Sexual Culture on a College Campus: How Sex Education and Communication Affects Safe Sex Practices

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Abstract
The promiscuous nature and risky behaviors on a college campus can impact health issues for young adults. For the most part, research on this subject has pointed towards the tendency that college students generally possess an adequate sex education, yet they continue to have sex without the use of condoms. This study examines how sex education and fluent communication around the topic relates to the likelihood someone is to broach the subject and talk about safe sex to a potential sexual partner. The study utilized content analysis of 124 participants that completed an online survey about their sex education and safe sexual behaviors on campus. Four main themes about sexual culture on a college campus emerged including male pressure, female unpreparedness, lack of communication, and regret. The data indicated that a college campus “hook-up” culture involves alcohol, promiscuity, and a general feeling of dissatisfaction surrounding hook-ups.

Keywords: college students; sex education; communication; hook-ups
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There is a large problem that arises when dealing with the sexual culture on college campuses. College students engage in promiscuous sexual activity with multiple partners (Paul, McManus, & Hayes, 2000). These sexual behaviors often involve the act of “hooking up.” Hook-ups are a large part of the sexual culture in which college students are surrounded (Paul et al., 2000).

“Hook-ups” can be associated with casual sex, in which partners engage in sexual intercourse, but are left with no commitment or obligations to each other (Kooymann, Pierce, & Zavadil, 2011). College campuses are abounding with this type of behavior because students are trying to discover their sexual identity and intimate relationships. These young adults are going through a developmental period of deliberate change with exploration practice, including increased risk behaviors. Some of these risk behaviors include problematic sexual behaviors (Lindgren, Blayney, Schlacht, George, & Pantalone, 2009). Alcohol is also a contributing factor found on college campuses. Alcohol consumption often contributes to hook-ups because of its ability to remove inhibitions and fears in social situations (Paul et al., 2000).

Although sexual promiscuity is an accepted and widely practiced behavior among college students, it raises serious questions about the health of those involved (Paul et al., 2000). Unsafe sex, which is sex without the use of a condom and/or other forms of birth control, can run a higher risk of serious health issues such as sexually transmitted diseases, including contracting HIV/AIDS (Kanekar & Sharma, 2010). According to Kanekar and Sharma (2010), safe sex behaviors are considered as monogamy, abstinence, and correct condom usage. Safe sex behaviors are an important preventative measure for avoiding unplanned pregnancies and
sexually transmitted diseases (Kanekar and Sharma, 2010). Education and communication regarding sexual risks and prevention will increase the use and practice of safe sex. This information is essential to the present and future health of college-aged adults. By examining pre and post hook-up conversations and the type of sex education received, we can discover how to ensure that college students are making healthy sexual decisions.

**Literature Review**

**Sex Education**

One way to aid in safe sex practices and to avoid negative health issues is through sex education. Most people receive sex education through communication with parents, knowledge gained from school, and interactions with peers.

**Sex education in school.** There are many cases of college students who do not make safe decisions when it comes to sex, resulting in life altering situations such as unwanted pregnancy, STDs, or other viruses such as HPV, which can lead to cervical cancer. In one study by Carlson, Godin, Otis, and Lambert (2004), researchers focused on the relationship between overall sexual knowledge and how much sexual education that person received in school. They found a strong relationship between the quality of sex education and contraception use (Carlson et al., 2004). This information regarding the importance of sex education is crucial and important to continue researching in order to help decrease sexual health risks to future generations. By determining the most effective way to educate young adults about safe sexual practices, the number of preventable mishaps will hopefully decrease drastically.

It is extremely important to study the effects that sex education has on children and adolescents in society today, especially when it comes to the health risks associated with unsafe sexual intercourse. A significant threat to college students, primarily women, is Human
Papillomavirus Virus (HPV) and cervical cancer. In 2004, Ingledue, Cottrell, and Bernard conducted a study of 428 college women and found that 62 percent of the women surveyed were in a sexual relationship, and 25 percent stated they had two or more partners in the past year. A negative relationship existed between HPV/cervical cancer knowledge and perceived seriousness of HPV/cervical cancer (Ingledue et al., 2004). This meant that those who were knowledgeable about HPV/cervical cancer did not find the disease to be more or less serious than those without knowledge. The study also found that college women showed low levels of knowledge regarding HPV/cervical cancer while displaying risky sexual behaviors (Ingledue et al., 2004).

