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“That's Nasty” to Curiosity: Early Adolescent Cognitions about Sexual Abstinence

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Abstract

Purpose—Effective sex education for early adolescents should make use of age-appropriate cultural models about sexual abstinence. However, little is known about how early adolescents view this topic. We describe developmental differences in cognitions about sexual abstinence among high risk early adolescents.

Methods—After IRB approval and informed consent, we interviewed twenty-two 11-14 year-olds, using a qualitative, two-stage interview. Participants were first asked a series of open-ended questions about sexual abstinence, and then asked to explain their answers. Interviews were transcribed, organized by age, and read in their entirety. Codes were developed from the literature, field notes, and transcripts. Key concepts were identified and models were developed with a focus on developmental change.

Results—We observed three distinct views of sexual abstinence, “That's Nasty,” “Curious,” and Normative. All viewed abstinence as a starting point and sex as a transition to adulthood. “That's Nasty” participants identified sex as distasteful, displayed limited understanding of sex, and viewed abstinence as appropriate for kids like themselves. Curious participants expressed a desire for information about sex, and a sense of missing something important. Normative participants viewed the transition from abstinence to sexual experience as part of a normal, albeit challenging, transition to adulthood.

Conclusions—Participants demonstrated differences in cognitions about sexual abstinence, related to age and development. The transition from viewing sex as distasteful to curiosity appears to be a time of both vulnerability and openness, and may provide an opportunity for intervention.

Keywords

Sexual Abstinence; Adolescent Behavior; Schema; Early Adolescent; Sexual Behavior; Transition; Cognition

INTRODUCTION

Rigorous evaluations of abstinence education programs show no effects on adolescent sexual behavior [1-3]. These programs typically target early adolescence, and make use of adult

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cultural models of adolescent sexuality, such as presenting sex as unhealthy, and placing sex only within the context of marriage [4]. One reason for the lack of effectiveness may be that these programs fail to tap into early adolescents' own cognitions and cultural models related to sex and abstinence. Sexual cognitions can be defined as the attitudes, expectations, beliefs and values related to sexual behavior [5]. Early adolescence is a time of developmental transition, and their sexual cognitions are likely different from those at older ages. A better understanding of these cognitions may lead to more effectively framing of STI and pregnancy prevention messages.

We approach early adolescents' cognitions about sexual abstinence through a cultural lens. Cultural models are shared cognitive structures through which human realities are constructed and interpreted [6]. Cultural models related to sex include romance, relationships, curiosity, and the enactment of sexual behavior [7-9]. Sexual scripts are a type of cultural model that define the who, what, when and why of sexual behaviors [10]. Cultural models are felt to motivate behavior through early learning and socialization, and their fit with an individual's current life conditions [10,11]. Framing sexual health promotion programs within existing cultural models of sexuality has the potential to increase their effectiveness and acceptability with the target population [12,13].

Early adolescence is a time of intense physical, cognitive, social, and psychological transition [14-16]. Transitions with direct impacts on sexual cognitions and behaviors include the acquisition of secondary sex characteristics, the onset of romantic relationships, and the development of sexual self-concept [18-20]. Early adolescents additionally have a distinctive peer culture [17] that is dynamic and developmental, evolving with experience and over time.

Limited data exist on the development of cognitions related to abstinence and sex among early adolescents. In a cohort of early adolescent urban females, developmental changes in abstinence values, sexual agency, and sexual self-esteem have been related to the initiation of non-coital sexual behaviors [5], and differences in sexual scripts have been associated with the presence of an older sibling [21].

Research on older adolescents suggests that abstinence is viewed as more than just not having sex, and concepts such as commitment and "doing the right thing" are important (see, for example,[22]). Our group found differences between early and middle adolescents in perceptions of risks and benefits related to sex [23]. This analysis extends our previous work, describing differences within the early adolescent group in cognitions about sexual abstinence with a focus on shared meanings and developmental contexts.

