
CHAPTER 5

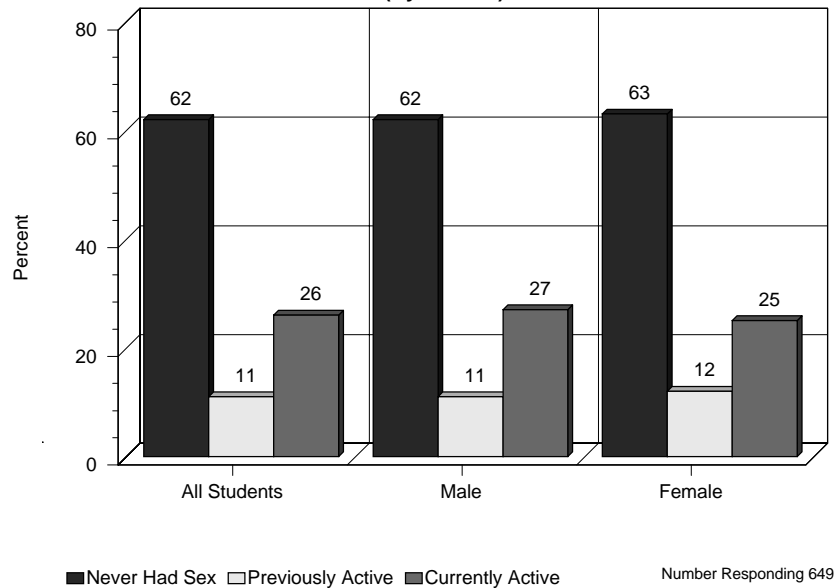
Sexuality

One of the biggest fears for many parents is that their children will become sexually active before they are ready. This fear includes concern about an unplanned pregnancy, sexually transmitted diseases (STDs), emotional harm, and sexual abuse. Most parents feel that early sexual experience will, in some way, harm their children. Early sexual experiences have been found to lead to greater risk for multiple partners, STDs, and pregnancy (Valois, Oeltmann, Waller, & Hussey, 1999).

Sexual Activity

The United States has the highest teen childbirth rates of any industrialized Western nation, despite the fact that teenage pregnancy, childbirth, and abortion rates have all declined in the 1990's (CDC, 1995; Ventura, Mosher, Curtin, Abma, & Henshaw, 2000). One out of four (25%) of U.S. women have had a pregnancy by age 18 (Alan Guttmacher Institute, 1994). Figure 5-1 shows 37% of teens surveyed have had sexual intercourse (males, 38% and females, 37%).

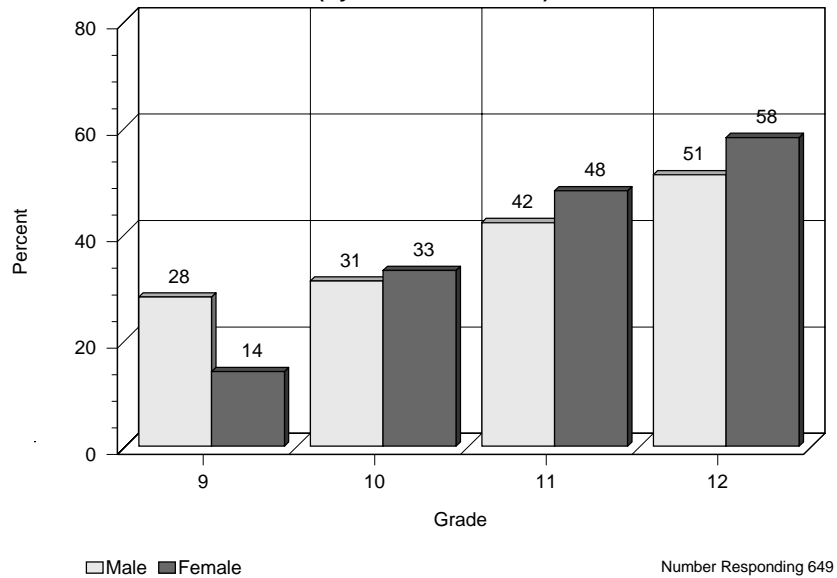
Figure 5-1: Sexual Activity of Teens
(By Gender)



Note: Due to rounding, some graphs may not total 100%.

Teens are having sex at a young age. Even as early as the 9th grade, 28% of males and 14% of females reported they have had sexual intercourse. Figure 5-2 shows that more teens become sexually active as they get older. Fifty-five percent (55%) of local teens in the 12th grade (males, 51%; and females, 58%) reported having had sexual intercourse.

**Figure 5-2: Teens Who Have Ever Had Sexual Intercourse
(By Grade and Gender)**



The Youth Risk Behavior Surveillance Survey conducted by the CDC (1998) reports that nationally, 48.4% (N.H., 47.8%) of high school students (*grades 9-12*) have had sexual intercourse at some time in their lives. New Hampshire ranks 14th out of 28 states surveyed.

Thirty-four percent (34%) of local teens reported they first had sex by the age of 16 or earlier. The average age that teens first had sex was 15 years old. The age teens were when they first had sexual intercourse is shown in Figure 5-3.

