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Sexuality in Adolescent Relationships

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A normative aspect of the adolescent period is sexual exploration and associated decision making regarding how “far to go” sexually. Transitioning from being a virgin to a sexually active teen is meaningful in terms of both personal and social identity. Teenagers may view sex with a boyfriend or girlfriend as a step toward greater commitment and intimacy in their relationship. It also represents a developmental marker toward adulthood and sets the groundwork for later adult sexual relationships. At the same time, teenage sexual intercourse is a public issue in part because of health concerns stemming from sexually transmitted infections, involuntary sex, and teenage pregnancy.

Sexuality is a broad concept and can refer to many types of sexual behaviors, attitudes, and desires, not just sexual intercourse. Recently, researchers have paid more attention to sexual activities besides sexual intercourse, such as oral sex. Oral sex among adolescents is of interest because of sexual health risks associated with oral sex and the notion that oral sex is a way to satisfy sexual desires and maintain virginity and avoid pregnancy. There is a sense that oral sex is the precursor to sexual intercourse. Although it is important to consider a full range of sexual behaviors (e.g., masturbation, genital stimulation, anal sex, oral sex), this entry focuses on sexual intercourse. This approach could result in excluding sexual minority youth, so they are showcased later in the entry.

Trends

The context of teenage sexuality has changed. In 1950, the median age at marriage for women was 20, so a considerable proportion of teenage sex occurred within the confines of marriage. Today, the average age at marriage is 25.5 for women; as a result, most teenage sex occurs outside of marriage.

Despite the media and public concerns, there has been a slight decline in the proportion of teens who report that they have had sexual intercourse. In 1995, 53 percent of high school students reported having had sex, and in 2005, 47 percent did so. Thus, a considerable proportion of teenagers have not had sexual intercourse prior to graduation. Further, most teens did not recently have sex; only about one third of high school students report having had sexual intercourse in the last 3 months. When studying the sexual behavior of adolescents, it is important to consider their specific ages because the proportion of sexually active youth increases by age, suggesting an important developmental trend. For example, according to the 2002 National Survey of Family Growth, 13 percent of 15-year-olds have had sexual intercourse, but about half of 18-year-olds and 70 percent of 19-year-olds report ever having had sexual intercourse.

Sexual Initiation

Decisions about initiating sexual intercourse include a range of motivations, such as social factors including parental or peer approval/disapproval, opportunities for sexual activity, romantic relationship dynamics, religious beliefs, and perceptions of health beliefs and pregnancy risks. Recent longitudinal analyses, which have included all of these factors, suggest that peer social network behavior and relationship dynamics—being in love, religious beliefs, and opportunity—are significantly related to whether teens initiate sex. Furthermore, situational context factors such as alcohol and drug use

have been found to influence sexual initiation. Some research focuses on the voluntary nature of sexual activity and finds that alcohol and drugs are tied to regrettable or involuntary sexual experiences. Thus, the decision to initiate sexual activity is complex and involves multiple perceptual, social, and interactional domains.

Considerable research attention has been focused on the age in which teens first engage in sexual intercourse. Concerns exist about teens engaging in sexual activity too young based, in part, on empirical evidence that earlier sex is associated with involuntary sex, greater numbers of lifetime sexual partners, and lower and inconsistent contraceptive use. Although the average age at first sex is 17 in the United States, a small subgroup of teens report having had sex at a relatively early age. In 2002, about 14 percent of girls reported having sex prior to age 15; this represents a decline from 20 percent in 1995. Race/ethnicity differences in age at first intercourse exist, with a greater percentage of African-American youth having had sexual intercourse at earlier ages than White or Hispanic youth. Adolescent males are more likely to initiate sexual intercourse at younger ages than adolescent females. Alcohol use is cited by some young teens as a factor associated with initiating consensual sexual intercourse. The vast majority of teenagers' first sexual experiences are with a boyfriend or girlfriend or within the confines of a dating relationship.

Research on very young ages at sexual initiation has focused on statutory rape and involuntary sex. The age at consent differs according to state (most often age 16) and often includes a provision for a legal age gap between partners. Controversy centers around the inconsistent enforcement of these laws. Estimates vary, but nearly one fifth of girls who had sex before age 14 or younger reported it was involuntary.

Sexual Experience

Although nearly half of teens report having had sex prior to age 18, the regularity/frequency of sex and the number of sex partners, on average, are not high. In 2002, the median number of lifetime sexual partners among sexually active 15- to 19-year-old girls and boys was two to three. An indicator of the irregularity of sexual activity is that only about one quarter of sexually active teens had sex during the month prior to being interviewed. Yet among those who did have sex in the last month, about 60 percent of girls and 50 percent of boys had sex four or more times.

Although most teenagers initiate sex with a boyfriend or girlfriend, they may go on later to have sex with someone outside of a dating relationship context. About 60 percent of sexually active teens have had sex at some point with someone they were not dating. However, these nondating sexual relationships are often with friends or ex-boyfriends and girlfriends, and about one third would like to be romantically involved with the sexual partner. Moreover, most teens agree it is best to have sex with someone they love.

Not all teenage sexual relationships share the same norms of fidelity associated with formal adult relationships, such as marriage. Most sexually active teens are monogamous, but to assess cheating behavior, the focus needs to be on teens who have had sex with more than one sexual partner. Two fifths (40 percent) of teens with two or more sexual partners in the 18 months prior to the Longitudinal Survey of Adolescent Health (national survey of 18,924 teens in 1994–1995) had concurrent (overlapping partners), and 60 percent had sequential partnerships. Indeed, some teens in dating relationships report it is okay to see others, and approximately one fifth of dating teens reported their partner was not sexually exclusive.

