed by age, gender, or ethnicity (Kubey, 1990; Brown, 1990). In a study examining over 2,000 young adolescents' television and radio use, Brown, Childers, Bauman, & Koch (1990) found that, overall, African Americans and females spent more time with television and radio than did Whites and males respectively. Past studies have found that African Americans spend more time with television than Whites do regardless of their social class (Comstock, 1978; Comstock, 1982).

The National Institutes of Mental Health summarized studies concerning the behavioral effects of television on children and concluded that children learn and form attitudes from what they see on television (Pearl, 1982). Also, adolescents use television as an important source for learning about topics related to sex (Pearl; Strasburger, 1985).

Although it is purported that media have the power to influence a variety of behaviors, sex is of particular interest. In a poll conducted by Lewis Harris and Associates (1988), it was found that American adolescents are exposed to 14,000 instances of sexual material on television annually. Of these, only 1 in 85 made mention of birth control, sex education, or STDs (Louis Harris and Associates). Daves (1995) suggests that
professionals not underestimate the media’s power to influence adolescent’s views of the adult world. Two studies have examined the relationship between viewing “sexy” television and sexual activity among adolescents. Peterson, Moore, and Furstenberg (1991) examined the relationship between viewing programs with high sexual content at baseline and then subsequent initiation of sexual activity in adolescents (N=1,423) aged 11 to 16. A relationship was found for males, but not females, in this study. Brown and Newcomer (1991) found that adolescents who had a higher diet of sexy television programs were more likely to have had sex. Students in this study ranged from 13 to 18 years of age, with only 24% of the sample being African American. Other studies have been more specific to music and music videos.

Music and Music Videos

Music and music videos represent one media form that is worthy of attention. Those concerned about adolescent health worry that music, with its themes of alienation, violence, substance abuse, and sex, contributes to the perceived deterioration in the development and identity formation of young people (Strasburger, 1995). Strasburger and Hendren (1995) also state that music plays an important role in the socialization of adolescents, helping adolescents to identify with a peer group (Roe, 1990).

Music. In a study of 2,760 students in 10 southeastern cities, Klein and colleagues (1993) found that adolescents aged 14 to 16 listen to music an average of 40 hrs per week. An earlier study found that 78% of southeastern high school students felt that
music was “very important” in their lives (Verden, 1989). Schlatmann (1989) found that students attending an alternative high school reported that music influenced how they thought about important topics. Gender and racial differences also exist. According to Christenson and Roberts (1989), girls listen to music more than boys, and African Americans listen more than Whites. In a review of literature, researchers also reported that African American adolescent females were the most avid listeners of music, averaging approximately 7 hrs per day (Christenson, 1989).

There are also differences in the interpretation of song lyrics by adolescents. Studies have shown that adolescents do not readily comprehend the meaning of song lyrics, and this lack of comprehension tends to be dependent on the age of the adolescent (Greenfield, 1987; Prinsky, 1987). According to Greenfield and colleagues (1987), the interpretation of lyrics is limited when the individual’s knowledge and experience are limited. The degree of interpretation may also depend on the type of music to which adolescents listen.

Music preferences (rap music). The type or genre of music that adolescents attend to is also of importance. For example, studies have shown that a preference for heavy metal music may be a significant marker for alienation and risk-taking behaviors during adolescence (Klein, 1993; King, 1988; Martin, 1993). Another study on heavy metal music reported that it contains themes of violence, dominance, and abuse of women, hate, the occult, Satanism, and death (Arnett, 1991). In addition to heavy metal, rap music has also gained attention (Strasburger, 1995). Rap music “has roots in urban African American culture and is characterized by talking to a musical beat” (Strasburger,
Rap music continues the tradition of expressiveness that is characteristic of African American music (Zillman, 1995). Artists of this genre address various issues ranging from politics and White oppression to drugs and violence to social activities and cultural unity (Zillman, 1995; Strasburger, 1995). Rap is recognized as a viable cultural art form (Light, 1999) that challenges the values of traditional mainstream ideals (Rap and Race, 1992). Some critics even suggest that “rap is rooted in the assumption that women are merely objects of male sexual satisfaction” (2 Live Crew, 1991). In addition, gangsta rap, a subgenre of rap, has been labeled as intensely violent, sexually explicit, sexually violent, misogynistic, drug- and gang-oriented, and politically radical (Rule, 1994; Strasburger, 1996).

Music videos. As stated earlier, adolescents do not quickly and easily comprehend the lyrics of music. Music videos, however, may make understanding the lyrics easier. There is concern that the power of the music and lyrics becomes magnified when visual images are added to them, increasing the risk of deleterious effects on adolescents (Hendren & Strasburger, 1993; Zillmann, 1987). Greenfield and Beagles-Roos (1988) express that music videos are self-reinforcing in that listeners immediately “flash-back” to the visual imagery in the video upon hearing a song. In addition, when adolescents watch music videos, they give music videos their full attention, unlike when listening to, which allows adolescents to do other things (Greenfield, 1987).

There are two types of music videos, performance and concept videos. In a performance video, a performer or group sings the song in a concert or studio, while concept videos consist of a story that goes along with the song (Strasburger, 1995). Of these two
types of music videos, the concept videos are suspected of promoting violence, sexual promiscuity, and sexism (Strasburger, 1995). These types of videos can expand an adolescent’s knowledge and experience by providing clear interpretations of the song lyrics through visual images (Greenfield, 1987).

**Music video consumption by adolescents.** Music videos are a medium designed primarily for adolescents and young adults (Signorielli, 1990). Music Television (MTV), the first cable-access music-video channel, began August 1, 1981, targeting music consumers aged 12 to 34 (Wolfe, 1983). Music videos are popular with pre- and early-adolescents. Seventy-five percent of 9- to 12-year olds and 80% of 12- to 14-year olds watch music videos (Christenson, 1989). Music videos have become a very important part of consumer culture by influencing television viewing, music listening, and record buying habits of youth (Burnett, 1990). According to Strasburger (1989), MTV can be compared to prime-time advertising because it uses sex to sell.

Debates about MTV and music lyrics began in 1983 (Cocks, 1983; Zorn, 1984) and became more controversial when the Parents Music Resource Center stated before Congress that rock music lyrics were a dangerous influence on sexual morality, violence, drugs. Music lyrics were also stated to influence the practice of Satanism among teens. (Cocks, 1985; Dougherty, 1985; Zucchino, 1985). Other groups like Women Against Pornography and the National Coalition on Television Violence contended that music videos are sexist, pornographic, and violent (Jaeger, 1984). Despite this early controversy, video music is now a television staple, as evidenced by the number of video channels (both cable and local video programs; (Greenfield, 1987). Video access channels
include Black Entertainment Television (BET), Video Hits One (VH1), Country Music Television (CMT), and The Box, a local video station where callers can request videos.

Sun and Lull (1986) reported that most teens have access to music television, and 80% watched an average of 2 hrs a day. Christenson and Roberts (1989) reported daily music video viewing of 41 mins for 7th graders, 32 mins for 9th graders, and 23 mins for 11th graders. Strasburger and Hendren (1995) state that music videos seem capable of influencing adolescents' ideas about adult behavior and may even modify their adolescent behavior. Given that some teenagers may average up to 2 hrs of music video viewing a day, consideration must be made for the content of these videos.

**Music video content.** Sexual and violent imagery are featured heavily in music videos (Baxter, 1986; Seidman, 1985; Sherman, 1986; Vincent, 1988). One critic adds that MTV is especially violent, sexual, and often demeaning to women (Strasburger, 1985). For adolescent audiences, these images can be very unhealthy (Strasburger, 1995). According to Bontinck (1986), adolescents are exposed to media that support both a "genuine" and "fictitious" reality, and it becomes difficult for youth to distinguish between the two. Collectively, music videos are viewed as an agent of adolescent socialization by influencing hairstyles, clothing, and even verbal expressions (Rice, 1981). Information from the media can also teach adolescents how to “act out” in sexual and romantic ways (Brown, 1990). The images related to sexual expression that are seen in music videos can act as intense influences for youth (Daves, 1995). Brown and Campbell (1986) agree, stating that adolescents may vicariously learn ideas about their appearance and about social behavior from music videos.
Several content analyses on music videos have been done to examine the subject matter of this popular medium. Sexual content appeared in 75% of the videos analyzed by Sherman and Dominick (1986) at a rate of five acts of sexual intimacy per video. In addition, 50% of the music videos contained violence, and this violence was often combined with sex to portray violence against women (Sherman, 1986). Greeson and Williams (1986) conducted a content analysis of randomly taped music videos from MTV and found that 47% of the videos contained sexual references. Baxter, DiRiemer, landini, Leslie and Singletary (1985) also reviewed a random sample of music videos from MTV and found that approximately 60% of the videos contained sexual content. Researchers also reported that although sexual references were not always overt, suggestive behavior was frequently observed in music videos (Baxter, 1985). Further, in a content analysis study by Vincent and colleagues (1987), over half of the videos analyzed portrayed women in a condescending manner.

It is important also to examine how men and women are being portrayed in music videos. In a content analysis study of 40 music videos from MTV, several interesting results were found. Those of interest include (a) men engaged in significantly more aggressive and dominant behavior; (b) women engaged in significantly more implicitly sexual and subservient behavior; and (c) women were more frequently the object of explicit, implicit, and aggressive sexual advances (Sommers-Flanagan, 1993). Seidman (1992) also conducted a content analysis of 182 music videos from MTV to examine sex role stereotypes in music videos; this research found that males were more adventurous, domineering, aggressive, and violent, while females were more affectionate, dependent, nurturing, and fearful. Seidman (1992) also found that women in videos also
wore more revealing clothes and initiated and received sexual advances more often than men. Finally, Brown and Campbell (1986) used a sample of videos from MTV and BET to compare how men and women and African Americans and Whites are portrayed in music videos. Interestingly, these researchers found that African American females and males were more likely to engage in prosocial and sexual behavior. These researchers also reported that videos shown on “Video Soul”, a program on BET, were more often love- or sex-related (Brown, 1986). This study is the only one that used videos from video channels other than MTV for content analysis.

In an educational video about female identity in music videos entitled “Dream Worlds II: Desire, Sex and Power in Music Videos,” the author and editor Sut Jhally presented a compelling examination of how women are represented in music videos (Jhally, 1991). Jhally stated that the goal of the music industry is to sell music, thus making music videos very elaborate commercials. Much like advertisements, music videos use provocative imagery to make them stand out. The important issue relates to the stories that music videos tell about sexuality as they attempt to sell music. According to Jhally, music videos tell stories about female sexuality as seen through the eyes of males. This results in images where women wear what men want them to wear (i.e., provocative clothing or no clothing at all). Women are also often presented as strippers or exotic dancers and even prostitutes. Jhally also stated that the “fundamental role of women in music videos is decorative.” Women’s body parts are showcased implying that the whole person is irrelevant: “Women are passive things to be explored and used by men.” This suggests that women are objects, and that “one woman is just as good as the next.” Even female artists include these images in their videos to appear sexier and gain greater
popularity. These images raise legitimate concerns regarding the behavioral effects of music videos.

**Behavioral effects of music videos.** Several studies have examined the behavioral effects associated with music videos among both adolescents and college students. In a study of primarily White middle-class 13- to 22-year-olds, Kalof (1993) found that the perception of media content differs for males and females. A content analysis of responses to music videos showed significant differences in the way young men and women understand femininity and power in music videos (Kalof). Hansen and Hansen (1990) examined the appeal of music videos on the basis of sexual and violent content. Freshman and sophomore college students ($N = 356$) rated music videos and reported an increase in appeal of videos that showed greater sexual imagery (Hansen, 1990). Also, in a study examining students from a working-class background and a college-town background, Greeson (1991) found that the working class background students and the students who watched music videos regularly rated music videos more favorably, especially explicit videos, than did college-town students or students did not regularly watch videos. Toney and Weaver (1994) found that gender and gender role perceptions were determinants of affective (i.e., positive or negative) reactions to music videos in a sample of predominately White college students. Finally, using research based on schema theory, which states that themes in music videos are “schematically represented in memory” (p. 46) and used to interpret future stimuli (Hansen, 1995), Hansen and Hansen (1988) found that stereotypic sex-role schemas presented in music videos changed subjects’ impressions of subsequent male-female interactions among college students. Students viewing
music videos containing stereotypical sex roles supported traditional male-female roles (Hansen, 1988).

Bleich, Zillman and Weaver (1991) conducted research to examine the degree to which adolescents attend to music videos similar to their own personal characteristics by examining viewing of defiant rock music videos in male and female high school students and their relationship to rebelliousness. Researchers found that highly rebellious students did not enjoy or consume more defiant videos than nonrebellious students (Bleich, 1991). This may suggest that sexually oriented students may not prefer or consume music videos with greater sexual content more than do non-sexually oriented adolescents. Of interest are results from a study by Strouse, Goodman and Roscoe (1994) that found that females who were highly involved in pop music or music videos held more accepting attitudes toward sexual harassment. (The study sample consisted of early adolescents and was 87% White.) Also, a study by Johnson, Adams and Ashburn (1995) found that African American adolescent females exposed to rap music videos that were nonviolent in nature reported greater acceptance of teen dating violence than young women who saw no videos.

Other studies have examined attitudes toward sex as well as sexual behavior in relation to music videos. Greeson and Williams (1986) found that 7th and 10th graders exposed to one 1 hr of music videos recorded from MTV were more likely to approve of premarital sex than was a control group, with the 10th graders showing less disapproval of violent content. Conclusions drawn from this study are limited due to a very small sample size. Similar results were found for a sample of college students. Calfin, Carroll and Schmidt (1993) found that students exposed to a music video reported a more open
attitude toward premarital sex than did a control group. A study by Strouse, Buerkel-Rothfus and Long (1995) found a stronger association among permissive sexual attitudes, behavior, and exposure to music videos for females than for males. This relationship was much stronger for girls from nonintact family backgrounds (Strouse, 1995). Finally, in a study of adolescents' risky behavior and mass media use, researchers found that adolescents who had engaged in more risky behaviors listened to radio and watched music videos and movies on television more frequently than those who had engaged in fewer risky behaviors, regardless of race, gender, or parents’ education (Klein, 1993). It is important to remember that studies finding relationships between behavior and media exposure cannot speak to causal direction (Brown, 1990). These studies cannot suggest that watching music videos will necessarily lead to adverse behavior, but they do substantiate the need for greater research on this topic.

