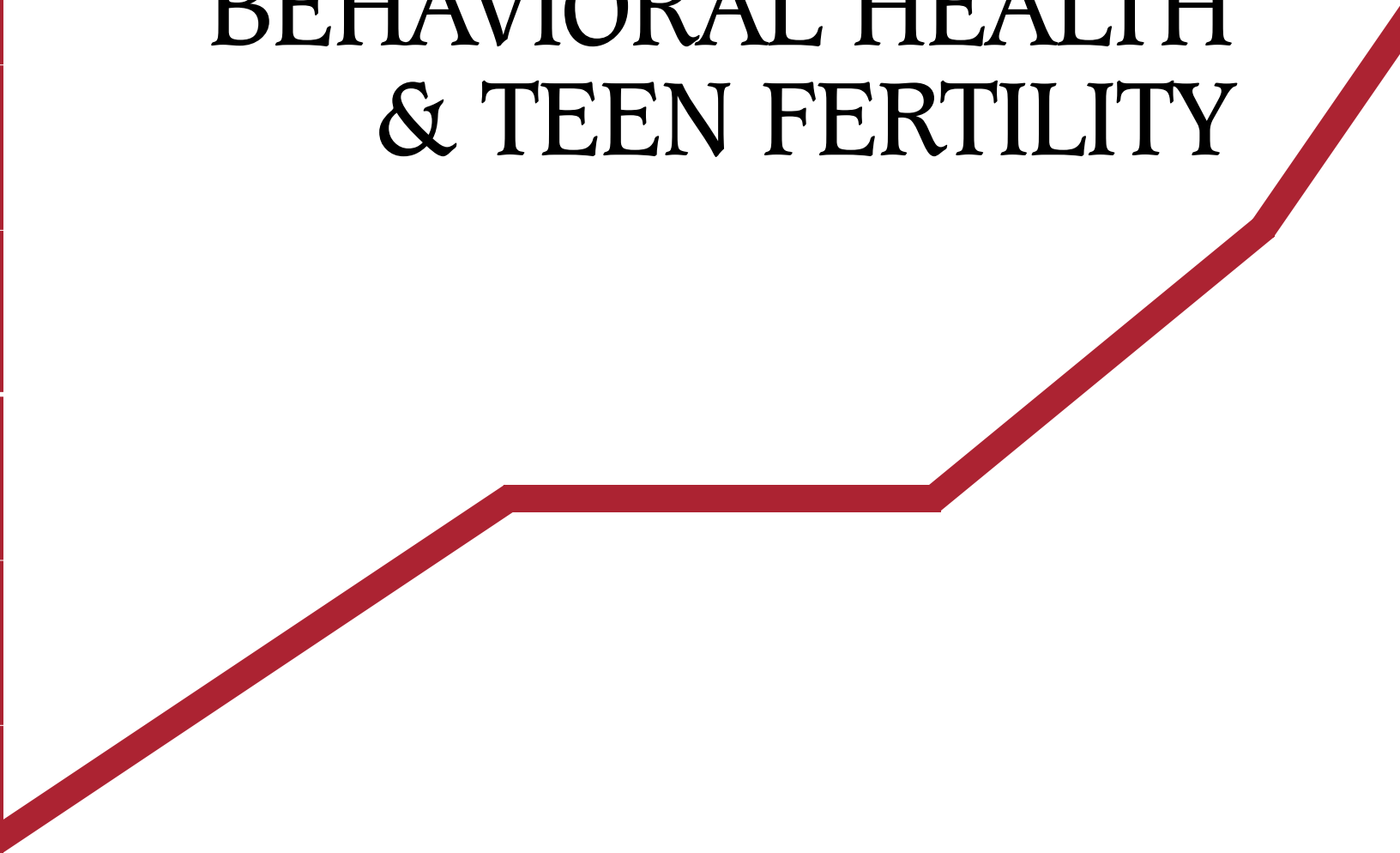


SECTION 4

SOCIAL DEVELOPMENT, BEHAVIORAL HEALTH & TEEN FERTILITY



*SD 1.1***LIFE GOALS: THE PERCENTAGE OF HIGH SCHOOL SENIORS WHO RATED SELECTED PERSONAL AND SOCIAL GOALS AS EXTREMELY IMPORTANT**

The personal and social life goals of high school students reflect their priorities for the future and provide insights into the positive and negative influences in their lives as they make the transition to adulthood. The percentages of high school seniors who rated selected personal and social life goals as extremely important for 1976 through 1995 are presented in Table SD 1.1. Personal goals include being successful at work, having a good marriage and family life, and having lots of money. Social goals include making a contribution to society, working to correct social and economic inequalities, and being a leader in the community.

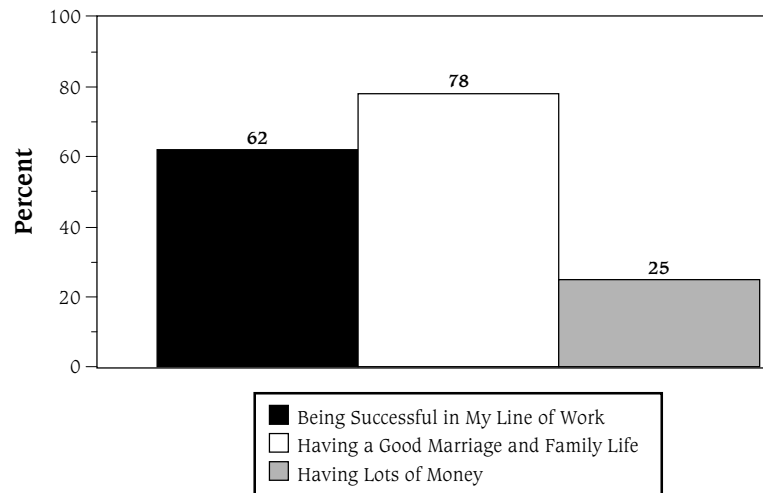
From 1976 through 1995, high school seniors have been fairly consistent in the relative importance they assign to various life goals. Specifically:

- **Having a Good Marriage and Family Life** and **Being Successful in My Line of Work** have been cited most often by high school seniors as being extremely important. By 1995, four out of five high school seniors felt it extremely important to have a good marriage and family life (see Figure SD 1.1.A).
- **Having Lots of Money** and **Making a Contribution to Society** were the next most likely goals to be considered extremely important by high school seniors. The percentage of seniors who find these goals important is considerably lower, hovering between 20 and 30 percent in recent years (see Figures SD 1.1.A. and SD 1.1.B).
- **Working to Correct Social and Economic Inequalities** and **Being a Leader in the Community** are important goals for only small percentages of high school seniors — 10 percent and 12 percent, respectively, in 1995 (see Figure SD 1.1.B).

Differences by Race. In 1995, black students were more likely than whites to view as extremely important issues such as being successful at work (72 percent versus 59 percent), having lots of money (41 percent versus 21 percent), and correcting social and economic inequalities (18 percent versus 8 percent). The two groups appeared equally likely to attach extreme importance to having a good marriage and family life, a rate that has hovered around 75 percent for both races over time.

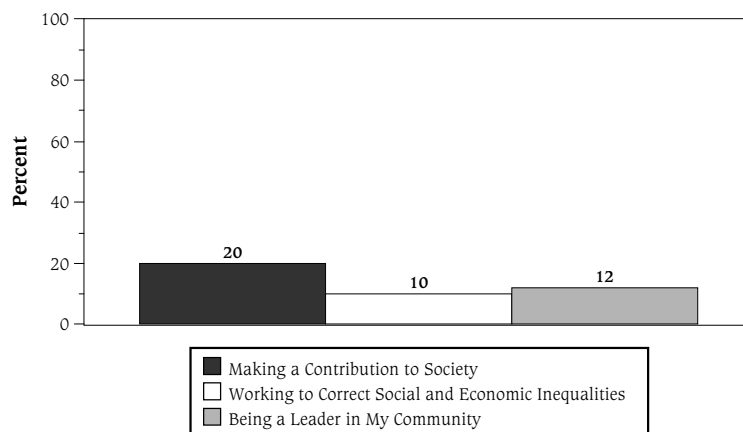
Differences by Gender. Across the six goals, rates vary little between male students and female students with two exceptions. In 1995, females were more likely to indicate that having a good marriage and family life was extremely important (83 percent versus 73 percent), and were less likely to report that having lots of money was an extremely important goal (19 percent versus 30 percent).

Figure SD 1.1.A
Percentage of High School Seniors Who Rate Selected Personal Goals as Being "Extremely Important," 1995



Source: Bachman, J.G., Johnston, L.D., and O'Malley, P.M. "Monitoring the Future: Questionnaire responses from the Nation's High School Seniors, 1995." Questionnaire form 1 numbers, A007A, A007B, A007C. Data based on one of six questionnaire forms with a resulting sample size one-sixth of the total sample size for each year.

Figure SD 1.1.B
Percentage of High School Seniors Who Rate Selected Social Goals as Being "Extremely Important," 1995



Source: Bachman, J.G., Johnston, L.D., and O'Malley, P.M. "Monitoring the Future: Questionnaire responses from the Nation's High School Seniors, 1995." Questionnaire form 1 numbers, A007G, A007H, A007L. Data based on one of six questionnaire forms with a resulting sample size one-sixth of the total sample size for each year.