**Figure 5-3: Age Teens First Had Sex
(By Gender)**

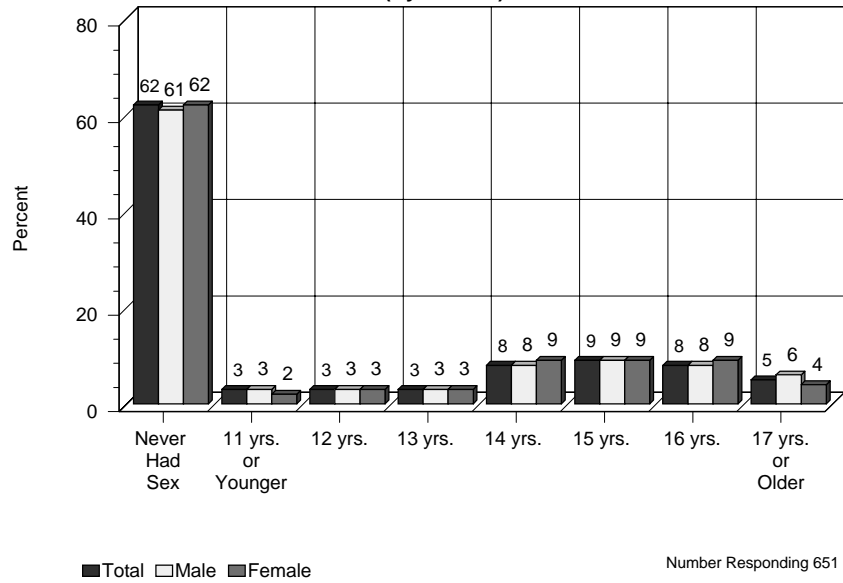
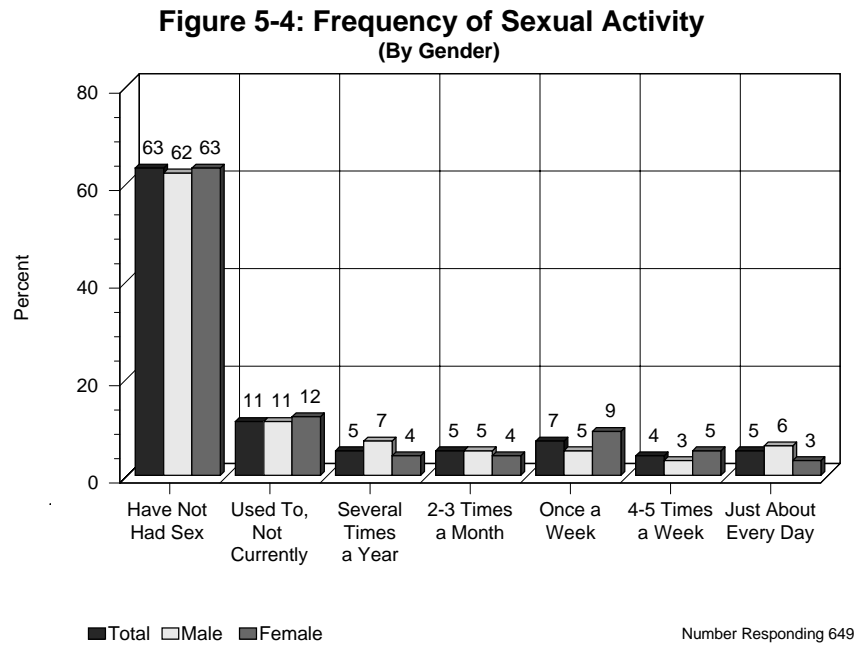
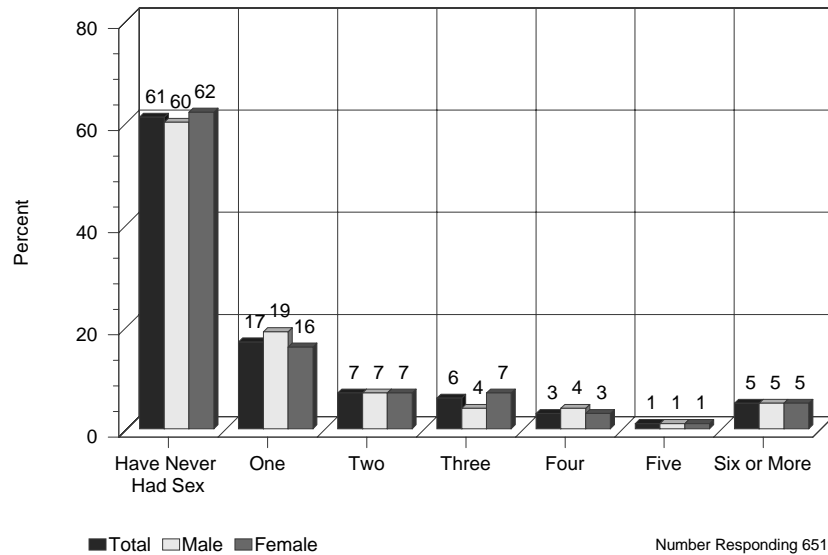


Figure 5-4 shows how often teens are having sex on the basis of gender.



Youth were asked how many sexual partners they have had in their lifetime. Figure 5-5 shows nine percent (9%) of teens surveyed responded they have had sex with 4 or more partners in their lifetime (males, 10% and females, 9%). From the 9th to the 12th grades, teens are increasingly likely to have a greater number of sexual partners.

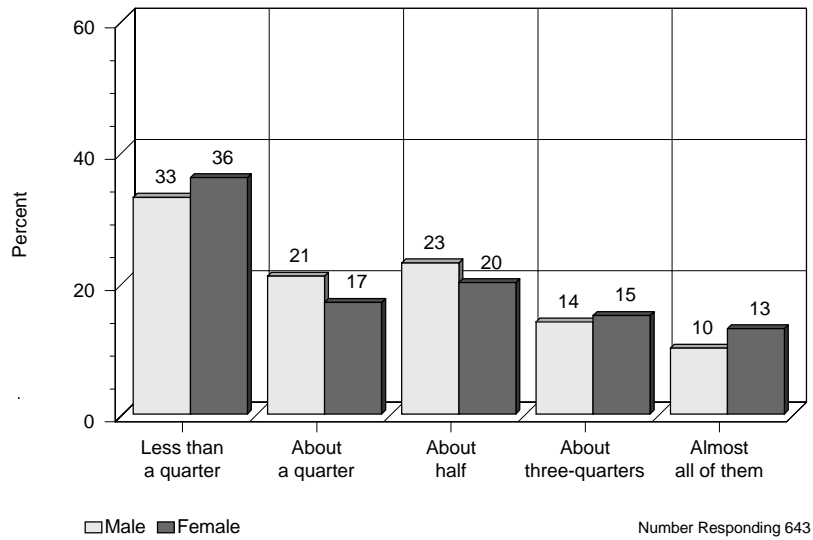
Figure 5-5: Number of Partners Teens Have Had (By Gender)



Nationally, 16.0% (N.H., 11.9%) of high school students had sexual intercourse with 4 or more partners in their lifetime (Centers for Disease Control and Prevention, 1998). New Hampshire ranks 21st out of 30 states surveyed.