In addition to these health risks, no use of contraception can also lead to unplanned pregnancies (Weinstein, Walsh, & Ward, 2008).

This topic is crucial due to the number of teenage pregnancies and unsafe sex practices occurring. Franklin and Dotger (2011) discuss the different types of sex education that are offered and which ones seem to be most effective. They mention how the only government-funded sex education is an abstinence-only program that does not allow the discussion of contraception use and only promotes abstaining from sex until marriage. The problem with this program is that although it may delay adolescents from having sex, once they actually engage in the act, they are less likely to use protection simply because they have not learned appropriate safe sex practices (Franklin and Dotger, 2011). It is important to find out what method of sex education is going to influence the use of contraception and just how much education is needed to create understanding in children and young adults.

Franklin and Dotger (2011) sought to find out if there was a difference in sexual knowledge between freshmen and seniors in college students. Through an anonymous survey, researchers were able to find that seniors had much more knowledge about sex when it came to
the topics of birth control, sexual relations, and reproduction (Franklin & Dotger, 2011). The seniors and freshmen were similar, though, in their knowledge of topics of venereal disease and female biology. These findings indicate that majority of students gain a large portion of their sexual knowledge during their undergraduate years. Further research on this topic is essential because there are a number of individuals who do not attend college and therefore are not getting a similar sex education that others in college may be receiving. By asking at what age and where a participant received sex education and comparing it to their use or non-use of contraception, researchers can determine which time period of one’s life is most crucial to teach young people safe sex practices.

Harris, Adena, and Susan (2008) discuss the importance of sexual education and how it leads to safer sex practices. Researchers discuss the change in sex education throughout the last few decades and how unplanned pregnancies and STDs have morphed into a public health matter instead of an issue that is kept quiet (Harris, Adena, and Susan, 2008). Sexual health issues entering the public arena have become a common occurrence in society today. Topics such as teen pregnancy have flooded our media and more people have become desensitized to it. There are many consequences from things such as teen/unwanted pregnancies that the media do not express. The only way to stop this issue is to educate society on the topic in its entirety. Harris et al.’s study found that people felt they received more sex education from peers and parents than they did in school. They also found that women received more sex education overall than did men (Harris et al., 2008). Researchers suggest that only one form of sex education will not get the message across, but combination of different people or places will have a more beneficial influence.
Based on the aforementioned studies, it can be determined that the amount of sex education in schools is not only insufficient, but it is not happening early enough everywhere. Another study by Somers and Surman (2005) determined that communication about sex prior to an individual’s first sexual encounter led to higher rates of contraception use. The study concluded that later learning and less learning from school about various sexual topics were statistically predictive of more frequent sexual activity and less frequent use of protection (Somers & Surman 2005).

Some solutions to this problem can include getting government regulation on this issue, as well as more media attention on the importance of having parents or mentors openly discuss this topic with children. This subject needs to be addressed at the early stages of puberty and not put off until adults think it is acceptable. Because intercourse is a natural, biological action, parents and schools need to realize that this topic should be openly discussed throughout the years of maturation for preventative measures.

**Sex education from parents.** Communicating with parents about sexual behaviors contributes to adolescents’ perceptions of sex. This communication can delay a sexual debut, and in addition, increase the likelihood of safe and smart sex practices. However, this communication is ignited by the thought that a child may be participating in sexual activities and therefore, the knowledge is only gained after the initiation of sexual acts (Clawson and Reese-Weber, 2003). Aspy, Vesely, Oman, Rodine, Marshall, and McLeroy (2007) found the relationship a child has with his or her parents regarding sex is very important.

