

Desire to Father a Child and Condom Use: A Study of Young Black Males at Risk of
Sexually Transmitted Infections

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Short title: Pregnancy Desire

Counts: text = 1,702; abstract = 231, 18 references and 1 Table are included

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Abstract

Background: To determine whether male-reported desire to father a child or their perception that someone wanted to have their child was associated with elevated rates of unprotected vaginal sex (UVS), among a sample of young Black males (YBM) at high-risk of STI acquisition.

Methods: Data were collected in clinics treating STIs in three southern U.S. cities. Males 15-23 years of age who identified as Black/African American and reported recent (past two months) penile-vaginal sex were eligible (N=578). Logistic regression was used to examine **whether** desire to conceive a child (self and perception of partner's desire) predicted condom use, adjusting for age and whether they had previously impregnated someone.

Results: Their own level of desire to conceive a child was not significantly associated with UVS or the proportion of times a condom was used. However, those who perceived higher level of someone wanting to conceive their child were 1.73 times more likely to report UVS ($P = .006$) and 1.62 times more likely to report a lower proportion of times condoms were used ($P = .019$).

Conclusions: YBM attending STI clinics in the USA may forego condom use based on a perceived desire of their partners to become pregnant putting themselves at risk for STI acquisition and unplanned pregnancy. Findings provide initial support for the relevance of the idea that perceptions of female partner desire to conceive may be a critical determinant of condomless sex.

Key Words: Condoms, young Black men, pregnancy desire, sexually transmitted infections, sexual behavior

Introduction

In the United States, young Black males (YBM) continue to be disproportionately likely to acquire Human Immunodeficiency Virus (HIV) and sexually transmitted infections (STI).¹⁻⁵ The problem is exacerbated in the Southern U.S.⁶⁻⁸ Condom use continues to be the primary public health strategy to prevent HIV and other STIs in YBM.⁹⁻¹² However, condom use is inherently antithetical to conception of a child; thus, men's desire to father a child may be a primary barrier to STI protection. Findings from a previous study of young Black adolescent females suggested that male desire to conceive a child may influence whether condoms are used.¹³ However, it is plausible that male perceptions pertaining to female partner desire to become pregnant may also act as a deterrent to condom use.

Accordingly, the purpose of this study was to determine whether male-reported desire to father a child or their perception that someone else wanted them to father a child was associated with elevated rates of unprotected penile-vaginal sex among a sample of YBM at high risk of STI acquisition. Specifically, our intent was to study the population of YBM attending STI clinics in the USA. It was hypothesized that higher levels of desires to father a child (their own and their perceptions of others desire to have their child) would be significantly associated with more unprotected vaginal sex (UVS) and less consistent condom use.

Materials and Methods

Study Sample

A purposive sample of YBM was recruited for participation in an NIH-funded randomized controlled trial of a safer sex intervention program designed for this population. Only the baseline data from that trial were used for this secondary data analysis. Recruitment

occurred in clinics that diagnose and treat STIs. Inclusion criteria were: self-identification as Black/African American, 2) ages 15 to 23 years, 3) engaging in penile-vaginal sex at least once in the past two months, 4) not knowingly HIV-positive. Recruitment occurred from approximately 2010 through 2012, in a primary site (New Orleans, LA) and two secondary sites (Baton Rouge, LA and Charlotte, NC). The overall study participation rate was 60.4% (N = 697).

Study Procedures

After providing assent, research assistants asked young men less than 18 years of age for their permission to contact one parent or guardian to obtain consent for study participation. All other young men provided written informed consent. After enrollment, an audio-computer assisted self-interview (A-CASI) survey was administered that assessed whether YBM were currently attempting to conceive a child and also their perceptions of their partners' desires to become pregnant by them. The survey also assessed various condom use behaviors. YBM were instructed in the use of a laptop computer to complete the A-CASI, completion of which took approximately 30 minutes. The survey was completed in a private area with the research assistant being available to clarify wording if needed. Young men were provided with a \$50 gift card. The study protocol was approved by the institutional review boards at all participating sites.

Measures

All measures were assessed using a 2-month recall period. One A-CASI question asked, "How much do you want somebody to be pregnant with your child right now?" Another question asked, "How much do you think somebody wants to become pregnant with your child right now?" Response options for **both** items were provided on a 5-point scale: "not at all, a

little bit, some, a lot, and very much.” YBM also reported whether they had ever “gotten a girl pregnant.”

Frequency of UVS was assessed by subtracting the number of times condoms were used for penile-vaginal sex from the number of times penile-vaginal sex occurred. The proportion of time condoms were used was assessed by dividing the number of times condoms were used for penile-vaginal sex by the number of times penile-vaginal sex occurred.

Data Analysis

As the responses to the two pregnancy desire questions, frequency of UVS, and the proportion of times a condom was used were not normally distributed, these variables were dichotomized using a median split. Multiple logistic regression was used to calculate odds ratios for the association of the two dichotomized pregnancy desire variables with the two dichotomous outcomes (UVS no/yes and proportion of times a condom was used), adjusted for the effects of age and whether the young man reported having previously impregnated a partner. Significance was defined by an alpha of .05. All analyses were conducted using SPSS, version 21.0.

Results

Characteristics of the Sample

Data on UVS and condom use was provided by 578 YBM. The mean age of the sample was 19.73 years (standard deviation [sd] = 1.9 years). A very small proportion of the sample reported being married (1.4%). About one-half (49.9%) reported attending school (high school or college). Most (65.6%) had graduated from high school. The vast majority (94.9%) received public assistance of some kind. Just over one-half of the sample (53.3%) reported an income of less than \$500 per month. All YBM self-reported a history of being diagnosed with one or more STIs.

