

# The Influence of Popular Culture on Male Sexual and Reproductive Health Behaviour



Prepared by: Miss. Sacha-Marie Hill (Research Officer)

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## **Introduction**

The Sexual and Reproductive Health behaviour of males is a concept which is of great concern for Reproductive Health and Family Planning in Jamaica. The behaviour of males in this respect has far-reaching implications for their Reproductive Health and that of their partners. Having multiple partners for example or having unprotected sex will increase the chances of contracting a Sexually Transmitted Infection (STI), having an unintended pregnancy with a partner, or both.

A key question here is what accounts for Male Sexual and Reproductive Health Behaviour? Is behaviour a result of gender norms, culture and subculture, aspects of one's personality, home environment or the media? While it can be argued that many factors impact behaviour, this paper will seek to discuss the potential impact of popular culture on the Sexual and Reproductive Behaviour of males in the Jamaican society in comparison with other factors such as social norms and social learning.

### **When does impact begin?**

According to Collins et.al (2010), "a key period of sexual exploration and development occurs during adolescence. During this time, individuals begin to consider which sexual behaviours are enjoyable, moral, and appropriate for their age group." It can be argued therefore that the impact of popular culture on Male Sexual and Reproductive Health Behaviour would also begin at this stage.

### **Aspects of Jamaican Popular Culture**

Popular culture, while complex in definition can be seen as a struggle between subordinate and dominant groups in society. Essentially popular culture can be described as "a terrain of ideological struggle expressed through music, film, mass media artifacts, language, customs, and values." (Morell, 2002).

Examples of this can be seen in the progression and impact of Jamaican Dancehall music over the past two (2) decades, the modes of transportation used as well as the sexually overt imagery on television programmes, broadcast locally and internationally.

## **Sexual content on Television Programmes and its impact**

According to Collins et.al (2010) watching sex on television predicts and may hasten adolescent sexual initiation. The study was done in the United States of America with a total sample of 1,792 adolescents between the ages of 12 and 17 years. In baseline and follow up interviews conducted one (1) year later, participants reported their TV viewing habits and sexual experience. Over a dozen factors were also identified which were shown to be associated with sexual initiation among adolescents; these were used as measures in the study.

Examining television programming during the 2001 and 2002 season, Collins et.al (2010) found that sexual content appeared in 64 percent of all television programmes. Although this study took place in the United States, it must be noted that cable access is available in Jamaica and some Jamaicans subscribe to these channels, thereby giving their adolescents access to this type of programming. The effect therefore while possibly not exact, may still be applicable to Jamaican cable users.

These researchers used the concept of Social Learning Theory to explain that if adolescents view casual sex on television with no negative consequences of engaging in the behaviour being portrayed, they are more likely to adopt these behaviours. This includes observing sexual talk or sexual behaviour. Although some television programmes show the importance of safe sex or portray negative consequences for engaging in the behaviour, this percentage is not high. Collins et.al (2010) indicated that one (1) out of every seven (7) shows that portray sexual content includes any safe sex messages.

The study also indicates that the more sexual content adolescents are exposed to, the sooner intercourse can be initiated. Other factors were also taken into consideration, with exposure to television sexual content remaining as a strong predictor of initiating sex among those who had never had sex at the time they were first interviewed. This shows that in the media, far more instances exist where consequences are not portrayed, leaving information about Sexual and Reproductive Health (SRH) to be misconstrued and misunderstood. This in turn can lead to poor Reproductive Health choices and irresponsible Male Sexual and Reproductive Health Behaviour.

Another piece of literature supporting the argument that Foreign cable channels can impact adolescents sexual behaviours can be seen in an article written by Professor Marcia Forbes entitled “Sexing Things up on TV- but will they use a condom”. According to Forbes (2006), with respect to Jamaican adolescents “ adolescents who watched foreign cable TV were more likely to report having

had sex when compared to those who watched local cable or free-to air TV.” In addition, “among respondents who had ever had sex, viewers of foreign cable TV were more likely to report multiple partnerships (75.6%) versus those watching local cable TV (68.2%) or those watching local free-to-air TV (57.1%).”