Avoidance is common in this instance for two reasons, the first being autonomy. Adolescents are at a point in their lives where they are learning how to make their own decisions and think for themselves. Avoiding the topic of sex and not including their parents in this aspect
of their lives supplies them with a feeling of self-government. The second reason is to protect the other person involved in the conversation. Adolescents do not want to disagree with their parents on sexual behavior values in fear of hurting their parents’ feelings. Lastly, the style of communication aids in the lack of accurate communication. Individuals are much more keen on disclosing private information when they can trust their conversation partner and they feel as if that person will be responsive and open to the information (Afifi, 2008). If a parent does not appear open to their child’s views, avoidance can occur. Negative, overbearing attitudes would not be helpful either; there needs to be a lower anxiety level between both parties for successful conversations.

When parents were open to their teens’ opinions about ex, remained calm during the conversation and kept it informal, the children reported less avoidance and anxiety during the conversation (Afifi, 2008). This communication can have a major effect on young people. Attentive and friendly communication was found to be associated with less teen sex and expressive, contentious, dominant, and dramatic conversation characteristics were found to be associated with more teen sex (Afifi, 2008). Having a positive relationship with parents contributes to this discussion of sexual attitudes and behaviors.

The success of parent-adolescent discussions about sex can aid in the adolescent’s general sex education. Understanding how to communicate about a sensitive topic, such as sex, can improve the receptivity of the educational conversation. With less avoidance and more disclosure, parent and adolescent communication can add to the role that education plays into the choices of safe and smart sex practices.

Adolescents are greatly influenced by adult role models early in their lives, which in most cases are their parents. The child learns the behaviors conducted by the parents, which are then
added to the child’s own behaviors and attitudes (Clawson and Reese-Weber, 2003). The amount of parent-to-adolescent sexual communication is linked to more positive sexual behaviors. There are less negative outcomes and risk-taking behaviors when there is more communication with parents. In contrast, the study completed by Clawson and Reese-Weber (2003) concluded that with more parent-to-adolescent sexual communication there were more sexually risky behaviors. These behaviors included earlier ages of first intercourse, which leads to more sexual partners and greater need to be tested for HIV/AIDS.

In addition to parent-adolescent communication, the timing in which it happens plays a large role, as well. Mother-to-child discussions about condoms before first experiencing intercourse resulted in increased condom use (Miller & Levin, 1998). However, when this conversation happens after first intercourse there is no greater use of condoms (Miller & Levin, 1998). More frequent communication about sex topics with mothers reported greater use of birth control methods. This greater use is based on on-time discussion and on-time meaning before the first intercourse experience (Miller and Levin, 1998). These on-time conversations with both parents also resulted in an older age of first intercourse (Miller and Levin, 1998).

**Sex education from peers.** Another main source of adolescent sex education comes from peers. If a person is not receiving sex education in school on the topic nor talking with their parents about it, they are most likely turning to peers to gain knowledge. A study conducted by Epstein and Ward (2008) indicated that there was a large difference between the messages received from parents and the messages received from peers and the media. Males reported that most of their sex education came from peers and rarely came from their parents (Epstein & Ward, 2008). Rittenour and Booth-Butterfield (2006) surveyed 231 college students and asked them about their communication with peers on sexual topics. As opposed to studies
done on parent-child communication that show discomfort on both ends about discussing sex, this study found that many adolescents feel comfortable talking about this topic with their peers (Rittenour and Booth-Butterfield, 2006). This information is important because adolescents are gaining their knowledge from other adolescents on a topic, which has the ability to yield a positive or negative outcome (Caron, Godin, Otis, and Lambert, 2004).

It is important to research the level of peer-to-peer sex communication and the likelihood of using contraception during intercourse. If children and young adults only learn about sex from peers, there is a possibility that these peers are also uneducated on the topic and false information may be spread. If, however, sex education is occurring in school, at home with parents, and being discussed with peers, there could be a more positive outcome in later life sex practices, such as sexual activity on a college campus.

**Communicating About Sex**

Are students on a college campus engaging in discussions of safe sexual practices before and after a hook-up? What kind of communication transpires between partners regarding their hook-up and can this communication lead to safer practices? More research surrounding sexual culture on a college campus and the ways in which college students communicate about sex is called for in order to answer these questions. The type and quality of sex education one receives may impact the communication about safe sexual practices in college.

