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Lisa D. Lieberman

Eva S. Goldfarb

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RESEARCH



Does First Sex Really “Just Happen?” A Retrospective Exploratory Study of Sexual Debut Among American Adolescents

Lisa D. Lieberman ^a, Eva S. Goldfarb^a, Samantha Kwiatkowski^b, and Paul Santos^c

^aDepartment of Public Health, Montclair State University, Montclair, NJ, USA; ^bCollege of Education & Human Services, University of North Florida, Jacksonville, FL, USA; ^cBureau of HIV Prevention, NYC Department of Health and Mental Hygiene, New York, NY, USA

ABSTRACT

First sex marks a significant transition for most adolescents, yet teens often report that it was unplanned. Seventy-four college students participated in exploratory focus groups about their first sex. Although initially asked whether their first sex was spontaneous or planned, many participants revealed evidence of forethought or anticipation, signifying a third option, anticipation. This study suggests that the development and timing of sexual health messages should build on the apparent, albeit often unacknowledged, planning and thought that accompany the transition to first sex. Specifically, during the time immediately preceding first sex, young people might be particularly open to such messages.

KEYWORDS

Gender; qualitative methods; romantic relationships; sexual debut; sexuality

Introduction and background

Having sex for the first time represents a significant transition for most young people. The concept of “virginity” and the distinction between virgins and nonvirgins are well recognized in the literature on adolescent development and sexual health, in part because of the role of sexual intercourse in identity formation. This emphasis placed on virginity and loss of virginity is particularly salient in the United States, where adolescent sexuality is often deemed to be problematic (Harden, 2014a; Schalet, 2000; Schalet, 2011), and many sex education programs discourage sex before marriage (Herzog, 2008; Luker, 2006; Sales, Komros & Santelli, 2016; Santelli, 2006).

Despite such concerns about sexual initiation, only limited research has explored this transition (Kaplan, Jones, Olson, & Yanzal-Butler, 2013; Kirby, 2007), sought to determine under what conditions or circumstances adolescents have sex for the first time, or whether and what type of discussions or planning take place ahead of time. Such circumstances and planning have potential implications both for the first and subsequent sexual experiences.

CONTACT Lisa D. Lieberman, PhD  lieberman@montclair.edu  Department of Public Health, Montclair State University, 1 Normal Avenue, UN 4203, Montclair, NJ 07043.

Sexual feelings and experiences play fundamental roles in adolescent development (Goldfarb & Lieberman, 2015; Guilamo-Ramos & Bouris, 2009; Moilanen, Crockett, Raffaelli, & Jones, 2010; Mulye et al., 2009). While only a small number (13%) of U.S. teens experience sexual intercourse by age 15, 44% of males and 43% of females report sex by age 17, and 68% of both males and females have had sex by age 19 (Martinez & Abma, 2015). Thus, approximately half of U.S. teens are engaging in their first experience of sexual intercourse during a time when they are likely to be living at home with one or more parents and enrolled in high school.

Despite the potential role that parent-adolescent communication about sex may have (Widman, Choukas-Bradley, Noar, Nesi, & Garrett, 2016), young people report limited, and often fraught, discussions with their parents at a time that is likely to be prior to their first sexual experience (Afifi, Joseph, & Aldeis, 2008; Flores & Barroso, 2017; Goldfarb, Lieberman, Kwiatkowski, & Santos, 2015; Henrich, Brookmeyer, Shrier, & Shahar, 2006; Markham et al., 2010). Moreover, variation in the timing and scope of school-based sex education programs in the United States (Centers for Disease Control, 2015; Guttmacher, 2016; Lindberg, Maddow-Zimet, & Boonstra, 2016) suggest that many young people are engaging in first sex without receiving reliable information that may be helpful to them regarding their sexual health and wellbeing.

Current research regarding adolescents' first experience of sexual intercourse (hereafter termed "first sex") is typically focused on risks (Walsh, Ward, Caruthers, & Merriwether, 2011), for example, which characteristics make certain teens more or less likely to have sex at early ages, and the potential negative consequences of early sex (Berry-Cabán, Jenkins, Goorley, & Gray, 2014; Cavazos-Rehg et al., 2010; Donenberg, Bryant, Emerson, Wilson, & Pasch, 2003; Kaestle, Halpern, Miller, & Ford, 2005; Sandfort, Orr, Hirsch, & Santelli, 2008). There is a dearth of studies that explore first sex among teens or early sexual activity with a more neutral or positive lens, in part due to the challenges of viewing adolescent sexuality as normal and healthy (Sarigianides, 2013). In addition, while there is limited research that focuses on adolescent decision making and experiences related to first sex, literature focused specifically on lesbian, gay, bisexual, transgender, queer, and questioning (LGBTQ) adolescents is virtually nonexistent.

The limited attention in literature to the process of deciding to have sexual intercourse for the first time suggests a widespread belief that first sex largely happens spontaneously. In fact, in a few studies the majority of adolescents, when asked, reported that their first sex simply "happened." (Lieberman & Su, 2012; Lieberman, Gray, Wier, Fiorentino, & Maloney, 2000; Michel, Kropp, Eyre, & Halpen-Felsher, 2005). Specifically, among sexually active ninth graders in rural Georgia (Lieberman & Su, 2012) and eighth and 10th graders in New York City, (Lieberman et al., 2000), only 18% of the New York City youth and 14% of the Georgia youth reported that they had planned their first sex.