We asked teens what percentage of their friends they thought have had sexual intercourse. Figure 5-6 shows a varying range of answers. Most teens felt a quarter or less of their friends have had sex. Gender differences are slight.

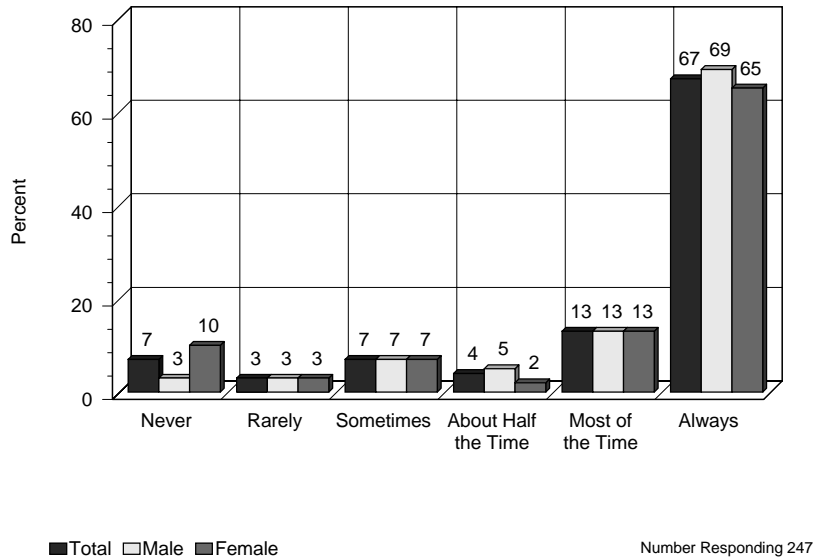
Figure 5-6: Number of Friends Who Have Had Sexual Intercourse (By Gender)



Contraception

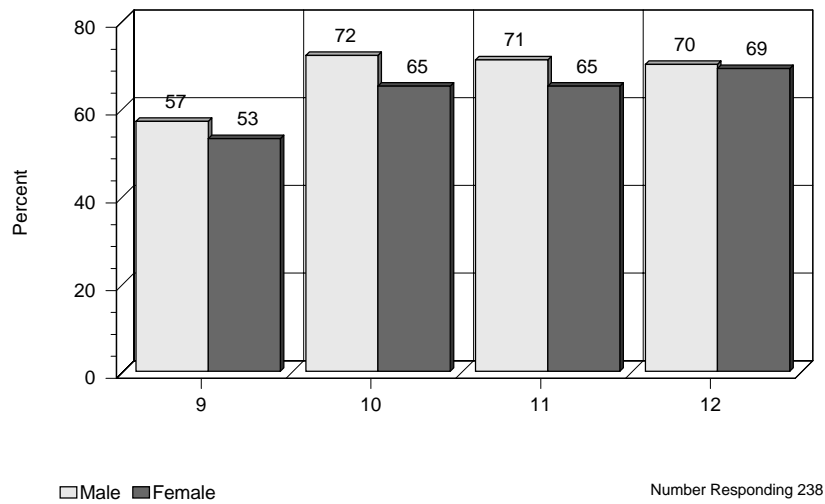
Of those students who report current or past sexual activity, 67% said they "always" use some form of birth control (males, 69%; and females, 65%), while 7% of students who report being sexually active "never" use some form of birth control (males, 3%; and females, 10%). Figure 5-7 shows the frequency of birth control use between sexually active male and female students.

**Figure 5-7: Birth Control Use by Sexually Active Teens
(By Gender)**



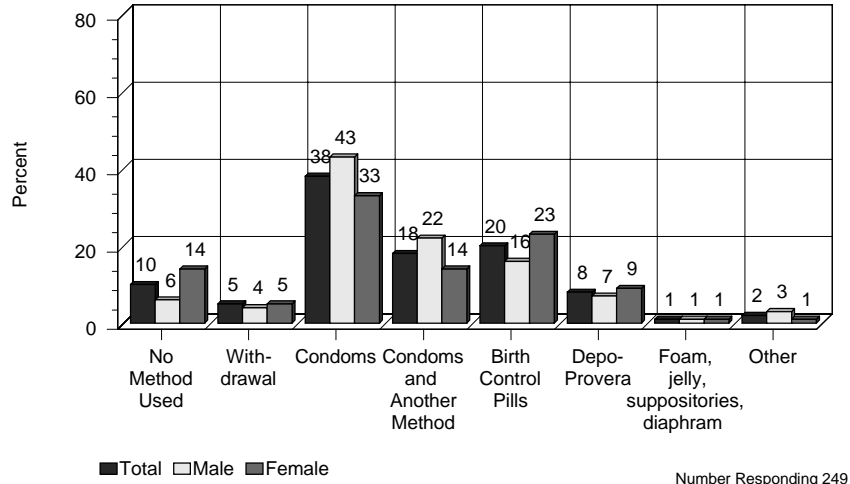
According to Healthier People in Wisconsin (Wisconsin Department of Health and Social Services, 1990), after teens become sexually active, they usually wait on average twelve months before they begin to use contraception. Recent national statistics indicate teen contraceptive use does not vary by age (Adams, Schoenborn, Moss, Warren & Kann, 1995). This is troubling since the health risks associated with a pregnancy are much greater for younger teens. Figure 5-8 shows the breakdown by grade and gender for sexually active teens (currently and previously) who "always" use birth control.

Figure 5-8: Sexually Active Teens Who Always Use Birth Control
(By Grade and Gender)



The most common method of birth control among sexually active teens is the use of condoms, either alone or in conjunction with another method. Figure 5-9 shows 15% of teens who have had sex are either using no birth control or withdrawal, both of which are likely to result in health risks or pregnancy.

