

Sexual Behaviors, Attitudes, and Reactions of Female Adolescent Residential Patients

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### Abstract

Research about the sexual behavior of adolescents has focused primarily on teen pregnancy and sexually transmitted diseases/HIV, with little attention given to the psychological, emotional or social impact of precocious sexuality and promiscuous behaviors. This paper reports results of a qualitative inquiry about the sexual behaviors, attitudes, beliefs and reactions of six adolescent girls. The participants were students in a residential treatment center who agreed to be interviewed. Each was interviewed at least one time, and recordings from the interviews were transcribed. Then the participant was asked to review the transcription to check for accuracy and to clarify meaning. Each of the six participants had a significant, meaningful and important story to tell about their sexual history and their feelings, thoughts, and reactions to their experiences, and each of their accounts is described in detail. Common themes from the narratives are then discussed. These include motivations for sexual behavior manifested in the interviews (physical pleasure, intimacy, social approval, power and control, self-esteem augmentation, and hurting others). They also include the various past and current reactions of each participant in response to her experiences.

## Sexual Behaviors, Attitudes and Reactions of Female Adolescent Residential Patients

### Introduction

Concerns about the prevalence of STD's, HIV and teen pregnancy have dominated the literature in the field of adolescent sexual behavior in the last decade, and decreasing the incidence of these events remains a critical goal. Having multiple sexual partners and a high level of sexual activity increases the likelihood of incurring one of these consequences, and these two factors have increased among adolescents in the United States (Levinson, Jaccard, & Beamer, 1995).

Less attention has been dedicated to the psychosocial impact of different types of sexual behavior in adolescents. It is commonly assumed that precocious sexual activity is maladaptive and potentially damaging, and this is occasionally stated as a tertiary consideration in articles in the field; however, few studies have addressed the negative psychological consequences of adolescent sexual activity. One exception is a recent survey-based study investigating the self-reported consequences of having oral sex and/or vaginal sex. Positive consequences included experiencing sexual pleasure, becoming popular, improving relationships and feeling good about oneself, and negative consequences were getting in trouble with parents, having a bad reputation, hurting relationships, feeling guilty, feeling bad about oneself, feeling regret, feeling used, becoming pregnant (or impregnating someone) and contracting an STD. Results indicated that 26.7% of those who had only engaged in oral sex by the spring of their 10<sup>th</sup> grade year reported experiencing some negative consequences (along with some positive consequences), while 55.8% of those who had only engaged in vaginal sex and 60.5% of those who had engaged in both vaginal and oral sex reported experiencing both positive and negative consequences. In addition, while boys were more than twice as likely as girls to report experiencing popularity or

feeling good about themselves as a consequence of their sexual behavior, girls were almost twice as likely to report feeling bad about themselves and nearly three times as likely to report feeling used. They noted that adolescent girls experience pressure to restrict sexual activity (while still appearing sexually attractive) while sexual behavior of adolescent boys is more generally accepted. Therefore, girls may be more likely to experience negative consequences of their sexual behavior (Brady & Halpern-Flesher, 2007).

This study's purpose was to employ qualitative methods to investigate the sexual histories, motivations, beliefs, feelings and reactions to sexual behavior of six adolescent girls. Data comes from qualitative interviews specifically focused on these questions. Qualitative techniques delve into the complexity of social interactions in the lives of participants and as well as into the meanings those participants attribute to their interactions (Marshall & Rossman, 1999). As such they are particularly well suited to explore adolescents' perceptions of their sexual experiences. Qualitative interviewing is a specific qualitative technique that uses non-directive, unstructured, non-standardized and open-ended questions to elicit information from individuals. It is flexible and dynamic and is modeled after a conversation between equals. The interviews are directed toward understanding individuals' perspectives on their lives, situations, and experiences in their own words. The interviewer becomes an important tool, establishing rapport, asking non-directive questions and learning about what is important to the informant before focusing more directly on the research interests (Taylor & Bogdan, 1998).

