

Sexual debut in young adults in Cali as transition: keys for care

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Sexual Debut in Young Adults in Cali as Transition: Keys for Care

Objectives. This work sought to understand sexual debut as a transitional process in the lives of a group of young adults and to interpret the meaning of this transition for them. **Methodology.** This was a qualitative research with 18 life stories of students from different socio-economic backgrounds and with diverse sexual orientations. **Results.** According to the middle-range theory of transitions, sexual debut can be considered a developmental transition. The initiative can be their own, motivated by desire, or coerced by pressure from a partner or peers in which case underlay power relations either by age or hierarchy. Its features are shaped by the individual's abilities, knowledge, and uncertainties, as much as by the circumstances surrounding the event and the socio-cultural precepts towards the topic. It is valued as a healthy transitional process when it is agreed upon by both members of the couple, planned and flows into symmetrical relations. **Conclusion.** The theory of transitions and analysis of the context are useful in understanding the phenomenon because the subjective experience is framed within normative, appreciative, and socio-cultural constructions. Nursing, as discipline, requires elements like those provided by this research to interpret the dynamics, meanings, as well as subjective and social processes in the sexual evolution of people in different contexts and historical moments.

Key words: coitus; young adult; gender identity; transitions; public health; gender Identity.

El debut sexual en jóvenes de Cali como transición: claves para el cuidado

Objetivo. Comprender el debut sexual como un proceso transicional en la vida de un grupo de jóvenes e interpretar el significado que ellos otorgan a su iniciación sexual. **Metodología.** Investigación cualitativa con enfoque biográfico. Se analizaron 18 relatos de vida contruidos con entrevistas en profundidad a jóvenes universitarios de diferente posición social y distinta

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Article linked to the research: Tramas de Acción y de Sentido en las prácticas preventivas frente al Vih/Sida en jóvenes universitarios de Cali, Colombia.

Conflicts of interest: none.

Subventions: COLCIENCIAS, código: 125156935126, Universidad del Valle and Pontificia Universidad Javeriana de Cali.

Received date: June 24, 2014.

Approval date: April 15, 2015.

DOI: 10.17533/udea.iee.v33n2a18

How to cite this article: Valencia CP, Canaval GE, Sevilla TM, Orcasita LT. Sexual debut in young adults in Cali as transition: keys for care. Invest Educ Enferm. 2015; 33(2): 355-364.

orientación sexual. **Resultados.** De acuerdo con la teoría de mediano rango de las transiciones, el debut sexual se configura como una transición de desarrollo que se presenta en forma simultánea, en la mayoría de los casos, con la adolescencia. La iniciativa para el debut sexual puede ser propia, motivada por el deseo o coaccionada por la presión de los pares o de la pareja en cuyo caso subyacen relaciones de poder ya sea por edad o jerarquía. Las dudas, habilidades y conocimientos a la par que las circunstancias alrededor del evento y los preceptos socio-culturales, condicionan su desarrollo. Es un proceso transicional saludable cuando es concertado por ambos miembros de la pareja; además, cuando es planeado y fluye en el marco de relaciones simétricas. **Conclusión.** La teoría de las transiciones y el análisis del contexto son útiles para la comprensión del fenómeno desde la vivencia subjetiva enmarcado en construcciones normativas, valorativas y socioculturales. La Enfermería, como disciplina, requiere elementos como los que aporta esta investigación, para interpretar las dinámicas, significados, procesos subjetivos y sociales en el devenir sexual de las personas en diversos contextos y momentos históricos.

Palabras clave: coito; adulto joven; identidad de género; transiciones; salud pública.