The mean frequency of unprotected penile-vaginal sex reported by YBM was 6.9 times in the past two months ($sd = 14.1$) and the mean frequency of proportionate condom use was 61% ($sd = .40$). More than one-half of the sample (58.1%) reported having any UVS in the past two months; **the median split compared these YBM to the remainder who reported no UVS. The median split for the proportionate variable compared those using condoms 60% of the time or more to those using condoms less than 60%.** For each of these measures, data were available from 578 of the YBM who reported recent penile-vaginal sex.

Almost half of the YBM (47.8%) reported they had previous **impregnated a female**. Most of the YBM (60.6%) reported “not at all” wanting somebody to become pregnant with their child right now.” On the other hand, the majority of the sample (52.8%) reported higher levels (some, a lot, very much compared to not at all or a little bit) of someone wanting to become pregnant with their child right now. Only 25.4% answered “not at all” to this question.

Table 1 displays the adjusted odds ratios obtained for the two dichotomous outcomes adjusted for age and whether they had previously impregnated a partner (both of which were significant predictors). Their own level of desire to conceive a child was not significantly associated with UVS or the proportion of times a condom was used. However, those who perceived higher level of someone wanting to conceive their child were 1.73 times more likely to report UVS and 1.62 times more likely to report a lower proportion of times condoms were used.

Discussion

Findings from this study of 578 YBM attending publicly-funded STD clinics suggest while their own current level of desire to father a child did not predict condom use, those who perceived somebody wanting to conceive a child with them were indeed relatively unlikely to use condoms, despite their risk of STI acquisition and/or transmission. This study found that

almost one-half indicated that they had impregnated a partner, approximately four in ten desired to father a child, or three-quarters perceived that a female wanted to conceive their child. YBM may be using condoms only with partners who are not perceived to desire becoming pregnant by them. YBM attending STI clinics in the USA may forego condom use based on a perceived (or expressed) desire of the partner to become pregnant, putting themselves at risk for two negative outcomes: STI acquisition and having an unplanned pregnancy/unplanned child. Unfortunately, men's perception that someone desires to conceive a child with them may be quite common among this population.

The findings have at least two implications for prevention practices. First, they suggest that a potentially important component of behavioral interventions designed to avert HIV/STI acquisition may be to help YBM challenge any assumptions they may have about female partners wanting to conceive a child with them. These assumptions may be linked to culturally derived stereotypes about masculine prowess being acquired from conceiving a child. Any interventions that are developed for this purpose should be designed for cultural sensitivity to the issue.

A structural issue involves the relative scarcity of YBM in contrast to young Black women, thereby creating a "sellers" market for YBM looking for female sex partners. This sex ratio imbalance is part of what has been described as a "sexual habitus" for YBM that also includes possible lack of emotional connection with female sex partners, perceived pressures to be hypersexual and to prove manhood sexually, given a lack of ability to do so economically or through offering long-term stable relationships.¹⁴

A second implication for prevention practices is that YBM may be yielding to perceived or expressed desires of their female sex partners to conceive a child with them. Previous research has suggested that this is a possibility.¹³ Although current findings do not provide

direct support of this, they do suggest that the perceived desire of a partner to conceive **may be an** impetus for less condom use. Thus, programs designed to reduce unplanned pregnancies may benefit from a focus on the female partners' desire to conceive a child.

Of interest, the multivariate findings suggest that the negative influence of pregnancy desire on condom use functions independently from the influence of age, history of previously impregnating a partner, and men's own desire to father a child. This means that perceptions of female partner desire to conceive are important even in light of the stronger predictor of conception history. Given the two measures of condom use in the analyses (any UVS, a lower proportion of condom-protected penile-vaginal events), the weight of evidence strongly supports the proposition that perceptions of female partner desire to conceive may lead to risky sex.

Limitations

Findings are limited by the validity of the self-reported measures of condom use behaviors. Also, the use of a convenience sample limits the generalizability of the findings to other populations of YBM. Further, assessments did not include partner-specific condom use behaviors; thus, it is not possible to know whether the reported lack of condom use occurred with the same partner perceived as wanting to become pregnant.

Conclusions

A substantial proportion of YBM attending STI clinics in the USA may be at dual-risk of both STI acquisition and early parenthood. The relatively unexplored phenomenon of whether male desire to father a child and perceptions of females desire to conceive heighten these risks. The study findings provide initial support for the relevance of the idea that perceptions of female partner desire to conceive may be a critical determinant of condomless

sex. Study findings have utility for practitioners and educators working in STI clinics, as a talking point for counseling sessions with YBM who need to practice safer sex.

Acknowledgements

This study was funded by a grant from the National Institute of Mental Health to the first author, [R01MH083621](#).

Author Disclosure Statement

No competing financial interests exist.

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Table 1. Adjusted Associations Between Pregnancy Desire and Dichotomous Outcomes

Outcome/Predictors	AOR	95% CI	P
<u>Any unprotected vaginal sex</u>			
Age	1.10	.99, 1.22	.064
Previous Impregnation	2.14	1.43, 3.20	.001
Desire to father	1.05	.70, 1.57	.814
Perception of partner desire to conceive	1.73	1.17, 2.56	.006
<u>Low proportion of condom use</u>			
Age	.83	.80, .98	.020
Previous Impregnation	1.89	1.26, 2.82	.001
Desire to father	1.23	.82, 1.86	.322
Perception of partner desire to conceive	1.62	1.08, 2.43	.019