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“It was a Learning Experience”: Lessons Learned from Young African American Men and Women’s Sexual Debut

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An estimated 38,356 adolescents and young adults ages 13 to 24 years are living with HIV infection (Centers for Disease Control and Prevention [CDC], 2017). A disproportionate number of these infections are among young African American men and women. Approximately 59% of males and 64% of females ages 13 to 24 living with HIV infection are African American (CDC, 2017). African Americans comprise more than half (55%) of new HIV diagnoses among youth (CDC, 2017). Young African American men and women are also greatly burdened by sexually transmitted infections (STI) such as chlamydia and gonorrhea, which increases their susceptibility to HIV infection (CDC, 2016).

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The alarming rates of HIV and STI among African American youth have led to the development of several HIV behavioral interventions specifically targeting this population, and many of these interventions have demonstrated evidence of efficacy in reducing sexual risk behaviors. For example, a recent systematic review found that HIV behavioral interventions specifically designed for African American youth were effective in delaying the onset of sexual initiation, increasing condom and contraception use, increasing abstinence, and reducing the number of sexual partners and frequency of sexual intercourse, but only a few of the interventions remained significant through the follow-up period (Marshall, Crepaz, & O'Leary, 2010). Therefore, further refinement of current prevention programs, specifically those tailored for African American youth, is warranted.

The application of a resiliency framework to HIV prevention research and intervention development is one promising approach to strengthen youth-focused behavioral programs. Resiliency theory contends that there are positive individual, social, and contextual factors present within the lives of youth (Fergus & Zimmerman, 2005; Zimmerman, 2013). These factors, known as strengths or assets, may protect or inoculate youth from various adverse conditions. As such, many youth are able to exhibit positive outcomes and healthy development despite exposure to risk. Hence, in contrast to traditional approaches to HIV prevention research and intervention design, which are primarily concerned with reducing risks, resiliency models focus on enhancing strengths and assets as a strategy for promoting behavior change.

In this paper, we argue for the use of a resiliency framework in the examination of sexual debut among African American youth. Several aspects of sexual debut, or an individual's first sexual experience, have been identified as important risk factors for HIV/STI. For example, earlier sexual debut has been associated with lower condom use, having sex under the influence of drugs and alcohol, having older sexual partners, and having non-consensual sex at sexual debut (Heywood, Patrick, Smith, & Pitts, 2015; Kaestle, Morisky, & Wiley, 2002; Miles & Huberman, 1994; Sandfort, Orr, Hirsch, & Santelli, 2008). However, first sex is also an important learning context in which youth gain valuable insights and lessons beyond how sex is performed (Carpenter, 2005; Fortenberry, 2014; Norona, Roberson, & Welsh, 2015; Orbe, Johnson, Kauffman, & Cooke-Jackson, 2014; Ott, Ghania, McKenzie, Rosenberger, & Bell, 2012). These lessons inform motivations, expectations, and behaviors in subsequent sexual relationships (Michels, Kropp, Eyre, & Halpern-Felsher, 2005). Thus, the insights that youth gain from their sexual debuts can be used as tools to modulate HIV/STI risk in subsequent sexual experiences. Relatively little is known, however, about what information African American youth gain from their first sexual experiences.

The purpose of this exploratory, qualitative study was to explicate the lessons that African American youth learned from their sexual debuts. Understanding the lessons that African American youth take away from this initial sexual experience may play an important role in refining and strengthening youth-focused prevention efforts.

Methods

Recruitment and Procedures

Our study was part of a larger qualitative study examining the context of the sexual debuts of young African American men and women. Purposive sampling was used to recruit 10 African American young adults living in Philadelphia, PA, with equal representation of males and females. Participants were recruited through flyers and direct outreach in various community settings. Participants were eligible to participate if they self-identified as African American, were 18 to 24 years of age, and had at least one sexual experience (oral, anal, or vaginal). All eligible participants were invited to participate in the study.