## Methods

### Participants

Participants for this study were six female adolescent students in a long-term residential treatment program who were 16-17 years old. Each was referred to treatment by their parents

because of dangerous, life threatening or functionally inadequate behaviors such as drug use, extreme oppositionality, eating disorders, and severe depression. During the natural course of their treatment in the residential program, these six students were assigned to a therapy group that addresses the effects of sexual behavior on the individual and after several months of participation in that group, each was asked if they would be interested in participating in this study. Once they expressed interest, their parents were contacted, the study design was explained in detail and consent was obtained. The design was also carefully explained to the participant and their assent was obtained. Initially, eight students were approached and asked if they would like to participate in these interviews and seven said yes, but one of the seven left the treatment program before she could be interviewed.

### Procedures

Once parental consent and student assent were obtained, qualitative interviews were conducted in a private office. The interviews began with fact-gathering questions about the participant's sexual history and then progressed into questions about what they experienced and how they felt about their experiences. Questions explored their attitudes about sexual behavior and their beliefs about its impact on them. The interviews lasted an average of 75 minutes but there was substantial variation in their length. In one case, after the original interview was conducted a participant requested a follow-up interview because she had more she wanted to say.

Interviews were tape-recorded and transcribed and identifying information was deleted. Once transcriptions were completed, the participants were asked to review them and to make comments about the interview or to clarify anything that did not seem accurate or did not reflect what they actually meant to express.

### Results

Ellen

(All names in this article have been changed to protect confidentiality.) At the time of the interview, Ellen was a 16 year old girl who had been in residential treatment for a little less than a year. Ellen began engaging in sexual activity at the age of 13. She said that she was a pretty girl with a lot of admirers who were interested in her sexually. She grew up in a religious family and while she had decided that she didn't want to have sex before marriage, she said she didn't care about engaging in oral sex or fondling, that it didn't mean that much to her. "It was what guys liked and I really wanted to be liked, I'm a normal person, I want people to like me. It was just one of the ways I went about doing it."

Ellen also related that she began using drugs at the age of 12, but qualified that her drug use at that time was not "hard core". She used them because she wanted her peers to see her as daring and "cool". She also indicated that she had low self esteem, saying that at the age of 13 "I was really sad at the time and I remember feeling so crappy about the way I looked and the way I was . . . I hated myself." She also explained that she felt very negative toward her parents and siblings and "I hated everybody."

Ellen explained that when she was 14 she went to a big neighborhood party. She met a couple of boys there who said they were brothers. After going swimming, she went upstairs to change her clothes and the two guys she met came into the room with another. The three of them proceeded to rape her, and were particularly mean and violent as they did so. She didn't tell anyone about being raped for months afterward, but began, as she stated, "having sex with everybody and their brother."

When asked why she thinks she had sex with so many people she responded with several answers. She said it felt good and was fun, and added that she wanted to have a "really special

connection with people”, describing the desired connection as “intense”. She related “I didn’t see it as a loving thing, but at least they must really like me because I’m just so great at this.” She also developed a mind set where she saw having sex with people as her function in life, that she was placed on earth to “make these boys’ lives easier”. Finally, she used her attractiveness and willingness to have sex to hurt others. She explained “I played mind games with people, a kind of twisted way of messing with them. My way of “perpetration” was very twisted, calculated.” For example, she would try to attract boys who were in relationships with other girls or religious boys who were trying to live an abstinent lifestyle. When one of these boys succumbed she said “I loved that, I was so proud of myself. It was like an accomplishment to me. I wanted someone to hurt, not physically hurt, but I wanted someone to hurt and I wanted someone to suffer. Because there was no reason that I should have had to.” During this time, Ellen began using harder drugs and developed a significant chemical dependency problem.

Ellen entered residential treatment for her problems at the age of 16. When asked to describe her current perspective about her history, she responded saying “it makes me sad because I was such a sad person. . . . my life was so bad and so unbearable and I did everything I could to try to keep myself alive and I don’t even know why. . . It makes me sad to think that things got so bad for me.” She added “my worth was in my sexual activity, which I still think to an extent, but not as much as I thought then. . . . I don’t think that’s the only factor anymore. I think it is a factor, but I don’t think it’s the only one.”