A more nuanced exploration of how first sex comes about among adolescents is important because planning has the potential to influence later sexual experiences and relationships. Contraception can play a critical role in reducing risk in both

first and subsequent sex (Sandfort et al., 2008), yet in one study (Widman, Welsh, McNulty, & Little, 2006), half of adolescents reported that they did not discuss contraception or sexually transmitted diseases with their partner before their first sex. Those who do use a condom the first time they have sex (presence of a condom suggesting at least anticipation that sex will occur) are more likely to continue to use condoms in subsequent encounters (Shaffi, Stovel, Davis, & Holmes, 2004; Shaffi, Stovel & Holmes, 2007), and factors such as the closeness of, and length of time in, a relationship before first sex influence the likelihood that adolescents plan for contraception (Ryan, Franzetta, Manlove, & Halcomb, 2007, Shaffi et al., 2007). In one longitudinal study, participants who reported condom use during sexual debut (Cavazos-Rehg et al., 2010) did not differ in the number of lifetime sexual partners, yet were half as likely to test positive for chlamydia or gonorrhea, than those who did not use condoms at first sex. Thus contraceptive use during first sex may play a significant role in later sexual health.

Beyond contraceptive use, other issues related to planning for sex have implications for healthy sexuality and relationships. In particular, an important line of inquiry is the impact of gender on how young people make the transition to first sex. One study suggested that young women more frequently report “planned” sexual intercourse than young men do (Walsh, Ward, Caruthers, & Merriweather, 2011). These authors suggested that girls and young women may see sex as the next level and natural progression of a relationship. Another earlier study found that women who had been going steady with their partners were more likely to report that they planned intercourse (Cohen & Shotland, 1996) and 60% of the women indicated that they were “going steady” with their first partner before engaging in first sex. Meanwhile, other studies suggest that young men tend to expect their relationships to become sexual sooner than young women do and report greater expectations to have sex in a relationship (Bogle, 2008; Manning, Longmore, & Giordano, 2005; Martinez, Copen, & Abma, 2011; Willoughby & Vitas, 2012). Almost all of the men in one qualitative study (Ott, Ghani, McKenzie, Rosenberger, & Bell, 2012) described some preplanning, for example, carrying a condom or locating a space without parents. Further, expectations about the transition to coitus are both different between, and have different consequences for, young women and men (Kraeger, Staff, Gauthier, Lefkowitz, & Feinberg, 2016). Cultural expectations, differential meanings of sex in the context of relationships, and emotional and physical risks may all play a role in how males and females think about and describe their first sexual experiences (Kraeger, Staff, Gauthier, Lefkowitz, & Feinberg, 2016; Wiederman, 2005).

Additionally, there is research to suggest that aspects of sexual debut, such as a positive first experience, have implications for subsequent encounters and satisfaction (Harden, 2014, Smith & Schaffer, 2013, Symons, Vermeersch, & Van Houtte, 2014). Thus, beyond a risk reduction perspective on adolescent health, understanding the degree to which young people plan or anticipate sexual intercourse for the first time can have important implications for interventions and messages aimed at making sexual experiences and relationships healthier, better,

and safer. These may contribute to both reductions in unplanned pregnancy, disease, and negative sexual experiences, while supporting and building healthy, strong relationships. The exploratory study described here sought to engage college youth in discussions about whether and how they planned and prepared for sexual debut.

Methodology

The research described here¹ is a qualitative study including first- and second-year college students ($N = 74$), who participated in focus groups at a northeastern U.S. university. Students were recruited via campus-wide emails with the subject: *Would you tell us about your first time?* Given the study's focus on planning and decision making about sexual debut, the recruitment notice stated explicitly that the researchers were interested in voluntary sexual experiences. Participants chose a group that was for either men or women (identified as "general groups" in the findings), or had the opportunity to attend a group specifically for LGBTQ men or women. Selection of which group to attend was up to the participants, based solely on their availability and comfort. Word-of-mouth and flyer recruitment also took place at the LGBTQ Center on campus. Each group lasted from 1 to 1.5 hours. Groups ranged from 3 to 11 participants, with a mean of 7.7 participants per group. Group members completed consent forms for participation and audiotaping at the beginning of the session. They also completed anonymous surveys of descriptive information including gender, ethnicity, age, and age at first sex. A graduate assistant took notes during the groups, and later transcribed all audiotapes, verbatim.

Focus groups were chosen as the method for this new area of inquiry, based on the exploratory nature of the research and the potential for focus groups to engage participants in discussions with each other about this unique topic. Focus group question and implementation methods (Krueger & Casey, 2009) included a set of guided questions, probes, and follow-up questions. Probes and follow-up questions were asked with careful attention to nonverbal cues to encourage participants who were less assertive in the group to participate (Stewart & Shamdasani, 2015), and to assure that the qualitative data and subsequent counts of responses did not reflect only a few members of the group (Palinkas et al., 2015). The focus groups included four main areas of inquiry: (a) messages received from home prior to and around first sex, (b) messages received from school, (c) reactions to and feelings about their first sex, and (d) the degree and nature of planning for first sex. This article focuses on questions related to planning for sex.

