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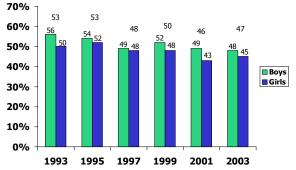
# **U.S. Teen Sexual Activity**

Over the last decade, the percentage of all high school students  $(9-12^{th} \text{ grade})$  who report ever having had sexual intercourse has declined. At the same time, among teens who are sexually active, rates of contraceptive use – including condom use – have increased. Both factors help to account for the decrease in teen pregnancy rates in recent years. Yet, despite these trends, about a third (34%) of young women become pregnant at least once before they reach the age of 20 – about 820,000 a year, 1 and approximately four million teens contract a sexually transmitted disease (STD) each year. 1

#### **General Sexual Activity**

 Fewer than half of all 9-12<sup>th</sup> grade students report having had sexual intercourse, reflecting a decline during the last decade from 53 percent in 1993 to 47 percent in 2003. Males are more likely than females to report having had sexual intercourse.<sup>3, 4</sup> (See Table 1)

# Table 1 Percentage of 9-12<sup>th</sup> Graders, by Gender, Who have had Sexual Intercourse, 1993-2003



Source: The Centers for Disease Control and Prevention, 1993, 1995, 1997, 1999, 2001, 2003 Youth Risk Behavior Survey.

- The percentage of high school students who have had sexual intercourse increases by grade. In 2003, 62 percent of 12<sup>th</sup> graders had had sexual intercourse, compared with 33 percent of 9<sup>th</sup> graders.<sup>4</sup>
- Data about teens' sexual experiences other than intercourse are more limited. In 1995, 53 percent of teen males aged 15-19 said they had been masturbated by a female (an increase from 1988); 49 percent had received oral sex; 39 percent had given oral sex; and 11 percent had engaged in anal sex.<sup>5</sup>

#### **First Sexual Intercourse**

- The median age at first intercourse is 16.9 years for boys and 17.4 years for girls.<sup>6</sup>
- The percentage of teens 15-19 who had initiated sexual intercourse before age 14 has decreased in recent years, from a high of 8 percent of girls and 11 percent of boys in 1995 to a low of 6 percent of girls and 8 percent of boys in 2002.<sup>7</sup>

## **Sexual Partners and Relationships**

- The percentage of 9-12<sup>th</sup> grade students who report having had four or more sexual partners has declined in recent years from 19 percent in 1993 to 14 percent in 2003. Males (18%) are more likely than females (11%) to report having had four or more sexual partners.<sup>3, 4</sup>
- Most (74%) sexually active females aged 15-19 have partners who are the same age or 1-3 years older; for a quarter of girls, their first partners were 4 or more years older. The younger a girl is when she has sex for the first time, the greater the average age difference is likely to be between her and her partner.<sup>7</sup>
- Teen girls with older male partners are more likely to be sexually active<sup>8</sup>, less likely to use contraceptives<sup>9</sup>, and more likely to face an unintended pregnancy.<sup>10</sup>

#### **Abstinence**

- In 2003, 66 percent of high school students were currently abstinent, meaning they had not engaged in sexual intercourse over the last 3 months.<sup>4</sup>
- Among teens aged 15-17 who have never had sexual intercourse, 94 percent said that concern about pregnancy influenced their decision to wait. Similar numbers said that concern about HIV/AIDS (92%), other STDs (92%) and feeling 'too young' (91%) contributed to their choice.<sup>11</sup>

#### **Contraception and Protection**

- Nearly all (98%) teens 15-19 who have had sex report using at least one method of birth control. The most common methods were condoms (94%) and birth control pills (61%).<sup>7</sup>
- In 2002, three quarters (75%) of females and 82 percent of males 15-19 used some method of contraception the first time they had sex. This has increased from previous years.<sup>7</sup>
- Nearly one fifth (17%) of sexually active females 15-19 and 9 percent of males the same age said they used no method of contraception the last time they had sex.
- Condom use among 9-12<sup>th</sup> grade students has increased over the last decade: In 1993, 53 percent reported using a condom the last time they had sexual intercourse, compared with 63 percent who did so in 2003.<sup>3, 4</sup>
- Among sexually active teens 15-17, important factors in choosing a method of birth control include "how well it protects against HIV and other STDs" (98%) "how well it prevents pregnancy" (94%), and what "side effects" may exist (93%).<sup>12</sup>

## **Pregnancy and Sexually Transmitted Diseases (STDs)**

• The U.S. teen pregnancy rate (the number of pregnancies per 1,000 females aged 15-19) decreased 28 percent between 1990 and

2000, dropping from 117 pregnancies per 1,000 females aged 15-19 in 1990, to 84 per 1,000 in 2000.

