

POLICY BRIEF

PO Box 15216, Lansing, MI 48901
www.michiganfamily.org

The Harmful Consequences of Teen Sex: There's More than Pregnancy and STD's

by Quinn Harr

Summary: Research shows that early sexual activity is not an event isolated from the rest of an adolescent's life. Instead, it is often linked to negative behaviors, such as relationship violence, depression, substance and alcohol abuse, suicidal ideation, and an increase in other risky sexual behaviors. While contraceptive usage may help prevent unwanted pregnancies and deter the spread of sexually transmitted diseases, it can never address the other serious correlates of premature sexual activity.

Is Teen Sex A Problem?

Although sexual activity among teenagers has decreased in recent years, it continues to be a widespread problem. In 2005, 42.2 percent of Michigan students reported having engaged in sexual intercourse, and 27.9 percent of these students reported having four or more partners.¹ In the same study, 33.8 percent of Michigan 9th graders also reported having engaged in sexual intercourse.²

Adolescent sexual activity warrants widespread attention because its physical, emotional, and financial costs are largely preventable. Recent studies indicate that many adolescents who initiate sexual activity experience depression, suicidal ideation, and relationship violence and that these actions and attitudes in turn lead to riskier sexual behavior.³ Other studies link adolescent sexual activity with decreased school performance, lowered self-esteem, and an increase in drug and alcohol usage.⁴

A recent study found that students who engaged in sexual intercourse were more than twice as likely as those who abstained from sexual activity to suffer from partner violence. Moreover, the study found that where partner violence occurred, in more than 75 percent of the cases it was preceded by sexual activity, so that **“engaging in sexual intercourse appears to dramatically increase the risk of partner violence ... rather than the reverse.”**⁵

In addition to increased partner violence, “sexually active adolescents reported high rates of self-harm.”⁶ Sexually experienced students were more than twice as likely to be at risk for both suicidal behavior⁷ and severe depression.⁸ The odds increased dramatically when sexual activity was combined with alcohol or drug use, a common phenomenon among adolescents.⁹

While affecting an individual's men-

tal well-being, adolescent sexual activity is also closely tied to an individual's school performance and self-esteem. Students who perform well academically and have college aspirations are more likely to delay sexual activity.¹⁰ By contrast, a low GPA is associated with both an earlier onset of sexual intercourse¹¹ and increased sexual risk taking.¹² The relationship between adolescent sexual activity and decreased school performance is self-perpetuating, where low academic expectations and performance increase the likelihood of being sexually active,¹³ which in turn further decreases school performance.¹⁴

Furthermore, early sexual involvement, whether actualized or anticipated, has a negative impact on an individual's self-esteem. Students who plan to abstain from sexual activity report higher levels of self-esteem than both those who have engaged in sexual activity and those who

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are planning to do so.¹⁵ While the relationship between self-esteem and sexual activity differs from adolescent males to adolescent females, low self-esteem and depressive symptoms are connected with increased sexual risk-taking in both genders.¹⁶ Although self-esteem levels vary among sexually active adolescents based on their level of experience or protection, students who planned to abstain from sexual activity reported higher levels of self-esteem than did their actualizing or anticipating counterparts.¹⁷

Correlating Destructive Behaviors

There are attempts to explain the sexual activity of some teenagers as a sort of "self-medication," in which these students respond to a negative background by engaging in sexual activity.¹⁸ This explanation is partially correct. Negative outside influences (low income, lack of parental monitoring, difficulty in school, destructive peer relationships) often lead to the adolescent's increased emotional vulnerability, which normally results in increasingly destructive behaviors.¹⁹ Teen sexuality is associated both with negative socio-demographic factors and with low expectations of future success.²⁰ Sexual activity is not a healthy part of the adolescent's growth process; instead, it is often a warning sign for behaviors such as depression and drug and alcohol use. Where early sexual activity is "self-medication" for other problems, that sexual activity is usually more destructive than the problems it attempts to remedy because of the multiple negative associa-

tions accompanying it.

