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HEALTH BEHAVIOUR IN  
SCHOOL-AGED CHILDREN  
SCOTLAND



## HBSC Briefing Paper 21

# Sexual health of 15 year olds in Scotland 2: circumstances of first intercourse

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Sexual health is defined as a state of physical, emotional and social well-being regarding an individual's sexual behaviour.<sup>1</sup> Adolescence is a key period in the development of personal relationships and sexual behaviour, and sexual initiation is a key aspect of sexual health among young people. This twenty-first HBSC Briefing Paper (BP) examines circumstances of first sexual intercourse among 15-year olds\*\* who have ever had sex, using data from the HBSC Surveys in Scotland in 2010 and 2014. Age of initiation, age of first sexual partner, alcohol or drug use before first sex and regret regarding the timing of first sexual intercourse are explored. It follows BP20<sup>2</sup> which presents findings on other aspects of sexual health using the same survey data, presenting on prevalence of having sexual intercourse by age 15 and the associated social and individual factors.

## Summary of key findings

- Age at sexual initiation has not changed among boys or girls between 2010 and 2014
- Boys tend to be younger than girls at first sexual intercourse
- Among girls, first sexual intercourse is most commonly with an older partner whereas for boys the partner is most likely to be the same age
- A minority of 15-year olds report using alcohol or drugs before first sexual intercourse, although this is more common among boys
- Girls were more likely than boys to report that they wanted to have been older at first sexual intercourse

## Sexual health of young people

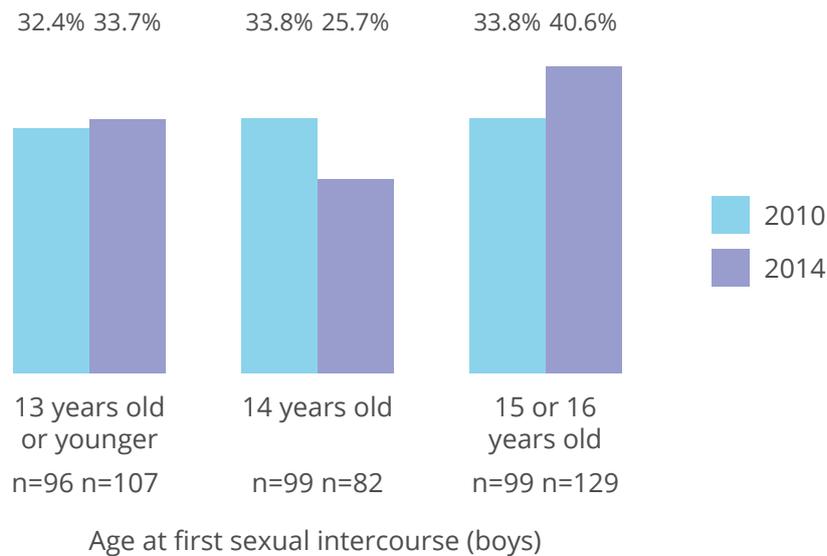
In 2010, Scotland had one of the highest rates of early sexual onset among 15-year olds (boys: 26.9%, girls: 35.4%), especially in girls, compared with 36 other countries in Europe and Canada.<sup>3</sup> However, HBSC BP20 indicates that for girls there has been a significant decrease in the percentage of 15-year old girls (to 27.4%) reporting that they have had sex, while rates for boys are little changed (24.4%).<sup>2</sup>

It has been reported that having sex for the first time at an early age is often associated with unsafe sex, arising in part from lack of knowledge, lack of access to contraception, lack of skills and self-efficacy to negotiate contraception, having sex while drunk or having taken drugs, or lack of self-efficacy to resist pressure.<sup>4,5,6</sup>

