

The Mystique of First Intercourse Among College Youth: The Role of Partners, Contraceptive Practices, and Psychological Reactions

**Carol Anderson Darling,¹ J. Kenneth Davidson, Sr.,²
and Lauren C. Passarello³**

Received February 28, 1989; accepted April 11, 1991

The purpose of this study was to examine first sexual intercourse as it relates to gender differences regarding involvement in various sexual behaviors, the role of the partner, contraceptive practices, sexual guilt, and sexual satisfaction. An anonymous 155-item questionnaire was distributed to 304 never-married female and male undergraduate students at a Midwestern state university. Of these respondents, only those with sexual intercourse experience were included in this study. The overall mean age at first sexual intercourse was 17.7 years for females and 17.8 years for males. Although both males and females experienced first intercourse with older partners, females were more likely to

Support for data collection and coding was from the College of Arts and Sciences, University of Wisconsin—Eau Claire and for data analyses from Academic Computing Services, University of Wisconsin—Eau Claire. In addition, tables were produced by the Media Development Center with support from the School of Graduate Studies and Office of University Research, University of Wisconsin—Eau Claire.

¹Professor of Family and Child Sciences, The Florida State University. Received Ph.D. in human ecology from Michigan State University. Her major research interests include the female sexual response and sexual satisfaction; family, health, and stress issues of menopausal women; and work and the family.

²Professor of Sociology, Department of Sociology and Anthropology, University of Wisconsin—Eau Claire, Eau Claire, WI 54702. Received Ph.D. in marriage and family from the University of Florida. His major research interests include sexual attitudes and behavior of college women and men, the female sexual response and sexual satisfaction including perceptions of the Grafenberg Spot and female ejaculation, and attitudes toward adoption among unmarried teens. To whom correspondence should be addressed.

³Marriage and Family Therapist, Church Street Counseling Center, Orlando, Florida. Received Ph.D. in marriage and family therapy from the Florida State University. Her major interests include the influence of early sexual involvement on contraceptive practices and sexual satisfaction, and adult children of alcoholics.

be in committed relationships. First intercourse was characterized by a lack of contraceptive use, primarily due to lack of planning. Compared to males, females were less physiologically and psychologically satisfied with their first sexual intercourse experience.

INTRODUCTION

The transition in status involved in first sexual intercourse represents a change that is made only once during the lifetime of the individual (Udry and Billy, 1987). This change has considerable significance for the individual, as well as society, since first sexual intercourse not only influences one's self-concept, but also creates interpersonal changes and societal concerns (Beeghley and Sellers, 1986). Some individuals perceive first intercourse as a step toward independence from parents and other authority figures, whereas others view first intercourse as a rite of passage to adulthood (Koch, 1988). This initial coital experience may be either very positive, accompanied by a sense of maturity and affirmation of one's self-identity, or it may be a disappointment, and result in feelings of guilt and shame (Kilman, 1984). Although research in the area of human sexuality is increasing, little is known about first sexual intercourse, or more importantly, how educators can help prepare youth to make responsible personal decisions concerning their emerging sexuality (Christopher and Cate, 1985).

The role of the partner is an important factor in first sexual intercourse. With regard to her/his age, both female and male adolescents typically report that their first intercourse partners were older than themselves. In one study, female respondents indicated a three-year age difference, whereas male respondents reported only a one-year age difference between themselves and their first intercourse partners (Zelnik and Shah, 1983). A later college student survey found that females, on the average, were only 1.5 years younger than their male partners at first intercourse (Moore and Davidson, 1990). This latter finding reflects the continued convergence of the age at first intercourse for women and men (Koch, 1988). The emotional commitment of female and male youth to their first intercourse partner also varies by gender. Females tend to have first intercourse in more committed relationships, while males are more likely to have first intercourse in casual relationships (Koch, 1988; Newcomb *et al.*, 1986; Roche, 1986). Furthermore, males have been found to report more emotional closeness with their first intercourse partners than with their subsequent partners (Kallen and Stephenson, 1982). However, one-third of the females in a study by Weis (1983) indicated that they perceived themselves as being exploited during their first intercourse experience.

A major concern about first intercourse is the use of contraception. While both females and males express fear of premarital pregnancy, relatively few adolescents plan for their first intercourse, and thus the majority are unprepared to use contraceptives (Burger and Inderbitzen, 1985). Of those who planned first intercourse and did not use contraceptives, the following reasons were cited: "didn't want to," "didn't think I could get pregnant," and "none available" (Zelnik and Shah, 1983). In an earlier study of college students, it was believed a positive relationship would be found between commitment to the relationship and contraceptive usage due to concern for the relationship partner. However, the findings did not confirm this viewpoint, since 60% of the female respondents were unreliable contraceptors regardless of their relationship commitment (Needle, 1975). It appears as if the decision to use contraception is based primarily on the expectancy of having sexual intercourse, which leaves first intercourse especially unprotected (Foreit and Foreit, 1981). Among college students, the reported percentages who used a contraceptive during first sexual intercourse have ranged from 37% (Darling and Davidson, 1986) to 44% (Bishop and Lipsitz, 1988) for never-married females and from 33% (Bishop and Lipsitz, 1988) to 43% (Darling and Davidson, 1986) for never-married males. Thus, physical arousal apparently overrides decision making regarding contraceptive protection for many adolescents.

