

# Sexual Development in Adolescents

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This chapter examines adolescent sexuality development framed by three key aspects of sexual behavior: abstinence; masturbation; and partnered sexual activities. This framing resonates with recent trends in theory and research that emphasize the roles of sexuality in healthy adolescent development (Fortenberry, 2003; Halpern, 2010; Welsh & Kawaguchi, 2000). In contrast, many perspectives on adolescent sexuality development are limited by focus on problematized aspects of adolescent sexual development: the timing and context of first heterosexual penile-vaginal intercourse; association of sexual activity with substance use and other health-harming behaviors; contraceptive use; sexually transmitted infections (STI), including those due to human immunodeficiency viruses (HIV); and pregnancy. Less predominant but still frequently addressed themes in adolescent sexuality research include sexual coercion, non-coital sexual behaviors, exposure to and use of sexually explicit media, and same-sex sexual experiences (Brown & Brown, 2006; Kirby, 2001; Kotchick, Shaffer, Forehand, & Miller, 2001; Wood, Maforah, & Jewkes, 1998). Data related to these problematized aspects of sexuality development are often used to justify policy, public health, and clinical interventions intended (typically) to restrain adolescent sexual behaviors. The focus on problematic outcomes and emphasis on social, familial, and individual restraint of sexual expression obscures the more nuanced influences of sexuality within adolescent development, and incompletely traces the trajectories of healthy adolescent sexuality and subsequent adult sexual health.

Thus, the chapter approaches adolescents' sexual development by acknowledging positive aspects of adolescents' sexuality and sexual

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