\* Dorothy Currie, Jo Inchley and Fergus Neville

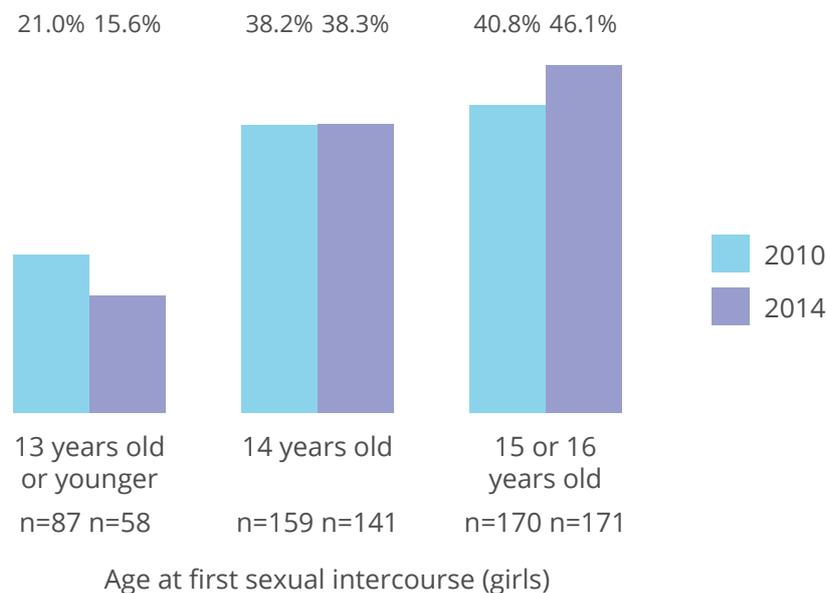
\*\* Age range from 14-16 years with mean age around 15.5 years

# Age of sexual initiation



**Figure 1:** Age of sexual initiation (amongst those who report having had sex) in 2010 and 2014 (boys)

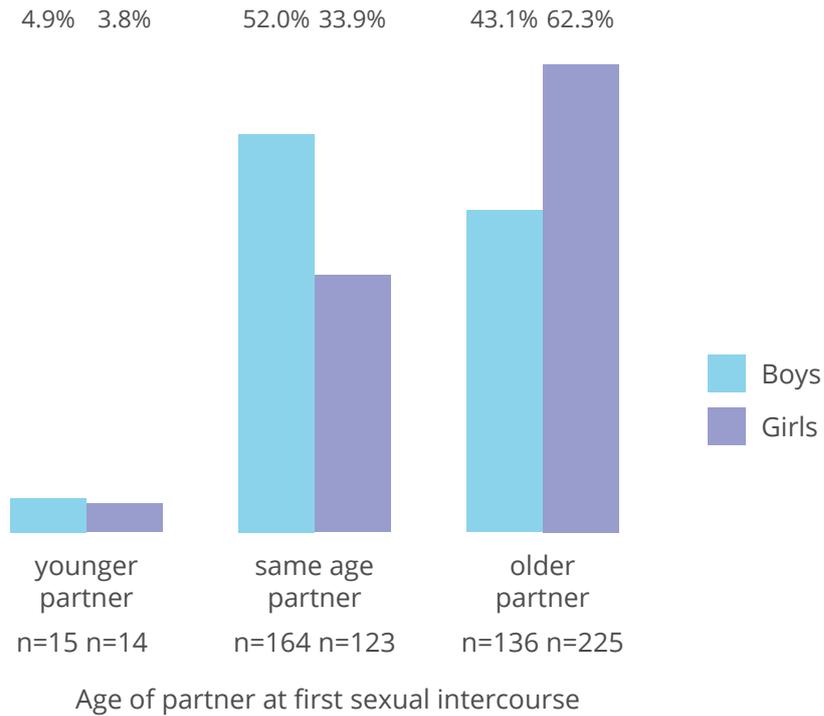
- Among boys who report that they have had sex, in 2010 approximately equal proportions report that their age at first sex was: 13 years and younger/14 years/ 15 or 16 years. However in 2014 there is a significant shift towards an older age at first sex.



**Figure 2:** Age of sexual initiation (amongst those who report having had sex) in 2010 and 2014 (girls)

- For girls, the picture is different from boys, with more than 40% reporting first sex at 15 or 16 years, compared to 21% or less at 13 or younger. The slight shift towards an older age at first sex in 2014 is not statistically significant.
- Overall, boys are more likely than girls to have earlier sexual initiation, with respectively 30% vs 15% being under 14 years old (2010 and 2014 combined).