Emotional reactions of female and male youth to first intercourse are quite varied (Carroll *et al.*, 1985; Heiman *et al.*, 1986). It has been commonly thought that female youth are more ambivalent about first intercourse than male youth because this transition could potentially cause more problems for females (Waterman and Nevid, 1977). Many affective reactions such as pleasure, guilt, and anxiety are important components of first intercourse. In fact, female youth are more likely than male youth to report that their first intercourse was a negative emotional experience. In general, female adolescents with more heterosocial experiences and more experience with noncoital foreplay behaviors prior to first intercourse report less guilt (Weis, 1983). However, no similar research exists regarding male adolescents.

Sexual satisfaction can be defined as the degree to which one's expectations are fulfilled by one's perception of reality (Campbell *et al.*, 1976). Not only are females experiencing exploitation and ambivalent guilt feelings regarding first intercourse, but also they are experiencing less physiological and psychological sexual satisfaction than males (Darling and Davidson, 1986). In general, relatively little is known about physiological and psychological satisfaction of unmarried youth, as human sexuality research has primarily concentrated on marital relationships (Mahoney, 1979). However,

the emotional state of females during sexual activity is a very critical factor since their past social learning and emotional stimuli influence their physiological response. For example, the desire for bodily contact by females is positively associated with sexual satisfaction and orgasmic response (Gospodinoff, 1980). These findings suggest that females tend to be highly dependent on males for their initial introduction to the physiological pleasures of sexual activities. As a result, greater sexual enjoyment for a female is related, in part, to her involvement in a committed interpersonal relationship and to her partner's involvement in certain desired arousal activities. For males, greater sexual pleasure is usually related to increased frequency of sexual intercourse and a larger number of sex partners (Mahoney, 1979).

Since the first intercourse experience can be physiologically, psychologically, and socially costly due to possible pregnancy, disease, emotional turmoil, and sexual dysfunction, it is important to more fully understand this important transition (Earle and Perricone, 1986; Koch, 1988). Professionals and partners can then better assist adolescents in exploring the values and consequences of their sexual actions and interactions, as well as making critical life choices. Consequently, the purpose of this study was to examine first sexual intercourse as it relates to gender differences regarding involvement in various sexual behaviors, the role of the partner, contraceptive practices, and sexual guilt as well as physiological and psychological sexual satisfaction.

METHOD

Procedure

The data were obtained by utilizing an anonymous questionnaire administered during regular university classes to volunteer respondents. The questionnaire was administered to students enrolled in a functional marriage and family course and select courses in the Schools of Arts and Sciences and Business. This investigation was part of a three-year research project designed to assess the long-term effects, if any, of the sexuality content in a functional marriage and family course on the sexual knowledge, attitudes, and practices of college students. With the cooperation of the various instructors, the potential respondents were asked by a research assistant to complete the questionnaire, while neither the course instructor nor the principal investigator were present. All students in the selected classes agreed to participate in the initial stage.

The questionnaire consisted of 155 open-ended and closed-form items concerning sexual knowledge, attitudes, and practices. Since this survey

instrument was developed for use in a broader investigation of the influence of college-level sexuality education, it should be noted that only those variables that pertained either directly or indirectly to first sexual intercourse have been considered in this investigation. A pretest of the questionnaire was conducted using students enrolled in an upper division marriage and family course and an upper division human sexuality course. Since no scales were used, the investigators used face validity along with checking for internal consistency of responses in preparing the final draft of the survey instrument.

Sample

The initial sample consisted of 304 never-married females and males who were enrolled as undergraduates at a Midwestern state university. The mean age of the females was 21.6 years while the mean age of the males was 21.4 years. Since this paper focused on first intercourse of female and male college students and not on the longitudinal impact of the research design, only data from the first week of classes were utilized, which combined the responses of the experimental and comparison groups because no treatment had yet been given. Although it would have been valuable to analyze data regarding those individuals who had not experienced sexual intercourse, the small number of sexually inactive males ($n = 18$, 16%) prohibited adequate statistical analyses for a number of the multiple-answer category variables. While all academic class standings were represented, a greater proportion of the respondents were juniors (27%) and seniors (54%), as compared to freshmen (3%) and sophomores (16%).

Statistical Analysis

The chi-square test and analysis of variance were used to ascertain the significance of differences between respondent groups. In keeping with customary practice, the significance level was set at $p < .05$. It should be noted that reported p values of .000 were, in fact, zero to three decimal places using .5 or greater as the basis for rounding values upward.

FINDINGS

Sexual History Profile

Since first intercourse was the central focus of this investigation, only those respondents who had experienced sexual intercourse were utilized in

Table I. Age at First Sexual Experiences by Respondent Group

Age at first sexual experiences	Female	Male	Total		Gender differences	
	\bar{X}	\bar{X}	\bar{X}	<i>F</i>	<i>df</i>	<i>p</i>
Age/first masturbation	14.3	13.7	14.0	.99	1, 132	.323
Age/first intercourse	17.7	17.8	17.7	.23	1, 206	.632

these analyses (114 females, 61%, and 94 males, 84%). Of these respondents, it was determined that 39.5% of the females and 38.3% of males had experienced their first intercourse during their high school years (through 17 years of age), while 60.5% of females and 61.7% of males had experienced their first intercourse during their college years (18 years of age and older).