Table SD 1.1
Percentage of High School Seniors Who Rate Selected
Life Goals as Being "Extremely Important," 1976-1995

	1976	1981	1986	1991	1992	1993	1994	1995
PERSONAL GOALS								
BEING SUCCESSFUL IN MY LINE OF WORK								
Total	53	57	61	62	66	65	63	62
Gender								
Male	53	58	62	60	63	63	61	62
Female	52	57	60	64	69	67	66	62
Race								
White	50	55	58	59	65	62	60	59
Black	67	71	73	75	80	74	79	72
HAVING A GOOD MARRIAGE AND FAMILY LIFE								
Total	73	76	75	76	78	79	76	78
Gender								
Male	66	71	69	71	72	74	70	73
Female	80	82	82	83	84	85	81	83
Race								
White	72	77	76	76	79	79	76	78
Black	75	73	76	78	75	76	72	76
HAVING LOTS OF MONEY								
Total	15	18	27	28	29	26	26	25
Gender								
Male	20	24	34	37	35	32	32	30
Female	11	13	18	19	22	18	19	19
Race								
White	12	15	24	25	24	20	22	21
Black	33	32	38	39	46	45	47	41

Table SD 1.1 Continued
Percentage of High School Seniors Who Rate Selected
Life Goals as Being "Extremely Important," 1976-1995

	1976	1981	1986	1991	1992	1993	1994	1995
SOCIAL GOALS								
MAKING A CONTRIBUTION TO SOCIETY								
Total	18	18	17	21	22	24	24	20
Gender								
Male	16	19	18	20	22	25	23	19
Female	20	17	16	22	23	25	25	21
Race								
White	18	18	16	20	22	24	23	19
Black	23	21	20	27	27	25	29	25
WORKING TO CORRECT SOCIAL AND ECONOMIC INEQUALITIES								
Total	10	10	9	12	15	15	14	10
Gender								
Male	8	9	7	11	14	14	12	9
Female	13	10	11	13	17	16	16	10
Race								
White	8	7	7	10	13	12	11	8
Black	20	21	19	21	26	21	25	18
BEING A LEADER IN MY COMMUNITY								
Total	7	8	9	11	13	13	14	12
Gender								
Male	8	8	11	12	14	17	14	14
Female	6	7	6	10	11	10	13	10
Race								
White	6	7	8	9	11	12	12	10
Black	14	14	12	17	21	19	21	22

Source: Bachman, J. G., Johnston, L. D. & O' Malley, P. M. "Monitoring the Future: Questionnaire Responses from the Nations' High School Seniors" 1976, 1981, 1986, 1991, 1992, 1993, 1994, 1995 Questionnaire Form 1 numbers. A007A, A007B, A007C, A007G, A007H, A007L. Data based on one of six questionnaire forms with a resulting sample size one-sixth of the total sample size for each year.

SD 1.2

PEER APPROVAL

As children grow older, peer relationships come to play an increasingly important role in determining their own behaviors and attitudes.¹ For example, teenagers reporting that a large proportion of their friends are (or would like to be) sexually active are more likely to become sexually active themselves.²

Two measures of potential peer influence are offered here: the percentage of youth reporting that getting good grades has great or very great importance to their peers, and the percentage reporting that peers would disapprove of intentionally angering a teacher in school. Between 1980 and 1995, the percentage of 12th graders reporting that their peers value good grades stayed fairly constant, varying between 44 percent and 49 percent (see Table SD 1.2.A). During that same time period, the percentage reporting peer disapproval of angering a teacher in school decreased from 41 percent in 1980 to 33 percent in 1990, and remained at that level before rising slightly to 36 percent in 1995 (see Table SD 1.2.B).

Differences by Age. Eighth grade students were more likely than either 10th or 12th graders to report that their peers consider good grades to be of great or very great importance in 1995 (55 percent versus 44 and 46 percent, respectively). On the other hand, 12th grade students were more likely than 8th or 10th graders to report peer disapproval of intentionally angering a teacher in school (36 percent versus 22 and 24 percent, respectively).

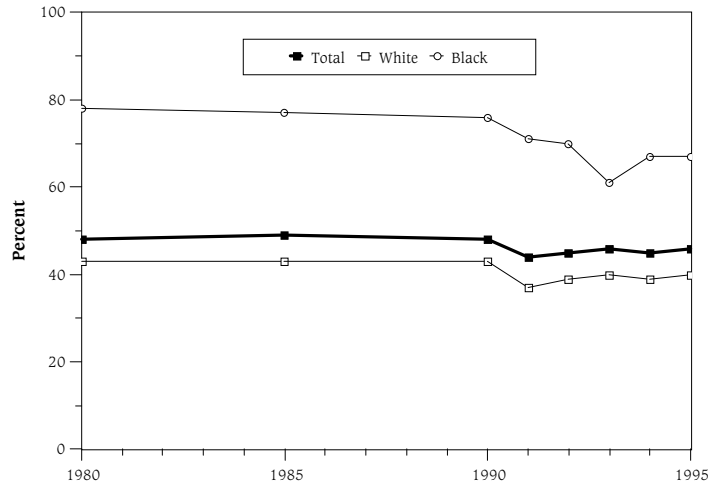
Differences by Gender. Female students in each grade were more likely than males to report that their peers value good grades, and that they would disapprove of intentionally angering teachers. For example, among 12th grade youth in 1995, 50 percent of females and only 41 percent of males reported that peers hold good grades to be of great or very great importance (see Table SD 1.2.A). In that same year, 41 percent of 12th grade females and 32 percent of males reported peer disapproval of intentionally angering a teacher in school (see Table SD 1.2.B).

Differences by Race. For all years for which data are presented, black students in all grades were considerably more likely than their white counterparts to report strong peer support for good grades (see Figure SD 1.2.A). For example, in 1995, 40 percent of white and 67 percent of black 12th graders reported that their peers believed that good grades were of great or very great importance.

¹ Hayes, C.D. *Risking the Future*, p. 105; S.F. Newcomer, M. Gilbert, and J.R. Udry, "Perceived and Actual Same-Sex Behavior as Determinants of Adolescent Sexual Behavior," paper presented at the Annual Meeting of the American Psychological Association, Montreal, Canada 1980. Cited in *Beyond Rhetoric: A New American Agenda for Children and Families, Final Report of the National Commission on Children*, page 351. Washington, D.C.: U.S. GPO.

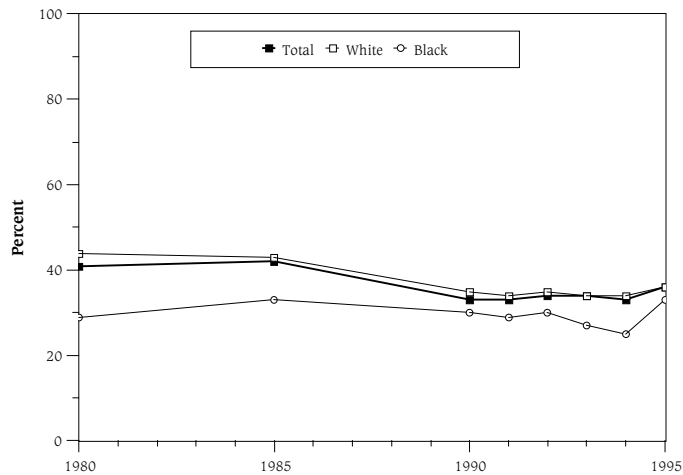
² Hayes, C.D. *Risking the Future*, p. 105; G. Cvetkovitch and B. Grote, "Psychological Development and the Social Problem of Teenage Illegitimacy," in *Adolescent Pregnancy and Childbearing: Findings from Research*, C. Chilman, ed. (Washington, DC: U.S. Department of Health and Human Services, 1980). Cited in *Beyond Rhetoric: A New American Agenda for Children and Families, Final Report of the National Commission on Children*, page 351. Washington, D.C.: U.S. GPO.

Figure SD 1.2.A
Percentage of 12th Grade Students Reporting that Good Grades Have Great or Very Great Importance to Peers, by Race, Selected Years, 1980-1995



Source: Bachman, J. G., Johnston, L. D., O' Malley, P. M. "Monitoring the Future: Questionnaire Responses from the Nation's High School Seniors" 1980, Questionnaire Form 5 number E06D. Bachman, J. G., Johnston, L. D. & O' Malley, P. M. "Monitoring the Future: Questionnaire Responses from the Nation's High School Seniors" 1985, 1990-1995, Questionnaire Form 3 number E06D.

Figure SD 1.2.B
Percentage of 12th Grade Students Reporting Peer Disapproval of Intentionally Angering a Teacher in School, by Race: Selected Years, 1980-1995



Source: Bachman, J. G., Johnston, L. D., O' Malley, P. M. "Monitoring the Future: Questionnaire Responses from the Nation's High School Seniors" 1980, 1985 1990, 1991-1995 Questionnaire Form 1 number D007.

Table SD 1.2.A

Positive Peer Influences: Percentage of 8th, 10th, and 12th Grade Students Reporting that Good Grades Have Great or Very Great Importance to Peers, by Gender and Race/Ethnicity: Selected Years, 1980-1995

	1980	1985	1990	1991	1992	1993	1994	1995
8TH GRADE								
Total	--	--	--	51	52	54	54	55
Gender								
Male	--	--	--	50	50	54	52	52
Female	--	--	--	53	53	54	55	56
Race								
White	--	--	--	47	47	49	49	48
Black	--	--	--	72	72	70	70	72
10TH GRADE								
Total	--	--	--	44	43	39	42	44
Gender								
Male	--	--	--	42	42	36	39	43
Female	--	--	--	46	44	42	45	45
Race								
White	--	--	--	38	38	35	38	39
Black	--	--	--	67	66	59	64	67
12TH GRADE								
Total	48	49	48	44	45	46	45	46
Gender								
Male	48	50	46	41	42	43	44	41
Female	48	48	51	47	48	48	46	50
Race								
White	43	43	43	37	39	40	39	40
Black	78	77	76	71	70	61	67	67

Source: Bachman, J. G., Johnston, L. D., O' Malley, P. M. "Monitoring the Future: Questionnaire Responses from the Nations' High School Seniors" 1980, Questionnaire Form 5 number E06D. Bachman, J. G., Johnston, L. D. & O' Malley, P. M. "Monitoring the Future: Questionnaire Responses from the Nations' High School Seniors" 1985, 1990-1995, Questionnaire Form 3 number E06D. Data for 8th and 10th grades are from unpublished questionnaire responses, Form 1. Data for 8th and 10th grade students based on one of two questionnaire forms with a resulting sample size one-half of the total sample size for each grade in each year. Data for 12th grade students based on one of six questionnaire forms with a resulting sample size one-sixth of the total sample size for each year.