Unlike the relationship between emotional health and adolescent sexual activity, where one factor often precedes the other, multiple studies show that adolescent sexual activity and alcohol and drug use often co-occur.²¹ Although researchers have had difficulty determining the ex-

act nature of the causal relationship between these behaviors, involvement in any one of these activities greatly increases the risk of involvement in another.²² Results from the Youth Risk Behavior Survey (YRBS) indicate that 83 percent of students reporting no substance use also report abstaining from sexual activity.²³ Conversely, 80 percent of cigarette users reported being sexually experienced.²⁴ What is more, of those students who are sexually active, 23.3 percent (nearly one in four) reported that they had combined sexual activity with drug or alcohol use.²⁵ The Michigan YRBS reports similar findings. In 2005, 22.3 percent of Michigan students who were sexually active reported simultaneous drug or alcohol use.²⁶

Moreover, a study published in *Pediatrics* found that non-virginal boys aged 12-16 were "four times more likely to smoke and six times more likely to have ever used alcohol than boys who considered themselves virgins."²⁷ The risks were similar for sexually experienced girls in the same age group. **Non-virginal girls, as compared to their virginal counterparts, were seven times more likely to smoke and ten times more likely to use marijuana.**²⁸ The interrelatedness of drug and alcohol use and adolescent sexual activity is destructive and self-propagating, often leading to "an increased likelihood of sexual risk behav-

iors with progressively more severe substance use."²⁹ This destructive association is heightened the earlier an individual initiates these behaviors.³⁰ For this reason alone, adolescents should be encouraged to abstain from sexual activity.

Lasting Consequences

Research points to a strong negative relationship between premarital sexual activity and long-term economic well-being and health status.³¹ One study found that men who had abstained from sexual activity during adolescence had a greater likelihood of being financially independent, of having a positive financial net worth, and of attaining nearly an additional year of education.³² Similar results were found for women: those who had maintained their virginity throughout adolescence had "a significant advantage in financial net worth at 40, and a very strong likelihood of staying off welfare."³³ In light of this, interventions "effective in helping . . . at-risk teens avoid early sexual involvement may also help them escape the cycle of poverty."³⁴

A considerable difference in emotional stability for women lasts into adulthood. Even after controlling for the pos-

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sibility of adolescent pregnancy, non-virgins were almost twice as likely to experience decreased emotional well-being.³⁵ Although it is difficult to determine causality for outcomes that occur so late in life, the evidence indicates that there is, in fact, a strong causal relationship between adolescent sexual activity and lowered mid-life outcomes.

Studies also show evidence of a link between premarital sexual activity and divorce.³⁶ If adolescent sexual activity affects the emotional well-being of the

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individual, it also hinders the ability of the individual to form healthy and stable relationships later in life. The divorce rate for individuals who were sexually active as adolescents is nearly twice as great as the rate for adolescents who abstained from sexual activity.³⁷

Some suggest that this finding indicates an untraditional view of sexuality and marriage, whereby individuals "who have premarital sex are more likely to have extramarital sex."³⁸ However, other studies find that engaging in untraditional behaviors has the effect of altering an individual's view of those behaviors so that "the dominant effect of entry into a first cohabitation [is an] increased tolerance for divorce."³⁹ The experience of premarital sex and cohabitation detracts from marital stability.⁴⁰

Healthy Lifestyles

Contrary to popular belief, widespread sexual activity among adolescents does not necessarily reflect permissive beliefs about sexual behavior. Although nearly 50 percent of adolescents report being sexually experienced,⁴¹ nearly 80 percent think that adolescents should abstain from sexual activity.⁴² Moreover, almost two-thirds of sexually experienced teens (63 percent) wished they had waited to have sex.⁴³

Without doubt, some adolescents engage in sexual activity because of the untraditional views they hold on the matter. However, it is equally undeniable that past sexual activity by adolescents, even those holding traditional views on the matter, alters their view of sexual responsibility later in life. While older sexually experienced adolescents are more likely to consider casual sex acceptable and to report a higher number of recent sexual partners,⁴⁴ younger adolescents think that

when sexual activity does occur, it should only happen within the context of a long-term, committed relationship.⁴⁵