Researchers allowed participants to define *first sex* for themselves. In discussions of male-female sexual experiences, first sex was most often defined as penile-vaginal intercourse. Definitions of first sex varied among participants whose first experience was with someone of the same gender. Anal penetration was generally described as

¹ Research methods and procedures, including focus group scripts, recruitment materials, incentive and consent processes were approved by the university's IRB.

“first sex” among men whose first sex was with other men, and some kind of genital penetration or oral/genital contact was defined as first sex among women whose first sex was with other women.

Using a typical qualitative data coding procedure (Ryan & Bernard, 2003), a priori themes were identified, based on the research questions (degree and nature of planning for first sex). Categories for additional themes and subthemes emerged through an inductive process (Miles & Huberman, 1994). Immediately following each focus group session, the research team met to identify and record common or recurring themes that emerged from the group. After all groups were completed, two graduate students each reviewed transcripts to create a list of additional themes. Anticipated (a priori) themes included “planned” and “spontaneous” regarding how first sex came about, and the subtheme “protection” to denote consideration or use of contraception or safer sex practices. An additional theme, “anticipated,” and more specific subthemes emerged from the data inductively. Each resultant theme and sub-theme (identified either a priori, from post-focus group discussions, or from transcript review) was assigned a specific code number to create a complete codebook.

Using MAXQDA qualitative analysis software (Kuckartz, 2007), transcripts were searched for a list of keywords that had been generated by the research team (to differentiate the “planning” topic from other key topics addressed in the focus groups (Harry, Sturges, & Klinger, 2005)). Each segment of relevant highlighted text was placed into a document for coding. Two graduate student research assistants, one who had been involved in data collection, and the other who had not, independently coded these. Researchers calculated inter-rater reliability and completed counts of the most common subthemes, within the three large overall themes regarding first sex: (a) planned, (b) anticipated, and (c) spontaneous. Although not intended to definitively quantify the results, presentation of percent of all comments and comments within theme (Sandelowski, Voils, & Knafl G., 2009) provide additional support for the qualitative conclusions, which are based on the transcribed comments. Selected illustrative segments were identified to further clarify each of the resultant common themes.

To determine inter-rater reliability, researchers counted the total number of identified codes (particular segments of the transcript may have received multiple codes). They counted the number of coded segments where there was a mismatch and identified two kinds of mismatches: (a) a discrepancy in which different raters gave a segment different codes (called inconsistencies), and (b) ones in which one rater gave a particular segment of text more codes than the other rater, albeit consistent with each other (e.g., generally indicative of planning, or not). Divided by the total number of coded segments of text, this created a percentage of mismatches (Miles & Huberman, 1994). Inter-rater reliability for all differences between coders (total mismatches) was 84%, and for inconsistencies, 91%. The lead researchers then reconciled differences for all segments of text in which codes were inconsistent, and assigned corrected or consistent codes. This enabled more accurate presentation of the findings.

Participant demographics

As shown in [Table 1](#), the mean age of participants at the time of the study was 18.6 for men and 18.9 for women. (The study was limited to first and second year college students.) The average age of “first sex” (as defined by participants) was 16.9 for men and 16.4 for women. This slightly lower average age of first intercourse than national averages (Centers for Disease Control, 2016) makes sense given that, by definition, people who had not yet had sexual intercourse were excluded from this sample. The mean age of any first sexual experience (as defined by participants) was 15.3 for men and 15.4 for women, reflecting an average of one year between first sexual experience and first intercourse for women, and 19 months for men. Just over half (52.7%) of the participants were women, with 64% identifying themselves as White, 10% African American, 13% Hispanic, 5% Asian, and 9.5% multi/other. A total of 12 separate focus groups were held, five groups of young men and seven groups of young women. Although two groups (which included a total of

Table 1. Descriptive data for participants ($n = 74$).

| | N | Percent | Percent of women ($n = 39$) | Percent of men ($n = 35$) |
|---|----|---------|----------------------------------|--------------------------------|
| Gender | | | | |
| Man | 35 | 47.3 | NA | NA |
| Woman | 39 | 52.7 | | |
| Transgender/other | 0 | | | |
| Race/ethnicity | | | | |
| White | 49 | 66.3 | 64.1 (25) | 68.6 (24) |
| Black | 9 | 12.2 | 10.3 (4) | 14.3 (5) |
| Hispanic | 7 | 9.5 | 12.8 (5) | 5.7 (2) |
| Asian | 2 | 2.7 | 5.1 (2) | |
| Multi | 4 | 5.4 | 5.1 (2) | 5.7 (2) |
| Other | 3 | 4.1 | 2.6 (1) | 5.7 (2) |
| Age | | | | |
| 18 | 34 | 45.9 | 38.5 (15) | 54.3 (19) |
| 19 | 29 | 39.2 | 38.5 (15) | 40.0 (14) |
| 20 | 13 | 17.5 | 23 (9) | 5.7 (2) |
| Age at first sexual experience (self-defined) (Mean = 15.38) | | | | |
| Less than 14 | 11 | 15.1 | 7.7 (3) | 23.5 (8) |
| 14 | 16 | 21.9 | 25.6 (10) | 17.6 (6) |
| 15 | 12 | 16.4 | 23.1 (9) | 8.8 (3) |
| 16 | 12 | 16.4 | 17.9 (7) | 14.7 (5) |
| 17 | 11 | 15.1 | 10.3 (4) | 20.6 (7) |
| 18 | 9 | 12.3 | 12.8 (5) | 11.8 (4) |
| 19 | 2 | 2.7 | 2.6 (1) | 2.9 (1) |
| Age at first intercourse (self-defined) (mean = 16.66) | | | | |
| 14 or less | 8 | 11 | 12.8% (5) | 8.8% (3) |
| 15 | 7 | 9.6 | 15.4% (6) | 2.9% (1) |
| 16 | 17 | 23.3 | 28.2% (11) | 17.6% (6) |
| 17 | 17 | 23.3 | 15.4% (6) | 32.4% (11) |
| 18 | 17 | 23.3 | 12.8% (5) | 35.3% (12) |
| 19 | 7 | 9.6 | 15.4% (6) | 2.9% (1) |
| Grade at first intercourse | | | | |
| Before high school | 6 | 8.2 | 10.3 (4) | 5.9 (2) |
| 9th grade | 8 | 11 | 15.4 (6) | 5.9 (2) |
| 10th grade (including summer before) | 10 | 13.7 | 20.5 (8) | 5.9 (2) |
| 11th grade (including summer before) | 18 | 24.7 | 15.4 (6) | 35.3 (12) |
| 12th grade (including summer before) | 20 | 27.4 | 17.9 (7) | 38.2 (13) |
| 1st year of college (including summer before) | 10 | 13.7 | 20.5 (8) | 8.8 (3) |
| After 1st year of college | 1 | 1.4 | | 2.9 (1) |

