Adolescent Sexual Activity as an Expression of Nonsexual Needs

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Adolescent sexual behavior is an issue of growing concern on an international basis. An escalating incidence of sexually transmitted diseases (STDs), including human immunodeficiency virus (HIV) infection and teenage pregnancy has dramatized the need for an increased understanding of the epidemiology of adolescent sexual behavior. At a recent United Nations International Conference on Population and Development in Cairo, the most controversial subject following abortion was adolescent sexual behavior. The October 24, 1994 issue of People magazine focused on the problem in the United States in a special report titled, "The Baby Trap."

More than 500,000 teenagers give birth in the United States each year. The federal government spends some $30 billion a year in social services for teens and their babies. Approximately half of all American females and two thirds of all males have experienced coitus by age 17. For those who begin having intercourse before the age of 18 years, 45% of females report having had four or more partners, and males report having had an average of five partners. Most adolescent females report that their initial experience was unplanned, with more than 85% having their first coitus before seeking professional advice about contraception or STDs. The federal government has a $300 million initiative in that the 1000 American schools with the highest out-of-wedlock birth rates. These schools will devise programs that encourage postponement of sexual intercourse and the prevention of diseases and pregnancy. Studies clearly show that the younger individuals are when they begin being sexually active, the more sexual partners they are likely to have over their life span and the higher their risk for STDs or...

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unintended pregnancies.

The 1985 Guttmacher report found that despite levels of sexual activity comparable to their European counterparts, the teenage pregnancy rate in the United States was two to five times higher than in other developed countries. They attributed these statistics to the fact that the United States lacks a comprehensive sex education program, has inadequate access to contraceptives or unwarranted fears about their use, and has an inappropriate depiction of sexuality in the American media.

Current attempts at traditional "sex education" have not yielded desired results in terms of a decline or stabilization of the incidence of teenage pregnancy, STDs, or HIV infection. It is therefore essential to better understand motivational factors that lead to sexual activity and intercourse in teenagers. This article explores psychological, social, and motivational factors that may be more powerful than variables that are influenced by traditional sex education programs.

The "nonsexual motivation" of sexual behavior refers to sexual activity that is initiated by factors other than sexual curiosity, physical or erotic pleasure, or as a part of a close, intimate relationship. In adolescents as well as adults, the various motivating factors for sexual activity reflect the full spectrum of human needs. For a given individual, a particular sexual encounter is motivated by desires or needs along a continuum of motivational factors. That point is not static or fixed, but changes for the individual as he or she moves through various developmental periods and levels of maturation.

Nonsexual motivating factors reflect underlying social and psychological conflicts and needs: the sexual behavior is rarely physically gratifying, nor does it not resolve the initiating conflicts. In addition, sexual activity motivated by these factors is more likely to result in social, psychological, and medical complications and consequences, which may lead the adolescents and their parents to seek professional assistance. Counseling these adolescents may be difficult due to the clinician's personal feelings and moral code. A moralistic approach, however, generally is not helpful in understanding the developmental needs of the teenager, his or her level of maturity, and the social milieu in which the teenager is functioning.

DEVELOPMENTAL CONSIDERATIONS

Multiple theories of adolescent development have been proposed and discussed. Erikson describes the goals and tasks of the "Eight Stages of Man" from infancy to old age (Table). Each stage has a crisis or task that is perceived from the developmental perspective of the organism. The tasks of each stage are a challenge that must be negotiated and concluded. Adequate resolution of that crisis allows progression to the subsequent stage and its related tasks. Inadequate resolution of a stage-related crisis leaves the individual with residual adaptive difficulty in dealing with subsequent development.

The task of adolescence is the development of an identity and the avoidance of identity confusion. This involves the formulation of a consistent self-image that is in accord with the teenager's perception of his or her physical and mental capacities. This self-image is derived from messages and feedback that adolescents receive from their environment and from those in their social milieu. While they are developing their own identities, teenagers must, to a certain extent, reject parental and adult values. A delicate balance must be achieved between this rejection and the development of self-reliance and the internalization of self-selected ideals. Critical in this balance is acceptance by some significant peer group of one's self.

Erikson continues:

The adolescent struggle initiates the stage of "falling in love," which is by no means entirely or even primarily, a sexual matter, except when parents demand it. To a considerable extent, adolescent love is an attempt to arrive at a definition of one's identity by projecting one's diffused ego image on another and by seeing it thus reflected and gradually clarified.

An inadequate resolution of the adolescent crises has been labeled as identity confusion or diffusion by Erikson. Identity confusion exists when the adolescent has not been able to incorporate the multiple sources of input about themselves into a uniform, consistent self-image. Without a developed identity, the individual has difficulty in relating to adult figures, parents, and peers. This confusion diminishes the ability to resolve subsequent developmental crises, such as the mature intimacy with others.