METHODS

Participants

As part of a larger, IRB approved qualitative study, we recruited twenty-two 11-14 year-olds (16 females and 6 males) during routine visits at a community hospital pediatric clinic. The purpose of the larger study was to examine how early and middle adolescents viewed sexual abstinence. All participants were low income and Medicaid eligible; most (18/22) were African American. The clinic serves a community with high rates of early sexual onset, adolescent pregnancy and STI. Most attend a large Midwestern urban district teaching an abstinence-focused curriculum. We chose this population because participants would likely find themselves in situations where sex was a possibility, and they would need to be actively making decisions about sexual abstinence. After parental permission and adolescent consent, adolescents were interviewed in a private room. Participants received \$10 gift cards; parents, \$5 gift cards.

Interviews

Because we did not wish to be limited to a priori assumptions about how participants viewed sexual abstinence, we used an exploratory ethnographic interview to elicit social knowledge related to sexual abstinence among adolescents [23,24]. Two-stage face-to-face interviews (lasting 30-45 minutes) were conducted by experienced interviewers, audio-recorded, and transcribed. In the first stage, participants were asked a series of open-ended questions, starting with their understanding of the term “abstinence.” Examples include, “What is important about abstinence?” “Why do adolescents decide to be abstinent?” and “List some of the good (bad) things about abstinence.” Most early adolescent participants (15/22) were confused by the term “abstinence,” and the interviewer clarified abstinence as meaning not having sex. In the second stage, participants were asked to explain their responses. The interviewer listened for organization in the explanations, and tested hypotheses during the interview. The interviewer wrote field notes on the tone, process and interactions in the interviews.

We also collected information on demographics, sexual experience, and whether participants perceived specific behaviors as abstinence. When assessing sexual experience, we only asked participants ages 14 years and older directly about sexual experience. State child abuse laws mandate reporting of consensual sexual behaviors among adolescents 13 years and younger, and we did not want to expose participants to this potential harm. Finally, participants were asked whether their view of abstinence included each of the following behaviors: kissing, petting, oral sex, anal sex, vaginal sex, and masturbation. Participants who appeared uncomfortable with the questions were allowed to not answer.

Data Analysis

Interviews and field notes were closely read by both authors with an analytic goal to identify the shared cultural meaning and developmental contexts of sexual abstinence among early adolescents. Data were analyzed using a dual theoretical approach that drew from both cognitive anthropology [25], described above, and developmental perspectives. Textual data were organized, read and analyzed by age. For each age group, all interviews and field notes were analyzed in one sitting. Authors looked for shared concepts and meaning systems, and examined how cognitions emerged and developed salience.

We observed three distinct views of sex and sexual abstinence, which we labeled, “That’s Nasty,” Curious, and Normative. These groups roughly, but not perfectly, correlated with age (see table 2). We characterized each group’s views of sex and abstinence, examining comfort level towards sex, their biologic and cultural understanding of sex, and reasons for abstinence. We were particularly interested in identifying cognitions that might represent motivations to remain abstinent, and assessed motivation using the following criteria. First, the cognition was consistent with the individual’s behavior. Second, the participant clearly ascribed the motivation either to themselves, or to others, not themselves. For example, if a participant noted that their church forbade premarital sex, and identified themselves as religious, we would consider this as potentially motivating behavior. Third, we examined the participant’s use of qualifying statements to distance themselves when discussing a topic. For example, we would consider “reputation” not to motivate behavior if female participant with only 1 partner said that girls can get a bad reputation from being sexually experienced, *but* this applies only to girls with lots of partners. Finally, we considered cognitions to be potentially motivating if the participant repeated the cognition multiple times during the interview or cycled back to it. We then characterized each group by the sophistication of their arguments, and the type of cognitions identified as potentially motivating behavior.

We assessed validity and reliability by (1) testing tentative models against analysis of subsequent data and searching for instances that either supported or opposed our tentative

model, (2) having both authors read and analyze transcripts and field notes, resolving differences by discussion, and (3) assessing the consistency of results with existing literature and theory [26,27].

RESULTS

Participants

The mean age of the 22 participants was 12.9 years, range 11-14 years. 16 participants were female, 6, male (see Table 1). Participants identified themselves as African American (18 participants), white (1) and mixed (3) ethnicities. For a brief overview of the results, see Table 2.

