

What Do People Mean When They Say They “Had Sex”? Connecting Communication and Behavior

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CHAPTER 1

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KEY TERMS

Defining sex
Intercourse

Sexual activity
Sexual identity

Health
Quantitative research



ABSTRACT

What do people mean when they say they “had sex”? The most-cited study regarding what activities are communicated as having “had sex” is now over 20 years old. This chapter provides findings from a study that replicated the original study’s methods to provide an up-to-date understanding. An Internet survey completed by 380 women and 197 men from the United States was conducted. Results show that penile-vaginal intercourse was the sexual activity most likely to count as having “had sex,” with 97.4% of participants indicating it as sex. Other common sexual activities measured include penile-anal intercourse, oral-genital contact, and manual stimulation of genitals. The findings suggest many attitudes represented in the original survey have changed. Implications and future studies are offered.

In their article “Would You Say You ‘Had Sex’ If...?” published in the *Journal of the American Medical Association*, researchers Stephanie Sanders and June Reinisch (1999) found that even though the phrase “had sex” might appear to have a single meaning that is commonly understood by everyone, participants in their study held “widely divergent opinions about what behaviors do and do not constitute having ‘had sex’” (p. 275). Their research essay, inspired by a lack of research showing what behaviors the general public defined as sex, used data collected in 1991 from a survey given to a group of 599 eligible participants (Sanders & Reinisch, 1999) to help determine how people might indicate their sexual activities to others, especially physicians or potential sex partners. Since the initial publication of the study about 15 years ago, many have turned to the data to understand what people mean when they say they “had sex.” Indeed, a citation count generated by Google Scholar in late 2015 demonstrates 36 citations since 2014, 114 citations over the past five years, and 435 citations total. Additionally, the same Google Scholar search reveals the article has been reprinted at least six times, indicating this data has been well used. As beneficial as these data have been, given that almost 25 years have passed since the initial data collection, an update is in order.

For the research study in this chapter, we sought to replicate the original methods used by Sanders and Reinisch to create an up-to-date data set. Although we followed the same survey methods used by the researchers, we made changes in recruiting procedures to get a more diverse, and thus more indicative of the general population, group of participants. The people who participated in the original study were limited to one Midwestern state university (Sanders & Reinisch, 1999). Additionally, they were younger in age (96% of the participants were between the ages of 18 and 25) and mostly politically moderate to conservative (79% of participants self-categorized in these categories) (Sanders & Reinisch, 1999). The cultural context for the study was also grounded in the then-current Clinton-Lewinsky scandal (see *JAMA*: Editor, 1999). At the time, President William Jefferson Clinton was at the center of a controversy where he claimed he “did not have sexual relations” with White House intern Monica Lewinsky (quoted in Nelson, 2013). Later, when it was revealed that he had intimate relations that included oral sex and genital stimulation, many questioned whether or not Clinton lied. Although they did not have penile-vaginal intercourse, what they did was clearly sexual—suggesting that the definition of *sexual relations* was in flux. The research study was, in many ways, a response to the scandal (*JAMA*: Editor, 1999).

Although the Clinton-Lewinsky scandal has long passed, the importance of understanding what people mean when they say they “have sex” can be beneficial for many reasons. It can help to establish what consent means (see Brian, this volume or Ivy, this volume) and perhaps prevent rape; it can help physicians to understand the range of activities different people might be indicating when they say they had sex (see Noland, this volume); and it can help to contextualize everyday talk about sex between friends (see Strasser & Hobson, this volume), families (see Coffelt, this volume), and people in a variety of relationships. In short, what “having sex” means is at the center of understanding sexuality and communication in many contexts.

Defining Sex

Sanders & Reinisch’s (1999) original research study indicated that most participants considered penile-vaginal intercourse to be sex (99.5%); about 81% considered penile-anal intercourse to be sex; and only about 40% of individuals considered oral-genital contact as constituting sex. That means that most people counted traditional heterosexual penetration as sex, although many people counted penile-anal penetration as well. Other activities, such as oral sex, presented less possibility for agreement because there was less agreement from participants about whether it counted as sex or not.

After the study was published, other researchers (e.g., Pitts & Rahman, 2001; Taylor & Muscarella, 2002) also did research to try to understand what counted as sex, giving participants a similar list of sexual behaviors and asking them if that behavior would count as sex. Across these studies, findings were generally the same, with most participants in agreement about penile-vaginal intercourse being the most dominant understanding of having sex and considerable disagreement about whether oral or anal intercourse—when the most intimate behavior experienced during a physical encounter—counted. Also, similar to the original Sanders and Reinisch (1999) study, the researchers primarily relied on heterosexual, traditionally college-aged students to provide their data.