Figure 5-9: Method of Birth Control Used by Teens the Last Time They Had Sex
(Of Those Who Have Had Sex, by Gender)



Sexually Transmitted Diseases

Teens who are sexually active run certain risks that can affect their health and their future. In 1998, an estimated 29 New Hampshire teens age 15-19 were infected with gonorrhea, and 428 were infected with chlamydia (Adamski, C., 1999). AIDS has become the 6th leading cause of death in the 15-24 age group in the United States (U.S. Bureau of the Census, 1995). The Centers for Disease Control and Prevention (1999) estimates youth in the in the 13-24 age group in the U.S. account for 15% of the reported cases from June 1998 to June 1999. In New Hampshire, from 1981 to 1999 there were 852 cases of full-blown AIDS reported; of these, 41 were reported in 1999 alone. In Grafton County, 12 cases have been reported since 1995 (Adamski, C., 1999).

Local teens were asked "If you have had sexual intercourse, how often do you or your partner use a condom?" Only 45% of sexually active teens said they always did (males, 52% and females, 38%). Figure 5-10 shows the frequency of condom use of sexually active teens on the basis of gender.

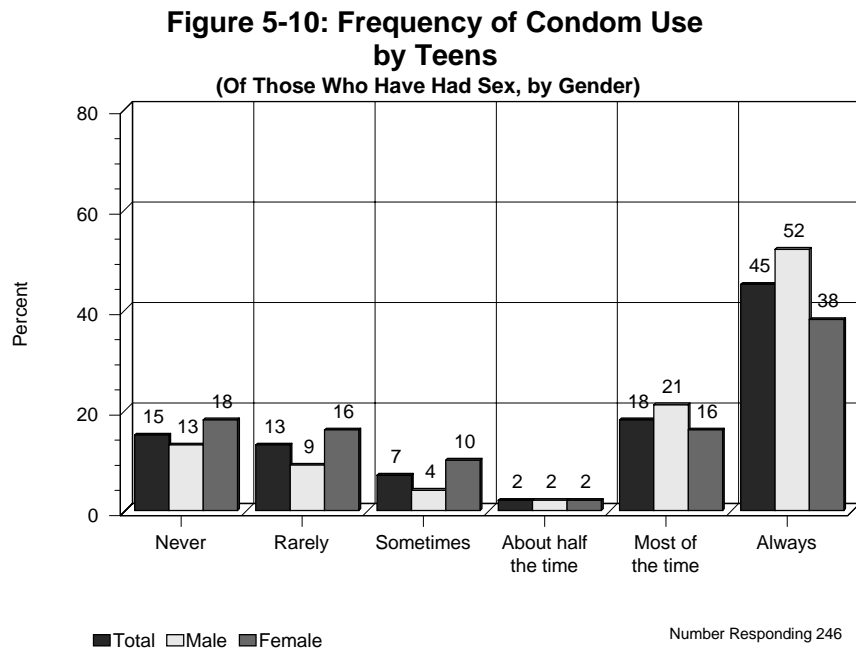
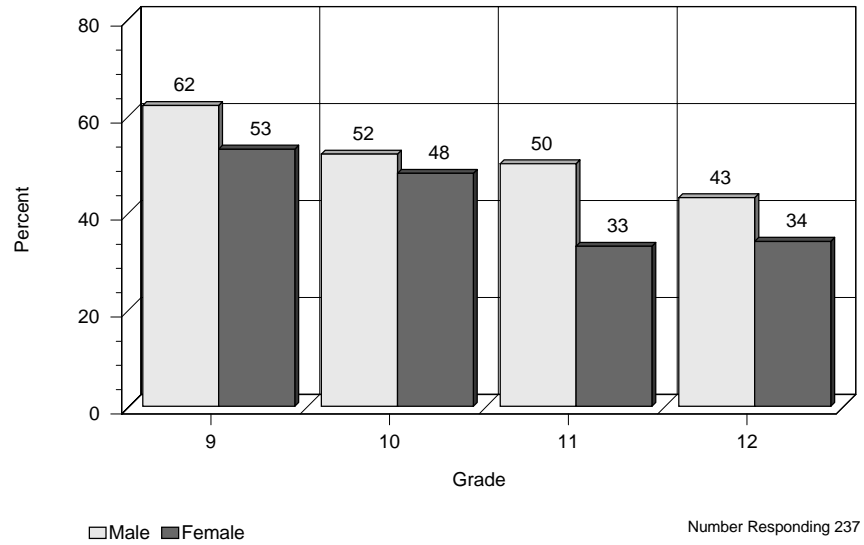


Figure 5-11 shows how often teens "always" use condoms by grade and gender (of those teens who have ever had sex).

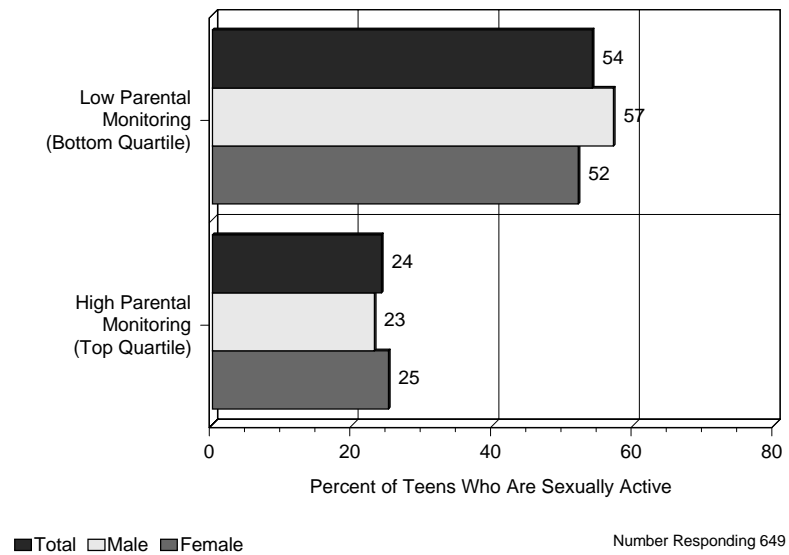
Figure 5-11: Teens Who Always Use Condoms
(Of Those Who Have Had Sex, by Grade and Gender)



