



Original article

Timing of First Alcohol Use and First Sex in Male and Female Adolescents

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A B S T R A C T

Purpose: We examined associations between timing of first alcohol use and first sexual intercourse in adolescent males and potential differences in observed associations between males and females.

Methods: Data were drawn from 4,079 male and 4,059 female participants of the National Longitudinal Study of Youth 1997, aged 12–16 years at the first assessment. Cox proportional hazards regression models were estimated predicting age at first sexual intercourse from age at first alcohol use, without and with adjustment for correlated sociodemographic and individual- and family-level risk factors. Analyses were conducted separately for males and females, with interactions between alcohol use and respondent sex (female vs. male) modeled in subsidiary analyses.

Results: Onset of first drink was strongly predictive of earlier sexual intercourse for both males and females, with effects of drinking most pronounced for females during early adolescence.

Conclusions: Results highlight age at first alcohol use as an important predictor of sexual onset in male as well as female adolescents and suggest that effective prevention efforts focusing on delay of sexual intercourse might also focus on delay on alcohol use.

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IMPLICATIONS AND
CONTRIBUTION

Identifying risk factors for early-onset sexual intercourse is critical to inform efforts to prevent teen pregnancy. In this study, age at first alcohol use predicted earlier first sex in both males and females. Additional research is needed to replicate and extend findings, particularly for males for whom current studies are limited.

Early childbearing remains a major public health concern in the United States, with consequences for teen parents and their children well documented [1]. Identification of risk factors associated with early sexual intercourse (henceforth referred to as sex) is an important step toward creating more effective prevention by targeting teens most at risk of pregnancy. Adolescents who initiate sex during the early teen years are less likely to use contraception at first sex compared with those who delay sex [2–4], and they are more inconsistent in use of

contraception thereafter [5]. Consequently, very young teens are at high risk of early and often unplanned childbearing [6].

Numerous studies document associations between alcohol use and risky sexual behaviors predictive of teenage pregnancy, notably early sex [7]. Findings together suggest early drinkers are at elevated risk of sex by age 14 or 15 years, compared with those who delay drinking until later adolescence or adulthood. Unfortunately, much of this research analyzes data from females only or data from both females and males, ignoring potential differences between the sexes. Although many teen pregnancies involve adolescent males [8,9], there are few studies linking alcohol or other substance use with risk of early sex in samples or subsamples comprised exclusively of males (c.f., [10–12]).

The present study extends prior research on the relationship between alcohol use and early sex during adolescence.

Conflicts of Interest: The authors have no conflicts of interest to disclose.

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Employing a survival-analytic framework, we examined whether age at first alcohol use is predictive of age at first sex in males, separate from females. In survival analysis, time to event is of primary interest [13], beyond whether the event has occurred. Thus, survival analysis offers many advantages in research predicting age of onset (e.g., of drinking or sex), especially where timing of both predictor and outcome variables are available, and thus, temporal precedence can be established [14].

Studies analyzing age of onset, as opposed to age cutoffs, are rare in research on alcohol use and early sex. To our knowledge, there is one published survival analysis, conducted by Duetsch et al. [15]. Duetsch et al. examined retrospectively reported ages at first alcohol use and first voluntary sex in an Australian sample of adult male and female twins. Cox proportional hazards regression was used to estimate a multilevel frailty model, but with data from males and females combined. Although a significant bivariate relationship between timing of first alcohol use and first sex was found, onset of drinking did not predict onset of sex in analyses controlling for conduct disorder.

As reviewed, research on the relationship between timing of first alcohol use and first sex in males is relatively limited. Drawing data from a nationally representative longitudinal sample of adolescents, we examined associations specific to males. We also examined potential differences between males and females in observed associations. Based on prior studies using age cutoffs to define early-onset sex, we hypothesized that onset of drinking would predict earlier sex in males, without and with adjustment for correlated risk factors, such as problem behavior. Given limited research, we considered as exploratory tests of differences between males and females.