First, gender differences regarding actual participation of the respondents in certain sexual behaviors such as engaging in masturbation and experiencing orgasm will be reviewed. When focusing on masturbation, a significant difference existed between females (58.4%) and males (80.0%) regarding ever having engaged in masturbation ($\chi^2 = 10.13$; *df* = 1; *p* = .000). Moreover, while a majority of the respondents had experienced orgasm, this behavior was more the case for males (98.9%) than females (84.2%), which resulted in a significant gender difference ($\chi^2 = 13.764$; *df* = 2; *p* = .000).

A brief profile of the sexual history of these respondents relating to the age at initiation of select sexual behaviors is depicted in Table I. Although, in general, females first experienced masturbation at approximately age 14, over 3 years lapsed after first masturbation before they experienced their first intercourse. In comparison, male respondents also experienced their first masturbation at approximately age 14 and waited approximately 4 years before initiating intercourse.

Whereas the median age of first intercourse was 18 for both genders, the overall mean age at first intercourse for females was 17.7 with a range of 10-21 years. For males, the overall mean age at first intercourse was 17.8 years with a range of 13-21 years. As can be seen, the mean ages for experiencing first intercourse for females and males are quite similar, even though the age range for females is three years greater.

Role of Partner in First Intercourse

Since partner relationships have been cited in the literature as an important component of female sexual satisfaction, it is essential to

Table II. Select Characteristics of First Sexual Intercourse Experience by Respondent Group

Select characteristics of first sexual intercourse experience	Female		Male		Total		Gender differences		
	%	M	%	M	%	M	χ^2	df	p
Partner relationship^a									
Steady partner	66.1		43.5		55.7		21.32	4	.001 ^b
Acquaintance	12.8		32.6		21.9				
Lover	9.2		7.6		8.5				
Person just met	3.7		13.0		8.0				
Fiance	6.4		3.3		5.0				
Relative	1.8		—		1.0				
Partner characteristics									
	Female		Male		Total		Gender differences		
	M		M		M		F	df	p
Age of partner/first intercourse	19.5		17.9		18.8		13.67	1, 205	.003 ^b
Times of intercourse/first partner	7.4		6.0		6.7		4.00	1, 207	.047 ^b
Number of intercourse partners	4.0		5.0		4.4		2.25	1, 201	.136

^aRank ordered by total group.

^bStatistically significant at $p < .05$.

examine the role of the partner in first intercourse. Both females and males were more likely to experience their first intercourse with a steady dating partner (see Table II). However, this circumstance was more often the case for females (66.1%) than males (43.5%). In comparison, males (32.6%) were more likely than females (12.8%) to have had their first intercourse with an acquaintance. These gender differences in partner relationships were significant. Thus, it appears that males were more likely to have experienced first intercourse in more casual relationships such as with an acquaintance or a person they had just met, while females were more likely to have experienced their first intercourse in a close relationship such as with a steady partner, lover, or fiancé.

Other partner-related characteristics in the first intercourse experience included the age of the partner and times of subsequent intercourse with that partner, as well as the overall number of intercourse partners of the respondents. The data indicated a gender difference regarding the age of first intercourse partners. While females experienced first intercourse with a partner who was approximately two years older and ranged in age from 16 to 39 years, males experienced first intercourse with a partner who was approximately one to two months older and ranged in age from 13 to 28 years, which represents a significant gender difference (see Table II). Females were also more likely to have had sexual intercourse again with their first sex partner in comparison to males. While a majority of both females and males had further sexual intercourse experiences with their first partner, 28.7% of males reported no subsequent involvement in sexual intercourse with their first partner as compared to only 14% of females. While male respondents also reported a slightly higher number of lifetime intercourse partners ($M = 5.0$), than the female respondents ($M = 4.0$), this difference was not significant.

These differences in partner relationships and number of subsequent intercourse episodes with the first partner could be attributed to the greater emotional involvement of females with their partners and whether or not pressure was used in this first intercourse experience. To further examine this argument, the data indicated that females were more likely than males to agree with the statement "No intercourse without love" (61.4% vs. 28.7%, respectively). This finding represents a significant gender difference regarding the emotional commitment necessary for sexual intercourse to occur ($\chi^2 = 26.29$; $df = 4$, $p = .000$). Pressure from partners to have first intercourse was also an important variable for females (38.5%), who more frequently than males (8.8%) reported being pressured into having their first sexual intercourse experience ($\chi^2 = 21.45$, $df = 1$, $p = .000$).

