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Adele F. Lies

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Self-Disclosure of Sexual History: An Analysis of College Students' Sexual Health
Communication with Intimate Partners

Adele F. Lies

University of Portland

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Abstract

This study aimed to expand knowledge of protective sexual health communication between individuals engaging in consensual intimate encounters. Specifically, it sought to identify if there was a correlation between self-disclosure of this communication type and the classification of relationship (e.g. boyfriend/girlfriend, casual hookup partners...etc.). Student participation (N=53) involved completing a survey questionnaire that inquired about the most recent intimate encounter he or she had, classify the relationship of that encounter (e.g. boyfriend/girlfriend, one night stand...etc.), and answering a health protective sexual communication (HPSC) scale with that particular experience in mind. The following question addressed the role of alcohol in recalled encounter. Findings indicated that students who were not in a committed relationship (e.g. dating but not officially boyfriend/girlfriend, consistent casual hook-up partners, or one night stand) demonstrated higher scores on HPSC scale. Additionally, students who claimed alcohol to have an effect on how intimate encounter evolved scored lower on HPSC scale.

Keywords: self-disclosure, sexual history, sexual health, STD's, alcohol, hookup behavior, college students, casual sex

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Self-Disclosure and Sexual History: An Analysis of College Students' Sexual Health Communication with Intimate Partners

In 2001, general surgeon David Satcher made the announcement, “we face a serious public health challenge regarding the sexual health of our nation.” He then went on to list a number of sexual-health problems within the U.S. demonstrating that Americans needed to start focusing on increased awareness, interventions and “expanding the research base relating to sexual health matters” (Surgeon, 2001). According to an article posted by the Centers for Disease Control and Prevention (the CDC), young adults ranging from the ages of 15 – 24, both male and female, are the most susceptible to contract sexual health problems such as sexually transmitted diseases (STDs, 2014). The CDC, (2014) proposed to address this public health problem through interventions targeting “at-risk adolescents and young adults” that focus on the “underlying aspects of the social and cultural conditions” which play a large role in sexual risk-taking behaviors.

It is no longer sufficient to implement fear-provoking campaigns throughout college campuses as means to educate the younger population about the risks that accompany being sexually active. The issue seems to lie more within aspects of social and cultural conditions that condone young adult's participation in high-risk sexual behaviors. Holman and Sillars (2012) found that peers who engaged in communication about sexual activity regularly were predictive of participating and having “favorable attitudes” about casual sex. They found “peer approval also predicted hookup behavior and attitudes” (Holman & Sillars, 2012). The conclusion of the study explained that the most common hookup script of high-risk sexual activity, such as unplanned or inebriated sex, was found to be widely accepted within the realm of students who themselves participated in hooking up. This study suggests the manifestation of a cultural norm

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among college students that promotes high-risk sexual activity so long as peer communication is prevalent. However, this peer communication that condones casual sex never addresses the risks associated with the act; it only expresses the justification for casual sexual encounters. This action results in little to no self-disclosure of past sexual history with the current sexual partner during the period of time they are together, leading to higher risks of transmitting or contracting a sexual disease.

It is imperative to further study the college population in attempt to aid the reduction of sexually transmitted diseases and form more successful campaigns that promote sexual health practices. Prior research has demonstrated the unfaltering rate of sexually transmitted diseases among young adults, which plays a role in the health crisis. However, research is limited in why college students participate in high-risk behaviors and why there is a lack of self-disclosure between new sexual partners. This literature review examines three topics of interest with the target population being college students: communicating sexual history, sexual activity among college students, and college student's participation in high-risk behaviors.

Communicating Sexual History

Within every relationship, old or blossoming, there is a certain amount of self-disclosure. The definition of the communicative term self-disclosure is the process of sharing information with the goal of revealing oneself to another. There are topics of discussion within relationships that are considered "taboo" or "off limits" to disclose. Prior studies conducted on taboo topics often mention past relationships and past sexual experiences as frequently avoided discussions (Turk & Thielman, 2002). To clarify the idea of "topic avoidance," one study defined the term as "a goal-oriented communicative behavior whereby individuals strategically try to keep a

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conversation away from certain foci'' (Daily & Palomares, 2004). Early research in the 1980's concluded that the three most taboo topics to address within romantic relationships were the state of the relationship, extra-relationship activities, and prior relationships (Baxter & Wilmot, 1985). Nearly 20 years later, Knobloch and Carpenter-Theune (2004) similarly found that all three of those topics were still reported to be the most taboo discussion topics.