Music Videos and Sex-Related Attitudes and Behavior in African Americans

The research cited clearly indicates a relationship between media and adolescent behavior. It is, however, difficult to draw causal inferences from these studies. More research is needed that examines the content of current music videos (i.e., content analysis), as well as studies that can be more conclusive about music videos and adolescent behavior. The proposed research fills a gap by studying African American young women. Several of the studies mentioned above did not include African American adolescents in their samples or African American videos in their content analysis. In light of the content of music videos and the reported associations between music videos and attitudes and behaviors in females, African American adolescent young women represent a
group necessary to examine. The disproportionate rates of HIV and STDs in African American women point to the need to examine music videos as a factor that may support sexual risk behavior.

It is believed that adolescent young women are exposed to numerous instances of negative portrayals of women in music videos. Negative portrayals include women as passive, as sex objects, as promiscuous, or as women who use sex to gain material things. Young women may observe these images and develop an attitude of acceptance for this behavior. Those who consider this acceptable behavior may be influenced to behave similarly in male-female relationships. Or perhaps the images seen in music videos encourage unhealthy attitudes toward women. In either case, it appears that the outcome points to sexual risk behavior. Cultivation theory partially explains this hypothesis.

**Cultivation Theory and Its Applicability**

Cultivation theory was developed by George Gerbner, a researcher who has devoted study to the effects of television (Giffin, 1994). Gerbner contended that humans live in a world created by stories, and these stories socialize us into various roles, including gender, age, class, vocation and lifestyle (Shanahan, 1999). Cultivation analysis is the study of television's independent contribution to viewers' conceptions of social reality (Shanahan, 1999), and it investigates (a) the institutional processes underlying the production of media content, (b) images in media content, and (c) relationships between exposure to television messages and audience beliefs and behaviors (Morgan, 1990). The central hypothesis of this type of research is that people who spend more time watching television are more likely to perceive the real world in ways that reflect the most common
and recurrent messages seen on television than are people who watch less television (Shanahan, 1999). The effect of this repeated exposure to the same messages produces cultivation, or “the teaching of a common world view, common roles, and common values” (Severin, 1988, p. 313).

Gerbner explains the process of cultivation through two mechanisms: Mainstreaming and resonance. These concepts take into account the idea that heavy viewing has different outcomes for similar groups of people (Severin, 1988). For example, these concepts may lead to different perceptions in elderly females and teenaged boys. Mainstreaming explains the common outlook that is a result of constant exposure to the same images and labels (Griffin, 1994). Resonance refers to repeated symbolic portrayals on television that can cause a viewer to replay real-life experiences over and over in their mind (Griffin).

Cultivation is also sometimes presented as a theory of social control. Two propositions are relevant to this study: (a) institutions of mass communication are owned by social, cultural, and primarily economic elites; and (b) audience members, whether or not they are seeking to fulfill individual needs, participate in a social process in which they hear and internalize messages of social elites (Shanahan, 1999).

In the present study, cultivation theory explains how African American adolescent females develop ideas about feminine roles based on music videos. Mainstreaming explains similarities in perceptions of music video content across this group of adolescents that would occur as a result of elevated viewing. Resonance applies to this study in the following way: when adolescents continue to view women as passive, submissive, sex objects, this reinforces similar situations that may have occurred or currently exist in their
own lives. With regard to cultivation theory and social control, the music industry repre-
sents an elite institution whose goal is to sell music. Music videos filled with sexual im-
agery are a popular way to accomplish this. Adolescents consume these videos and in-
ternalize the messages set forth by the music industry in music videos, which often con-
tain messages filled with traditional gender roles.

Sex-Role Stereotyping (Gender Roles)

In every society, there is a system for training children according to their sex
(Stockard, 1980). This is a child's introduction to what is expected of him or her based
on gender. Gender roles are defined as the purely socially created expectations of mascu-
line and feminine behavior within a society (Richmond-Abbott, 1992). Of importance is
the process of sex-role socialization. This refers to the way that males and females are
taught to be what is considered masculine or feminine in a particular culture (Richmond-
Abbott). People have traditionally responded differently to the two sexes—warm and af-
fectionate with girls and more aggressive and assertive with boys (Sears, 1957).

In American society people are socialized to believe that men are stronger and
more dominant than women. As girls and boys reach adolescence, adult expectations like
these begin to exert a strong influence (Stockard, 1980). For example, in an early nation-
wide survey of adolescents, Donovan and Adelson (1966) found that occupation was a
crucial defining role for boys, whereas marriage was the critical defining element for
girls. In a later study of high school seniors, Lowenthal, Fiske, Thurnher, and Chiriboga
(1975) found similar results. Some of the young women in this study planned to attend
college but still expressed anticipation for marriage after college. Thus, perceptions
about adult roles such as men being the breadwinners or providers and women being the nurturers are very influential during adolescence. Because gender is a social product, those things considered to be female and male reflect the subordinate-dominant relationship of female and male and are reinforced when women and men act out their gender in traditional ways (Radtke, 1994).

Differences in the social construction of sexual imagery by men and women is also a topic of interest. In a study addressing this topic, Kalof (1993) examined the social construction of sexual imagery of a music video by groups of young men and young women through content analysis. The music video in this study served as the "text." Texts can have multiple meanings based on how the readers, or viewers, interpret and interact with them (Denzin, 1992). Kalof (1993) suggests that gender socialization and gendered experiences have led to different patterns of reality construction such that the same text is read differently by men and women. Further, this researcher found significant gender differences in how young women and young men socially construct the meaning of femininity in the video, particularly in the way gender, sexuality, and power interact (Kalof). While the young women tended to read the female image as either powerful and in control or vulnerable and weak, the young men interpreted the same images as teasing and hard-to-get or submissive and indecisive (Kalof). This study provides insightful information about how young women interpret music videos on the basis of their own gender socialization. The theory of gender and power provides a theoretical basis for this hypothesis.
Theory of Gender and Power

In female-male relationships, the concept of power is an important one. Lipman-Blumen (1984) defines power as

the set of processes whereby one party (be it individual, group, institution, or state) can gain and maintain the capacity to impose its will repeatedly upon another by its potential to contribute or withhold critical resources, as well as by offering or withholding rewards, or by threatening or invoking punishment.

This is an important aspect of the theory of gender and power.

The theory of gender and power was formally developed by R.W. Connell (1987), and it argues that gender relations are structured in three ways: (a) the sexual division of labor, (b) the sexual division of power, and (c) the structure of cathexis or emotional attachments (Radtke, 1994). These three structures are all related to each other and exist at both the societal and institutional levels (Connell, 1987). At the highest level, the societal level, the structures are rooted in society through forces that consistently segregate resources and power and ascribe social norms based on previously established gender-determined roles (Wingood, 1999). According to Connell (1987), the institutional level is the lowest level at which the three structures exist. These institutions can include schools, worksites, families, marriages and other relationships, religious institutions, the medical system, the media, communities, and peers (Wingood, 1999). Wingood and DiClemente (1999) have extended the theory of gender and power to include exposures, risk factors, and biological properties of disease, and they examine the consequences of each structure at the population level, the individual level, and the biological level.

Each of the three structures can ultimately have major consequences on the health of women, and they are listed according to the author’s description of each structure (Wingood, 1999). Consequences for the sexual division of labor can include inequities in
income, education, access to care, and employment. At the individual level, this structure can have a profound impact on a woman’s socioeconomic situation. For the sexual division of power, inequities in control, authority, and resources can result from this structure. This manifests at the individual level through behavioral risk factors. Finally, the consequences of the structure of cathexis, or emotional attachment, include disparities in social norms, desires, and beliefs. It also involves expectations that ascribe appropriate behavior for women. At the individual level, this can result in personal risk factors that may exist for a woman.

In applying the theory of gender and power within the framework of this study, each structure is discussed in terms of the adolescent as well as images seen in music videos. The sexual division of labor, the sexual division of power, and the structure of cathexis (emotional attachments) are all applicable to the adolescents’ heterosexual relationships as well as male-female relationships seen on television.

The sexual division of labor intuits an economic situation that does not favor the adolescent female. The adolescent’s unfavorable economic situation may be a result of inequities in income, education, or employment experienced by the teen’s mother, particularly in single-parent homes. The sexual division of labor may manifest in the adolescent’s dependence on a male partner to improve her economic situation, either for her child(ren), for herself, or both. This structure may also manifest in expectations of material gain in exchange for sex. For example, if the adolescent’s partner buys her things, she may believe that she is expected to “put out” for him because of this. For adolescents, this is not likely to be a conscious “trade,” but more an expectation of repayment. Images reflecting these ideas are also present in music videos, particularly in those by
female artists glorifying their own sexual prowess and their ability to use this prowess to acquire material possessions (Morgan, 1997).

The sexual division of power would advance a male dominance in female-male relationships. For adolescents, this may manifest in sexual relationships in which males dominate sexual activities. This can result in risk behavior because the male in the relationship has assumed control over the sexual activities. These consequences may also be resonated in images seen in media, particularly music videos in which men are portrayed as aggressive and dominant, while women are portrayed as sexual and subservient (Sommers-Flanagan, 1993).

Finally, the structure of cathexis, or emotional attachments, assigns appropriate behavior to men and women, both emotionally and sexually. Adolescents may experience this in ways that encourage them to implicitly trust their partners and discourage safer sexual behavior. This structure would not support a young woman who demanded the use of condoms by her partner, but would encourage passivity in terms of negotiation of condom use. This structure would also inhibit behavior associated with practicing safer sex, for example, carrying condoms. According to this structure, young women should behave as “good girls.” Another aspect of this structure deals with the acceptance, and sometimes justification, of infidelity on the part of male partners as though it were a natural part of the relationship. Music videos often portray several women surrounding male artists, suggesting the appropriateness of men having multiple partners.
Self-Efficacy for Condom Use

A young woman’s self-efficacy is the component that enables her to encourage her partner to use condoms. Self-efficacy is the confidence a person feels about performing a given behavior (Perry, 1990). Perceived self-efficacy deals directly with people’s beliefs about control over their own motivations, thoughts, emotions, and behavior (Bandura, 1993).

For a woman, the desire to use condoms has to be communicated to her male partner. For this reason, it is necessary to focus on self-efficacy as it relates to communication and negotiation of condoms. Bandura stated that,

Difficulties arise in following safer sex practices because self-protection often conflicts with interpersonal pressures and sentiments. In these interpersonal situations the sway of coercive threat, allurements, desire for social acceptance, social pressures, situational constraints, fear of rejection, and personal embarrassment can override the influence of the best of informed judgement. (p. 733)

A discussion of the social cognitive theory, from which self-efficacy is derived, follows.

Social Cognitive Theory

Social cognitive theory has its roots in a behavioral theory called social learning theory developed by Miller and Dollard (1941). Albert Bandura developed a comprehensive framework for understanding human behavior that incorporates a cognitive element which he called social cognitive theory (Glanz, 1995). Social cognitive theory is based on the assumption that individuals, their environment and their behavior are all dependent on each other. This idea is termed reciprocal determinism (Perry, 1990). There are several other major concepts of social cognitive theory. They include environment,
situation, behavioral capability, expectations, expectancies, observational learning, rein-
forcements, and self-efficacy. Definitions for each concept are presented below (Perry,
1990).

**Environment:** factors that are physically external to the individual;

**Situation:** the individual’s perception of the environment;

**Behavioral capability:** knowledge and skill to perform a given behavior;

**Expectations:** anticipatory outcomes of a behavior;

**Expectancies:** the values that the individual places on a given outcome, incen-
tives;

**Observational learning:** behavioral acquisition that occurs by watching the ac-
tions and outcomes of others’ behavior;

**Reinforcements:** responses to an individual’s behavior that increase or decrease
the likelihood of reoccurrence; and

**Self-efficacy:** the individual’s confidence in performing a particular behavior.

With regard to this study, social cognitive theory can provide explanations for
many aspects of the adolescent’s behavior as it relates to sexual risk behavior and music
video influence. In the triad of reciprocal determinism, the adolescent (including her
knowledge, skills, beliefs, and health) interacts with her behavior (in terms of sexual risk
behavior) and her environment. In this case, environment can include many factors, for
example, music videos, peers, and partners. The situation is considered the adolescent’s
perception of her environment, in other words, how she may feel about the content of
music videos or what her partner or peers think about practicing safer sex. In this exam-
ple, behavioral capability would address the young woman’s knowledge and skill
associated with practicing safer sex (i.e., correct use of condoms) but more importantly her ability to discuss and negotiate condom use with her partner. Expectations regarding safer sex can be either positive or negative for the adolescent. For example, she may expect that using condoms correctly and consistently will protect her sexual health. Conversely, she may expect her partner to raise issues about trust and possibly her own fidelity if she requests that he use condoms. Negative expectations such as these can discourage attempts at condom negotiation. She may also have expectations associated with modeling the behavior seen in music videos. For example, dressing provocatively or being sexy may provide attention and popularity. Expectancies would refer to the value the adolescent places on the outcome of engaging in risky sex. These outcomes could include pregnancy or STDs. She may also value her relationship and be unwilling to jeopardize it by bringing up the issue of condom use within an established relationship. In addition, the adolescent may value the attention she receives from modeling the sex-related behavior of women seen in music videos. Observational learning, or modeling, can occur by observing peers who “model” safer sex behavior by encouraging it. According to Bandura (1993), social modeling provides a highly effective method for increasing human knowledge and skills. In this example, it is important to consider that adolescents may also be learning to model negative behavior from the women seen in music videos. Reinforcements can also be positive or negative. For example, if a young woman can effectively persuade her partner to use condoms, it will increase the chance that she will attempt this again. Conversely, if she encounters difficulty, her behavior is negatively reinforced, and her future attempts may be impeded. Another source for both positive and negative reinforcements is peers, who can either support or not support con-
dom use behavior. With regard to music videos, young women may find that behavior imitating women in music videos, for example dressing or dancing sexily, may be welcomed by their partners and reinforced by their peers. Finally, for adolescents, the self-efficacy to practice safer sex involves confidence to communicate and negotiate condom use with a partner. In this study, self-efficacy for condom use (which involves convincing or persuading a partner to use condoms) and observational learning (modeling of behavior seen in music videos) are the two most relevant concepts from social cognitive theory. A summary of the theoretical underpinnings of this study is presented in Figure 1.