### Julia

Julia was 17 years old when she was interviewed and had been in residential treatment for almost a year. She identified herself as bisexual. She related that she had a limited sexual history until she turned 16 years old including passionate kissing with a girlfriend and with

several different boys at different times. She added that when she was 15 she was pressured into kissing another girl to whom she wasn't attracted. "I just was backed into the corner." She stated that experience was significant because it foreshadowed her unwillingness to say no to people.

Julia related that her first sexual encounter occurred at the age of 16, and that her sexual behavior escalated extremely quickly. From the time she had sex for the first time to the time her parents admitted her to treatment because of their fears for her safety only three weeks had passed, a fact that is significant not because Julia's behavior was very extreme during that period.

When asked to talk about when she first had sexual intercourse, Julia explained that one day she met a man to whom she was immediately and intensely attracted. They met the next day and went to his apartment where they had sex. When asked how she feels about having sex with him she stated that it was "one of the best things that ever happened to me." She said he was very gentle with her because she said it was her first time and stated "it just kind of feels like it was something that needed to happen and I'm glad it happened that way." She explained "I hated being sexually inactive, since I was nine years old I've hated it. . . . I just didn't like being a virgin and I really liked him." She related that she felt some level of pressure in her peer group to be sexually active in that she felt competitive with school-mates. "I don't know, I've always felt kind of pressured, but I don't know exactly by whom. It's just kind of this amorphous influence saying like, you loser, why are you still a virgin?" She then said that it "I'm not saying he's a great guy, because I don't think he is" and when asked to clarify she said that he was significantly older than her (around 30 years old) and that it was obvious that she was much younger than him. She also said that he used marijuana chronically. However she appreciates that he was kind and gentle with her and she insists that the encounter was 100% consensual.

After that night, Julia began spending considerable time at her new “boyfriend’s” place of employment (a tattoo parlor) until he told her that his boss did not want her around so constantly. As she knew that her parents wouldn’t approve of him, she felt that his work was the only place she could see him. About two weeks after they met “I was having a really bad day and I just wanted to be with him” so she waited outside his work for him. He came out to talk briefly with her but was not as caring as she wanted him to be and seemed to cut the conversation short. She became very angry with him and they had a fight that ended the relationship.

Julia had several sexual encounters with other people during the two weeks in which she was dating the 30 year old. She met all of her partners on the streets in the business district of her town. On one occasion she began flirting with guy and ended up driving with him to his apartment where “I got my shirt off” but did not actually have sex. While there she saw pictures of his small son and he told her he had a girlfriend who was frustrated with him cheating. That effectively convinced her that he was “a creep”; however, she explained that she felt frightened to not do what he wanted although he was not overtly forcing or compelling her. She worried that because he had driven her to his apartment he might not take her where she needed to go if she didn’t do as he wanted. She also said that she was dancing with him and he was aroused, so she felt like she had begun something that she should finish. She stated “I am . . . afraid of rejecting people. Like I used to feel really bad if somebody wanted something from me, I felt like I couldn’t say no to them.” She finally added “I kind of wanted him because he was really attractive and I was sort of turned on and yea, it was just really complicated.”

On another occasion a drunk man approached her and started talking to her on the street when she was on her way to see her “boyfriend” at his work. She tried to brush him off and he asked her for a hug. She hugged him thinking that he’d then go away, and then “something in my

brain totally flips. . . . so we turn and start walking the other way and doing whatever we want, like anything is fine. And we finally made out sitting on a big flower pot thing.” Then, on the day of the break up, an older man who could have been Julia’s grandfather approached her, asking why she was so sad. She confided in him, telling him what happened and he offered her sympathy which was “exactly what I needed to hear.” However, after talking with her for a while he started kissing her which she found disturbing because of his age.