One of the first factors to address when attempting to tackle the question of why we are facing a serious sexual health problem as a nation is the notion of self-disclosure. In 2011, Anderson, Kunkel, and Dennis, attempted to address two main questions pertaining to the topic of self-disclosure. The first inquiry considers "the reasons individuals give for avoiding talk about past sexual experiences" and the second addresses "whether there are sex differences in how often those reasons appeared in responses" (Anderson et al., 2011). These two questions will be examined first through past literature, and then analyzed through the findings of Anderson et al.

The first inquiry posited by Anderson et al., already had extensive research and literature on the topic. To start, Baxter and Wilmot (1985) concluded that relational protection is one example of why a partner refuses to talk about taboo topics. By participating in relational protection, an individual is attempting to mitigate any potential harm that could develop in a current relationship if he or she were to open past doors. Another example that explains avoidance of such topics is for the purpose of alleviating any negative emotional experiences (Knobloch & Carpenter-Theune, 2004). This means that the individual attempts to save face and reduce the possibility of embarrassment, humiliation, judgment, fear, or vulnerability from themselves and/or his or her counterpart. Furthermore, a couple or individual may view the

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relationship as temporary, negating the “closeness” necessary to induce disclosure of intimate information (Knobloch & Carpenter-Theune).

Anderson et al. reported that partners avoided past sexual history for two main reasons, to “keep past in past” and due to “concerns about sexual ‘experience level discrepancies’” (Anderson et al., 2011). Overall, the participants preferred the avoidance of dwelling on past relational experiences and displayed or demanded “respect for the maintenance of private issues” (Anderson et al., 2011). Furthermore, the participants steered away from past sexual history to alleviate the potential “disturbing information, images, and thoughts” that could arise from such conversations (Anderson et al., 2011). Also, they expressed worry about perceiving or being perceived differently after disclosing information about past sexual experiences. Generally, Anderson et al., (2011) found that participants assumed newly formed perceptions would result in a negative outcome on the relationship.

The second question in the study addressed whether or not there was a significant difference or similarity between men and women and the reasons they gave for lack of self-disclosure of sexual history. According to past studies conducted by Derlega, Metts, Petronio, and Margulis (1993) and Dindia and Allen (1992), women have a tendency to feel more comfortable in situations involving self-disclosure within relationships. On the contrary, Rosenfeld (1979) posited that men are less comfortable with self-disclosure and practice privacy management much more consciously than women. Based on these findings, the study by Anderson et al. thought it imperative to pose a question that addressed sex-based differences when self-disclosing “taboo” topics within a relationship.

Through the research conducted by Anderson et al. (2011), the idea that dissimilarities may exist between males and females self-disclosing taboo topics was not supported. In fact,

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their research concluded that “the lack of difference between the sexes was echoed for nearly all of the others in our ancillary inspection,” thus, the similarity between males and females throughout the study was not only present, but striking (Anderson et al., 2011).

The study conducted by Anderson, Kunkel, and Dennis is a great basis for understanding the surface reasons for why couples do not participate in self-disclosure of taboo topics (one of those topics being past sexual history). However, it is also imperative to understand how persons manage and justify non self-disclosure of past sexual relationships. The next studies to be examined delve deeper into this idea and draw a clearer focus on a phenomenon that is more prevalent in today's culture: managing privacy.

Privacy management is a communicative theory that addresses how a person decides to conceal or reveal personal information about him or herself. Past research has studied the extent of privacy management being the reason for non-disclosure; more importantly, they have studied the emotions that transpire if a person chooses to conceal private information on the basis of privacy management.