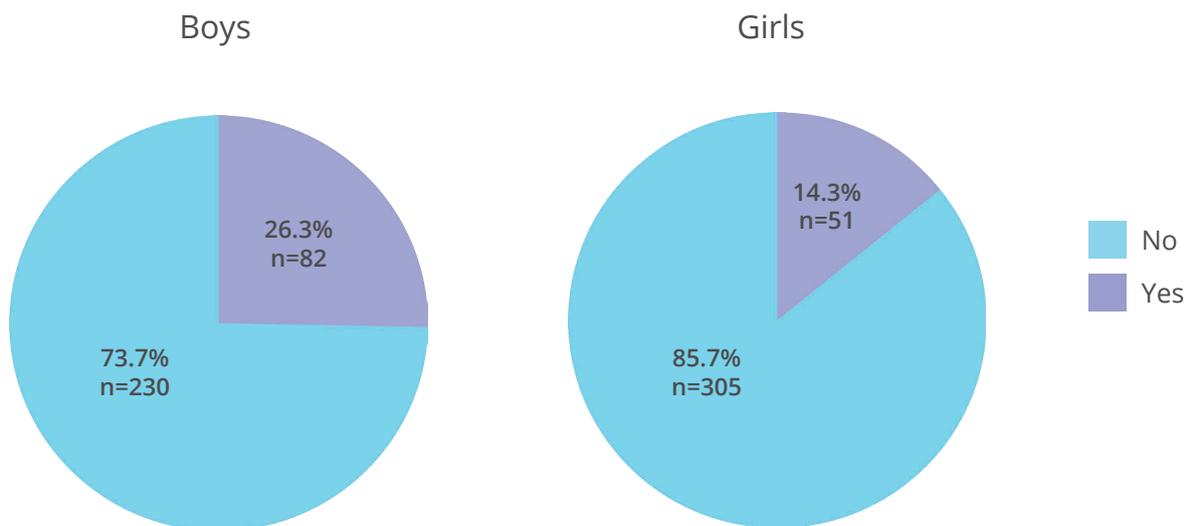
## Age of partner at first sexual intercourse (2014 data only)



**Figure 3:** Age of partner at first sexual intercourse (among those who report having had sex) (2014)

- Among girls, first sexual intercourse is most commonly with an older partner compared to same age (62.3% vs 33.9%), whereas for boys the partner is more likely to be the same age (52.0%) than with an older partner (43.1%) (Figure 3).

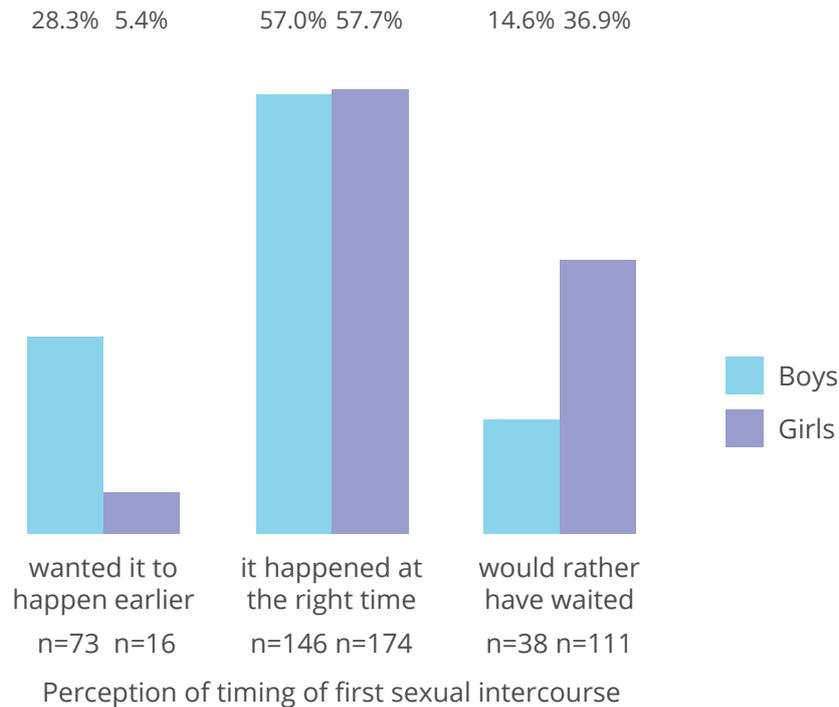
## Alcohol or drug use before first sexual intercourse (2014 data)



**Figure 4:** Percentage of boys and girls reporting alcohol or drug use before first sex (2014)

- Boys are more likely than girls to have used alcohol or drugs at first sex (26.3% vs 14.3%, respectively).