Several days after she broke with her boyfriend she found herself feeling especially turned on, so “I got dressed up as like a hooker as I could and I went out and hitchhiked.” A guy picked her up and they went to his house where they tried to have sex, but stopped because she was on her period and was bleeding at the time. Instead of having sex, she performed oral sex on him, saying that was “when I learned to give head.” A couple of days after that she went to a hotel with someone she’d met while wandering the streets a few days earlier and had sex. When asked about that encounter she said “it wasn’t what I had in mind, I wasn’t dressed like it was what I had in mind. I think it was a lot of subconscious stuff with me, like I kind of knew. Because I knew he was attracted to me because he would always tell me how beautiful I was and stuff like that.” She described him as “creepy” and explained that part of her did not want to have sex with him, but “most of me was going hormones, hormones!”

Julia made a number of comments about her attitudes toward sex. She stated “I am a really sexual person and I like sex and I think, I don’t know, maybe I am wrong at this point, but I think that I don’t need a whole lot of emotional attachment for me to enjoy sex and move on.” She added “Maybe I am the one woman in a million who doesn’t and maybe I am totally wrong but my experience has been I can have a casual fuck. And that’s okay with me.” She added “there’s some people that I don’t feel so good about, but for other reasons [than because of sex].”

For example, she described some of her partners as “creepy”. When asked why she believes her sexual behavior escalated so quickly she said that after she had sex for the first time “it was like, [I] might as well do it because I got away with it once and it feels good.” She added “It’s like reassurance that I am attractive and it’s also kind of like control, oh I can make them do what I want.” When asked if feeling loved factored into her choices, she answered “I think that comes into it at times. I think that kind of goes with the attractive thing, like desirable, attractive, loveable. Something like that. And I think it depends who I am with. Like with [one man] I wanted to be loved. And there were people where I wanted to be loved. And there’s another where it’s like, oh you have a dick, let’s play with it.”

Julia related that her parents have expressed considerable concern about her unsafe behaviors, and that this has been a frequent topic of conversation since entering treatment. When asked if she agrees with their concern she said “I agree with it, but I am in denial. Like when they say it, I’m like I totally agree. [One of the guys with whom she had sex] was a creep and somebody gave me a nasty HPV, and yeah this one guy that picked me up on Tuesday, I am so surprised that he didn’t shoot me and leave me in a dumpster . . . so part of me, like up here [pointing at her head], it’s like yeah, of course that’s a great point, I don’t want to do that again. But the rest of me is just kind of like what? I could get hurt? Oh shut up.” She explained that she understands that having boundaries makes sense from a logical perspective, but that she is inclined to respond by saying “I’m going to have a good time, it’s not hurting me. I just want to do what I want to do.” Yet she is still afraid of getting hurt or hurting someone else, she is just not convinced yet that she should change her behavior. She also expressed concern that she can’t say no, that there have been experiences in which she thought “ok, I guess I’m doing this now” without really wanting to.

Finally, Julia was asked what impact, if any, her relationships with her parents had on her sexual choices. She answered that her father is distant and disengaged which may be related to the fact that she is attracted to men who are significantly older than her because they can function as “a father figure. Or a rescuer at least.”

### Renee

Renee is a 17 year old from a conservative religious background. She related that she is exclusively heterosexual and has had sex with two people. She has also engaged in oral sex with the same two people.

Renee related that she began dating “Larry” when she was 16 years old. “He was a guy that I met when I had low self-esteem and I fell in love with him and we were really close physically, emotionally and mentally. He was like my best friend and worst enemy . . . he was my second half. And I loved him and hated him at the same time.” She described their relationship as unhealthy, saying “we fought all the time and we were very possessive and controlling and jealous. And we hated each other but we couldn’t stay away from each other. . . . he was like a drug, he was this addictive drug that you could just not let go of.” Larry and Renee would often sleep in the same bed and kiss passionately but both resisted having sex because of Renee’s religious upbringing. Finally, they ran away from home and ended up in a hotel. There they sent “skinny dipping” in a hot tub. Renee stated “I was just so caught up in being with him that I didn’t even remember having sex until a couple of days later.” She said she wasn’t sure if they had had sex but she asked him and he said yes. They then had sex the next day and she said “I can vividly recall [that], I knew that was sex.”