The theories presented here explain how music videos may be related to sexual risk behavior in African American adolescent females. The literature also documents the risk behavior in this group and presents data supporting a relationship between music videos and sex-related attitudes and behaviors. The present research fills a gap in current literature by examining this relationship in African American adolescent females.
Summary of Theoretical Underpinnings Relevant to Study

Examples of Negative Characteristics of Music Videos

**ENVIRONMENT**

- Women as Sex Objects (Structure of Cathexis)
- Women Dressing Provocatively (Structure of Cathexis)
- Women Controlled by Men (Division of Power)
- Women as Passive/Submissive (Structure of Cathexis)
- Women Using Sex to Gain Material Possessions (Division of Labor)
- One Male with Two or More Women at One Time (Structure of Cathexis)

**PERSON**

- Adolescent Viewer
  - Unhealthy Sex Role Stereotyping
  - Situations observed in Music Videos
  - Adolescent develops ideas about her role as a young woman and models behavior seen in music videos (Cultivation & Observational Learning)

- Cultivation Theory & Social Cognitive Theory

**BEHAVIOR**

- Sexual Risk Behavior
  - Condom use
  - Self-efficacy for Condom Use
  - Number of Lifetime Partners
  - Ever being Pregnant
  - Ever having an STD

**MAINSTREAMING**

- Adolescent Viewer
  - Unhealthy Sex Role Stereotyping

**RESONANCE**

- Adolescent Viewer
  - Situations observed in Music Videos

**Theory of Gender and Power**

Figure 1. Theoretical underpinnings relevant to study.
CHAPTER 3

METHODOLOGY

The goal of this study was to examine music video viewing behavior in a population of African American adolescent females and to determine the relationship of music video viewing and sexual risk behavior. It is difficult to say with certainty that music videos have direct effects on behavior. Through a cross-sectional study design, the following research questions were addressed:

1. What are the music video viewing habits of this population (including frequency of viewing, most watched genres, channels accessed, norms while viewing, and listening and viewing similarities)?

2. How does this group rate their level of exposure to negative portrayals of women in music videos?

3. How does this group rate their level of personal influence (on dress and behavior around men) from women in music videos?

4. Are there differences between girls who watch rap music videos only, girls who watch R&B music videos only, girls who watch a combination of rap and R&B music videos, and girls who watch other music videos? Hypothesis 1 is as follows: Girls whose preference is rap music videos will differ significantly from girls whose preference is rap and R&B music videos combined, and girls whose preference includes genres other than rap and R&B on the following characteristics: self-reported exposure to negative images of women in music
videos, perceived personal influence of music videos, sex-role stereotyping, self-efficacy for condom use, and rate of condom use in the past 6 months.

5. Is negative exposure to music videos correlated with any genre(s) of music video? Hypothesis 2 is as follows: Negative exposure will have a strong positive correlation (reliability greater than .70) with (a) hrs/week of rap music videos watched, (b) hrs/week of R&B music videos watched, and (c) hrs/week of rock/pop music videos watched and negative exposure will have no correlation with (a) hrs/week of alternative music videos watched, (b) hrs/week of jazz music videos watched, (c) hrs/week of country music videos watched, and (d) hrs/week of gospel music videos watched.

6. When age is controlled for, is self-reported exposure to negative images in music videos predictive of perceived personal influence of music videos, sex-role stereotyping, self-efficacy for condom use, rate of condom use, ever being pregnant, or ever having an STD? Hypothesis 3 is as follows: Self-reported exposure to negative images in music videos will be predictive of perceived personal influence of music videos, sex-role stereotyping, self-efficacy for condom use, rate of condom use in past 6 months, ever being pregnant, and ever having an STD, when adjusted for age.

7. When age is controlled for, is music video preference predictive of perceived personal influence of music videos, sex-role stereotyping, self-efficacy for condom use, rate of condom use, ever being pregnant, or ever having an STD? The Hypothesis 4 is as follows: Music videos preference will be predictive of perceived personal influence of music videos, sex-role stereotyping, self-efficacy for condom use, rate of condom use in past 6 months, ever being pregnant, and ever having an STD, when adjusted for age.
8. When age is controlled for, is there a difference in girls' social construction of reality, i.e., reality of women in music videos versus women in real life, depending on viewing frequency? Hypothesis 5 is as follows: An increase in reported video frequencies will be associated with an increase in perceptions that women in music videos are like women in real life, when adjusted for age.

This chapter presents the methodology for the study. It includes a discussion of the parent study and the sample population, including recruitment. Instrumentation, measurement of the variables, data collection, and data analysis are also included. A discussion of the limitations concludes the chapter.

Parent Study

This dissertation was conducted as a substudy of a larger study to assess the efficacy of an HIV-risk reduction intervention for African American adolescent females (DiClemente, 1995). The parent study used a randomized, controlled design and a multi-component behavioral skills intervention based on the theory of gender and power and on social cognitive theory. All participants completed a baseline assessment at the time of enrollment, which involved a paper-and-pencil survey, a face-to-face interview, and an STD screening for chlamydia, gonorhea, and trichomonas. Participants were invited to return for follow-up assessments at 6- and 12 months after the baseline assessment. Currently, 18-month follow-up assessments are being scheduled for each cohort of young women. Five-hundred twenty-two young women have been recruited for this study.

The investigators hypothesize that young women in the behavioral skills intervention will demonstrate less sexual risk behavior, greater knowledge of HIV
prevention behavior, and enhanced skills related to condom use. The study design for the study presented in this dissertation is presented below.

**Study Design**

The dissertation research employed a cross-sectional design, using data collected at the baseline assessment to determine the relationships among independent and dependent variables. Cross-sectional studies are those that are based on observations made at one point in time. There is a limitation associated with this study type. In some instances, these types of studies attempt to understand causal processes occurring over time; however, these conclusions are based on observations made at one time (Babbie, 1992). Despite the inability to identify causal relationships, inferences can still be made about the sample population from the data collected using this design.

**Sample Population**

Young women self-identifying as African American were recruited from local health clinics and schools in Birmingham, Alabama into the parent study and administered a comprehensive survey (n = 522). Recruitment was conducted by a trained recruitment coordinator who personally interviewed each potential participant. Criteria for inclusion into the larger study were as follows: (a) African American, (b) 14 to 18 years of age, and (c) sexually active within the last 6 months. Young women who met these criteria were invited to participate. Six-hundred and nine adolescents were eligible to participate in the study; 85.7% of those (n = 522) agreed to participate.
Recruitment strategies are very important to consider in obtaining the desired sample size. Recruitment was originally to be held only in local adolescent health clinics. Because of difficulty in achieving the desired recruitment numbers, recruitment was opened to adolescents at schools in health classes and other educational facilities in predominately African American settings.

Sample Size

The cross-sectional design of this study makes generalizability an important consideration. The eligibility criteria for the parent study limit the generalizability of these data to African American adolescent females aged 14 to 18 who have been sexually active in the past 6 months.

When selecting a sample from a population of known size, the sample must be large enough so that reliable inferences can be made from the sample about the proportion of individuals in the population (Isaac & Michael, 1995). In this case, the sample of African American adolescent females in this study should provide information so that reliable inferences can be made about like African American adolescent females in the general population. Krejcie and Morgan (1970) provide a formula for estimating the sample size needed relative to (a) a population of known size, (b) a specified confidence level associated with a chi square statistic for one degree of freedom, and (c) the designated degree of accuracy as reflected by the amount of sampling error that can be tolerated. The formula is as follows:

\[
S = \frac{\chi^2 \cdot N \cdot P \cdot (1-P)}{d^2 \cdot (N-1) + \chi^2 \cdot P \cdot (1-P)}
\]
where $S$ is the required sample size, $N$ is the given population size, $P$ is the population proportion assumed to be 0.50 to yield maximum sample size, $d$ is the degree of accuracy as reflected by amount of error that can be tolerated (0.05), and $\chi^2$ is the table value of chi square for one degree of freedom relative to the desired level of confidence (3.841 for 0.95 confidence level).

To determine the given population size, two estimates were used. It is estimated that 9215 African American adolescent females live in the Birmingham area (United States Bureau of the Census, 1990). The YRBS for 1997 reported that 47.3% of African American adolescent females surveyed in grades 9 through 12 were currently sexually active (Kann, 1998). By applying this percentage to the total number of African American adolescent females in the Birmingham area, it is estimated that 4359 young women in Birmingham are currently sexually active. The YRBS definition for current sexual activity differs from that of the study; however, it is the best estimate that can be used to approximate sexually active African American adolescent females within the Birmingham area. Setting $N = 4359$, the sample size, $S$, is equal to 368. Therefore, the sample size of 522 is heartily inflated. Along with sample size, data collection is also an important consideration.

Data Collection

From December 1996 to April 1999, subjects were recruited into the larger study. The study protocol was approved by the University of Alabama at Birmingham’s Institutional Review Board (IRB) for Human Subjects Research (Appendix A). Prior to any research activity, consent forms (approved by IRB) were reviewed and signed by
study participants. Surveys were pilot-tested and adjusted based on formative evaluation data before administration to study participants. Survey administrators guided participants through the informed consent procedure and were on hand to answer any questions. Following informed consent procedures, the paper-and-pencil survey was self-administered to whole groups, with a trained survey administrator present to explain and answer any questions. All paper-and-pencil assessments were conducted in a classroom setting before to randomization of participants to the intervention or control conditions. After the paper-and-pencil survey, subjects were screened for three sexually transmitted diseases (Neisseria gonorrhoeae, Chlamydia trachomatis, and Trichomonas vaginalis) in a clinic setting within the same building. Participants were also tested for pregnancy. In the clinic setting, subjects provided data in response to questions assessing sexual behavior, which were collected by interviewers matched on race and gender in a one-on-one setting.

All participants received monetary incentives for completing the baseline assessment and for attending the workshop on that day. Participants could receive a total of $38 dollars on that day for (a) completing the baseline assessment, including paper-and-pencil survey as well as clinic screenings ($10), (b attending the first workshop ($10), (c) arriving early ($5), (d) transportation expenses ($3), and (e) reimbursement of childcare ($10). Transportation was also provided for subjects who did not have it. Participants who received transportation from the study were ineligible for the “early-bird” incentive and the transportation incentive. These incentives undoubtedly increased participation in the study by addressing barriers to participation for this group of young women.
Instrumentation and Measurement Variables

To ascertain music video viewing habits and attitudes and beliefs about the content of music videos, a 25-question survey was developed for an African American adolescent female population. Measures were obtained on the following: (a) type of music videos watched and number of hours spent watching per day, (b) television channels watched most often, (c) norms when watching music videos, (d) exposure to negative portrayals of African American women in music videos, and (e) personal influence of music videos. Responses were obtained by using open-ended and multiple choice formats for the first three measures. A five-point scale ranging from 0 (Never) to 5 (Always) were used for the latter measures.

The survey for this study was administered as part of the larger assessment. This survey also assessed parental communication, social support, religiosity, STD history, partner communication, attitudes about condoms, self-efficacy for correct condom use, fear from negotiating condom use, HIV/AIDS knowledge, ethnicity, television and movie watching habits, self-esteem, body image satisfaction, personal control, depression, worry about acquiring STDs or HIV, healthy or unhealthy relationships, abuse from partner, violent activity, pregnancy, and contraceptive behavior. Each of the measures relevant to this study is presented below, and the survey items can be found in the Appendices B and C.

Viewing Frequency of Music Videos by Genre

Subjects were asked to indicate which types of music videos they watch by circling yes or no beside each music video genre. Music video genre options included
alternative, jazz, country, gospel, rock/pop, rhythm and blues, and rap. If subjects responded affirmatively to any video genre, they were further asked to indicate the number of hours per day and days per week they watched each video type. Subjects were also asked to report which type of rap music they listened to most often from three choices: gangsta, bass, or hip-hop (examples of artists from each subgenre were provided).

Other Music Video Use Variables

Other variables related to music video consumption were included in the survey, including music video channels usually watched and norms when watching music videos (where watched and who is present during viewing). In addition, four questions were included to address music and music video relationships, including how often (a) do music videos influence decision to buy; (b) does hearing a song make you think back to images seen in music videos; (c) do you better understand the lyrics of a song after seeing a music video; and (d) do you listen to the same type of music as you watch music videos. Five-point scales ranging from 0 (Never) to 5 (Always) were used to measure the music and music video relationship variable.

Exposure to Negative Portrayals of Women in Music Videos

Major emphasis was placed on the items designed to measure participants' exposure to negative portrayals of African American women in music. Six questions were designed to measure the exposure to negative portrayals of women in music videos: (a) women using sex to obtain material possessions like expensive clothes, cars, money,
and entertainment; (b) two or more women surrounding a male artist; (c) women touched or fondled by men; (d) women treated disrespectfuly by men; (e) women portrayed as sex objects; and (f) women being controlled by men. Five-point scales ranging from 0 (Never) to 5 (Always) were used to measure this variable.

**Personal Influence of Music Videos**

Two additional questions assessed the level of personal influence of music videos with regard to dress and behavior around men by asking subjects how often women in music videos influence (a) the way they dress and (b) the way they behave around men. A five-point scale ranging from 0 (Never) to 5 (Always) was used for these questions.

**Reality of Women in Music Videos**

One question assessed the degree to which music videos construct social reality by asking young women how often they believed that women in music videos were like women in real life. For this question, a five-point scale ranging from 0 (Never) to 5 (Always) was used.

**Sex-Role Stereotyping (Adolescent Attitudes Toward Women Scale)**

Traditional attitudes toward women were measured by using a modified Attitudes Toward Women Scale for Adolescents (AWSA) developed by Galambos, Gitelson, Peterson, and Richards (1985). Young women were asked to respond to 11 items using a 4-point Likert scale ranging from 1 (Strongly Agree) to 4 (Strongly Disagree). These items are presented in the Appendix B.
Self-Efficacy for Condom Use

This scale measured the subjects’ confidence in their ability to use condoms in a variety of situations. It is based on a 29-item scale developed by Brafford and Beck (1991) that assesses self-efficacy for various aspects of condom use including negotiation. For the parent study, investigators chose four items from the scale to measure self-efficacy for condom use. These items assessed self-efficacy related to persuading a partner to use condoms, convincing a partner to use condoms, refusing sex with someone unwilling to use condoms, and suggesting condom use to a previous partner if condoms had not been used in the past. Self-reported sexual risk behavior was also assessed in a face-to-face personal interview.

Sexual Risk Behavior

For this study, sexual risk behavior was assessed using three self-report variables: rate of condom use in the past 6 months, ever being pregnant, and ever having an STD. All variables, except ever being pregnant, were collected during the face-to-face interview portion of the baseline assessment. Each of these is discussed individually.

Rate of condom use in past six months. Two questions were used to assess the rate of condom use over the past 6 months: “How many times have you had either vaginal or anal sex with either a steady or non-steady partner?” and “How many of those times did you use a condom?” For each subject, the number of times condoms were used was divided by the number of times they had sex to create a rate of condom use in the past 6 months.
Ever being pregnant. Young women were asked, “Have you ever been pregnant?” in the paper-and-pencil portion of the baseline assessment. Pregnancy was used as an outcome variable because it serves as a marker for sexual risk behavior.