## Perception of timing of first sexual intercourse timing (2014 data only)



**Figure 5:** Perception of timing of first sexual intercourse in boys and girls (2014)

- Of those boys and girls who responded regarding timing of first sexual intercourse, it was found that boys were more likely than girls to have wanted their first sexual intercourse to have happened earlier, 28.3% vs 5.4%, respectively. More than a third of girls would have rather had their first sex later, whereas only 14.6% of boys reported this. Note that numbers are small in this analysis.

## Background

Early sexual behaviour can have consequences for young people's health and well-being, especially if it begins before they are mature enough to cope, and at a stage in adolescent brain development when decision making may be particularly affected by emotions and social situations.<sup>7</sup> Early onset of sexual activity is not only associated with increased risk of STIs and unintended pregnancies,<sup>8</sup> but also other adverse health indicators such as poor mental health<sup>9</sup> and lower academic performance.<sup>10</sup>

## Policy context in Scotland

The Scottish Government's Sexual Health and Blood Borne Virus (SHBBV) Framework aims to improve sexual health outcomes in young people in Scotland, with a focus on reducing the inequality gap. The Framework aims to take an integrated approach looking wider than just the risk behaviour and focusing on the shared influences that affects young people. This is delivered through life-long education, increasing access to integrated services, improving joint working between services, reducing stigma and increasing positive messaging on sexual health and wellbeing. The Framework recognises the influence of alcohol and drugs which can affect an individual's judgement and make them vulnerable to engaging in risk-taking behaviours. Therefore the Framework supports strong multi-agency partnership working between Local Authorities, Health Boards and Third Sector agencies aiming to ensure young people have all the information and support they need to keep themselves safe and able to make informed choices. The Framework supports a policy of delaying sex until you are ready, be safe when you are.

## HBSC data

The Health Behaviour in School-Aged Children Study (HBSC) in Scotland is the only source of nationally representative self-reported data on the sexual behaviour of young people aged 15 years. Previous briefing papers and reports have presented trends from 1998 – 2010<sup>3,11</sup> and international comparisons between Scotland and other countries in Europe and Canada in 2002, 2006 and 2010.<sup>3,12,13</sup>

## Methods

This briefing paper presents 2010 and 2014 national survey data from the Health Behaviour in School-Aged Children (HBSC): WHO Collaborative Cross-national Study in Scotland. HBSC is a unique cross-national research study of the health and health behaviours of adolescents across Europe and North America. The HBSC study collects data from 15-year-olds (S4 pupils in Scotland) on reported sexual intercourse and circumstances of first sex. A nationally-representative sample of 2,566 pupils from S4 took part in the survey in 2010; in 2014, 2,983 pupils from S4 took part in the survey.

NOTE: Survey questions referred to in this Briefing Paper are described in full on the HBSC National Study website.<sup>14</sup>

## Discussion of key findings

Earlier UK reports found that the median age for first sexual intercourse in the United Kingdom dropped during the early 1990s and then remained stable at around 16 years for both men and women.<sup>4</sup> This is consistent with findings from the current study where there has been no decline in age of first sexual intercourse between 2010 to 2014 among 15 year old boys and girls in Scotland. In fact, there appears to be an increase in age at first intercourse among girls, with 36% being older than 14 in 2006<sup>11</sup> increasing to 46% in 2014. The HBSC Study also reports that across 20 countries in Europe, there has been no linear trend over time in most countries for sexual intercourse at the age of 13 or younger between 2002 and 2010.<sup>15</sup>

In 2010 and 2014, boys report having their first sexual intercourse at a younger age than girls and 2014 data show that boys are more likely than girls to have taken alcohol or drugs before their first sex.

About one third of girls report that they wanted to have their first sex when older. This finding backs an approach in education and sexual health services that supports and empowers adolescents, especially girls, to being able to make reflective decisions based on their own will.

