

# *Perspectives of the Allied Health Care Professional*

## **The Definition of Abstinence**

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**Abstract.** A teen's definition of sexual activity most often does not include oral or anal sex. Abstinence only programs vary widely as to how they define sexual behavior and may be contributing to misinformation about STD transmission. Unknown is the extent to which declining teen pregnancy rates are due to non-coital activities replacing vaginal intercourse.

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**Key Words.** Oral sex—Anal sex—Abstinence—Teen sexuality—Abstinence-only programs

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### **Introduction**

Sally is 15 and complains of a persistent sore throat. Her mom is worried because she has missed several days of school. She has no symptoms of an upper respiratory infection, but her throat is mildly infected. A thorough history includes questions about sexual behavior. Has she had sex? Oh no, is the answer. She is a virgin. Has she ever performed oral sex? Well, yes she has, but that's not sex, she says. "You can't get pregnant or get infections."

A throat culture for gonorrhea and chlamydia is positive for gonorrhea. An infection that could easily be missed if a health professional's index of suspicion does not include oral sexual activity in teens who are "virgins."

Sally is not alone in her belief that oral sex is safe and is not "sexual activity", though precise data about non-coital sexual activity among teens is difficult to obtain. Conservative political influences since the early 90's have managed to obstruct the federal funding of

comprehensive adolescent sexuality research.<sup>1</sup> Numerous anecdotal reports based on interviews with teens, of non-coital behaviors particularly oral sex, have been in the print media over the past decade. Ages of interviewees range from middle school through college.<sup>2</sup> Limited published research, mostly from the 80s, indicates a surprising incidence of oral sex among teens and the belief that "outercourse" is safe. More recently a region in Georgia was completely taken by surprise when a community screening project for a strain of meningitis bacteria carried in the throat found several cases of pharyngeal gonorrhea in middle school students.<sup>2</sup>

Health professionals also are finding that their teen patients increasingly admit to oral sex if the question about sexual activity is specific. Asking a teen if she is sexually active may get a negative response in a teen who is having oral sex because she doesn't believe that oral sex is sexual activity. Rephrasing the question to "Do you ever have oral, vaginal or anal sex?" is likely to result in more precise information.

Abstinence-only programs, which have been supported and funded under the current administration, may be contributing to the misinformation about what constitutes sexual behavior and what sexual activity is safe. Title V of the Maternal and Child Health Services Block Grant under which the abstinence-only education is funded does not delineate what sexual activity is. It requires that programs teach "abstinence from sexual activity outside marriage as the expected standard for all school-age children."<sup>3</sup> As a result abstinence-only programs vary widely in how or whether they define sex and what behaviors constitute abstinence. Some do not address it at all, leaving it up to the teens to decide what abstinent behaviors are, the underlying belief being that teaching about oral sex, anal sex, or masturbation promotes the behavior. Other abstinence-only programs teach specifically that abstinence means avoiding vaginal, oral, or anal sex.<sup>2</sup>

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The lack of a definition of what constitutes sex in abstinence-only education also impacts the accuracy of the program evaluations. Programs that do not define sexual behaviors or what constitutes abstinence are not likely to elicit non-coital behaviors in their evaluations. Those programs may be inadvertently exposing teens to greater risk of infection by promoting ignorance of the risk of STD transmission through non-coital sexual activity.

Gonorrhea, Chlamydia, HIV, Syphilis HPV, and HSV may all be transmitted through sexual activity other than vaginal.<sup>4</sup> Infections such as these may go undetected if teens do not realize the risk or if the health professional's index of suspicion is low.

Also unknown is the extent to which declining rates of teen sexual activity, pregnancy and birth rates are due to non-coital activities replacing vaginal intercourse. In the absence of comprehensive studies, it is critical that we are careful to ask every teen about non-coital activity and educate them about the risk of acquiring STDs that way.

Effective program planning and funding of sexuality education, depends on accurate data concerning teen sexual behaviors and a universally accepted definition of abstinence. Health professionals have a responsibility to lend their expertise and considerable influence to informing this discussion both in the medical/health community and for general public.

## References

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