When asked to describe her reactions to having sex she answered “at first it was fun. There was a lot of guilt mixed in with it, just because it was against all my beliefs. But more than

that it was just, I loved being close to him, I loved being with him.” She then stated “it just grew to something that I detested. I hated everything that our relationship was. I hated fighting, I mean, we either fought or had sex. That was our whole relationship. And sex became something that we could fight about too, and so we kept doing it so we could fight some more.” She explained that they used sex to manipulate and “play with” each other, bribing each other with it. “We used it to keep each other around. To have possession and control of the other one. There was one time when both of us were actually dating other people at the same time . . . we would meet each other at night and have sex, just to prove that we still had the control.” When asked to describe how they would control each other, Renee said “I knew he wouldn’t go anywhere. I knew that any physical activity that he wanted he would get with me, so he didn’t need to go anywhere else for that.” She said that there were a few months when they didn’t have sex and were friends, laughing, joking and being comfortable with each other. “I don’t know where sex entered the picture, except it came back and it was ugly. . . . It was almost like two animals fighting for prey or something. Just I’m going to have my fun with you now, and then I’ll fight with you again tomorrow.” After stating that sex was something she detested she was asked whether she felt that way while it was happening. “No, I mean, physically it felt great and even somewhat mentally, because I just felt powerful in that situation. I just felt like I had so much power. But I just hated myself for it. Just because it was against everything I believed and it was turning into something ugly and hateful and hurtful and disgusting. But at the same time, it was the more I hated myself the more I wanted to do it.”

Renee’s stated that Larry “had left and I had basically died almost, I had no sense of self. And so with [her second sexual partner] it was like whatever. I didn’t care anymore, it was just

like, do what you want with me, I just don't even care." She described herself as numb, identifying that as a reaction to losing Larry.

When asked about her feelings about her sexual history, Renee said "I'm glad I met [him]. In a way I regret sex, but in a way I don't. Just because I hated being so naïve and I finally broke free from my bubble when that happened. . . . I definitely regret what it turned into. I regret that it was just this fight for power and control."

### Sarah

Sarah was 16 when she was interviewed. She related that she first had sex when she was 12 and that she has had sex with a lot of people. She also has engaged in oral sex with many people, beginning when she was 14. When asked why she had sex for the first time she said "I had nothing better to do" and related that she was bored. She explained that she had begun drinking alcohol frequently, which was significant because she was too uncomfortable with sexual activity to be able to engage in it while sober. She and a friend decided they wanted to lose their virginity and so her friend set up a date with a couple of guys. They went to the guy's home, drank a lot and then had sex. When asked how she felt about it afterward she said "fine, I felt important" and clarified that she felt important both to the guy with whom she had sex and to her friends, yet she also stated that when she told her friends that she lost her virginity at age 12 they thought she was crazy. She said that after that having sex became a regular part of her social life. She would go out with friends and meet up with their guy-friends. After talking for a while they would invite her upstairs or into a bedroom and she would go, knowing that they would have sex. When asked if anything ever happened that she didn't want to happen she said "not really. Sometimes I regret the people that I did it with . . . because they were ugly." She explained that having sex with unattractive boys bothered her both because she was not attracted

to them and because others would think less of her if she had sex with ugly guys. However, she said she wouldn't say no to sex even if she didn't want to do it. When asked if she ever had a bad sexual experience she said no, but clarified that there were a couple of times that she was too drunk to remember what happened. She did not consider those incidences rape. In her mind, she would have had sex with them anyway, saying "it's stupid on my part that I was too drunk to remember."

Sarah related that she always thought oral sex was "gross" but guys would ask her to perform it on them. She indicated that she still thinks it's gross, but did it frequently because she was asked to do so. She added that guys would sometimes perform oral sex on her but she felt uncomfortable and so she would usually divert him into doing something else.

Sarah explained that she began drinking at the age of 12 because "I felt so gross in my skin that if I kept drinking and drinking then I had an excuse to do whatever I wanted." She stated "I think also one of the reasons that I had sex is because I didn't feel love from anyone in my family. I know my parents are great people and they love me to death but I didn't see it. And that's when I was into my suicidal phase. And that's when I was like I hated myself so I can do whatever I want and I won't feel worse about it." She also said that having sex made her feel connected to people in a way, yet she found that when she felt connected to a guy with whom she had sex he usually didn't return her affection. "In my head I was like 'I kind of like him' and then the next day he was with one of my friends, and I was like, 'okay, that's how life is going to be then'." She explained that she only wanted to date attractive guys because it made her feel powerful and good about herself.

