

## Facts To Share With Your Teens About...

### Sexual Activity

- ◆ Abstinence means saying NO to sexual intercourse. It is the most effective, least expensive way to protect yourself from sexually transmitted diseases and pregnancy. Even if you have had sex before, you can choose to become abstinent. Nationally, more than half of teenagers are virgins until they are at least 17 years old.<sup>1</sup>
- ◆ In the U.S., 4 in 10 of those who had sex before age 15 report having had sex involuntarily.<sup>2</sup>
- ◆ Nationally, one-third of 9<sup>th</sup> grade females and 44% of 9<sup>th</sup> grade males have had sex, compared with 66% of 12<sup>th</sup> grade females, and 64% of 12<sup>th</sup> grade males.<sup>1</sup>
- ◆ In 1998, one-fifth of 9<sup>th</sup> grade females and 28% of 9<sup>th</sup> grade males in Minnesota public schools reported being sexually active. Also in Minnesota, 49% of 12<sup>th</sup> grade females and 51% of 12<sup>th</sup> grade males and females reported being sexually active. Almost half of those 9<sup>th</sup> graders said they had sex only once or twice.<sup>3</sup>
- ◆ “I don’t want to get an STI” and “One or both of my parents would object” are the most common reasons why male students in Minnesota said they are not sexually active. Among female students, “I don’t want to get pregnant” and “I don’t want to get an STI” were the major reasons for abstaining from sex.<sup>3</sup>

### Contraceptive Use

- ◆ A sexually active teenager who doesn’t use contraception has a 90% chance of getting pregnant within one year.<sup>2</sup>
- ◆ Nearly  $\frac{3}{4}$  of teens use some method of contraception – usually a condom – the first time they have sex.<sup>1</sup>
- ◆ Most sexually experienced teenage males use condoms, nearly half do not use them every time they have sexual intercourse. The older a teenage male is, the less likely he is to use a condom every time he has sexual intercourse.<sup>4</sup>
- ◆ Among Minnesota students who reported being sexually active, more 12<sup>th</sup> graders than 9<sup>th</sup> graders report using some sort of contraceptive method during the last time they had sex. However, only about half of these 12<sup>th</sup> and 9<sup>th</sup> grade students spoke to every sexual partner about using protection to prevent STIs, and HIV/AIDS.<sup>3</sup>

### Pregnancy and Birth

- ◆ Approximately 4 in 10 young women in the U.S. become pregnant at least once before turning 20 years old – nearly one million teen women every year.<sup>11</sup>
- ◆ In Minnesota, 7,892 teens under age 20 became pregnant in 1998 (an average of 22 teen pregnancies every day). Teen pregnancies account for 10% of all pregnancies in the state.<sup>5</sup>
- ◆ Of the almost one million teens in the U.S. who become pregnant each year, 52% give birth, 25% choose abortion, and 14% miscarry.<sup>12</sup> One estimate suggests that among unmarried mothers younger than 17, only about 8% of infants are placed for adoption.<sup>6</sup>
- ◆ Teens account for 13% of all births in the country.<sup>2</sup> In 1998, 5,597 teens gave birth in Minnesota. (That’s an average of 15 births per day to women under age 20.)<sup>5</sup>
- ◆ Many of the fathers of children born to teen mothers are older – nearly 40% of those young men who impregnate a minor teen (under age 18) are 20 years old or older.<sup>7</sup>

## Consequences of Teen Childbearing

- ◆ Twenty-five percent of teen mothers have a second child within two years of their first.<sup>2</sup>
- ◆ Teen mothers are less likely to complete high school. Only 1/3 receive a high school diploma. Teen mothers are also more likely to end up on welfare – an estimated 80% of unmarried teen mothers rely on welfare at least sometime in their lives.<sup>11</sup>
- ◆ The sons of teen mothers are 13% more likely to end up in prison while daughters are 22% more likely to become teen mothers, themselves.<sup>8</sup>