Ever having a sexually transmitted disease. Ever having an STD was assessed by asking participants, “Have you ever been told that you have one of the following STDs, including gonorrhea, Syphilis, Chlamydia, Herpes, Genital Warts, Pelvic Inflammatory Disease, Trichomonas, Crabs, or Other?” By asking specifically about each STD, the likelihood of getting a more honest response is apt to be better. Considerations such as these can improve the validity and reliability of participants’ responses.

Validity and Reliability of the Study Measures

Validity and reliability are two important considerations in terms of measurement. Validity is the degree to which an instrument measures what the researcher wants it to measure, and reliability is the extent to which that instrument will produce the same results when measuring the same entity (Windsor, 1994). There are four primary types of validity: Face validity, content validity, criterion validity, and construct validity. Face validity is the extent to which the instrument appears to be measuring what it is supposed to measure; content validity is the extent to which an instrument samples items from the full breadth of content desired; criterion validity is the extent to which an instrument correlates with another more accurate instrument; and construct validity is the extent to which the measure of concern correlates with other measures in predicted ways other than a criterion measure (Windsor, 1994). Reliability is most commonly measured by
using Cronbach’s alpha, an index of internal consistency that measures interitem 
correlation among all items in a scale, but it can also be measured using test-retest 
methods (Windsor, 1994). A discussion of the validity and reliability for each scale is 
discussed below.

**Exposure to negative portrayals of women in music videos.** Content validity for 
this domain was established by following a format presented by Professor Sut Jhally 
Video.” Reliability was measured during the formative evaluation stage of the study. 
The reliability coefficient (Cronbach’s alpha) at that time was 0.81. The reliability 
coefficient was be measured once again on the complete set of data for this scale.

**Personal influence of music videos.** Content validity was also established for this 
domain using information from the “DreamWorlds II” video (Jhally, 1991). During the 
formative evaluation stage, a reliability coefficient (Cronbach’s alpha) of 0.81 was 
produced. Reliability for this measure was assessed on the complete set of data for this 
variable.

**Reality of women in music videos.** One item was used to measure young 
women’s beliefs about the reality of women in music videos as compared with women in 
real life. This question was based on cultivation analysis, which is the study of how 
television contributes to viewers conceptions about social reality (Shanahan, 1999), as 
well as literature by Peterson and Peters (1983) which suggests that adolescents construct
reality partly based on selective televised images that are important to them (Peterson, 1983). The question’s face validity was assumed on the basis of these theories. Because this is a single-item measure, interitem reliability cannot be established (DeVellis, 1991).

**Sex role stereotyping (attitudes toward women scale for adolescents).** The Attitudes Toward Women Scale for Adolescents (Galambos, 1985) was developed based on the short form of the Attitudes Toward Women Scale (Spence, 1973). This scale was tested in four samples of adolescents. The authors reported that the hypotheses formulated to test construct validity were largely supported. Using internal consistency measures ($r = 0.72$) and test-retest stability methods, they found relatively high reliability for the measure. However, reliability assessed during the formative evaluation stage of this study yielded an internal consistency of 0.49. Reliability was measured on the complete set of data for this variable.

**Self-efficacy for condom use.** Developed by Brafford and Beck (1991), this was originally a 29-item scale to measure college students’ expectations of success in various aspects of condom use. Research showed the scale to be both convergently and discriminantly valid. The reliability for the intact scale was 0.91 for internal consistency and 0.81 for test-retest reliability. The investigators for the parent study chose four questions from this scale which assessed a woman’s self-efficacy for persuading her partner to use condoms, convincing a partner to use condoms, refusing sex if her partner chose not to use condoms, and suggesting condom use even if they had not been used in the past. These questions all involve communication/negotiation with a sexual partner.
Reliability assessed for the four-item domain during formative evaluation revealed a reliability coefficient of 0.80.

Finally, personal interviews were conducted with participants regarding their sexual behavior. Interviewers were public health and medical school students who were matched to the participant on gender and race. The student population yielded moderately high turn-over, and because of time constraints, interrater reliability was not assessed. The reliability and validity of the measures are an important consideration to the data analysis plan.

**Data Analysis**

This study hypothesized relationships between exposure to negative images of women in music videos and outcome variables such as number of lifetime partners, ever being pregnant, ever having an STD, condom use, sex-role stereotyping, self-efficacy for condom use, and perceived influence of music videos.

Descriptive statistics, correlation, regression, chi square, analysis of variance, and analysis of covariance are the statistical methods used to analyze the data collected in this study. Descriptive statistics describe samples of subjects in terms of variables or combination of variables (Tabachnick, 1996). Measures of central tendency include the mean, median, and mode, whereas measures of dispersion include the range and the standard deviation (Zar, 1984).

Correlation analysis is a measure of the size and direction of the relationship between two variables; it is the extent to which scores on two variables either go up together (positively correlate), or one goes up while the other goes down (negatively
correlate; Tabachnick, 1996). Correlation analysis is used when the two variables to be examined are both continuous.

Where correlation is used to measure the association between variables, regression is used to predict one variable from another (or several others); regression predicts a score on one variable from a score on the other (Tabachnick, 1996). Linear regression analysis is also used when the two variables to be examined are both continuous. Logistic regression is used when the dependent variable is dichotomous.

Analysis of variance (ANOVA) is used to compare two or more means to see if there are any significant differences between them (Tabachnick, 1996). This procedure compares the estimates of two variances—random or error variance and group differences or treatment effects plus error; if these two estimates of variance differ significantly, the null hypothesis stating that the means are the same is rejected (Tabachnick, 1996).

Chi square analysis examines the relationship between two discrete variables (Tabachnick, 1996). If the chi square value is small, the two variables are independent; however, if the chi square value is large, the two variables are related (Tabachnick, 1996). Analysis methods for each research question are discussed below.

Data Analysis for Research Questions

Research Question 1: What are the music video attitudes and viewing habits of this population (including frequency, most watched genres, channels accessed, norms while viewing, and listening and viewing similarities)?
Descriptive statistics were calculated for frequency, most watched genre, channels accessed, norms while viewing, and listening and viewing similarities. The measures of central tendency, the mean and standard deviation, median and range of the frequency, are reported in hrs/week for each genre. For all other measures, the frequency of each response was determined.

**Research Question 2:** How does this population rate their level of exposure to negative portrayals of women in music videos?

Descriptive statistics were reported for this measure. The mean and standard deviation, mode, median, and range are reported for each item.

**Research Question 3:** How does this group rate the level of personal influence (on dress and behavior around men) from women in music videos?

Descriptive statistics were also reported for this measure. The mean and standard deviation, mode, median, and range are reported for each item.

**Research Question 4:** Are there differences among girls whose music video preferences differ? The hypothesis was as follows: Girls whose preference is rap music videos will differ significantly from girls whose preference is rap and R&B music videos combined and from girls whose preference includes music video genres other than rap and R&B on the following characteristics: exposure to negative images of women in music videos, perceived personal influence of music videos, sex-role stereotyping, self-efficacy for condom use, rate of condom use in past 6 months.

For this research question, analysis of variance was used. The means for each characteristic listed were compared for significant differences across three preference groups: rap, rap and R&B combined, and other music videos. In this analysis, music
video preference was the independent variable. The five characteristics (exposure to negative images of women in music videos, perceived personal influence of music videos, sex-role stereotyping, self-efficacy for condom use, rate of condom use in past 6 months) are all dependent variables in this analysis.

**Research Question 5:** Is negative exposure to music videos correlated with any genre(s) of music video? The hypothesis was as follows: Negative exposure will have a strong positive correlation (reliability greater than .70) with (a) hrs/week of rap music videos watched, (b) hrs/week of R&B music videos watched, and (c) hrs/week of rock/pop music videos watched and negative exposure will have no correlation with (a) hrs/week of alternative music videos watched, (b) hrs/week of jazz music videos watched, (c) hrs/week of country music videos watched, and (d) hrs/week of gospel music videos watched.

Correlation analysis was used to measure the relationship between each music video genre (rap, R&B, alternative, jazz, country, gospel, and rock & pop) and the degree of exposure to negative portrayals of women in music videos. It was hypothesized that rap and R&B music videos will be highly correlated with exposure to negative portrayals.

**Research Question 6:** When age is controlled for, is self-reported exposure to negative images in music videos predictive of perceived personal influence of music videos, sex-role stereotyping, self-efficacy for condom use, rate of condom use, ever being pregnant, or ever having an STD? The hypothesis was as follows: Self-reported exposure to negative images in music videos will be predictive of perceived personal influence of music videos, sex-role stereotyping, self-efficacy for condom use, rate of
condom use in past 6 months, ever being pregnant, and ever having an STD, when adjusted for age.

Linear regression analysis was used to predict the strength and direction of the relationship between exposure to negative portrayals of women in music videos (independent variable) and the following dependent variables: perceived personal influence of music videos, sex-role stereotyping, self-efficacy for condom use, and rate of condom use. Logistic regression was used for the models containing the discrete dependent variables ever being pregnant and ever having an STD.

**Research Question 7:** When age is controlled for, is music video preference predictive of perceived personal influence of music videos, sex-role stereotyping, self-efficacy for condom use, rate of condom use, ever being pregnant, or ever having an STD? The hypothesis was as follows: Music videos preference will be predictive of perceived personal influence of music videos, sex-role stereotyping, self-efficacy for condom use, rate of condom use in past 6 months, ever being pregnant, and ever having an STD, when adjusted for age.

Regression analysis was used for this analysis, as well as logistic regression. Logistic regression was used for the models containing the discrete dependent variables ever being pregnant and ever having an STD. Regression was used for all other models, where preference for R&B music videos was the independent variable and the dependent variables were number of lifetime partners, rate of condom use, sex-role stereotyping, self-efficacy for condom use, and perceived personal influence of music videos.

**Research Question 8:** When age is controlled for, is there a difference in girls’ social construction of reality (i.e., reality of women in music videos versus women in
real life) depending on viewing frequency? The hypothesis was as follows: An increase in reported video frequencies will be associated with an increase in perceptions that women in music videos are like women in real life, when adjusted for age.

For this research question, regression analysis was used. The independent variable in this model was music video viewing frequencies, and the dependent variable is reality of women in music videos. An important consideration for the research questions presented here is that certain limitations are associated with this study. They are presented below.

Limitations

This study used correlational research methods that are designed to investigate the extent to which variations in one factor correspond with variations in one or more other factors on the basis of correlation coefficients (Isaac & Michael, 1995). Inherent limitations associated with this type of research should be acknowledged. Cross-sectional research of this kind identifies only "what goes with what" not necessarily cause-and-effect relationships, and it is less rigorous than experimental designs (Isaac, 1995). This type of research, however, is sometimes less difficult to conduct and is done often for exploratory and descriptive studies (Babbie, 1992).

Isaac and Michael (1995) listed several threats to the validity of research designs. Those that are relevant to this study include history, instrumentation, selection, restricted generalizability, and ambiguity about the direction of causality. Windsor, Baranowski, Clark and Cutter (1994) condensed the threats to validity into three main categories:
selection, history, and measurement. Limitations for this study are presented according to these overlapping categories.

History biases deal with exposure—frequency and duration of stimulus (Windsor et al., 1994). Isaac and Michael (1995) stated that history biases are events outside of treatment that can affect the dependent variable. Because the popularity of music changes over time, different genres of music (and thus music videos) could have been more popular at any given time. In addition, the increase in popularity of hip-hop music may have led to increased playing time on various channels. Also, a new radio station devoted to playing hip-hop and R&B began immediately before the study began (June 5, 1997). This may have attributed to an increase in the frequency of listening and video viewing.

According to Windsor and colleagues (1994), selection bias deals with the representativeness of the sample. Isaac and Michael (1995) referred to this as restricted generalizability. There were several aspects associated with the larger study which affect the validity of this substudy. The eligibility criteria created a selection bias. Only young women meeting the following criteria were invited to participate: (a) self-identify as African American, (b) between the ages of 14 and 18, and (c) be sexually active within the past 6 months. In terms of generalizability, this study is limited by the fact that it recruited only sexually active African American adolescent females between the ages of 14 and 18, and cannot be generalized to all adolescents. However, the need for further research among minorities, and particularly adolescent females with regard to HIV, has been well documented in the literature (Overby, 1994; Stanton, 1994; Wingood, 1992).
In this sense, the eligibility criteria also serve as a strength. Also, these data cannot be
generalized to nonsexually active young women.

Reliability and validity of measures is also a limitation for this study. In this study, the measurements used to assess music video viewing attitudes and behavior were
developed by the researcher and thus not established through thorough analysis as
reliable. In addition, several of the measurements that have been tested for reliability and
validity in the literature were not used intact. These scales were pared down in the
interest of time and age appropriateness.

Windsor and colleagues (1994) included instrumentation in measurement biases
that focus primarily on methods. Assessment methods included a paper and pencil
survey as well as a face-to-face personal interview. For this substudy, these biases
included the length and level of readability of the survey for adolescents, reliance on self-
report for sexual activity, recall bias for viewing activity, and difficulty in understanding
the instructions for completing items assessing viewing behavior for participants. Survey
administrators were on hand to provide explanation and guidance during the assessment
phase. They also reviewed each survey and sought out participants for more coherent
responses when necessary. According to Isaac and Michael (1995), instrumentation
biases refer to changes in instrumentation, raters, or observers. Interviewers underwent
training before conducting personal interviews; however, in the interest of time, inter-
rater reliability was not assessed. Also, differences in interviewer techniques and
responses may have led to nondisclosure of personal information or subjects providing
socially desirable responses. Finally, because many interviewers were students, there
was a moderate turn-over rate for interviewers.
As stated earlier, ambiguity about direction and causality is another limitation of this study. With studies conducted at one time point, it is difficult to infer the direction of causality (Isaac & Michael, 1995). Nevertheless, this study can provide valuable information about correlates of media exposure with a population that has not been exclusively examined in the past.

The following chapter presents the data analysis and results of the research questions listed in this chapter. A thorough discussion of the results can be found in Chapter 5.
CHAPTER 4

RESULTS

This chapter presents the findings of the study. It begins with a description of the sample and proceeds to address each research question presented in Methodology. Interpretation of the results is presented in the final chapter.

Sample Demographics

Eligibility criteria limited the sample to African American adolescent females between the ages of 14 and 18 who had been sexually active within the past 6 months. The sample included 522 young women. The average age was 15.98 ($SD = 1.23$). Twenty-eight percent of the sample was 16 years of age. Table 1 presents the percentage of responses for the ages reported.

Ninety-one percent of the participants were currently in school, and 24% had ever dropped out or been expelled from school. The largest percentage of adolescents were in the 9th, 10th, and 11th grade. Table 2 presents the percentage of responses for the highest grade completed.