It is important to understand that deception and privacy management are two different communicative terms. The difference heavily relies on the feelings an individual experiences when practicing one or the other. A study conducted by Hample (1980) found that participants who practiced deception (“a commonly acknowledged relational transgression”) when withholding past relational information expressed the emotion of guilt in doing so. Guilt can transpire from a multitude of events; however, in the context of this study, the feeling of guilt may not have surfaced due to what related studies claimed to be: a person's recognition of having infringed upon a moral or societal standard (Jones & Kugler, 1993; Vangelisti & Sprague, 1998). Instead, guilt may transpire due to a failure to make “one's actions conform to goals and

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standards that arise from one's particular personal and interpersonal concerns" (Baumeister et al., 1995). This suggests that a person no longer makes the issue of self-disclosing risk-relevant sexual history a societal standard or norm, but instead a personal choice.

The reason as to why an individual may not view withholding important sexual history information from a partner as a transgression has to do with how that individual values the information. If he or she values the information as something that can be regulated, or that he or she does not believe the partner is "entitled to joint ownership of," then it is unlikely that the withholding of said information will be viewed as a communicative transgression (Nichols, 2012). In fact, two studies concluded that "participants did not regard selectively controlling disclosure of information as 'deceptive, hypocritical, morally wrong, or ethically questionable' but rather as 'the right thing to do'" (Nichols, 2012; Tuner et al, 1975). Thus, an individual's choice to conceal information is not only mitigating any relational violations, but also the feeling of guilt.

In addition is a phenomenon of legitimacy that transpires with "the right to privacy." An individual who participates in privacy management also "subscribes to the view" that the information being withheld "does not affect those to whom access is denied or restricted" (Nichols, 2012; Warren & Laslett 1977). However, the probable consequences in terms of health that arise from concealment of sexual history information prove otherwise. Unfortunately, since the act of withholding information due to individuals need to "manage their privacy" does not induce guilt (an emotion that normally leads to an individual telling the truth), the chances of modification for these behaviors, for the benefit of all new sexual partners, is low.

This knowledge transitioned Nichols (2012) to the important hypothesis: Individuals who utilize privacy management as a strategy for concealing sexual history will report experiencing

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less guilt than individuals who utilize deception as concealment. According to the data collected by Nichols (2012), out of all the variables placed within the “reasons for non-disclosure” category, it was concluded that those who had previous sexual encounters and viewed those encounters as private felt “such ownership also gave them the exclusive right to regulate access to it.” Furthermore, the hypothesis was supported through the conclusion that students who felt their sexual history were solely their own, therefore inducing privacy management as the reason for non-disclosure, reported feeling less guilt as opposed to those who were deceptive in their concealment of information (Nichols, 2012).

Self-disclosure in general is no easy task. This is especially true when the topic is considered taboo or unfavorable, such as past sexual history. However, studies have concluded that this is no longer the only reason such information is concealed. There is now evidence that individuals knowingly withhold past sexual history information (that could be potentially health threatening) from partners based on personal choice through the practice of privacy management. With the personal justification that the theory of privacy management brings with it and the knowledge that most couples prefer to sweep unfavorable topics under the rug, it is nearly impossible for a new sexual partner to be informed of any risk related information concerning past sexual history from his or her partner.

As for limitations, a majority of these studies were based on participants who were in committed relationships. As stated previously, individuals aged 15 – 24 are the ones who are most susceptible to contract an STD. It is fair to assume that a majority of youth in this age group are not in committed or long term relationships. This warrants for future evaluation of sexual history self-disclosure on participants who are single and engaging in casual hookups.

Sexual Activity and High Risk Behaviors among College Students

According to the Centers for Disease Control and Prevention (2010) 18 – 25 year olds are reported to account for almost half of new STD's reported annually, a majority of said infections could have easily being deterred with the use of a condom. In fact, another government funded study also found that among young adults ages 15 – 21, out of the 1316 participants, only 47% claimed to use condoms when engaging in casual sex (Lescano et al., & Project SHIELD, 2006). Casual sex or “hooking up” is referred to when two individuals engage in sexual contact and have no desire to further the relationship or plan to engage in another physical encounter. Although young adults report that casual sex is an emotionally positive experience verses negative, it is also conclusive that in comparison to other sexual behaviors such as hand to genital contact, “the behaviors associated with penetrative sex (oral, anal, and vaginal) incur a higher risk of sexually transmitted infections (STIs)” (Fielder & Carey, 2010b; Owen & Fincham, 2011; Manthos et al., 2014). Overall, this suggests that hooking up is a high-risk behavior that is associated with contracting STD's (Manthos et al., 2014).