On the day of data collection, participants provided written informed consent, completed a brief demographic and sexual history survey, and selected a pseudonym to maintain privacy. At the beginning of the interview, participants completed a life history timeline in which they recounted memorable positive and negative experiences that occurred over their lives, including their sexual debuts. The purpose of this exercise was to understand whether participants viewed their sexual debuts as positive or negative. Positive experiences were written above a line on the life history timeline form and negative experiences were written below the line. Participants then briefly discussed each experience on the form with the interviewer. Participants then proceeded to verbally define their sexual debuts (i.e., oral, anal, or vaginal sex) and then describe various aspects of the event including the broader context where sex occurred, the motivations for initiating sex, and the affective feelings experienced. Participants were also asked specifically about the lessons that they learned from their first sexual experiences. The interviews lasted 60 to 90 minutes and were conducted by the principal investigator. A semi-structured interview guide was used to facilitate the conversation; interview probes and follow-up questions were used to elicit more detailed responses.

All participants provided written consent and were compensated \$30 for their participation. The study was approved by the institutional review boards at the University of Pennsylvania and Yale University.

Data Analysis

All interviews were audio-recorded and professionally transcribed verbatim. Thematic analysis was used to analyze the data (Boyatzis, 1998). An inductive approach was selected to give researchers the opportunity to determine broad patterns that were then analyzed to allow for themes to emerge. This approach ensured that findings were not imposed or pre-determined by the researchers, allowing for the themes to follow closely with the raw data. Although participants were directly asked about lessons they learned from their first sexual intercourse, transcripts were reviewed in their entirety in order to identify themes that emerged in other portions of participants' reflections. All data were coded by hand by two independent, trained coders. The coders initially developed codes via an iterative process; coders identified the key words and concepts related to the research questions. Codes were double checked for consistency and validated through discussions with the two coders. Any discrepancies in coding were discussed until reconciliation was achieved and codes were

validated. A codebook was developed from which themes (patterns) were garnered within the key areas of content. Themes, theme names, and their descriptions were finalized in partnership with the entire research team.

Results

Selected participant characteristics are presented in Table 1. The majority of participants were 20 years of age or older at the time of the interview (80%) and identified as being heterosexual (90%). Most participants reported vaginal sex as their first sexual experience and half (50%) stated that the experience was positive. Participant characteristics have been described in detail elsewhere (Lanier, Guthrie, Schensul, & Stewart, in press).

Three main themes emerged regarding lessons learned from initial sexual experience: (a) importance of assessing one's own readiness for sex, (b) how to navigate future sexual relationships, and (c) turning a negative experience into something positive.

Importance of Assessing One's Own Readiness for Sex

One lesson learned by participants was to assess their readiness for sex prior to engaging in any sexual activity. Men and women noted the importance of not rushing into a sexual experience but rather taking time to evaluate the situation, as described by Steve.

I think the lesson learned is...is to make sure to—don't be hasty. Don't force things like that just because you're in the heat of the moment. Just stop. Just sit back and think and give yourself some time to think about it. (Steve, age 16 at sexual debut, positive/negative experience)

Several participants specifically discussed becoming more aware of their reasons and motivations for contemplating sex. As Sunshine reflected:

I would say it [her sexual debut] caused me to be more conscious of why I had sex from that point on, or what my reasoning was. If my reason wasn't that good, then most of the time I probably wouldn't have done it. (Sunshine, age 19 at sexual debut, negative experience)

For Sunshine and others, critically thinking about the factors that were influencing their sexual decision-making led them to become more thoughtful and intentional about when, and with whom, they initiated sex. This also led participants to have a better understanding of what being "sexually ready" meant for them. For example, Aubrey, who initiated sex at age 15 and reported a negative experience, learned that she only wanted to engage in sex when "... it's with someone you love and they care a lot about you and respect you and cares about your emotions and your feelings and if you're ready and all those other things." Although participants differed in regard to how they knew they were ready to initiate sex, most noted that the experience helped them to determine whether they really wanted to engage in sex.

