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Teen Risk Behavior

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Adolescence can be a difficult time. It is an important time in life for making many decisions. There are a multitude of decisions made during this time including education, friends, dating, and sex. Some of these decisions can affect teens for the rest of their life. For example, research shows that one in four adolescents has an STD³, there are major risks associated with tobacco and drug use, and reports show that risks such as homicide and suicide are very high in the teen years².

However, in the midst of this time of great decision-making, it is also a key time of forming identity, or a person's sense of self. Adolescents seek to know and to be known by others. Though forming identity extends throughout a person's life, the teenage years are a very important time as a teen establishes "who they are."

In addition, an adolescent's brain development is not complete. Often the last part of the brain to develop is the frontal cortex, or the section of the brain that aids in decision-making and impulse control. This may lead many teens—who are trying to learn a new world of complex decisions—to make choices quickly or impulsively without a lot of critical thought.⁶ These decisions can also be influenced by a variety of things including parents, peers, siblings, and sports and extracurricular activities.

This purpose of this fact sheet is to give a small picture of some of the youth risk behavior in 2007. It is organized into sections that examine youth risk behavior in four key domains: tobacco use, violence, drinking and marijuana use, and sexual behavior. Data from the 2007 Youth Risk Behavior Surveillance System (see Box 1 for details) are reported for risk behavior areas by race, ethnicity, and sex. At the end, a general discussion is offered.

Box 1: 2007 Youth Risk Behavior Surveillance System (YRBSS)²

- Investigates the prominent health risk behaviors for students in the United States.
- Questionnaire data compiled by the Centers for Disease Control and Prevention (CDC) in partnership with a representative sample of middle and high schools throughout the United States.
- Sample size of 14,041 students ranging from 11 to 18 years old with a mean age of 16, and 49.4% female.
- Results are weighted to make them representative of the U.S. population.

Tobacco Use

Tobacco use has been shown to have extreme negative effects:

- Health problems from smoking include heart disease, and lung and oral cancer.
- According to the American Academy of Pediatrics, tobacco use as a teenager is associated with lifetime use.
- Teenagers who use tobacco are also more likely to take other risks. One theory is that tobacco is used as a “gateway drug” leading to more serious future drug use.¹

Figure 1 is based on three questions:

—How old were you when you smoked a whole cigarette for the first time?

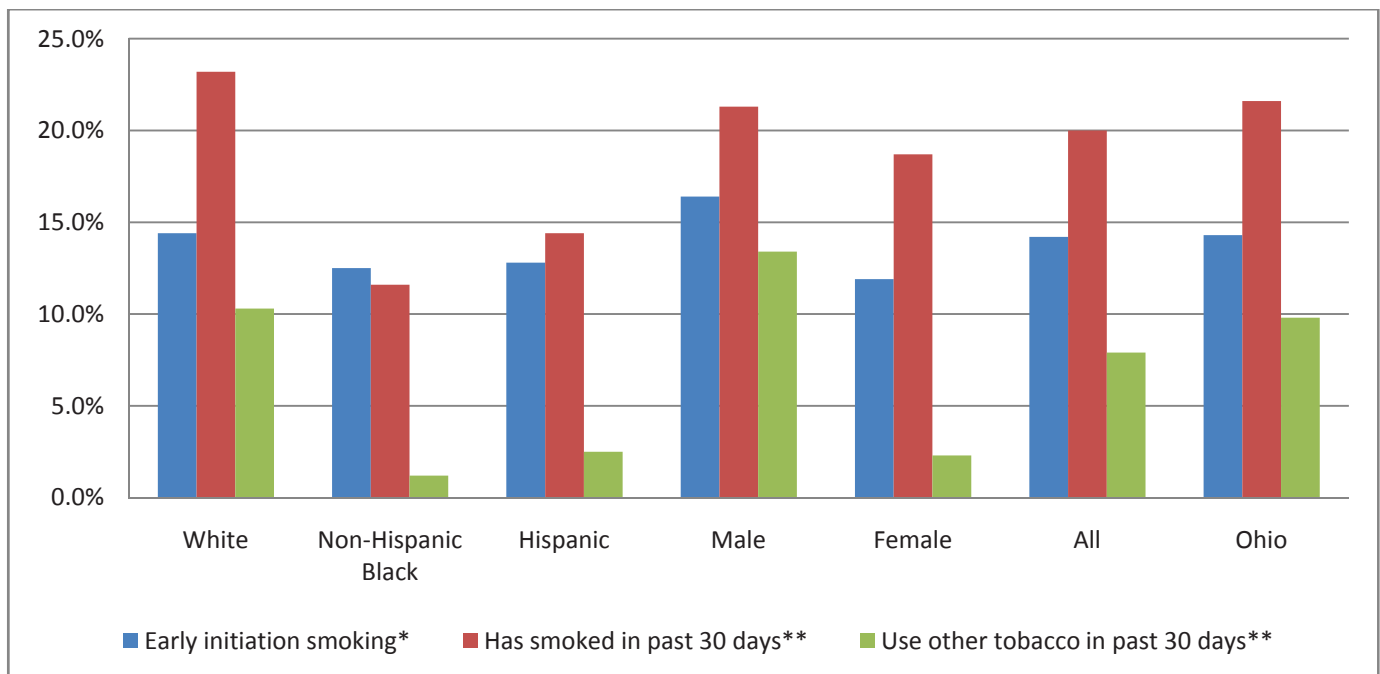
—During the past 30 days, how often did you smoke cigarettes?

