



Original Article

Experiences of Vaginal, Oral, and Anal Sex From Adolescence to Early Adulthood in Populations With Physical Disabilities

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A B S T R A C T

Purpose: Few studies have sought to understand the typical sexual development of populations with physical disabilities in the United States, and those that do are often based on convenience samples or cross-sectional data. The purpose of this paper is to examine relationships between physical disability and experiences of vaginal, oral, and anal sex in a nationally representative sample of individuals in the United States who have been followed from adolescence through early adulthood.

Methods: We used data from 13,456 respondents who completed Waves I (1994–1995) and IV (2008–2009) of the National Longitudinal Study of Adolescent to Adult Health (Add Health). Physical disabilities were identified and grouped by severity using information regarding limb difficulties, blindness, and deafness during adolescence. Analyses included bivariate statistics and adjusted logistic regression models relating physical disability and experiences of each type of sex.

Results: Respondents with the most severe physical disabilities had significantly lower odds of experiencing vaginal sex, oral sex, and having any sexual experience compared with the odds of those without disabilities. After stratifying by biological sex, we found that males with the most severe physical disabilities had significantly lower odds of experiencing any type of sex compared with the odds of males without disabilities, whereas females with moderate and severe physical disabilities had significantly lower odds of experiencing vaginal sex compared with the odds of females without disabilities.

Conclusions: Our findings build on past research often conducted with convenience samples or cross-sectional data, indicating variation in sexual experiences among populations with disabilities.

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**IMPLICATIONS AND
 CONTRIBUTION**

Adolescents with physical disabilities are significantly less likely to experience sex than those without disabilities. These results can guide future research, practice, and policies that support healthy sexual development and the provision of focused sexual health education to populations with physical disabilities.

The emergence of sexual expression and romantic relationships during adolescence and early adulthood is nearly universal; however, little is known about these patterns among adolescents with physical disabilities. Almost 90% of children with

disabilities are enrolled in public schools where they are provided with education services in the least restrictive environments based on their individualized education or health plans; however, this rarely includes sexuality education that is appropriate for their particular needs [1]. Current policies that focus on abstinence education until marriage ignore the fact that most people engage in premarital sex. Thus it is important to understand sexual behavior patterns to inform sexuality education programming and policy [2–4]. This is particularly important for populations with physical disabilities, who have been shown to be at greater risk for negative health outcomes associated with particular sexual

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development pathways and therefore are in need of more targeted and developmentally appropriate sexuality education [5–7]. Although past studies have addressed these negative or unintended outcomes of sexual behavior and societal attitudes toward sexuality in populations with disabilities [8], there is still a dearth of research and data dedicated to understanding the typical sexual development of this group. Additionally, the majority of past research uses cross-sectional data or convenience samples, which severely limits the generalizability of findings to the broader population with physical disabilities.

Of the few studies that do focus on sexual experiences among adolescent populations with various types of disabilities (e.g., physical, sensory, emotional), findings suggest differences by both disability type and biological sex [9–11]. For instance, in their cross-sectional study of 14–17 year olds in Germany, Wienholz and colleagues [11] found that a smaller proportion of teens with physical disabilities and vision or hearing impairments reported experiencing vaginal intercourse than did those without disabilities; however, among sexually experienced teens with disabilities, males and those with hearing impairments were more likely to have reported ever having vaginal intercourse. In contrast, using data from the National Longitudinal Study of Youth, Shandra and colleagues [10] found that sexually experienced males with sensory conditions were less likely to report earlier sexual debut compared with males without any type of disability. However those with learning or emotional conditions were more likely to report early sex. In contrast to both studies above, Cheng and Udry [6] found that both males and females with physical disabilities were as sexually experienced during adolescence as were their peers without disabilities, but that adolescents with the mildest disabilities had the highest odds of experiencing vaginal sex.