How to Navigate Future Sexual Relationships

Another important lesson learned was how to engage in future sexual relationships. Participants described how their first sex was an important point of reference for subsequent

relationships. “It [sexual debut] teaches you from there on out, what you should look for—what you should do, and how you should think, and why you should be doing what you’re doing.” (Sunshine, age 19 at sexual debut, negative experience). The men and women in the study spoke at great length about the different ways in which the experience prepared them for future sexual relationships:

It taught me a lot, I guess, about how to communicate with people and how to be super open...I was able to, I guess, take what I knew and turn it into what I wanted it to be later on in life. I definitely think that... as far as the mechanics [of sex], and the know-how, and the ability to communicate and all of those things. It taught me a lot of what I should do and what I can be comfortable doing. (Clarence, age 17 at sexual debut, positive experience)

Not only did the experience help participants, like Clarence, learn how to communicate with a romantic partner and set comfortable sexual boundaries, it also taught them the importance of protecting themselves from negative physical consequences such as HIV/STI and unintended pregnancy. Will, who debuted sexually at age 9 (positive/negative experience), described how his partner taught him the importance of engaging in safe sexual practices. He reflected: “She [his sexual partner] told me, ‘Don’t ever forget to put a condom on when you do it [have sex].’ And ever since that moment I never did it [had sex] without a condom.” Thus, first sex was instrumental in helping participants maneuver and navigate later sexual relationships.

Turning a Negative Experience into Something Positive

The final lesson was noted by young men and women who framed their sexual debuts as negative or positive/negative. These youths noted that they could turn their negative experiences into something positive that could help others. As one participant described:

Now I’m just looking at it like, “Oh, yeah, it was a good life lesson. I can learn a lot from it and also teach others, give or take, or pretty much teach others about their decisions from it. If the time comes, I’ll be the prime person to do that.” (Steve, age 16 at sexual debut, positive/negative experience).

As described in Steve’s reflection, participants wanted to use their first sex to teach others to be better prepared when they engaged in their first sexual experiences. Some participants provided direct advice to others, such as family members and romantic partners, on how to enter into their first sexual experience.

I’ve had boyfriends who—actually all my boyfriends since [my first sexual partner] have been virgins and I would tell them to wait or I would tell them, “You don’t want to do this [have your first sex] this certain way.” (Aubrey, age 15 at sexual debut, negative experience)

Others, however, provided more implicit guidance and support. For example, Maria noted being highly present in her younger sister’s life in an effort to prevent her from having sex.

I have a little sister that’s now 13, and it’s just like, I’m thinking, “Well, I had sex when I was in my teens,” so it makes me, like, now I spend more time with her, more involved in her life than I was before. Because I know what it is like to be a

teenager, especially since I'm only 21, so I just came out of my teenage years, so I know how you would feel. Because she [her younger sister] was basically in the same situation that I was growing up, I want to give her that attention and love that I didn't get, so she won't feel the need to have a boyfriend or if she does, she won't exactly feel the need to have sex. She's in track and she's doing other positive things, and I told her to join cheerleading, so you have things that are your outlet.

(Maria, age 16 at sexual debut, negative experience)

Regardless of whether the information was directly or indirectly communicated, these participants all noted that sharing their sexual experiences was an important life lesson to pass on to others so that they could make better and more informed decisions regarding sexual initiation.

Discussion

To our knowledge, this is one of the first studies to explicitly explore the lessons that African American youth learned from their first sexual experience. We found that African American youth gained several important insights from their initial sexual intercourse and that this information guided their thoughts, attitudes, and behaviors as they entered into later sexual relationships.

Most of the young men and women in our sample noted learning the importance of assessing their individual readiness for sex. Our participants recognized that this assessment should occur prior to engaging in any type of sexual behavior with their partners and included an evaluation of individual motivations for wanting to initiate sex. An important part of this process was also determining whether sex was really wanted or desired. Feeling "ready" was one primary reason that youth have reported initiating sex (Smiler, 2008). However, the process for determining one's sexual readiness is highly complex, and many youth struggle with knowing whether they really are ready to have sex (Ott, 2010; Ott, Pfeiffer, & Fortenberry, 2006). In our own qualitative research, for example, we have found that several young African American men reported being ready to initiate sex at the time of sexual debut but could not clearly articulate what being ready meant for them (Lanier et al., in press).