Parents' Role in Level of Teen Sexual Activity

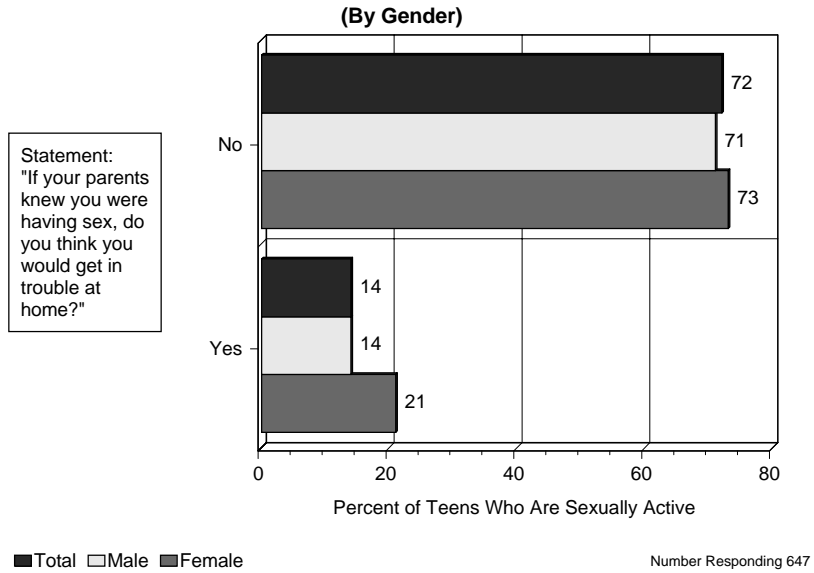
Parental monitoring is an important factor in preventing adolescent sexual activity. Parental monitoring means parents supervise their children or know where they are and what they are doing. Higher levels of parental monitoring are related to lower levels of sexual activity. The level of sexual activity of teens is greater when parents do not supervise them closely. Figure 5-12 shows out of all teens surveyed, teens with high parental monitoring are less likely to have sex (low monitoring, 54%; high monitoring, 24%).

Figure 5-12: Relationship Between Parental Monitoring and Level of Teen Sexual Activity (By Gender)



Another strong parental influence on levels of teen sexual activity is whether or not teens think they will get in trouble if their parents knew they were sexually active. Figure 5-13 shows teens who do not feel they will get in trouble at home are more likely to be sexually active (not get in trouble, 72%; and get in trouble, 14%). Thinking they will get in trouble is strongly related to low levels of teen sexual activity for both males and females.

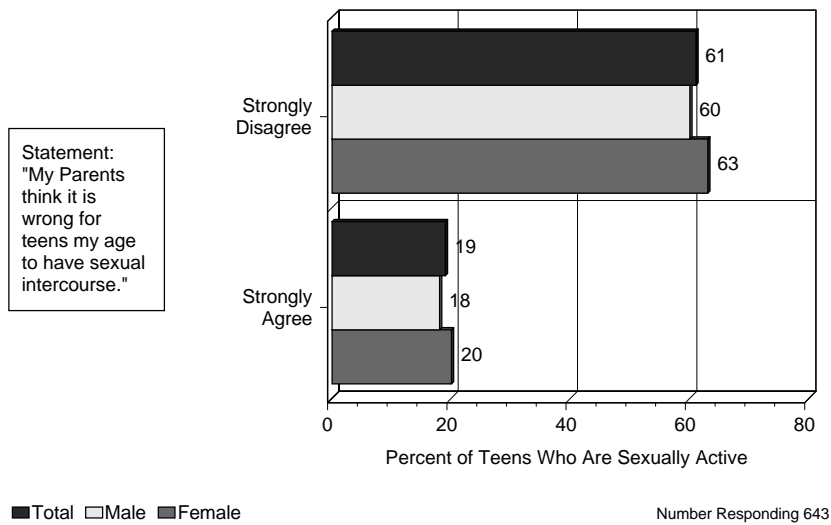
Figure 5-13: Relationship Between Level of Sexual Activity and Thinking They'll Get In Trouble At Home



There is evidence suggesting children who talk with their parents about sexuality and their values regarding it are less likely to be sexually active, if the values parents conveyed discourage early sexual activity. In Figure 5-14, the relationship is shown between teens' perceptions of their parents' values about teen sexual activity and the level of sexual activity on the teens' part. Students who don't believe their parents think it is wrong for them to have sex are three times as likely to engage in sex as are students who believe their parents do think it is wrong for them to have sex (61% vs. 19%).

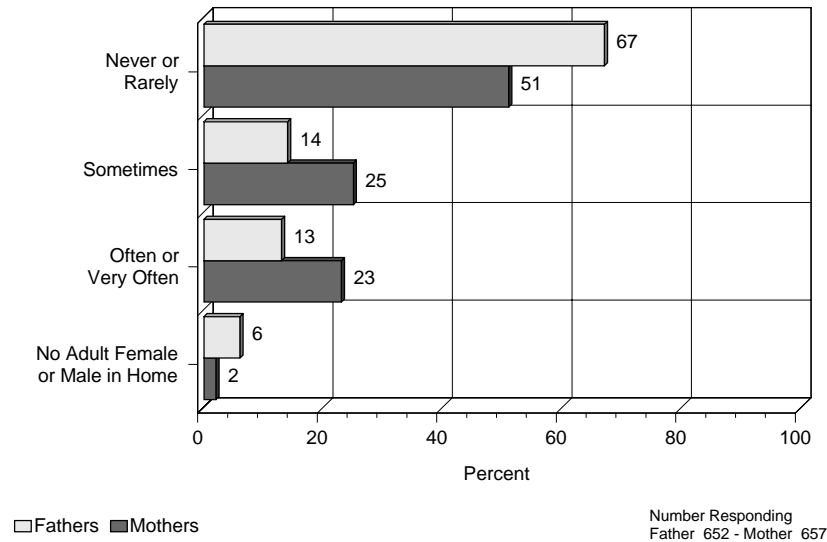
Figure 5-14: Relationship Between Teens' Perceptions of Parental Values and Level of Teen Sexual Activity

(By Gender)



A high percentage of local teens do not have good talks with their parents about sexuality issues. Figure 5-15 presents how often in the past year teens have had good talks with their mothers or fathers about "whether or not it's okay for teenagers to have sex." Overall, 51% of teens have "rarely" or "never" talked with their mothers and 67% "rarely" or "never" talked with their fathers in the past year about this issue.

