Teen Sexual Activity and Its Consequences

Physical Risks At a Glance:
- 1 out of 4 sexually active teens contracts an STD each year.¹
- 30 years ago there were two major STDs, syphilis and gonorrhea, both bacterial & curable.
- Today there are more than 20 STDs, over half of which are viral, incurable and life-long.
- STDs are transmitted by oral-genital contact, vaginal intercourse and anal sex.

Chlamydia
- Infects up to 10% of sexually active adolescents and frequently has no symptoms.²
- This disease is a major cause of pelvic inflammatory disease (PID), infertility and ectopic pregnancies.

HPV – Human Papilloma Virus
- Responsible for 99.7% of all cervical cancer,³ and seen in oral, anal, genital and penile cancers.
- Some strains cause genital warts.
- Most infections are short-lived and self-resolve; approximately 10% of women remain infected at 5 years.⁴
- Study showed that of 608 sexually active females, followed for three years, nearly 60% had HPV infections.⁵
- Always using condoms may cut the chances of getting HPV only up to half⁶ because it is spread by skin-to-skin contact in the entire genital region.

Herpes
- 1 out of 5 Americans over the age of 12 has genital herpes.⁷
- Is viral and causes painful genital blisters.
- Can be spread by skin-to-skin contact for which condoms give little protection.
- Both oral herpes (HSV1) and genital herpes (HSV2) can be transmitted through oral-genital contact.

HIV – Human Immunodeficiency Virus
- Causes AIDS which is incurable.
- Risk of being infected with HIV increases when other STDs are present.
- Condom effectiveness for preventing heterosexual HIV transmission is approximately 85%.⁸

Sex and Teen Pregnancy
- Each year, 19% of teens who are sexually active become pregnant.⁹
- Of school aged Jamaican girls who become pregnant, only 34.4% returned to school.¹⁷
- The mean age at first intercourse for Jamaican girls in age group 15-17 is 14.7 years, for boys, 12.4 years.¹⁷

Life Consequences
The consequences are more than physical. Impact on the emotions and life in general has been documented:
- Sexually active teens are 2 to 3 times more likely to be depressed than teens who are not sexually active.¹⁰
- Girls who are sexually active are nearly 3 times more likely to attempt suicide than those who are not; boys are 8 times more likely.¹¹
- It is recommended that sexually active girls be screened for mental health risks.¹²
- Columbia University (National Center on Addiction and Substance Abuse, www.casacolumbia.org) found that teens, who report that half or more of their friends are sexually active, are themselves:
  - More than 6.5 times likelier to drink
  - More than 5.5 times likelier to smoke
  - 31 times likelier to get drunk
  - 22.5 times likelier to have tried marijuana
What We Know About Condom Protection:

- **PREGNANCY PROTECTION** > The user failure rate, i.e. “real world” use, show condoms fail 15% of the time in the first year of use in committed couples.

- However, the failure rate for young, unmarried, minority women ranges between 36.3% and 44.5%.13

Therefore - It is disingenuous to teach the theoretical rate (quoted as 98-99%) as the actual protection rate.

DISEASE PROTECTION > In July of 2001, a panel including the Centers for Disease Control (CDC) and the National Institutes of Health (NIH) released a report analyzing more than 138 peer-reviewed, published studies on the effectiveness of latex condoms and concluded: Condoms give about 85% protection against the transmission of HIV/AIDS and men receive some protection from gonorrhea transmission from a female partner but there is no scientific evidence that condoms prevention infection for all the other major STDs: HPV, chlamydia, syphilis, chancroid, trichomoniasis and genital herpes. Press release: www.hhs.gov/news/press/2001pres/20010720.html.

A few studies published subsequent to this major analysis show some evidence of risk reduction that could possibly approach 50% for syphilis, gonorrhea, chlamydia, and genital herpes.14

- STDs such as HPV, syphilis and herpes are spread by skin-to-skin contact over the entire genital area. Disease transmission can occur prior to intercourse, during intimate sexual contact.

Conclusion: The promotion of condoms to teens for disease and pregnancy prevention is by far not the best medical advice. Using a strategy of risk reduction is far inferior to risk avoidance. Studies show condoms protect far less than originally expected. Reliance on them can lead to a false sense of security.

The Good News:

- The number of Jamaican females 15-19 years old who have ever had sex has decreased between 1993 to 1997 from 58.9% to 51.4% and specifically for 15-17 year old females, the decrease is 44.1% to 37.7%.17

- 93% of adults and 91% of teens believe that teens should be given a strong message from society not to be sexually active until they are at least out of school.18

- A survey of 90,000 teens19 showed the significant factors associated with delaying sexual debut were: 1) parent-family connectedness; 2) parental disapproval of contraceptive use; 3) a pledge of virginity.

The Solution To the Negative Consequences of Teen Sexual Activity:

- Encourage and empower teens to make the healthiest and safest choices for their lives now and their futures.
- Honor the concept of full disclosure by giving teens accurate information on the effectiveness of disease and pregnancy prevention.
- Strengthen students with educational programs that empower them to eliminate risk-taking behaviors.
- Help those who are sexually active to understand the risks and choose a healthier lifestyle by adopting the option of secondary virginity.
- Teach the setting of personal boundaries, self-restraint and refusal skills needed to achieve these goals.

2. Medical Institute, Sex, Condoms and STDs: What We Now Know, 2003:11.
13. Medical Institute, Sex, Condoms and STDs: What We Now Know, 2003:2-5, 21-32.