Although some scholars looked to replicate Sanders and Reinisch’s work, others were critical of their findings. For example, Peterson and Muehlenhard (2007) noted that the design of the original study lacked an

understanding of situation and context. They argued that certain people might have more of a motivation to count something as sex than others. For example, for men—who are often socially awarded for having more sexual activity—it would be of benefit to count more activities as sex. Women, on the other hand, might count less behaviors as sex because they are generally criticized more by others for their sexual activity. Sanders and Reinisch (1999) did acknowledge this somewhat in their study, suggesting that a “potential costs/benefits of labeling a behavior as having ‘had sex’” (p. 277) might be at play. Denes (2013) extended Peterson and Muehlenhard’s observation, pointing specifically to how the labeling of sexual activities can also be related to different aspects of an individual’s identity. Other research backs up Denes’ contentions. For example, Faulkner (2003) demonstrated a relationship between Latina women’s definitions of sex to their culture, religion, and evaluation and presentation of self.

Additionally, differences in what behaviors gay men (Hill, Rahman, Bright, & Sanders, 2010) and lesbian women (Horowitz & Spicer, 2013) constitute having “had sex” compared to heterosexual men and women have been demonstrated. Specifically, research has found that gay men label anal sex as having had sex more often than they do penile-vaginal intercourse (Hill et al., 2010); and lesbian women more often label oral, manual, and use of sex aid for stimulation of genitals as having had sex (Horowitz & Spicer, 2013). Although these findings are not that surprising, they do establish empirical evidence for what people have long assumed in social science research. The findings also suggest that more diverse populations could lead to a more accurate set of results for learning what people mean when they say they “had sex.”

Research Methods: Replicating the Original Study with More-Diverse Participants

Taking past research to heart, and especially being cognizant of McCormack’s (2014) advice to be mindful of recruiting diverse sexual identities, we replicated Sanders and Reinisch’s (1999) original research study, including their original research question:

R1: What behaviors do individuals define as constituting having “had sex”?

Participants

Participants were recruited through convenience sampling, predominantly by requests for participation posted to different Facebook groups. Additional participants were recruited through an offer of extra course credit for an undergraduate class in which they were currently enrolled. A total of 577 participants completed the survey and were included in analyses. The sample consisted of 380 women (65.9%) and 197 men, ranging in age from 18 to 74 years with 43.2% ranging in age from 18 to 24, 51.4% from 25-50, and 5.2% 50 years or older. The self-reported race/ethnicity of participants was 80.1% White, 6.4% of mixed race/ethnicity, 5.2% Hispanic or Latino, and 4.3% Black. Participants' self-reported sexual orientation consisted of 76.7% identifying as heterosexual and 24.3% identifying as gay, lesbian, or bisexual. The sample was highly educated, with 70.4% of participants having some college and 14.4% having graduate degrees. Participants were also more likely to be liberal, with 55.9% reporting being politically moderate to liberal.

Procedures and Instrumentation

Although five other measures were included in the questionnaire, the findings of this report are based solely on the original Sanders and Reinisch (1999) protocol. These items asked participants to respond to the question, "Would you say you 'had sex' with someone if the most intimate behavior you engaged in was..." by indicating "yes" or "no" to 11 behaviors. The items regarding behaviors that would constitute having "had sex" were presented in random order to prevent participants from identifying any preconceived hierarchy of sexual behaviors. The questionnaire was accessed online by clicking a link directed to a survey collection site. After reading the consent form explaining their rights, voluntary participation was indicated by continuing to the first portion of the questionnaire. Responses were anonymous and no identifying information was collected. If participation was for extra course credit, participants provided their name and class information by clicking on a link that directed them to a separate questionnaire so this information could not be linked back to individual responses. All participants were provided with contact information of the researchers and the university's Institutional Review Board should their participation raise any issues or questions they wanted to discuss.

Results

The research question asked what behaviors constituted having sex. As can be seen in Table 1, almost all participants (97.4%) were in agreement that penile-vaginal intercourse would qualify as having “had sex.” Although the number of those who considered penile-anal intercourse was significantly lower, the level of agreement on this item still indicates a high level of shared agreement (85.4%). Interestingly, few individuals considered deep kissing (14.4%) or breast contact (17.5%) with a partner as having “had sex.” However, these levels do differ substantially from those reported in the original Sanders and Reinisch (1999) study (2% and 3%, respectively). Additional notable findings were that 37.7% to 38.6% of individuals indicated that manual stimulation of the genitals (either given or received) would constitute having “had sex,” another substantial departure from findings of the original study. Responses to the items concerning oral-genital contact show that 57.7% to 58.4% of individuals would say they had “had sex” if this was the most intimate behavior in which they engaged. These findings are in contrast to the original study, where only 40% of individuals indicated that either giving or receiving oral-genital contact would constitute having “had sex.”