## STIs and HIV/AIDS

- ◆ Sexually Transmitted Diseases (STIs) and Human Immunodeficiency Virus (HIV), the virus that causes Acquired Immune Deficiency Syndrome (AIDS), aren't about a certain "type" of person. STIs and HIV are commonly spread through the direct exchange of two people's bodily fluids (e.g., blood, semen, vaginal secretions, and breast milk.) Also, a pregnant woman can pass HIV to her fetus.
- ◆ In the U.S., 1 in 4 sexually active teens become infected with an STI every year.<sup>10</sup> Some common STIs are chlamydia, gonorrhea, genital warts (also known as HPV - human papillomavirus), and herpes. In Minnesota in 1998, teens under age 20 accounted for 38% of all cases of chlamydia, 32% of all cases of gonorrhea, and 11% of all cases of syphilis.<sup>9</sup>
- ◆ As of December 1997, more than 3,130 U.S. teenagers between ages 13 and 19 were diagnosed with AIDS.<sup>10</sup>
- ◆ Treatments for STIs vary. For example, chlamydia is treated with antibiotics; warts must be frozen off with liquid nitrogen; and there is no cure for herpes.
- ◆ Many people who have an STI, like chlamydia or HIV, don't feel sick. In fact, they may have no symptoms at all. The best way to reduce your risk of getting an STI is to use latex condoms with spermicides (jellies and foam containing Nonoxynol-9 that kill sperm and viruses), and to get tested if you have any doubts.

**Remember: ABSTINENCE (not having sexual intercourse) gives you 100% protection against pregnancy and sexually transmitted diseases, including HIV/AIDS. (But be sure no semen, vaginal secretions, or blood are exchanged.) Learn about your options to make the right choices about your future!**

<sup>1</sup> *Youth Risk Behavior Surveillance -- US, 1999*, MMWR vol. 49 no. SS-5, US Dept. of Health & Human Services.

<sup>2</sup> *Not Just for Girls: The Roles of Boys and Men in Teen Pregnancy*, K.A. Moore and A. Driscoll, National Campaign to Prevent Teen Pregnancy, Washington, DC, 1997.

<sup>3</sup> *Minnesota Student Survey*, Minnesota Department of Children, Families, and Learning, 1998.

<sup>4</sup> *Change in Sexual Behavior and Contraception Among Adolescent Males: 1988 and 1995*. F.L. Sonenstein, J.H. Pleck, L. Ku, et al. Washington, DC: Urban Institute, 1996.

<sup>5</sup> Minnesota Department of Health, Minnesota Center for Health Statistics, 2000.

<sup>6</sup> *Dubious Conceptions: The Politics of Teen Pregnancy*, Kristin Luker, Harvard University Press, Cambridge, MA, 1996.

<sup>7</sup> *Whatever Happened to Childhood?* The National Campaign to Prevent Teen Pregnancy, Washington, DC, 1997.

<sup>8</sup> *Kids Having Kids: Economic Costs and Social Consequences of Teen Pregnancy*, B. Wolfe & M. Perozek, Washington, DC, The Urban Institute Press, 1997.

<sup>9</sup> *Sexually Transmitted Diseases: Minnesota Surveillance Report*, Minnesota Department of Health, AIDS/STD Prevention Services Station, 1998.

<sup>10</sup> *HIV/AIDS Surveillance Report*, Centers for Disease Control and Prevention, Atlanta, GA, 1997.

<sup>11</sup> *Facts and Stats on Teen Pregnancy*, National Campaign to Prevent Teen Pregnancy, Washington, DC, 2000.

<sup>12</sup> *National and State-Specific Pregnancy Rates Among Adolescents -- US, 1995-1997*, MMWR vol. 49(27) no. 605-611, US Dept. of Health & Human Services.

**For confidential information about birth control, sexually transmitted diseases, and affordable clinic referrals, call the Minnesota Family Planning and STI Hotline at (800) 78-FACTS**

**NOTE:** Under Minnesota law, a minor does NOT need parental consent to get tested or treated for a pregnancy and STIs [Minn. Stat. §144.343(1)], or to get birth control [Op. Atty. Gen. 494-6-39, 8/25/72].

*Updated July 2000.*