Unfortunately, existing literature is limited because it often focuses only on vaginal sex or on experiences during the adolescent period. Because of these limitations, it is difficult to consider how the sexual experiences of populations with physical disabilities may vary, both by type of sexual behavior and over time. Moreover, understanding how different types of sexual experiences may be similar or different among populations with physical disabilities compared with those without physical disabilities can provide us with important information regarding the specific needs of these groups and the ways in which we can scaffold sexuality education to better meet these needs [12,13].

The purpose of this paper is to examine the relationship between physical disability and experiences of vaginal, oral, and anal sex among individuals in the United States who have been followed from adolescence to early adulthood using data from the National Longitudinal Study of Adolescent to Adult Health (Add Health). This study contributes to the existing literature by considering how sexual experiences vary for individuals with and without physical disabilities, both in type and over time. Because past research has presented conflicting results, our hypotheses draw on adolescent studies and other research, which suggest that societal attitudes toward this group can have negative effects on their sexual development and intimate relationships through adulthood [8]. We therefore hypothesize that individuals with disabilities will be less likely to have engaged in each type of sex compared with their peers without disabilities by early adulthood. Furthermore, we believe these relationships will vary by disability severity, such that increasing severity of the disability will be associated with decreasing likelihood of experiencing

each type of sex. Finally, we hypothesize that these relationships will also vary among males and females.

Methods

Study sample

This paper uses data from Add Health, a nationally representative, longitudinal study of more than 20,000 US adolescents in seventh–12th grade (ages 12–18) during the 1994–1995 school year [14]. To date, four waves of data have been collected, consisting of one in-school and one parent interview at study entry and four in-home interviews spanning from adolescence into early adulthood. The current study uses data from the Wave I and Wave IV interviews, which capture the important life course transitions from adolescence to early adulthood. Specifically, Wave I consists of 20,745 respondents aged 12–18 in 1994–1995 (adolescence), and Wave IV consists of 15,701 of the original respondents ages 24–34 in 2008–2009 (early adulthood; response rate = 80.3%) [15]. The analytic sample for this paper includes 13,456 respondents who had complete data on all variables of interest (Figure 1). Analyses of missing data patterns indicated no differences in the amount or type of missing data by disability severity. All study procedures were approved by the Institutional Review Board for the Protection of Human Subjects at the University of North Carolina at Chapel Hill, and present analyses were deemed exempt.

Measures.

Physical disabilities. We chose to focus on disabilities identified in Wave I because the sexual experiences described in this paper are part of a normative developmental task that occurs during adolescence [2]. Thus, it was important for our predictor to be present before or during this time to ensure a clear

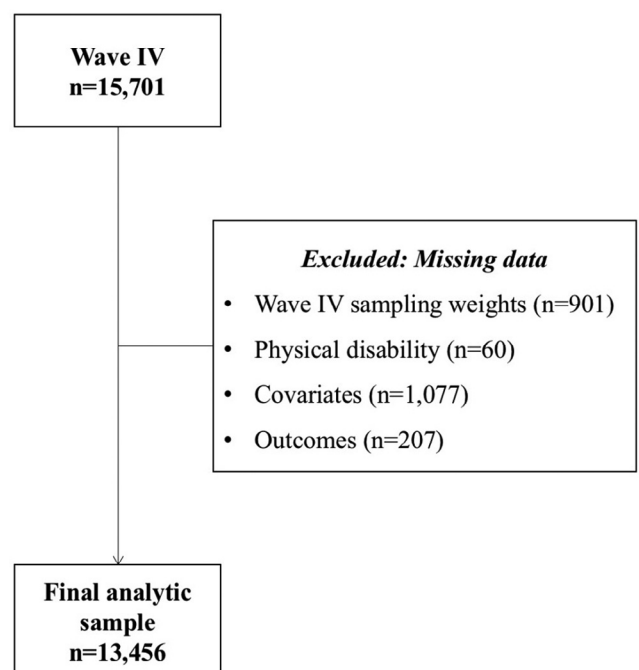


Figure 1. Missing data in the analytic sample.

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