Table SD 1.2.B

Positive Peer Influences: Percentage of 8th, 10th, and 12th Grade Students Reporting Peer Disapproval of Intentionally Angering a Teacher in School, by Gender and Race/Ethnicity: Selected Years, 1980-1995

	1980	1985	1990	1991	1992	1993	1994	1995
8TH GRADE								
Total	--	--	--	26	24	24	21	22
Gender								
Male	--	--	--	22	20	20	18	19
Female	--	--	--	30	27	26	23	24
Race								
White	--	--	--	26	24	24	22	22
Black	--	--	--	23	24	23	22	22
10TH GRADE								
Total	--	--	--	26	24	24	26	24
Gender								
Male	--	--	--	21	19	19	22	21
Female	--	--	--	31	28	28	30	28
Race								
White	--	--	--	27	25	25	26	25
Black	--	--	--	22	21	20	23	19
12TH GRADE								
Total	41	42	33	33	34	34	33	36
Gender								
Male	37	35	29	31	28	30	25	32
Female	46	48	38	37	39	37	40	41
Race								
White	44	43	35	34	35	34	34	36
Black	29	33	30	29	30	27	25	33

Source: Bachman, J. G., Johnston, L. D., O' Malley, P. M. "Monitoring the Future: Questionnaire Responses from the Nations' High School Seniors" 1980, 1985 1990, 1991-1995 Questionnaire Form 1 number D007. Data for 8th and 10th grades are from unpublished questionnaire responses, Form 1. Data for 8th and 10th grade students based on one of two questionnaire forms with a resulting sample size one-half of the total sample size for each grade in each year. Data for 12th grade students based on one of six questionnaire forms with a resulting sample size one-sixth of the total sample size for each year.

SD 1.3

RELIGIOUS ATTENDANCE AND RELIGIOSITY

Research relating religion to children's day-to-day conduct suggests that teens who are religious are more likely to avoid high-risk behaviors.³

The percentage of 12th grade students who report weekly religious attendance has declined from 41 percent in 1976 to 32 percent in 1992, where it has remained constant through 1995 (see Figure SD 1.3). During that same time period, the percentage who report that religion plays a very important role in their lives stayed fairly constant, between 26 percent and 31 percent.

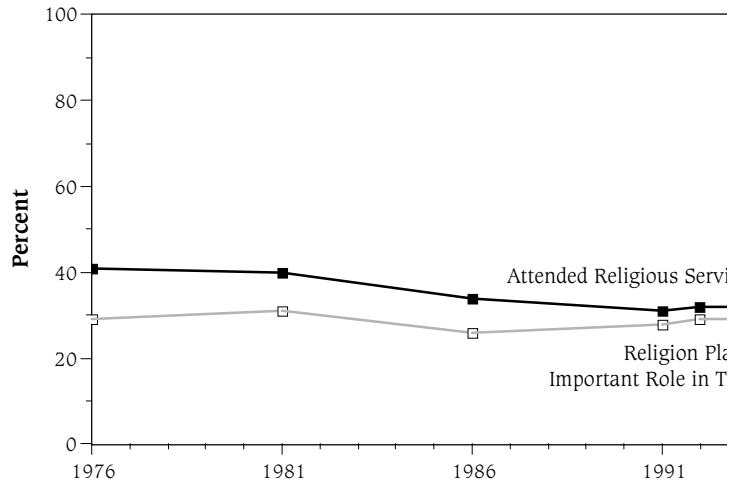
Differences by Age. Data for students in the 8th and 10th grades, available since 1991, indicate that younger teens are more likely to report weekly religious attendance, but are not more likely to report that religion plays a very important role in their lives (see Tables SD 1.3.A and SD 1.3.B). In 1995, 42 percent of 8th graders reported weekly religious attendance versus 37 percent of 10th grade and 32 percent of 12th grade students. During that same year, the percentage reporting that religion played an important role in their lives was about 30 percent for all three grades.

Differences by Gender. Females in all grades are somewhat more likely than males to report weekly religious attendance and that religion plays a very important role in their lives, though in the past two years this difference has not exceeded five percentage points.

Differences by Race. In recent years, black students have been more likely than white students to report weekly religious attendance. The attendance gap grows somewhat larger in the upper grades, to 8 percentage points among 12th graders in 1995 (40 percent for black students versus 32 percent for white students). The difference between black and white students is even more pronounced in their views on the importance of religion in their lives. Black students across grades have consistently been about twice as likely as their white counterparts to report that religion plays a very important role in their lives. For example, in 1995, 52 percent of black 12th graders reported that religion played such a role, compared to 26 percent of white 12th grade students.

³ *National Commission on Children. 1991. Beyond Rhetoric: A New American Agenda for Children and Families. Final Report of the National Commission on Children, page 352. Washington, D.C.: U.S. GPO.*

Figure SD 1.3
Religious Attendance and Religiosity
Among High School Seniors: 1976-1995



Source: Johnston, L.D., Bachman, J.G., O'Malley, P.M. "Monitoring the Future: Questionnaire responses from the nation's high school seniors." 1976, 1981, 1986, 1991, 1992, 1993, 1994, 1995. Ann Arbor, Michigan: Institute for Social Research, The University of Michigan. 12th grade 1976, 1981, and 1986 based on questionnaire forms 1-5; and, 12th grade 1991-1995 based on questionnaire forms 1-6.

Table SD 1.3.A
Percentage of 8th, 10th, and 12th Graders Who Report Regular
(Weekly) Religious Attendance: Selected Years, 1976-1995

	1976	1981	1986	1991	1992	1993	1994	1995
8TH GRADE								
Total	--	--	--	46	43	42	42	42
Gender								
Male	--	--	--	44	41	39	40	40
Female	--	--	--	49	46	45	45	45
Race								
White	--	--	--	48	44	44	44	43
Black	--	--	--	47	46	42	42	46
10TH GRADE								
Total	--	--	--	38	39	40	37	37
Gender								
Male	--	--	--	35	37	37	35	35
Female	--	--	--	42	41	43	39	40
Race								
White	--	--	--	39	39	41	37	37
Black	--	--	--	44	45	44	41	44
12TH GRADE								
Total	41	40	34	31	32	32	32	32
Gender								
Male	36	36	31	28	31	29	30	30
Female	46	44	38	34	34	34	35	35
Race								
White	42	41	35	31	32	31	32	32
Black	37	40	36	38	35	35	39	40

Source: Johnston, L.D., Bachman, J.G., O'Malley, P.M. "Monitoring the Future: Questionnaire Responses from the Nation's High School Seniors." 1976, 1981, 1986, 1991, 1992, 1993, 1994, 1995. Ann Arbor, Michigan: Institute for Social Research, The University of Michigan. Data for 8th and 10th grade 1991-1995, from unpublished questionnaire responses, forms 1 and 2; 12th grade 1976, 1981, and 1986 based on questionnaire forms 1-5; and, 12th grade 1991-1995 based on questionnaire forms 1-6.

Table SD 1.3.B
Percentage of 8th, 10th, and 12th Graders Who Report that Religion Plays a
“Very Important” Role in Their Lives: Selected Years, 1976-1995

	1976	1981	1986	1991	1992	1993	1994	1995
8TH GRADE								
Total	--	--	--	29	27	30	30	30
Gender								
Male	--	--	--	27	26	27	29	28
Female	--	--	--	31	28	32	32	32
Race								
White	--	--	--	26	23	26	26	26
Black	--	--	--	46	46	42	47	45
10TH GRADE								
Total	--	--	--	29	28	29	28	29
Gender								
Male	--	--	--	26	26	26	24	26
Female	--	--	--	31	29	31	32	31
Race								
White	--	--	--	24	24	26	24	25
Black	--	--	--	52	50	50	48	49
12TH GRADE								
Total	29	31	26	28	29	29	30	30
Gender								
Male	24	25	23	24	26	26	27	27
Female	34	36	30	31	33	33	32	33
Race								
White	26	27	23	24	25	24	26	26
Black	51	51	51	50	51	51	49	52

Source: Johnston, L.D., Bachman, J.G., O'Malley, P.M. "Monitoring the Future: Questionnaire Responses from the Nation's High School Seniors." 1976, 1981, 1986, 1991, 1992, 1993, 1994, 1995. Ann Arbor, Michigan: Institute for Social Research, The University of Michigan. Data for 8th and 10th grade 1991-1995, from unpublished questionnaire responses, forms 1 and 2; 12th grade 1976, 1981, and 1986 based on questionnaire forms 1-5; and, 12th grade 1991-1995 based on questionnaire forms 1-6.

SD 1.4

VOTING BEHAVIOR OF YOUNG ADULTS

Voting is a seminal act of citizenship in a democracy. Measures of the voting behavior of young adults may be seen as indicators of the level of youth commitment to becoming actively involved in the democratic process.