12 participants) were identified specifically for LGBTQ students, there were participants in “General” groups who self-identified as lesbian, gay, or bisexual during group discussion. Comments and quotes, identified below, are categorized by the group in which they occurred, not by the individual, as sexual orientation was not recorded within each of the groups. Although groups were initially identified as LGBTQ, no one in those groups, verbally or on the demographic survey, identified as transgender, thus groups are noted as LBQ (lesbian, bisexual, queer, and questioning) and GBQ (gay, bisexual, queer, and questioning) throughout the rest of the text.

Findings

A total of 159 segments of text were identified related to the degree or nature of planning for sex. Participants’ comments fell into three major categories: (a) those reporting their first experience as having “just happened,” categorized as “spontaneous”; (b) those who had engaged in some process of “anticipation” of a particular sexual encounter; and (c) those who reported specific aspects of planning for first sex. Within each of these major themes, a series of subthemes, as reflected in Table 2, were identified. Approximately 57% of the segments coded for degree or

Table 2. Number and percent of segments coded for each theme and subtheme by gender.

| | Segments <i>n</i> = 159 (% of all segments) | # of men’s segments | Percent of all men’s comments | # of women’s segments | Percent of all women’s comments |
|---|--|------------------------|----------------------------------|--------------------------|------------------------------------|
| All | 159 (100%) | 69 | 43% | 90 | 57% |
| Spontaneous | 43 (27%) | 20 | 29% | 23 | 26% |
| Just happened, no context or discussion | 23 (14%) | 13 | 19% | 10 | 11% |
| One thing led to another | 12 (7.5%) | 6 | 9% | 6 | 6% |
| It just happened and I was not ready when it did | 4 (2.5%) | 0 | 0 | 4 | 4% |
| I didn’t even know the person | 3 (1.8%) | 1 | 1.4% | 2 | 2% |
| It just happened, even though I had been planning to wait | 1 (0.6%) | 0 | 0 | 1 | 1% |
| Anticipated | 27 (17%) | 5 | 7% | 22 | 24% |
| We had discussed having sex with one another | 17 (11%) | 2 | 3% | 15 | 17% |
| I knew I wanted it to be with this or a particular person | 10 (6%) | 3 | 4% | 7 | 8% |
| Planned | 89 (56%) | 44 | 64% | 45 | 50% |
| I/we were just ready | 15 (9%) | 8 | 11.5% | 7 | 7.7% |
| Most or every aspect was planned | 14 (8.8%) | 6 | 9% | 8 | 8.8% |
| One partner had it planned | 13 (8%) | 8 | 11.5% | 5 | 5.5% |
| Picked right day/right time | 12 (7.5%) | 5 | 7% | 7 | 7.7% |
| Planned, no other context | 9 (6%) | 8 | 11.5% | 1 | 1% |
| Planned, we/I was curious | 7 (4%) | 0 | 0 | 7 | 7.7% |
| Planned, but right before it happened | 6 (3.7%) | 4 | 6% | 2 | 2% |
| Condom was ready and available | 5 (3%) | 2 | 3% | 3 | 3% |
| Wanted to “get it over with,” not be a virgin | 5 (3%) | 3 | 4% | 2 | 2% |
| Gave in to ongoing pressure from partner | 3 (1.8%) | 0 | 0 | 3 | 3% |

nature of planning for sex were comments from women, and 43% were from men, similar to proportions of women (53%) and men (47%) who participated in the study.

Resultant themes

Although two major themes were identified a priori (sex that was planned and sex that was spontaneous), coding resulted in three major themes, and various sub-themes. Among those who described sex as spontaneous, there were actually two types of comments, those that reflected a truly spontaneous, in the moment, sexual encounter, and those that reflected previous anticipation or imagination of the event, even if they had not specifically identified the time, place, or circumstances. Thus, a third major theme, “anticipated,” was added to the codes. Within each of the three major themes (spontaneous, anticipated, and planned), a number of sub-themes were identified, and are defined under each of their headings in the results section.