O debate sexual em jovens de Cali como transição: claves para o cuidado

Objetivo. Compreender o debate sexual como um processo transicional na vida de um grupo de jovens e interpretar o significado que eles outorgam a sua iniciação sexual. **Metodologia.** Investigação qualitativa com enfoque biográfico. Analisaram-se 18 relatos de vida construídos com entrevistas em profundidade a jovens universitários de diferente posição social e diferente orientação sexual. **Resultados.** De acordo com a teoria de média casta das transições, o debate sexual se configura como uma transição de desenvolvimento que se apresenta em forma simultânea, na maioria dos casos, com a adolescência. A iniciativa para o debate sexual pode ser própria, motivada pelo desejo ou compelida pela pressão dos pares ou do casal em cujo caso integram relações de poder já seja por idade ou hierarquia. As dúvidas, habilidades e conhecimentos simultaneamente que as circunstâncias ao redor do evento e os preceitos socioculturais, condicionam seu desenvolvimento. É um processo transicional saudável quando é concertado por ambos membros do casal; ademais, quando é planejado e flui no marco de relações simétricas. Conclusão. A teoria das transições e a análise do contexto são úteis para o entendimento do fenômeno desde a vivência subjetiva emoldurado em construções normativas, valorativas e socioculturais. A Enfermagem, como disciplina, requer elementos como os que contribui esta investigação, para interpretar as dinâmicas, significados, processos subjetivos e sociais no devir sexual das pessoas em diversos contextos e momentos históricos.

Palavras chave: coito; adulto jovem; identidade de gênero; transições; saúde pública.

Introduction

Within the framework of sexual trajectories of individuals, sexual debut, more commonly known as the first sexual relationship, has attracted the attention of researchers in the area of sexual and reproductive health given its relevance, to its relationship with the onset of sexual activity, and the fertile-reproductive age with its associated consequences. Concern for its negative consequences has generated, from the health sector, a culture aimed at prevention and

less to the promotion of pleasurable and healthy sexuality. In Colombia, as in other Latin American countries, most research has been aimed at the description of the sociodemographic and epidemiological characteristics revolving around the initiation of sexual relationships, in an attempt to identify the factors associated to its early onset and its unwanted effects.^{1,2} However, few studies emphasize understanding of the meanings these practices have for the young adults and

recognize that sexuality is mediated by beliefs, expectations, values, and interests constructed through the interaction with another. As described by Amuchastegui and Rivas,³ the ways women and men give meaning to this experience occur within the limits of a cultural context that provides them a framework to make that interpretation. These and other investigations have indicated that the motivations and meaning given to sexual initiation are strongly influenced by gender issues.⁴⁻⁶ For women, it has been related to loving feelings of closeness and commitment; in men, in turn, curiosity, desire, search for pleasure, and peer pressure have been the principal motivation to initiate sexual life.^{3,7,8}

Programs in Sexual and Reproductive Health have an interdisciplinary nature in coherence with the multidimensionality of sexuality. In the interdisciplinary team, nursing as discipline provides a framework to interpret human beings' subjective experiences in their different trajectories during their vital processes and involve the cultural dimension of care.⁹ Due to that, this research is congruent with the integrative view of nursing, which contemplates the subjective aspects of humans within their context¹⁰ and provides fundamental elements to be considered in advisory and care programs for the promotion of sexual and reproductive health. Recognizing that sexual debut is a transition process in the experience of sexuality and not only a punctual sexual relationship, motivated us to guide its analysis from the perspective of the Middle-Range Theory on Transitions proposed by Meleis *et al.*¹¹ No publications were found on the study of this phenomenon from this perspective, which is why this work acquires great relevance.

The evolution of the theory of transitions has occurred with multiple applications and influences upon the disciplinary development of nursing. The thematic areas studied relate to physiological and development processes, with the experience of the state of health, in care for hospital discharge, performance of roles, and in processes of change in daily life like immigration, among others.¹² The theory guides the comprehension of the

transitional phenomenon in terms of its nature, conditions and response patterns, process indicators, and results. The transitions properties allow identifying the movement that denotes the passage from one state to another and critical points in the process. Thereafter, it evolves toward the phase of a new beginning where the individual can face a new role, a new identity, and a new way of acting and meaning.

The other approach to understand the sexual dynamics of men and women in this research is based on integrating proposals that recognize the biological, erotic, and communicational-relational function of sexuality.¹³ Likewise, this study adopts the foundations of the constructionist approach of sexuality, which recognizes that although it is true that sexuality has a biological foundation, the way the practices are carried out, the way it gains meaning, how it is elaborated, and how it is represented socially is a cultural and social fact that must be interpreted within the political frame in which it is developed. It can be pointed out that this notion of social construction of sexuality also alludes to its historical nature, that is, that it is transformed along with changes occurring in society.¹⁴

This work sought to interpret from the stories of these young adults the sense, assessments, context, and logic that have mediated their sexual initiation as a phenomenon. Recognizing the importance of the gender approach in language, but – in turn – the economy of language, this article will speak of young adults, as category, which includes men and women. The respective differentiation will be made in the parts that so require it.