A study conducted in 2007 examined communication about sex education, and whether or not discussion of contraception, protection and STDs were related to condom use the first time of sexual intercourse (Ryan, Franzetta, Manlove, & Holcombe). Ryan et al. hypothesized that the more adolescents are educated about sexual health, the more likely they would be to discuss contraception or STDs with their first sexual partner. The researchers found those students who
received pregnancy and AIDS education in high school are more likely to know about condom use (Ryan et al., 2007). This study also found that the more open the lines of communication are between teenagers and their parents, the more likely they are to discuss safe sex with their partners before engaging in intercourse (Ryan et al., 2007).

Another study by Hodges, Klaaren, and Wheatley (2000) determined that the one behavior that will stop the spread of AIDS is discussion; talking about using condoms and the risks involved in intercourse could actually stop the spread AIDS. A separate study conducted in 2000 similarly found that parental influence is linked to adolescent communication about sexual behavior (DiIorio, Dudley, Lehr, & Soet, 2000). Open communication at home with parents about sex allows adolescents to be more comfortable talking about sex with their partners. This contributes to an environment of open communication which in turn helps one to feel more confident in their ability to not only discuss safe sex, but to practice it as well.

Cleary, Barhman, MacCormack and Herold (2002) examined communication about sex and termed it Health Protective Sexual Communication. The researchers sought to describe how women aged 19-23 at a university discussed sexual health prior to first intercourse with a recent sexual partner. They focused on what hinders or allows engaging in health protective sexual communication or Health Protective Sexual Communication. They found that the lack of education was related to the lack of sexual knowledge and Health Protective Sexual Communication (Cleary et al., 2002). Knowledgeable participants with higher levels of sex education experience were more confident during these discussions (Cleary et al., 2002). This study concluded that sexual health topics were perceived as off limits for discussion in a new intimate relationship (Cleary et al., 2002). Many hook-ups on college campuses would be
considered new since partners are likely to be engaging in intercourse with one another for the first time.

Can adequate sex education diminish this trend and encourage partners to utilize healthy sexual communication practices regardless of whether or not their intimate relations are new? The goal of the present study is to examine the kinds of communication exchanges that occur before and after hook up experiences. The study aims to discover if these conversations facilitate practicing safe sex during a hook-up. Therefore, we hypothesize that:

H: The more sexual education one receives the more likely they are to practice safe sex.

In addition, we are interested in whether or not the level of sex education relates to the characteristics of these conversations. This study was also designed to answer the following question:

RQ: What are the communicative characteristics to the pre and post hook-up conversations?

**Method**

The goal of the present study is to investigate the hook-ups of college students and examine the types of communication that occur before and after hook-up experiences. In addition, we are also interested in how the level of sex education relates to the characteristics of these conversations.

**Data Collection and Procedures**

After receiving approval from Chapman University’s Institutional Review Board (IRB), the survey link was posted on the researchers’ personal Facebook walls. The study was described as an anonymous survey about sexual culture on a college campus. Study participants needed to click the link in order to access the online survey. Other ways in which we were able
to recruit more participants was through a snowball sampling technique and informing multiple clubs on Chapman University’s campus about the survey.

**Measurement**

The instrument used was a brief online survey with a consent form attached. We inquired about the participant’s demographics, experience with sex education, and personal sex practices. The survey was completed anonymously. The type of questions asked included multiple-choice one-answer questions, five-point Likert scales, and free responses. Free response questions included topics such as their discussions about using protection and how the hook-up was initiated. Every participant had the option to skip any question to which they felt uncomfortable responding. The survey took approximately ten minutes to complete.

**Data Analysis**

The data collected in this survey was qualitative in nature. Once the survey was closed, responses were compiled into a spreadsheet for each answer to be analyzed. These responses were analyzed once by one researcher, and then re-evaluated by another to avoid missing crucial information and to ensure reliability. The research team categorized the data to determine the emerging trends and themes. After reviewing responses, commonalities between participants were discussed and recurring themes were established. In addition to the themes present within the data, descriptive data was also calculated. Statistics were formed based on the participants that answered specific questions, allowing us to gain a better understanding of the sample as a whole.

