



American Teens' Sexual and Reproductive Health

Sexual Activity

- On average, young people have sex for the first time at about age 17, but they do not marry until their mid-20s. This means that they may be at increased risk for unintended pregnancy and STIs for nearly a decade or longer.
- The proportion of teens having sexual intercourse before age 15 has declined in recent years. In 2011–2013, about 13% of never-married females aged 15–19 and 18% of never-married males in that age-group had had sex before age 15, compared with 19% and 21%, respectively, in 1995.
- In 2011–2013, among unmarried 15–19-year-olds, 44% of females and 49% of males had had sexual intercourse. This level has been steady since 2002.
- In 2006–2010, the most common reason that sexually inexperienced teens aged 15–19 gave for not having had sex was that it was “against religion or morals” (41% of females and 31% of males). The second and third most common reasons were “haven’t found the right person yet” and “don’t want to get pregnant/get a female pregnant.”
- Among sexually experienced teens, 73% of females and 58% of males reported that their first sexual experience was with a steady partner or someone they had been cohabiting with, engaged to or married to, while 16% of females and 28% of males reported having first had sex with someone they had just met or who was just a friend.
- Teen sex is increasingly likely to be described as wanted. In 2006–2010, first sex was described as unwanted by

11% of women aged 18–24 who had had sex before age 20, compared with 13% in 2002. Among men in the same age-group, the share reporting first sex as unwanted decreased from 10% to 5%.

- Three percent of males and 8% of females aged 18–19 in 2006–2008 reported their sexual orientation as lesbian/gay or bisexual. During the same period, 12% of females and 4% of males aged 18–19 reported same-sex sexual behaviors.

Contraceptive Use

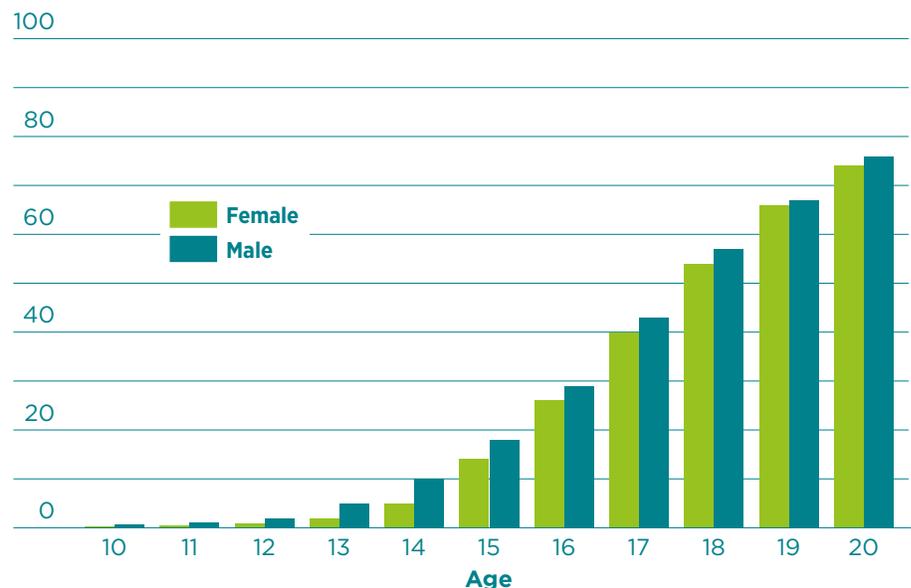
- The proportion of females aged 15–19 who used contraceptives the first time they had sex has increased, from 48% in 1982 to 79% in 2011–2013.

- Adolescents who report having had sex at age 14 or younger are less likely than those who initiated sex later to have used a contraceptive method at first sex, and they take longer to begin using contraceptives.
- The condom is the contraceptive method most commonly used at first intercourse. In 2006–2010, 68% of females and 80% of males reported having used one the first time they had sex.
- Dual method use offers protection against both pregnancy and STIs. In 2006–2010, one in five sexually active females aged 15–19 and one-third of sexually active males in this age-group said that they used both a condom and

U.S. TEEN SEXUAL ACTIVITY

The proportion of youth who have had sex increases rapidly by age.

