

Would You Say You “Had Sex” If . . . ?

Stephanie A. Sanders, PhD

June Machover Reinisch, PhD

THE DEGREE TO WHICH INDIVIDUALS vary with respect to the behavioral criteria involved in labeling an interaction as having “had sex” has implications for both clinical and research purposes. Recent public discourse regarding whether oral-genital contact constitutes having “had sex” highlights the importance of explicit criteria in contrast with implicit assumptions in this area. Unfortunately, a review of the literature demonstrates that empirical exploration of what is included in definitions of having “had sex” for the general public in the United States remains scant. Social and legal definitions of “sex,” “sex act,” “having sex with,” “sexual relations,” and various crimes related to having “had sex,” including adultery, rape, and statutory rape, vary depending on the source but often refer to sexual intercourse, which, in turn, is often defined as “coitus” or “copulation.”¹⁻⁵ Not surprisingly, engaging in behaviors other than penile-vaginal intercourse is a strategy used by some to preserve “technical virginity.”⁶⁻¹¹ In keeping with such views, a 1996 convenience sample of college students found that almost 3 out of 4 students reported that they would not include in a list of their sexual partners those with whom they only had oral sex.⁶ In concert with that perspective, when asked, “Is oral sex ‘real’ sex?” only 52% of men and 46% of women said yes. However, this suggests that for some, engaging in an act they define as “sex” does not necessitate defining the other person as a “sexual partner” and, hence, does not inevitably

Context The current public debate regarding whether oral sex constitutes having “had sex” or sexual relations has reflected a lack of empirical data on how Americans as a population define these terms.

Objective To determine which interactions individuals would consider as having “had sex.”

Methods A question was included in a survey conducted in 1991 that explored sexual behaviors and attitudes among a random stratified sample of 599 students representative of the undergraduate population of a state university in the Midwest.

Participants The participants originated from 29 states, including all 4 US Census Bureau geographic regions. Approximately 79% classified themselves as politically moderate to conservative.

Main Outcome Measure Percentage of respondents who believed the interaction described constituted having “had sex.”

Results Individual attitudes varied regarding behaviors defined as having “had sex”: 59% (95% confidence interval, 54%-63%) of respondents indicated that oral-genital contact did not constitute having “had sex” with a partner. Nineteen percent responded similarly regarding penile-anal intercourse.

Conclusions The findings support the view that Americans hold widely divergent opinions about what behaviors do and do not constitute having “had sex.”

JAMA. 1999;281:275-277

www.jama.com

bly lead to labeling the interaction as a sexual relationship.

The current public debate regarding whether oral sex constitutes having “had sex” or sexual relations has suffered from a lack of empirical data on how Americans as a population define these terms.^{12,13} The data reported here were originally collected in 1991 for their relevance to sexual history information gathering and to specifically examine the need for behavioral specificity to avoid possible confusion.¹⁴ These findings also serve as an indication of attitudes regarding definitions of having “had sex” among college students assessed prior to current media publicity about this issue. The respondents today range in age from late 20s to early 30s.

METHODS

The study was approved by the university’s institutional review board human subjects committee. The data were col-

lected in 1991 as part of a survey containing 102 items addressing the prevalence and interrelationships among behaviors associated with sexually transmitted disease risk from a randomly selected, stratified undergraduate sample. Participants were students at 1 of the largest Midwest state universities, originating from 29 states (10 in the Midwest, 11 in the South, 5 in the Northeast, and 3 in the West). The majority of participants were from the Midwest. Potential participants were first contacted by a letter informing them that they had been

Author Affiliations: The Kinsey Institute for Research in Sex, Gender, and Reproduction, (Drs Sanders and Reinisch) and Gender Studies (Dr Sanders) Indiana University, and R² Science Communications Inc (Dr Reinisch), Bloomington; and the Institute of Preventive Medicine, Copenhagen University Hospital, Copenhagen, Denmark (Dr Reinisch).

