

# Contextualizing Gender and Acculturative Influences on Sexual Initiation of Asian Indian Emerging Adults

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Published online: 4 November 2017  
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**Abstract** Although Asian Indians represent one the fastest growing demographics in the United States, no studies exist on the sexual behavior of Asian Indian youth or its association with acculturation. Previous research has demonstrated a link between earlier sexual initiation and subsequent sexual risk and the role of acculturation and sexual initiation in other Asian groups. The present exploratory study examined gender and acculturation with regard to sexual initiation in Asian Indians ( $n = 37$ ). Results reveal no significant gender differences in sexual initiation and total acculturation scores. Gender differences did emerge for the association among sexual behaviors and the influence of specific areas of acculturation on sexual initiation. Findings suggest that gender and acculturation may be important variables in understanding sexual behavior but that current acculturation measures may be insufficient to adequately assess acculturation levels of Asian Indian youth. Future research should focus on Asian Indians as an understudied minority group.

**Keywords** South Asian · Asian Indian · Sexual initiation · Acculturation · Gender

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## Introduction

South Asians have become the fastest growing ethnic group in the United States (US), surpassing Latinos (South Asian Americans Leading Together 2012). Specifically, Asian Indians, or those originating from India or Sri Lanka, are the third-largest Asian American group in the US, with 87.2% of Asian Indian adults being foreign born (Pew Research Center 2014), and Asian Indians are an educated and high-earning population in the US, with 70% of adults having a college degree and an average income of \$88,000 (Pew Research Center 2014). Unlike many other immigrant groups, the large majority of Asian Indians have a high proficiency of the English language due to being taught English as school children (Bharmal et al. 2014). Because of these factors, Asian immigrants are often viewed as the “model minority” in the US (Ngo and Lee 2007).

Because Asian Americans are seen as a model minority, research into the prevalence and manifestation of risk behaviors in this group is especially limited (Meyers 2006). Asian Indian adolescents may be at greater risk for mental and behavioral health issues due to acculturative stress, or the impact of adapting and adjusting to a new culture (Ahmad et al. 2005). Immigrants are at greater odds for experiencing psychopathology, especially second generation and darker skinned immigrants—both characteristics of many Asian Indian youth in the US (Dealberto 2007). Acculturation is the process in which minority groups may modify their values, norms, attitudes, and behaviors as a result of exposure to the majority group (Ford and Norris 1993). However, there are few validated acculturation measures for Asian Indians in the US, and most of these use proxies such as language and duration of residence, which may not accurately gauge the level of acculturation for this group (Bharmal, Hays, and McCarthy).

When immigration is compounded with developmental, emotional and social changes in adolescence, it can be a stressful and life-changing process entailing profound challenges (Ahmad et al. 2005). Asian Indians hold strict ties to cultural traditions and beliefs as they aim to affirm their ethnicity in the US; in addition, Asian Indian youth are strongly socialized within their families to maintain the traditional values and lifestyles of their own collectivist culture (Farver et al. 2002). However, they must combine the belief that family is integral to self with the individualistic culture of the US, which may trigger behavioral health issues (Ingoldsby and Smith 2006).

The Centers for Disease Control and Prevention (CDC) lists sexual risk taking as one of the six leading health-risk behaviors in youth (CDC 2014). Early sexual initiation has been associated with greater frequency of sexual intercourse, increased number of sexual partners, lower contraception and condom use, and sexual intercourse under the influence of alcohol (Miller et al. 1997; Sandfort et al. 2008; Santelli et al. 2000), all of which contribute to contracting a sexually transmitted infection (STI) during adolescence (Cooker et al. 1994; Kaestle et al. 2005).

Most national examinations of sexual trends of US adolescents do not specifically demarcate Asians (e.g., Youth Risk Behavior Surveillance System), and prior

research examining sexual behavior in Asians has focused on Asian groups other than Asian Indians (Grunbaum et al. 2000; Hyeouk et al. 2006; Hou and Basen-Engquist 1997; Lau et al. 2009). No studies exist on the sexual behavior specifically of Asian Indian youth in the US or its association with acculturation; however, studies examining sexual behavior in Asian Indian youth can provide valuable insight into this population's vulnerability for risk. The purpose of the study was exploratory: to examine Asian Indian sexual initiation within the context of gender and acculturation. Specifically, the present study examined whether specific aspects of acculturation (e.g., food, community associations, etc.) were associated with sexual initiation to help better inform the development of future acculturation measures and whether gender differences were present. The study aims to help provide a focus on Asian Indians in hopes to better understand health disparities and clinical implications of this understudied population.