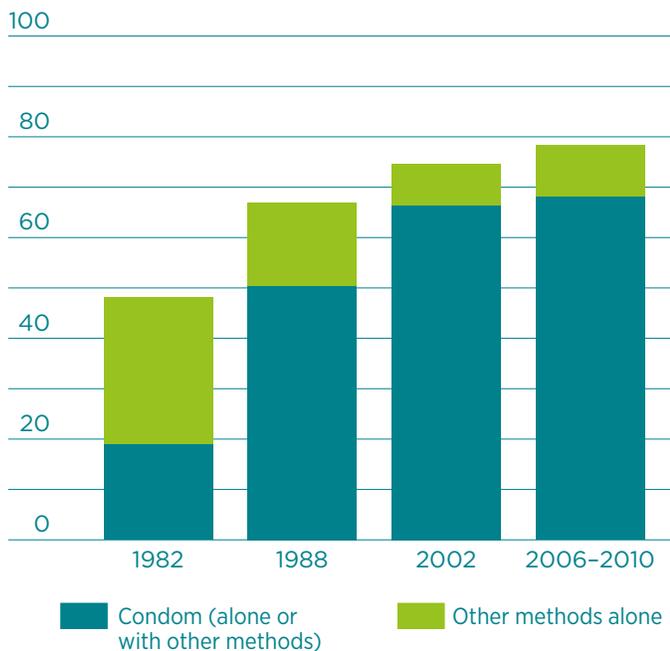
% of adolescents who have had sex



U.S. TEEN CONTRACEPTIVE USE

Contraceptive use at first sex is increasing.

% using contraceptives at first sex



a hormonal method the last time they had sex.

- In 2006–2010, 86% of females aged 15–19 and 93% of their male counterparts reported having used contraceptives the last time they had sex. These proportions represent a marked improvement since 1995, when only 71% of females and 82% of males reported using a method at last sex. However, the proportions were generally unchanged between 2002 and 2006–2010.

- In 2012, 4.3% of female contraceptive users aged 15–19 used a long-acting reversible contraceptive method (IUD or implant) in the last month. This was a slight decrease from 4.5% in 2009, but an increase from 1.5% in 2007 and just 0.3% in 2002.

- In 2006–2010, 14% of sexually experienced females aged 15–19 had ever used emergency contraceptives.

- Teens in the United States and Europe have similar levels of sexual activity. However, European teens are more likely than U.S. teens to use contraceptives and to use the most effective methods; they therefore have substantially lower pregnancy rates.

Access to and Use Of Contraceptive Services

- No state explicitly requires parental consent or notification for teens to obtain contraceptive services. However, two states (Texas and Utah) require parental consent for contraceptive services paid for with state funds.
- Twenty-one states and the District of Columbia explicitly

allow minors to obtain contraceptive services without a parent's involvement. Another 25 states have affirmed that right for certain classes of minors, while four states have no law. In the absence of a specific law, courts have determined that minors' privacy rights include the right to obtain contraceptive services.

- In 2006–2010, 66% of sexually active females aged 15–19 reported having received contraceptive services in the last year; about one-third had received this care from publicly funded clinics, the rest from private health care providers.

- Over one million women younger than 20 were served by publicly supported family planning centers in 2013.

- In 2013, publicly funded family planning services helped teens to avert 260,000 unintended pregnancies, 137,700 unplanned births and 79,100 abortions.

- While school-based health centers are an important source of sexual and reproductive health services for students across the United States, only 37% of these centers dispense contraceptives. Many are prohibited from doing so by state or local policies.

STIs

- Teenagers and young adults aged 15–24 accounted for nearly half (9.7 million) of the 19.7 million new cases of STIs in 2008.
- Human papillomavirus (HPV) infections account for more than two-thirds of STIs diagnosed among 15–24-year-olds each year. HPV is extremely common, often

asymptomatic and generally harmless. However, certain types, if left undetected and untreated, can lead to cervical cancer.

- Two HPV vaccines—Gardasil and Cervarix—are currently available, and both prevent the types of infections most likely to lead to cervical cancer. The Centers for Disease Control now recommends HPV vaccinations for male and female teens, starting at age 11.

- In 2011, 53% of females aged 13–17 had received one or more doses of the vaccine against HPV; 35% had completed the recommended regimen of three doses. Only 8% of males in that age-group had received one or more doses.

- Chlamydia is the next most common STI diagnosed among 15–24-year-olds, accounting for nearly 20% of diagnoses each year. Genital herpes, gonorrhea and trichomoniasis together account for about 11% of diagnoses. HIV, syphilis and hepatitis B are estimated to account for less than 1% of diagnoses.

- Paralleling broader health disparities, rates of diagnosed STIs among 15–19-year-olds differ sharply by race: Among non-Hispanic black teens, rates of diagnosed chlamydia are more than five times those among non-Hispanic white teens, and rates of gonorrhea are more than fourteen times those among non-Hispanic white teens.

- Young people aged 13–24 accounted for about 23% of all new HIV diagnoses in the United States in 2014.