—During the past 30 days, how many times did you try chewing tobacco, snuff, or dip?

Findings:

- About 13% of all students in 2007 reported smoking before age 13, nearly 20% smoked in the past 30 days, and 6.5% report using other tobacco products.
- A higher percent of males report engaging in all three measures of tobacco use.
- Racial and ethnic differences in those currently smoking and those using other kinds of tobacco are especially pronounced. The percent of non-Hispanic whites who report current smoking and other tobacco is significantly more than that of non-Hispanic blacks and Hispanics.
- A higher percent of non-Hispanic whites engage in all three indicators of tobacco use.

Figure 1: Tobacco Use



*N= 13581 **N=13463 ***N=13485

Violence

Violent behavior is not a new problem, nor is it unique to this age period. However, during adolescence there tends to be heightened incidences of violence across demographics. Violence can be very dangerous, potentially life threatening to teens. It is problematic in any context, but is especially concerning in a school setting. Here, we look at violence specifically in school.

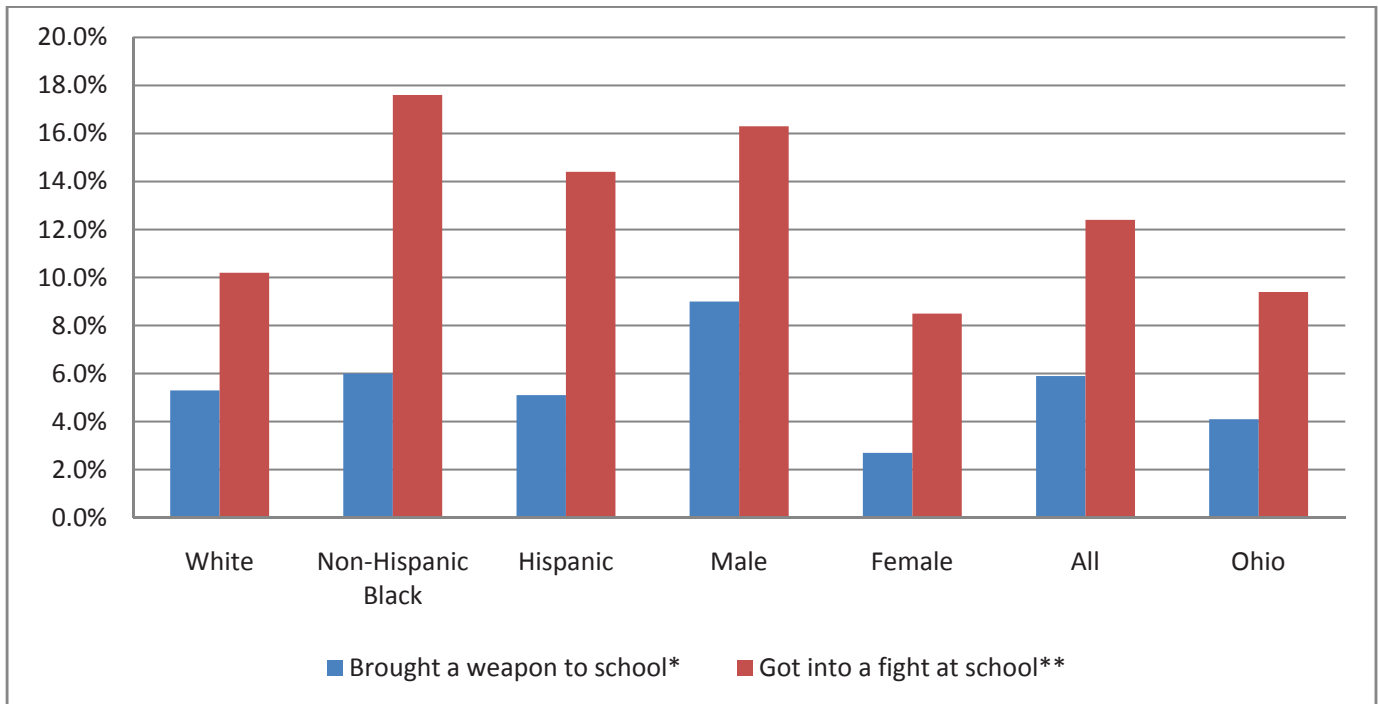
Figure 2 is based on the following questions:

- During the past 30 days, did you carry a weapon such as a gun, knife, or club on school property?
- During the past 12 months, have you been in a physical fight on school property?

Findings:

- Most students do not engage in overt acts of violence at school.
- Males engage in more violent behavior than females. They are more than twice as likely to get in a fight, and are almost five times as likely to bring a weapon to school as females.
- There are some racial and ethnic differences in school violence. The percent who report bringing weapons to school is similar across groups; however, fighting is higher among non-Hispanic blacks.

Figure 2: Violence



*N= 13775 **N=13777

Drinking and Marijuana

Drinking and marijuana use are unsafe for teenagers:

- It has been shown that teens who drink before 15 are more likely to develop dependence than those who start drinking after 21.
- In the three leading causes of death for teenagers—automobile crashes, homicide, and suicide—alcohol is the leading factor in all three.⁸
- Additionally, prolonged alcohol and marijuana use has detrimental health effects.^{5,8}

Figure 3 is based on the following questions:

—How old were you when you had your first drink of alcohol, more than a few sips? (before 13?)

