The impact of neighborhood disadvantage on adolescent women’s romantic relationship development

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Abstract:

**Purpose:** Neighborhood-level disadvantage is an influential context for adolescent sexual risk behaviors, yet little is known about how this same context of disadvantage may impact the characteristics of romantic relationships that precede and organize sexual decision-making. Since many partners are met through neighborhood networks, differing levels of neighborhood disadvantage may impact the developmental trajectory of relationship attributes over time.

**Keywords:** adolescent women | romantic relationships | published abstract | geographic impacts

Article:

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**Methods:** Data were drawn from a longitudinal cohort study of sexual relationships and sexual/contraceptive behavior in middle to late adolescent women (N=385, 14-17 years) residing in areas of high rates of adolescent pregnancy/STI. Individual and partner-specific quarterly interviews elicited information on residential zip code and relationship emotional and behavioral content. Using this zip code, we used publically available websites to extract neighborhood-specific disadvantage information. Relationship variables were: relationship quality (6-item index; alpha=0.94), sexual satisfaction (7-item index; alpha=0.95), sexual communication (3-item index; alpha=0.85), sexual autonomy (4-item index; alpha=0.90), condom use efficacy (6-item index; alpha=0.91), impulsive reasons for sex (5-item index; alpha=0.80) and emotional reasons for sex (5-item index; alpha=0.90). Neighborhood disadvantage was: economic deprivation (percent below poverty, percent unemployed, median income; alpha=0.96), residential instability (population density, percent owner occupied, percent houses/rentals vacant,
percent population under 18; alpha=0.76), race/ethnicity concentration (percent each: African-American, immigrant, and Hispanic; alpha=0.85) and one single item, male-female ratio. Linear mixed effects growth modeling evaluated the impact of neighborhood-level traits on the trajectories of relationship-specific variables (Stata, v.13). Random effects approaches allowed the intercept and slopes to vary randomly across neighborhoods and to account for clustering within relationships. All models controlled for age and race/ethnicity.

Results: Development in all relationship attributes varied significantly across neighborhoods (all p<.05; intraclass correlation coefficient: 0.07 to 0.26). A higher ratio of men to women in a given neighborhood was associated with lower relationship quality (p=.049), lower sexual communication (p=.023) and lower condom use efficacy at the start of a relationship (p=.022), and with more rapid growth in impulsive reasons for sex over time (p=.002). Higher economic deprivation was associated with lower sexual autonomy (p=.007) and lower condom use efficacy (p=.035) at the start of a relationship, and with slowed growth in relationship quality (p=.068), condom use efficacy (p=.045) and emotional reasons for sex (p=.005) over time. Greater residential instability was associated with lower sexual autonomy at the start of a relationship (p=.004), and with slower growth in relationship quality (p<.001), sexual satisfaction (p=.068), sexual communication (p=.049), condom use efficacy (p=.002) and emotional reasons for sex (p=.003). Neighborhood race/ethnic concentration did not significantly impact relationship development.

Conclusions: Different aspects of neighborhood disadvantage negatively impact development of important attributes in young women’s romantic/sexual relationships. These results suggest that clinician and health educator strategies to help adolescents cultivate healthy relationships should additionally consider the neighborhood context in which young people live, rather than solely targeting characteristics within a given relationship. Further, these data also suggest that community development supporting programs and policies could play an important role in reducing negative sexual health outcomes (e.g., unintended pregnancy and STIs).

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