Participants were also asked to report the person with whom they usually live. Fifty-eight percent lived with only their mother, and 22% lived in two-parent homes. Table 3 reports in percentages the participants' living arrangements.
Table 1. Age at Date of Survey

<table>
<thead>
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<th>Age</th>
<th>Frequency</th>
<th>%</th>
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<tbody>
<tr>
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<td>15</td>
<td>114</td>
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</tr>
<tr>
<td>19a</td>
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<td>0.2</td>
</tr>
<tr>
<td>Total</td>
<td>522</td>
<td>100</td>
</tr>
</tbody>
</table>

*One young woman was 18 when recruited into the study. Her birthday fell 4 days before the baseline assessment, making her 19 at the time of the survey.*

Table 2. Highest Grade Completed

<table>
<thead>
<tr>
<th>Highest grade completed</th>
<th>Frequency</th>
<th>%</th>
</tr>
</thead>
<tbody>
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<td>6</td>
<td>1</td>
<td>0.2</td>
</tr>
<tr>
<td>7</td>
<td>12</td>
<td>2.3</td>
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<tr>
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<td>88</td>
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<td>9</td>
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<tr>
<td>10</td>
<td>127</td>
<td>24.3</td>
</tr>
<tr>
<td>11</td>
<td>124</td>
<td>23.8</td>
</tr>
<tr>
<td>12 (graduated high school)</td>
<td>24</td>
<td>4.6</td>
</tr>
<tr>
<td>Total</td>
<td>522</td>
<td>100</td>
</tr>
</tbody>
</table>

Table 3. Participants' Living Arrangements

<table>
<thead>
<tr>
<th>Who do you usually live with?</th>
<th>Frequency</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alone, in own apartment</td>
<td>2</td>
<td>0.4</td>
</tr>
<tr>
<td>With father and mother</td>
<td>113</td>
<td>21.6</td>
</tr>
<tr>
<td>With mother only</td>
<td>300</td>
<td>57.5</td>
</tr>
<tr>
<td>With father only</td>
<td>8</td>
<td>1.5</td>
</tr>
<tr>
<td>With another relative</td>
<td>74</td>
<td>14.2</td>
</tr>
<tr>
<td>Other</td>
<td>18</td>
<td>3.4</td>
</tr>
<tr>
<td>Total</td>
<td>522</td>
<td>100</td>
</tr>
</tbody>
</table>
Treatment of the Data

The SPSS statistical package was used for data analysis. Data were screened for accuracy to identify obvious problems such as outliers and missing data. Missing data on viewing frequency were treated in the following ways. If the participant responded affirmatively to watching music videos of a particular genre but did not report the number of hours watched per day, the case was deleted. It was difficult to make a logical minimal estimate for this variable. (Only one case was deleted as a result of this condition.) If the participant responded affirmatively to watching music videos of a particular genre and also listed the number of hours watched per week but did not report the number of days watched per week, a conservative estimate of once a week was used to replace the missing data point. Missing values were replaced in this manner in 14 cases.

Outliers were also deleted. For example, cases where participants reported watching rap music videos “24/7” (24 hrs per day for 7 days a week) were deleted. Also, if any logical combination of viewing required the adolescent watch music videos for more than 12 hrs per day, they were also eliminated. Twelve hours was used as the cut-off point because a young woman who is not in school may be able to spend half a day watching music videos. Sixty-eight cases were deleted as outliers. A total of 68 cases were deleted leaving a sample size of 454 for analysis. A comparison of the 454 cases remaining and the 68 that were deleted follows.

Sample Comparisons

A chi square test of independence was calculated to compare the 68 cases that were deleted and the 454 cases remaining on the following variables: age, currently in
school, highest grade completed, drop-out or ever expelled from school, and living arrangements. No significant relationship was found for age ($\chi^2 = 2.858, p = .722$), currently in school ($\chi^2 = .425, p = .808$), highest grade completed ($\chi^2 = 1.811, p = .936$), drop-out or ever expelled ($\chi^2 = .090, p = .765$), or living arrangements ($\chi^2 = 4.918, p = .554$) in either sample. Therefore, the samples were not significantly different on variables that may have affected representativeness. The results of each research question are presented below.

**Music Video Viewing Habits**

Research Question 1 addressed the music video viewing habits of the sample. Specifically, it inquired about the viewing frequency, most watched genres, channels accessed, norms while viewing.

**Viewing frequency.** For each genre, a new variable was created to compute the number of hours watched per week on all 454 cases. This was done by multiplying the number of hours reported each day by the number of days reported each week. The viewing frequency was highest for rap and R&B music videos, respectively. The mean and standard deviation, as well as the median and the range are presented for each genre in Table 4.
Table 4. **Music Video Viewing According to Genre (Hours Watched per Week)**

<table>
<thead>
<tr>
<th>Genre</th>
<th>M</th>
<th>SD</th>
<th>median</th>
<th>range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alternative</td>
<td>.6652</td>
<td>2.9185</td>
<td>.00</td>
<td>30.00</td>
</tr>
<tr>
<td>Jazz</td>
<td>.3934</td>
<td>1.5741</td>
<td>.00</td>
<td>17.50</td>
</tr>
<tr>
<td>Country</td>
<td>.0993</td>
<td>.8118</td>
<td>.00</td>
<td>15.00</td>
</tr>
<tr>
<td>Rock/Pop</td>
<td>1.5053</td>
<td>4.5887</td>
<td>.00</td>
<td>35.00</td>
</tr>
<tr>
<td>R&amp;B</td>
<td>9.1390</td>
<td>9.7603</td>
<td>6.00</td>
<td>50.00</td>
</tr>
<tr>
<td>Gospel</td>
<td>3.5174</td>
<td>6.2882</td>
<td>1.00</td>
<td>35.00</td>
</tr>
<tr>
<td>Rap</td>
<td>14.5526</td>
<td>12.6678</td>
<td>10.00</td>
<td>63.00</td>
</tr>
</tbody>
</table>

**Most watched genres and access channels.** Very few young women reported ever watching country (4.2%), alternative (10.1%), jazz (12.8%), or rock/pop (19.2%). The most popular genres were rap, R&B, and gospel, in that order. Approximately 96.7% of the sample reported ever watching rap music videos during the week, and 80.4% reported ever watching R&B music videos. Sixty-one percent (61.5%) reported ever watching gospel music videos.

Participants were also asked to report which music video access channel they usually watched. Choices included BET, MTV, The BOX, and other. The largest percentage of young women watched one channel. Seventy-four percent usually watched music videos on BET, and 22% usually watched on The BOX. Only 3.5% usually watched music videos on MTV. Figure 2 presents the percentages of responses for each of the four categories.
Figure 2. Music video channels usually watched (percentages).

Norms While Viewing Music Videos

Young women reported usually watching music videos with brothers, sisters, or cousins (43.4%). Approximately 23.8% usually watched alone. Only 2% watched with a parent. Sixteen percent (15.9%) and 15.0% reported usually watching music videos with friends and boyfriends, respectively. A large majority of young women (82.4%) reported usually watching music videos at home. Table 5 presents the percentage of responses for each of the five possible categories of where music videos were usually watched.

Listening and Viewing Similarities

A five-point scale ranging from 0 (Never) to 5 (Always) was used to assess listening and viewing similarities. Participants were asked how often they listened to the same type of music as they watched music videos. Table 6 lists the frequency and percentage
of each response category. In addition, young women were asked to report what type of rap music they listened to most often. Examples of artists in each subgenre were included. Sixty-nine percent (68.5%) reported listening to gangsta rap music most often, with 15.6% and 11.9% reporting bass and hip-hop, respectively.

Table 5. Place Where Music Videos are Usually Watched

<table>
<thead>
<tr>
<th>Where do you usually watch music videos?</th>
<th>Frequency</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home</td>
<td>374</td>
<td>82.4</td>
</tr>
<tr>
<td>Home of boyfriend/someone you’re interested in</td>
<td>26</td>
<td>5.7</td>
</tr>
<tr>
<td>Relative's home</td>
<td>25</td>
<td>5.5</td>
</tr>
<tr>
<td>Friend's home</td>
<td>22</td>
<td>4.8</td>
</tr>
<tr>
<td>Other</td>
<td>3</td>
<td>0.7</td>
</tr>
<tr>
<td>MISSING</td>
<td>4</td>
<td>0.9</td>
</tr>
<tr>
<td></td>
<td>454</td>
<td>100</td>
</tr>
</tbody>
</table>

Note. Valid cases = 454, Missing cases = 4.

Table 6. Listening and Viewing Similarities

<table>
<thead>
<tr>
<th>How often do you listen to the same type of music as you watch on music videos?</th>
<th>Frequency</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>8</td>
<td>1.8</td>
</tr>
<tr>
<td>Rarely</td>
<td>36</td>
<td>7.9</td>
</tr>
<tr>
<td>Sometimes</td>
<td>93</td>
<td>20.5</td>
</tr>
<tr>
<td>Often</td>
<td>165</td>
<td>36.3</td>
</tr>
<tr>
<td>Always</td>
<td>151</td>
<td>33.3</td>
</tr>
<tr>
<td>MISSING</td>
<td>1</td>
<td>0.2</td>
</tr>
<tr>
<td></td>
<td>454</td>
<td>100</td>
</tr>
</tbody>
</table>

Note. Valid cases = 454, Missing cases = 1.

Exposure to Negative Portrayals of Women in Music Videos

Research Question 2 addressed self-reported exposure to negative portrayals of women in music videos. A measure to assess this exposure was created using six items
that asked how often participants observed a variety of negative depictions of women in music videos ($\% = .77$). Each individual item ranged from 0 (Never) to 5 (Always). Responses from each item were totaled to create the negative exposure measure. Thirty was the highest score that could be achieved. The mean score was 19.99 ($SD = 4.87$). The median for this measure was 20.00 (range = 25.00). The mode was also 20.00.

**Personal Influence of Music Videos**

Research Question 3 addressed the participants' self-reported level of behavioral influence of music videos. Like the negative exposure measure, the level of personal influence also was rated by this sample using items ranging from 0 (Never) to 5 (Always). These two items asked specifically about dress and behavior around men. Responses from each item were totaled to create the personal influence measure ($\% = .66$). Ten was the highest score that could be achieved for this domain. The mean score was 4.23 ($SD = 2.72$). The median for this measure was 4.00 (range = 10.00). The mode was also 4.00.

**Comparisons by Music Video Preference**

Research Question 4 addressed significant differences across three music video preference groups: preference for rap, or preference for rap and R&B combined, and preference for music video other than rap or R&B.

Preference for rap was determined according to the following statement. If the number of hours watched per week of rap music videos was greater than any other genre, then it was determined that the preference was rap.
Cases were coded as preference for rap and R&B if they met the following condition. If the number of hours watched per week of rap music videos was greater than hours per week of alternative, jazz, country, rock/pop, and gospel, but equal to the number of hours watched of R&B, then it was determined that the preference was rap and R&B.

All other cases were coded as preference for others. Cases in the category of preference for others where R&B hours per week were greater than all other genres were placed in the preference for rap and R&B group. This was true for 22 cases.

Analysis of variance was used to test for significant differences between the preference groups in regards to exposure to negative portrayals of women in music videos (NEGEXP), perceived personal influence of music videos (INFLUEN), sex-role stereotyping (SEXROLE), self-efficacy for condom use (EFFICACY), and rate of condom use (RATE). A significant difference between groups was found only for sex-role stereotyping. Generally, the hypothesis was not supported.

Negative exposure and music video preference. The means of the negative exposure scores were compared according to the three preference groups. The preference for rap and R&B combined had the highest mean negative exposure score, followed by preference for rap and preference for other, in that order. No significant difference was found ($F = .518, p = .596$). The negative exposure scores did not differ across groups (see Table 7).
**Perceived influence and music video preference.** Influence mean scores were compared across preference groups. The highest influence mean score was in the preference for rap group. The preference for rap and R&B combined group had the lowest mean score. No significant difference was found ($F = 2.29, p = .102$). The influence scores did not differ across groups (see Table 7).

**Sex-role stereotyping and music video preference.** Sex-role stereotyping mean scores were compared across the three preference groups. High scores indicate less traditional attitudes toward women. (For this sample, sex-role stereotyping had $\% = .53$.) A significant difference was found among the groups ($F = 4.325, p = .014$). Tukey’s Honestly Significantly Different (HSD) was used to determine the nature of the group differences. This analysis revealed that adolescent in the preference for rap group ($M = 20.84, SD = 4.75$) scored significantly higher ($p = .012$) than adolescents in the rap and R&B combined group ($M = 19.23, SD = 4.33$). Adolescents in the preference for the other group ($M = 20.01, SD = 4.36$) were not significantly different from either of the other two groups (see Table 7).

**Self-efficacy for condom use and music video preference.** The mean scores for self-efficacy of condom use were compared across preference groups. The mean score preference for rap was slightly higher than the mean score for preference for the rap and R&B combined group. Preference for other was lowest. No significant difference was found ($F = .598, p = .550$). The self-efficacy scores did not differ significantly across groups (see Table 7).
Rate of condom use and music video preference. The mean rates of condom use were compared across the three preference groups. Adolescents in the preference for other had the highest mean rate of condom use, followed by young women in the preference for rap and R&B combined and lastly girls in the preference for rap group. No significant difference between the groups was found ($F = .186, p = .830$) (see Table 7).

Table 7. Analysis of Variance for Music Video Preference

<table>
<thead>
<tr>
<th>Source</th>
<th>M (SD)</th>
<th>Rap (n=211)</th>
<th>Rap and R&amp;B (n=94)</th>
<th>Other (n=149)</th>
<th>F</th>
</tr>
</thead>
<tbody>
<tr>
<td>NEGEXP</td>
<td></td>
<td>20.02 (4.57)</td>
<td>20.35 (5.15)</td>
<td>19.70 (5.10)</td>
<td>.518</td>
</tr>
<tr>
<td>INFLUEN</td>
<td></td>
<td>4.52 (2.61)</td>
<td>3.91 (2.78)</td>
<td>4.02 (2.82)</td>
<td>2.290</td>
</tr>
<tr>
<td>SEXROLE</td>
<td></td>
<td>20.84 (4.75)</td>
<td>19.23 (4.33)</td>
<td>20.01 (4.36)</td>
<td>4.325*</td>
</tr>
<tr>
<td>EFFICACY</td>
<td></td>
<td>14.30 (2.22)</td>
<td>14.22 (2.11)</td>
<td>14.04 (2.30)</td>
<td>.598</td>
</tr>
<tr>
<td>RATE</td>
<td>.71 (.38)</td>
<td>.72 (.36)</td>
<td>.74 (.39)</td>
<td></td>
<td>.186</td>
</tr>
</tbody>
</table>

* p value = .014

Note: NEGEXP = Exposure to Negative Portrayals of Women in Music Videos; INFLUEN = Perceived Personal Influence of Music Videos; SEXROLE = Sex-Role Stereotyping; EFFICACY = Self-Efficacy for Condom Use (Communication); DATE = Rate of Condom Use.
Viewing Frequency by Genre and Negative Exposure in Music Videos

Research Question 5 addressed a strong positive correlation between negative exposure and (a) hrs/week of rap music videos watched, (b) hrs/week of R&B music videos watched, and (c) hrs/week of rock/pop music videos watched. No correlation was hypothesized for the relationship between negative exposure and (a) hrs/week of alternative music videos watched, (b) hrs/week of jazz music videos watched, (c) hrs/week of country music videos watched, and (d) hrs/week of gospel music videos watched. The latter hypothesis associated with this question was supported. More detailed results are presented below (See Table 8).