## Method

### Participants

The sample consisted of 37 Asian Indians between the ages of 18–29. Asian Indians in the present study included those individuals of Asian Indian ( $n = 27$ ) or Sri Lankan ( $n = 10$ ) descent. Slightly more participants were female ( $n = 20$ ) than males ( $n = 17$ ). Specific ages were not queried to increase anonymity during survey completion. Individuals younger than age 18 were excluded to decrease the frequency of incomplete sexual timetables and individuals older than age 30 were excluded to prevent any possible cohort effects.

### Data Collection

Participants were recruited using links posted on social media sites. Interested persons clicked on links directing participants to an electronic consent document previously approved by the IRB. Once consented, participants meeting inclusion criteria were routed to the complete the questionnaire described in the *measures* section. All participants under age 18 and over age 30 were routed to the end of the survey. Participants completed the demographics and sexual initiation measure and a modified version of the *Suinn-Lew Asian Self Identity Acculturation* (SL-ASIA). Participants answered other questions not immediately relevant to the current analyses, and are therefore not described here. The study was based on retrospective accounts of adolescent sexual initiation. The present study is cross-sectional and all assessments were administered in one session. Total time for survey completion was about 15–30 min.

## Measures

### *Demographics and Sexual Initiation*

An author-constructed measure was used to gather information on demographic characteristics (e.g., age, gender, ethnicity) as well as age of sexual initiation for Kiss, French Kiss, Touch Breast, Touch Penis, Touch Vagina, Oral Sex and Sexual Intercourse. Response choices for age of sexual initiation included: younger than 12, age 12, age 13, age 14, age 15, age 16, age 17, age 18, older than age 18, never engaged. These response choices were re-coded as number one through 10.

### *Acculturation*

South Asian participants completed a modified version of the SL-ASIA to measure acculturation. The SL-ASIA is the leading scale on Asian American acculturation (Ponterotto et al. 1998). The wording of the SL-ASIA was originally developed to assess acculturation in East Asian populations, but was modified for the present study to include terminology that aligned Asian Indian culture (e.g., including Hindi as a language example). The SL-ASIA scale assesses cognition, behaviors, and attitudes, and is comprised of five factors: (1) reading, writing and cultural preference, (2) ethnic interaction, (3) ethnic identity and pride, (4) generational identity, and (5) food preference. The questionnaire includes 21 multiple-choice questions.

## Data Analytic Plan

Analyses were conducted in SPSS 17.0. First, means and standard deviations were calculated for total acculturation score and age of initiation by gender. Second, a 2 (gender)  $\times$  7 (sexual behavior) ANOVA and a 2 (gender)  $\times$  21 (acculturation) Chi square test was used to determine group differences between age of sexual initiation and acculturation variables of female and male Asian Indians. This was supplemented with a Pearson's product-moment  $r$ -test to determine the inter-relatedness of sexual initiation across the timetable for each gender. Third, regression analyses were run to determine the relationship between acculturation (both total score and specific questions) and sexual initiation. Parallel regression analyses were conducted for each gender. Since ethnicity was homogenous and specific age was unknown, covariates were not included.

## Results

### Sample Characteristics

The average acculturation total score for females was 64.25 ( $SD = 9.88$ ) and for males was 61.75 ( $SD = 12.67$ ). Females reported being either first generation ( $n = 6$ , 30%) or second generation ( $n = 14$ , 70%). Males also reported being either

first generation ( $n = 9$ , 52.94%) or second generation ( $n = 6$ , 35.29%), with one participant unsure and one incomplete acculturation scale (Table 1).

## Descriptive Data

Cronbach's  $\alpha$  was calculated to determine the internal consistency of age of sexual initiation and the modified SL-ASIA, which were found to be within the acceptable range ( $\alpha = 0.89\text{--}0.92$ ). No outliers were detected at the  $\pm 3$  standard score using Mahalanobis distance. Skewness ( $-1.45$  to  $0.11$ ) and kurtosis ( $-0.85$  to  $2.34$ ) values were also in the acceptable range.