Table 2 summarizes the themes and subthemes of the comments, with the most common subthemes depicted in Figure 1 for those who reported sex was spontaneous, Figure 2, for sex that was anticipated, and Figure 3 for those reporting sex was planned.

As shown in Table 2, more than one in four (27%) of coded segments, related to how first sex came about (spontaneous, anticipated, or planned), reflected reports that first sex was spontaneous. These comments were nearly equally representative of men’s (29%) and women’s (26%) comments on this topic. In addition, among those who initially volunteered that sex was not specifically planned, the description of anticipating or imagining a specific circumstance emerged, often described as “it just happened, but ...” This was more common among the women (24% of all women’s comments on this topic and only 7% of men’s) and included prior discussions about having sex and/or imagining or selecting the person with whom they would ultimately have sex. Finally, more than half of the comments (56%) related

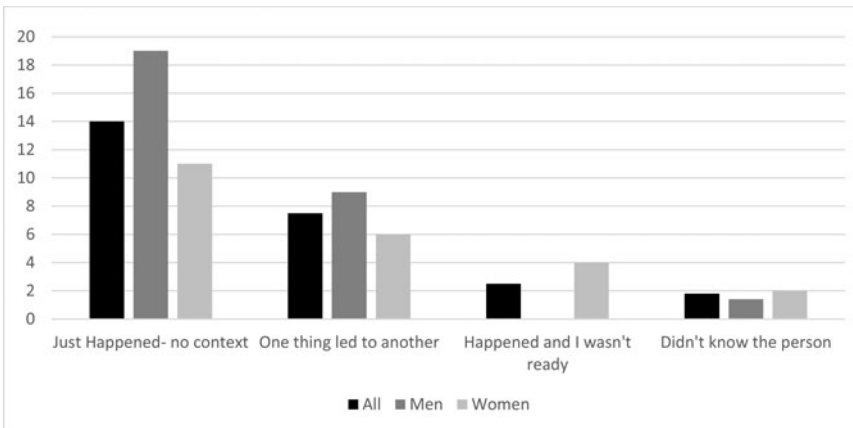


Figure 1. Percent of all men’s and women’s comments reflecting spontaneous first sex.

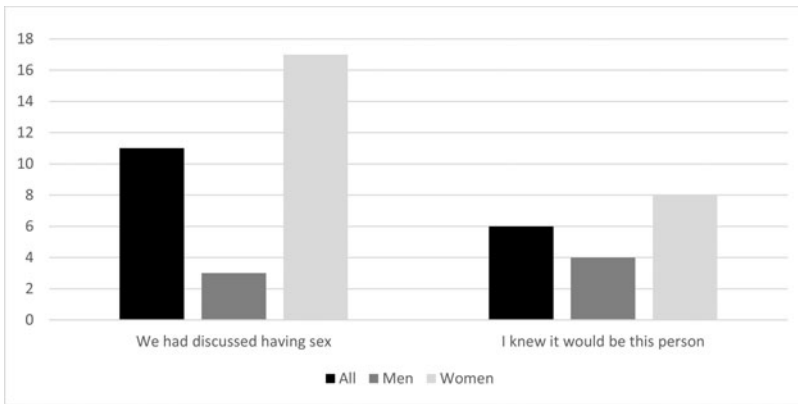


Figure 2. Percent of all men's and women's comments reflecting anticipation of first sex.

to how first sex came about reflected specific planning for first sex. Notably, men appeared more likely to report sex as planned (two thirds, or 64%, of men's comments, as compared to half of women's comments).

Spontaneous first sex

Little context

Among sex that was spontaneous, the most common subtheme was simply a lack of context or detail. That is, participants used terms like “just happened” without any other context. This description was more common among men than women. For example,

It was with a girl that went to school and we always used to flirt but she always had a boyfriend, and they broke up and we were joking about it and one night she just texted me 'come over' and it just kind of happened. Man: General

One thing just led to another

The second most common subtheme within the spontaneous category was the proverbial “one thing led to another.” This characterized the comments of both men and women:

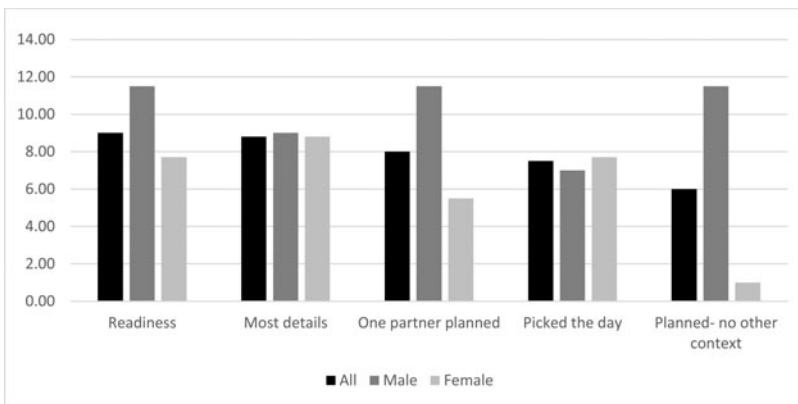


Figure 3. Percent of all men's and women's comments reflecting planning of first sex.