Table III. Sources of Contraceptive Information by Respondent Group

Sources of contraceptive information	Female		Male		Total	χ^2	Gender differences	
	%	%	%	%	%		df	p
First source ^a								
Peers	26.5	56.2	39.6			12.78	9	.005 ^b
Written materials	21.2	12.4	17.3					
Family members	13.3	9.0	9.0					
High school class	12.4	4.5	8.9					
Class before high school	8.0	7.9	7.9					
Formal education/nonclass	6.2	4.5	5.4					
Family planning clinic	6.2	1.1	4.0					
Other	1.8	3.4	2.5					
College class	2.7	1.1	2.0					
Family doctor	1.8	—	1.0					
Best source ^a								
Written material	27.0	39.6	32.5			37.16	8	.000 ^b
College class	18.3	16.5	17.5					
Family planning clinic	19.1	2.2	11.7					
Family doctor	16.5	2.2	10.2					
Peers	4.3	15.4	9.2					
Other	2.6	5.9	5.8					
High school class	4.3	6.6	5.3					
Formal education/nonclass	5.2	5.5	5.3					
Family members	2.6	2.2	2.4					

^a Rank ordered by total group.

^b Statistically significant at $p < .05$.

Contraceptive Use and Nonuse

In regard to the *first* source of contraceptive information, peers were reported as the overall primary source, followed by written materials (see Table III). However, the role of education is also quite important, especially when combining the categories of formal education/nonclass, high school classes, and classes before high school. Females, as compared to males, more often cited educational classes as a source of contraceptive information (28.7% vs. 16.2%), with high school classes ranking as most frequent among first educational sources. While males cited peers more often than females (56.2% vs. 26.5%), females more frequently reported written materials as a first source of contraceptive information compared to males (21.2% vs. 12.4%). These differences in first sources of contraceptive information were significant.

While peers were the overall first source of contraceptive information, written materials were considered by both females and males to be the *best* source of contraceptive information. When combining the various educational sources, education also ranked high for both females (27.8%) and males (28.6%). College classes were especially noted as being one of the better sources of contraceptive information. While medical sources such as family doctors and family planning clinics were not ranked highly as a first source of contraceptive information, they were noted more frequently as a best source, especially for females. Although peers were cited as the first source of contraceptive information for the majority of the respondents, peers were not regarded highly as a best source for contraceptive information. Gender differences in best sources of contraceptive information were significant and particularly noted for written materials, medical sources, and peers.

When further examining the role of education, it was noted that relatively few respondents had participated in a college human sexuality class (32.5% of females and 20.2% of males, respectively). However, a greater number of both females and males had participated in a high school or junior high school sex education course (49.1% and 45.7%, respectively). Both females and males believed the seventh grade was the optimal time to initiate a course in human sexuality. The mean grade level suggested by males ($M = 7.4$) was later than that suggested by females ($M = 6.8$; $F = 8.03$, $df = 1, 207$; $p = .005$).

First intercourse was primarily noted by the lack of contraceptive use, with only 36.8% of females and 42.6% of males reporting its use. For those who did use contraceptives during first intercourse, the majority of the respondents utilized condoms (females: 82.9%; males: 52.5%; see Table IV). Oral contraceptives, which were reported by 7.3% of the females and 32.5%

Table IV. Contraceptive Usage During First Intercourse by Respondent Group

Contraceptive usage	Female		Male		Total	χ^2	df	p
	%	%	%	%	%			
Contraceptive used^a								
Condom	82.9	52.5	67.9	11.31	6	.079		
Oral contraceptive	7.3	32.5	19.8					
Withdrawal	4.9	5.0	4.9					
Chemical spermicide	2.4	2.5	2.5					
Diaphragm	2.4	2.5	2.5					
IUD	—	2.5	1.2					
Rhythm	—	2.5	1.2					
Reasons/contraceptive nonuse^d								
Unplanned	40.4	18.2	30.7	19.78	7	.006 ^b		
None available	17.5	40.9	27.7					
Didn't want to	22.8	13.6	18.8					
Too naive	15.8	6.8	11.9					
Drunk — didn't care	1.8	6.8	4.0					
Too excited	—	—	3.0					
Afraid to buy	1.8	2.3	2.0					
Not my problem	—	4.5	2.0					

^a Rank ordered by total group.

^b Statistically significant at $p < .05$.

of the males, was the second most frequently used contraceptive during first intercourse.

Although there was great variation, the major reasons given for non-use of contraception were that first intercourse was unplanned and contraception was not available. However it should be noted that females were more likely to indicate that intercourse was unplanned, whereas males reported that contraceptives were not available. Other differences between females and males which contributed to the significant gender difference were related to the males' greater likelihood of being drunk and not caring, getting too excited, and not considering it their problem (see Table IV).

Reactions to First and Current Sexual Intercourse

The pertinent reactions examined in this study included feelings of guilt about first and current sexual intercourse, as well as physiological and psychological sexual satisfaction with first and current sexual intercourse. An examination of the perceived emotional reactions to first intercourse indicated that females experienced feelings of guilt more often than males (see Table V). Whereas these gender differences regarding guilt in first intercourse were significant, there were no significant differences regarding guilt related to current intercourse. Furthermore, while levels of guilt remained similar for males for first and current intercourse, for females there was less guilt surrounding current intercourse.