## Sexual Initiation by Gender

No differences between genders emerged for sexual initiation (Table 1). For female participants, the mean response was age 17 for kiss ( $m = 7.20$ ,  $SD = 2.57$ ), age 18 for French kiss ( $m = 7.75$ ,  $SD = 2.05$ ), touch breast ( $m = 8.30$ ,  $SD = 1.53$ ), touch penis ( $m = 8.40$ ,  $SD = 1.43$ ), and touch vagina ( $m = 8.45$ ,  $SD = 1.32$ ), and older than age 18 for oral sex ( $m = 8.70$ ,  $SD = 1.34$ ) and vaginal sex ( $m = 9.10$ ,  $SD = 0.64$ ). Among male participants the mean response for kiss was age 16 ( $m = 6.00$ ,  $SD = 3.08$ ), age 17 for French kiss ( $m = 7.19$ ,  $SD = 1.91$ ), age 18 for touch breast ( $m = 7.65$ ,  $SD = 1.32$ ), touch penis ( $m = 7.82$ ,  $SD = 1.29$ ), touch vagina ( $m = 8.18$ ,  $SD = 1.29$ ), and oral sex ( $m = 8.29$ ,  $SD = 1.21$ ), and older than age 18 for vaginal sex ( $m = 8.59$ ,  $SD = 1.28$ ).

An examination of the correlation between sexual behaviors revealed differences by gender. For female participants, all sexual behaviors were significantly ( $p < 0.01$ ) related, except for French kiss and sex which was approaching significance ( $p = 0.067$ ). For male participants, kiss and French kiss were significantly ( $p < 0.05$ ) related to each other and the less intimate behaviors of touch breast and touch penis. Touch breasts and touch penis, however, were significantly related to all sexual behaviors. Other behaviors—touch vagina, oral sex

**Table 1** Sexual initiation and acculturation total score by gender

	Females ( $n = 20$ )		Males ( $n = 17$ )		F	<i>p</i>
	Mean	<i>SD</i>	Mean	<i>SD</i>		
Acculturation total score	64.25	9.88	61.75	12.67	0.44	0.51
Kiss	7.20	2.57	6.00	3.08	1.67	0.21
French Kiss	7.75	2.05	7.19	1.91	0.71	0.40
Touch breast	8.30	1.53	7.65	1.32	1.90	0.18
Touch penis	8.40	1.43	7.82	1.29	1.64	0.21
Touch vagina	8.45	1.32	8.18	1.29	0.41	0.53
Oral sex	8.70	1.34	8.29	1.21	0.92	0.35
Sexual intercourse	9.10	0.64	8.59	1.28	2.48	0.12

and vaginal sex—were significantly related to all behaviors except kiss and French kiss (Table 2).

### Acculturation and Gender

No differences were found between female and male participants on most questions of acculturation and acculturation total score. Females and males did significantly differ on their contact with their country of origin ( $F_{(1,34)} = 4.15, p = 0.05$ ), with males endorsing greater contact than females. Gender differences did not emerge for the influence of total acculturation on sexual initiation.

However, gender difference did emerge when examining specific acculturation variables and their influence on sexual initiation (Table 3). Female sexual initiation for French kiss ( $\beta = -0.54$ ), touching breasts ( $\beta = -0.63$ ), and touching penis ( $\beta = -0.46$ ) were negatively associated ( $p < 0.05$ ) with paternal ethnic identification (e.g., father's choice to identify as Indian, Indian-American, American, etc.). Female age of initiation for French kiss ( $\beta = -0.46, p = 0.04$ ) was also negatively associated with who they currently associate with in the community (e.g., exclusively with Asians, mostly with Asians, exclusively with non-Asians, etc.). The initiation for more intimate sexual behaviors, including touching breasts ( $\beta = -0.48$ ), touching penis ( $\beta = -0.50$ ), touching vagina ( $\beta = -0.46$ ) and oral sex ( $\beta = -0.45$ ) in females was negatively associated ( $p < 0.05$ ) with food preference (e.g., exclusively Indian food, mostly Indian food, exclusively

**Table 2** Correlation among sexual behaviors by gender

	Kiss	French kiss	Touch breasts	Touch penis	Touch vagina	Oral sex
Female						
Kiss	–					
French kiss	0.88 <sup>b</sup>	–				
Touch breasts	0.76 <sup>b</sup>	0.80 <sup>b</sup>	–			
Touch penis	0.78 <sup>b</sup>	0.79 <sup>b</sup>	0.96 <sup>b</sup>	–		
Touch vagina	0.78 <sup>b</sup>	0.77 <sup>b</sup>	0.95 <sup>b</sup>	0.99 <sup>b</sup>	–	
Oral sex	0.71 <sup>b</sup>	0.76 <sup>b</sup>	0.87 <sup>b</sup>	0.94 <sup>b</sup>	0.94 <sup>b</sup>	–
Sexual intercourse	0.53 <sup>a</sup>	0.42 <sup>c</sup>	0.61 <sup>b</sup>	0.64 <sup>b</sup>	0.69 <sup>b</sup>	0.71 <sup>b</sup>
Male						
Kiss	–					
French kiss	0.84 <sup>b</sup>	–				
Touch breasts	0.75 <sup>b</sup>	0.88 <sup>b</sup>	–			
Touch penis	0.68 <sup>b</sup>	0.73 <sup>b</sup>	0.96 <sup>b</sup>	–		
Touch vagina	0.35	0.46	0.74 <sup>b</sup>	0.85 <sup>b</sup>	–	
Oral sex	0.35	0.46	0.69 <sup>b</sup>	0.80 <sup>b</sup>	0.97 <sup>b</sup>	–
Sexual intercourse	0.25	0.38	0.58 <sup>a</sup>	0.67 <sup>b</sup>	0.85 <sup>b</sup>	0.85 <sup>b</sup>