In order to identify the amount of self-disclosure of sexual history happening between college students to aid in the prevention of spreading STD's it is also necessary to identify the consistent sexual behaviors exhibited by them. Throughout the years, a multitude of studies have been done to examine the nature of college students and the hook-up culture. However, there are not many that are consistently congruous across the board.

The term, “hook up” is relatively new within the U.S. culture. In fact, when taking a look at past research it is clear that before the 2000's the term was near non-existent within the scholarly realm (Monto & Carey, 2014). The shift in language suggests a shift in the American

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culture. Although it can be argued that the transition has been taking place over time, studies also argue that the change has occurred more recently. Lambert and colleagues (2003) argued that across college campuses within the U.S., the once viewed act of promiscuity is now simply a process of sexual identity wildly accepted as a normative within society. Furthermore, researchers are claiming that hooking up is a “trend” within our culture (Stinson, 2010), a “recent change” (Aubrey & Smith, 2013), and a “new sexual experience” for young American students attending college (Kalish & Kimmel, 2011). These research articles all back the increase of sexual encounters students are experiencing on college campuses.

More recently, a study conducted by Monto and Carey (2014) aimed to test the past claims and ran a survey among college students. When the two researchers contrasted the “1988 – 1996 waves of the General Social Survey with 2004 – 2012 waves,” they reported no significant difference (Monto & Carey, 2014). They found that participants in the current era (2004 – 2012) did not report an increase in sexual partners (since entering college), an increase in the amount of sex, or an increase in the amount of sexual partners within the past year in comparison to the earlier era (Monto & Carey, 2014). One of the major noted differences in waves was that respondents who were sexually active and from the current era showed to be more comfortable than participants from the previous era “to report sex with a casual date/pickup or friend,” and expressed less interest in reporting sex with a committed partner/spouse. Monto and Carey (2014) claim that “these modest changes are consistent with cultural shifts in the ‘scripts’ and terminology surrounding sexuality” and that no evidence was found to back or indicate “substantial changes in sexual behavior” or a “new pervasive pattern of non-relational sex” throughout college campuses.

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Going off the basis that the average American college student is not actually more sexually active than previous college students, a few questions arise. Are some students more likely than others to partake in hooking up? If students are in fact having the same amount of casual sex encounters as previous American college students, why is there an increase in STD's reported annually within that age group? The next part of this review will examine whether or not certain individuals are more likely than others to participate in casual sex, and address any findings pertaining to college student's high-risk behaviors and sexual activity.

According to Manthos and colleagues (2014), psychosocial factors can be used to categorize distinct groups among students and determine the consistency of hooking up within individual groups. After the researchers took into account factors such as attachment theory, religiosity, gender and sexuality, alcohol, and cross analyzed those with the different types of sexual self-schemas that each individual identified with, they concluded with one significant finding. As suggested by the results "there are distinct, identifiable groups for which hooking up is differentially predicted" (Manthos et al., 2014). This was determined through the analysis that two sexual self-schema groups were much more predictive of casual sexual encounters than the other. In fact, "30% of all participants accounted for 74% of those hooking up" throughout the entire sample size (Manthos et al., 2014). When analyzing those groups with the other factors, it was determined that the 30% showed dramatically heightened levels of "depressive symptoms" and "alcohol use" and much lower levels of the religiosity factor in comparison to those who fell into the other group.