When examining the reasons for experiencing guilt after first intercourse, it is of value to compare the responses of females and males. Females cited "didn't like person" (24.5%), "parents' feelings" (15.1%), and "wait until married" (13.2%) as their three primary reasons for guilt feelings, while males cited "didn't like person" (26.7%), "my personal values" (16.7%), and "weren't friends afterward" (13.3%) as their three primary reasons. Regarding reasons for guilt about current intercourse, females cited "didn't like person" (26.5%), "parents' feelings" (23.5%), and "religious reasons" (17.6%) as their three primary reasons. Males, on the other hand, cited "didn't like person" (32.0%), "religious reasons" (20.0%), and "fear of pregnancy" (16.0%). There were no significant gender differences related to reasons for guilt.

How sexually satisfying is one's first sexual intercourse experience? The data in Table V indicate that a greater number of males than females perceived first intercourse as being both more physiologically (80.6% and 28.3%, respectively) and psychologically satisfying (67.0% and 28.3%, respectively). For each of these variables the gender differences were significant. Several reasons were provided as to why first intercourse was not

Table V. Guilt Feelings and Sexual Satisfaction Associated with First and Current Intercourse by Respondent Group

Guilt feelings and sexual satisfaction	Female		Male		Total	χ^2	df	p
	%	%	%	%	%			
Guilt								
First intercourse						2.56	202	.011 ^b
Never	43.6	59.1		50.7				
Occasionally	43.6	35.0		39.9				
Frequently	12.7	5.4		9.4				
Current intercourse						1.09	161	.276
Never	54.7	60.4		57.4				
Occasionally	39.6	39.2		36.6				
Frequently	5.7	6.6		6.1				
Sexual satisfaction								
First intercourse								
Physiological satisfaction ^a	28.3	80.6		51.0		-8.80	205	.000 ^b
Psychological satisfaction ^a	28.3	67.0		45.9		-6.08	206	.000 ^b
Current intercourse								
Physiological satisfaction						-1.79	209	.075
Satisfied	76.7	68.4		73.0				
Neither satisfied/dissatisfied	15.5	14.7		15.2				
Dissatisfied	7.8	16.8		11.8				
Psychological satisfaction ^a								
Satisfied	74.6	67.4		71.3		-1.06	207	.293
Neither satisfied/dissatisfied	9.6	12.6		11.0				
Dissatisfied	15.8	20.0		17.7				

^a Answer categories were "yes" and "no."

^b Statistically significant at $p < .05$.

physiologically satisfying. The primary reasons reported by females were "painful" (41.4%), "didn't feel satisfied" (22.2%), "inexperienced" (11.1%), and uncomfortable (11.1%). In comparison, males reported "didn't feel satisfied" (27.8%), "drunk—don't remember" (22.2%), and "uncomfortable" (11.1%). These gender differences were statistically significant ($\chi^2 = 29.54$, $df = 12$, $p = .003$). Similarly there was a significant difference between females and males concerning why first intercourse was not psychologically satisfying ($\chi^2 = 47.59$, $df = 19$, $p = .000$). The primary reasons reported by females for lack of psychological sexual satisfaction during first intercourse were "felt guilty" (23.4%), "scared" (22.1%), and "didn't want to" (10.4%), as compared to the males who replied "felt guilty" (19.4%), "worry of pregnancy" (12.9%), "didn't love the person" (9.7%), and "drunk—don't remember" (9.7%).

An examination of sexual satisfaction with current intercourse indicates that a majority of females and males experienced both physiological and psychological sexual satisfaction (see Table V). However, no significant gender differences were found for either physiological or psychological sexual satisfaction.

Since previous data indicated gender differences in motivations for sexual intercourse, a two-way analysis of variance was conducted on various dependent variables related to partner characteristics, guilt, and sexual satisfaction. Table VI portrays an examination of gender in interaction with love as a prerequisite for sexual intercourse and gender in interaction with partner pressure in first intercourse. Although several of the partner and guilt variables were influenced by the independent variables, in general, only a small portion of the variability (ranging from .6% to 8%) was accounted for by either gender and love as a prerequisite for sexual intercourse or gender and partner pressure in sexual intercourse.

In regard to sexual satisfaction, 25% of physiological satisfaction in first intercourse was accounted for by gender and love, while 23% of physiological satisfaction in first intercourse was accounted for by pressure and gender. There were no interaction effects for this variable. In comparison, 13% and 17% of psychological sexual satisfaction in first intercourse was accounted for by these variables, respectively. However, both gender and partner pressure in first intercourse were significant main effects for psychological sexual satisfaction in first intercourse. Although gender and motivations for intercourse had some influence on sexual satisfaction during first intercourse, there was virtually no carry-over to affect physiological or psychological sexual satisfaction during current intercourse.

DISCUSSION AND CONCLUSION

The transition in status involved in first sexual intercourse is of considerable importance since higher numbers of our youth are involved in sexual activity and are, therefore, facing interpersonal challenges (partner pressures and guilt) as well as creating societal concerns (pregnancy and sexually transmitted diseases). In addition, these individuals are taking steps toward interpersonal freedoms that affect both their emotional and their physical well-being. Since this transition impacts both the individual and society, family professionals and educators must attempt to better understand first sexual intercourse in order to more fully aid those who are faced with this decision. The results of this study indicate some similarities and some prevalent differences between young women and men regarding their first intercourse experience including the role of the partner, contraceptive use, and emotional reactions. Since the analysis only included those individuals who had experienced sexual intercourse, it should be remembered that this sample is not representative of all adolescents, and thus the generalizations need to be qualified.