Understanding of Abstinence and Sex

Across all three groups, the majority of participants understood that abstinence meant not having sex; however, it was difficult for participants to categorize specific behaviors (kissing, petting, oral sex, vaginal sex, anal sex, masturbation) as either “abstinence” or “sex.” For each behavior, approximately half were unsure or did not answer. Many of the remaining answers were inconsistent, suggesting that while participants may have had a general idea about sex and abstinence, most were unsure of what exact behaviors were involved.

That's Nasty

Seven participants identified sex as distasteful and inappropriate for conversations with peers, using terminology such as, “that's nasty.” This group included all 11 year-olds, one 12 year-old, and one 13 year-old. The mean age was 11.4 years, and two participants were male. Interview context suggested that none were sexually experienced. One female participant reported that it was “upsetting” to talk about sex with peers because kids her age are “too young to be talking about it.” (Note: when asked about her comfort level with the interview, this participant said that talking to adults was appropriate.) This group overwhelmingly viewed abstinence as positive (see Table 3 for example quotes).

“That's Nasty” group members had a limited biological understanding of sex. A 12 year-old understood sex as, “two people get together to make a baby.” This group had little understanding of contraception or safer sex practices. All linked sexual intercourse directly to childbearing (“the one who has sex, has kids, and the one that doesn't have sex, doesn't have kids”) and acquiring STIs. Only 1 (of 7) participants mentioned the possibility of condoms to prevent pregnancy or STIs, however even he did not think condoms could not prevent serious consequences.

This group typically (5/7) reported that sex should be in the context of marriage or (at least) when two people are in love and in an exclusive relationship. One adolescent who felt strongly that abstinence means, “waiting to have sex ‘til marriage,” shared that sex is so “nasty” that, “I don't think I'm gonna get married.” He went on to say that if he decides that he wants a baby, he will probably just adopt to avoid having to participate in sexual intercourse.

Sex was understood as a transition, or rite of passage, to adulthood, and “That's Nasty” participants were not ready to make that transition. While able to articulate the reasons why other adolescents might want to have sex (to feel “grown,” to be popular with peers, to keep a boyfriend, to “get back” at a parent), they themselves did not desire these social gains, and instead focused on the positive aspects of remaining abstinent. “That's Nasty” participants perceived themselves to be “kids.” Sex as a transition behavior appeared neither desirable nor imminent. An 11 year-old male reported that if you have sex, you get sick and end your

childhood: “You can’t run outside and play basketball with your friends, or go over to their house.”

This group spoke concretely about the dangers of pregnancy and STI. This fear was linked to the idea that sex inevitably leads to a childbearing and disease. When social reasons for abstinence were discussed, they focused upon how children and STIs would negatively affect school, future plans, and family relationships. This group perceived that adolescents who have sex spiral down into a sequence of prescribed negative events: Adolescent sex leads to pregnancy and HIV, which leads to staying home, which leads to school failure, no career, and a “ruined” life. Girls described the impossibility of finishing school with a baby: “the girl ends up having a baby, then that person probably gonna have to quit school.” Boys added career and future: “...You don't throw away your career over just having sex, because you could ... just throw your whole life away that way, by having a baby.” Although this younger group was able to communicate commonly perceived social benefits from sex (social status, appearing “cool,” etc.), they continuously attached negative labels and negative stigma towards sex and adolescents that have had sex.

Most (5/7) “That's Nasty” participants feared disappointing a family member. Responses ranged from, “some people might get grounded for life, [and] they get whoopins,” to, “your parents won't be very happy with you; and they won't say nothing to you no more.” A single participant identified sex as a tool to use against parents: “Sometimes if their parents say they shouldn't have sex and then they get real, real mad at their parents, they go out and do it.”