Methodology

This was a qualitative research with biographic approach from life stories. This approach is useful inasmuch as it guides the intersection of the social and the subjective.¹⁵ The study area corresponded to three universities in the city of Cali, Colombia that differ due to their public or private nature,

cultural diversity, religious-spiritual orientation, and the social class represented by the socio-economic level, along with source of income of the young adults, education and occupation of the parents of their students. The criteria for participation were: undergraduate students, matriculated at the moment the information was gathered in one of the three universities, in age groups between 18 and 24 years of age, and active sex life. A convenience sample was taken until reaching data saturation. The search for participants was made through the snowball method through key people in each university (students, counselors, welfare services staff, professors, and research colleagues).

The scientific rigor was guaranteed through criteria of credibility, auditability, and transferability.¹⁶ A cross-coding or triangulation process was carried out by researchers to increase validity in results analysis, reduce bias, and – above all – incorporate diverse views in light of the disciplines of the group comprised of three nurses, a psychologist, and a sociologist. The Consensual Qualitative Research (CQR)¹⁷ method was used, incorporating a careful reading process among researchers and an auditor or referee, which settles congruence inconsistencies of the texts with each of the categories proposed and defined in the study.

The life stories were constructed through three in-depth interviews of each young adult with the orientation of a guide of the central themes to be explored. A fourth meeting was held in which the life story was returned to each participant for the final reflection. These interviews were conducted in spaces belonging to the university campuses that provided optimal conditions of ventilation, lighting, and sound. In turn, this meeting was recorded with the permission of the participants.

Analysis was performed via a two-stage hermeneutic process: integrated analysis of each life story and inter-case cross-categorical analysis. The categorization process was thematic, of deductive and inductive nature, given that initially theoretical categories were constructed, which responded to the study's theoretical approach. Then, emerging categories were identified

inductively. Atlas Ti software, version 6.0, was used to identify consistencies and relationships among categories and families of categories. The research was approved by the Ethics Committees in the participating institutions. The names of participants in the stories are fictitious.

Results

The analysis considered 18 life stories of young adult students from the universities involved with the study. The analysis categories upon which the nature, properties, process, and results of the transitional experience were identified, corresponded to the sociodemographic characteristics of the young adults and their partners, the role of initiative in the sexual debut, the reasons for the initiation, quality of the experience (physical and emotional), sense and/or meaning assigned, physical-social context and protection or prevention of sexually transmitted infections (STI), and unplanned pregnancies. The analysis is accompanied by short fragments of the stories to maintain alive the voice of the participants and illustrate the ideas presented.

According to Table 1, the population was made up of an equal number of men and women from low, middle, and high socioeconomic levels. Some young adults recognized that their sexual orientation is still under construction. The mean age of onset of sexual relationships was 16 years (range of 9 – 19), with one atypical case of nine years of age. The ages of onset of sexual relationships between men (15.7 years) and women (15.4 years) were quite similar. Most engaged in sexual relationships with people their same age or three years older. Only two cases reported age differences with their partner exceeding eight years.

Half the participants had their first sexual relationship with their affective partner (boyfriend or girlfriend), six with known people or relatives, one with a sexual worker, and one with a teacher. In a high number of cases, the sexual relationship

occurs consensually, with prior conversations or initial intimate approaches. However, most of the encounters occurred in improvised manner and with very little time for intimacy, given the limitations on the opportunities and location spaces for the encounter. In contrast, in only one case, the couple planned the moment previously and requested counseling on sexual health at a specialized institution. These characteristics are

illustrated in the following narrations: *[...] at first, she thought it over well because I never forced things on her; rather, since the beginning I told her I wanted to have that experience with her, but I never insisted by asking for a small taste or things like that, but that is how things went; we both wanted it and then we both said: okay, ready, so we planned the date, place, how and when* (Alejandro, heterosexual male, 19 years of age).

Table 1. Sociodemographic characteristics of the 18 young-adult participants

Characteristics	Number	
Gender	Men	9
	Women	9
Sexual orientation	Homosexual	6
	Heterosexual	10
	Bisexual	2
Age	19	4
	20	1
	21	5
	22	3
	23	2
	24	3
	Sexual initiation age	9
	13	1
	14	2
	15	1
	16	8
	17	2
	18	2
	19	1
Relationship with person with whom initiation occurred	Boy/girlfriend	9
	Acquaintance	4
	Sex worker	1
	Professor	1
	Friend	2
	Relative	1

Reasons for the onset

The first sexual encounter is related to desire, curiosity and, in some cases, to pressure either from their sexual partner or from friends who have already debuted.