This study revealed that 60% of females and 84% of males had experienced sexual intercourse. A review of the relevant research indicates that the percentage of youth, without regard to race or educational level, who reported having sexual intercourse by 19 years of age range from 45% to 69% for females, and 56% to 81% for males (Hofferth *et al.*, 1987; Zelnik and Kantner, 1980). Similarly, other researchers have found that among college students, the percentages who have experienced sexual intercourse by 23 years of age range from approximately 55% to 74% for females and 65% to 77% for males (Kallen and Stephenson, 1982; Pelletier and Herold, 1988; Robinson and Jedlicka, 1982). Moreover, the average age of first sexual intercourse for both female and male youth was approximately 17.7 years. This age is slightly higher than that indicated by previous research, which may be attributable to sampling variation. Although young male adolescents usually experience first intercourse at a younger age than female adolescents, the average age at first intercourse for female adolescents has also been declining (Darling and Kallen, 1984; Miller and Olson, 1988; Weis, 1983; Wyatt, 1989). Thus, for both female and male youth, initiation of first intercourse often begins around 16 years of age (Bishop and Lipsitz, 1988; Weis, 1985; Zelnik and Kantner, 1980).

It is also interesting that both females and males waited 3.5-4 years between first experiencing masturbation and initiating intercourse. Although there was little difference between females and males in the average age of first experiencing masturbation, males were still more likely to have masturbated. This finding corroborates earlier research indicating that male

Table VI. Relationship of First Intercourse Motivations and Gender to Partner Characteristics, Guilt, and Sexual Satisfaction

Variables	Love prerequisite for sexual intercourse by gender			Partner pressure in first intercourse by gender		
	F	p	r ²	F	p	r ²
Partner characteristics						
Age of partner/first intercourse	9.44	.000 ^a	.076	7.51	.000 ^a	.058
Main effects	14.76	.000 ^a		11.25	.000 ^a	
Love (or pressure)	4.08	.017 ^a		1.93	.166	
Gender	26.20	.000 ^a		13.27	.000 ^a	
Interaction effects	1.46	.234		.02	.883	
Times of sexual intercourse/first partner	5.60	.000 ^a	.21	8.48	.000 ^a	.062
Main effects	3.88	.009 ^a		12.07	.000 ^a	
Love (or pressure)	.64	.526		10.92	.001 ^a	
Gender	8.92	.003 ^a		21.47	.000 ^a	
Interaction effects	8.17	.000 ^a		1.30	.255	
Number of intercourse partners	10.20	.000 ^a	.083	6.23	.000 ^a	.048
Main effects	16.05	.000 ^a		9.06	.000 ^a	
Love (or pressure)	13.75	.000 ^a		1.79	.182	
Gender	7.31	.007 ^a		18.02	.000 ^a	
Interaction effects	1.44	.239		.57	.450	
Guilt						
First intercourse	6.45	.000 ^a	.053	7.88	.000 ^a	.057
Main effects	10.03	.000 ^a		10.90	.000 ^a	

Love (or pressure)	4.94	.007 ^a		8.15	.005 ^a
Gender	11.16	.001 ^a		5.29	.022 ^a
Interaction effects	1.09	.337		1.84	.176
Current intercourse			.006		.031
Main effects	.87	.501		3.83	.010 ^a
Love (or pressure)	.73	.533		4.20	.016 ^a
Gender	.40	.668		6.76	.010 ^a
Interaction effects	.81	.369		.03	.868
	1.08	.342		3.10	.079
Sexual satisfaction					
First intercourse					
Physiological satisfaction	34.89	.000 ^a	.246	35.33	.000 ^a
Main effects	58.06	.000 ^a		52.99	.000 ^a
Love (or pressure)	.80	.450		.73	.394
Gender	165.66	.000 ^a		83.51	.000 ^a
Interaction effects	.13	.878		.00	.971
Psychological satisfaction	16.37	.000 ^a	.130	26.06	.000 ^a
Main effects	26.80	.000 ^a		38.18	.000 ^a
Love (or pressure)	.26	.770		13.30	.000 ^a
Gender	71.59	.000 ^a		34.74	.000 ^a
Interaction effects	.74	.479		1.80	.180
Current intercourse					
Physiological satisfaction	.52	.764	.003	1.15	.327
Psychological satisfaction	.69	.629	.004	3.39	.018 ^a

^a Significant at $p < .05$.

youth tend to attribute sexual pleasure to their genitals at an earlier age than female youth, and also are more likely to gain support from their peer group for such activities (Darling and Davidson, 1986; Allgeier and Allgeier, 1991).