While this study attempted to identify distinguishable groups that were more likely to participate in casual sex than others, it is the only one of its kind. However, past studies have looked at motivation for men and women to help determine the likelihood of casual sex

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encounters. For example, Fielder and Carey (2010) found that for a large portion of female college students, the motivation to hook up was based off “sexual desire” and “physical gratification.” Additionally, a vast majority hook up with ideals of furthering the relationship into a committed state and for other motivations such as “feeling sexually desirable, sexual exploration, and because ‘others do it’” (Owen & Fincham, 2011; Garcia & Reiber, 2008). According to Kenney et al. (2013) their study concluded that the most popular motive for hooking up among female college students was for “enhancement.” College women reportedly hook up to “enhance positive mood, well-being, to fulfill desires, or alleviate boredom/curiosity” (Kenney et al., 2013). Essentially, Kenney (2013) defines enhancement as “the service of obtaining positive emotional or physical (internal) states,” furthering the prospect that hooking up is a positive experience for a majority of women.

Motivation for men differed only slightly from that of the women. According to Garcia and Reiber (2008) motivations for men were extremely similar to their counterparts with physical gratification, positive emotional experience, and peer pressure all included for reasons of hooking up. One motivational difference was while women are seeking a more committed relationship after a hook up men are more interested in hooking up multiple times with different women (Garcia & Reiber, 2008).

Although identifying the motivation behind casual sexual encounters for men and women do not narrow down whether or not some young adults are more likely than others to partake in casual sex, it does illuminate the idea that as a culture, American college students see more positivity than negativity in the act of hooking up. This suggests that casual sex among college students will not decrease.

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Aside from these studies, there is limited research on the topic of certain individuals being more prone to hook up compared to others. However, there are many studies that claim alcohol to be a “consistent, robust predictor of hooking up”, as well as a viable way to initiate and “explain or justify” the experience of hooking up after the act is done (Manthos et al., 2014; Ven & Beck, 2009). Additionally, events containing alcohol are also “sought out” by college students to aid in finding a sexual partner (Lindgren, 2009). Current findings also indicate that the more drinks a student consumes, the more likely he or she is to engage in more serious sexual encounters including sex (Labrie et al., 2014.) According to Cooper (2002) college students use of alcohol showed correlation to an increase in different sexual partners, lack of practicing safe sex (e.g. condom use), and “more frequent instances of unprotected sex with multiple partners.”

A majority of college students drink alcohol during their years on campus. One of the biggest problems campuses face is binge drinking. This refers to students who drink to get drunk, and consume much more than the legal limit or what their bodies can handle. Unfortunately, this is especially true within first year students who are newly adjusting to the college scene. One of the most prevalent fears a first year college student experiences is that of exclusion. When placed into an environment where “binge drinking is perceived to be the norm,” a freshman may succumb to his or her fears and partake in drinking to mitigate any form of rejection (Lin and Carlson, 2009). This period of time in a freshman student's life can be referred to as the “developmental stage” which is also an important aspect because it is directly related to the “college effect.” This is a “developmental life-cycle stage experienced by many college students” in which “drinking and partying are widely perceived as part of the rite of passage” (Lin & Carlson, 2009).

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Through the examination of this literature, it is not completely clear whether or not some young adults are more likely than others to hook up. While the previous study was noteworthy, it was the only one of its kind and not without limitations. While this area of research is still ambiguous and in need of further investigation, it is clear that an attitude which positively views drinking is shared by the majority of college students. Furthermore, the inebriation inherent with drinking allows students to lower inhibitions and partake in casual sexual encounters more frequently, and with less concern of safe sex practices.

Rationale

As a country it is evident that youth and young adults are facing serious sexual health complications. When addressing the public health issue of STD's, research finds that young adults are barely attempting to self-disclose information of sexual history with new intimate partners for reasons pertaining to cultural norms (Holam & Sillars, 2012), privacy management practices (Nichols, 2012), and avoidance of taboo topics (Anderson et al., 2011). Alcohol has also been predictive of casual hookup behavior that can implement dangerously low or no sexual history self-disclosure with a new intimate partner (Manthos et al., 2014). This study will explore the amount of college students practicing sexual health communication before having sexual encounters with new sexual partners, and determine if there is a correlation between drinking alcohol and practicing health protective sexual communication. Thus, the following research question and hypothesis offered are:

RQ1: Are students engaging in casual hookups participating in health protective sexual communication?

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H1: Students who drink alcohol prior to engaging in an intimate encounter will score lower on the health protective sexual communication scale.