Corresponding Author and Reprints: June Machover Reinisch, PhD, The Kinsey Institute for Research in Sex, Gender, and Reproduction Indiana University, Bloomington, IN 47405 (e-mail: jmrr@idt.net).

chosen at random, explaining that The Kinsey Institute for Research in Sex, Gender, and Reproduction Studies was conducting a large survey of college student sexual behavior, and describing the procedures for data collection and insurance of confidentiality. Letters were followed by telephone contact to enlist participation. Of the 1029 students contacted who were eligible and potentially available, 599 undergraduates (58%) met the requirements of completing the questionnaire in 13 supervised group sessions during the 36-day study period and matched the racial demographics of the university population. Those who did not participate either declined because of lack of interest (23%) or did not show up for their scheduled appointments (19%). Mean (SD) age was 20.7 (3.1) years, with 96% of the sample falling between ages 18 and 25 years. The sample was 59% female. Matched to university demographics, 92% were white, 4% were black, and 4% identified themselves as a race/ethnicity other than black

or white. Ninety-six percent identified themselves as heterosexual. When queried about their political position, 78.5% classified themselves as moderate to conservative. Although 42% were not registered to vote, there were more registered Republicans (32%) than Democrats (19%), while 7% identified themselves as independent. Additional details regarding the methods, sample demographics, and behavioral data are presented elsewhere.¹⁵

The behaviors relating to having "had sex" were arranged in random order to prevent the conveyance of a preconceived hierarchy. For each behavior, valid percentages (including only those who answered yes or no) and 95% confidence intervals (CIs) were determined for women, men, and the overall sample. The item read, "Would you say you 'had sex' with someone if the most intimate behavior you engaged in was . . . (mark yes or no for each behavior):

(a) a person had oral (mouth) contact with your breasts or nipples?

(b) you touched, fondled, or manually stimulated a person's genitals?

(c) you had oral (mouth) contact with a person's breasts or nipples?

(d) penile-vaginal intercourse (penis in vagina)?

(e) you touched, fondled, or manually stimulated a person's breasts or nipples?

(f) a person had oral (mouth) contact with your genitals?

(g) you had oral (mouth) contact with a person's genitals?

(h) deep kissing (French or tongue kissing)?

(i) penile-anal intercourse [penis in anus (rectum)]?

(j) a person touched, fondled, or manually stimulated your breasts or nipples?

(k) a person touched, fondled, or manually stimulated your genitals?"

Results are presented with 95% CIs and χ^2 analyses corrected for continuity were used for specific group comparisons.

RESULTS

As can be seen in the TABLE, almost everyone agreed that penile-vaginal intercourse would qualify as having "had sex." Approaching this level of common perspective and yet importantly different is the fact that while 81% of participants counted penile-anal intercourse as having "had sex," 19% did not. In contrast, few individuals considered deep kissing (nearly 2%) or breast contact (nearly 3%) as having "had sex" with a partner. Answers to the breast contact items (a, c, e, and j) did not vary substantially regardless of the directionality of behaviors or whether contact was manual or oral. Approximately 14% to 15% indicated that manual stimulation of the genitals (either given or received) would constitute having "had sex." Only 40% indicated that they would say they had "had sex" if oral-genital contact was the most intimate behavior in which they engaged (60% would not). For the behaviors less frequently included as having "had sex," men were slightly more likely to incorporate them into the "had sex" category.

Table. Percentages for Participants Answering Yes to the Question, "Would You Say You 'Had Sex' With Someone if the Most Intimate Behavior You Engaged in Was . . . ?"