Negative exposure and rap music video viewing. A Pearson correlation coefficient was calculated for the relationship between negative exposure and hrs/week of rap music videos watched. A weak positive correlation that was not significant was found ($r = .084, p = .073$). Negative exposure and rap music video viewing are not related.

Negative exposure and R&B music video viewing. A Pearson correlation coefficient was calculated for the relationship between negative exposure and hrs/week of R&B music videos watched. A weak positive correlation was found ($r = .105, p = .025$). This relationship was significant, but weak. Negative exposure and R&B music video viewing are related.

Negative exposure and rock/pop music video viewing. A Pearson correlation coefficient was calculated for the relationship between negative exposure and hours/week
of rock/pop music videos watched. A weak negative correlation that was not significant was found ($r = -.030, p = .526$). Negative exposure and rock/pop music video viewing are not related.

**Negative exposure and alternative music video viewing.** A Pearson correlation coefficient was calculated for the relationship between negative exposure and hours/week of alternative music videos watched. A weak positive correlation that was not significant was found ($r = .090, p = .056$). Negative exposure and alternative music video viewing are not related.

**Negative exposure and jazz music video viewing.** A Pearson correlation coefficient was calculated for the relationship between negative exposure and hours/week of jazz music videos watched. A weak positive correlation that was not significant was found ($r = .030, p = .526$). Negative exposure and jazz music video viewing are not related.

**Negative exposure and country music video viewing.** A Pearson correlation coefficient was calculated for the relationship between negative exposure and hours/week of country music videos watched. A weak positive correlation that was not significant was found ($r = .036, p = .443$). Negative exposure and country music video viewing are not related.
**Negative exposure and gospel music video viewing.** A Pearson correlation was coefficient calculated for the relationship between negative exposure and hours/week of gospel music videos watched. A weak positive correlation that was not significant was found ($r = .031, p = .508$). Negative exposure and gospel music video viewing are not related.

<table>
<thead>
<tr>
<th>Genre</th>
<th>$r$</th>
<th>$p$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alternative</td>
<td>.090</td>
<td>.056</td>
</tr>
<tr>
<td>Jazz</td>
<td>.030</td>
<td>.526</td>
</tr>
<tr>
<td>Country</td>
<td>.036</td>
<td>.443</td>
</tr>
<tr>
<td>Rock/Pop</td>
<td>-.030</td>
<td>.526</td>
</tr>
<tr>
<td>Gospel</td>
<td>.031</td>
<td>.508</td>
</tr>
<tr>
<td>Rap</td>
<td>.084</td>
<td>.073</td>
</tr>
<tr>
<td>R&amp;B</td>
<td>.105</td>
<td>.025*</td>
</tr>
</tbody>
</table>

*$p = .05$

**Negative Exposure and Research Outcomes**

Research Question 6 addressed a predictive relationship between exposure to negative portrayals of women in music videos (NEGEXP) and the following research outcomes: perceived personal influence of music videos (INFLUEN), sex-role stereotyping (SEXROLE), self-efficacy for condom use (EFFICACY), rate of condom use (RATE), ever being pregnant (EVERPREG), and ever having a sexually transmitted disease (EVERSTD). In each analysis, these variables were adjusted for age. Negative exposure was found to be a significant predictor only for perceived personal influence and self-efficacy for condom use exposure; therefore, the hypothesis was partially supported.
Negative exposure and perceived personal influence. A multiple linear regression was calculated to determine whether negative exposure predicted influence of music videos when adjusted for age. A significant regression equation was found \((F = 11.671, \ p < .001)\), with an \(R^2\) of .049. The following regression equation was found:

\[
\text{INFLUEN} = 3.620 + 0.125 \text{(NEGEXP)} - 0.118 \text{(AGE)}.
\]

Level of influence increased by 0.125 for every unit increase in negative exposure, when age is adjusted. Negative exposure was a significant predictor of level of influence \((p < .001)\) (See Table 9).

Table 9. Multiple Regression Analysis of Negative Exposure and Age on INFLUENCE

<table>
<thead>
<tr>
<th>Independent variable</th>
<th>B</th>
<th>t</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Negative Exposure</td>
<td>.125</td>
<td>4.808</td>
<td>&lt;.001</td>
</tr>
<tr>
<td>Age</td>
<td>-.118</td>
<td>-1.145</td>
<td>.253</td>
</tr>
</tbody>
</table>

Note. \(*p < .001, R^2 = .049, F = 11.671*\)

Negative exposure and sex-role stereotyping. A multiple linear regression was calculated to determine whether negative exposure predicted sex-role stereotyping scores when adjusted for age. The regression equation was not significant \((F = .956, p = .385)\) with an \(R^2 = .004\). Negative exposure, adjusted for age, was not a significant predictor of sex-role stereotyping (attitudes toward women).

Negative exposure and self-efficacy for condom use. A multiple linear regression was calculated to determine whether negative exposure predicted self-efficacy for condom use when adjusted for age. The regression equation was found to be significant \((F =\)
86

4.294, \( p = .014 \), with an \( R^2 \) of .019. The following regression equation was found:

\[ \text{EFFICACY} = 15.210 + 0.006 \text{(NEGEXP)} - 0.135 \text{(AGE)}. \]

Self-efficacy for condom use increased by 0.006 for every unit increase in negative exposure, when adjusted for age. Negative exposure, adjusted for age, was a significant predictor of self-efficacy for condom use (\( p = .008 \)) (See Table 10).

<table>
<thead>
<tr>
<th>Independent variable</th>
<th>B</th>
<th>t</th>
<th>p value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Negative exposure</td>
<td>.006</td>
<td>2.665</td>
<td>.008</td>
</tr>
<tr>
<td>Age</td>
<td>-.135</td>
<td>-1.580</td>
<td>.115</td>
</tr>
</tbody>
</table>

\( R^2 = .019, F = 4.294^* \)

\(^*p = .014.\)

**Negative exposure and rate of condom use.** A multiple linear regression was calculated to determine whether negative exposure predicted the rate of condom use when adjusted for age. A significant regression equation was found (\( F = 4.418, p = .013 \)), with an \( R^2 \) of .019. The following regression equation was found:

\[ \text{RATE} = 1.418 - 0.001 \text{(NEGEXP)} - 0.042 \text{(AGE)}. \]

Rate of condom use decreased by 0.001 for every unit increase in negative exposure, when adjusted for age. In this regression equation, age was a significant predictor of rate of condom use, but negative exposure was not.
**Negative exposure and ever being pregnant.** Logistic regression was performed on the variable ever being pregnant as an outcome with negative exposure as a predictor and age as a covariate. Results indicated that for every unit increase in negative exposure, the odds of ever being pregnant increased 1.012. However, according to the Wald criterion, negative exposure did not predict ever being pregnant (p = .556).

**Negative exposure and ever having an STD.** Logistic regression was performed on the outcome variable ever having an STD with negative exposure as a predictor and age as a covariate. Results indicated that for every unit increase in negative exposure, the odds of ever having an STD increased 1.038. However, according to the Wald criterion, negative exposure did not predict ever having an STD (p = .106).

**Age-Adjusted Music Video Preference and Research Outcomes**

Research Question 7 addressed a predictive relationship between music video preference (PREFRAP = preference for rap vs. others; PREFRAB = preference for R&B vs. others) and the following research outcomes: perceived personal influence of music videos (INFLUEN), sex-role stereotyping (SEXROLE), self-efficacy for condom use (EFFICACY), rate of condom use (RATE), ever being pregnant (EVERPREG), and ever having a sexually transmitted disease (EVERSTD). Dummy variables were used to create two new preference variables (PREFRAP and PREFRAB). Both these variables were entered into the regression equation with age as a covariate in each analysis. With the exception of preference for rap vs. others significantly predicting ever being pregnant, this hypothesis was not supported.
**Music video preference and perceived personal influence.** A multiple linear regression was calculated to predict perceived personal influence based on music video preference while adjusting for age. The regression equation was not significant ($F = 1.542$, $p = .203$) with an $R^2 = .010$. When adjusted for age, adolescents in the preference for rap group and the preference for rap and R&B group were not significantly different from the preference for other group.

**Music video preference and sex-role stereotyping.** A multiple linear regression was calculated to determine whether music video preference predicted sex-role stereotyping when adjusted for age. The regression equation was found to be significant ($F = 2.966$, $p = .032$), with an $R^2$ of .019. The following regression equation was found:

$$\text{SEXROLE} = 21.448 + .817(\text{PREFX}_1) - .764 (\text{PREFX}_2) - .090(\text{AGE}).$$

Although the regression equation was found to be significant, when adjusted for age, adolescents in the preference for rap group and the preference for rap and R&B group were not significantly different from the preference for other group.

**Music video preference and self-efficacy for condom use.** A multiple linear regression was calculated to determine whether music video preference predicted adolescents’ self-efficacy for condom use when adjusted for age. The regression equation was not significant ($F = .818$, $p = .485$) with an $R^2 = .005$. When age is adjusted, adolescents in the preference for rap group and the preference for rap and R&B group are not significantly different from the preference for other group.
**Music video preference and rate of condom use.** A multiple linear regression was calculated to determine whether music video preference predicted the rate of condom use when adjusted for age. The regression equation was found to be significant ($F = 3.354, p = .019$), with an $R^2$ of .022. The following regression equation was found:

$$\text{RATE} = 1.459 - .028(\text{PREFIX}_1) - .013 (\text{PREFIX}_2) - .045(\text{AGE}).$$

Although the regression equation was found to be significant, when adjusted for age, adolescents in the preference for rap, group and the preference for rap and R&B group were not significantly different from the preference for other group.

**Music video preference and ever being pregnant.** Logistic regression was performed on the outcome variable ever being pregnant, with music video preference as predictors and age as a covariate. Results indicate that preference for rap vs others was significant ($p = .037$), whereas preference for rap and R&B vs others was not a significant predictor of ever having been pregnant ($p = .509$). Those who preferred rap music videos had 1.6 (95% Confidence Interval = 1.030-2.559) higher odds of ever being pregnant than those whose preference was something other. Age was also significant predictor of ever having been pregnant.

**Music video preference and ever having an STD.** Logistic regression was performed on the outcome variable ever having an STD, with music video preference as predictors and age as a covariate. Results indicated that neither preference for rap vs. others ($p = .989$) nor preference for rap and R&B vs. others was a significant predictor of
ever having an STD ($p = .519$). Age was a significant predictor of ever having an STD ($p = .004$).

**Viewing Frequency and Reality of Women in Music Videos**

Research Question 8 addressed that adolescents reporting higher music video viewing frequencies would be more likely to report that women in music videos are like women in real life. The variables for this analysis included total music video viewing per week (TOTALWK) and one question addressing the reality of women in music videos (REALITY). TOTALWK was calculated for each case by totaling music video viewing of all genres. REALITY was measured using a 5-point scale ranging from 0 (Never) to 5 (Always). The hypothesized relationship was not supported with this analysis.

A multiple linear regression was calculated to predict perceived reality of women in music videos based on total viewing per week, while adjusting for age. The regression equation was not significant ($F = 1.464, p = .232$) with an $R^2 = .006$. Total viewing per week (TOTALWK), adjusted for age, was not a significant predictor of reality of women in music videos (REALITY).

**Conclusion**

The descriptive data presented in this chapter provide insight about music video consumption by a group that has not previously been studied in detail. The results from this study are generally not supportive of the research hypotheses made; however, they do also provide insight about the relationship of music video consumption to behavioral outcomes within this group. Chapter 5 presents an overview of the significant findings and
an examination of findings nonsupportive of the research hypotheses. Possible explanations are also presented.
CHAPTER 5
DISCUSSION

There is limited research examining the effects of music videos on adolescent sexual risk behavior. There is even less research specific to African American female adolescents. Considering the amount of high-risk behavior exhibited by this group, knowledge of factors that may contribute to this behavior is important. This study examined the relationship between music video viewing and sexual risk-related outcomes. Findings are discussed in this chapter, as well as possible explanations for the findings. Recommendations and implications are also presented. This research can serve to increase awareness of music videos as a potential behavioral influence and possibly lead to the institution of policies that advise about music video content.

Conclusions from Data Analysis

Eight questions were used to guide this research. Findings and possible explanations are discussed for each research question.

Music Video Viewing Habits

The most popular music video genres reported by this sample were rap and R&B, with an average viewing of 14.6 and 9.1 hrs per week, respectively. Young women also reported watching gospel music videos an average of 3.5 hrs per week. Because viewing by genre was not mutually exclusive, the average for total hours per week of
music video viewing is much higher. This average was 29.9 hrs per week, indicating a very high amount of music video viewing by this sample.

Additionally, this sample also reported that BET is the primary choice to access music videos (74%). BET airs the types of music videos most popular with this group (rap, R&B, and gospel). Twenty-two percent reported The Box as their primary music video access channel. The Box is a public access channel on which viewers can call in to request the types of music videos they would like to see. In terms of programming, The Box tends to be more lax than BET, and its content should be examined in comparison with other music video access channels.

Young women in this sample usually watched music videos with their brothers, sisters, or cousins (43.4%). This is not surprising since music is considered to be such a socializing agent, particularly with youth. Only 2% of girls usually watched music videos with their daughters. This small percentage is indicative that parents may not be aware of the content of music videos. Parents should as much as possible guide the viewing of this medium and discuss the content with their children. Although adolescents may not readily discuss music video content, it is important that parents attempt to better understand the content of music videos and how it may influence adolescent behavior.

Seventy percent also listen to the same genre of music as they watch music videos. For the most part, then, the images on television in music videos and the lyrics of the songs provide reinforcement to each other. Additionally, adolescents who watched rap music videos were asked to report which type of rap music they listened to most often. Sixty-nine percent reported listening to gangsta rap music most often. This type
of rap music has been highly criticized for its violent and misogynistic content. This is quite a concern since most of the sample listen to this type of rap music. Although gangsta rap has received a great deal of criticism, bass music contains high sexual content and may exceed gangsta rap in its level of misogyny. Further examination of the sub-genres of rap is suggested.