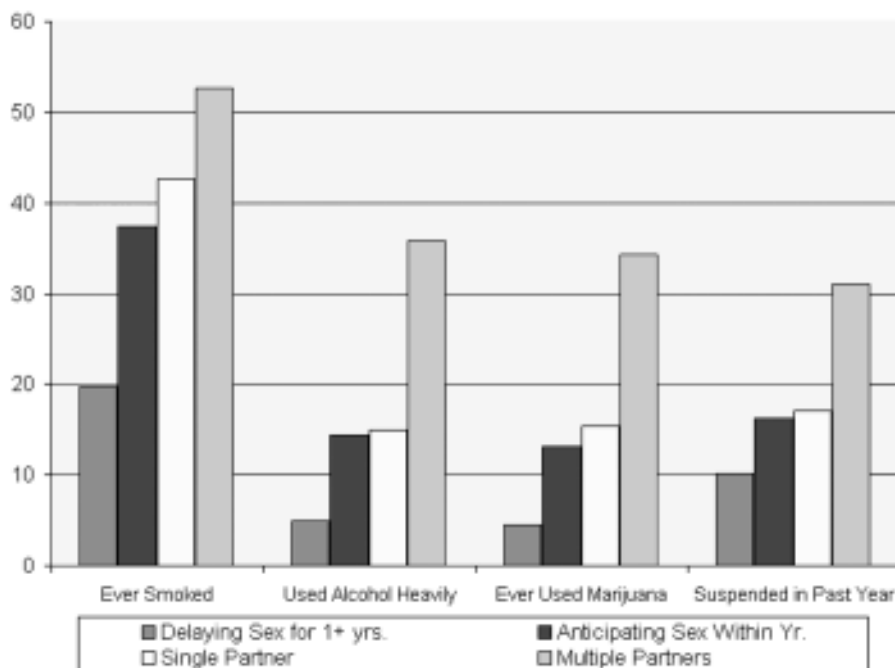
Research demonstrates that the age "at first intercourse has a strong association with the number of sexual partners a person has over a lifetime."⁴⁶ While 74 percent of those sexually active by age 14 had six or more partners, among those who waited until 17 to have intercourse, only 10 percent had six partners.⁴⁷ The longer teens delay their sexual debut, the less likely they are to engage in sexual risk behaviors such as multiple partners. Early age "at first intercourse is a risk marker for sexual risk behavior . . . long after sexual initiation."⁴⁸

Quite simply, for adolescents, postponing intercourse minimizes their exposure to harm. We must send a strong message to youth to avoid all risky behaviors. Drug and alcohol use, depression, suicidal ideation, decreased school performance, relationship violence and adolescent sexual activity are all interrelated. It is important that we educate students about the correlates of

sexual activity and encourage them to abstain from any behavior that has a significant, negative impact on their overall well-being.

While contraceptive usage may prevent some of the negative physical consequences of sexual activity, it fails to address the other important aspects of an adolescent's life. Additional steps should be taken to protect youths from engaging in harmful sexual behaviors. First, parents should be more active in transmitting their values regarding human sexuality to their children. Second, school boards should actively reach out to recruit more parents to be involved in the process of determining a district's sex education curriculum by serving on the district's sex education advisory board. Third, we should seek to increase state and federal funding of abstinence programs. Finally, more studies should be conducted to further determine the effects of early sexual activity on adolescent emotional and relational well-being. These measures will ensure that we are doing our best to protect adolescents from harm and to promote their social, emotional, and physical health.