Desire. The erotic function of sexuality finds in desire its *raison d'être*. Gradually, young adults

appropriate this possibility without guilt, but sometimes without estimating the consequences: *[...] I now think we need to get rid of that dumb issue of virginity... that it is something brought along and that it is precious; no, but at that moment I knew I couldn't do it with just any one and that's fine; I think I did well, but when I met him, I didn't care that we had only known*

each other for a short amount of time because I felt he was the right one (Anastasia, heterosexual female, 19 years of age).

Pressure and coercion. In one of the cases, the sexual relationship was carried out under coercion. It was the case of a student with her teacher 20 years older. The young woman's narration shows a naturalization of the importance to satisfy the sexual needs of men: [...] *Why did I decide for him? I don't know... let's say that was a need I think he felt and I actually did it more for him than for me; he was a very good person, but in the end it became like something I had to do against my will because we would be together and simply played, but he said: "no, enough", so I said okay and when I no longer wanted, no way going back, so I had to do it (Chantal, heterosexual female, 19 years of age).*

Another interesting case corresponded to a girl who at nine years of age agreed to have her first sexual relationship with a 17-year-old boy to pay off a bet. This case like the previous one, in spite of being consensual relationships, is crossed by relationships of power or even abuse. The relationship of power defined by age, hierarchy, and experience of the sexual mate configures the opportunity to pressure the relationship notwithstanding the spontaneous negativity of their partners to living that moment: [...] *when I was with him, and it is something I remember and think I will always remember, it was not something like – how should I say it – like satisfaction for me, of my wanting to be with him. Rather, as I said, it was through a bet. At that moment I thought "if I win I'll ask him to lend me the play station for a week"; things like that, I was thinking of another thing, but I never thought that when we finished playing that he would tell me: "what happens is that I like you; I know I am older and that you are a little girl, but I want to be with you (Gloria, homosexual female, 21 years of age).*

Strengthening the affective bond. Several stories, especially in those that reported the couple's consensual encounters, evidence reasons related

to the desire for intimacy with their partners to strengthen the affective bond: [...] *I wanted for my virginity to be for someone special and ours was a very beautiful relationship; ours was quite beautiful, very pure; like that first love that can do it all; besides, he was with me because I had my depression crisis given that my parents had separated, and he was with me for better or worse, in bad times and during terrible moments; he has been with me in everything (Clara, heterosexual female, 21 years of age).*

Ratify feelings and desires. In some cases, as with young adults with homosexual orientation, the first relationship represented the opportunity to discover or ratify homosexual feelings and desires that had been emerging: [...] *when I was with her I was already feeling strange, like I was with her but felt a certain "itch" (John, homosexual male, 23 years of age). [...] it all began as a game, he came and said: let's kiss and I said, how can you think I'll do that – but in the end I gave in and said: if I did it it's because of something, so I corroborated to myself what I really was (Tobias, bisexual male, 22 years of age).*

Context of the first sexual relationship

With regards to the spaces, places, and moments when the sexual debut took place, this was often not planned but simply emerged due to the moment's situation. In most of the situations explored, the sexual relationship occurred at home when the parents were out. This environment guaranteed privacy in many cases, but imposed haste to the encounter, which took away the possibility of the joint and conscious search for mutual pleasure. Likewise, we can note the impact on the diminished possibilities to negotiate and use protection strategies. Some of the important reasons for the encounter not occurring in other spaces are related to economic limitations of the young adults during this stage of their lives due to their financial dependence. Only one of the cases reported the relationship taking place in a motel, due to the planning and readiness of the young adults to live out the experience: [...] *yes, everything was very short because my mother was*

always watching and because she would tell me that the home had to be respected, but I know that down deep she knew those things; besides, where else would we do it? (Clara, heterosexual female, 21 years of age); [...] our first encounter was in a place around here on 5th Street in a motel... we had saved and well it was our first time and additionally it was the opportunity to see a motel... we had lots of expectations... (Alejandro, heterosexual male, 19 years of age).