TABLE 1: 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 <i>n</i> = 380	Men (<i>n</i> = 197)	Overall <i>n</i> = 577
Deep kissing (French or tongue kissing)?	13.6 (10.2-17.1)	15.7 (10.6-20.8)	14.4 (11.5-17.2)
A person had oral (mouth) contact with your breasts or nipples?	17.6 (13.7-21.4)	17.2 (11.9-22.5)	17.5 (14.3-20.6)
A person touched, fondled, or manually stimulated your breasts or nipples?	15 (11.3-18.6)	12.6 (8.0-17.3)	14.2 (11.3-17.0)
You touched, fondled, or manually stimulated a person’s breasts or nipples?	39.7 9.7 (34.7-44.6) (4.7-14.6)	18.7 (13.2-24.2)	14 (11.2-16.8)
You had oral (mouth) contact with another person’s breasts or nipples?	12.3 (9.0-15.6)	22.3 (16.4-28.2)	15.7 (12.7-18.7)
You touched, fondled, or manually stimulated a person’s genitals?	39.7 (34.7-44.6)	34 (27.3-40.6)	37.7 (33.8-41.7)
A person touched, fondled, or manually stimulated your genitals?	41.8 (36.8-46.8)	32.4 (25.9-39.0)	38.6 (34.6-42.6)
You had oral (mouth) contact with a person’s genitals?	58.1 (53.1-63.1)	56.8 (49.9-63.8)	57.7 (53.6-61.7)
A person had oral (mouth) contact with your genitals?	58.6 (53.7-63.1)	57.8 (50.9-64.8)	58.4 (54.3-62.4)
Penile-anal intercourse (penis in anus/rectum)?	83.1 (79.3-86.9)	89.8 (85.6-94.1)	85.4 (82.5-88.3)
Penile-vaginal intercourse (penis in vagina)?	97.3 (95.7-98.9)	97.4 (95.2-99.6)	97.4 (96.1-98.7)

Discussion

Comparisons and Contrasts to the Original Study

Although agreement regarding whether penile-vaginal intercourse was considered having “had sex” was higher than any other behavior, the current findings (97.4%) were slightly different than those of the original study (99.5%), and there was a slight increase for penile-anal intercourse (85.4%) compared to the original findings (81%). We suspect that both of these changes are related to our more-diverse population, as the inclusion of more gay or bisexual men could help to explain the increase of those counting penile-anal intercourse as sex. Changing public perceptions about same-sex activity (see Lannutti & Faulkner, this volume) could also account for the increase. Similarly, lesbians and bisexual women could also help to account for why less people reported penile-vaginal intercourse as having “had sex.” Indeed, a self-identified lesbian participant included on another portion of the survey where open-ended data were collected, “I do not sleep with men. For penile-vaginal intercourse to happen, I would most likely call it rape.”

The most interesting contrast in the findings of this study versus the findings of the original is the big increase in the number of people who counted the manual stimulation of genitals as having “had sex.” This number ranged from 37.7% to 38.6% (given or received) in contrast to the findings of the original study where only 13.9% to 15.1% saw it as having “had sex.” This change could be because of the number of older participants included in the study, as many older populations consider touching as more sexual than younger generations (see Kratzer, this volume). Oral-genital contact also saw big change from the 1999 study where 39.9% to 40.2% counted it as having “had sex.” In the current study, that number increased to 57.7% to 58.4%. This increase might be, in part, because of lesbian or bisexual women participants, but it is also likely indicative of some other social change. Future research would be illuminating to help understand such a shift.

Other differences were found in responses to questions about deep kissing (14.4% compared to 2% reported in original study), oral contact with breasts or nipples by another individual (17.5% compared to 3% reported

in original study), and manual stimulation of breasts or nipples by another individual (14.2% compared to 3.4% reported in original study). Again, these findings might be the result, in part, of older people participating in the study who are more likely to see touch activities as sexual (see Kratzer, this volume). These changes might also be the result of a shift in cultural values about sex, the inclusion of more ethnic/racial minorities as well as more sexual minorities in the current study, or participation from more liberal participants. To explore the causes of these differences, more research is in order.

Limitations: Considering the Sample and Their Motivations

Just as with Sanders and Reinisch's (1999) original study, we offer some cautionary notes for those who want to use this data. First, we note that although this study is more diverse in terms of sexual identities than the past study, it also has a larger percentage of gay, lesbian, bisexual, and transgender (GLBT) participants than can be found in the general population. Possible explanations for the substantial differences in responses to items regarding manual and oral stimulation of the breasts and genitals can probably be explained by the diverse sexual identities in the current sample. Past research also shows GLBT people are more likely to see activities that deviate from penile-vaginal intercourse as sex in comparison to heterosexual people (e.g., Hill et al., 2010; Horowitz & Spicer, 2013).

Although the current study stands as a much-needed update of what people might mean when they say they "had sex," it also has other limitations. First, similar to how the original study (Sanders & Reinisch, 1999) employed a highly educated sample, participants in this study were highly educated as well. Even though the demographics here represent a more-diverse level of education among participants, over 70% have had some college. Future research should strive to build a participant pool more reflective of diverse education levels.

Another possible limitation of this study is reflected in critiques of the original study about participant motivations that were made by Peterson and Muehlenhard (2007). To that end, these motivational factors should be considered in future research. Additionally, it might be helpful for communication scholars to consider motivations in terms of other contexts as

well. For instance, the current study asks people to reflect on their own sexual behaviors. It would be interesting to explore whether those same behaviors are seen as having sex when it is another person—such as a romantic or sexual partner or a child—that is engaging them.

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