Percentage of Teens Engaging in Negative Behaviors Based on Sexual Experience



Endnotes

- ¹ Centers for Disease Control and Prevention, "Youth Risk Behavior Surveillance – United States, 2005," *MMWR* 55, no. SS-5 (2006): 79, <http://www.cdc.gov/mmwr/PDF/SS/SS5505.pdf>.
- ² *2005 Michigan Youth Risk Behavior Survey*, Michigan Department of Education, p. 16, http://www.michigan.gov/mde/0,1607,7-140-28753_38684_41316—,00.html.
- ³ Valerie Burge et al., "Drug Use, Sexual Activity, and Suicidal Behavior in U.S. High School Students," *The Journal of School Health* 65, no. 6 (1995): 222-227; Denise D. Hallfors et al., "Adolescent Depression and Suicide Risk: Association with Sex and Drug Behavior," *American Journal of Preventive Medicine* 27, no. 3 (2004): 224-231; Lydia A. Shrier et al., "Associations of Depression, Self-Esteem, and Substance Use with Sexual Risk among Adolescents," *Preventive Medicine* 33 (2001): 179-189.
- ⁴ Carolyn A. Smith, "Factors Associated with Early Sexual Activity among Urban Adolescents," *Social Work* 42, no. 4 (1997): 334-346; Tom Luster and Stephen A. Small, "Factors Associated with Sexual Risk-Taking Behaviors Among Adolescents," *Journal of Marriage and the Family* 56, no. 3 (1994): 622-632; Michael D. Resnick et al., "Protecting Adolescents From Harm: Findings From the National Longitudinal Study on Adolescent Health," *The Journal of the American Medical Association* 278, no. 10 (1997): 823-832; Daniel F. Perkins et al., "An Ecological, Risk-Factor Examination of Adolescents' Sexual Activity in Three Ethnic Groups," *Journal of Marriage and the Family* 60, no. 3 (1998): 660-673.
- ⁵ Christine E. Kaestle and Carolyn T. Halpern, "Sexual intercourse precedes partner violence in adolescent romantic relationships," *Journal of Adolescent Health* 36 (2005): 390.
- ⁶ G.C. Patton et al., "Adolescent suicidal behaviors: a population-based study of risk," *Psychological Medicine* 27 (1997): 722.
- ⁷ Robert A. King et al., "Psychosocial and Risk Behavior Correlates of Youth Suicide Attempts and Suicidal Ideation," *Journal of the American Academy of Child and Adolescent Psychiatry* 40, no. 7 (2001): 843.
- ⁸ Hallfors et al., 228.
- ⁹ *Ibid.*
- ¹⁰ Les B. Whitbeck et al., "Early Adolescent Sexual Activity: A Developmental Study," *Journal of Marriage and the Family* 61, no. 4 (1999): 936, 942.
- ¹¹ Resnick et al., 12.
- ¹² Luster and Small, 630.
- ¹³ Smith, 336, 343.
- ¹⁴ *2005 Michigan Youth Risk Behavior Survey*, Michigan Department of Education, p. 16
- ¹⁵ Daniel J. Whitaker, Kim S. Miller, and Leslie F. Clark, "Reconceptualizing Adolescent Sexual Behavior: Beyond Did They or Didn't They?," *Family Planning Perspectives* 32, no. 3 (2000): 113.
- ¹⁶ Shrier et al., "Associations of Depression, Self-Esteem, and Substance Use," 184-186.
- ¹⁷ Whitaker, Miller, and Clark, 113.
- ¹⁸ Denise D. Halfors et al, "Which Comes First in Adolescence - Sex and Drugs or Depression?" *American Journal of Preventive Medicine* 29, no. 3 (Oct. 2005) p. 163; Stephen A. Small and Tom Luster, "Adolescent Sexual Activity: An Ecological, Risk-Factor Approach," *Journal of Marriage and the Family* 56, no. 1 (1994): 181-192; Whitbeck et al., 934-946; Perkins et al., 660-673.
- ¹⁹ *Ibid.*
- ²⁰ Smith, 334-346.