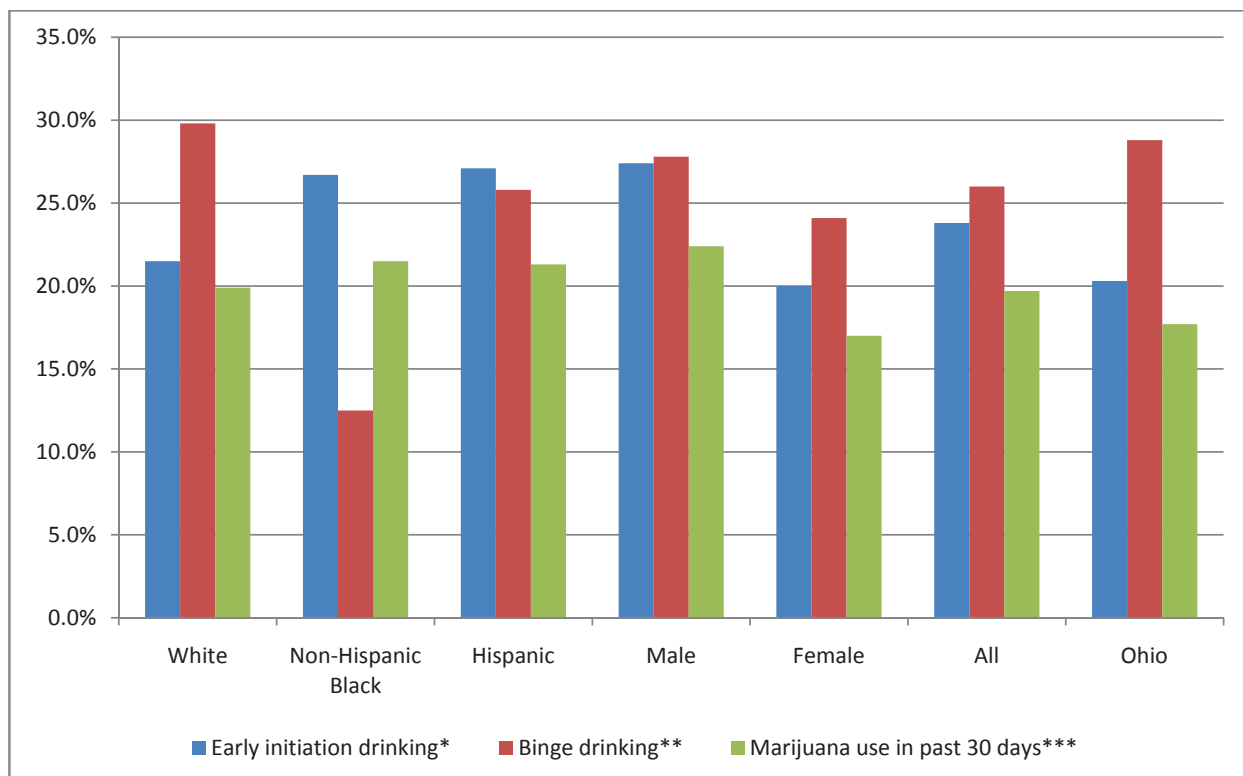
—During the past 30 days, did you ever have more than five drinks in a row, that is, within a couple of hours?

—During the past 30 days, have you used marijuana?

Findings:

- Overall upwards of 20% of students report engaging in all three behaviors.
- More males report engaging in all three risk behaviors than females, which is consistent with earlier trends.
- Marijuana use is almost evenly distributed across whites, blacks, and Hispanics.
- Non-Hispanic blacks are much less likely to binge drink than Hispanic or white teens.
- Non-Hispanic whites represented the lowest amount of early initiation drinking among other males; however, they score the highest in binge drinking.

Figure 3: Drinking and Marijuana



*N=13744 **N=13640 ***N=13707

Sexual Behavior

Lastly, we examined sexual behaviors, which can also be risky for teens:

- One in three girls will get pregnant before they are 20 years old.
- Compared to other industrialized countries, the United States has the highest teen birth rate, having *one and half times* more than the United Kingdom, coming in second.⁹
- Mothers who have children before 18 are less likely to graduate from high school and their children are more likely to grow up in poverty.⁴
- The earlier a person initiates sexual behavior, the more sexual partners they are likely to have. Furthermore, the more sexual partners a person has, the more at risk he or she is for contracting a sexually transmitted disease, with the risks increasing exponentially.⁷