Physical and emotional quality of the experience

“Painful, unpleasant, traumatic, tormenting”. Throughout the stories, the view of “pain” prevailed over pleasure in both men and women, associated to lack of knowledge, fear, haste, and lack of foreplay that helps with adequate lubrication. Additionally, some events were found with lesser control of the situation because they were mediated by liquor. Some of the participants stated that they considered this first encounter as a “traumatic” encounter, charged with pain and discomfort and that in some marked significantly their development and later performance in their current sexual lives: *[...] once we did it and it felt like big needle puncture; like a very impressive pain and I felt this was horrible and that I would never do it again – but no way, from then on we didn't stop... (Clara, heterosexual female, 21 years of age); [...] it was quite... well, not traumatic, but something very, wow, very impacting... “No, I didn't enjoy it. It was more tormenting; it was like: what do I have to do for it all to be fine? What do I have to do, what comes now? What should I do? Do you understand me? That was my experience, but it was all rather tormenting (Geronimo, heterosexual male, 21 years of age).*

“Awkward but tender”. Some participants, especially women, define the experience as something quite special, inasmuch as it occurred within the frame of a socio-affective relationship with the desire to explore and learn with someone who has an important affective value during this stage of their lives. *[...] it was all very beautiful;*

it was like in that innocence of inexperience between the two discovering how it was and with love; very awkward but innocent (Clara, heterosexual female, 21 years of age”). Some males reported the need for the affective bond and regretted that the first time had not been with their girlfriends or with someone sentimentally close: *[...] it was not the best experience, no. Do you know what I would have wanted? I would have wanted it done with love; I would have liked to have done it with love... like having been told that I was loved... I would have liked it that way, but regrettably it wasn't so, it was sex, sex and no more (Geronimo, heterosexual male, 22 years of age).*

“Between desire and guilt”. Most young adults who have delayed the onset of their sexual relationships find reasons linked to religious precepts and convictions, which generate guilt, confrontation, and insecurity regarding the decision made: *[...] he is a person who understands me in all aspects; at study level, he's a person who constructs my dreams in general terms. I may be wrong, I don't know, but it was my feeling, so I said... I don't want to repress myself. Then, I decided to be with him; it was a special moment, but at the same time with many doubts because of religious beliefs... after having been with that person I cried a lot (Mariana, heterosexual female, 21 years of age).*

Protection and prevention

Improvisation. Prevention against STI and pregnancy is limited by conditions of improvisation, secrecy, and the short amount of time for the encounter. Pregnancy was the biggest concern for most of the participants. Women left it up to the men to adopt prevention strategies against STI, and women assumed the task of contraception. Protection continues associated to the male role and, consequently, given that it is not something planned by the man and in some cases by the woman, there is no room for negotiation and the sexual encounter takes place without: *[...] that first time I didn't have protection on me and asked a friend to lend me a condom; although I was drunk,*

I remembered, because I strongly fear becoming a father. Then I thought, why should I carry a condom in my pocket if the least I expected was for something to happen... I almost couldn't put it on, (laughs) (Juan, heterosexual male, 23 years of age).

Discussion

Sexual debut as transition

According to the middle-range theory of transitions,¹¹ sexual debut is configured in this research as a development transition implicit in human beings as sexual beings and of relational nature, which occurs simultaneously, in most cases, with adolescence. The initiative for sexual debut may be taken individually, motivated by desire or coerced by pressure from peers or from the partner in which case underlay relationships of power due to age or hierarchy. Among its properties, there is the convergence of expectations, doubts, abilities, and knowledge that condition the transition movement and quality. Hence, it is important to prepare for the transition, which implies mobilization of resources from the environment and from the subject. Among the conditions, we can identify those factors related to the individual, like the meaning and view of sexuality, knowledge, abilities, fears, questionings, as well as to the social context. We may also identify cultural, religious, and gender precepts that contribute to defining the quality of the transition.

The transition movement

Sexual debut as process has, during its initial phase, a series of expectations, desires, and fears. It implies the transformation of a relational situation with oneself and with the other within the sexual setting, which necessarily reflects the way of identifying and perceiving oneself. Generally, it starts with the individual's sexual awakening and, in most cases, it is accompanied by a series of stimuli and caresses as part of the couple's erotic play. During its development, a critical point is

identified corresponding to the moment of the sexual encounter in which different sensations, feelings, and actions converge and which depend on each subject and on the couple. Thereafter, it evolves toward the phase of a new beginning where the individual may adopt a new role, a new identity and plan a new way of acting and meaning within the sexual. During this phase of the new beginning, we may recognize the result indicators that permit our identifying the quality of the experience, according to the critical evaluation made by the participants.