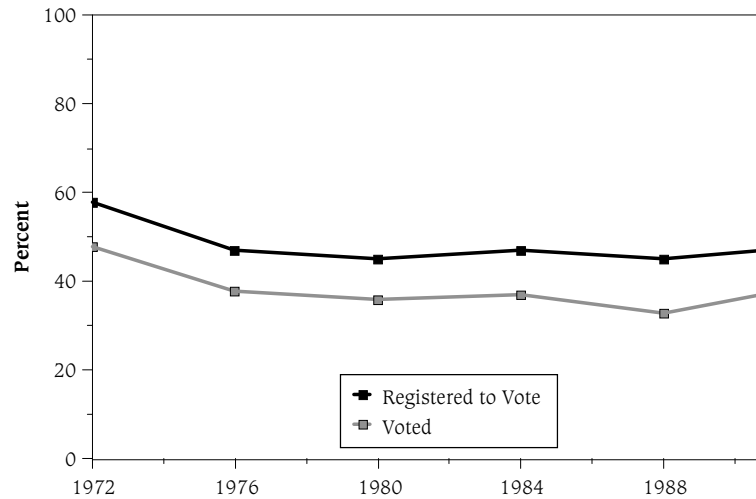
Rates of voter registration and actual voting among 18- to 20-year-olds during presidential election years declined between 1972 and 1976, and have stayed rather flat through 1992 (see Table SD 1.4.A). In 1972, 58 percent of young adults ages 18-20 registered to vote, and 48 percent actually voted. By 1992, 48 percent had registered to vote, and 39 percent had voted (see Figure SD 1.4.A).

Differences by Gender. Rates of voter registration and voting are modestly higher among women both over time and within racial and ethnic groups. For example, in 1992, 50 percent of females and 47 percent of males ages 18-20 registered to vote.

Differences by Race and Ethnicity. Hispanic young adults are by far the least likely to register and to vote. In 1992, only 23 percent were registered, and 16 percent voted. Comparable numbers for blacks are 43 percent registered and 32 percent who voted. Whites were the most likely to register (51 percent) and to vote (41 percent) (see Figure SD 1.4.A). Since 1972, the percentage of Hispanic young adults who voted in presidential election years has declined by almost one half, from 30 percent to 16 percent.

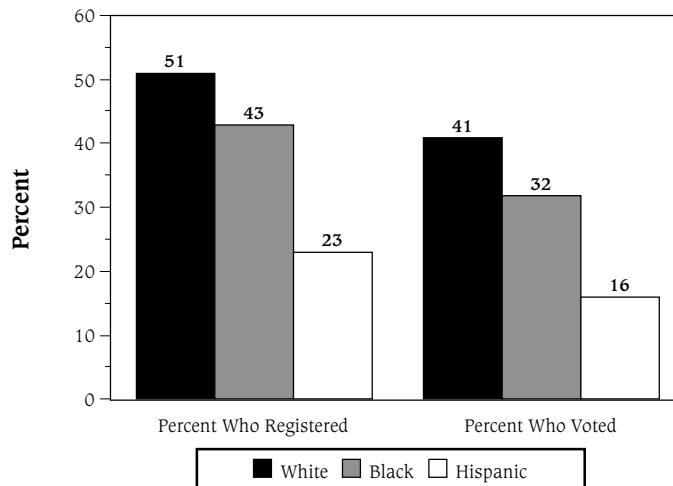
Differences by Electoral Cycle. The percentage of young adults who voted in non-presidential election years during these years was substantially lower than the percentage who voted during presidential election years (see Table SD 1.4.B). Rates of registration and voting have been remarkably stable during such years, across non-presidential election years, with overall rates varying by only a few percentage points across years.

Figure SD 1.4.A
Behavior in Presidential Election Years: Percentage of Persons Ages 18-20 Who Registered to Vote and Percentage Who Voted, 1972-1992



Source: U.S. Bureau of the Census, Current Population Reports, Series P-20, No. 253, No. 293, No. 322, No. 344, No. 370, No. 405, No. 414, No. 453, No. 466, and PPL24-RV, "Voting and Registration in the Election of November 1972-1994," U.S. Government Printing Office, Washington, DC.

Figure SD 1.4.B
Voting Behavior in Presidential Election Years: Percentage of Persons Ages 18-20 Who Registered to Vote and Percentage Who Voted, by Race and Ethnicity: 1992



Source: U.S. Bureau of the Census, Current Population Reports, Series P-20, No. 253, No. 293, No. 322, No. 344, No. 370, No. 405, No. 414, No. 453, No. 466, and PPL24-RV, "Voting and Registration in the Election of November 1972-1994," U.S. Government Printing Office, Washington, DC.

Table SD 1.4.A
Voting Behavior in Presidential Election Years: Percentage of Persons Ages 18-20
Who Registered to Vote and Percentage Who Voted, 1972-1992

	1972	1976	1980	1984	1988	1992
PERCENTAGE WHO REGISTERED						
All Races						
Both sexes	58	47	45	47	45	48
Males	58	46	44	45	42	47
Females	58	48	46	49	48	50
White						
Both sexes	60	50	47	48	46	51
Males	61	48	45	46	43	49
Females	60	51	48	50	48	53
Black						
Both sexes	43	34	35	47	43	43
Males	37	33	36	43	39	41
Females	49	35	35	51	46	44
Hispanic						
Both sexes	38	29	20	25	25	23
Males	39	31	20	22	22	20
Females	37	27	20	28	27	27
PERCENTAGE WHO VOTED						
All Races						
Both sexes	48	38	36	37	33	39
Males	48	36	35	34	31	37
Females	49	40	37	39	35	41
White						
Both sexes	51	41	38	38	35	41
Males	51	39	36	35	32	39
Females	51	42	39	40	37	43
Black						
Both sexes	31	23	25	36	28	32
Males	26	22	26	30	26	29
Females	35	24	25	41	30	34
Hispanic						
Both sexes	30	22	13	18	16	16
Males	27	23	12	14	15	13
Females	32	21	15	21	16	19

Source: U.S. Bureau of the Census, Current Population Reports, Series P-20, No. 253, No. 293, No. 322, No. 344, No. 370, No. 405, No. 414, No. 453, No. 466, and PPL24-RV, "Voting and Registration in the Election of November 1972-1994," U.S. Government Printing Office, Washington, DC.

Table SD 1.4.B
Voting Behavior in Congressional Election Years: Percentage of Persons Ages 18-20
Who Registered to Vote and Percentage Who Voted, 1974-1994

	1974	1978	1982	1986	1990	1994
PERCENTAGE WHO REGISTERED						
All Races						
Both sexes	36	35	35	35	35	37
Males	36	34	35	34	34	36
Females	36	36	35	36	36	38
White						
Both sexes	38	36	36	35	37	40
Males	38	36	37	34	36	39
Females	38	37	35	37	38	41
Black						
Both sexes	28	28	31	39	30	32
Males	26	25	25	40	31	31
Females	29	30	36	39	30	34
Hispanic						
Both sexes	20	19	20	20	17	20
Males	18	23	20	19	16	18
Females	22	16	21	21	19	24
PERCENTAGE WHO VOTED						
All Races						
Both sexes	21	20	20	19	18	17
Males	21	20	20	18	18	16
Females	20	20	19	19	19	18
White						
Both sexes	22	21	20	18	19	18
Males	23	21	22	18	19	17
Females	21	21	19	19	20	19
Black						
Both sexes	14	15	18	21	15	13
Males	13	15	13	21	15	13
Females	14	15	21	20	15	13
Hispanic						
Both sexes	12	11	12	10	10	11
Males	12	14	12	9	8	6
Females	13	8	13	12	12	16

Source: U.S. Bureau of the Census, Current Population Reports, Series P-20, No. 253, No. 293, No. 322, No. 344, No. 370, No. 405, No. 414, No. 440, No. 453, No. 466, "Voting and Registration in the Election of November 1972-1994," U.S. Government Printing Office, Washington, DC.

SD 1.5

TV VIEWING HABITS

Excessive television watching is negatively related to children's and youths' academic attainment. For example, children and adolescents in grades 4, 8, and 11 who watch five or more hours of television per day have on average substantially lower test scores than other children.⁴ Yet, as depicted in Figure SD 1.5, substantial percentages of students report watching large amounts of television on a daily basis.

Differences by Age. The percentage of children who report watching excessive amounts of television declines with age, as indicated in Figure SD 1.5. Among 9-year-olds, almost one-fifth (19 percent) reported watching six or more hours of television each day in 1994. Among 13-year-old students, 13 percent watched six or more hours of television. Among 17-year-olds, only 8 percent watched this amount of television each day. For all three age groups, the percentage of students spending six or more hours a day watching television increased between 1982 and 1986, and then declined through 1994.

Differences by Gender. In general, larger proportions of boys than girls are watching television for long periods of time. This gender difference is particularly notable among younger students (see Table SD 1.5.A). In 1994, 23 percent of 9-year-old boys watched television for six or more hours per day, compared to 16 percent of girls in that age group. A similar pattern is evident for 13-year-olds (See Table SD 1.5.B), while for 17-year-olds, the percentages of boys and girls watching television for long periods is nearly the same at 8 percent and 7 percent, respectively (see Table SD 1.5.C).

Differences by Race and Ethnicity.⁵ For each age group and for each time point of assessment, larger proportions of black students watch television for six or more hours per day than do either white or Hispanic students. For example, among 9-year-old students, 40 percent of black students, compared to only 14 percent of white students, and 22 percent of Hispanic students reported watching television six or more hours per day during 1994 (see Table SD 1.5.A).