Correlates

Parents are a key socializing agent and have been found to influence adolescent sexual activity. Nontraditional family structure, lack of supervision, perceived parental approval of teenage sexual behavior, and lower parental attachment are associated with an earlier age of sexual onset. Attachment styles developed with parents are associated with sexual activity initiation, with more securely attached teens having later and more positive experiences.

During adolescence, teens shift away from their family as the primary source of influence, and peers become an important socializing influence, especially in the area of sexual exploration. Studies find that having sexually active friends (or the perception that one's friends are sexually active) and peers with liberal attitudes are related to earlier onset of sexual intercourse. Ethnographic and qualitative research by Elijah Anderson as well as Donna Eder has shown how peer interactions influence views about romance and sexuality, specifically how peer socialization results in distinctively gendered meanings about romance and sexuality, with boys viewing romance as a competitive game where sex is the prize and girls valuing romance and the development of intimacy.

Not surprisingly, having a boyfriend/girlfriend is associated with sexual initiation and activity. H. Harrington Cleveland has accounted for both partners' characteristics and finds that sexual experience of both partners' delinquency and drinking is related to the odds that sex occurred. More attention to characteristics of teenage relationships by Peggy Giordano and colleagues indicates that intimate self-disclosure, caring, and other forms of emotional engagement are positively related to the likelihood of sexual behavior in dating relationships. Healthy or prosocial relationship dynamics are significant predictors of sexual intercourse, and the evidence suggests that boys as well as girls are influenced in their sexual decisions by relationship-centered processes and dynamics.

Research highlighting some of the prosocial characteristics of relationships associated with sexual initiation is important because much prior research has viewed adolescent sexuality through a problem behavior lens, linking sexual behaviors to delinquency, drug and alcohol use, violence, depressive symptoms, smoking and school dropout, or poor academic performance. Researchers have begun to uncover how these problem behaviors are tied together and have recognized that not all teenage sexual behavior is part of a package of high-risk behaviors.

Douglas Kirby's recent review of sex education programs shows that programs which educate teens about contraception as well as encourage abstinence are positively related to delaying sexual and using contraception. To date, programs with an abstinence-only message are not associated with changes in adolescent sexual behavior. One effort to encourage sexual initiation delay that has had some reported success are virginity pledges, which are an effort to provide a community of adolescents who vow to wait to marry before having sex. Peter Bearman and colleagues find that virginity pledges matter for certain teens between ages 14 and 16, but notably are also related to lower contraceptive use when youths who have taken such pledges do have sex.

Social scientists are beginning to connect how social factors are interlinked with

biology in influencing sexual behavior. Adolescents are undergoing biological changes in terms of puberty and hormonal shifts, which have consequences for their physical appearance and sexual desires. Currently, puberty for girls occurs around age 12, suggesting a decline in the age of puberty. New data collections, which include biomarker data, will provide opportunities for innovative studies of the intersection of biology and social indicators on adolescent sexual behavior.

Sexual Minority Youth

Most of the research on adolescent sexual behavior focuses on opposite sex sexual behavior and has ignored sexual minority (gay and lesbian) youth. Attention to sexual minority youth and sexuality often centers on concerns about sexual health, specifically HIV. Measurement challenges persist in identifying gay and lesbian teens, in part, because sexual identity in adolescence may be more fluid than in adulthood as teens struggle to understand their sexual orientation. New work has shown that gay and lesbian teens often engage in heterosexual relationships and have had sex with the opposite sex. At the same time, some teens who identify as heterosexual also have had same-sex sexual relationships in adolescence. Lisa Diamond, Rich Savin-Williams, and Stephen Russell's research has been important groundwork on the sexuality of gay and lesbian teens. It is sometimes difficult for teens who are developing same-sex attractions to deal with potential stigma and lack of norms about how to proceed in relationships, especially during a time when conformity is stressed. Much has been written about depression and alcohol use of sexual minority teens, but additional work should focus on those who successfully explore their sexuality.

Consequences

There has been much attention focused on the negative consequences of teenage sexual activity. Most often the health consequences of adolescent sexual intercourse are highlighted. For instance, recent statistics indicate that 1 in 10 teens has a sexually transmitted infection, about one fifth of young adults reported their first sex was unintended, 750,000 teens get pregnant each year, 82 percent of teen pregnancies were unplanned, and 23 percent of children born out of wedlock were born to teen mothers. More recent research has evaluated the psychological consequences of sexual intercourse, stressing the potential effects on depression. Initiating of sexual activity is associated with increases in depressive symptoms even when accounting for depressive symptoms prior to sexual initiation. To best understand the implications of teenage sex requires sophisticated modeling and longitudinal designs that attempt to address causality and selection issues. Furthermore, it is important to move away from just deficit or problem-centered approaches and incorporate perspectives that acknowledge the potentially healthy and appropriate ways that sexual activity may be integrated into adolescent lives.

- adolescent children
- sexual activity
- sex
- adolescent sexual behavior
- sexual partners
- virginity
- initiation

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See also

- [Adolescence, Romantic Relationships in](#)
- [Sexual Intercourse, First Experience of](#)
- [Sexuality](#)
- [Virginity and Virginity Loss](#)

Further Readings

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