

Says: Teen Pregnancy Among Older Teens

Despite improvements in recent years, the United States still has the highest teen pregnancy and birth rates among industrialized countries. Many initiatives—most of them targeting those under age 18—are underway to continue the progress made in recent years. While such efforts are critical to reducing teen pregnancy and parenting, it is equally important to focus intensive prevention efforts on older teens (18- and 19-year-olds) because they comprise nearly two-thirds of teen pregnancies and births each year.

Although less research has been conducted on the consequences of teen pregnancy for 18- and 19-year-olds than for younger teens, data suggest that older teens fare worse than women who delay pregnancy until their early twenties. For example, the rates of low birthweight children born to mothers aged 18-19 are higher than those born to those 20- to 24-year-olds.¹ Also, because the majority of older teens are still in school, a pregnancy can interrupt their education and derail their career plans, just as it does for younger teens. Moreover, in many instances, when an older teen gives birth it is not her first child. In 2002, one in five births to teens were second or higher order births, and nearly one fourth of teen mothers have a second birth before turning 20.² Having several children further increases the likelihood that a teen mother will fail to complete school and secure a job,

and that she will end up on public assistance.

This *Science Says* research brief provides an overview of the demographics of older teens in the United States, information on their pregnancy and birth rates, and trends in their sexual behavior. It concludes with some ideas for parents, policymakers and others who work with older teens on addressing teen pregnancy prevention among this population.

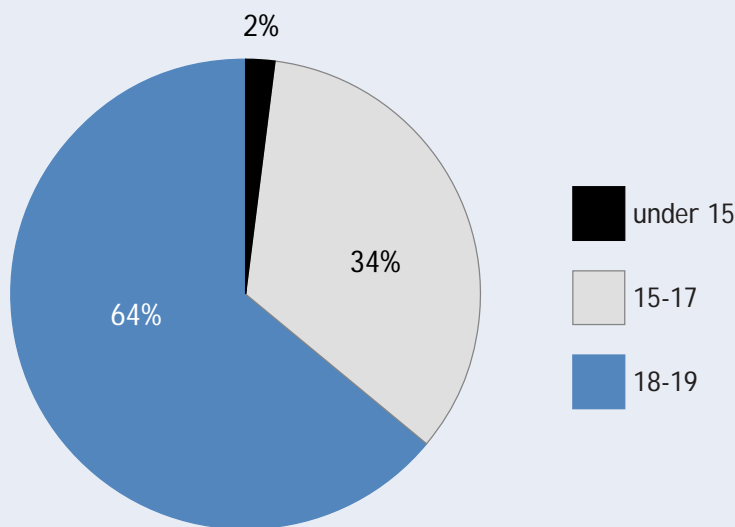
The 18- to 19-Year-Old Population

■ According to the 2000 U.S. Census, there are 6.9 million 18- and 19-year-olds in the United States, comprising a third of youth aged 10-19. This group is evenly split between males and females.³

Older teens comprise nearly two-thirds of teen pregnancies and births each year.

- Nearly two-thirds of 18- to 19-year-olds are in school. One-fifth of them are in high school and almost one half are in college. Of the one-third that are not in school, 25% already have a high school diploma or GED, while 11% dropped out of school.⁴
- About half of 18- to 19-year-olds are employed full- or part-time. An estimated 9% are unemployed and actively looking for work, while 40% are not in the labor force.⁵
- Four percent of 18- to 19-year-olds are, or have been, married: 6% of females and 2% of males.⁶

FIGURE 1: The Majority of Teen Pregnancies Occur Among Girls Aged 18-19



- Fifteen percent of girls and 7% of boys aged 18-19 are teen parents.^{7, 8}

Pregnancy and Births among Older Teens¹

- **Pregnancy and birth rates are much higher for older teens than they are for younger teens.** Sixty four percent of pregnancies and 66% of births to girls under age 20 are to 18- and 19-year-olds (Figure 1).^{1,9} The pregnancy rate (136 per 1,000) and birth rate (73 per 1,000) for girls aged 18-19 are about 3 times as high as the pregnancy rate (48 per 1,000) and birth rate (23 per 1,000) for girls aged 15-17.⁹
- **Pregnancy and birth rates for older teens vary by race/ethnicity.** Among 18- to 19-year-olds, the birth rates are 32 per 1,000 for Asians and Pacific Islanders, 52 per 1,000 for non-Hispanic Whites, 89 per 1,000 for Native

Americans, 110 per 1,000 for non-Hispanic Blacks, and 133 per 1,000 for Hispanics.¹ Pregnancy rates for this age group are 55 per 1,000 for non-Hispanic Whites, 138 per 1,000 for non-Hispanic Blacks, and 153 per 1,000 for Hispanics.¹⁰ (Pregnancy rates are not available for Asians and Pacific Islanders and Native Americans.)