What this research shows is that cable television, which for the most part is derived from the United States of America does have an impact on the desire or need of adolescents to have sex. They are more influenced by cable programming than local programmes. It is also important to note that they also engage more in risky sexual behaviour regarding multiple partnerships. This increases exposure to Sexually Transmitted Infections (STIs) and can increase unwanted pregnancies.

What is even more interesting, however is that Jamaican adolescents who watch Cable Television that is foreign in origin are more likely to always use a condom than those who watch local cable television or local television stations (60.2%, 7.2% and 21.7%, respectively). This may be due to safe sex campaigns and public service announcements running on stations that adolescents frequent such as Black Entertainment Television (BET). While foreign cable may increase sexual activity therefore, it at least encourages “safe sex”. Nevertheless, this research does prove that watching television can increase the sexual behaviour of adolescents and by extension, males.

### **Dancehall Music and its Effect on Male Sexual and Reproductive Health Behaviour**

According to Forbes (2006), Almost 68 percent of boys and 65 percent of girls said dancehall music made them want to have sex ‘often’ or ‘very often’. In recent times, Jamaican popular culture has been greatly influenced by the music of the dancehall through the music of several artists such as Lady Saw, Beenie Man, Bounty Killer and most recently Movado and Vybz Kartel. The messages within the music portrayed in the dancehall emphasises the flaunting of masculinity and virility and also celebrate the female’s ability “keep her man” through the fulfillment of his sexual desires. Salewicz and Boot (2001) describe dancehall as “the marriage of digital beats and slackness: that moment in music in which lyrics about guns, women’s body parts and men’s sexual prowess come together...”

In the dancehall culture, the penis is a form of power, a display of masculinity. For the urban poor it is also a vessel for freedom and liberation. According to Pinnock (2007), “notably, however, in the heterosexual matrix of Jamaican society, this liberation can only be achieved through sexual interactions with women. Jamaica’s urban poor ritualise through entertainment, then, sexuality as a discourse of power in the society.” For the male, according to Pinnock (2007), “the vagina has to be conquered as a demonstrable way of mastering sex and sexual knowledge and power in the wider society.” Through statements such as these, in the dancehall culture, it is clear that masculinity is determined by sexual exploits and the conquering of the female.

Although the lyrics mostly dictate sexual exploits from the male perspective, in many instances with the male giving directives to the female on the sexual acts she should perform, it may be expected that the male would be mostly affected by the content. However, according to Crawford (2010) while generally both literature and the findings of the study show that dancehall music has an effect on adolescent sexual behaviour, “females are more likely to be impacted psycho-socially, hence would act upon the lyrical contents that they hear.”

Crawford’s study used qualitative and quantitative data from 100 adolescents (50 male, 50 female) through Convenience and Purposive Sampling. The result of the study indicated that males were less likely to be emotionally stimulated by the dancehall genre than females (62% vs. 82% respectively). Males were also less likely to act on lyrical content or feel controlled by the lyrics than females were. For males 46 percent acted on lyrical content compared to 74 percent of females, and 46 percent felt controlled by the lyrics compared to 64 percent of females.

For adolescent males then, while this type of popular culture does impact on their behaviour, it seems that the females are more easily influenced as Crawford’s research implies that Male Sexual and Reproductive Health Behaviour would be impacted on less by this form of popular culture than female adolescents.

What is important to note, however is that the willingness of the female to follow the “instructions” in the music to please men, will still impact Male Sexual and Reproductive Health Behaviour. While men therefore may not be as emotionally stimulated by dancehall messages, they may be influenced by the will and wishes of women themselves, especially if female desires mirror their own. The sexual imagery and messages within the dancehall and dancehall music directly impact males,

although to a lesser degree than females. However through the willingness of females to comply with messages in the music, the chances of both sexes engaging in irresponsible sexual behaviour may still exist.