The role of the partner in first sexual intercourse is critical, since this relationship contributes to one's physiological and psychological well-being, as well as the use of effective contraception and exposure to possible disease. Who was the first partner, how old was this partner, and how many subsequent times did the respondent have sexual intercourse with this partner? Both genders engaged in first intercourse with older partners, which supports previous research, but females had partners who were approximately 2 years older while males had partners who were only about one month older. These findings support the belief that women date older men due, in part, to the variation in which female and male adolescents reach maturity. However, risks are apparent as older partners are more likely to have had more sexual experiences, especially considering the age range of female partners, which spans ages 16-39. Although female and male youth are initiating sexual intercourse at approximately the same age, males were still more likely to have experienced sexual intercourse and were less likely to perceive love as a prerequisite to sexual intercourse, while females were more likely to have been pressured into having sexual intercourse. These findings indicate a continuation of the double standard in sexuality, as does the fact that males were more likely to have experienced their first intercourse in a casual relationship whereas women were more likely to have experienced their first intercourse in a more committed relationship.

Similar to other studies, this investigation found that a majority of youth do not use contraception during their first intercourse experience. The primary reason for lack of contraceptive use seems to reflect that sexual intercourse may have been "unplanned." Learning partner communication skills would be helpful to both males and females so as to increase preparation for such a significant transition.

Of those who used contraceptives for their first intercourse experience, the majority of both females and males used the condom alone, as opposed to using the condom along with a chemical spermicide. Thus, they were not using the optimal means of protection against an unwanted pregnancy. Although the use of condoms will reduce the risk of exposure to AIDS and other sexually transmitted diseases, condoms provide no guarantees (Allgeier and Allgeier, 1991). It is also interesting to note that male respondents indicated a higher usage of oral contraceptives by their partners. However, it must be remembered that their first partners were also

older than the male respondents, and may have been more likely to have already been experienced in sexual intercourse.

Unfortunately, the majority of male adolescents rely on peers for their first source of contraceptive information, but do not necessarily rank them high as a "best source." Although few of these respondents were exposed to sex education courses before high school, in high school, or in college, education at some level was noted as both a first source, and more importantly, a best source of contraceptive information. In fact, respondents believed in the necessity of education on this topic, especially contraceptive education, and believed such content should be introduced into the curriculum by the seventh grade. In addition, it appears that creative, well-written materials understandable to youth could be a source of valuable information, since written materials were ranked highest by both females and males as the best source of contraceptive information.

When examining the emotional reactions of females and males to both their first and current intercourse experiences, it is apparent that while there are no major gender differences regarding either guilt or sexual satisfaction with current intercourse, the first experience can be more problematic for females. Not only do more females experience guilt as a result of their first sexual intercourse experience, but a majority also do not experience either physiological or psychological sexual satisfaction. These circumstances can be partially attributed to the pressure they experienced to get involved in a sexual relationship. Furthermore, both females and males related that they felt guilt because they did not like the person. Thus, it appears that these youth are getting involved in sexual experiences with individuals with whom they do not want a committed relationship. While these factors may influence sexual satisfaction during first intercourse, they appear to have no long-term effect on current sexual satisfaction. Nevertheless, the conflicting emotions relating to first intercourse need to be understood in order to assist adolescents through this important transition.

Those females who did not report physiological sexual satisfaction indicated that they were in pain, did not feel satisfied, were inexperienced, or were uncomfortable, while males indicated that they were not sexually satisfied because they were drunk and were not able to remember or they were uncomfortable. It is possible that alcohol is part of a script for youth to remove guilt and feelings of discomfort in their first sexual intercourse experiences; however, it may be causing more problems since they cannot remember the experience and later feel guilt.

While books, television, and films often depict sexual encounters between young lovers as a joyous event, in reality the initiation of sexual intercourse can often be characterized by a lack of contraceptive use,

pressure to become sexually involved, guilt, and sexual dissatisfaction. Regardless of the fact that today's youth are bombarded with media exposure related to sexuality, they remain largely unaware of the many crucial factors influencing their sexual needs and desires, and thus may experience problems when making this important transition in sexual status. In fact, youth are not prepared for their reactions to first intercourse such as guilt, as well as a lack of both physiological and psychological sexual satisfaction especially for female adolescents. Thus, it is very important for educators to understand the needs and behaviors of young persons in order to provide information more effectively, and to thereby prepare today's youth for responsible sexual decision making. In addition, the acquisition of good communication skills is critical, so that partners can better communicate their needs, desires, and feelings regarding intimate relationships. All too often we mystify sexual intercourse by only telling adolescents what not to do; however, as the data indicate, sexual intercourse among adolescents has not been deterred. As a result, these youth who are unarmed with knowledge, but have considerable curiosity, get involved in sexual situations that are not all that favorable. Therefore, we as family professionals can play a major role in the dissemination of knowledge for the purposes of protecting physical well-being through the prevention of pregnancies and diseases in our youth, as well as the protection of emotional well-being by helping to make the sexual experiences of youth be positive ones.

ACKNOWLEDGMENTS

The authors wish to thank Ann B. Boss, Cynthia L. Choren, Kara A. Johnson, Shawna Oglesby, and Amy J. Renshaw, Research Assistants, University of Wisconsin—Eau Claire, for their many contributions to this research project.