| Behaviors | Percentage Indicating "Had Sex" (95% Confidence Interval) | | |
|--|--|--------------------------------|-------------------------------|
| | Women | Men | Overall |
| Deep kissing | 1.4 (0.2-2.6) [n = 353] | 2.9 (0.8-5.0) [n = 245] | 2.0 (0.9-3.1) [n = 598] |
| Oral contact on your breasts/nipples | 2.3 (0.7-3.9) [n = 353] | 4.1 (1.6-6.6) [n = 243] | 3.0 (1.6-4.4) [n = 596] |
| Person touches your breasts/nipples | 2.0 (0.5-3.5) [n = 353] | 4.5 (1.9-7.1) [n = 244] | 3.0 (1.6-4.4) [n = 597] |
| You touch other's breasts/nipples† | 1.7 (0.3-3.1) [n = 348] | 5.7 (2.8-8.6) [n = 244] | 3.4 (1.9-4.9) [n = 592] |
| Oral contact on other's breasts/nipples‡ | 1.4 (0.2-2.6) [n = 352] | 6.1 (3.1-9.1) [n = 245] | 3.4 (1.9-4.9) [n = 597] |
| You touch other's genitals | 11.6 (8.3-14.9) [n = 354] | 17.1 (12.4-21.8) [n = 245] | 13.9 (11.1-16.7) [n = 599] |
| Person touches your genitals§ | 12.2 (8.8-15.6) [n = 353] | 19.2 (14.3-24.1) [n = 245] | 15.1 (12.2-18.0) [n = 598] |
| Oral contact with other's genitals | 37.3 (32.3-42.3) [n = 354] | 43.7 (37.5-49.9) [n = 245] | 39.9 (36.0-43.8) [n = 599] |
| Oral contact with your genitals | 37.7 (32.6-42.8) [n = 353] | 43.9 (37.7-50.1) [n = 244] | 40.2 (36.3-44.1) [n = 597] |
| Penile-anal intercourse | 82.3 (78.3-86.3) [n = 350] | 79.1 (73.9-84.3) [n = 239] | 81.0 (77.8-84.2) [n = 589] |
| Penile-vaginal intercourse | 99.7 (99.1-100) [n = 354] | 99.2 (98.1-100.3) [n = 245] | 99.5 (98.9-100) [n = 599] |

*n is the total number of respondents in each category for each behavior.

†Data are significant at $P = .01$; $\chi^2_1 = 5.90$.

‡Data are significant at $P = .004$; $\chi^2_1 = 8.46$.

§Data are significant at $P = .02$; $\chi^2_1 = 5.01$.

Seventy-four percent (95% CI, 69%-79%) of women and 80% (95% CI, 74%-85%) of men had penile-vaginal intercourse experience. Eighty-two percent (95% CI, 78%-87%) of women and 84% (95% CI, 79%-89%) of men had oral-genital experience. Responses to the "had sex" question did not differ in general based on these experiences with the following exception: of those who had experienced (1) both oral-genital contact and penile-vaginal intercourse, (2) neither of these behaviors, or (3) only penile-vaginal intercourse, 59% said that oral-genital contact did *not* constitute having "had sex" (95% CI, 54%-63%). In comparison, those whose most intimate sexual experience was limited to oral-genital contact (8%; 95% CI, 6%-11%) were significantly even more likely (75%; 95% CI, 62%-87%; $\chi^2_1 = 4.37$; $P = .04$) to rate this form of contact as *not* meeting their criteria for having "had sex."

COMMENT

These data make it clear that general agreement regarding what constitutes having "had sex" and how sexual partners are counted cannot be taken for granted. Among the behaviors assessed, oral-genital contact had the most ambivalent status. Overall, 60% reported that they would not say they "had sex" with someone if the most intimate behavior engaged in was oral-genital contact. Additionally, we found evidence of belief in

"technical virginity." Compared with others, those who had experienced oral-genital contact but had never engaged in penile-vaginal intercourse were less likely to consider oral-genital contact as having "had sex." These findings are consistent with other reports indicating that oral sex is not consistently defined as having "had sex"⁵⁻¹² and seem relevant to the issue of "technical fidelity" as well.

One out of 5 indicated they would not count penile-anal intercourse as having "had sex." This finding has implications for sexual history taking and prevention education, given that the study was conducted during the era of widespread public information and education campaigns regarding the association of risk of human immunodeficiency virus infection and unprotected anal intercourse.

Future investigations should examine such variables as the relational context of the behavior (eg, was it within an established relationship? Was it extramarital or extrarelatational?), the relevance of orgasm (some consider behaviors less intimate if no orgasm occurs), issues of consent, the relevance of cohort and socioeconomic status to definitions of what constitutes sex, and the potential costs/benefits of labeling a behavior as having "had sex" (eg, in cases of extramarital behavior, discrepancies between partners are likely).