- **Pregnancy and birth rates for girls aged 18-19 have declined less than have rates for younger girls.** Birth rates for older teens declined 23% between 1991 and 2002, compared to declines of 40% for 15- to 17-year-olds. Pregnancy rates for older teens decreased 21% between 1990 and 2000, compared to 35% for younger teens.^{1,9}
- **Births to older teens are less likely to be “firsts.”** Births to girls aged 18-19 are *more* likely to be second or higher order

births (26% vs. 11%) and are *less* likely to be nonmarital (76% vs. 89%), compared to girls 15-17.¹¹

Sexual Activity, Contraceptive Use, and Relationships Among Older Teens

Sexual Experience

- **Sexual experience varies by age.** According to the 1995 National Survey of Family Growth (NSFG), 71% of 18- to 19-year-old girls have had sexual intercourse at least once (are “sexually experienced”), compared to 39% of 15- to 17-year-old girls.⁷ Likewise, according to the 1995 National Survey of Adolescent Males (NSAM), 76% of 18- to 19-year-old boys are sexually experienced, compared to 43% of 15- to 17-year-old boys.⁴ About two-thirds of sexually experienced older teens report currently being in a sexual relationship.^{7,8}
- **Sexual experience varies by race/ethnicity:** Among older teens, 66% of Hispanic girls, 71% of non-Hispanic White girls, and 79% of non-Hispanic Black girls are sexually experienced. Among older teen boys, 75% of non-Hispanic Whites, 79% of Hispanics, and 90% of non-Hispanic Blacks are sexually experienced.^{7,8}
- **Sexual experience is associated with education and work status¹²:** Among older teen girls, 61% of those in high school, 64% those attending college full-time, 76% of those in school elsewhere, and 82% of those

¹ The most recent available birth data are from 2002, and the most recent pregnancy data are from 2000.

Older teen girls who are not working and not in school are most likely to have had sex.

working (but not in school) have had sex. The highest proportion (87%) of older girls who have had sex are those who are neither working nor in school. Among older teen boys, 65% of those in high school, 76% of those attending college full-time, 87% of other students, 84% of those working (but not in school), and 79% of those not working and not in school have had sex (Figure 2).^{7,8}

- Older teen girls give different reasons than younger girls for postponing sex. Of teen girls aged 18-19 who have not had

sex, 46% say the most important reason is that it is against their morals/religion, and 25% say they haven't found the "right" person. Only 14% say it is to avoid pregnancy, 8% for some other reason, and 7% report it is to avoid sexually transmitted diseases (STDs). In comparison, 40% of 15-17 year female virgins cite morals or religion (40%) as the reason for delaying, while 19% say that avoiding pregnancy is the primary reason. Another 17% say not finding the right partner caused the delay, while 14% say that avoiding STDs is the most important reason. Another 8% give other reasons.⁷ (Percentages are not available for boys.)

- Boys have more sexual partners than girls do. On average, sexually experienced older teen girls

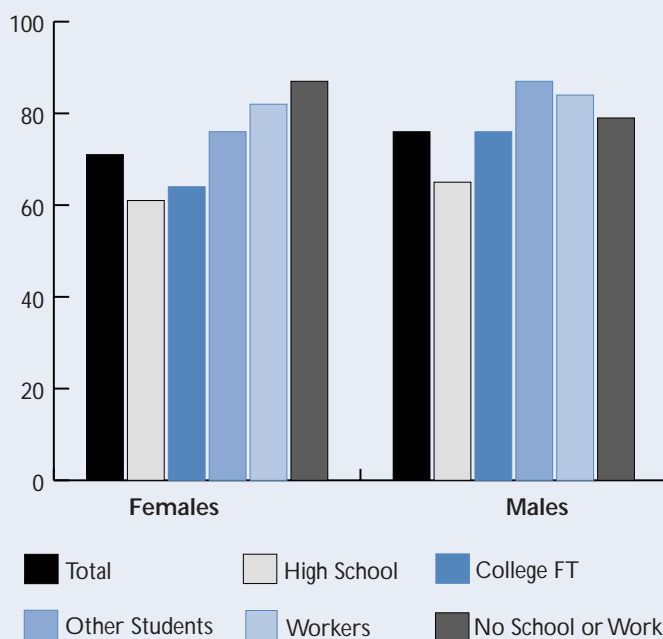
report 3.6 lifetime sexual partners, while boys report 6.7. Thirty percent of sexually experienced girls and 23% of boys report having one sexual partner, 22% of girls and 17% of boys report two partners, 29% of girls and 32% of boys report 3 to 5 partners, and 18% of girls and 28% of boys report six or more partners.^{7,8}

Teen boys use contraception less consistently as they get older.