Denotes significance at <sup>a</sup> $p < 0.05$ ; <sup>b</sup> $p < 0.01$ ; <sup>c</sup>approaching significance

**Table 3** The influence of acculturation on sexual initiation

	Female				Male			
	Paternal identification	Community association	Food preference	Personal rating	Association preference	Immigrant generation	Maternal identification	Raised
Kiss					- 0.61			- 0.49 <sup>a</sup>
French kiss	- 0.54					- 0.63		
Touch breast	- 0.63	- 0.46	- 0.48	- 0.44 <sup>a</sup>				
Touch penis	- 0.46		- 0.50					
Touch vagina			- 0.46					
Oral sex			- 0.45				- 0.49 <sup>a</sup>	
Vaginal sex							- 0.53	

All significant at  $p < 0.05$ , except when otherwise noted <sup>a</sup>approaching significance

American food, etc.). Female initiation for French kiss ( $\beta = -0.44$ ,  $p = 0.051$ ) was also approaching significance for its association with how they would rate themselves (e.g., very Indian, mostly Indian, very westernized, etc.).

For males, age of initiation for kiss ( $\beta = -0.61$ ,  $p = 0.01$ ), French kiss ( $\beta = -0.63$ ,  $p = 0.01$ ), and vaginal sex ( $\beta = -0.53$ ,  $p = 0.04$ ) was negatively associated with who they would pick to associate with in the community, their immigrant generation (e.g., first, second), and maternal ethnic identification, respectively. Age of initiation for kiss ( $\beta = -0.49$ ,  $p = 0.055$ ) and oral sex ( $\beta = -0.49$ ,  $p = 0.052$ ) in males was also approaching significance in its association with where they were raised (e.g., only India, mostly India, only America, etc.) and maternal ethnic identification.

## Discussion

The present study was exploratory in its examination of the influences of gender and acculturation on sexual initiation in Asian Indians. Almost all sexual research in Asian Indians have focused exclusively on HIV risk in adults due to male to male contact, intimate partner violence, sex trafficking, and drug use (Beyrer et al. 2000; Brahman et al. 2008; Silverman et al. 2006). No studies to date have explored the development of sexual behavior in Asian Indian youth, including those who have immigrated to the US. This is the first study to date to examine sexual behavior, specifically sexual initiation, in a sample of Asian Indians in the US. Females and males did not significantly differ on their ages of sexual initiation, almost all questions of acculturation, and total acculturation score. However, different patterns by gender regarding sexual initiation and correlations between sexual behaviors, as well as the influence of specific areas of acculturation on sexual initiation, were found.

Findings align with previous research on other Asian youth, which reflect delayed sexual initiation across all behaviors (Feldman et al. 1999). Though females were more acculturated than male participants, males had slightly earlier ages of sexual initiation across behaviors. This also supports prior research, which suggests that among Asian males, regardless of acculturation levels, sexual behavior was accepted and encouraged (Hyeouk et al. 2006). This may contribute to gender differences in the correlation among sexual behaviors. Because sexual behavior is more acceptable for males, they may engage in different sexual behaviors with different sexual partners, thereby limiting the correlation among behaviors. Females, on the other hand, may delay sexual behavior with one particular partner, but once initiated may have less time between initiation of sexual behaviors—increasing the correlation among behaviors.

Only one study to date has examined sexual initiation across several sexual behaviors in Asians (Feldman et al. 1999). Even compared to this study conducted almost two decades ago, with youth sexual behavior becoming more permissive since then, the present sample of Asian Indian youth sexual behaviors were delayed. Less than 50% of the sample engaged in their first kiss and French kiss by age 15. For all other behaviors, the large majority of participants waited until age 18 or after



(i.e., post high school), suggesting that Asian Indians may have a slightly delayed onset even compared to other Asian groups. This may be related to more recent immigration to the US than other Asian groups, which results in stronger ties to cultural values and lower acculturation to US norms.