**Results**

**Participants**
In total, 124 participants completed this survey. The participants were college students, aged 18-25 with a mean age of 21. The participants’ class standings included 10 (14%) freshmen, 17 (14%) sophomores, 22 (18%) juniors, and 58 (47%) seniors. Eighteen (15%) of the participants chose not to reveal their class standings. The sexual orientation of participants included 104 (85%) heterosexuals, two homosexuals, and three bisexuals (making up 4%). Fifteen participants (12%) did not disclose their sexual orientation. Eighty-four percent of participants were female and 16% were male. Seventy-six percent of participants live off campus, of which 10% live at home with their parents, and 20% live in a dormitory. Fifty-nine percent are not currently in a relationship. Of the 104 participants that responded to the question, 55% indicated that they had engaged in a hook-up at some point in their life.

**Descriptive Statistics**

A number of important descriptive statistics were discovered after analyzing participant responses that give a better understanding of the study sample. For example, the average age that the participants first started having sex was 15 for males and 17 for females. Of those who have been sexually active, 75% of participants indicated that they used a condom the first time that they had intercourse.

Fifty-seven participants had engaged in a hook-up. Forty-eight of the participants have never engaged in a hook-up. Nineteen participants chose not to disclose whether or not they had engaged in a hook-up.

Forty-two percent of females reported having romantic feelings toward their hook-up partner, while 59% of female respondents reported having no romantic feelings for their hook-up partner. Seven males responded that they did not have romantic feelings for their hook-up partner, one male reported having romantic feelings, and the remaining eight refrained from
answering the question. In the hook-up culture, it is widely acceptable for no romance to be involved in a hook up, even for females, so these results were not surprising.

**Descriptive Results Regarding Hook-Ups**

**Inhibited initiatives.** An important aspect of evaluating college hook-ups is finding out how these interactions took place. When participants were asked to describe how their hook-ups were initiated, results came back with a range of answers. These answers spanned from having been friends with the person for a while to a simple text message conversation suggesting the idea of hooking up. However, quantitative data demonstrated that 68% of participants indicated that alcohol had been involved in the interaction. The majority of the hook-ups were initiated at a time in which their decision-making was altered by alcohol. Multiple respondents labeled their interactions as “drunken hook-ups,” using alcohol as a definitive factor of the hook-up, and others claimed it to be “drunken stupidity.”

**Credible sex education.** Qualitative data analyses indicated the vast majority of participants who have never engaged in a hook-up received some of their sex education from school and/or parents. Of the participants who have refrained from hooking up, 8.7% received their sex education from parents, 19% of these participants received sex education from school, and 63% of these participants received sex education from both their parents and school. Not only did they receive their sex education in school and in the home, but they also found the information relayed to them from these sources as beneficial. Fifty-two percent of these participants rated their parent and/or school to provide them with beneficial sex education. These results suggest a link between learning about sex from school and parents and making healthy sexual choices in college. A participant who had not engaged in a hook-up claimed that, “My friends and I went to a sex education course at the local hospital. Our moms thought it
would be a good idea due to the fact that we don't receive sex education at school.” The knowledge provided through school and in the home may empower individuals to make healthy sexual choices and to refrain from actively participating in the hook-up culture of a college campus.

**Peer and personal experience.** Sex education plays a key role in how people understand sex and the attitudes they have towards it. We asked from what source our participants received their sex education and which source provided them with the most beneficial information. Out of all participants, 65% answered that peers and personal experience were beneficial. The Internet was a widely used source for “researching myself” or “personal research” according to a number of respondents. To augment our research, we looked into what source of sex education was most beneficial to those participating in hook-ups. Fifty-seven respondents admitted to engaging in a hook-up. Seventy-five percent of those participants stated that peers and personal experience provided them with the most beneficial information. This concludes that the college students who are involving themselves in non-committal sexual acts found that their beneficial education came from informal sources of education. Perhaps receiving less credible information from peers leads to unhealthy and risky sexual behaviors during college years.