Melanie

Melanie was a 17 year old during this interview. She identified herself as bisexual, and related that she has had intercourse with about five partners and has given and received oral sex frequently.

Melanie's sexual history is influenced and impacted by her drug use history. She related that she began using drugs at the age of 14 and has used a variety of substances regularly, preferring marijuana and cocaine.

Melanie first had sex with a boyfriend when she was 15 years old. She said she wanted to have sex with him for some time and that he would always say no because he "didn't want me to regret it". Eventually "he just got caught up in the heat of the moment and we did it." She described the experience as "comfortable," "soothing," and "nice". She explained that she and her boyfriend have had an on-and-off relationship for two years and that during their "breaks" she had sex with several other guys. Sex with her second partner occurred after breaking up with her boyfriend while she was mourning losing him. She said "we were kissing and stuff and he just said that he wanted to know what it felt like [to have sex] . . . and I just don't know why I couldn't say no. I guess a big part of me thought that I would get over [my boyfriend] by having sex with someone else. It didn't work. I just really kind of wanted to stop hurting at that point." Regarding her third partner she said that she was very attracted to him and wanted him to like her. She said "I think I was doing stuff with him sexually so he would like me. And I don't think it was worth it because in the end he always treatment me like crap anyway." She added "I don't know if it was because I was too needy, I don't really know what it was. . . . I've always kind of felt like it was something about me. Like I am slowly kind of learning now that you know, really it isn't me, it's their stuff. It's not my fault that these guys treat me bad. I mean, in a sense I feel like it is. Because I portrayed that out, that I wasn't confident in myself and that I didn't love

myself and that it was okay for them to treat me like crap. But I don't think that it was me personally, like [I'm] a bad person . . . anybody that doesn't really have respect for themselves, people aren't really going to respect them, you know. So I'm just barely learning this."

Melanie explained that drug use played heavily into her relationship with her boyfriend. Initially she was attracted to him because he was very cute but also because he would bring her anything she wanted (including marijuana and alcohol). Later, they had frequent conflicts related to drugs, arguing about who was using what and about not sharing with each other.

### Lucy

Lucy is a 17 year old girl. She related that has had sex once and has engaged in oral sex about twelve times. She is a very outgoing, intelligent, witty girl who is significantly overweight, a fact that plays into her sexual history.

Lucy explained that she spent a significant amount of time on the internet talking to friends and strangers and labeled herself a "MySpace Whore." She explained that she had frequent conversations with guys from all over the country (and even all over the world) about sex. She never met any of the people she spoke with on the internet, always making up excuses not to meet them. She would, however, call some of her acquaintances on the phone and have sexual conversations with them. She stated "it was weird because there are things I can't say to other people, like words I can't say out loud to other people, [that] I can say to people like that [who she met on MySpace]. And I don't really completely understand. I guess it's on a lot of levels, it's like I kind of have to say it to them to keep them here, so it's kind of like a forced thing." She added "I knew as long as I said this in this way, and as long as I made them think that I wanted what they wanted, and as long as I used words that would turn them on, and then I would have someone to talk to and that's all I really wanted. . . . I just wanted someone to talk

to.” She then explained that she tends to call her friends more than they call her but that when she had sexual discussions with guys they were eager to call her for more, which made her feel powerful and attractive. She stated “I could get them to call me whenever I wanted. It could be in the middle of the day, and they’d be like, we have school. And I’d be like I don’t care, I’m not talking to you again unless you call me right now. And they would call me. I had so much power in those situations. It was nice to have that kind of power.” She continued “I never wanted, well not never, but I rarely wanted to talk about sex with people . . . But at that point I would settle for anything and I would think that I had the power because I could make them call me, but really they’d be calling me because they wanted to.”