Method

Participants

College students were the main demographic being analyzed within the study, however, it was left open to individuals who were between the ages of 18 – 25 (not attending college) since that is the target demographic that exhibits an unfaltering rise in sexually transmitted diseases. All participants read through a consent form prior to starting the survey, and were given full ability to “opt out” or discontinue at any point throughout the questionnaire.

Procedures

Following approval from the University of Portland's institutional review board, a five minute survey was created and utilized to collect aggregate information on health protective sexual communication (HPSC). The survey was administered through the social media platform of Facebook, and sent out through e-mail, to participants who were between the ages of 18-25 and/or in college. Data collection remained open to participants from April 13th – April 19th amounting to a total of 53 participants.

Qualtrics was the survey platform used to collect all data and information. At the beginning of the study, all participants were asked to recount his or her last consensual intimate encounter. They were then asked to identify the nature of recalled relationship and categorize it as: (a) boyfriend/girlfriend (b) dating but not officially boyfriend/girlfriend (c) consistent casual hook up partners (d) one-night stand. With that memory in mind, they then filled out the HPSC scale. After the completion of the ten question scale, they continued to answer two more questions pertaining to alcohol and the characteristic of their consensual intimate encounter.

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Measures

The health protective sexual communication scale, consisting of ten questions, was utilized as the main instrument of measurement. Previous studies to have utilized the HPSC scale (Catania et al., 1992; Dokini et al., 1995) have received a Cronbach's alpha of .80 or higher, signaling a strong reliability. It is a self-report Likert type scale that allows participants to answer questions pertaining to how often they communicate protective sexual communication (e.g. Asked a partner how he/she felt about using condoms before having intercourse). While the original scale addresses new sexual intimate partners, the one used within this study was adjusted to also fit those who were recalling an intimate encounter that did not happen with a new sexual partner. The first 5 questions in the scale were answered through a 5 point type Likert scale, the remaining 5 were answered through a 4 point type Likert scale. In this study, a strong Cronbach's alpha reliability coefficient of .85 was obtained through the HPSC scale.

Results

RQ1: Students engagement of casual hookups and their participation in health protective sexual communication.

RQ1 was posed to address whether students engaging in casual hookups were also engaging in health protective sexual communication. After running a One Way ANOVA test on the normative data that each participant classified his or her consensual intimate encounter as (1. committed relationship, 2. dating but not officially boyfriend/girlfriend, 3. consistent casual hook-up partners, or 4. one night stand), it was concluded that there was a significant difference between the groups and how they answered the HPSC scale ($f = 3.87, p < .05$). Next, two group significant T tests were ran to analyze if there were significant differences between the normative data alone. Group one (committed relationship) and group four (one night stand) tested a significant difference ($t = -2.35, p < .05$), along with group one and group three

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(consistent casual hook-up partners) ($t = -2.51, p < .05$). Group one and group two (dating but not officially boyfriend/girlfriend) resulted in no significant difference, and group two and group four approached significant difference ($t = -1.96, p = .07$) as the final two group T test.

After these analyses, a summation of the sex health communication scores were cross analyzed with the normative data collected. The resulting *mean* of each normative group is as followed: 1. Committed relationship = 29.68, 2. Dating but not officially boyfriend/girlfriend = 34.22, 3. Consistent casual hook-up partners = 40.00, 4. And One night stand = 41.50. This data suggests that those who are in a committed relationship are less likely to participate in sexual health protective communication, and that those who engage in one night stands are more likely to participate in sexual health protective communication. Evidently, a trend can be seen. The less commitment portrayed within a relationship, the more sexual health communication an individual practices.

H1: Students who drink alcohol will score lower on the health protective sexual communication scale.

In regards to H1, a simple question was asked after the HPSC scale was administered within the survey. The question inquired, "How much do you think alcohol affected how this encounter played out?" The participants were able to answer using a 4 point Likert scale (1. a lot, 2. a little, 3. not a lot, 4. not at all). After running a test which analyzed if there was any alcohol correlation to the summation of the sexual health protective scale, a significant finding was present (Pearson's $r = -.30, p < .05$). The more alcohol was admitted to be a factor within a consensual intimate encounter, the less likely an individual was to practice protective sexual health communication.