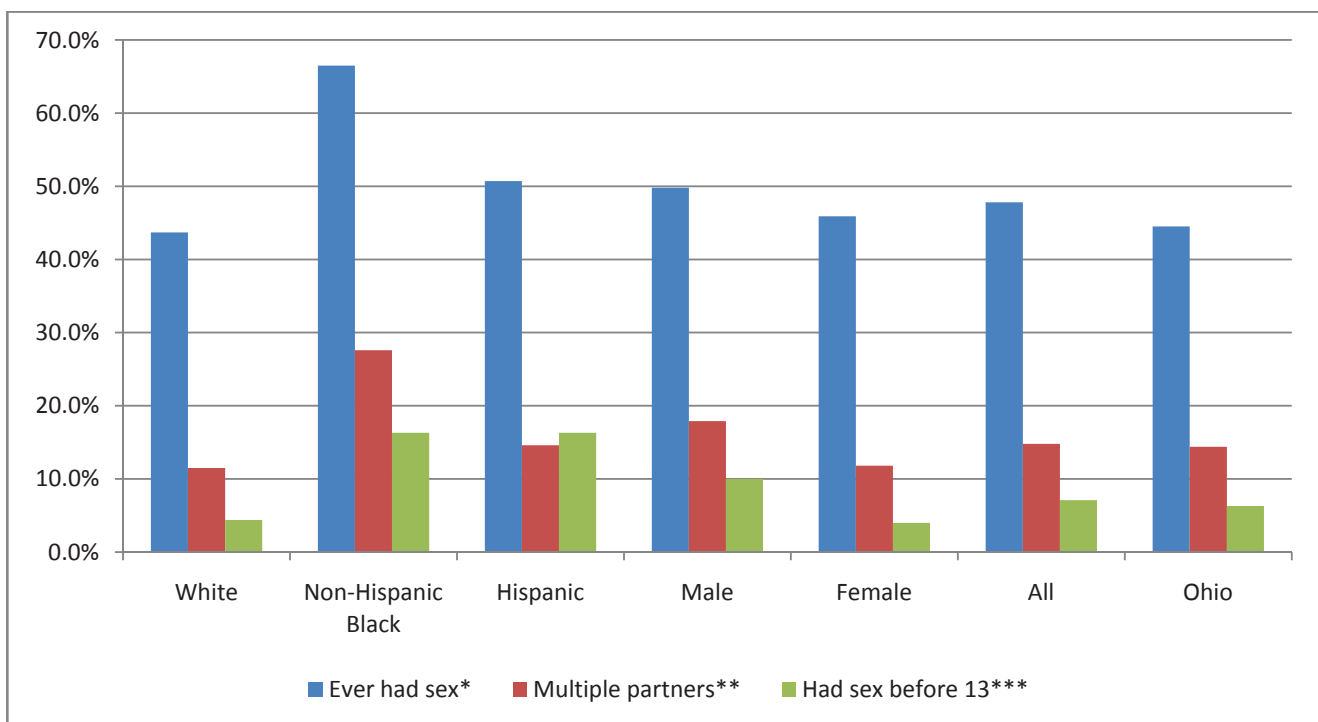
Figure 4 is based on the following questions:

- Have you ever had sexual intercourse?
- During your life, with how many people have you had sexual intercourse? (multiple was more than four)
- How old were you when you had sexual intercourse for the first time? (before 13?)

Findings:

- Almost half of all students in 2007 report ever having sex, 17.1% report four or more past partners, and 7.1% has sex before they were age 13.
- Males and females are almost equally as likely to have had sex, though males are more likely to have sex before the age of 13.
- A higher percent of non-Hispanic blacks report having had sex and having four or more partners.
- Non-Hispanic blacks and Hispanic teens are more likely to have sex before 13.

Figure 4: Sexual Behavior



*N=12955 **N=12907 ***N=12932

What does this mean for families and communities?

As stated in the introduction to each of these risk behaviors, there can be serious, long-term consequences to many of the behaviors ranging from disease, addiction, and health problems, to death. In spite of these risks, we can see from these statistics that youth risk behaviors are common. It can be tempting to take a “not my kid” or “not the youth I work with” mentality—realizing that the problems exist, but failing to face the reality of these behaviors in the population we work with; however, we see that the risks do exist, and they are as real in Ohio as in the rest of the nation. As these statistics show, some risk behaviors vary across gender lines, some across racial lines, but overall these are high numbers for youth.

All populations of youth—rural and urban; white, black, and Hispanic; male and female—are facing these risks and we must be honest with them about the dangers that make these behaviors risky. As parents, mentors, and role models we are charged with helping teens navigate the complicated landscape of risks and their consequences. We must take this role seriously and make sure that they understand the impacts these behaviors can have on their life.

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