The descriptive data presented in this study on African American adolescent females present a first look at the music video viewing habits specific to this population. This information should not be overlooked by health professionals concerned about possible media influences on adolescents.

**Exposure to Negative Portrayals of Women in Music Videos**

The average score for the measure created to assess self-reported exposure to negative portrayals of women showed a mean of 19.99. Since the highest possible score for this domain is 30, the mean indicates a relatively high degree of perceived negative exposure in music videos. For example, 21% reported that women in music videos are always portrayed as sex objects. These data suggest that adolescents are exposed to a high degree of negative images of women in music videos. For this group, the music videos watched may often provide a source for traditional models of femininity, for example, women portrayed as sex objects or women being controlled by men. A more detailed negative exposure scale should be developed and rigorously tested to better capture perceived music video content.
Personal Influence of Music Videos

The average personal influence score for this sample was 4.2, with a maximum score of 10. Only two items were used to assess influence. These questions asked, “How often do women in music videos influence the way you dress?” and “how often do women in music videos influence the way you behave around men?” The mean score indicates that this sample perceives a moderate level of personal influence from music videos on these two behavioral aspects. Of concern with this concept, however, is the fact that the type of behavior (i.e., negative vs. positive) could not be assessed. For example, some images in music videos may reinforce positive behavior (i.e., confident, assertive communication) around men. In this case a young woman would report that her behavior around men is always influenced by women in music videos. The development of a broader scale that is capable of assessing both positive and negative types of influences is recommended.

Comparisons by Music Video Preference

Music video genres differ in the same way that music genres do. Criticism of certain musical genres, for example, rap, also carries over to music videos. Music video preferences were identified to examine differences in risk-related behavior across groups. The three groups included preference for rap, preference for rap and R&B, and preference for music videos other than rap and R&B. (A preference for R&B alone was not identified because few adolescent reported watching only R&B. Usually, rap and R&B music videos were watched in combination.) Preference for indicates only what
type of music video adolescents watched most often. It did not exclude other genres. A discussion of the findings for each group follows.

**Negative exposure and music video preference.** Negative exposure was highest for the preference for rap and R&B combined group, followed by the preference for rap group. Although the content of rap music videos has been described as very misogynistic, R&B music videos also contain similar images of women, but are, to a degree, less harsh. For example, women in R&B music videos are also presented as sex objects, but the objectification appears less blatant. This may explain the higher negative exposure associated with rap and R&B combined. If these two types of videos were watched in combination, it would seem that negative exposure would increase. Although the negative exposure scores provide logical support for this idea, the scores did not differ significantly across groups.

**Perceived influence and music video preference.** The highest influence was seen in the preference for rap group, followed by the preference for other and preference for rap and R&B combined groups. As stated earlier, the direction of the influence was not assessed, and this may explain the nature of the group differences. If rap and R&B combined creates a stronger stimulus, then the level of influence in this group would be expected to be higher. Influence in the preference for other group may be positive as opposed to negative, accounting for the influence score being higher than for preference for rap. Despite this explanation, the differences were not significant across groups.
Sex-role stereotyping and music video preference. Significant differences were found among groups for sex-role stereotyping. A higher sex-role stereotyping score indicates less traditional attitudes toward women. Adolescents in the preference for rap group scored significantly higher than adolescents in the preference for rap and R&B combined group. The assertive nature of rap music may account for the less traditional attitudes in young women who prefer rap music videos to rap and R&B combined. R&B music videos are less assertive and may “romanticize” male-female relationships more, possibly leading to more traditional attitudes toward women. The preference for other group did not differ significantly from either of the other two groups. An important consideration is the fact that preference for other does not exclude a young woman from watching rap or R&B music videos. This may partially explain the nonsignificant findings.

Self-efficacy for condom use and music video preference. The mean for self-efficacy for condom use was highest in the preference for rap group (M = 14.30), followed by the preference for rap and R&B group (M = 14.22), and the preference for other group (M = 14.04). The maximum for this score was 16, indicating a high degree of self-efficacy within this group. The assertive nature of rap music may account for the higher mean score in the preference for rap group. Another consideration may be the attitude of invincibility usually held by adolescents. Further, African American adolescent females have more confidence than other young women their age (Edwards, 1998). Adolescents may be highly confident about their ability to negotiate condom use with their partners, but this does not always lead to protective sexual behavior.
Bandura (1997) lists eight reasons why high self-efficacy may not translate into performance of a behavior. Those that may explain the discordance between high self-efficacy for condom use and protective behavior in this sample include limited scope of the self-efficacy assessment, ambiguity about task demands, temporal disparities, consequences of misjudgment, and disincentives and performance constraints (Bandura, 1997). Each of these is discussed below in terms of how it might be applicable to this study.

Limited scope of the self-efficacy assessment describes a situation in which the self-efficacy measure does not include all aspects of self-efficacy needed to perform the behavior. In this study, the only measure of self-efficacy was that for condom use (communication). Other aspects such as self-efficacy to obtain or carry condoms, for example, were not measured. Ambiguity of task demands means that individual are not fully aware of the intricacies involved in the behavior and may therefore over- or under-estimate their self-efficacy. In this study, adolescents may not have fully understood what was necessary to practice safer sexual behavior and overestimated their self-efficacy to do so. Temporal disparities describes the discordance that may arise because of a lapse in time from measurement of self-efficacy and the performance of the behavior. In this study, girls may be confident about their ability to communicate condom use, but this confidence may waver as the behavior becomes more imminent. Consequences of misjudgment describe instances where the individual is concerned about what others think about them, more so than they are concerned about a behavior they deem inconsequential or far off in the future. In this study, adolescents may have been concerned about how they were perceived by the interviewers. Although interviewers
were matched on gender and race, adolescents may have provided socially desirable responses. Disincentives and performance constraints describe situations in which individuals know how to perform the behavior, but chooses not to because they have no incentive to do so. For adolescents in this study, they may know what to do and how to practice safer sexual behavior, but believe they have no incentives to do so. The disincentives of reduced pleasure and implied partner mistrust may outweigh the incentive of absence of disease or pregnancy. Performance constraints would apply if adolescents were not able to obtain condoms. In this way the behavior is impeded because the necessary tools to perform the behavior are absent. These reasons may provide some explanation for the discordance between self-efficacy for condom use (communication) and self-protective behavior.

Rate of condom use and music video preference. There were no significant differences between music videos preference groups for the rate of condom use. The rate of condom use was highest in young women in the preference for other group, followed by the preference for rap and R&B group. These data may suggest that adolescents preferring other music videos are not influenced to engage in this type of sexual risk behavior to the same degree as adolescents preferring rap or rap and R&B.

Viewing Frequency by Genre and Negative Exposure in Music Videos

Generally, the hypotheses suggesting a relationship between viewing frequency by genre and negative exposure were not supported. Alternative, jazz, country, and gospel all had a nonsignificant, positive, weak correlation with negative exposure.
Rock/pop was the only genre showing a negative relationship, in which negative exposure decreases as hours per week of viewing increases. This relationship, however, was also nonsignificant. Both rap and R&B had a weak positive correlation with negative exposure. This relationship was significant for R&B and approached significance for rap. Logical assumptions about rap and R&B music videos being positively associated with negative exposure appear to be very minimally supported compared with the associations exhibited by the other genres; for example, R&B had a slightly higher reliability coefficient than rap. However, since the sample size is large and the reliability coefficients are low, we cannot conclude with certainty that reliability is due solely to the nature of the relationships of the variables. Although the coefficients are small, they may support theoretical assumptions and subsequent research (Kerlinger, 1986).

**Negative Exposure and Research Outcomes**

The foundation of this research is the widely held belief that exposure to negative images can influence adolescents to engage in risky behavior. Based on this, a predictive relationship was hypothesized between perceived exposure to negative portrayals of women in music videos and several individual sexual risk-related outcomes. Each is discussed below.

Perceived exposure to negative portrayals of women in music videos, when adjusted for age, was found to be a significant predictor of perceived personal influence from women in music videos. As negative exposure increases, the level of perceived influence for adolescents also increases. An important consideration is that perceived
influence by adolescents may be an underestimate of actual influence. This finding is an important one, because it provides support for the belief that negative images in music videos influence youth. However, the findings are significant. A broader, more refined instrument to measure influence may provide a clearer picture of the relationship.

Negative exposure, when adjusted for age, was also found to be a significant predictor of self-efficacy for condom use. As negative exposure increases, self-efficacy for condom use increases. Explanations that may account for this relationship include the fact that African American adolescents are confident by nature. Here again, the assertiveness associated with rap music videos may also account for this relationship. Further analysis is needed to determine whether this relationship truly exists within this population and the factors that may account for it.

Negative exposure, adjusted for age, was not a significant predictor of sex-role stereotyping. It may seem logical to theorize that negative exposure would be associated with sex-role stereotyping, where exposure to greater negative images leads to more traditional attitudes toward women (lower sex-role stereotyping scores). Correlational analysis of negative exposure and sex-role stereotyping yielded a negative correlation coefficient, suggesting an inverse relationship between these variables and supporting the above assumption. Analysis revealed that the preference for rap group had a significantly higher sex-role stereotyping score than the preference for rap and R&B group, meaning that adolescents in the latter category had less traditional attitudes toward women. Earlier analysis also found a greater negative exposure mean for the preference for rap and R&B group. R&B viewing was also the only genre significant in its association with negative exposure. As stated previously, R&B music videos may tend to romanticize male-female
relationships and provide more traditional images of women. This would support the idea that negative exposure is inversely related to sex-role stereotyping.

Negative exposure, adjusted for age, also was not a significant predictor of the rate of condom use. Although not a significant predictor, negative exposure was inversely correlated with the rate of condom use. Analysis revealed a significant regression equation; however, negative exposure as a predictor was not found to be significant. If this relationship were a significant one, a mediating variable would be hypothesized. For example, the relationship of negative exposure to condom use might differ according to a person's attitudes toward women's sex roles. Adolescents who hold more traditional attitudes may be less likely to use condoms after negative exposure, but adolescents with less traditional attitudes may not be as influenced by negative exposure. Further research in the form of path analysis is suggested.

Finally, negative exposure, adjusted for age, was not a significant predictor for ever being pregnant or ever having an STD. The goal of this analysis was to tie negative exposure to a defined sexual risk behavior outcome; however, relating current exposure with past behavioral outcomes is not the recommended way of measuring this type of relationship. Future analysis should assess concurrent behavioral outcomes.

Music Video Preference and Research Outcomes

When adjusted for age, music video preference was not predictive of perceived personal influence, sex-role stereotyping, self-efficacy for condom use, rate of condom use, or ever having an STD. Preference for rap vs. other significantly predicted ever being pregnant. As a marker for risk behavior, ever being pregnant suggests that a
preference for rap over other genres predicts whether a young woman has ever been pregnant. Ever being pregnant, however, does not measure current risk behavior. A more appropriate measure is current or future pregnancy. Since pregnant adolescents are not concerned about getting pregnant again, they may not engage in protected sex. In addition, measures of current or future STD would also be a better way to assess this. Future outcomes would require a longitudinal design.

Viewing Frequency and Reality of Women in Music Videos

According to cultivation theory, media images influence people’s perceptions of reality. This concept was tested by examining the relationship between total music video viewing and the REALITY variable (how often women in music videos are like women in real life). Total viewing per week, adjusted for age, is not a significant predictor of REALITY scores in this sample. Total viewing does not predict how often adolescents think women in music videos are like women in real life. Research suggests that adolescents attend to certain images on television and use these images to construct a social reality. On this basis, the viewing of specific music video genres would be expected to predict the reality variable. A linear regression was calculated to predict the reality variable based on hours of rap music videos viewed per week. Hours of rap music videos viewed per week was found to be a significant predictor of the reality variable. This finding suggests that adolescents construct reality partly from rap music videos. A need for further research is substantiated, where cultivation is examined in relation to influence, negative exposure, sex-role stereotyping, self-efficacy for condom use, and rate of condom use.
Conclusions and Recommendations

It is believed that traditional images of women in passive or submissive roles influence like behavior and indirectly put young women at risk because of their inability to assertively communicate about sexual matters with their partner. Although rap music and music videos are often highly criticized, this research found that rap music videos are associated with less traditional images of women. In light of this, less traditional attitudes would seem to support assertive behavior. However, there is a recognized “new feminism” associated with rap music and rap music videos that promotes risky sexual behavior, promiscuity, materialism, drug use, and violence. Female rappers whose lyrical and music video content contain the images above seem to exude a generally unacknowledged vulnerability that is shrouded in false feminism. Further research should be done to assess the role of women as portrayed in music videos.

Another important conclusion of this research is that R&B music videos are related to negative exposure to a greater degree than rap music videos. This highlights a need to focus on the potential effects of R&B music videos in addition to rap music videos. Content analysis of each should be done to compare the similarities of each genre.

Also of importance is the predictive relationship between negative exposure and perceived influence. These data support the widely held belief that negative images in music videos influence behavior. This analysis should be repeated using more refined measures in other adolescent samples. A stronger relationship may be found.

The predictive relationship between negative exposure and self-efficacy for condom use is difficult to explain. This relationship may suggest that adults do not give
adolescents enough credit to decipher good and bad music videos. Perhaps the young women in this sample compare themselves to the negative feminine portrayals and experience an increase in self-esteem and confidence. Further research should be done to substantiate, clarify, or refute this idea.

The only behavioral outcome to be significantly related to any predictor variable was ever being pregnant. Preference for rap vs. other music videos was a significant predictor of ever having been pregnant. Because of the cross-sectional nature of this study, the outcome variable (being pregnant) may have long since preceded music video viewing. As such, it is not the most accurate way to assess the relationship. A follow-up logistic regression analysis predicting current pregnancy based on preference found no relationship. More appropriate behavioral outcome measures are suggested.

Limitations

Limitations associated with this study must also be considered. Over the course of the study, different types of music and music videos may have been more popular than others. Also, a new radio station devoted to playing rap (hip-hop) and R&B began 6 months before the study began. This may have led to an increase in music listening and music video viewing. Also, the data from this study cannot be generalized because of the strict eligibility criteria.

Limitations associated with measurement include the length and level of readability of the survey, reliance on self-report for sexual activity and viewing, recall bias for sexual activity and video viewing, and difficulty in understanding the instructions for completing items assessing viewing behavior. Participants may have also provided
socially desirable answers about their sexual behavior during the face-to-face interviews. Also, when assessing viewing behavior by genre, it was difficult to disentangle the specific genres because adolescents usually reported watching more than one. Finally, the ambiguity about direction and causality that is associated with cross-sectional designs makes it difficult to draw causal inferences.