### **Mode of Transportation (Taxis)**

With customs being a part of the definition of popular culture, modes of transportation may be considered an aspect within the definition. One mode of transportation widely used in Jamaica is a taxi. At first glance it may be unclear how a taxi impacts on MSRHB, however as will be shown in a document entitled “Taxis en Route”, some taxi drivers may engage in sexual relations with their passengers. According to Chambers (2003) “reports and research suggest that teenage schoolgirls might be involved in the exchange of sex for money, school fees, lunches, and/or other needs/wants. In this respect, a particular group of individuals, male taxi drivers, have been implicated as principal benefactors, a core group apparently being responsible for such activities.”

The study conducted by Chambers (2003), sought to uncover the behaviour of taxi drivers including behaviours that may put their SRH at risk. Sexual relationships between schoolgirls and taxi drivers existed for a variety of reasons (25 in total), some of which included: ease of access, low maintenance costs and lesser financial pressures, financial needs, parental knowledge and changing values.

With respect to these factors, access to the schoolgirls was relatively easy and the costs of maintaining the girls were quite low. The drivers were approached, as some girls required money from their parents who were unable to meet the demand. Also in some cases, the parents were aware of the relationship. Regarding a change in values, according to Chambers (2003), “adjusted values were dulling society’s sexual conscience e.g. young mothers, parent’s limited quality time with children, increased media influence.”

The taxi as a form of popular culture therefore, highlights the risky sexual behaviour of men (and young girls) due to a multiplicity of factors which include sexual desire and the ease of access to sexual encounters. While protection is used in some instances, the use of the Emergency Contraception Pill (ECP) has also been featured in this study to prevent unwanted pregnancies.

## **Popular Culture Versus Other Influencers of Behaviour**

Thus far the impact of popular culture on Male Sexual and Reproductive Health Behaviour has been explored, however, does popular culture itself carry the majority of the impact towards this behaviour, or are the norms of society simply reflected in popular culture? Behaviour in general may be more as a result of gender norms, socialisation and concepts of masculinity within the Jamaican culture. Social norms are rules developed by a group of people that specify how people must, should, may, should not, and must not behave in various situations.

To get a more comprehensive understanding of what may impact Male Sexual and Reproductive Health behaviour it must also be explored whether behaviour may be attributed to internal biological factors or through social learning. In essence, is behaviour dependent on nature or nurture? Within the realm of psychology, social psychology is a field which, through its various theories and experiments, seeks to provide an explanation for behaviour.

According to Baron and Byrne (2004), social psychology is “the scientific field that seeks to understand the nature and causes of individual behaviour and thought in social situations.” Within the realm of social psychology, the biological aspect of behaviour can be explained through evolutionary psychology. Baron and Byrne (2004) also explain that evolutionary psychology is “a new branch of psychology that seeks to investigate the potential role of genetic factors in various aspects of human behaviour.”

This branch of psychology suggests that we inherit tendencies or predispositions that may or may not come into being; the transfer of them into reality depends on the environment one lives in or has lived in. What this shows therefore is that although we may be predisposed to a particular type of behaviour, this behaviour may only come into form if it is nurtured.

The nurturing side of the argument can be understood from exploring concepts such as observational learning and social comparison. Within social psychology, According to Baron and Byrne (2004), observational learning is “a basic form of learning in which individuals acquire new forms of behaviour or through observing others”. An example of this would be a child noting the behaviour or thoughts of the members of his or her household. From this observation, the child would learn how to behave in particular situations. Another similar concept is that of social

comparison, which is “the process through which we compare ourselves to others in order to determine whether our view of social reality is or is not correct.”