Contraceptive Use

- Older teens have tried several contraceptive methods. By age 18-19, sexually experienced teens have tried an average of 2.5 different contraceptive methods. Ninety-three percent of sexually experienced 18- to 19-year-olds have used male condoms, while about 60% have used the birth control pill. Nearly half (49%) of girls and 42% of boys report using withdrawal as a method of contraception at least once.^{7,8}
- Teen boys use contraception less consistently as they get older. Among sexually experienced boys, 62% of 15- to 17-year-olds say they always used contraception during the past year, compared with 48% of 18- to 19-year olds.¹³ Over half (55%) of 15- to 17-year old boys report always using condoms when they had sex in the past year, compared with 34% of boys aged 18-19. Consistency of contraceptive use does not differ between older and younger teen girls.^{7,8}

FIGURE 2: Sexual Experience Varies by School and Work Status Among Teens Aged 18-19



- **Contraceptive use is associated with education and work status.** Among 18- to 19-year-old boys, 89% of full-time college students used contraception the last time they had sex, compared with 84% of other students, 75% of high-schoolers, 67% of those working, and 68% of those who were neither in school nor working. Among older teen girls, 83% of full-time college students used birth control at last sex, compared with 73% of those working, 84% of other students, 67% of high-schoolers, and 50% of those neither in school nor working.^{7,8}

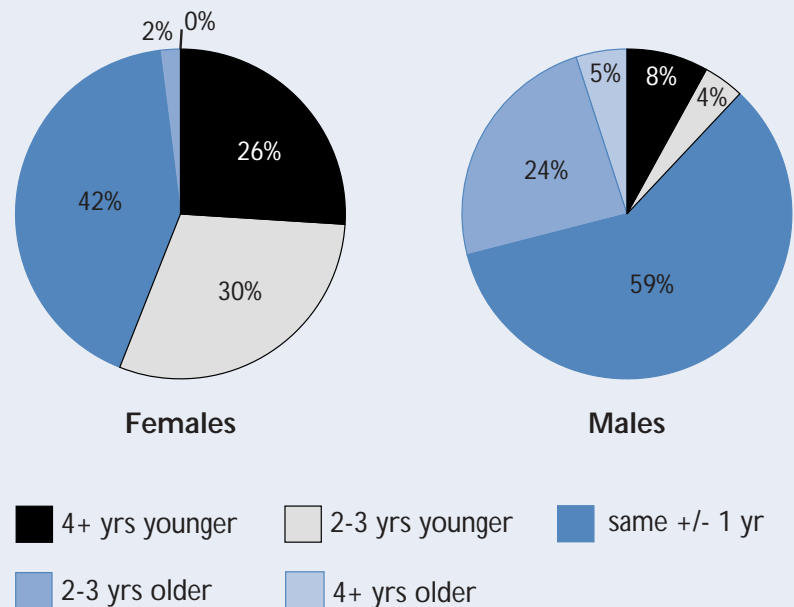
Relationships

- **Older teens' sexual relationships are relatively long lasting.** On average, sexually experienced 18- to 19-year-old boys' most recent¹⁴ sexual relationships had lasted 11 months, and girls' lasted 15 months.^{7,8}
- **Older teen girls are more likely than boys to have sexual partners who are significantly older.** Fully 56% of older teen girls are at least two years younger than their most recent sexual partner. Among older teen boys, only 12% were two or more years younger than their partner. (Figure 3).^{7,8}

What it All Means

Older teens are contributing significantly to the nation's high rates of teen pregnancy and childbearing. Compared to their younger counterparts, 18- and 19-year-olds are more likely to be sexually experienced, and they have far higher rates of pregnancy and births.

FIGURE 3: 56% of Girls and 12% of Boys Are at Least 2 Years Younger Than Their Most Recent Sexual Partner



The sexual behavior of older teens varies by gender, race/ethnicity, and school/work status. For instance, boys are more likely to have had multiple sexual partners than girls; Non-Hispanic Black males and females are more likely to be sexually experienced than Hispanics or Whites; and Hispanic teens are more likely to give birth than teens in other racial/ethnic groups.

The average sexually experienced 18- to 19-year-old has tried more than two methods of contraception. And the motivation to use contraception at all seems tied to several factors. For instance, full-time college students—boys and girls—are among the most likely to use contraception. The older teens who are least likely to use birth control are girls who are neither students nor working, and boys who are just working.