Curious

The “Curious” group included one 12 year-old, five 13 year-olds, and five 14 year-olds for a total of 11 participants. The mean age was 13.4 years, and two participants were male. The “Curious” label comes from this group's increasing interest in “the facts” about sex, and their growing sense of missing something important. The word “curious” was a commonly used vernacular term in this group. When asked, “what are the bad things about abstinence?” two female participants said, “Curious...they want to see what it's like” and “Curious...They probably have a lot of friends that's doin' it and they probably think, ‘Well, if I do it I'll be just like the others.’” (See Table 3 for additional example quotes). Curious participants resembled “That's Nasty” participants in that they were predominantly viewed abstinence in a positive way, voiced the belief that sex should be in the context of marriage or an exclusive relationship, and possessed a very simple understanding of sex.

Curious participants also differed in important ways. They perceived the sexually experienced adolescent to be well-liked and admired, and expressed less discomfort with the topic of sex. They also expressed a desire to learn more about sexuality in general and the mechanics of sex in particular. For example, immediately following her interview, one participant asked the interviewer an extended list of questions regarding “sex” that she and her friends had (i.e. can you get pregnant from oral sex). Curious participants were also less sure that having sex predictably resulted in pregnancy or an STI. They perceived sex to be less risky than the “That's Nasty” group, and discussions about dangers of sex included qualifying words like, “might” or “sometimes.”

Similar to the “That's Nasty” group, most Curious participants (7/11) described sex as a transition to adulthood, and perceived abstinence as remaining a kid, having fewer worries, more fun, and less stress. Curious participants reported that when an adolescent decides to have sex, it brings with it burdens such as “drama about everyone knowing about it,” “if you did have a baby you don't have to deal with baby daddy drama,” and he “don't have to deal with baby mamma problems.” However, and in contrast to the “That's Nasty” group, Curious participants were less convinced that being a kid was the best option for them.

While the Curious group brought up health reasons such as fear of STIs and pregnancy, this group was less absolute about becoming pregnant or acquiring an STI than the “That's Nasty” group. Curious participants also displayed increasing concern with social consequences of sex. In contrast to the “That's Nasty” group, many in the Curious group perceived that “everyone” was having sex.

Curious females described both social pressures to have sex and stigma for those who have had sex. This tension was characterized as either being a “nobody” or a “whore.” A 13 year-old female described getting “teased because I'm a virgin,” but still viewed sex as too dangerous because boys might “tell they friends, and friends tell friends, and...it gets all over school.” A second Curious female said: “You haven't lost your virginity and when people...talk about it, you're the only one going to be left out. [Y]ou're like, ‘I wish like done it with somebody or something.’” In contrast, the two Curious males viewed sex as improving social status. One said that boys are talked about in a positive light if “you're at a young age and you can have sex with somebody already.”

Curious participants in this category still talked about the negative impact that teenage sex may have on their relationship with parents and other family members. Compared to the “That's Nasty” group, however, Curious participants placed less emphasis on punishments, and more on the potential loss of nurturing relationships with both family and peers. A 13 year-old female told a story to explain why it was better to remain abstinent to avoid having to “deal with your parents, or someone in your family getting angry with you - that's really embarrassing.”

Normative

Participants categorized as “Normative” included four 14 year-olds. This label was chosen because Normative participants shared the perspective that sexuality was a normal part of life, and more specifically, that sex was a normal part of *their* lives. (See Table 3 for example quotes.) All four Normative participants were sexually experienced. Compared with “That's Nasty” and Curious participants, Normative participants evidenced an increased and consistent comfort level with the topic of sex, a positive attitude towards sexually experienced adolescents, and an increased knowledge about sex, STIs, and pregnancy. Normative participants were more likely to give specific names of STIs (e.g. Chlamydia), as opposed to only labeling them “diseases.” They did not stress pregnancy and STI risk, and either mentioned or implied the possibility of prevention with condoms or contraception. In some cases, this was due to their own, a close friend's or a family member's experiences with contraceptives, unintended pregnancy or an STI. On a cautious note, while this group knew more about sexuality, STIs and pregnancy than the other two groups, they still were often markedly inaccurate in their medical facts and had large gaps in their knowledge.

Similar to the other two groups, the Normative group also saw sex as a transition to adulthood. They spoke about the pre- and post-transition concepts of readiness for sex and sex as addictive. “Readiness” included individual characteristics such as age, school completion, social “maturity” and physical development, relationship characteristics such as being with the “right” person, and a balance of health, family and social risks and benefits. (For a detailed discussion of the topic of readiness, see [23]). Learning to assess one's own readiness for sex was important, though the measures they identified for readiness were vague and often inconsistent.