The results of this research helped identify that sexual debut is configured as a healthy transition when the sexual encounter is agreed upon by both members, when it is planned, takes place within a safe and carefree environment, and flows within the frame of symmetric relationships. In this sense, feelings of affection and respect toward the other can be identified, as well as a sense of fulfillment, satisfaction in the role played out, strengthening of the bond, increased self-esteem, strengthening of communication, decision making, and negotiation skills. The culmination of a healthy transition moves the individual to a state of wellbeing; it is manifested in a sense of mastery expressed in self-care and in a more inclusive and fluid change of identity. Conversely, when the transition was not healthy, it guided the individual toward a state of vulnerability and risk, generated feelings of distrust, resentment, insecurity, blockages, and physical and emotional limitations with great impact upon their subsequent sexual performance.

The level of planning taking place before and during a transition is another condition that influences its experience. Good planning permits creating an easy and healthy transition. For this case, the couples have spoken about the issue, consulted some doubts, but the sexual relationship generally occurs suddenly and unexpectedly. Only one of the cases identified adequate planning and preparation that guaranteed the experience of a healthy transition.

This sample identified findings that vary according to the academic programs in which the young

adults were matriculated. These differences are related to the meaning and view of sexuality, to beliefs, practices, imaginaries, and experiences that are gradually transformed in close interaction with the university setting and life. For example, in the group of students from the health area the concept of body and sexuality acquire a biological connotation, given the emphasis of their formation, while the those from the arts and humanities, the body is an instrument to express their knowledge and feelings; due to this, concepts like modesty and pleasure acquire other meanings. Additionally, in the first the main motivation for prevention is the fear of acquiring STI, but among the latter the permanent search for pleasure is the main motivation for engaging in sexual relationships often without protection.

Coherent with contributions from other research,^{5,6,18,19} an important element in the process of sexual debut as transition is the socio-historical context in which that sexual relationship takes place. This is related to the cultural precepts and social norms imposed in society. These results show that several of the young adults have transformed the meaning of virginity tied to social and religious canons and recognize the right to enjoying the erotic function of sexuality. It is possible that this turn is associated to the reflections of new knowledge and militancy in gender and diversity groups during their formation process and university life. However, as described by Amuchastegui: *“the contradiction among these discourses does not end in the substitution of one for the other, but on a particular hybridization that sometimes produces a conflict of loyalties among the desires of the individuals, their parents’ tradition, and prestige of modernity to which they wish to belong.”*²⁰ The university context is constituted, thus, within a space of socialization in which in addition to knowledge, senses, identities, and realities are generated.

Regarding sexual orientation, it was identified that six of the young adults with homosexual orientation had their first sexual relationship with

a heterosexual partner, in most cases coerced by the partner or by their peers. This experience allowed them to clear, in some cases, their desires and affinities. It turns out important to analyze in the future the experiences and meanings these young adults undergo in a “new sexual debut” with a homosexual partner in which they will probably have greater clarity about their desires and affinities.

The role of the interaction of the adolescents with their peers, alcohol abuse, pressure from peers and the partner all influence upon premature and unwanted sexual activity, which is why interventions must consider these aspects for greater impact on delaying the onset of sexual activity and on using protection. Likewise, it is necessary to recognize and discuss with the young adults, those aspects that increase disparity or asymmetry in relationships, as well as the shared responsibility of the partner in protection against pregnancy and STI-HIV.

The theory of transitions and context analysis are useful in understanding sexual debut from the subjective experience framed within sociocultural, normative, and evaluative constructions. Nursing as a discipline and humanist profession, covered by the hermeneutic paradigm and social critique, requires elements like those provided by this research to interpret the dynamics, meanings, subjective and social processes in the sexual evolution of people in diverse contexts and historical moments. Nursing care must be culturally competent, hence, sensitive to issues of culture, race, gender, sexual orientation, and economic class.

It is recommended to keep in mind the comprehension of the conditions, characteristics, patterns, and indicators of sexual debut as transition in the guidance of counseling and care programs for the promotion of sexual health.

Acknowledgments: The authors thank the participants for their valuable contributions, as well as the students and monitors who with their work enabled identifying the study subjects and the transcription of most of the interviews.

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