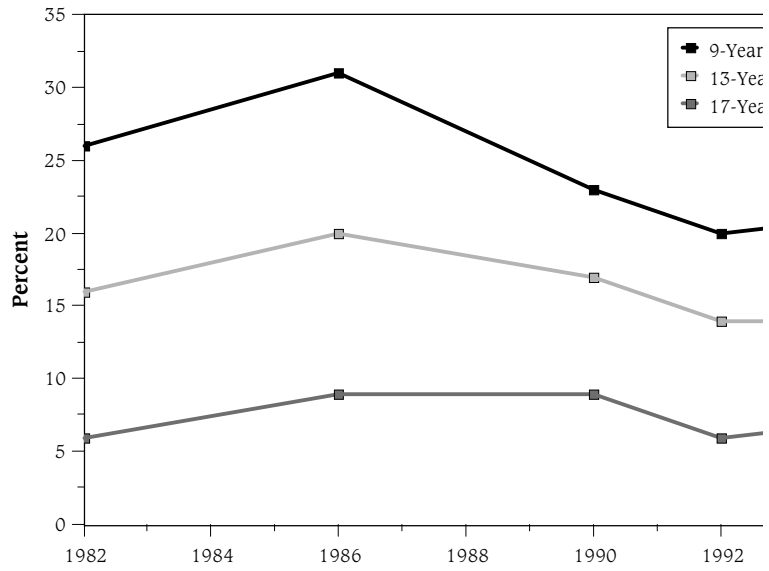
Differences by Type of School. In general, smaller percentages of children and adolescents who attend private school spend six or more hours per day watching television, than do students who attend public school, although the differences are usually not very large (see Tables SD 1.5.A, SD 1.5.B, and SD 1.5.C).

Differences by Parents' Educational Level. Children's television viewing habits also vary by parents' educational level. In general, as parents' educational levels increase, the percentages of children watching excessive amounts of television declines. In 1994, 23 percent of 13-year-olds whose parents had less than a high school education were watching six or more hours of television per day, compared to 17 percent of students with parents who graduated from high school, and 9 percent of students whose parents graduated from college (see Table SD 1.5.B). A similar pattern is evident for 17-year-olds (see Table SD 1.5.C).

⁴ *U.S. Department of Education, National Center for Education Statistics (1993). Youth Indicators 1993: Trends in the well-being of American youth. Washington, DC: U.S. Government Printing Office.*

⁵ *Estimates for whites and blacks exclude Hispanics of those races.*

Figure SD 1.5
Percentage of Students Who Watch Six or More Hours of Television per Day, by Age, 1982-1994



Source: National Assessment of Educational Progress (NAEP), 1994 Trend Assessment and unpublished Trend Almanacs, 1978-1990.

Table SD 1.5.A
Percentage of 9-Year-Old Students Who Watch Six or More Hours of Television per Day, by Gender, Race/Ethnicity, and Type of School: 1982-1994

	1982	1986	1990	1992	1994
Total	26	31	23	19	19
Gender					
Male	30	34	27	22	23
Female	23	27	20	17	16
Race/Ethnicity					
White, non-Hispanic	23	26	18	14	14
Black, non-Hispanic	43	53	47	41	40
Hispanic	28	33	26	25	22
Type of School					
Public	27	32	24	21	19
Private	21	24	18	5	11

Note: Parent's education is not reported at age 9 because approximately one third of these students did not know their parent's education level.

Source: National Assessment of Educational Progress (NAEP), 1994 Trend Assessment; and unpublished Trend Almanacs, 1978-1990.

Table SD 1.5.B
Percentage of 13-Year-Old Students Who Watch Six or More Hours of Television per Day, by Gender, Race/Ethnicity, Type of School, and Parent's Highest Level of Education: 1982-1994

	1982	1986	1990	1992	1994
Total	16	20	17	13	13
Gender					
Male	18	21	18	14	15
Female	15	19	15	11	12
Race/Ethnicity					
White, non-Hispanic	13	17	12	8	8
Black, non-Hispanic	32	40	35	31	35
Hispanic	19	21	18	19	19
Type of School					
Public	17	20	17	14	14
Private	13	(*)	11	6	4
Parents' Highest Level of Education					
Less than high school	23	32	24	21	23
Graduate high school	18	22	19	16	17
More than high school	13	18	12	9	13
Graduated college	12	15	13	9	9

*Too few observations for a reliable estimate.

Source: National Assessment of Educational Progress (NAEP), 1994 Trend Assessment; and unpublished Trend Almanacs, 1978-1990.

Table SD 1.5.C
Percentage of 17-Year-Old Students Who Watch Six or More Hours of Television per Day by Gender, Race/Ethnicity, Type of School, and Parent's Highest Level of Education: 1978-1994

	1978	1982	1986	1990	1992	1994
Total	5	6	9	9	7	8
Gender						
Male	5	7	10	9	7	10
Female	5	6	8	8	7	7
Race/Ethnicity						
White, non-Hispanic	4	5	6	6	4	5
Black, non-Hispanic	13	14	22	23	21	24
Hispanic	7	6	12	8	6	9
Type of School						
Public	5	7	9	9	7	8
Private	3	3	(*)	(*)	3	3
Parents' Highest Level of Education						
Less than high school	8	10	17	11	10	14
Graduate high school	5	8	10	11	10	12
More than high school	4	4	9	8	5	8
Graduated college	3	4	4	5	5	5

*Too few observations for a reliable estimate.

Source: National Assessment of Educational Progress (NAEP), 1994 Trend Assessment; and unpublished Trend Almanacs, 1978-1990.

SD 1.6

YOUTH VIOLENT CRIME ARREST RATES ⁶

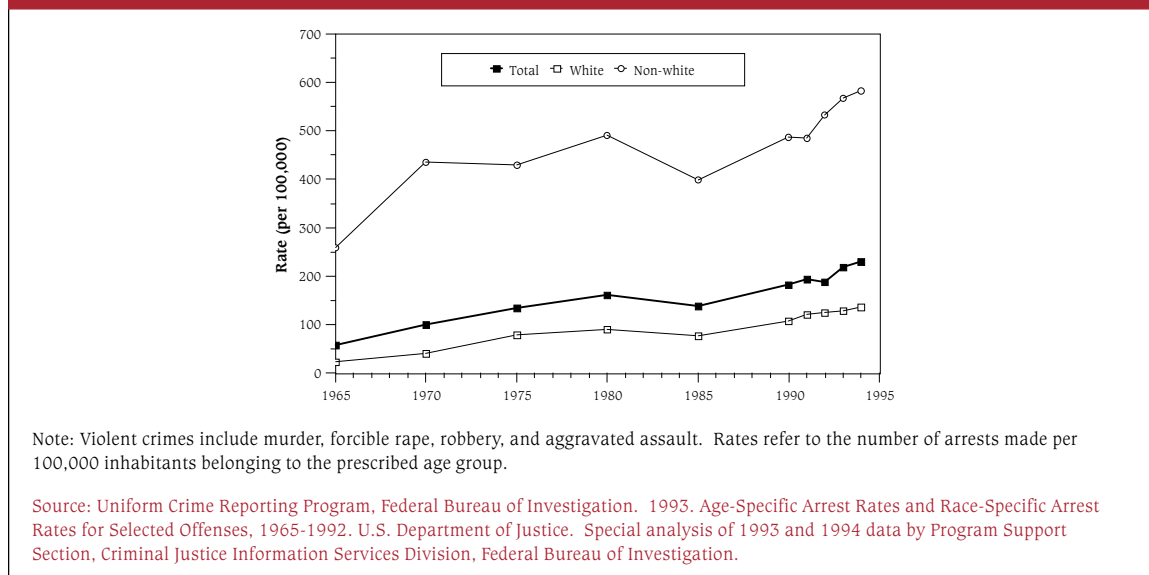
Violent crimes, as defined by the FBI, include murder, forcible rape, robbery, and aggravated assault. The rate of youth arrests for violent crimes quadrupled between 1965 and 1994, from 58 to 231 per 100,000 persons under age 18. The increase has been fairly constant over time, except for a short-lived reduction in youth violent crime arrest rates between 1980 and 1985 (see Figure SD 1.6).

Differences by Race. Rates have increased for both white and nonwhite youth during this period, though nonwhite rates have been consistently and substantially higher. In 1994 rates of arrest for violent crimes for whites were 138 per 100,000 compared to 584 per 100,000 for nonwhites.

Differences by Age and Gender. Arrest rates for violent crimes have consistently been much higher among males than among females over time and across all ages (see Table SD 1.6). However, rates for both males and females increased substantially between 1965 and 1994, exhibiting a brief decline only during the early 1980s. For example, among females age 18, rates increased from 37 to 249 per 100,000 between 1965 and 1994. For 18 year old males, the rates increased from 638 to 2,042 per 100,000 during that same time period, or to about two arrests per one hundred 18 year old males.

Violent crime arrest rates climb quickly and steadily with age for young men, from 153 per 100,000 for 10-12 year olds to 2,042 per 100,000 among 18 year olds in 1994. By contrast, the rates for young women do not increase uniformly or rapidly with age, peaking at age 16 at 275 arrests per 100,000, then declining to below 250 per 100,000 for ages 17 and 18.

Figure SD 1.6
Arrest Rates for Violent Crimes by Youth Under Age 18: 1965-1994
(Rate per 100,000)



⁶ Arrests for violent crimes were chosen in preference to other arrest measures as an indicator both because of the particular hazards that violent crime represent to our society, and because arrests for violent crimes are less likely to be affected over time by changes in police practice and policy than other types of crime.

Table SD 1.6
Arrest Rates for Violent Crimes by Youth Under Age 18, 1965-1994 (per 100,000)

	1965	1970	1975	1980	1985	1990	1991	1992	1993	1994
TOTAL	58	101	136	163	139	184	195	188	220	231
RACE/ETHNICITY										
White	24	42	79	92	77	108	121	126	130	138
Non-white	259	436	431	492	400	488	486	534	568	584
AGE										
10-12	--	--	--	47	56	71	77	81	86	92
13-14	139	207	250	262	252	369	397	420	461	493
15	245	364	483	505	446	670	720	725	829	858
16	304	459	616	638	568	879	925	940	1031	1058
17	305	519	663	739	662	986	1041	1001	1115	1119
18	338	571	713	746	661	1023	1108	1092	1149	1167
GENDER										
Male										
10-12	--	--	--	82	99	119	130	137	144	153
13-14	242	351	420	446	424	602	652	681	740	788
15	442	644	832	877	769	1137	1222	1210	1379	2414
16	564	838	1102	1130	999	1525	1604	1621	1764	1798
17	572	957	1201	1322	1180	1745	1841	1757	1944	1939
18	638	1065	1299	1350	1194	1840	1996	1944	2038	2042
Female										
10-12	--	--	--	10	12	19	20	23	25	27
13-14	32	57	72	70	71	123	130	145	167	183
15	40	73	119	117	108	177	192	214	249	272
16	36	67	114	125	118	193	204	217	253	275
17	30	66	105	130	118	179	188	195	233	247
18	37	72	113	125	114	164	176	197	214	249

Note: Violent Crime is the sum of murder, forcible rape, robbery, and aggravated assault. Rates refer to the number of arrests made per 100,000 inhabitants belonging to the prescribed age group.