- All 50 states and the District of Columbia explicitly allow minors to consent to STI services without parental involvement, although 11 states require that a minor be of a certain age (generally 12 or 14) to do so. Thirty-one explicitly state that a minor may consent to HIV testing and treatment.

- In 2006–2010, 43% of sexually active females aged 15–19 reported having received counseling or testing for STIs or HIV in the last year.

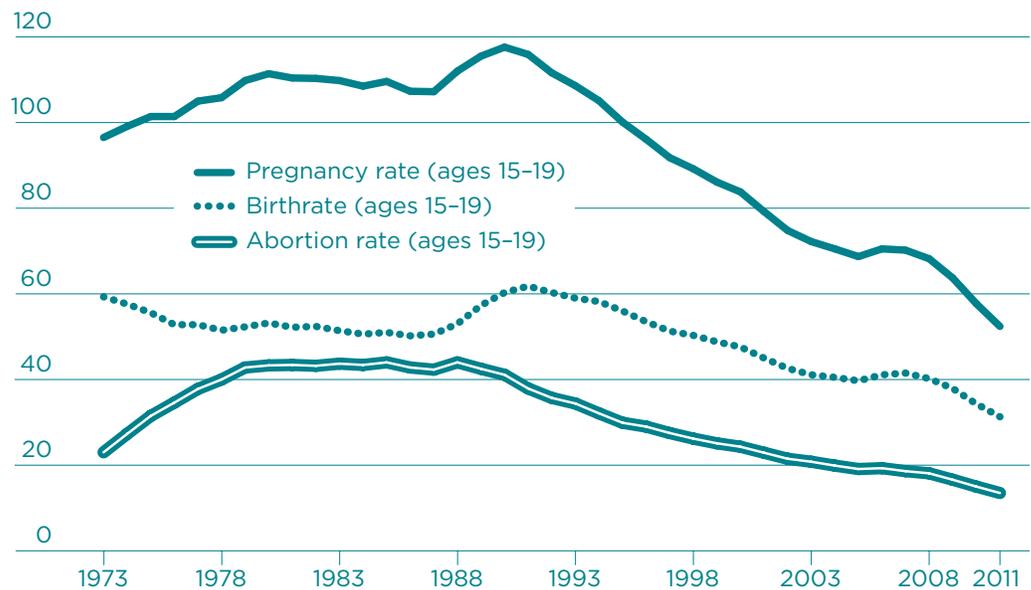
Pregnancy

- In 2011, the teen pregnancy rate hit a record low of 52 pregnancies per 1,000 women aged 15–19, indicating that about 5% of females in this age-group became pregnant. This rate represented a decline of more than 50% from the peak rate of 117 per 1,000, which occurred in 1990.
- In 2011, about 553,000 U.S. women aged 15–19 became pregnant. Seventy percent of teen pregnancies occurred among the oldest teens (18–19-year-olds).
- Pregnancies are much less common among girls younger than 15. In 2011, 4.8 pregnancies occurred per 1,000 teens aged 14 or younger. In other words, fewer than 0.5% of teens younger than 15 became pregnant that year.
- Non-Hispanic black and Hispanic women had the highest teen pregnancy rates in 2011 (93 and 74 per 1,000 women aged 15–19, respectively); non-Hispanic white women had the lowest rate (35 per 1,000). These disparities likely reflect wider health disparities that are closely

PREGNANCIES, BIRTHS AND ABORTIONS AMONG U.S. TEENS

Rates reached historic lows in 2011.

Events per 1,000 women aged 15–19



linked with social, economic and/or environmental disadvantage.

- In 2011, New Mexico was the state with the highest teenage pregnancy rate (72 per 1,000), followed by Mississippi, Arkansas, Louisiana, Texas and Oklahoma. The lowest rate was in New Hampshire (26 per 1,000), followed by Minnesota, Vermont, Massachusetts and Utah.
- Seventy-five percent of teen pregnancies are unintended; teens account for about 15% of all unintended pregnancies annually.
- In 2006–2008, most female teens reported that they would be very upset (58%) or a little upset (29%) if they got pregnant, while the remaining 13% said that they would be a little or very pleased.
- Sixty percent of pregnancies among 15–19-year-olds in

2011 ended in birth, while 26% ended in abortion and the rest in miscarriage.

- The long-term decline in U.S. teen birthrates of 57% from 1991 to 2013 was due primarily to increases in teens' contraceptive use; declines in sexual activity played a smaller role.
- From 2007 to 2012, improvements in contraceptive use accounted for all of the decline in teens' risk of pregnancy.
- Despite having declined, the U.S. teen pregnancy rate continues to be one of the highest in the developed world. It is more than twice the rate in France (25 per 1,000 women aged 15–19 in 2011) and almost twice the rate in Sweden (29 per 1,000).