Older teens are at a pivotal point in their lives. Approximately two-thirds of them are still in school, many are beginning their careers, and others are somewhere in between, deciding what to do as young adults. Still others are “disconnected,”—that is they are not in school and not working. Clearly, there is much to be gained by helping them delay pregnancy and parenthood until they are older and more established as adults. The question is how to do so. A review of two key sources of information on teen pregnancy prevention programs—*Emerging Answers* by Douglas Kirby, Ph.D., and Sociometric's Program Archive on Sexuality, Health and Adolescence (PASHA)—points to a few programs that can be used with older teens in high school or college, alternative education settings, vocational training programs, or in a job corps setting, but none that were

designed or evaluated specifically for older teens.

Still, several steps can be taken to help reduce pregnancy and child-bearing among older teens:

- Make teen pregnancy prevention a component of community and state economic development activities to ensure that more young people complete their education and are employed in self-supporting jobs before they become parents.
- Stress the benefits of pregnancy prevention within the context of employment training, workforce development and career planning activities in various settings, including high schools, community colleges and vocational/technical education programs.
- Ensure that pregnant and parenting older teens are connected with health, education and job training programs that enable them to work towards self-sufficiency and avoid a subsequent pregnancy as a teen.
- Researchers, policymakers and program leaders concerned about adolescent well-being should make sure that their efforts address the unique circumstances

of older teens. These include their education and career paths, contraceptive experiences, and relationship patterns.

- Parents/guardians should talk with their older teen children about the benefits of delaying sex, using contraception, and the consequences of too-early child-bearing. Adults should not assume that children are “out of the woods” when they turn 18, particularly considering that the risk of pregnancy actually increases as teens age.

About the Putting What Works to Work Project

Putting What Works to Work (PWWTW) is a project of the National Campaign to Prevent Teen Pregnancy funded, in part, by the Centers for Disease Control and Prevention. Through PWWTW, the National Campaign is translating research on teen pregnancy prevention and related issues into user-friendly materials for practitioners, policymakers, and advocates. As part of this initiative, the *Science Says* series summarizes recent research in short, easy-to-understand briefs.

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About the National Campaign to Prevent Teen Pregnancy

The National Campaign to Prevent Teen Pregnancy is a nonprofit, nonpartisan organization supported largely by private donations. The National Campaign's mission is to improve the well-being of children, youth, and families by reducing teen pregnancy. Our goal is to reduce the rate of teen pregnancy by one-third between 1996 and 2005.

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- 10 The Alan Guttmacher Institute. (2004). *U.S. teenage pregnancy statistics: Overall trends, trends by race and ethnicity and state-by-state information*. New York: Author.
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- 12 The high school category includes students attending grade 12 or lower full-time, attending GED preparatory classes full-time (girls only), and students who have just graduated from high school. "Other students" includes part-time college students; students attending vocational/technical training, part- or full-time; students attending part-time GED preparatory classes (girls only); and a few boys who indicated that they were attending high school part-time. Note that school/work status variable options are mutually exclusive; individuals assigned to any of the three student categories may also have jobs, but are not included in the "worker" category.
- 13 The exact wording of the questions used to calculate this variable is "about what percent of the time did you and she have sex *without* using a condom, the pill or another effective method like a diaphragm or Norplant? (Withdrawal is not an effective method.)"
- 14 This includes ongoing relationships as well as relationships that have ended. For boys, NSAM specifically asks questions about the respondent's last sexual partner. For girls, this variable was created based on respondents' marital, cohabitation, and sexual partner history.

The NSAM dataset used to produce data presented in this publication was made available by the Data Archive on Adolescent Pregnancy and Pregnancy Prevention (DAAPPP), Sociometrics Corporation, 170 State Street, Suite 260, Los Altos, CA 94022-2812, www.socio.com. The survey entitled the *National Survey of Adolescent Males* was conducted by Freya Sonenstein and Leighton Ku of the Urban Institute, Joseph Pleck of the University of Illinois, Urbana, and Charles Turner of the Research Triangle Institute. The original research was supported by the National Institute of Child Health and Human Development (NICHD) grant RO1 HD30681. Funding agencies include NICHD, the Office of Population Affairs, the Centers for Disease Control and Prevention, and the National Institute of Mental Health. Funding support to Sociometrics Corporation for preparing the dataset for public distribution was provided by Grant No. APR 000964-01-0 from the U.S. Office of Population Affairs. The original investigators, funding agencies, and DAAPPP are not responsible for the analyses or interpretations presented here.