**Promiscuity.** Promiscuity at a party or party-like environment was apparent when analyzing descriptive data. Over 50% of the responses indicated that the women were under the influence of alcohol and/or drugs at the time of the hook-up. Over 70% of the responses indicated that they were in a bar or in a party atmosphere. Several responses mentioned that heavy flirting, dancing, or kissing initiated the interaction. “Drinking and dancing leads to kissing and then it leads to my bed where it all takes place,” a male respondent wrote. A few
female participants disclosed that they were the ones to initiate the interaction, by being the first to text, call, or kiss him, and even so far as to suggest leaving the party or bar to go back to his place. Four out of 41 (9%) participant reports indicated that the interaction started with the female initiating the hook-up. One respondent is quoted saying, “I asked him if we wanted to go back to his place so we left and got a cab back.” As previously discussed, alcohol has proved to be a catalyst for increasing the initiations and likelihood of a hook-up. In addition, it appears that the males initiated the majority of hook-ups.

**Themes**

After analyzing the data, four main themes describing the hook-up experience emerged. These four themes are laid out in the table below with a description and short examples from participant responses.

<table>
<thead>
<tr>
<th>Male Pressure</th>
<th>Females experienced pressure from their male partners not to use a condom despite desire for use of protection.</th>
<th>“It is ok if I don’t wear one because I will pull out.” “It feels better.”</th>
</tr>
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<tbody>
<tr>
<td>Female Unpreparedness</td>
<td>Many females did not have protection with them and were relying on the male for a condom.</td>
<td>“I asked if he had one because I didn’t.”</td>
</tr>
<tr>
<td>Lack of Communication</td>
<td>There were little to no detailed discussions regarding condom usage or STDs before a hook-up. There was little conversation between partners after a hook-up took place.</td>
<td>“There was no conversation.” “We should go back to the party now.” “He drove me home and then we didn’t talk for a long time.”</td>
</tr>
<tr>
<td>Regret</td>
<td>Female participants who engaged in a hook-up expressed feelings of regret regarding the interaction. No male respondents indicated any regret.</td>
<td>“Don’t do it.” “Don’t let yourself get used.” “I woke up in the morning and knew that he meant nothing and just felt gross.”</td>
</tr>
</tbody>
</table>
Male pressure. Through examination of participant responses a theme of male pressure regarding condom use emerged. Some of the male respondents made comments before intercourse occurred about not wanting to use a condom, despite female desire to use protection. The reasoning males provided for not using a condom included intercourse feels better without using protection and “pulling out” was a sufficient means of preventing pregnancy. A female participant described the dialogue surrounding their discussion about condoms and reported, “He told me it was fine if he didn’t [wear one] because he was going to pull out.” After the female heard the aforementioned comments she vocalizes her desire for condom use and was successful in convincing the male partner to wear a condom. However, many participants did not have any conversation regarding condom usage. Out of the participants who answered the question about condom conversations, 33% indicated that there was no discussion.

Females placed in these situations utilized wearing protection as an ultimatum. For example, “It isn’t going to happen without protection” and “If you don’t wear one I am leaving.” By using this mechanism, the males conceded and wore protection; it seems ultimatum situations prove to yield protection results.

Female unpreparedness. Hook-ups are typically random acts of sexual behaviors; they are not specifically planned. This study illustrates that there is a theme of female unpreparedness. The female participants did not have condoms. When describing the conversation about protection before intercourse, a female participant said, “I asked if he had one because I didn’t and he said yes.” The female asking the male if he had a condom reoccurred many times. Twenty-seven percent of females participating in a hook-up asked if the male had a condom. The females in this study appeared to make the assumption that males should be the ones providing the protection. In addition, females decided that sex would not occur during a
hook-up if there was no condom provided. A male described the conversation he had with a female during a hook-up, it reads: “Female: Hey do you have a condom? Male: No. Female: I guess there are other things we can do.” Females need to be prepared and carry condoms. Females are placing themselves into situations where hook-ups are possible, yet they are not prepared for safe sex.

**Lack of communication.** An emergent theme throughout the qualitative data was a simple lack of communication before and after a hook-up took place. There was little to no discussion regarding safe sex or STD prevention between partners. When participants were asked to describe their conversation surrounding protection many said, “There was no discussion,” “Not much” communication, and/or “There was no conversation we just used it.” Twenty-seven percent of participants indicated that there was no conversation about the use of protection prior to their last hook-up. Many participants suggested that little or no conversation was necessary because condom use was either implied or understood. The participants who indicated that there was conversation prior to the hook-up described it as very minimal.