Lucy related that when she was in the tenth grade she and a friend made a pact that they would lose their virginity by the end of the year. She said that she was going to a school where people did not have casual sex (or at least didn’t admit to it) and she wanted to increase her social status. She met a boy on the internet through a friend and when she told him her plan he volunteered to have sex with her. She felt excited because she was doing this before everyone else “because I was always like the kid who felt like I was never going to be able to hook up with anyone.” She compared her sexual history to that of her peers and evaluated her social status based on that. She said “My friend wrote me this letter once one summer while I was at camp, . . . and she was like ‘I got fingered for the first time, it was great, I feel like I’ve changed so much.’ And I didn’t like that. . . . I was like, well if everything’s changing and I’m not changing, I won’t have any friends, no one will want to be around me.” All of her friends (and many acquaintances) knew about her plan to have sex, and when the boy called and told her he was in town and available, she put an away message on her computer that basically announced that she was going to meet him for sex. By the time she returned home she had “like five million people

calling me”. She met him at a park and they went into the bushes. She said that the encounter seemed like it went by very fast and that during it her reaction was “wow, this is actually happening, I thought it was like a dream.” She described it as a happy ending in a movie, yet later she noted that he wanted more from her that she really wanted to give. She said that he asked her if she would have anal sex with him and she said yes even though the idea disgusted her, so she had sexual intercourse and anal sex for the first time on the same day.

Despite her plan to objectify her sex partner, Lucy formed an attachment to him that persisted long after their encounter in the park. She stated “I think that even though I don’t want to believe it, that it did make me more attached to him, which makes it a lot harder to let him go. But I don’t know if that’s just because we had sex or just because we just talked a lot. . . . I mean, it was fun, I had a good time. I don’t regret that part.” She added that she felt accepted by him and that she knew he would be there for her “because we didn’t use a condom, and he was like ‘I never have sex without a condom. It feels so much better but I can never do it because the girls would never consent to it.’ And I was like ‘well, I don’t care.’ And I knew because I did something other people didn’t do, he would keep coming back to me. . . . I could get my heart broken five million times, but it was okay because there was still this person who wanted me.”

When asked about oral sex, Lucy explained “I like doing things for other people more than I like them doing them for me, just because then I have more control.” She would be making out with a boy and he would start touching her genitals, so “to get him to stop touching me, I’ll give him a blow job because then what’s he going to do. Because it’s also like, you have a lot of power when you’re doing it. . . . they’ll do anything to make you make them come.”

#### Discussion

As is true with many qualitative studies, the sample size for this research effort was small, limiting the advisability of generalizing results to a larger population. Another important note about the sample is that it is somewhat unique. Every participant was a residential treatment center client and each had been admitted to treatment by their parents for a variety of concerns including, but not limited to sexual acting out. Some parents were aware of their daughters' sexual behavior, and some were not. It seems clear from the narrative accounts of each of these girls that sexual activity did not occur in a vacuum, and it is likely that both their choices and their reactions were impacted by their other difficulties. For example, there may be an important interaction between promiscuous sexual behavior and chemical dependency issues (as seen in Ellen, Sarah, and Melanie). A recent multi-level hierarchical regression analysis of outcome data from the same residential treatment center as sampled in this study indicated that students who presented with both significant drug or alcohol dependency and significant sexual promiscuity required significantly more time in treatment to make the same changes as students who presented with one or the other (McCollam, 2006). Considering additional issues and concerns of those who act out sexually is an important element of understanding their experiences.

Despite the limits in generalizability, this study has considerable value in that these six stories illustrate important aspects of adolescent sexual expression which can then inform other types of research efforts. The three areas that seem the most relevant are motivations for sexual activity, results of sexual behavior, and the diversity of the experience of individuals.