Discussion

This study's intention was to analyze the sexual health communication practices of college students and illuminate if there were any noteworthy differences of how an individual discloses this sexual history information. Specifically, the type or classification of relationship was examined to better understand when students are practicing this type of communication.

Based off the findings for RQ1, it can be concluded that students who engage in consensual intimate encounters with individuals who are not very committed to him or her, are more likely to practice health protective communication. This suggests that those who are in committed relationships do not practice protective sexual health communication. However, it is important to note that those in a committed relationship have most likely had more than one consensual intimate encounter. The study asked to concentrate on the "most recent" encounter. This means that an individual may have talked about those safe sexual practices throughout his or her relationship, and not necessarily during his or her most recent intimate encounter.

Due to H1 being supported in so many previous studies, it is not necessarily surprising that it was supported within this one. However, the consistency of support across all studies on this claim makes it all the more serious. Alcohol has been a predictor of unsafe sexual practices for many years now, and continues its negative consequences today. This suggests an implementation of future studies that focus on targeting effective strategies to communicate with the college population on the dangers of alcohol and casual sex.

Limitations

Several limitations can be found throughout the study that justifies cautious interpretation. First, the design of the study targeted a convenience sample of college students.

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The students who participated may not be representative of the college population, let alone the sexually active college student body. Thus, caution is necessary when generalizing.

Second, sex and safe sex practices are not an easy topic to address. Researcher Dunne (2002) points out that while conducting research on sexuality, "it is often easier to obtain cooperation from groups with which the researcher has personal contact and some influence than from randomly selected individuals" (p. 100). The sensitivity that inherently comes with the topic of sex alone justifies a warranted limitation.

Third, while the idea of having retrospective accounts is a viable way to collect data and research, it is impossible to verify whether participants were actually truthful in their answers. Since sexuality is such a sensitive topic, and since being sexually healthy has such strong stigmatization along with it, participants may have overestimated or underestimated how much protective sexual health communication they engaged in. They may also have distorted ideas on how much alcohol played a role in the consensual intimate encounter that happened (if alcohol was a factor at all) since they may have been inebriated at the time.

Implications for Future Research

The current study provides a basis for addressing college students and how they communicate sexual self-disclosure to intimate partners. While this study addressed the different types of relationships to identify if there was significant difference in protective sexual health communication, future studies can focus on explicitly "new" consensual intimate encounters. Focusing the study on individuals who are not in a committed relationship allows for a better understanding of the communication taking place between individuals who may not necessarily know one another. This future focus of study is justified through all the data supporting a rise in sexually transmitted diseases throughout the United States. It is possible that there is a

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correlation between new intimate partners, non-participation in protective sexual health communication, and a rise in STD's. Conversely, it could also be important to take the findings of RQ1 and expand on normative group one (boyfriend/girlfriend). The data suggests individuals who engage in less committed intimate encounters practice sexual health communication more; it would be important to look specifically at the group of people within committed relationships and identify how, why and when they practice self-disclosure of sexual history.

As stated previously, the conclusion of alcohol once again being supported as a predictor of unsafe sexual practices brings to light the need for a more robust collegiate campaign against the abuse of alcohol. A pragmatic application of this study would include a more in depth analysis of alcohol consumption among college students and address how often students engage in those particular intimate encounters. It is also important for future researches to take the limitation of accuracy into account. While a large sample size is not easily obtained through a qualitative data collection, it could be more insightful and reflective of the actual college population. Collecting data qualitatively could also mitigate any distorted or misperceived encounters that students have experienced.

Conclusion

The present study has illuminated the importance of future research on the topics of safe sexual practices among college students and the dangerous role alcohol can play in initiating unsafe intimate encounters. The future aim of the studies should focus on increasing awareness and improving the communicative crisis in attempts to alleviate the stress of our nation's sexual health problems made clear by the surgeon general (2001). With that being stated, future studies would not only enlighten communication academia, but also serve as an initiative to address the public health challenge that is brought on by non-disclosure of sexual history information.

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