Thirty-nine percent of participants reported that there was no conversation immediately following the hook-up. Out of the 61% that reported some conversation afterwards, 15% discussed matters unrelated to the hook-up. Some of the things that were said immediately following hook-ups were, “I have to get up early tomorrow so can you leave?” “See ya,” and “We should probably go back to the party now.” These responses demonstrate the discomfort that is felt after engaging in a hook-up. It is easier to leave the scene of the hook-up without going through the motions of an awkward discussion. The lack of communication both before and after hook-ups can be attributed to the inability of sexual partners to approach the subject. One participant said that talking about protection “kills the mood” of the hook-up.
Regret. Regret was a strong theme throughout the responses of the survey. Due to the personal and emotional experience of being intimate with another person, there are often repercussions for engaging in casual hook-ups. Sixty-four percent of respondents indicated that they had no romantic feelings for the last person with whom they hooked up. Several respondents did not even know the person prior to the hook-up. Engagement in such an intimate act with someone who is not a significant other, or ever will be, can result in feelings of regret. All of the participants who showed feelings of regret were female. Male participants did not report feelings of regret.

Many participants offered advice to others that revealed feelings of regret after participating in a hook-up. Responses such as “Don’t let yourself get used,” or “Being drunk is not an excuse for having sex,” are offered from participants who encountered bad experiences and perhaps felt used or that they had made a bad decision. Although there are not specific details given about these bad experiences, the regret they reported is enough to spur them to warn others to be careful. One response that stood out in the survey encapsulates the nature of regret that can result from a hook-up. She says, “We went to bed, the next day was super awkward, he drove me home and then we didn’t talk for a long time. I woke up in the morning and knew that he meant nothing and just felt gross.” This response captures the feelings that can accompany casual hook-up behavior. Certain circumstances can make this result more probable, such as the consumption of alcohol prior to engaging in a hook-up. All of the participants who displayed signs of guilt also indicated that alcohol had been a contributing factor in deciding to engage in a hook-up.

Discussion & Conclusion
Sexual culture on a college campus tends to include alcohol consumption, male pressure, female unpreparedness, and a general lack of communication. The participant’s sex education has little influence on their choices and they do not feel good about their sexual interactions. These themes can have negative consequences for both partners. However, there are solutions.

This study demonstrates that many of the respondents consumed alcohol before the hook-up. Alcohol reduces inhibitions and obstructs proper decision-making. This means that the decision-making about sexual activity may be impaired. Inhibitions are lowered and people are more willing to do things they would not do otherwise. The high rates of alcohol consumption and hook-ups that occur lead to negative emotions after the sexual act. Many participants felt they were used and that they would not have had sex if it were not for their consumption of alcohol. Being under the influence of alcohol can also affect the decisions to have safe sex. Making the correct and appropriate decisions is more difficult when alcohol is involved. Removing alcohol from the hook-up environment could lead to fewer risky sexual behaviors or more safe sex practices.

For females, male pressure is an added difficulty to making better decisions about safe sex. This study has shown that males tend to try to avoid the use of a condom. Some male participants verbally pressured the female to allow him to “pull out.” Males use phrases about how it feels better in order to dissuade the females from using condoms. Condoms provide a safe choice for sex since they can provide protection otherwise unattainable, such as protection from STDs. Condoms can help prevent STDs and unwanted pregnancies and most of the respondents claimed they did not want STDs or pregnancies. However, some still did not use a condom when engaging in a hook-up and sometimes relied solely on female birth control.
Helping adolescents understand the major risks associated with zero condom use may increase the use of condoms.