Total acculturation scores were not associated with sexual initiation. Previous research has indicated that current measures of Asian acculturation, focused on other Asian groups, may be inadequate for assessing acculturation in Asian Indians (Bharmal et al. 2014). Widely used acculturation measures, like the SL-ASIA, may inaccurately reflect greater acculturation. For example, questions on English language proficiency give higher scores for speaking and writing in English. However, most Asian Indians are taught English as school children in India and Sri Lanka due to historical British colonial rule; therefore, their English language proficiency is unrelated to US acculturation. Further, questions of ethnic identification provide the lowest score for an “oriental” identification, with which Asian Indians do not identify. To avoid these inaccuracies and to understand which cultural aspects were more strongly associated with Asian Indian acculturation, the authors examined specific questions of acculturation with regard to sexual initiation. Several relationships between specific questions and sexual initiation emerged, again varying by gender. Paternal ethnic identification, current community associations, food preferences, and personal ratings of one ethnic identify were associated with female sexual initiation. Preference for community associations, immigrant generation, maternal ethnic identification, and country in which they were raised were related to male sexual initiation. These questions, unlike several others, are not confounded by verbiage specifically linked to other Asian groups and do not provide falsely inflated scores for Asian Indians, unlike the examples provided above. More robust associations were found for females than males. Again, this may be due to different sexual expectations for genders in Asian cultures, regardless of acculturation. However, it may also be an artifact of the small sample size, and may more accurately reflect that these domains, generally, are important in assessing acculturation in Asian Indians, both female and male. This supports recent research that assessing several domains such as social relationships, food preferences, family, and ethnic identity may be more valid (Bharmal et al. 2014).

The overall patterns suggest that greater acculturation is associated with earlier sexual initiation, but mostly for less intimate sexual behaviors. The reason for this finding may be the dual socialization of Asian Indian youth. While their parents model strong affiliation to cultural traditions and beliefs, they are still adjusting to a sexually liberal US. This suggests that acculturation may influence less intimate sexual behaviors that have less of a reflection on their families, but for more intimate sexual behaviors, which have greater reflection on family and honor, Asian Indians appear to delay initiation. This finding was unlike prior research on other Asian youth which found that greater acculturation was related to an earlier age of initiation for sexual intercourse. Again, this may likely be attributable to the recent immigration of Asian Indians. It may be possible that over time, a stronger association between acculturation and age of sexual initiation will emerge, especially in females where sexual behaviors appear to be highly correlated similar to findings in other Asian groups (Hyeouk et al. 2006).

The present study had several limitations, including sample size, a sexual initiation scale which restricted ages (e.g., imposed floor of age 8 or younger), self-report data in which respondents may under-report behaviors, and it was also cross-sectional and cannot provide causal information. It is also important to note that this study examined and discussed gender as “male” or “female” and did not account for gender fluidity. Therefore, the present findings may not generalize to gender minority or gender fluid individuals (e.g., transgender individuals), and future work should further examine these relationships in both sexual and gender minorities.

## Conclusions

Despite these limitations, acculturation and gender are important factors for understanding sexual risk in Asian Indians. Although Asian Indians continue to be one of the largest growing immigrant populations entering the United States, there remains a lack of research incorporating these individuals. Future research should move past traditional conceptualizations of “Asian” to include growing subgroups that are immigrating into the US and who are also at risk for mental and behavioral health issues. The current findings call for the consideration to address Asian Indians in psychological research to better contextualize the need in this underserved population and to address health and mental health disparities of importance. It should be stated that lack of research on Asian Indians goes far beyond acculturation and sexual initiation, affecting almost all domains of physical and psycho-social development. The reason for this scarcity of information remains unknown. Research must move to addressing the needs of underserved populations which are continuing to be ignored; and what is certain is the need for this immigrant population to be addressed due to their heightened susceptibility to mental and behavioral health issues related to acculturative stress.

**Acknowledgements** We acknowledge the valuable assistance of Paul Garcia with participant recruitment and data collection.

## Compliance with Ethical Standards

**Conflict of interest** The authors declare that they have no conflict of interest.

**Ethical Statements** All procedures in this study were approved by the Institutional Review Board at The University of Houston-Clear Lake, in accordance with the ethical standards of the institutional research committee and with the 1964 Helsinki declaration and its later amendments or comparable ethical standards.

**Informed Consent** Informed consent was obtained from all individual participants included in the study.

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