Most adolescents go through a transient period of role confusion terminating with a crystallization of one's self-image and identity. In some individuals, this period is particularly intense or prolonged. It is these individuals who may be vulnerable to performing sexually for nonsexual reasons. For vulnerable teenagers, sexual gratification is really a peripheral issue to the sexual event.
TABLE

Goals and Tasks of the "Eight Stages of Man"**

<table>
<thead>
<tr>
<th>Stage</th>
<th>Goal/Task</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. Infancy</td>
<td>Trust versus mistrust</td>
</tr>
<tr>
<td>II. Early childhood</td>
<td>Autonomy versus shame, doubt</td>
</tr>
<tr>
<td>III. Play age</td>
<td>Initiative versus guilt</td>
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<tr>
<td>IV. School age</td>
<td>Industry versus inferiority</td>
</tr>
<tr>
<td>V. Adolescence</td>
<td>Identity versus identity diffusion</td>
</tr>
<tr>
<td>VI. Young adult</td>
<td>Intimacy versus isolation</td>
</tr>
<tr>
<td>VII. Adulthood</td>
<td>Generativity versus self-absorption</td>
</tr>
<tr>
<td>VIII. Mature age</td>
<td>Integrity versus disgust, despair</td>
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</tbody>
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*Modified from reference 2.

SOCIOCULTURAL CONSIDERATIONS

The importance of an adolescent's cultural milieu in determining his or her behavioral pattern is emphasized in recently published research. Reviews emphasize the importance of urbanization on an international scale. Many families are in a noticeable state of decline, with the prevalence of extended, multigenerational families of traditional societies giving way to the nuclear, increasingly single-parent family and to the no-parent family of street children. Puberty generally is occurring earlier or has plateaued in some industrialized countries, while marriage generally is occurring later. Young people in western society, sometimes in preadolescence, are given unparalleled freedom to make decisions, are victims of interpreted mass media influences relative to sexuality, and are confronted by powerful social pressures to conform with a role defined by their cultural milieu.

DiBlasio and Benda\(^2\), using written surveys of 7th to 12th graders in 10 private schools at different locations in the United States, concluded that sexually active youth tended to perceive that most of their friends also were involved in sex, that the rewards outweighed the cost of sexual involvement, that sex overall was rewarding, and that it was alright for unmarried adolescents older than 16 years to engage in intercourse. The strongest predictor of frequency of sexual intercourse among youth was differential peer association, which alone accounted for 28% of the variance of the frequency of sexual intercourse. Males and older adolescents were particularly vulnerable to peer influence in that sexual activity among adolescents increased in those who more often used drugs, had lower religious commitment, felt less close to parents, and demonstrated lower academic performance. Abstainers resisted because of personal convictions and beliefs, as well as anticipated parental reactions. Family variables play a substantial role in the decisions regarding adolescent sexual behavior. Young et al\(^4\) found that for males, being from a two-parent family was related to less sexual activity and older age of first intercourse. For females, a two-parent family was not as important as race in influencing sexual behavior. Among Hispanic youth, peer rather than family influences were more highly related to sexual expression. Several studies have described parental discussion of sexual behavior as being misinterpreted by the youth as actual encouragement for this behavior.

Media influences, particularly TV, appear to be increasingly important in shaping teenagers' attitudes relative to sexual behavior. Studies indicate that television powerfully influences teenagers, with sex being associated with humor, excitement, danger, or outright violence. On Music Television (MTV),\(^1\) 75% of concept videos involve sexual imagery, more than half involve violence, and 80% combine the two, often portraying violence against women. Related movies are accessible to teenagers on cable TV, in theaters, and in home videos. Soap operas seem to imply the implicit message that everyone is sexually active and that no one worries about pregnancy or STDs. New research indicates that not all adolescents are as influenced by this exposure and that preexisting family influences and value systems may significantly affect their perception.

NONSEXUAL MOTIVATIONS OF SEXUAL BEHAVIOR

Peer Approval

The adolescent who has difficulty obtaining peer approval feels inadequate and unacceptable. An intolerable feeling of isolation often develops under these circumstances. Sexual behavior is an attempt to gain approval, either because it allows the adolescent to compete with his or peers by showing a willingness to engage in sex or because the behavior is modeled after an apparently emulated and accepted peer who is sexually active. The adolescent feels that he or she must successfully arrange and complete sexual encounters to gain approval. Because of a lack of social status, the adolescent's initial approaches may well be rejected by his or her selected partners.