Females and males described different social meanings for abstinence and sex. The two females spoke of curiosity about sex balanced by social disapproval. They considered learning to balance these contradictions as a sign of maturity. The two males emphasized social gains from having sex and social stigma related to abstinence. One explained, “If people think you're ... a virgin, [they think] you're a punk and stuff like that.”

All Normative participants placed less emphasis on sex being limited to marriage, and appeared less fearful of pregnancy and STIs. Instead, they emphasized the need to be careful, and that risks of pregnancy and STDs were manageable. Family disappointment also appeared more manageable. For example, a male participant first said that parents might “yell at their child” for having sex, but later described his mom as just saying, “Make sure you wear protection.”

DISCUSSION

The purpose of this study was to describe early adolescents’ cognitions about sexual abstinence with a focus on shared meanings and developmental contexts. Our observation of three groups, “That’s Nasty,” Curious and Normative, and our description of typical cognitions within each group, supports and extends the current understanding of sexual abstinence among early adolescents in three ways.

First, and consistent with existing literature, first sex was viewed as a rite of passage and transition to adulthood. But while all three groups ascribed to this cultural model, they positioned themselves differently. “That’s Nasty” participants embraced both abstinence and the child identity given to abstainers. “Curious” participants appeared to be in a liminal, or transitional, state where they were confused about whether or not they want to be “grown.” “Normative” participants focused on their own, and others, “readiness” for sex and its perceived adult responsibilities. To be effective, prevention programs will not only need to incorporate this concept of first sex as a rite of passage, but also need to know how their participants position themselves with respect to that transition. Programs serving younger adolescent who perceive sex to be adult and themselves to be children, will need a different approach than programs serving adolescents who see themselves as “ready” to try sex and take on its “adult” responsibilities.

Second, we observed a shift from fear-based reasoning to social reasoning about abstinence across a very short age range. “That’s Nasty” participants equated sex with fear of STIs and pregnancy; Normative participants viewed the risks and benefits of abstinence from a social perspective, for example assessing whether their relationship was “ready” for sex; Curious participants represented a transition group, bridging the two. Prevention programs serving early adolescents will need to address this shift.

This social reasoning about abstinence and sex was frequently gendered. Although the sample contained only six males, all four Curious and Normative males described social support for, and pressure to initiate, sex. In contrast, Curious females expressed cognitions such as good-girls-are-virgins, and Normative females described a double standard for girls, where sex not only carried the possibility of appearing and feeling more adult, but also carried stigma.

Third, our findings highlight both the vulnerability of, and opportunities for working with, early adolescents in their initial curiosity and learning about sex. Participants in the “That’s Nasty” group described sex as distasteful and distant. It is likely that information about healthy sexuality, pregnancy and STI prevention will be neither comfortable nor perceived to be relevant, and health education messages will be lost. This puts early adolescents who are initially curious about sex in a vulnerable situation. Our Curious participants were newly interested in relationships and sex, but possessed a very limited understanding of sex, contraception, and STI prevention. This was likely due to their earlier perceptions of sex as something distasteful and distant, and information about sex appeared neither comfortable nor relevant. The combination of high interest and limited knowledge is potentially dangerous, and may explain the finding that sexually experienced adolescents 14 years and under have a disproportionately high rate of STIs and pregnancy [28].

On a more hopeful note, our model suggests that adolescents who are initially curious about sex may also be uniquely open to education that fosters healthy models of adolescent sexuality. Our Curious participants were interested in any information about sex, and did not yet appear committed to highly gendered cultural models about sexual behavior and decision-making. Nor had they started to have sex. Prevention programs may be able to exploit this openness to information, providing skills focused upon assessing the “readiness” for sex described as important to Normative adolescents in their sexual decision-making. Skills and information will need to address both individual readiness (e.g. am I personally mature enough for a sexual relationships?), and relationship readiness (e.g. is our relationships in the right place?), as described by Normative participants [23].