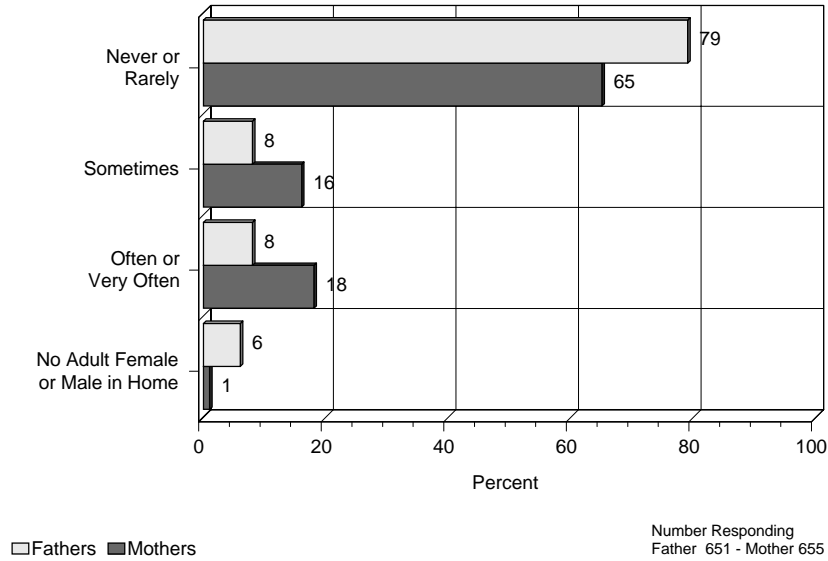
Figure 5-15: Talks With Father or Mother About Whether Or Not It's Okay To Have Sex (In the Past Year)



Some people believe if you talk to teens about sex, you will encourage it by planting ideas in their heads. Contrary to this belief, a study based on TAP data found teens who are sexually active are more likely to be so because they perceive fewer costs, not because they perceive more benefits (Small et al., 1993). In other words, sexually active teens may not be perceiving the consequences realistically. This would suggest that teens need help (information) in seeing the responsibilities and costs that come with sexual intercourse and in making sensible decisions about sexuality.

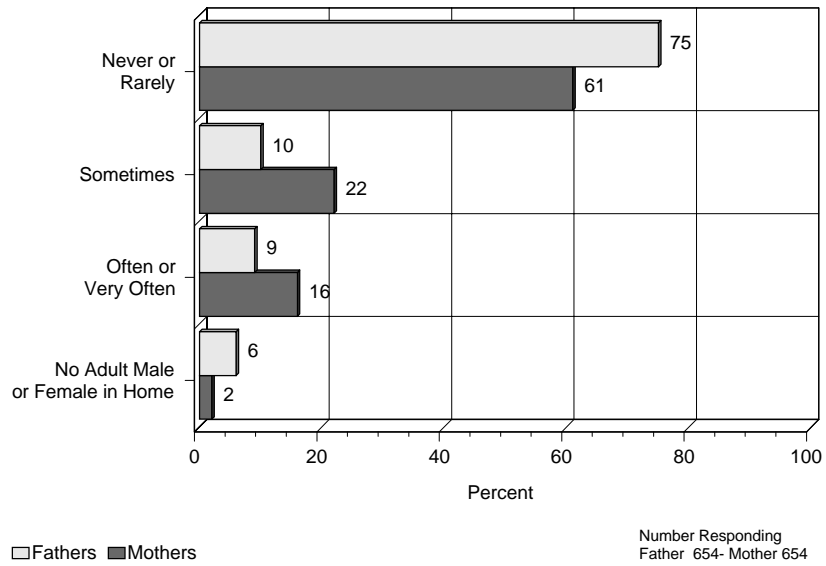
Sixty-five percent (65%) of local teens reported "rarely" or "never" having a good talk with their mother about birth control in the past year, while 79% reported "rarely" or "never" having a good talk with their father. Figure 5-16 shows how often in the past year parents have had a good talk about birth control with their children. These findings indicate the majority of local parents and teens simply do not talk with one another about sexuality issues.

**Figure 5-16: Talks With Father or Mother About Birth Control
(In the Past Year)**



We also asked local teens about the frequency of discussion about AIDS and STDs with their parents. More than 60% of students said they “never” or “rarely” spoke with either of their parents about AIDS or other sexually transmitted diseases. Figure 5-17 shows how often youth spoke to their parents about the issue.

**Figure 5-17: Talks With Father or Mother About AIDS or STDs
(In the Past Year)**



Teenage Pregnancy

Early unplanned pregnancy or parenthood not only affects the future life prospects of the young mother or father, but it also puts the baby at higher risk for both short and long-term health and social problems. How teens perceive the costs of their actions can give us insight into understanding why some teens are sexually active while others are not. If we wish to design programs that prevent or delay the occurrence of sexual intercourse or help teens make responsible decisions about sex, it is critical to understand the consequences teens associate with it.

In 1998 there were 24 live births to mothers 17 years and younger and 54 to mothers 18-19 years of age in Grafton County (note: these numbers reflect only those who *gave birth in* Grafton County) (K. Roos, Bureau of Health Statistics and Data Management, personal communication, April 24, 2000). This is troubling due to increased health risks related to teenage pregnancy and the emotional, social and economic costs of early parenthood. Because "live birth" data does not include the number of miscarriages or induced abortions in the teen population, or births to local teens occurring outside the county, the number of teen pregnancies can be assumed to be higher than the number of live births to teens. Nationally, approximately 47% of all teen pregnancies resulted in live births (Hayes, 1987).

We asked teens what they would most likely do if they got pregnant. Figure 5-18 shows that many teens don't know what they would do, while many would terminate the pregnancy, get married or have the family help them raise the baby. Males and females responded to this question in similar ways. The gender differences were small.