Source: Uniform Crime Reporting Program, Federal Bureau of Investigation: 1993. Age-Specific Arrest Rates and Race-Specific Arrest Rates for Selected Offenses, 1965-1992. pp. 12-17 & p. 181. U.S. Department of Justice. Special Analysis of 1993 and 1994 data by Program Support Section, Criminal Justice Information Services Division, FBI.

SD 1.7

LOW-RISK TEENS: CUMULATIVE RISK INDEX

Statistics often show rates of individual problem behaviors among adolescents, such as drug or alcohol use, school drop out, or early sexual activity. Yet youth engaged in one problem behavior are often engaged in others as well; their risk of immediate and long-term harm increases as the number of risky behaviors increases.⁷

Most parents and other members of society believe that the ideal is for youth to avoid all risky behaviors. The cumulative risk index is designed to identify the degree to which adolescents avoid a set of key problem behaviors simultaneously. This measure is created from youth-report data for five behaviors, where a youth is defined as having no risks if he or she is:

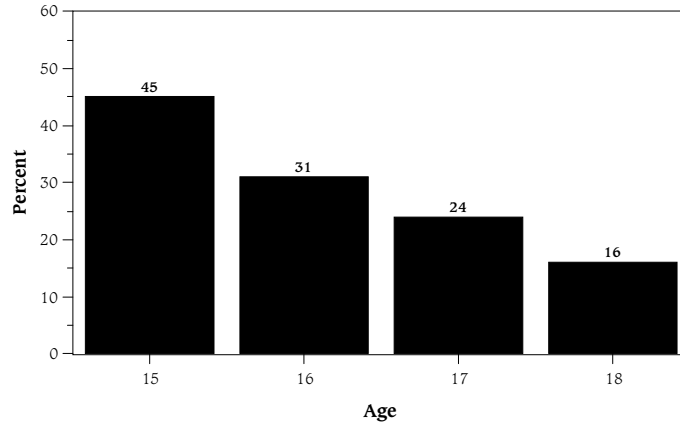
- in school or has graduated from high school,
- has never had sexual intercourse,
- has never used illegal drugs,
- has not had 5 or more alcoholic beverages in a row in the past month, and
- has not stayed out all night without permission in the past year.

Data limitations did not allow for the inclusion of all risk behaviors (*e.g.* engaging in acts of violence), but all included behaviors represent areas of substantial concern.

The proportion of youth who report avoiding all of these risk behaviors decreases with age (see Figure SD 1.7). Table SD 1.7 presents additional data on the percentage who report only one risk, and two or more risk behaviors. Even at age 15, less than half of youth (45 percent) have avoided all risk behaviors, and 30 percent have experienced two or more risks. By age 17, an age at which most youth are still in high school, the proportion with no risks has dwindled to less than one-quarter, and the majority have now experienced two or more risk behaviors. By age 18, only 16 percent report having engaged in no risk behaviors, while 62 percent report two or more such behaviors.

⁷ Moore, K.A. and Gleib, D.A. (1994) "Taking the Plunge: An examination of positive youth development." *Journal of Adolescent Research*, 10 (11), 15-40.

Figure SD 1.7
Percentage of Youth with No Risks on Cumulative Risk Measure,^a by Age: 1992



Note: ^a A status of having no risks requires all of the following: being in school or graduated from high school; never having had sexual intercourse; never having used illegal drugs (includes marijuana); not having had 5 alcoholic beverages in a row in the past month; and not having stayed out all night without permission in the past year.

Source: 1992 National Health Interview Survey — Youth Risk Behavior Supplement, tabulations by Child Trends, Inc.

Table SD 1.7
Percentage of Youth with No, One, and Two or More Risks on Cumulative Risk Measure^a by Age: 1992

Age	15	16	17	18
Cumulative Risk Measure				
No Risks	45	31	24	16
Only One Risk	25	24	26	22
Two or More Risks	30	45	50	62

Note: ^a A status of having no risks requires all of the following: being in school or graduated from high school; never having had sexual intercourse; never having used illegal drugs (includes marijuana); not having had 5 alcoholic beverages in a row in the past month; and not having stayed out all night without permission in the past year.

Source: 1992 National Health Interview Survey — Youth Risk Behavior Supplement, tabulations by Child Trends, Inc.

SD 2.1

PHYSICAL FIGHTING BY YOUTH

Physical violence is a major cause of injury and homicide among adolescents.⁸ In 1995, almost half of all male students and nearly one third of female students in grades 9-12 reported having been involved in a physical fight during the previous year. For males, there is a slight decrease in the percentage that reported involvement in a fight in 1993 from 51 percent to 46 percent (see Figure SD 2.1).

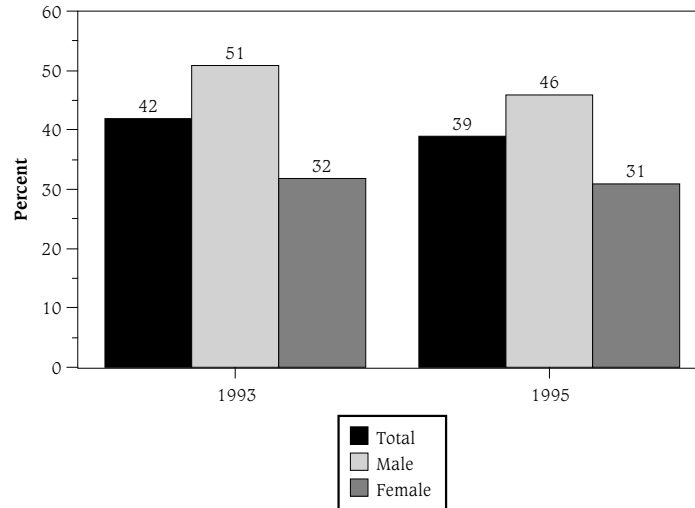
Differences by Age. In both 1993 and 1995, the percentage of students who report being involved in fights decreased with age (see Table SD 2.1). In 1995, 47 percent of 9th grade students and 31 percent of 12th grade students reported being involved in a fight. It is unclear, however, whether this reduction reflects the effects of increasing maturity, a change in the propensity to report having been in a fight, or a tendency for violence-prone youth to drop out of school, leaving a less violent pool of students in the higher grades.

Differences by Race.⁹ White students appear somewhat less likely than black or Hispanic students to report having engaged in physical fights. In 1995, 36 percent of white students reported involvement in a physical fight within the last year, compared with 42 percent of black students and 48 percent of Hispanic students.

⁸ University of California at Los Angeles, CDC. "The Epidemiology of Homicide in Los Angeles, 1970-79." Atlanta: U.S. Department of Health and Human Services, Public Health Service, CDC, 1985. Cited in *Chronic Disease and Health Promotion, Reprints from the Morbidity and Mortality Weekly Report: 1990-1991 Youth Risk Behavior Surveillance System*. Atlanta: U.S. Department of Health and Human Services, Public Health Service, CDC, 1992. P. 37.

⁹ Estimates for whites and blacks exclude Hispanics of those races.

Figure SD 2.1
Percentage of Students in Grades 9–12 Who Report that They Have Been in a Physical Fight Within the Last Year, by Sex: 1993 and 1995.



Source: Data for 1993 from: "Youth Risk, Behavior Surveillance - United States 1993." Morbidity and Mortality Weekly Report, Vol. 44, No. SS-1, 1995. Data for 1995 from: "Youth Risk Behavior Surveillance - United States, 1995." Morbidity and Mortality Weekly Report, Vol. 45, No. SS-4, 1996.

Table SD 2.1
Percentage of Students in Grades 9-12 Who Report that They Have Been in a Physical Fight Within the Last Year: 1993 and 1995

	1993			1995		
	Total	Male	Female	Total	Male	Female
Total	42	51	32	39	46	31
Grade						
9	50	59	41	47	55	37
10	42	52	32	40	46	34
11	41	52	28	37	46	28
12	35	43	27	31	38	24
Race/Ethnicity Group						
White, Non-Hispanic	40	50	30	36	44	27
Black, Non-Hispanic	50	58	42	42	49	35
Hispanic	43	52	34	48	56	40

Source: Data for 1993 from: "Youth Risk, Behavior Surveillance - United States 1993." Morbidity and Mortality Weekly Report, Vol. 44, No. SS-1, 1995. Data for 1995 from: "Youth Risk Behavior Surveillance - United States, 1995." Morbidity and Mortality Weekly Report, Vol. 45, No. SS-4, 1996.

SD 2.2

WEAPON CARRYING AMONG HIGH SCHOOL YOUTH

Weapon carrying is associated with the most serious injuries resulting from violence. Carrying a weapon significantly increases the risk that a violent argument will result in death, disability, or other serious injury.¹⁰

Since 1991, the percentage of students who report carrying weapons has declined. For example, in 1995, 20 percent of students in grades 9-12 reported carrying a weapon, compared to 22 percent in 1993 and 26 percent in 1991. The definition of weapon includes knives, razors, clubs, and handguns and other firearms.

Differences by Age. In general, students in the earlier grades are more likely than students in the upper grades to carry a weapon. In 1995, 23 percent of 9th graders reported carried a weapon in the last 30 days compared to 16 percent of 12th graders.