Current HIV prevention programs should include activities that help youth define sexual readiness. Given that there is considerable variability regarding what constitutes readiness for sex, these activities should be tailored to each individual so that s/he is able to clearly articulate what being sexually "ready" means to her/him. These programs should also include content that help youth determine whether they are ready to have sex. Open, judgment-free discussions regarding the individual, social, and contextual factors that may motivate them to have sex are critical. This includes conversations about exploration and curiosity, which also play an important role in why some youth initiate sex (Ott, 2010). Role-playing exercises may be useful in assisting youth to initiate conversations with their sexual partners about levels of readiness to engage in sexual activity.

The young men and women in our study also indicated that learning "what to do and what not to do" within their sexual relationships was part of the sexual debut. They gained important knowledge, such as the importance of using condoms during every sexual

encounter, and skills, such as how to communicate with their partners about sexual boundaries. These insights shaped how youth navigated and participated in future sexual relationships. It also gave them a better sense of what they wanted in sexual relationships from their romantic partners.

Perhaps the most notable finding was that several participants reported that they could share the lessons and insights they gained during their first sexual experiences with others. Interestingly, this particular lesson was only noted by the men and women who reported having a negative first sex experience. These men and women recognized that they could take their experiences and help educate less sexually experienced individuals to make more informed decisions about when, and with whom, to initiate sex. The inclusion of sexually experienced youth as peer mentors may be a particularly useful strategy to further enhance current HIV prevention efforts (Ott et al., 2012). Sexually-experienced youth are a valuable resource; they can impart important knowledge and insights to less sexually experienced youth in a manner that is real and relatable, and peer-led interventions have been found to be effective in reducing HIV risk such as increasing HIV testing (Shangani et al., 2017). Our findings suggest that sexually experienced youth would be open to being involved in activities that allow them to mentor youth who have limited sexual experience. Empowering these youth as change agents may also reinforce the desire to make good decisions regarding sexual activity for themselves.

Several study limitations should be acknowledged. While first sexual intercourse is a salient experience for many youth, this was a retrospective study; therefore, our findings may have been subject to participant recall bias. Second, the majority of the sample identified as heterosexual. Therefore, findings may not be reflective of sexual minority youth. Third, youth were recruited from a single geographical location: a large, urban Northeastern city. Thus, findings may not be generalizable to African American youth who reside in other types of communities (i.e., small rural settings).

Conclusions

Our study highlighted the importance of using a resiliency framework to examine the sexual debut of African American youth. Through a resiliency lens, sexual debut represents a unique opportunity for youth to learn valuable lessons and insights that inform and shape their future romantic and sexual relationships. Youth-focused HIV prevention programs should build on these insights by incorporating content that help both sexually active and non-sexually active youth assess what they have learned from past romantic and sexual experiences and how to properly apply this information to subsequent sexual relationships.

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Table 1Selected participant characteristics ($N = 10$)

Characteristics	N (%)
Gender	
Female	5 (50)
Male	5 (50)
Age at interview	
18 – 19	2 (20)
20 – 21	5 (50)
22 – 23	3 (30)
Sexual orientation	
Heterosexual	9 (90)
Homosexual	1 (10)
Highest level of education	
High school diploma or GED	5 (50)
Some college	3 (30)
Bachelor's degree	2 (20)
Age at first sexual intercourse	
13 years	2 (20)
14 – 15 years	1 (10)
16 – 17 years	4 (40)
18 – 19 years	3 (30)
Type of sex at first sexual intercourse	
Oral	1 (10)
Anal	1 (10)
Vaginal	8 (80)
Evaluation of first sexual intercourse	
Positive	5 (50)
Negative	3 (30)
Positive and negative	2 (20)

Note. GED = graduate equivalency degree.