The evidence around substance use shows that a minority of young people used alcohol or drugs prior to first sex and that it was more common among boys. While relatively infrequent it is nevertheless important for preventive approaches to reinforce the messages around safe practices and the wider circumstances of early sex among adolescents. Programmes are more likely to be successful if they take into account that adolescents estimate and evaluate risk differently from adults and health professionals; and may value the attitudes of their peers more than any perceived health risks.<sup>4</sup>

### Note on authors

Mareike Franz was an ERASMUS funded visiting post-graduate student from the University of Bielefeld to the University of St Andrews. Mareike conducted data analysis and contributed to the drafting of this Briefing Paper. She was jointly supervised by Candace Currie, Principal Investigator for HBSC Scotland and Juliet McEachran.

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## References

1. Berkeley, D. and Ross, D. (2003) Strategies for improving sexual health of young people. *Culture, Health and Sexuality*, 5: 71-86.
2. Currie, C., Franz, M., McEachran, J., Whitehead, R. and van der Sluijs, W. (2015) HBSC Briefing paper 20: Sexual Health of 15 year olds in Scotland (2010 and 2014): ever had sexual intercourse.
3. Currie, C., Zanotti, C., Morgan, A., Currie, D., de Looze, M., Roberts, C., Samdal, O., Smith, O.R.F. and Barnekow, V. (Eds.) (2012) Social determinants of health and well-being among young people: Health Behaviour in School-aged Children (HBSC) study: International report from the 2009/2010 survey. *Health Policy for Children and Adolescents No. 6*. Copenhagen: WHO Regional Office for Europe.
4. Tripp, J. and Viner, R. (2005) ABC of adolescence: Sexual health, contraception, and teenage pregnancy. *British Medical Journal*, 330.7491: 590.
5. Kiene, S.M., Barta, W.D., Tennen, H. and Armeli, S. (2008) Alcohol, helping young adults to have unprotected sex with casual partners: findings from a daily diary study of alcohol use and sexual behaviour. *Journal of Adolescent Health*, 44: 73-80.
6. Madkour, A.S., Farhat, T., Halpern, C.T., Godeau, E. and Gabhainn, S.N. (2010) Early adolescent sexual initiation as a problem behavior: a comparative study of five nations. *Journal of Adolescent Health*, 47: 389-398.
7. Blakemore, S-J. and Robbins, T.W. (2012) Decision-making in the adolescent brain. *Nature Neuroscience*, 15.9: 1184-1191.
8. Godeau, E., Nic Gabhainn, S., Vignes, C., Ross, J., Boyce, W. and Todd, J. (2008) Contraceptive use by 15-year old students at their last sexual intercourse. Results from 24 countries. *Archives of Pediatrics & Adolescent Medicine*, 162: 66-73.
9. Sabia, J.J. and Rees, D.J. (2008) The effect of adolescent virginity status on psychological well-being. *Journal of Health Economics*, 27: 1368-1381.
10. Sabia, J.J. (2007) Reading, writing, and sex: the effect of losing virginity on adolescent academic performance. *Economic Enquiry*, 45 (4): 647-670.
11. Kirby, J., van der Sluijs, W. and Currie, C. (2010) HBSC Briefing paper 18: Sexual health among young people in Scotland.
12. Currie, C. et al (eds.) *Young People's Health in Context: International Report from the HBSC 2001/02 Survey*, (Health Policy for Children and Adolescents, No. 4) WHO Regional Office for Europe, Copenhagen.
13. Currie, C., Gabhainn, S.N., Godeau, E., Roberts, R.S., Currie, D., Picket, W. and Richter, M. (2008) *Inequalities in Young People's Health: Health Behaviour in School-aged Children. International Report from the 2005/2006 Survey Health Policy for Children and Adolescents. (No. 5)*. World Health Organization.
14. CAHRU (2015) HBSC Scotland's 2013/14 national questionnaire: support in Scottish environment items. Available at: <http://www.cahru.org/publications/briefing-papers-and-factsheets/14-scottish-questionnaire>
15. Ramiro, L., Windlin, B., Reis, M., Gabhainn, S. N., Jovic, S., Matos, M. G., Magnusson, J. and Godeau, E. (2015). Gendered trends in early and very early sex and condom use in 20 European countries from 2002 to 2010. *The European Journal of Public Health*, 25(suppl 2): 65-68.