Differences by Gender. High school males are much more likely than females to carry a weapon. This is true across all grades and for all racial and ethnic groups (see Figure SD 2.2.A). For example, in 1995, 31 percent of males in grades 9-12 reported carrying a weapon, compared to 8 percent of all females in grades 9-12.

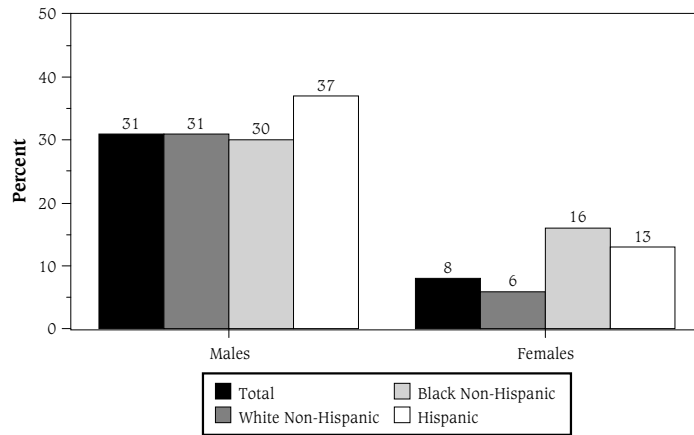
Differences by Race and Ethnicity.¹¹ In 1995, 19 percent of white, 22 percent of black, and 25 percent of Hispanic teens reported carrying a weapon. For white and black students, these represent reductions from 1991 rates of 25 and 33 percent, respectively.

Youth Who Report Carrying a Gun. In both 1993 and 1995, 8 percent of high school students reported carrying a gun at some time in the last 30 days. In 1995, 11 percent of black and Hispanic students and 6 percent of white students reported carrying a gun (see Figure SD 2.2.B).

¹⁰ "Measuring the Health Behavior of Adolescents: The Youth Risk Behavior Surveillance System and Recent Reports Public Health Reports on High-Risk Adolescents." *Public Health Reports*. Vol. 108, Supplement 1. Rockville, Maryland: Public Health Service. 1993.

¹¹ Estimates for whites and blacks exclude Hispanics of those races.

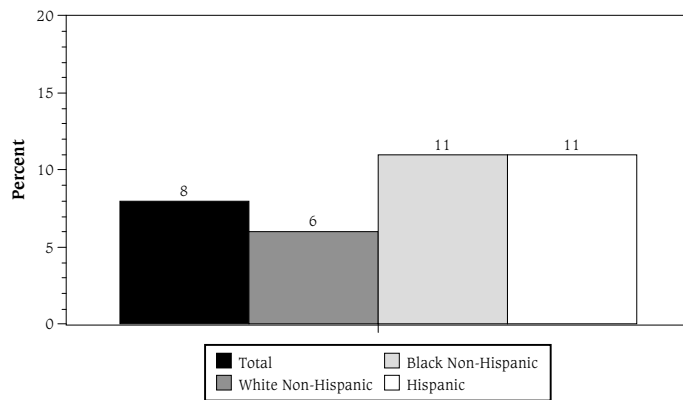
Figure SD 2.2.A
Weapons: Percentage of Teens in Grades 9–12 Who Report Having Carried a Weapon^a Within the Last 30 Days: 1995



Note: ^aWeapons included knives, razors, clubs, and firearms (including handguns).

Sources: Data for 1993 from "Youth Risk Behavior Surveillance - United States 1993." Vol 44. No. SS-1 U.S. Department of Health and Human Services, Public Health Service, Centers for Disease Control and Prevention. Data for 1995 from Kann, L. Warren, C.W., Harris, W.A., Collins, J.L., Williams, B.I., Ross, J.G., Kolbe, L.J. "Youth Risk Behavior Surveillance - United States, 1995." In: CDC Surveillance Summaries, September 27, 1996. MMWR 1996; 45 (No. SS-4): 1-185

Figure SD 2.2.B
Guns: Percentage of Teens in Grades 9-12 Who Report Having Carried a Gun Within the Last 30 Days: 1995



Note: Percentages reflect those who carried a gun during the 30 days preceding the survey.

Sources: Data for 1993 from "Youth Risk Behavior Surveillance - United States, 1993," Volume 44. No. SS-1. U.S. Department of Health and Human Services, Public Health Service, Centers for Disease Control and Prevention. Data for 1995 from Kann, L. Warren, C.W., Harris, W.A., Collins, J.L., Williams, B.I., Ross, J.G., Kolbe, L.J. "Youth Risk Behavior Surveillance -- United States, 1995." In: CDC Surveillance Summaries, September 27, 1996. MMWR 1996; 45 (No. SS-4): 1-185

Table SD 2.2.A
Percentage of Students in Grades 9–12 Who Report Having Carried a Weapon^a
At Least Once Within the Last 30 Days: 1991, 1993, and 1995

	1991			1993			1995		
	Total	Male	Female	Total	Male	Female	Total	Male	Female
Total	26	41	11	22	34	9	20	31	8
Grade									
9	28	44	10	26	39	11	23	34	9
10	27	42	11	21	33	10	21	32	9
11	29	44	13	22	33	9	20	32	8
12	21	43	10	20	33	7	16	26	6
Race/Ethnicity									
White, non-Hispanic	25	41	8	21	33	7	19	31	6
Black, non-Hispanic	33	43	24	29	38	19	22	30	16
Hispanic	26	40	13	24	37	12	25	37	13

Note: ^a Weapons included knives, razors, clubs, and firearms (including handguns).

Sources: Data for 1991 from Public Health Reports, Vol. 108, Supplement 1, U.S. Public Health Service, and data supplied by Center for Disease Control and Prevention staff. Data for 1993 from "Youth Risk Behavior Surveillance - United States 1993," Vol. 44, SS-1, U.S. Public Health Service, Centers for Disease Control and Prevention. Data for 1995 from Kann, L. Warren, C.W., Harris, W.A., Collins, J.L., Williams, B.I., Ross, J.G., Kolbe, L.J. "Youth Risk Behavior Surveillance -- United States, 1995." In: CDC Surveillance Summaries, September 27, 1996. MMWR 1996; 45 (No. SS-4): 1-185.

Table SD 2.2.B
Percentage of Teens in Grades 9–12 Who Report Having Carried a Gun
Within the Last 30 Days: 1993 and 1995

	1993			1995		
	Total	Male	Female	Total	Male	Female
Total	8	14	2	8	12	3
Grade						
9	9	16	2	9	14	3
10	9	15	2	8	13	3
11	7	13	1	7	12	1
12	7	12	1	6	11	2
Race/Ethnicity						
White non-Hispanic	7	12	1	6	10	2
Black non-Hispanic	12	21	4	11	19	4
Hispanic	10	17	3	11	17	5

Note: Percentages reflect those who carried a gun more often than other weapons.

Sources: Data for 1993 from "Youth Risk Behavior Surveillance - United States 1993," Volume 44, No. SS-1, U.S. Public Health Service, Centers for Disease Control and Prevention. Data for 1995 from Kann, L. Warren, C.W., Harris, W.A., Collins, J.L., Williams, B.I., Ross, J.G., Kolbe, L.J. "Youth Risk Behavior Surveillance -- United States, 1995." In: CDC Surveillance Summaries, September 27, 1996. MMWR 1996; 45 (No. SS-4): 1-185.

SD 2.3

SEAT BELT USE

In 1993, motor vehicle deaths were the leading cause of injury-related deaths for youth ages 15-19, accounting for approximately 40 percent of all teenage injury deaths. Motor vehicle deaths are also the leading cause of death for younger children.¹² Consistent use of seat belts and car safety seats dramatically lessens the risk of injury or death in a motor vehicle accident. Yet the National Highway Traffic Safety Administration estimates that in 1993, 55 percent of all children under age five who were killed while occupants of a motor vehicle were not protected by seat belts or child safety seats.¹³

Overall, regular seat belt or car safety seat use among children increased between 1985 and 1990. This increase has been particularly dramatic among children ages 5 and older (see Table SD 2.3.A). For example, among children ages 5-9, reported rates of regular seat belt use increased from 49 percent to 76 percent.

Differences by Age. In both 1985 and 1990, younger children were more likely than older children to routinely wear a seat belt or be in a child safety seat. In 1990, 87 percent of 1-4 year old children were reported to have used seat belts (or a child safety seat) all or most of the time, compared to 68 percent of 15-17 year olds (see Figure SD 2.3). However, as mentioned above, the greatest increases in seat belt usage occurred among children ages 5-17. In fact, the older the age group, the greater the increase in the percentage who regularly wore their seat belts.

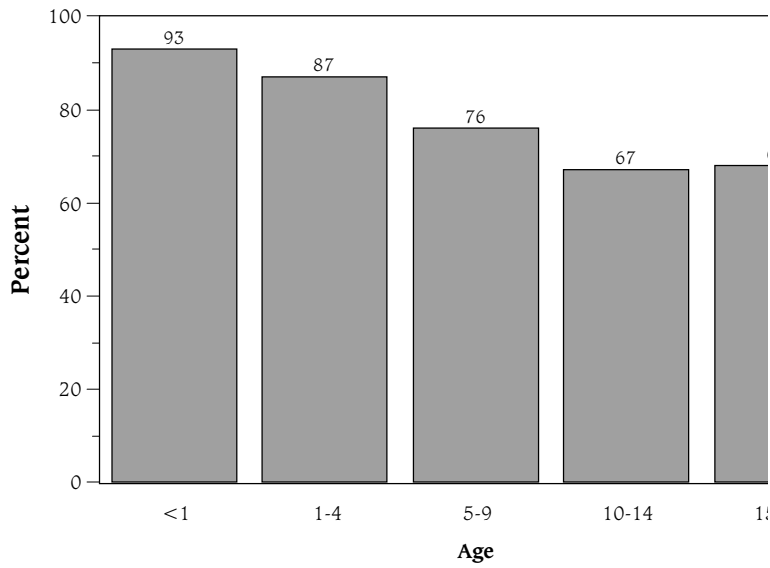
Differences by Race. Among children ages 0-4, the percentage of white and black children who are regularly in car safety seats (or, for some of the older or larger preschoolers, wearing seat belts) has increased. Between 1985 and 1990, the percentage of white children in this age group who were in car safety seats or seat belts rose from 84 percent to 88 percent. Among black children in this age group, the percentage increased from 67 to 79 percent. The percentage of Hispanic children ages 0-4 who regularly used a seat belt or car safety seat was fairly steady at 73 and 71 percent in 1985 and 1990, respectively. For children ages 5-17, however, percentages for all three races rose considerably between 1985 and 1990 (see Table SD 2.3.A).