#### Motivation for sexual activity

Orr, Millstein, Ofner and Halpern-Felsher (2006) state that theory and research has identified four positive motivations for sexual activity. These include physical (the desire for feelings of excitement or pleasure), relationship-oriented (the desire for intimacy), social (the

desire for peer approval or respect) and individual (the desire to gain a sense of competence and learn more about oneself). These were apparent in the various accounts of the six girls. For example, Ellen and Julia both explicitly stated that they had sex because it was “fun” and it felt good, and Melanie and Renee described having sex with their boyfriends as fun, comfortable, and soothing, highlighting physical motivations. Sarah discussed how she would sometimes have sex with a boy she liked (and later be disappointed when he ceased to be interested in her), and both Melanie and Renee both felt closer to their boyfriends after having sex for the first time, illustrating relationship-oriented motivations. Social motivations were prevalent in Sarah’s narrative (who felt “important” after having sex for the first time and who thought her social “stock” would go down if she had sex with someone ugly) and in Lucy’s whose first sexual experience was announced to almost everyone she knew. Julia’s narrative also touched on her perception that she was a “loser” if she was a virgin. And several girls stated that if they could sexually attract a guy, it meant that they were attractive and sexy, illustrating individual motivations. Additional motivations were also apparent. A common one was the desire to be “powerful” or in control. Lucy repeated several times that she could make the guys with whom she was interacting do “anything”, Renee talked at length about how she and her boyfriend would use sex to control and manipulate each other, and Julia noted that she enjoyed feeling a sense of control over how men were responding to her. Another motivation mentioned was the desire to hurt others through sexual behavior. This was most notable in Ellen’s story who labeled herself as a “perpetrator” and in Renee’s story who described how she and her boyfriend were predatory toward each other. And predominant in Lucy’s story was her phobic dread of being alone to which she reacted by discovering she could always have company over the phone if she was willing to have sexual explicit conversations with strangers.

One of the interesting elements of each participant's motivations for sexual activity (as well as their actual behavior) was how it reflected the interpersonal processes that prevailed and permeated their lives. Benjamin (1996) discusses the parallel between an individual's sex life and their interpersonal interactions, calling it the "Klute Syndrome". Specifically, she notes that there appears to be a parallel between the interpersonal patterns present in the sexual fantasies of difficult-to-treat personality disorder clients and the maladaptive interpersonal patterns that define their disorders. The experience of sexual pleasure in the context of those fantasies reinforces the negative interpersonal patterns. This connection may also be present in the way that the interpersonal patterns that emerged in these girls' sexual encounters reflected the overall psychopathology that brought them to treatment. Lucy provides a clear example in how her dependency needs were clearly expressed in her use of her sexuality. Ellen's perpetration of others reflected the trauma of being violently raped, and Julia's pronounced lack of personal boundaries and the accompanying lack of self-preservative instincts were very apparent in her interactions in the residential treatment community.

### Reactions to Sexual Choices

With the exception of Ellen, who was raped, each of the six participants in this study reported having positive reactions to their first sexual experience. Lucy describe it as "a dream come true", Julia said "it was the best thing that every happened to me", Sarah stated that she felt "important" afterward, Renee said it was fun and she enjoyed being close to her boyfriend, and Melanie described the experience as "comfortable and soothing". (Ellen's position as the exception to this rule is understandable as she was the victim of a violent rape. She wasn't asked about her first consensual sexual experience.) However, a theme emerged in the girl's narratives of negative consequences associated with but not directly stemming from their sexual

experiences. For example, Lucy explained that she became very attached to her first sexual partner and was very hurt by him as time progressed. Renee stated that her sex life with her boyfriend became “very ugly”, and Julia said that she regrets that some of her partners were “creepy”. Melanie did not describe negative sexual experiences with her boyfriend but expressed regret for times she cheated on him. This is perhaps significant in that the negative social and emotional consequences of engaging in inadvisable sexual activity are not necessarily directly tied to the activity itself but sometimes result from the sequelae of the activity.

### Lessons Learned

Upon examining the stories of the six participants in this study, it is notable how much diversity exists between their accounts. While patterns of behavior exist in each girl’s narrative that may be expected and even predictable, the differences between the stories are notable. One important example: the range of the number of intercourse partners among the participants went from one to many, and yet each girl had significant issues related to her sexual behavior. This underscores the difficulty inherent in determining what level of sexual behavior is unhealthy for teens and it encourages those who work with teenagers to consider and even question preconceived notions about how their sexual development will occur.

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