When we observe behaviour, we then begin to determine through comparing ourselves to other persons, if the behaviour we are observing is correct behaviour. If the views one holds are in agreement with the views of others, it is easy to arrive at the conclusion that these views must be right. Just as this occurs with behaviour in general, this may also be true for Sexual and Reproductive Health Behaviours. If the individuals we socialise with, hold in high esteem, or impact us immensely have views that support risky sexual behaviour, multiple partners are poor health seeking practices, these may be accepted as correct and adopted. The effect will be intensified if there are predispositions to this type of behaviour.

Another aspect of nurture can be seen through social norms. According to Gaspard-Richards (2008), findings from early Caribbean studies lend support to the view that “encouraging male responsibility in the reproductive process is often affected by traditional social norms.” She went on to explain that “these norms require men to adopt particular overt practices such as multiple sexual partners, limited consideration of Family Planning and method use and lack of couple communication in respect of reproductive decision making.”

In the 2008 Reproductive Health Survey (2008) an example of this can be seen in condom negotiation between females and their male partners. Survey results show that of females aged 15-49 years who asked their partners to use a condom, 20.6 percent of their partners refused to use a condom, 7.5 percent said their partners forced them to have sex without a condom, 6.6 percent said their partner refused to have sex with them and 2.8 percent said he threatened to break up with them.

These social norms also explain what notions of masculinity include. In an article compiled by Eckman et.al (2005) the topic “norms of masculinity” was discussed where it was stated that “masculinity is linked to sexual exploits and being in control”. This point is emphasised in the article *Adolescent Male Survivability in Jamaica* where Gayle (2002) stated that with respect to sexuality/sexual identity, “the male exhibits his manhood through sexual exploits and the higher the number of women with whom he is involved sexually, the greater his achievement. He provides evidence of this through the number of offspring he produces.”

In essence therefore, Male Sexual and Reproductive Health Behaviour may be more largely dependent on the social norms that are in existence within the country one is from as well as from the subcultures one is a part of. This includes, the community one is a part of, the peers one socialises with and the practices of that group. The concept of masculinity, which is denoted by the number of sexual exploits as well as the number of children a man has had (Gayle, 2002) may be the driving force behind Male Sexual and Reproductive Health Behaviour. It must be noted however that there may be slight differences with changes in socio economic status and level of education as other factors in conjunction with these would influence Male Sexual and Reproductive Health Behaviour. But where do the ideas on manhood and masculinity come from. How are behaviours nurtured? Are they from exposure to popular culture, social learning, or both?

#### *Pre-developed Attitudes*

An individual's attitude, which develops into behaviour towards Male Sexual and Reproductive Health may be a result of social learning. According to Baron and Byrne (2004), social learning is "the process through which we acquire new information, forms of behaviour, or attitudes from other persons." Social learning begins in the home and therefore starts with the influence of those in the home environment which may include parents or guardians, siblings and extended family members. If a child, for example, is brought up in an environment that sees no value in delaying sexual intercourse, or engaging in responsible SRH behaviour he/she may develop a similar attitude towards the activity. The views of individuals are therefore based on their interaction with others and their observations of the behaviour of others.

While it is possible for them to develop their own opinions, the value they have on sex itself may be influenced accordingly based on these early interactions or observations of behaviour. In the same breath if a young boy is conditioned to believe that males have no part or a limited role in responsible sexual behaviour and the woman is the person that should be concerned about these matters, this will come across in this behaviour with a future partner and may result in the conditioning of their own child to behave in a similar manner.

#### *Parental Influence*

The socialisation of an individual has a major impact on the decisions he or she will make later on in life. The way he or she processes values and attitudes towards sex is a crucial part of this process. In

the home, a child receives his or her first exposure to the culture of his/her society in addition to subcultures which may be professed by family members. If the parents or guardians of a child therefore are not open to discussing this type of information or do not provide him/her with the correct information and healthy environment, negative or ill-informed attitudes will be formed and displayed. Therefore the values and attitudes of an individual's parents/guardians can impact their own.