The 1985 and 1990 data described above and presented in Table SD 2.3.A. are based on parent and self reports; data for 1994, presented in Table SD 2.3.B, are based on observations and thus cannot be directly compared to the earlier data. However, the observational results suggest that the percentages of infants (under age 1) and toddlers (ages 1-4) who are in car safety seats or are wearing seat belts is much lower than the percentages suggested from the self reports in 1985 and 1990.

¹² National Center for Health Statistics (1996). *1993 Detail Mortality File. Unpublished data.*

¹³ National Highway Traffic Safety Administration. 1994. *Traffic Safety Facts 1993. DOT HS 808 169. Washington, D.C.: U.S. Department of Transportation.*

Figure SD 2.3
Percentage of Children and Youth Who Are Reported to Have Worn Seat Belts All or Most of the Time, by Age: 1990



Source: National Health Interview Survey data as published in Vital and Health Statistics, Series 10: No. 163. "Health Promotion and Disease Prevention United States, 1995."

Table SD 2.3.A
Percentage of Children and Youth Who Are Reported to Have Worn Seat Belts All or Most of the Time: 1985 and 1990

	1985	1990
CHILDREN BY AGE:		
< 1 year	92	93
Ages 1-4	82	87
Ages 5-9	49	76
Ages 10-14	33	67
Ages 15-17	31	68
RACE/ETHNICITY BY AGE:		
White		
Ages 0-4	84	88
Ages 5-17	40	73
Black		
Ages 0-4	67	79
Ages 5-17	32	59
Hispanic		
Ages 0-4	73	71
Ages 5-17	36	62

Source: National Health Interview Survey data as published in Vital and Health Statistics, Series 10: No. 185. "Health Promotion and Disease Prevention United States, 1990"; and Series 10: No. 163. "Health Promotion and Disease Prevention United States, 1995."

Table SD 2.3.B
Percentage of Children and Youth Who Are Observed to Have Worn
Seat Belts or Been Placed in Child Safety Seats, by Age.^a 1994

Infant (< 1 year)^b:	88
Toddler (1-4 years)^c:	61
Youth (5-15 years):	58
Young adult (16-24 years):	53

^aAge group is based on the best judgement of the observers in the National Occupant Protection Use Survey (NOPUS) Controlled Intersection Study.

^bUse of restraints for infants refers to child safety seats.

^cUse of restraints for toddlers refers to safety belts or child safety seats.

Source: Research Note. "National Occupant Protection Use Survey: Controlled Intersection Study." National Highway Traffic Safety Administration, U.S. Department of Transportation, May 1, 1995.

SD 2.4

REGULAR PHYSICAL EXERCISE

Sixty (60) percent of Americans do not exercise regularly, according to a 1996 report by the Surgeon General, despite the many health benefits associated with physical activity.¹⁴ People of all ages, both male and female, benefit from regular physical activity. Significant health benefits can be obtained by including a moderate amount of physical activity (*e.g.*, 30 minutes of brisk walking or raking leaves, 15 minutes of running, or 45 minutes of playing volleyball) on most, if not all, days of the week.

The percentage of 12th grade students who report actively participating in sports or exercise “almost every day” has remained fairly stable since 1976, varying between 44 and 48 percent. Rates have also been stable for 8th and 10th grade students since 1991, the first year in which data were collected (see Table SD 2.4.A).

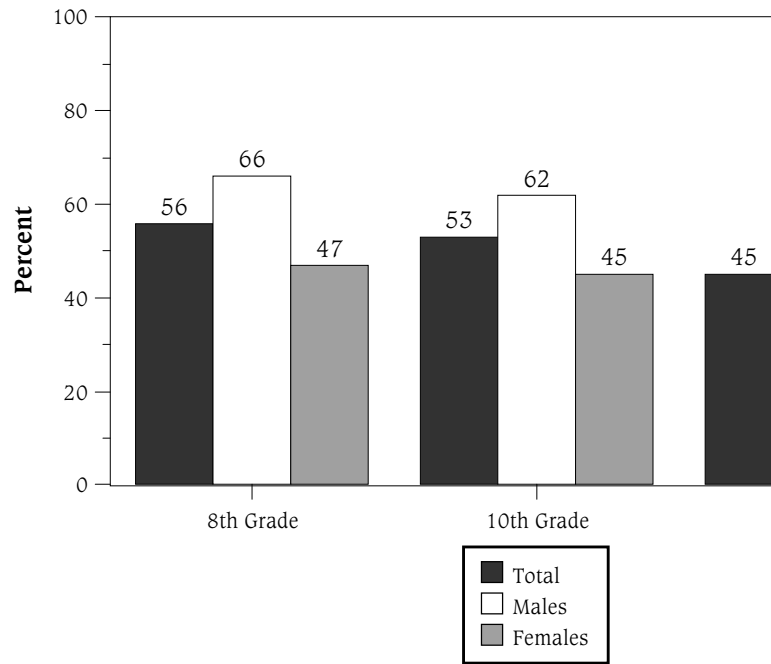
Differences by Age. The percentages of students who report that they actively participate in sports or exercise “almost every day” decreased with age. In 1995, for example, 56 percent of 8th graders, 53 percent of 10th graders, and 45 percent of 12th graders reported daily or almost daily exercise (see Figure SD 2.4). A similar pattern emerged in a survey that asked teens whether they had exercised vigorously three or more times in the past week (see Table SD 2.4.B).

Differences by Gender. Males consistently report exercising or participating in sports more often than females. In 1995, for each age group, male rates were 17 to 19 percentage points higher than female rates, a trend that exists for nearly every year that data are available (see Table SD 2.4.A).

Differences by Race. Black and white students in the 8th and 10th grade are about equally likely to exercise regularly (see Table SD 2.4.A). Among 12th grade students, blacks appeared to be less likely than whites to exercise regularly during the 1990’s, though this difference almost disappeared in 1995. Other survey data, reported in Table SD 2.4.B, show larger differences by race and ethnic group. Specifically, in 1995 67 percent of non-Hispanic white teens reported exercising at least three times a week, compared to 53 percent of non-Hispanic black teens and 57 percent of Hispanic teens (see Table SD 2.4.B).

¹⁴ U.S. Department of Health and Human Services. Physical Activity and Health: A Report of the Surgeon General. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, 1996.

Figure SD 2.4
Percentage of 8th, 10th, and 12th Grade Students Who Report that They Actively Participate in Sports or Exercise "Almost Every Day," by Gender: 1995



Source: Bachman, J.G., Johnston, L.D. and O'Malley, P.M. "The Monitoring the Future Study," University of Michigan, 8th and 10th grade 1991-1995 Questionnaire Forms 1 and 2, and 12th grade 1976-1995 Questionnaire Form 2.

Table SD 2.4.A
Percentage of 8th, 10th, and 12th Grade Students Who Report that They Actively Participate in Sports or Exercise "Almost Every Day:" Selected Years, 1976-1995

	1976	1981	1986	1991	1992	1993	1994	1995
8TH GRADE								
Total	--	--	--	57	55	55	53	56
Gender								
Male	--	--	--	65	65	65	63	66
Female	--	--	--	49	45	46	44	47
Race/Ethnicity								
White	--	--	--	58	56	58	56	59
Black	--	--	--	61	57	54	52	55
10TH GRADE								
Total	--	--	--	54	54	53	53	53
Gender								
Male	--	--	--	63	64	62	62	62
Female	--	--	--	45	45	45	44	45
Race/Ethnicity								
White	--	--	--	55	55	54	54	55
Black	--	--	--	54	52	56	50	52
12TH GRADE								
Total	44	48	44	46	46	44	45	45
Gender								
Male	52	56	54	55	59	55	56	55
Female	36	39	36	36	33	33	36	37
Race/Ethnicity								
White	43	47	46	48	48	46	49	46
Black	49	53	43	43	41	39	39	48

Source: Bachman, J.G., Johnston, L.D. and O'Malley, P.M. "The Monitoring the Future Study," University of Michigan, 8th and 10th grade 1991-1995 Questionnaire Forms 1 and 2, and 12th grade 1976-1995 Questionnaire Form 2. Data for the 12th grade based on one of six questionnaire forms with a resulting sample size one-sixth of the total sample size for each year.

Table SD 2.4.B
Percentage of Teens in Grades 9-12 Who Report Having Exercised Vigorously Three or More Times in the Past Seven Days: 1993 and 1995

	1993			1995		
	Total	Male	Female	Total	Male	Female
Total	66	75	56	64	74	52
Grade						
9	75	81	68	72	80	62
10	70	77	61	69	79	59
11	63	71	53	60	72	47
12	58	70	45	55	67	42
Race/Ethnicity						
White, non-Hispanic	68	76	59	67	76	57
Black, non-Hispanic	60	71	49	53	68	41
Hispanic	59	69	50	57	70	45

Note: Vigorous physical exercise is defined as activities that caused sweating and hard breathing for at least 20 minutes.

Source: Kann L., