

Music as a source of reproductive health education among adolescents in Jamaica: who will contextualise the issues?

Desmalee Holder-Nevins

Background

Adolescence, that part of the life course when health is shaped by an interplay of physical, psychological, social and environmental factors, is a special time for supportive relationships and care. Some of the challenges faced by adolescents include poverty and a culture supporting of early sexual debut with the ripple effects of teen parenting and sexually transmitted infections including HIV.

Popular media – including the Internet, music and television – often raise concerns in so far as they contribute to unqualified exposure of adolescents to sexual information, sometimes with the potential for more harm than good. Have the media taken over from parents, educators and other socialisation agents with respect to building a value system relevant to sexual and reproductive health (SRH)?

Control measures targeting adolescents are an essential aspect of strategies to achieve the Millennium Development Goal of halting and reducing the spread of HIV and other CDs. Understanding adolescents, their language, culture and interests, is a starting point in helping them to appreciate the risks as well as the options available to them to preserve their sexual health and well-being. The quality and kinds of communication levelled at adolescents on these issues must be considered as part of any risk reduction intervention.

The socio-cultural environment from one country to another is diverse and some issues may be more of a problem in some communities than in others. In contemplating issues of communication about reproductive health for adolescents, consideration must be given to the relevant elements in the socio-cultural environment that can inform actions to influence sexual health risks in this target group. Some of the key focus areas are the media (particularly popular music), levels of parental support and guidance, and the availability or absence of communication opportunities to balance socio-cultural influences.

This paper highlights how Caribbean popular music, enjoyed by adolescents throughout the region and worldwide, is also a source of reproductive health education (and attitude formation) and how young audiences may stand in need of debriefing in order to better understand its strengths and limitations. The same issues apply to many other popular art forms in global youth culture with a bearing on CDs and NCDs.

A national sample of 1,626 adolescents in the age group 9-18 years and from a range of public schools were interviewed in Jamaica using a structured questionnaire. Questions sought to assess awareness of sexual and reproductive health messages

promoted by the Ministry of Health and through dancehall, the local genre of music. The survey used multi-stage stratified cluster sampling techniques. The data were analysed using the Statistical Package for the Social Sciences (SPSS) Version 12.0. Exploratory qualitative methods were also used sequentially to allow other adolescents recruited purposefully to share their perspectives on reproductive health issues in selected song lyrics and the involvement of parents and guardians in debriefing initiatives about such issues. The findings of this research have been published elsewhere (Holder-Nevins et al., 2009; 2011) and this commentary highlights some of the key elements discussed.

Key findings

Where are adolescents getting information about SRH issues?

- Just over half (53.8 per cent) of respondents reported discussing sexual matters with their parents and guardians. Younger children (9–11 years) and boys were less likely to report having such discussions.
- Among standard SRH messages (condom use, abstinence, delaying sexual debut and having one faithful partner), boys were more likely to report hearing the condom messages while girls reported hearing all the other messages.
- 25 per cent of boys and 40 per cent of girls reported getting one or more standard SRH message from their mothers and even fewer (approximately 20 per cent each) from fathers.
- Television (77 per cent), radio (55 per cent) and guidance counsellors (55 per cent) were the sources of standard SRH information for the majority of adolescents.
- The diversity of the Jamaican family structure was confirmed in this study. One in five adolescents live with relatives or guardians other than their parents while another 37 per cent live with their mothers and 36 per cent live with both parents.

What is the role of popular music in SRH education in Jamaica and how are parents involved in the process?

- 93 per cent of Jamaican adolescents like to listen to music.
- 53 per cent have a preference for the dancehall genre while 22 per cent prefer hip hop and rhythm and blues.
- While 78 per cent of these adolescents dislike the often sexually explicit lyrics in dancehall, a fair proportion (19 per cent) likes them.



Young people dancing for fun and health

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- Happy feelings (expressed as, 'Feeling to dance and sing along') is the mood most commonly described by adolescents (79 per cent) as being triggered by dancehall music. However 14 per cent of adolescents are likely to experience pensive moods often bordering on sexually related feelings. For some boys this boosts their ego to make advances to girls.
- Common sexual and reproductive health themes that most Jamaican adolescents have gleaned from dancehall include condom use, abhorrence of men who have sex with men (MSM) and multiple relationships.
- Most adolescents who report hearing messages about condom use and pregnancy prevention also report that it is their desire to use condoms and prevent pregnancy.
- Almost three quarters of adolescents will hear messages relating to abhorrence of MSMs and more than a third will feel they should hurt such persons.
- Boys who report liking and listening to songs about multiple relationships are 10 times more likely than girls to say they desire having multiple relationships.
- Adolescents are able to enjoy dancehall music without intrusion from their parents and guardians, who often perceive this music as 'noise' and prefer not to hear it. Some adolescents resort to private listening facilitated by personal digital devices or home devices in the absence of parents. They do this despite being conscious that their parents do not agree with or sanction listening to some SRH messages in the music.
- Though in the minority, some adolescents think their parents agree with messages about hurting MSMs, transactional sex and multiple relationships. However, even fewer feel their parents would approve of them listening to such messages.
- Most adolescents believe their parents would agree with messages about condom use and would also approve of them listening to music with such lyrics. Girls are more likely than boys to think that their parents agree with pregnancy prevention messages and would approve of them listening to songs with such lyrics.

Discussion of the issues

The study has confirmed that the electronic media constitute the major sources of SRH education among adolescents in Jamaica, far

outstripping sources such as parents and school entities. Could it be the case that parents are content to leave this vital function to chance? Or is it that the media are so pervasive that they more readily affect the mind, blocking out other subtle messages? Whatever the answer there needs to be some balance in order to clarify issues and provide different contexts for their interpretation.

The proportion of respondents who reported that they get SRH messages from mothers or fathers suggests a serious breakdown of the communication process. Are parents too busy to spend time communicating with children? Are they empowered to do so? Since such parenting behaviours can be perpetuated when adolescents themselves become parents, the need for parental involvement must be addressed.

Action points

- 1. Improved communication:** This requires parents and other responsible adults interfacing with adolescents to become aware of the kinds of SRH messages in dancehall and recognise that these can be entry points for discussing SRH issues with less embarrassment.
- 2. Training:** Parents/guardians, counsellors and peer leaders need to be trained in how to engage in debriefing sessions to deconstruct SRH messages in dancehall.
- 3. Sanction v. activation:** Media policies to ban broadcasts of dancehall songs with explicit lyrics will not halt access to such content. Sanctions and criticism of the music is more likely to encourage private use, lead to less open discussion of the issues advocated in such music and increase adolescents' dependence on singers for this informal SRH education. Activation of adolescents' skills to apply value judgment when such lyrics are encountered will be more productive.

4. Partnership: Musicians are in business to make money and are more likely to benefit from efforts to sideline their music. They may opt to take it underground where the value increases. On the other hand any partnership with them must focus on how their careers can be advanced with clean lyrics.

5. Understanding the cultural context: A key socio-demographic factor that must be considered is the family dynamics and structure of the average Jamaican adolescent. As such many will not have stable family relationships to support sex-role socialisation. Advocacy for the education system and other social groups to perform such role is warranted.

References

- Holder-Nevins, D., Eldemire-Shearer, D., McCaw-Binns, A. (2009). Competition for adolescents' sexual and reproductive health values: is the media winning? *West Indian Med J*, 58 (4): 326–330.
- Holder-Nevins, D., James, K., Bailey, A., Eldemire-Shearer, D. (2011). Are parents in tune with music their adolescent children enjoy? Are there missed opportunities for sexual and reproductive health dialogue? *West Indian Med J*, 60 (2).

Desmalee Holder-Nevins holds a PhD in Public Health and is a lecturer in health promotion at the University of the West Indies, Mona Campus, Jamaica. Her career spans 34 years in Public Health – 20 at the community level, 11 in academia and three in administration. Her major research interest is adolescent health and well-being.