- Since many teen girls have not had sex and therefore are not at risk for pregnancy, a more accurate measure of teen pregnancy rates may be the number of pregnancies among sexually active teen girls aged 15-19. This rate has also declined (from 211.8 per 1,000 in 1995 to 197.1 per 1,000 in 1998).<sup>13</sup>
- Teen pregnancy rates vary widely by racial/ethnic group. While teens of all races have experienced steady declines in pregnancy rates since the 1990s, African Americans (154 per 1,000) and Latinas (140 per 1,000) have higher rates of than their white counterparts.<sup>1</sup>
- The teen abortion rate (the number of abortions per 1,000 women aged 15-19) has declined in recent years, from 34 per 1,000 in 1994 to 25 in 2000; the biggest abortion rate decline occurred among 15-17-year-olds, from 24 in 1994 to 15 in 2000.<sup>14</sup>
- Compared to older adults, adolescents (10- to 19-year-olds) are at higher risk for acquiring STDs for a number of reasons, including limited access to preventive and regular health care and physiologically increased susceptibility to infection.<sup>15</sup>
- Approximately one in four sexually active teens contracts an STD every year.<sup>16</sup>
- An estimated half of all new HIV infections occur in people under age 25.<sup>17</sup> Most young people are infected through sex.<sup>18</sup>
- Among youth, minorities and teen girls have been particularly hard hit by HIV/AIDS. Young African Americans represented 65% of AIDS cases reported among 13-19 year olds in 2002; Latino teens represented 20%. In 2002, girls represented 51% of HIV cases reported among 13-19 year olds, compared to 30% of cases reported among people over age 25 that same year.<sup>18</sup>

#### **Sex and Substance Abuse**

- One-quarter of sexually active 9-12<sup>th</sup> grade students report using alcohol or drugs during their most recent sexual encounter. Males (30%) are more likely than females (21%) to report having done so.<sup>4</sup>
- Among 15-17-year olds, 51 percent say that they are personally concerned that they might "do more" sexually than they planned to because they were drinking or using drugs.<sup>19</sup>

#### **Sexual Pressure, Assault and Dating Violence**

- One third (33%) of sexually active teens 15-17 reported "being in a relationship where they felt things were moving too fast sexually", and 24 percent had "done something sexual they didn't really want to do." More than one in five (21%) reported having oral sex to "avoid having sexual intercourse" with a partner.<sup>19</sup>
- More than a quarter (29%) of teens 15-17 report feeling pressure to have sex.<sup>19</sup>
- Nearly one in 10 (9%) 9-12<sup>th</sup> grade students report having been physically forced to have sexual intercourse when they did not want to at some point. Females (12%) were more likely than males (6%) to report this experience.<sup>4</sup>

#### **Access to Health Care Services**

- About half (48%) of teens 12-17 say they want more information about sexual health from their health care providers. Among teens 15-17 who have had sex, only 6 in 10 had ever seen a health care provider about their sexual health.<sup>20</sup>
- Many adolescents have limited access to sexual health care services, including counseling on sexual risk behaviors, contraception and STD testing. Several factors influence teen access, including health insurance coverage, the ability to pay

directly for services, laws which vary by state and affect teens' ability to seek certain services without parental consent, or the availability of free or low-cost, local family planning programs, including those funded by Title X (the national program that offers care for individuals who are uninsured or underinsured). Annual Title X funding awards fall short of meeting the needs of the program's client population, reducing the number of clinics that can serve youth and restricting the services available.<sup>21</sup>

 Other barriers to care include limited access to transportation, lack of confidentiality, few youth-friendly service delivery environments, fear about seeking care and lack of information about services available.<sup>21</sup>

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<sup>15</sup> CDC, 2003 STD Surveillence Report.

<sup>16</sup> The Alan Guttmacher Institute, Sex and America's Teenagers, 1994, AGI: New York.

<sup>17</sup> CDC, Fact Sheet: Young People at Risk – HIV/AIDS Among America's Youth, 2002.

<sup>18</sup> CDC, HIV/AIDS Surveillence in Adolescents, L265 Slide Series (through 2002).

<sup>19</sup> Kaiser Family Foundation, National Survey of Adolescents and Young Adults: Sexual Health Knowledge, Attitudes and Behaviors, May 2003.

<sup>20</sup> Kaiser Family Foundation and Seventeen, SexSmarts: Sexual Health Care and Counsel, 2001.

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#### Major National Data Sets on Teen Sexual Activity in the U.S.

Youth Risk Behavior Survey (YRBS) conducted every two years by the Centers for Disease Control and Prevention (CDC), monitors risk activities among students in grades 9-12, including sexual behaviors. Most recent data 2003.

National Survey of Family Growth (NSFG) conducted roughly every five years by a division of the CDC, measures factors related to marriage, divorce, contraception, fertility, and the health of women aged 15-44. The most recent survey (2002) included both males and females, for the first time.

National Survey of Adolescent Males (NSAM), a federally funded effort conducted by the Urban Institute, looks at factors affecting contraceptive use, sexual activity, and related risk behaviors among male teenagers. The data is taken from four household-based surveys: a three-wave, longitudinal study conducted between 1988 and 1995, and a new 1995 survey.

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