Figure 5-18: What Sexually Active Teens Would Do If They Became Pregnant (By Gender)

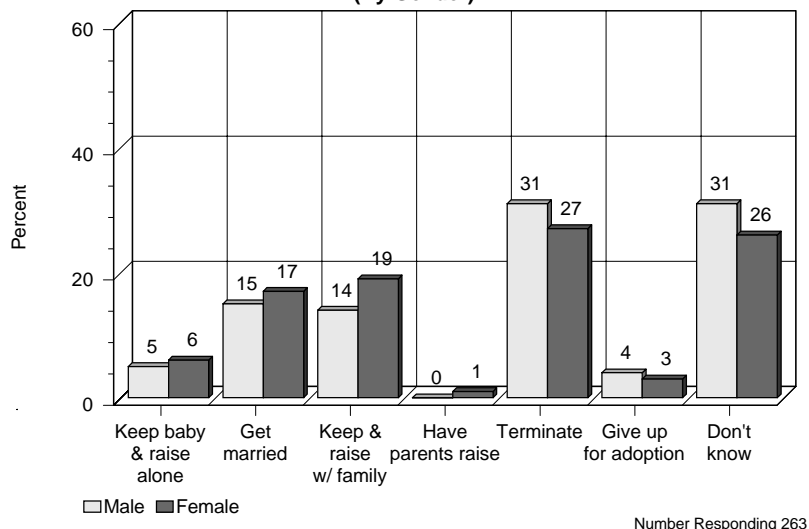
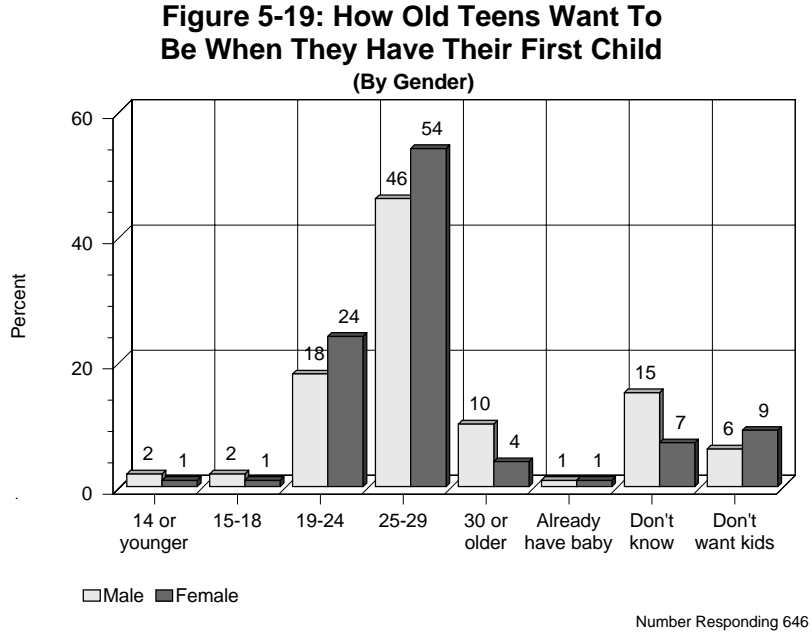


Figure 5-19 shows that most teens want to be in their mid to late twenties when they have their first child. Males were more likely than females to say they don't know when they want children.



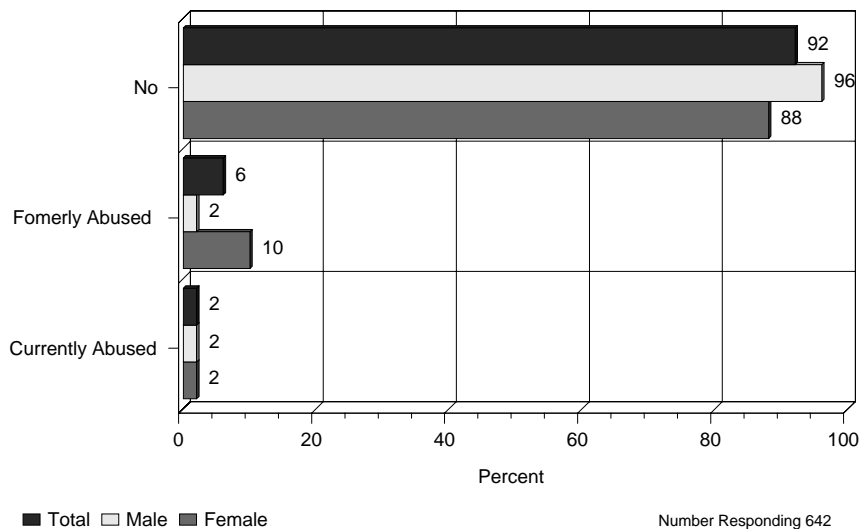
Sexual Abuse

Sexual abuse is defined as when someone in a youth's family or another person does sexual things to the youth or makes the youth do sexual things to them the youth does not want. According to researchers in the field, child sexual abuse is a problem which occurs across all racial, ethnic, and socioeconomic groups (Anderson, Martin, Mullen, Romans & Herbison, 1993; Berenson, San Miguel & Wilkinson, 1992; Cosentino, 1989; Priest, 1992; Roosa & Tein, 1997). The actual prevalence of sexual abuse nationwide is unknown. Nonetheless, it is generally assumed the problem is far greater than one would expect and far greater than statistics presently reveal. There were 1,319 allegations of child sexual abuse in New Hampshire in 1997 (B. Bloom, Department of Children, Youth and Families, personal communication, January 5, 2000).

Youth who are victims of prolonged sexual abuse usually develop low self-esteem, feelings of worthlessness, and an unhealthy perspective on sexuality. They may become withdrawn and potentially suicidal (Facts for Families: Child Sexual Abuse, 1997). Studies show a link between sexual abuse and early onset of voluntary intercourse among females (Butler & Burton, 1990; Roosa & Tein, 1997). However, high levels of parental monitoring and support from at least one parent decreases the risk sexually abused adolescents will develop problem behaviors (Luster & Small, 1997).