*Then we just started hooking up, kissing, and then she went down my pants, I went down hers, and all of a sudden she was like, 'I really want to F*** you right now,' and I said yes.*

Man: General

So I wasn't supposed to be dating, and I snuck over to his house one day, and we were just hanging out and I don't know. One thing led to another and afterwards I was sort of just like, 'Okay, I'm not a virgin anymore. Sweet.' Woman: General

Additional "spontaneous" subthemes

Among women who reported first sex as spontaneous, nearly 20% of them specifically noted that they were not "ready" for sex when it did happen. Also, among this group, one said that it had just happened even though she was planning to wait, and two women and one man said they did not know the person with whom they had first sex.

Anticipated first sex

Many participants described their first sex as happening without planning, while their comments reflected anticipation or expectation that suggested at least some mental preparation. These comments, reflecting thinking about sex but not actually planning it, were more characteristic of women's responses. Two subthemes were typical of this larger theme: (a) the individual had talked about having sex with their eventual partner, and (b) the individual had identified a particular person who would be their eventual partner.

We had talked about it

In this category, participants indicated they had conversations with a potential partner, generally in the context of a relationship, about having sex. Two thirds of the comments in the "anticipated" theme were of this type:

We were going out for like a month and I remember we had like previous conversations about it, and I was like, 'Oh, I'm gonna wait til I'm married.' This and that. But it kind of just happened. Woman: General

We would talk about it, like we were going out since 7th grade, but then in 9th grade it kinda just happened. Woman: General

I knew it was going to be this particular person

A third of the comments in this theme indicated that participants had imagined or desired that first sex would happen with a particular person, often described with romantic attachment or attraction.

For me, it just happened, but I guess I kinda planned it in my mind 'cause I knew I had really liked this guy, and wanted to do it with him ... Woman: General

Planned first sex

As noted in Table 2, men's comments overall were more indicative than women's of first sex that was planned (64% of all men's comments vs. 50% of all women's comments), even if they offered no specific context or details. As noted above, however,

some aspects of planning (e.g., prior discussion or imagining a particular person) were initially described by participants as sex that was spontaneous, but were later recoded into the category of anticipation. If those comments are considered as evidence of some aspect of planning or forethought, then men and women were equally likely to have indicated some degree of planning for sex: 74% of all women's comments and 71% of all men's comments.

Readiness

The concept of readiness was described as playing an important role in sex that was described as planned. This was defined by participants' specific use or description of the term "ready" or "readiness." This subtheme was the most common one in planning for sex, noted by nearly one in three of both men and women who identified first sex as planned. However, while women typically reflected on their own readiness, men who mentioned readiness were more inclined to discuss their partners' readiness.

I kind of decided that I wasn't ready. And then somewhere along the line, I said I was ... and he went out and bought condoms with his friends, like their big, like, man outing. Woman:

General

So one day I told her 'I want to make love to you' and then she said she needs a little time ... eventually she said 'Okay, let's do it.' Then a few weeks later we did. Man: General

In the smaller group of nonheterosexual men, their own readiness was often reflected.

It was just one of those things you know when it's right, you know when the time is right. I literally felt the time set in and I said, alright, I trust you, you're clean, all that stuff. So I took all that into consideration and I just let it happen, so ... Man: GBQ

Planned the details

The second most common subtheme in the planned category was planning most or all aspects of first sex, including vivid descriptions of the bed, the condom, and the choice of a specific time and place.

It was one of the girls I was with at the time, like she wanted to wait for a certain time or whatever. So as soon as she was good, I was like, making sure that my parents weren't home, like, got the bed all set up in my room and stuff. I planned it out pretty well actually. Man:

General

I was in a relationship at the time. It was something we both decided that we wanted to do and we picked a date, well we picked a weekend and we went camping. Man: General

Planned for a particular day

An additional subtheme was the choice of a particular day, most often discussed within the context of an opportunity, for example, parents going away for the weekend, or a location in which the young couple would have privacy on a particular day.

We were never really left alone a lot. We knew her parents were going to be out and I got the condoms so it was planned, we knew it was going to happen. Man: General

We were like, okay, Memorial day, because both of our parents were going to be away. Woman: General

He had it all planned

Almost as common as choosing a day or time, many participants noted that it was one of the two partners who had the sex all planned. When they identified that person, in all but a single case, it was a man.

Condom preparations and use

Participants talked about protection broadly during the groups (often with respect to the messages they received at home or at school). However, their specific comments related to planning were almost exclusively about condoms, the most accessible form of contraception/protection for young people. (Pre-exposure prophylaxis [PrEP] was not yet available at the time of these participants' first sex experiences.) Condoms played a key role among participants who described first sex as a planned event: they described buying or bringing them, and/or discussing them with their partner. In some cases, condoms were purchased specifically for the occasion, in others, a condom was always accessible, in case the opportunity presented itself.