The virtually universal endorsement of penile-vaginal intercourse as having

"had sex" in contrast with the diverse opinions for other behaviors highlights the primacy of penile-vaginal intercourse in American definitions of having "had sex." The lack of consensus with respect to what constitutes having "had sex" across the sexual behaviors examined herein provides empirical evidence of the need for behavioral specificity when collecting data on sexual histories and identifying sexual partners. These data indicate that prior to the current public discourse, a majority of college students attending a major midwestern state university, most of whom identified themselves as politically moderate to conservative, with more registered Republicans than Democrats, did not define oral sex as having "had sex."

Funding/Support: The research on which this article is based was conducted at The Kinsey Institute during the directorship of Dr Reinisch and supported in part by funds raised by Sherry Hackett and the Los Angeles Friends of the Kinsey Institute, Los Angeles, Calif. Questionnaire development was based on work funded in part by grant DA05056 from the National Institute on Drug Abuse, Rockville, Md (Drs Reinisch and Sanders), and grant HD20263 from the National Institute of Child Health and Human Development, Bethesda, Md (Dr Reinisch).

Acknowledgments: We thank Mary Ziemba-Davis, Indiana Criminal Justice Institute, Indianapolis, and Craig Hill, PhD, Indiana University–Purdue University at Fort Wayne, for their significant contributions to the original research, and Leonard A. Rosenblum, PhD, State University of New York Health Science Center at Brooklyn, for editorial support. Finally, we thank the participants who contributed their time and effort, even in the midst of midterm and final examinations.

REFERENCES

- Flexner SB, ed-in-chief; Hauck LC, managing ed. *Random House Unabridged Dictionary*. 2nd ed. New York, NY: Random House; 1993.
- Nolan JR, Nolan-Haley JM, Connolly MJ, Hicks SC, Alibrandi MN. *Black's Law Dictionary*. 6th ed. St Paul, Minn: West Publishing Co; 1990.
- Simpson JA, Weiner ESC. *Oxford English Dictionary*. 2nd ed. New York, NY: Oxford University Press; 1989.
- Webster's Third New International Dictionary of the English Language—Unabridged*. Springfield, Mass: Merriam-Webster Inc; 1993.
- Kirn W, Branega J, Carney J, McAllister JFO, Rainert V. When sex is not really having sex. *Time Canada*. February 2, 1998;151:22.
- Klein M, Petersen JR. *Playboy's* college sex survey: a most stimulating look at just on campuses across the country. *Playboy*. October 1996;43:64.
- Chilman CS. *Adolescent Sexuality in a Changing American Society*. New York, NY: John Wiley & Sons Inc; 1983:74.
- Herold ES, Way L. Oral-genital sexual behavior in a sample of university females. *J Sex Res*. 1983;19:327-338.
- Sheeran P, Abrams D, Abraham C, Spears R. Religiosity and adolescents' premarital sexual attitudes and behaviour: an empirical study of conceptual issues. *Eur J Soc Psychol*. 1993;23:39-52.
- Feldman L, Holowaty P, Harvey B, Rannie K, Shortt L, Jamal A. A comparison of the demographic, lifestyle, and sexual behaviour characteristics of virgin and non-virgin adolescents. *Can J Hum Sexuality*. 1997; 6:197-209.
- Mahoney ER. Religiosity and sexual behavior among heterosexual college students. *J Sex Res*. 1980; 16:87-113.
- The Starr Report: Referral to the United States House of Representatives Pursuant to Title 28, United States Code §595(c)*. Available at: <http://icreport.house.gov/icreport>. Submitted by the Office of the Independent Counsel, September 9, 1998.
- Baker P, Marcus R. Experts scoff at perjury loophole proposed for Clinton. *Washington Post*. August 15, 1998:A6.
- Reinisch JM, Sanders SA, Ziemba-Davis M. The study of sexual behavior in relation to the transmission of human immunodeficiency virus: caveats and recommendations. *Am Psychol*. 1988;43:921-927.
- Reinisch JM, Hill CA, Sanders SA, Ziemba-Davis M. High-risk sexual behavior at a midwestern university: a confirmatory survey. *Fam Plann Perspect*. 1995; 27:79-82.