In addition, if parents/guardians are not willing to educate themselves with regard to the information their children need to be aware of and are of an open mind, the children will not receive the type of motivational support they require to abstain successfully or practice responsible sexual behaviour. This is especially important as according to the 2008 RHS, parents are one of the top two (2) sources that young adult males between the ages of 15 and 24 selected as their preferred source for Health and Family Life Education Information. Teachers were selected as the top preferred source at 28.7 percent with Parents/Guardians at 27.4 percent. Tying in the previously mentioned aspects of popular culture explored, if television programmes are not monitored so that children are not exposed to sexually explicit imagery early on, and if care is not taken regarding their level of exposure to sexual influences, this may transfer into poor SRH decision making.

#### *Home Environment*

It is also difficult for adolescents who live in conditions where the visible display of sexual acts is the norm. For some individuals in inner-city areas, due to the limitations of space and many individuals having to share a room in some instances, children and adolescents may be exposed to parents, sisters, brothers or other family members having sexual relations with outside parties.

If there are even attempts to hide what is occurring, by drawing a curtain or pulling up a door, in many instances images can still be distinguished and sounds heard. These instances although seeming insignificant to members of the household at the time, can greatly impact a child's perception of sex.

#### *Social influence*

Adolescents may also have a difficult time understanding which messages are the correct ones to adopt if their peer group has a negative view of responsible sexual behaviour. This group may have

their impact through social influence. According to Baron and Byrne 2004, social influence is “efforts by one or more individuals to change the attitudes, beliefs, perceptions, or behaviours of one or more others.” There may be expectations within a group that an indication of manhood is how many sexual partners you have or how sexually active you are. According to the Caribbean Male Action Network (2008), when men were asked about their views on HIV/AIDS, STIs and safe sex as well as pornography and sex in general, some responses included : “from I know the girl will give me, I not letting it pass,” “ no matter how you educate people, they will always be horny and want to lash” and “ it’s a huge deal to know how to give good sex.”

From these responses it can be seen that some males view sex as an opportunity that cannot be missed and that it is imperative that their sexual performance also not be in question. Individuals who will be mostly affected by group influence however are individuals who are trying to conform for social acceptability. According to Baron and Byrne (2004), conformity is defined as “a type of social influence in which individuals change their attitudes or behaviours in order to adhere to existing social norms.” If the desire to conform is strong enough, individuals will change their behaviours to gain acceptance from others. This is also applicable to female adolescents. The fear of rejection can also lead to increased conformity. If individuals for whatever reasons do not want to leave their group and they witness another person being ridiculed for not adopting the group behavior, they may increase their level of compliance to ensure that they will not be put in a similar situation.

There are adolescents who are not affected by peer influence, however if they already suffer from low self esteem or due to problems in the home are seeking a sense of belonging with another group, they may be more susceptible to the influence of others.

### **How influential is popular culture?**

Although some aspects of popular culture can be seen as influential on Male Sexual and Reproductive Behaviour such as increasing sexual desire and early initiation, in some cases it may lead to safer sexual practices regarding the use of condoms. The effect on behaviour however, depending on the aspect of popular culture being examined may have a more prominent impact on females. Also, when comparing the impact to social norms and other influencers it can be argued that popular culture in essence is only as influential as ones predisposition to its effect, one’s level of

exposure to it as well as the perceptions of influential other's value of it. Simply put, if one is taught to view popular culture in such a manner as to accurately dissect the positive from the negative by influential others, usually ones decision making regarding Reproductive Health should reflect this education and these observations. If an individual is predisposed to destructive or reckless behaviour, whether this behaviour is nurtured or not may also impact this decision making. Therefore popular culture on its own cannot affect behaviour without the perceiver of popular culture being predisposed and nurtured to accept or reject these behaviours.

### **Conclusion**

Popular culture therefore while influential on Male Sexual and Reproductive Behaviour is only as influential as the person viewing it lets it be based on social learning and inherited tendencies. Popular culture is a reflection of some social norms, however their impact will be most great when what is observed in popular culture mirrors the life of the individual viewing it and the ideologies he or she has been nurtured to accept.

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