Method

Participants

Data were drawn from 4,079 male and 4,059 female youth participating in rounds 1 through 14 of the National Longitudinal Study of Youth 1997 Cohort (NLSY97) [16]. NLSY97 is a large nationally representative sample of respondents born between 1980 and 1984. Data collection started in 1997 when respondents were aged 12–16 years and has continued annually. Because questions regarding sex were administered to respondents aged 14 years or older, eligible respondents were those aged 14 years or older as of last completed interview in any of rounds 1 through 14 ($n = 8,963$). The sample was further limited to respondents with data on alcohol use and sexual intercourse, including ages of onset ($n = 8,458$). Three hundred twenty respondents reporting first sex before age 12 years were subsequently excluded as sex at ages 11 years and younger is more likely to result from abuse or coercion than sex at later ages [17,18]. These exclusions together resulted in a final sample of 8,138 respondents (4,079 male and 4,059 female), representing 90% of the NLSY97 sample and 91% of age-eligible respondents. Respondent age at last completed assessment, through round 14, ranged from 25 to 31 years. Additional sample characteristics are provided in Table 1, separately for males and females. Institutional review board approval was not needed for this study because analyses were limited to publicly available deidentified secondary data.

Table 1

Sample characteristics, by respondent sex

	Male ($n = 4,079$)	Female ($n = 4,059$)
Onset of alcohol use, n (%)	3,849 (94%) ^a	3,787 (93%)
Age at first drink, M (SD)	14.60 (3.49)	14.91 (3.24) ^b
Onset of sex, n (%)	3,856 (95%)	3,803 (94%)
Age at first sex, M (SD)	16.22 (2.78)	16.51 (2.53) ^b
Control variables		
Maternal educational attainment, n (%)		
<12 years	847 (21%)	891 (22%)
12 years ^c	1,373 (34%)	1,351 (33%)
>12 years	1,552 (38%)	1,515 (37%)
Missing data	307 (7%)	302 (7%)
Maternal age at first childbirth, n (%)		
<20 years	952 (23%)	1,021 (25%)
20–24 years	1,513 (37%)	1,502 (37%)
25–34 years ^c	1,184 (29%)	1,151 (28%)
≥35 years	67 (2%)	69 (2%)
Missing data	363 (9%)	316 (8%)
Offspring race/ethnicity, n (%)		
Non-Hispanic black	920 (23%)	1,051 (26%)
Hispanic	850 (21%)	812 (20%)
Non-Hispanic white ^c	2,091 (51%)	1,990 (49%)
Non-Hispanic mixed race	30 (<1%)	32 (<1%)
Native American	15 (<1%)	27 (<1%)
Asian/Pacific Islander	85 (2%)	69 (2%)
Missing data	88 (2%)	78 (2%)
High delinquency, n (%)	664 (16%)	962 (24%) ^d
Maternal monitoring, n (%)		
Low monitoring	706 (17%) ^a	586 (14%)
Missing data	1,726 (42%)	1,732 (43%)
Religious attendance, n (%)		
Frequent attendance	774 (19%)	845 (21%) ^d
Missing data	1,641 (40%)	1,683 (41%)
Family disruption, n (%)	1,966 (48%)	2,120 (52%) ^d

SD = standard deviation.

^a Significant at $p < .05$ where male > female.

^b Log-rank tests significant at $p < .05$ where male < female.

^c Reference group.

^d Significant at $p < .05$ where male < female.

Measures

Measures derive from youth- and parent-report assessments, the latter administered during round 1 only. From 1997 onward, interviews administered to youth included a Self-Administered Questionnaire (SAQ) for questions containing “sensitive” subject matter and personal information, such as alcohol use and sexual history.

Onset of alcohol use. As a part of the SAQ, prior alcohol use and age at first use were assessed using measures that varied slightly in earlier versus later rounds. During years 1997–2000 and 2004–2005, respondents who answered affirmatively when asked if they had ever had an alcoholic beverage (defined as a bottle of beer, glass of wine, mixed drink, or shot of liquor) were coded positive for alcohol use. During 1997–2000 and 2004–2005, individuals reporting alcohol use were directly asked their age at first drink in years of age. Those who refused or were unable to report an age were asked their age at first drink in subsequent surveys until an age was reported, also assessed in years of age. Starting in 1998, youths were asked about recent alcohol use, specifically whether they had a drink since last interview. In years where age of onset was not directly assessed (2001–2003; 2006–2010), age at first drink was determined from annual assessment of use since last interview. Among

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