We interpret our results with some caution. First, we developed a developmental model from cross-sectional data, and results need to be verified in a prospective study. Second, our findings are based upon in-depth interviews with a small number of participants who were mostly female, African American, and recruited from a single clinic. While males in our study provided consistent responses, their small numbers suggest caution in interpreting gender differences. Third, because of Indiana state child abuse reporting requirements, we did not ask participants 13 years and younger directly whether or not they were sexually experienced. Finally, some of the responses may have been influenced by social desirability of messages commonly given to early adolescents, such as waiting to have sex until marriage.

Despite these limitations, our results have implications for health promotion. Our findings suggest that early adolescent STI and pregnancy prevention programs might be enhanced by tailoring health messages to developmental changes in cognitions about abstinence and sex. More specifically, programs presenting sex as an activity for grown-ups might have traction with early adolescents who perceive sex as “Nasty”; but will be undermined by curious adolescents’ aspirations to learn more and try activities perceived to be “grown up.” This curiosity itself may help identify adolescents in need of, and open to, information and skills related to developing a healthy sexuality.

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Table 1

Age and Gender of Participants

Age	Female	Male
11	3	2
12	2	0
13	5	1
14	6	3

Table 2

Group Differences: Three Views of Abstinence among Early Adolescents

	“That’s Nasty”	Curious	Normative
N	7	11	4
Mean age	11.4 years	13.4 years	14.0 years
Gender	5 female, 2 male	9 female, 2 male	2 female, 2 male
Understanding of sex & abstinence	Simplistic and inaccurate. Sex always leads to pregnancy or STI	Simplistic and mostly inaccurate. Sex often leads to pregnancy and STI	Knew basic information about sex, STI, and contraception, although the information was still frequently inaccurate.
Interest in talking about sex	Topic of sex distasteful	Less distasteful, interested in learning more	Comfortable with topic Of sex
Attitudes toward sex & abstinence	Abstinence normative; Sex distant	Unsure	Sex normative; less emphasis on sex being limited to marriage
Sex as a transition to adulthood	Saw transition as distant and not applying to them	Unsure if they wanted This transition	Focused on “readiness” for the transition
Motivations about sex & abstinence	Risk focused—pregnancy, STI’s, school failure	Transitional—risks qualified, and social motivations mentioned	Social motivations—relationships, peer approval, “readiness”, social stigma
Parents & Family	Feared punishments and disappointing family	Feared loss of nurturing relationships	Family disappointment manageable

Table 3

Representative Quotes – Three Views of Abstinence among Early Adolescents

"That's Nasty"	Curious	Normative
<p>7</p> <p><i>"Why would you have sex as a teenage? That's just nasty...it just doesn't sound right... Why would you choose to do that?"</i> - 11 year old male</p>	<p>11</p> <p>When asked what's bad about abstinence: <i>"They curious... They probably have a lot of friends that's doin' it [sex]."</i> - 13 year old</p>	<p>4</p> <p>Two 14 year-old females discuss how boyfriends influence decision-making:</p>
<p><i>"Teens who have had sex are kind of weird". "They're trifling little kids."</i> - 11 year old male</p>	<p><i>"They [sexually experienced adolescents] have had more experience...it seems like they have more experience in life than you had."</i> - 13 year old female</p>	<p><i>" They may feel comfortable with this person, or think that this person won't try to do nothing to them. "</i></p>
	<p><i>"The difference is... You haven't lost your virginity and when people sit there and talk about it, you're the only one going to be left out. And you won't know... You're like, 'I wish I done it with somebody or something.' And if you did you'd be like, 'I already know what she's talking about cause I already been through that.'" - 13 year old female</i></p>	<p><i>" They want their partner to love them. They don't want them to think less of them. They don't want their partner to break up with them. If you have a boyfriend or girlfriend, it might change your mind [about sex] because you never thought about having a relationship. "</i></p>
	<p><i>"Sometimes people would be like, 'Well, you need to get away from me. You haven't like done it [had sex] or whatever. You don't know nothing about it, you're like a nobody.' People just say all that stuff."</i> - 13 year old female</p>	