Future Directions

Although relevant results have been found, this research has also created additional research questions. Further analysis will include content analysis of music videos to assess feminine roles, comparisons of different music video channel programming, examination of content differences in rap and R&B music videos, and a possible examination of the subgenres of rap music. Another analysis will be to revamp and test the negative exposure and perceived influence measures. Finally, a path analysis is suggested. With more refined research methods and techniques, the findings should fill the gap in present literature on music videos and sexual risk behavior.
LIST OF REFERENCES


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APPENDIX A

INSTITUTIONAL REVIEW BOARD (IRB) APPROVAL FORM
Protection of Human Subjects
Assurance Identification/Certification/Declaration
(Common Federal Rule)

POLICY: Research activities involving human subjects may not be conducted or supported by the Departments and Agencies adopting the Common Rule (56FR25003, June 18, 1991) unless the activities are exempt from or approved in accordance with the common rule. See Section 101(b) the common rule for exemptions. Institutions submitting applications or proposals for support must submit certification of appropriate Institutional Review Board (IRB) review and approval to the Department or Agency in accordance with the common rule.

Institutions with an assurance of compliance that covers the research to be conducted on file with the Department, Agency, or the Department of Health and Human Services (HHS) should submit certification of IRB review and approval with each application or proposal unless otherwise advised by the Department or Agency. Institutions which do not have such an assurance must submit an assurance and certification of IRB review and approval within 30 days of a written request from the Department or Agency.

<table>
<thead>
<tr>
<th>Request Type</th>
<th>Type of Mechanism</th>
<th>3. Application or Proposal Identification No. (If Known)</th>
</tr>
</thead>
<tbody>
<tr>
<td>ORIGINAL</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FOLLOWUP</td>
<td></td>
<td></td>
</tr>
<tr>
<td>EXEMPTION</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. Title of Application or Activity
HIV Prevention in African-American Adolescent Females

5. Name of Principal Investigator, Program Director, Fellow, or Other
Ralph DiClemente, Ph.D.

1. Assurance Status of this Project (Respond to one of the following)
☐ This Assurance, on file with the Department of Health and Human Services, covers this activity:
   Assurance identification no. M-1149
   IRB identification no. 01NR

☐ This Assurance, on file with (agency/department) ________________________, covers this activity:
   Assurance identification no. ________________________
   IRB identification no. ________________________ (if applicable)

☐ No assurance has been filed for this project. This institution declares that it will provide Assurance and Certification of IRB review and approval upon request.

Exemption Status: Human subjects are involved, but this activity qualifies for exemption under Section 101(b), paragraph _________.

7. Certification of IRB Review (Respond to one of the following IF you have an Assurance on file)
☐ This activity has been reviewed and approved by the IRB in accordance with the common rule and any other governing regulations or subparts on (date) 7-12-95 by: ☑ Full IRB Review or ☐ Expedited Review.

☐ This activity contains multiple projects, some of which have not been reviewed. The IRB has granted approval on condition that all projects covered by the common rule will be reviewed and approved before they are initiated and that appropriate further certification will be submitted.

8. Certification of Review

9. The official signing below certifies that the information provided above is correct and that, as required, future reviews will be performed and certification will be provided.

10. Name and Address of Institution
The University of Alabama at Birmingham
1170 Administration Building
701 South 20th Street
Birmingham, Alabama 35294-0111

11. Phone No. (with area code) (205) 934-3789

12. Fax No. (with area code) (205) 975-5977

13. Name of Official
Russell Cunningham, M.D.

14. Title
Interim Chairman, IRB

15. Signature
Russell Cunningham, M.D.

16. Date
9-16-95

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APPENDIX B

STUDY MEASURES FROM THE SELF-ADMINISTERED
PAPER AND PENCIL SURVEY
I have been worried that if I talked about how to not get an STD, my boyfriend or sex partner would...

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>103. ignore me</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>104. hurt me</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>105. leave me</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

I have been worried that if I talked about how to not get pregnant, my boyfriend or sex partner would...

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>106. ignore me</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>107. hurt me</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>108. leave me</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

These statements are about how confident you feel that you could use condoms. Please circle one response to indicate how confident you are that you could do each of the following, even if you have never used a condom before. We want to know if you think you could.

I feel confident that...

<table>
<thead>
<tr>
<th>Question</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>109. I could easily persuade a sex partner to use a condom before we started having sex.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>110. I could easily convince a sex partner to use a condom even if he didn't want to.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>111. I could easily refuse to have sex with someone who didn't want to use a condom.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>112. I could easily suggest using condoms to a sex partner even if we hadn't used condoms in the past.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

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152. If I asked my partner to use a condom, he might think I was putting him down or insulting him. 1—2—3—4—5.

153. I don't need to use a condom because I never catch anything. 1—2—3—4—5

154. When I use a condom, I feel less involved or committed to my partner. 1—2—3—4—5

155. Condoms change the climax or orgasm. 1—2—3—4—5

156. I don't need to use a condom because I use another method. 1—2—3—4—5

--- The following statements are opinions about some of the different ways that men and women act. Circle the number that tells how much you agree or disagree with the opinion expressed in each statement.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Disagree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>157. Swearing is worse for a girl than for a boy.</td>
<td>1—2—3—4</td>
<td></td>
</tr>
<tr>
<td>158. On a date, the boy should be expected to pay all expenses.</td>
<td>1—2—3—4</td>
<td></td>
</tr>
<tr>
<td>159. On the average, girls are as smart as boys.</td>
<td>1—2—3—4</td>
<td></td>
</tr>
<tr>
<td>160. More encouragement in a family should be given to sons than daughters to go to college.</td>
<td>1—2—3—4</td>
<td></td>
</tr>
<tr>
<td>161. It is all right for a girl to want to play rough sports like football.</td>
<td>1—2—3—4</td>
<td></td>
</tr>
<tr>
<td>162. In general, the father should have greater authority than the mother in making family decisions.</td>
<td>1—2—3—4</td>
<td></td>
</tr>
<tr>
<td>163. It is all right for a girl to ask a boy out on a date.</td>
<td>1—2—3—4</td>
<td></td>
</tr>
<tr>
<td>164. It is more important for boys than girls to do well in school.</td>
<td>1—2—3—4</td>
<td></td>
</tr>
<tr>
<td>165. Boys are better leaders than girls.</td>
<td>1—2—3—4</td>
<td></td>
</tr>
<tr>
<td>166. Girls should be more concerned with becoming good wives and mothers than desiring a professional or business career.</td>
<td>1—2—3—4</td>
<td></td>
</tr>
<tr>
<td>167. Girls should have the same freedoms as boys.</td>
<td>1—2—3—4</td>
<td></td>
</tr>
</tbody>
</table>

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This section is about Music Videos you watch on television. Please indicate what types of music videos you watch by circling "yes" and tell how many hours per day and how many days per week you watch them. Do not count the hours that you listen to music only the hours you watch music videos. If you do not watch any of a certain type, circle "no."

<table>
<thead>
<tr>
<th>Type of Music Video</th>
<th># of hours in a day</th>
<th># of days in a week</th>
</tr>
</thead>
<tbody>
<tr>
<td>187. Alternative</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>188. Jazz</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>189. Country</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>190. Rock/Pop</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>191. R&amp;B (Rhythm and Blues)</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>192. Gospel</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>193. Rap</td>
<td>No</td>
<td>Yes</td>
</tr>
</tbody>
</table>

194. If rap, what type of rap do you listen to most often? *(Circle one only)*
1. Gangsta (2-Pac, Snoop Doggy Dog, Geto Boys, Mystikal)
2. Bass (Luke Skywalker and 2 Live Crew, Kilo, 69 Boys, 95 South)
3. Hip-Hop (Queen Latifah, MC Lyte, Fugees, LL Cool J, Tribe Called Quest, Wu-Tang Clan)

195. On what channel do you usually watch music videos? *(Circle one only)*
1. BET
2. MTV
3. VH1
4. The Box
5. Other, what?

196. What do you think the main purpose of music videos are? *(Circle one only)*
1. To make music more enjoyable
2. To help you understand the lyrics of a song
3. To sell music (tapes/CDs)
4. To promote a musical artist

197. Who is usually with you when you are watching music videos? *(Circle one only)*
1. Parents
2. Brothers/Sisters/Cousins
3. Friends
4. Boyfriend/Someone you're interested in
5. Usually alone

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198. Where do you usually watch music videos? *(Circle one only)*

1. Home
2. Relative’s Home
3. Friend’s Home
4. Home of Boyfriend/Someone you’re interested in
5. Other, where? ______

<table>
<thead>
<tr>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Often</th>
<th>Always</th>
</tr>
</thead>
</table>

199. How often does seeing a particular music video influence your decision to buy that music (tape/CD)?

1. Never
2. Rarely
3. Sometimes
4. Often
5. Always

200. How often do you think back to the images you’ve seen in the music video when you hear a song on the radio/cassette tape/CD?

1. Never
2. Rarely
3. Sometimes
4. Often
5. Always

201. How often do you better understand the lyrics of a song after you have seen the music video?

1. Never
2. Rarely
3. Sometimes
4. Often
5. Always

202. How often do you listen to the same type of music as you watch on music videos?

1. Never
2. Rarely
3. Sometimes
4. Often
5. Always

203. In music videos, how often are Black women portrayed as people who use sex to obtain material possessions like expensive clothes, cars, money and entertainment?

<table>
<thead>
<tr>
<th>Never</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Always</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

204. In music videos, how often do you see one Black male artist surrounded by 2 or more Black women?

<table>
<thead>
<tr>
<th>Never</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Always</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

205. In music videos, how often are Black women touched or fondled by Black men?

<table>
<thead>
<tr>
<th>Never</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Always</td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

206. In music videos, how often are Black women treated disrespectfully by Black men?

<table>
<thead>
<tr>
<th>Never</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Always</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

207. In music videos, how often are Black women portrayed as sex objects?

<table>
<thead>
<tr>
<th>Never</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Always</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
208. In music videos, how often are Black women being controlled by Black men?

0 1 2 3 4 5
Never Always

209. How often do the Black women in music videos influence the way you dress?

0 1 2 3 4 5
Never Always

210. How often do the Black women in music videos influence the way you behave around Black men?

0 1 2 3 4 5
Never Always

211. How often are the Black women in music videos like Black women in real life?

0 1 2 3 4 5
Never Always

---

The following statements are about how you feel about yourself. Circle one number to indicate how much you agree or disagree with each statement.

<table>
<thead>
<tr>
<th>Statement</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>212. I feel that I'm a person of worth, at least an equal with others.</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>213. I feel that I have a number of good qualities.</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>214. All in all, I feel that I am a failure.</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>215. I am able to do things as well as most other people.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>216. I feel I do not have much to be proud of.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>217. I take a positive attitude toward myself.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>218. On the whole, I am satisfied with myself.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>219. I wish I could have more respect for myself.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>220. I certainly feel useless at times.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>221. At times I think I am no good at all.</td>
<td></td>
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</tr>
</tbody>
</table>
The next few questions are about pregnancy and having children. If you have never been pregnant, answer the first question and then skip the next page.

282. Have you ever been pregnant?
   1 Yes
   0 No (SKIP to Page 26)

283. Are you pregnant now?
   1 Yes
   2 No

284. Do you have any living children?
   1 Yes
   0 No (SKIP to Page 26)

285. Who is responsible for caring for your child(ren) most of the time?
   (Circle only one)
   1 You
   2 Children’s father
   3 Your mother
   4 A friend
   5 Day care
   6 A hired sitter
   7 Grandmother
   8 Other, who

286. How often is child care available when you need it?
   1 Never
   2 Not often
   3 Sometimes
   4 Very often
   5 Always
APPENDIX C

STUDY MEASURE FROM THE FACE-TO-FACE INTERVIEW
For the following questions, insert the appropriate term "vaginal" or "anal" before the word sex and the appropriate person "boyfriend/steady partner" or "boy or man other than a steady boyfriend" after the word with. Ask this set of questions as many times as appropriate based on the answers to questions 19 and 20.

21. Did you use a condom the last time you had ______ sex with ______ ?
22. How many times have you had ______ sex with ______ in the last 30 days?
23. How many of these times did you use a condom?
24. How many times have you had ______ sex with ______ in the last 6 months?
25. How many of these times did you use a condom?
26. Of the last 5 times (in your lifetime) that you had sex with ______, how many times did you use a condom?
   (List answer as a ratio - example: 1/5 = 1/4)
27. Of the last 5 times (in your lifetime) that you had sex with ______, how many times did you use a contraceptive (birth control) other than a condom?
   (List answer as a ratio - example: 1/5 = 1/4)
28. When you have ______ sex with ______ how often do you put a condom on your partner?
   (Use corresponding number of answer)
   1. Every time
   2. Most of the time (3/4 of the time)
   3. Half of the time (½ of the time)
   4. Once in a while (1/4 of the time)
   5. Never
Ask Questions 37 and 38 ONLY if there is a current steady boyfriend. (See question 1)

37. Other than you, do you think your boyfriend/steady partner has had other sex partners in the last six months?
   1  Yes
   2  No (SKIP next question)

38. How many other sex partners do you think he has had? __________ partners

(Circle one answer for each disease, if “Yes” fill in blanks to the right)

<table>
<thead>
<tr>
<th>Disease</th>
<th># of times in last 6 months</th>
<th># times treated in last 6 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>39. Gonorrhea</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>40. Syphilis</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>41. Chlamydia</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>42. Herpes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>43. Genital Warts</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>44. Pelvic Inflammatory Disease</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>45. Trichomonas</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>46. Crabs</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>47. Other</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>What?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
GRADUATE SCHOOL
UNIVERSITY OF ALABAMA AT BIRMINGHAM
DISSERTATION APPROVAL FORM
DOCTOR OF PHILOSOPHY

Name of Candidate ____________________________

Alyssa Gail Robillard

Graduate Program ____________________________

Health Education/Health Promotion

Title of Dissertation ____________________________

Examining the Relationship Between Music Videos and Sexual Risk Behavior in African-American Adolescent Females

I certify that I have read this document and examined the student regarding its content. In my opinion, this dissertation conforms to acceptable standards of scholarly presentation and is adequate in scope and quality, and the attainments of this student are such that he may be recommended for the degree of Doctor of Philosophy.

Dissertation Committee:

<table>
<thead>
<tr>
<th>Name</th>
<th>Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>B. Lee Green</td>
<td>Chair</td>
</tr>
<tr>
<td>Connie Kohler</td>
<td>Co-Chair</td>
</tr>
<tr>
<td>Susan Davies</td>
<td></td>
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<tr>
<td>Sharina Person</td>
<td></td>
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<tr>
<td>Min Qi Wang</td>
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</tbody>
</table>

Director of Graduate Program ____________________________

Dean, UAB Graduate School ____________________________

Date 1/4/01