Female unpreparedness is affiliated with zero condom use. Females are not prepared for safe intercourse and do not carry condoms. About a quarter of the study respondents asked the male if he had a condom. Females put themselves in situations where hook-ups may occur, however, they assume it is the male’s responsibility to possess a condom. Female preparedness could help to facilitate the conversation about condom use. If the male is pressuring the female and she has a condom then she has the ability to take control of the situation. In addition, if one is under the influence of alcohol but possesses a condom, this may help the hook-up to result in safe sex. Empowering females to be in control of their sexual encounters and hold the responsibility of being prepared with condoms could lead to safer sex during hook-ups. In addition, many females felt that being on female birth control was a sufficient means for protection. Although not enough, taking birth control pills is a positive decision when sexually active to avoid unwanted pregnancies. However, birth control pills do not protect against STDs and other viruses such as HPV, whereas condoms do provide that protection. Ingledue, Cottrell, and Bernard (2004) found college women displayed risky behaviors while showing low levels of knowledge regarding HPV and cervical cancer. These women do not have adequate sex education and make unsafe and unhealthy sexual decisions. This is a troublesome finding, particularly in the light of our discovery that women are not carrying protection with them to ensure safe sex practices.

Being fully prepared with birth control pills and condoms is the best choice when sexually active and participating in hook-ups. This certainly has implications for sex education. The way to educate females about engaging in safe sex is to promote preparedness with multiple
sources of birth control, including condoms. If this is promoted in formal education environments, as well as in the home, this may positively change the sexual culture on college campuses, empowering females to take responsibility for safe sex.

The fact that sex education did not have an effect on college age adults about their hook-up behaviors may reveal that the education received is not adequate. Most participants stated that they received their sex education from multiple sources, but according to these individuals, the most beneficial information came from peers and personal experience. However, those who felt peers and personal experience were best were also those who engaged in hook-ups. Since hook-ups are typically not the safest or most responsible way to engage in sexual intercourse, changes in where adolescents acquire their sex education need to occur. Parents and schools tend to focus on abstinence, which means no sex until a monogamous relationship and/or marriage. The only government-funded sex education programs are also ones promoting abstinence. The lack of sex education in schools creates a deficiency in the information adolescents should be receiving from credible sources. Franklin and Dotger (2011) sought to discover if college students are able to bridge this gap in their sexual knowledge. They found students of senior class standing were the most knowledgeable about sex and protection (Franklin and Dotger, 2011). Clearly students are gaining their sexual knowledge from credible and formal sources during their undergraduate study years and not during their adolescence; this allows them to develop a more clear understanding healthy sexual choices.

In order to change the attitudes and behaviors surrounding sex there needs to be an understanding of what is the most beneficial information. Future research on this topic needs to be conducted. Through discovering what is considered beneficial, we may improve sex education. It is also necessary to find out how to best provide a combination of school and home
sex education to ensure beneficial information is received in adolescent years. Figuring out how to improve upon the current sex education will ensure a healthier sexual culture on college campuses. Although this study only focused on hook-ups that end in sexual intercourse, future research should expand to all types of hook-ups, including those that do not involve intercourse to determine whether or not the individuals engaging in hook-ups are making safe and healthy decisions. This research would help to provide a broader picture of the hook-up culture. Sexual culture on college campuses today involve alcohol consumption, lack of influence in sex education, female unpreparedness, and general negativity surrounding the aftermath of hook-ups. If this is the case, and those who engage in hook-ups are unhappy with the interaction, then future research should attempt to discover why hook-ups continue to occur and with so much frequency. If we can identify the exact reasons behind hook-ups perhaps we can incorporate this into an adequate sex education.

Limitations

There were various limitations that restricted the findings of this study. One major limitation was that participants were able to skip any questions in the survey. Due to the personal nature of our inquiry, we did this to ensure that no one would feel uncomfortable at any point during the survey. This liberty given to skip questions resulted in a great deal of missing data. We were left with very few fully completed surveys because the majority of the surveys contained skipped questions. We may have been able to attain a richer assortment of responses to contribute to our data if there were not so many missing responses.

Another limitation is seen in the sampling of the survey. The participants who took part in this survey came from a convenience sample that was limited to the college students to which we had access. Being able to promote this survey to a larger number of people would have
allowed us to obtain copious amounts of data, yielding stronger results. The inability to promote the survey to a larger range of individuals was also partially due to time constraints.

The time given to implement the survey was limited due to the structure of the semester created by our university schedule, thus resulting in another limitation. If this study could have been conducted outside of the classroom, we would have had more time to conduct the survey. Allowing the survey to be open for a longer period of time would have given us the opportunity to promote it elsewhere in order to gain more participants, and therefore more data.
References