The individual's lack of previous sexual experience likely will generate much anxiety and fear, which makes the adolescent ambivalent about the entire conquest. These feelings, coupled with frequent premature ejaculation and clumsiness of initial sexual experiences, predisposes the individual, who is seeking peer acceptance, to further thoughts and feelings of inadequacy and unacceptability. Even a successful
gratifying sexual experience, however, does not ensure peer acceptance. Relationships that might have resulted from an initial sexual encounter are often short-lived. The chosen partner soon realizes that the inadequate adolescent really has very little to offer in other areas of interpersonal relations. These striving teenagers are again rejected, which intensifies their feelings of isolation.

Stanton et al., using focus group and individual interviews with early adolescents in a population with a high HIV seroprevalence, concluded that sexual activity among early adolescence was perceived by the participants to be highly prevalent in the community. The desire to behave in a socially normative fashion is strong, particularly for boys, where sexual activity is perceived as being normal and abstinence atypical. Among urban African-American youths, sexual intercourse appears to be in a separate domain from other problem behaviors such as truancy, illicit drug use, or drug trafficking. These findings support the view that these teens perceived sexual intercourse as being more "expected" than a "problem behavior" among their peers.

Rebellion

Varying degrees of rebellious behavior are noted in teenagers who are striving for independence. Sexual activity as a manifestation of adolescent rebellion is noted frequently in clinical histories. The intrafamilial dynamics in this situation may be relatively simple and overt. Parents feel obligated to interpret and enforce socially acceptable limitations on sexual behavior for the teenager. Because of parental insistence, some adolescents feel pressured into rejecting the parents' professed values and thereby perform sexually as an act of rebellion. Rejection of adult and parental values by rebellious behavior enhances the youngster's feeling of freedom and independence.

In a real sense, it is the parents' insistence on inhibition of sexual activity that makes the behavior so valuable as a strategy. These individuals often will seek and find members of the opposite sex who are equally rebellious with whom to have sexual relations. Because of the motivation from the partners, sexual gratification in this situation is rare. These adolescents also may demonstrate other extreme rebellious behaviors, eg, major drug abuse and delinquent behavior. Illicit drug experimentation or addiction may encourage sexual intercourse because of associated disinhibition, impulsivity, and blunted awareness. Elliot and Morse found increased risk of engaging in sexual intercourse if a young person had a background of delinquency or drug use.

Expression of Hostility

Although many adolescents harbor conscious or unconscious hostile feelings toward their parents, sometimes to an extreme degree, the sources of this hostility may vary from issues based on reality to those fantasized by the youngster. Angry teenagers may be quite limited in their outlets for expression of these feelings within the typical communication patterns. These adolescents are extraordinarily sensitive to the areas of vulnerability of their parents. Parents who are most uneasy, anxious, and threatened when confronted with sexual matters are the most vulnerable to the potent weapon of sexual activity. This behavior helps the teenager to "get even" with his or her parents. This was perhaps best put by a teenage suburban girl who, when reporting how she told her mother that she was pregnant, added with great satisfaction: "Seeing the look of horror on my mother's face made the whole thing worthwhile." Up to this point, the girl had never been able to truly express her long-standing intense anger toward her demanding mother.

Escape

Sexual behavior may be viewed as a means of escaping from one's life situation. Teenage girls who find life at home intolerable may desire to get pregnant, believing it will force a marriage, or allow them to live alone with their child, both taking them away from home. Marriages, or relationships with these nonemotionally intimate foundations, are unlikely to be gratifying or sustained.

Semmons and Lamer have studied the reasons for pregnancy reported by unmarried pregnant teenagers. The authors classify cases by the degree of participation in the pregnancy by the mother-to-be. In the intentional group, there was a "conscious intent to become pregnant to force a decision regarding marriage or to spite rejecting or mistrusting parents." The needs of the girls in this group are often quite specific. It may help her get out of a home where she is responsible for rearing someone else's children (ie, her parents'). It may fulfill a parental accusation concerning sexual behavior, and it is a way to hurt a parent who has hurt her emotionally.

In the accidental group, the conscious participation is minimal, and the underlying motivation may be obscure. Some merely attempted to fulfill family or subcultural patterns. Others resented the double standard in sex as advanced by the adult population. Most
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Reflected a need to satisfy teenage goals: identity, independence conflict, resolution of dependence, or rebellion toward a society that seemed to move too slowly and in the wrong direction. The third category includes the unknowing and is represented by the mentally retarded and those who are quite misinformed or uninformed concerning sexual matters and pregnancy.

A recent study supports the varied individual motivational factors that lead to teenage pregnancies.