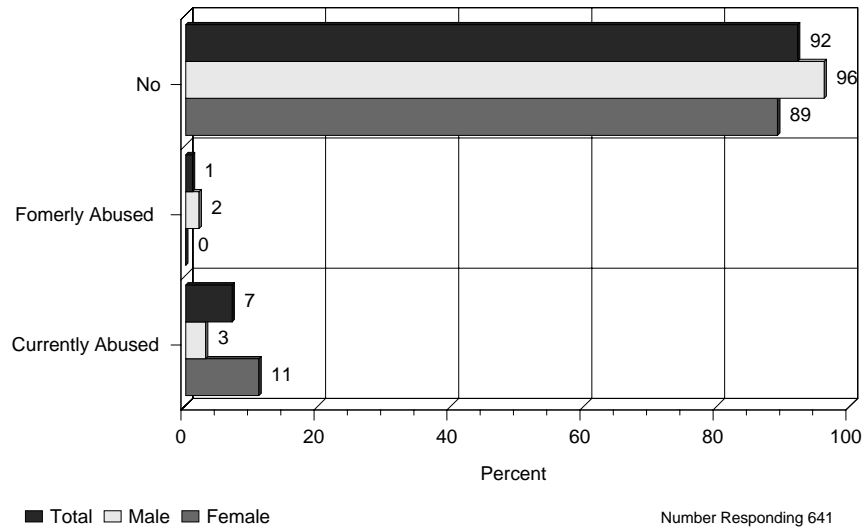
Local youth were asked whether they have ever been sexually abused by an adult. Figure 5-20 shows 8% of students reported forced sexual activity by an adult (males, 4%; and females, 12%). Six percent (6%) of these cases were reported as past occurrences and 2% of our teens reported being abused at the time of the survey.

Figure 5-20: Teens Who Have Been Sexually Abused By An Adult (By Gender)

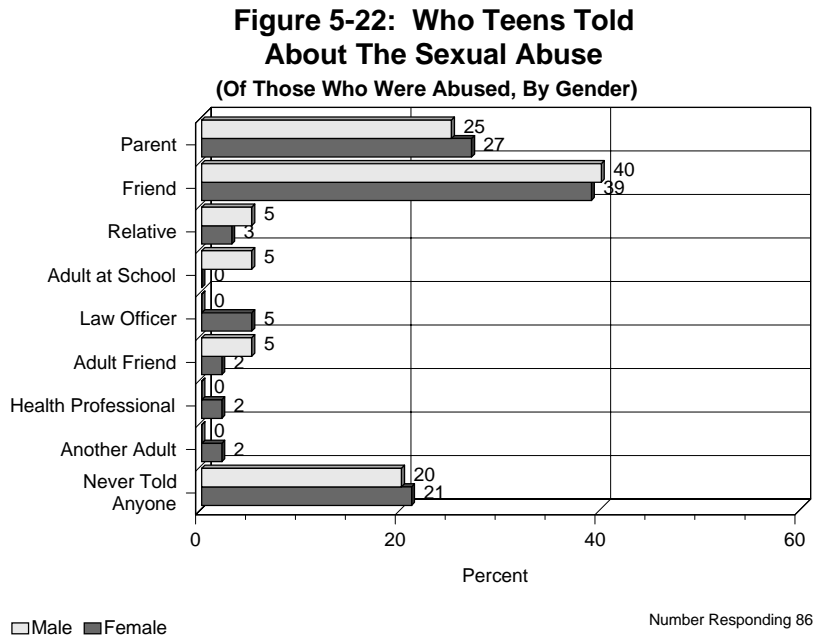


Teens were also asked whether they had been sexually abused by another teen. Figure 5-21 shows 8% of teens (1%, formerly; 7%, currently) have been sexually abused by a teen. More females are currently being abused than males.

Figure 5-21: Teens Who Have Been Sexually Abused By Another Teen (By Gender)

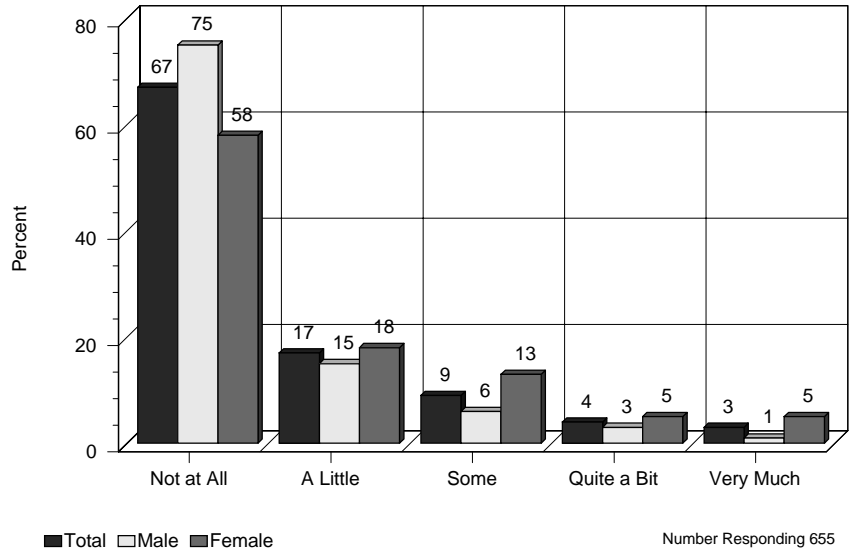


It is important to question teens who have been sexually abused about whether they told anyone about the abuse and who they told. Figure 5-22 shows teens were more likely to tell a friend (males, 40%; and females, 39%). Teens also told parents about abuse (males, 25%; and females, 27%). Gender differences are slight.



Thirty-three percent (33%) of students surveyed reported worrying to some degree about "being pressured into having sex." (males, 25%; and females, 42%). Figure 5-23 shows the total breakdown by gender. Females are more likely to worry about being pressured into having sex than males.

Figure 5-23: Teen Worries About Being Pressured Into Having Sex (By Gender)



Sexual Harassment in School

Local youth were asked if anyone at school (students, teachers, or other school employees) had touched, grabbed, or pinched them in a sexual way or if any of these individuals had made sexual comments, jokes, gestures or looks in the past year. Figure 5-24 shows for both kinds of harassment, females reported a higher rate than males.

Figure 5-24: Incidents of Sexual Harassment in School
(Occasionally or Often, by Gender)