REFERENCES

- Allgeier, E. R., and Allgeier, A. R. (1991). *Sexual Interactions* (3rd ed.), Heath, Lexington, MA.
- Beeghly, L., and Sellers, C. (1986). Adolescents and sex: A structural theory of premarital sex in the United States. *Dev. Behav. 7*: 313-336.
- Bishop, P., and Lipsitz, A. (1988, November). *Sexual behavior among college students in the AIDS era: A comparative study*. Paper presented at the meeting of the Society for the Scientific Study of Sex, San Francisco, CA.
- Burger, J. M., and Inderbitzen, H. M. (1985). Predicting contraceptive behavior among college students: The role of communication, knowledge, sexual anxiety, and self-esteem. *Arch. Sex. Behav. 14*: 343-350.
- Campbell, A., Converse, P., and Rogers, W. (1976). *The Quality of American Life: Perceptions, Evaluations, and Satisfaction*. Russell Sage, New York.

- Carroll, J. L., Volk, K. D., and Hyde, J. S. (1985). Differences between males and females in motives for engaging in sexual intercourse. *Arch. Sex. Behav.* 14: 131-139.
- Christopher, F. S., and Cate, R. M. (1985). Anticipated influences on sexual decision-making for first intercourse. *Family Relat.* 34: 265-270.
- Darling, C. A., and Davidson, J. K., Sr. (1986). Coitally active university students: Sexual behaviors, concerns, and challenges. *Adolescence* 21: 403-419.
- Darling, C. A., and Kallen, D. J. (1984). Sex in transition, 1900-1980. *J. Youth Adoles.* 13: 385-399.
- Earle, J. R., and Perricone, P. J. (1986). Premarital sexuality: A ten-year study of attitudes and behavior on a small university campus. *J. Sex Res.* 22: 304-310.
- Foreit, J. R., and Foreit, K. G. (1981). Risk-taking and contraceptive behavior among unmarried college students. *Populat. Environ.* 4: 174-188.
- Gospodinoff, E. R. (1980). Bodily contact and sexual response in adult females. (Doctoral Dissertation, University of Pennsylvania, 1979). *Dissertation Abstracts International* 40: 3367. (University Microfilms No. 79-28133.)
- Heiman, J. R., Gladue, B. A., Roberts, G. W., and LoPiccolo, J. (1986). Historical and current factors discriminating sexually functional from sexually dysfunctional married couples. *J. Marital Family Ther.* 12: 163-174.
- Hofferth, S. L., Kahn, J. R., and Baldwin, W. (1987). Premarital sexual activity among U.S. teenage women over the past three decades. *Family Plan. Perspect.* 19: 46-53.
- Kallen, D. J., and Stephenson, J. J. (1982). Talking about sex revisited. *J. Youth Adoles.* 11: 11-23.
- Kilman, P. (1984). *Human Sexuality in Contemporary Life*. Allyn & Bacon, Boston.
- Koch, P. B. (1988). The relationship of first intercourse to later sexual functioning concerns of adolescents. *J. Adoles. Res.* 3: 345-362.
- Mahoney, E. R. (1979). *Human Sexuality*. McGraw-Hill, New York.
- Miller, B. C., and Olson, T. D. (1988). Sexual attitudes and behavior of high school students in relation to background and contextual factors. *J. Sex Res.* 24: 194-200.
- Moore, N. B., and Davidson, J. K., Sr. (November, 1990). Sex information sources: Do they make a difference in sexual decisions? Paper presented at the annual meeting of the National Council on Family Relations, Seattle, WA.
- Needle, R. H. (1975). The relationship between first sexual intercourse and ways of handling contraception among college students. *J. Am. Coll. Health Assoc.* 24: 106-111.
- Newcomb, M. D., Huba, G. J., and Bentler, P. M. (1986). Determinants of sexual and dating behaviors among adolescents. *J. Personal. Soc. Psychol.* 50: 428-438.
- Pelletier, L. A., and Herold, E. S. (1988). The relationship of age, sex guilt, and sexual experience with female sexual fantasies. *J. Sex Res.* 24: 250-256.
- Robinson, I., and Jedlicka, D. (1982). Change in sexual attitudes and behavior of college students from 1965 to 1980: A research note. *J. Marriage Family* 44: 237-240.
- Roche, J. P. (1986). Premarital sex: Attitudes and behavior by dating stage. *Adolescence* 21: 107-121.
- Udry, J. R., and Billy, J. O. G. (1987). Initiation of coitus in early adolescence. *Am. Sociol. Rev.* 52: 841-855.
- Waterman, C. K., and Nevid, J. S. (1977). Sex differences in the resolution of the identity crisis. *J. Youth Adoles.* 6: 337-342.
- Wyatt, G. E. (1989). Reexamining factors predicting Afro-American and White American women's age at first coitus. *Arch. Sex. Behav.* 18: 271-298.
- Weis, D. L. (1983). Affective reactions of women to their initial experience of coitus. *J. Sex Res.* 19: 209-237.
- Weis, D. L. (1985). The experience of pain during women's first sexual intercourse: Cultural mythology about sexual initiation. *Arch. Sex. Behav.* 14: 421-437.
- Zelnik, M., and Kantner, J. F. (1980). Sexual activity, contraceptive use and pregnancy among metropolitan teenagers: 1971-1979. *Family Plan. Perspect.* 12: 230-237.
- Zelnik, M., and Shah, F. K. (1983). First intercourse among young Americans. *Family Plan. Perspect.* 15: 64-70.