Weinstein and Rosen highlight the fact that if sexual activity is sought for an individual's need to belong, to be accepted, or to be loved, it is often coupled with poor accomplishments and low self-esteem. In these situations, there is a greater likelihood of multiple, casual sexual partners. If driven by these needs, adolescents are not likely to use regular and effective contraception, thus placing themselves at greater risk for unintended pregnancy and STDS.

For females particularly, sex is viewed as an integral aspect of an intimate, serious relationship. Males also desire intimacy, but do not necessarily perceive the act of sexual intercourse as defining or requiring intimacy. Girls who allow their relationships and sexual activity to evolve to intercourse presume that mutual emotional intimacy exists and often will be disappointed and rejected when they expect, require, or demand the emotional support associated with such physical intimacy.

Cry for Help

Adolescent sexual activity also may be viewed as teenagers' often desperate attempts to bring attention to themselves and their needs. They may be "crying for help," hoping the discovery of this behavior would open channels of communication with people who can help. Some youngsters fear that their adolescent thoughts are chaotic and out-of-control. This may lead to concerns that they are going "crazy." Parents often miss cues about the teenager's fears in this area. Direct requests for professional assistance may have been dismissed. They try to reassure the teenager by saying that it is all a "stage" and normal. These adolescents are forced into performing in an overt, dramatic manner that will finally impress the family with the intensity of their concerns and feelings. A similar "cry for help" is seen in comparable types of adolescent behavior, such as drug abuse and delinquency.

A "cry for help" was demonstrated by the teenage girl who made entries into her diary about her sexual activity with her boyfriend. She "accidentally" left her diary open and in full view on a number of occasions, until her mother read it. Another girl left a letter addressed "Dear Nudey" available for her mother to read. This letter contained her boyfriend's description of their first sexual experience. This "accident" stimulated a confrontation between parents and child that led to professional assistance.

Self-Destruction

Sexual behavior may represent an attempt at self-destruction by depressed teenagers. This behavior may be a manifestation of a depressive syndrome of excessive drug use, reckless driving, and even suicidal behavior. Unprotected sexual intercourse may reflect, usually unconsciously, a "death wish" through exposure to HIV or another STD. This type of behavior will persist until the depressed teenagers are convinced that their problem can be altered by intervention. Attempts at inhibiting their sexual behavior through restraining punishments will only intensify the depression. The underlying depression must be appreciated and managed before an alternative behavioral pattern can be expected.

Search for Love

Girls from unaffectionate, unsupporting homes may desire pregnancy so as to produce a child to love. The hope is that the child will be an object to smother with love and, in turn, the infant will support the mother's need for affection. This situation is fantasized and glamorized by the girl. Disappointment results after the birth by the reality of the infant's normal demanding and dependent role. Because the mother's needs are not being met, she develops ambivalent and negative feelings about the infant. This jeopardizes the process of mothering and the development of an affectionate, meaningful relationship between mother and child. Unfortunately, this whole cycle has been self-defeating as the needs for which the pregnancy was planned have not been satisfied.
CONCLUSIONS

Hajcak and Garwood\cite{14} point out:

One of the risks of adolescent sexual behavior is that it can become the vehicle for expressing or satisfying emotional and interpersonal needs which have little or nothing to do with sex. These nonsexual needs drive sexual behavior and can produce an artificially high sex drive. Though teenagers may engage in sexual activity, in fact they primarily want or need something else. The teenagers may be looking for affection, trying to bolster self-esteem, ease loneliness, confirm masculinity or femininity, escape boredom, or vent anger.

White and DeBlassie\cite{15} point out that, unfortunately, using sex as a coping mechanism can create depression, low self-esteem, interpersonal problems, and often leads to hypersexuality. Sexual activity temporarily eases uncomfortable or confusing emotions, thus when adolescents feel emotional discomfort, they easily build a hunger for immediate gratification of the sexual “quick fix.” However, the sexual need is only partially satisfied and remains high. These adolescents may be perceived as being promiscuous, attention-starved, or rebellious.

Weinstein and Rosen\cite{16} report that adolescents participate in sexual behaviors because they are inquisitive, have physical urges, all their friends are “doing it,” it is a proof of their desirability and popularity (measures of worthiness), it proves they really love their partner, and it represents adult status. Adolescents also may become sexually active as an expression of rebellion from parental, societal, and religious controls.

Adolescent sexual behavior must be viewed by the clinician as reflecting a variety of emotional needs and sociocultural pressures, in addition to the usually presumed sexual pleasure. An effective intervention program can be implemented only after an evaluation explores these various motivational factors and responds with strategies to assist the teenager in coping with these emotional needs and societal pressures.

Acknowledgments


REFERENCES