Childbearing

- In 2011, young women aged 19 or younger had 334,000 births, representing

8% of all U.S. births.

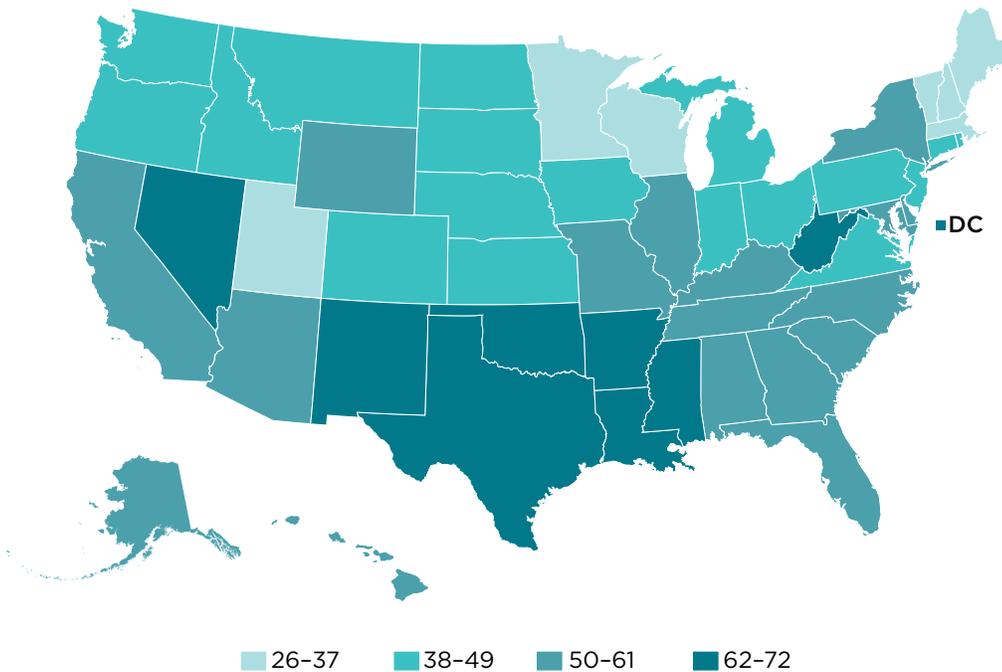
- Most births to teen mothers are first births. In 2011, 18% were second or higher-order births.
- Nearly all teen births are nonmarital—89% in 2011, up from 79% in 2000. Yet, over the last several decades, the share of all nonmarital births that occur to teenagers has been declining, from 52% in 1975 to 18% in 2011.
- In 2011, there were 31 births per 1,000 women aged 15–19; this rate marked a 50% decline from the peak rate of 62 reached in 1991.

Fatherhood

- Most unmarried teen males report that they would be very upset (46%) or a little upset (34%) if they got someone pregnant, while the remaining 19% say that they would be pleased or a little pleased.

The highest rates are found in the South and Southwest.

No. of pregnancies per 1,000 women aged 15–19



- Teen fatherhood rates vary considerably by race. In 2014, the rate among black males aged 15–19 (19 per 1,000) was almost twice that among their white counterparts (10 per 1,000).
- The rate of teen fatherhood declined 54% between 1991 and 2014, from 25 to 11 per 1,000 males aged 15–19. This decline was far more substantial among blacks than among whites (67% vs. 47%), and similar to the decline in the birth rate among teen women.

Abortion

- Women aged 15–19 had more than 142,600 abortions in 2011. About 5% of all abortions were obtained by minors in 2011.
- In 2011, there were 13.5 abortions for every 1,000 women aged 15–19. This is the lowest rate observed

since abortion was legalized in 1973, and 69% lower than the peak rate in 1988 (44.0).

- From 1985 to 2007, the proportion of teen pregnancies ending in abortion declined by one-third, from 46% to 31%. This proportion has remained relatively stable since 2007.
- The reasons teens most frequently give for having an abortion are that they are concerned about how having a baby would change their lives, cannot afford a baby now and do not feel mature enough to raise a child.
- As of May 2014, laws in 38 states required that a minor seeking an abortion involve one or both parents in the decision.

SOURCES

These data are the most current available. References are available in the HTML version: <https://www.guttmacher.org/fact-sheet/american-teens-sexual-and-reproductive-health>.



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