I was going to hang out with her that night and I was like it's going down so I planned it ... I brought condoms and everything. Man: General

Yeah, we used a condom the first time. He had one on him, of course, because he was never stopping trying. So he always had a condom on him. Woman: General

We were in a deep relationship at the time and we both talked about precautions, things like that. We actually decided that we felt the most comfortable if she went on the pill and used condoms as a backup. I didn't really have any problems with that, I really care about her. I don't want to make her feel uncomfortable. I bought the condoms and she got the pills. Man: General

My boyfriend bought them, I was there. I told him I was going to have sex with him the day we started dating. I was like we can have sex now. He went to 7-11 and bought them, the week before [we had sex], and we used them. Woman: General

Aside from their condom preparations, researchers asked specifically whether or not participants had used a condom their first time. Participants overwhelmingly reported that they had. However, both men and women in the small LGBTQ groups reflected qualitatively different responses, both from the general groups and from each other. Women whose first sex was with women reported concerns about disease, which led them to seek testing and, once satisfied that their potential partner was "safe," did not use protection during first sex. Such precautions represented a clear indication of planning among these women who had sex with women. Men whose first sex was with men reported that they had great concern about safety and the availability of a condom. However, more than half of the men in the GBQ group reported that during first sex, although they or their partner had a condom, they did not use it. Generally, this was reported as a result of wanting to get it over with, or that the condom "didn't work."

I asked him to get a condom and I saw he had the condom and all the other stuff with him ... I think he had the intention of putting it on but I guess everything happened so fast that because I was like 'let's just do this and get it over with' that he forgot. Man: GBQ

Like I had these high standards and everything. But in the moment I just forgot about it. Man: GBQ

Getting it over with

Some participants described “getting it over with” as a motivator that drove them to plan their sexual debut. This was described as occurring both within and outside of existing relationships and for various reasons. In these descriptions, planning involved choosing someone who could make that opportunity happen.

Mine was like kind of planned. I was dating a kid and I didn't want to go to college a virgin, so I think he knew I wanted to and I knew he wanted to, so we ended up doing it. Woman: General

It didn't really matter, it would have been nice to have done it with somebody that I really liked but I wasn't going to keep waiting to find that person, so the first time I got it over with. Man: General

I was looking at people that I trusted, the guy that I had sex with got tested every month because he was in college already so he got tested every month, so I asked to see his papers and he showed his papers to me. Man: GBQ

First sex outside of relationships

Although this was not specifically counted, we note that much of the discussion of planned first sex was within the context of a relationship. However, if first sex occurred outside a relationship, the partner was identified by the opportunity, rather than the context of love, intimacy, or seeking a relationship. More than one man noted that, although their first sex happened within an existing relationship, they could just as easily have chosen a different partner, had the opportunity arisen. Women, on the other hand, more often reflected a sense of romance and identification of a particular person who they wanted to be their “first,” whether their comments fell into the category of “planned” or “anticipated.”

Discussion

College students who participated in a series of focus groups reflected on the amount and nature of planning involved in their transition to first sex. Even among those who reported that it had “just happened,” there were elements of planning for or thinking about sex that suggested anticipation, willingness, and/or intent to have sex. Although women were more likely than men to report that first sex was spontaneous, many, if not most, recalled having chosen or desired a particular partner, and/or having specifically discussed sex with their partner prior to sex, reflecting a qualitatively different concept, which we named “anticipation.” Opportunity played a large role in the timing of first sex, and, when planned, condoms were commonly discussed as part of the planning. Discussions among the small groups of LGBTQ participants were similar to those among men and women in the General groups about readiness, planning, and choice of partners. However, participants in the LGBTQ groups more commonly reported that they had not used protection during their first sex. Although they comprised too small a group from which to draw conclusions, distinct differences noted in the conversations among participants in the LGBTQ groups suggest the importance of further study of first sexual experiences in nonheterosexually identified youth.

The finding that there appeared to be planning, forethought, or “anticipation” about sex, even when initially reported as spontaneous, suggests an opportunity to intervene with young people when they are thinking about sex, before it occurs for the first time. These findings also suggest clear stereotypical gender differences (about whether it is okay to plan for or want sex, carrying condoms, readiness for sex, choosing or not choosing sexual partners, etc.) that probably suggest more enduring, socially ingrained messages about men’s and women’s roles, both in general, and specifically with respect to sex.

The results reflect the tenets of sexual script theory (Gagnon & Simon, 1973; Sanchez, Fetterolf, & Rudman, 2012; Wiederman, 2005), which argues that heterosexual relationships largely follow social scripts reflecting cultural norms (Gagnon & Simon, 1973; Sanchez et al., 2012). In the United States, the most prominent cultural script prescribes that men play a more dominant and active role related to sexual behavior as compared to women, taking control and acting as initiators and directors of sexual behaviors, including when, how, and under what circumstances they occur. Women, on the other hand, play a more submissive role in these matters, remaining largely passive about sex (Gagnon & Simon, 1973; Sanchez et al., 2012). This may help to explain why, in our results, there was an emphasis on women’s “readiness” as the gateway to first sex, implying that men are always ready whereas, women have to be cajoled, convinced, and given time to come around.

Additionally, sexual script theory may explain why women were more likely to describe their first sex as spontaneous, even though, in reality, they described evidence of planning and forethought on their parts, thereby coded as “anticipation.” When women say that it “just happened,” it is possible that they are reflecting a societal expectation that they not anticipate or plan to have sex. Such an expectation might therefore reduce the likelihood that a woman might carry a condom or use other forms of birth control before having sex for the first time. Similarly, it might lead her to describe sex as having “just happened” (even though she had imagined or planned it, and had identified the likely partner), in order to avoid the negative stereotypes associated with women who break traditional gender scripts. Women may fear being labeled sluts or other backlash if they show too much eagerness or agency around sex (Holland, Ramazanoglu, Sharpe, & Thomson, 1996; Jackson & Cram, 2003; Kreager et al., 2016; Sakaluk, Todd, Milhausen, & Lachowsky, 2014; Tolman, 1994).