- ²¹ Lydia A. Shrier et al., "The Association of Sexual Risk Behaviors and Problem Drug Behaviors in High School Students," *Journal of Adolescent Health* 20 (1996): 377-383; John S. Santelli et al., "Multiple Sexual Partners Among U.S. Adolescents and Young Adults," *Family Planning Perspectives* 30, no. 6 (1998): 271-275; Perkins et al., 660-673.
- ²² Perkins et al., 660-673.
- ²³ Richard Lowry et al., "Substance Use and HIV-Related Sexual Behaviors among US High School Students: Are They Related?," *American Journal of Public Health* 84, no. 7 (1994): 1118.
- ²⁴ Kimberly Erickson, "Interconnections: Emerging Patterns in Youth Risk Behavior," *Institute for Youth Development* (June 1998): 3, <http://www.youthdevelopment.org/download/connections.pdf>.
- ²⁵ Centers for Disease Control and Prevention, "Youth Risk Behavior Surveillance," 21.
- ²⁶ *2005 Michigan Youth Risk Behavior Survey*, Michigan Department of Education, p. 16
- ²⁷ DP Orr, M Beiter and G Ingersoll, "Premature sexual activity as an indicator of psychosocial risk," *Pediatrics*, 87, no. 2 (June 1991) p. 141-147 cited in Erickson, 1, 2.
- ²⁸ *Ibid.*, 2.
- ²⁹ Shrier et al., "Sexual Risk Behaviors," 381.
- ³⁰ *Ibid.*, 377-383; Santelli et al., 271-275; Perkins et al., 660-673.
- ³¹ Reginald Finger et al., "Association of Virginity at Age 18 with Educational, Economic, Social, and Health Outcomes in Middle Adulthood," *Adolescent and Family Health* 3, no. 4 (2004): 164-170.
- ³² *Ibid.*, 166.
- ³³ *Ibid.*, 167.
- ³⁴ *Ibid.*, 169.
- ³⁵ *Ibid.*
- ³⁶ *Ibid.*, 164-170; Joan R. Kahn and Kathryn A. London, "Premarital Sex and the Risk of Divorce," *Journal of Marriage and the Family* 53, no. 4 (1991): 845-855; Tim B. Heaton, "Factors contributing to increasing marital stability in the United States," *Journal of Family Issues* 23, no. 3 (2002): 392-410.
- ³⁷ Kahn, 847, 853; Finger et al., 166-168.
- ³⁸ Finger et al., 169.
- ³⁹ Mick Cunningham and Arland Thornton, "The Influences of Parents' and Offsprings' Experience with Cohabitation, Marriage, and Divorce on Attitudes Toward Divorce in Young Adulthood," *Journal of Divorce and Remarriage* 44, no. 1/2 (2005): 123.
- ⁴⁰ Heaton, 392.
- ⁴¹ Centers for Disease Control and Prevention, MMWR "Youth Risk Behavior Surveillance," 19.
- ⁴² National Campaign to Prevent Teen Pregnancy, "Not Just Another Thing To Do: Teens Talk About Sex, Regret, and the Influence of Their Parents," (June 2000): 2.
- ⁴³ *Ibid.*, 1.
- ⁴⁴ *2005 Michigan Youth Risk Behavior Survey*, Michigan Department of Education, p. 16
- ⁴⁵ Suzanne Ryan, Jennifer Manlove, and Kerry Franzetta, "The First Time: Characteristics of Teens' First Sexual Relationships," *Child Trends Research Brief*, no. 16 (2003): 1-7; National Campaign to Prevent Teen Pregnancy, "With One Voice 2002: America's Adults and Teens Sound Off About Teen Pregnancy," (2002).
- ⁴⁶ Child Trends, "Indicators of Children's Well-Being," in *Trends in the Well-Being of America's Children and Youth, 1999*, (Washington, D.C.: U.S. Department of Health and Human Services, 2000), 376, <http://aspe.hhs.gov/hsp/99/trends/contents.htm>.
- ⁴⁷ *Ibid.*
- ⁴⁸ Santelli et al., 274.

Michigan Family Forum
PO Box 15216
Lansing, MI 48901-5216

Phone: (517) 374-1171
email: info@michiganfamily.org
www.michiganfamily.org