Additionally, inherent in both anticipation and planning may be a willingness to see or imagine oneself as a teen who has sex, as described in the Prototype Willingness Model (PWM) (Gerrard, Gibbons, Houlihan, Stock, & Pomery, 2008). PWM expands on the notion of intentionality, a primary focus of other models that have been applied to sexual behaviors, such as the Theory of Reasoned Action (Armitage & Conner, 2001; Gillmore et al., 2002; Ravis, Sheeran, & Armitage, 2006; Webb & Sheeran, 2006). The transition from not thinking about having sex to seeing oneself as “a teen who has sex,” may be reflected in the “anticipation” category and serve as an important component of intentionality or willingness. It is plausible that this transition happens during the time between an adolescent’s first sexual experience of

any kind (however they define it) and first sexual intercourse. For the young adults in this study, that period ranged from an average of one to one and a half years, representing significant opportunity for intervention.

In this study, intentionality was demonstrated in the location of a space, a time when parents would be away, a particular day, securing a condom, etc. Other theories (Gerrard, Gibbons, Stock, Vande Lune, & Cleveland, 2005; Myklestad & Rise, 2007) have helped to explain sexual behavior and risk taking, but have not directly addressed factors specific to the turning point at which sex occurs for the first time, nor how a first experience influences later decisions and behaviors. PWM may offer insight into the types of interventions that can have an impact on young people's first sex experiences. Together with the lens of sexual script theory, the results here suggest that such interventions will need to be tailored to different genders, and to address the powerful social dictates about appropriate behaviors for women and men, while also questioning their usefulness in relation to sexual health. In addition, although the data were limited, the qualitative differences noted suggest a need for more focused research on the factors preceding first sex for nonheterosexual youth.

Limitations

This retrospective qualitative study focused on a self-selected group of students at one northeastern U.S. university, who were willing to discuss their voluntary first sex experiences. Participants represented a wide variety of political, religious, and cultural views but they cannot be generalized to all, or even to regional groups of young adults or college students in the United States. In addition, we made no attempt to determine if there were differences in aspects of planning by race/ethnicity or any characteristics other than gender and, to some extent, sexual orientation.

One potential limitation of focus group methodology is the tendency for one or more members of a group to dominate discussion, making it difficult to assess the degree to which comments are representative of the sample or population. As noted in the Methodology section, the researchers utilized a number of well-established measures, in both the data collection and analysis phases of this study, which served to mitigate this concern. Further, the number of participants in the LGBQ groups, together with those who self-identified in the general groups as LGBQ, was small. Thus, what appeared to be qualitative differences between LBGQ participants and those who self-identified as heterosexual, may not be as clear and need further exploration with groups that do not overlap.

Finally, due to the nature of retrospective research and focus group methodology, it is not possible to know the exact timing of events during the decision-making process, as retrospective accounts may be distorted by inaccurate recall and reporting. Despite these limitations, the focus group data in this study provide rich material for discussion and reflection, and serve as a basis for subsequent, perhaps even a prospective, study of decision making about sexual debut, an important aspect of adolescent development.

Conclusions

The data from this study suggest that planning, forethought, and anticipation was characteristic of first sex among both men and women, and among participants who identified as both heterosexual and LGBTQ. In fact, if one considers anticipation as representing at least some degree of forethought or consideration about sex, then 74% of women's comments on this topic and 71% of men's reflect some degree of planning.

These findings imply an important window for intervention, as first sex can impact on future sex, for example, several studies demonstrating that age and use of contraceptives at sexual debut influence behavior and risk for subsequent sex. Thus, waiting to intervene until after first sex represents a critical missed opportunity. Although school-based interventions have the potential to make sexual relationships safer, better, and/or later, they often take place, if at all, after first sex has already occurred. Recent reports indicate that schools devote very limited time to HIV, pregnancy, and STD prevention—a median of six hours (total) in middle school, and 8.1 hours (total) in high school (Boonstra, 2012) and less than half (45%) of U.S. high schools teach the topics related to pregnancy and sexually transmitted infections identified as exemplary sexual health education (CDC, 2015). Additionally, they may miss important opportunities to help young people focus on whether, when, and under what circumstances they are ready for sex. Finally, discussions with parents about sex are extremely limited and, sometimes only occur as a direct result of a parent discovering that their teen has already had sex (Goldfarb et al., 2015).

The findings of this study suggest that interventions, including formal sex education programs, as well as messages from home and through public health approaches, should build on the apparent, albeit often unrecognized or acknowledged, planning and thought that accompanies the transition to first sex. This is a time when young people might be particularly susceptible and likely to internalize specific messages about the sex they are contemplating. Young people should be encouraged to critically examine when and under what conditions they want to have sex, and be provided, in a timely manner, with decision-making models and expectations that increase the likelihood that it will be planned, and in the context of relationships, intimacy, mutual pleasure, and safety.

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ORCID

Lisa D. Lieberman  <http://orcid.org/0000-0001-6506-3019>

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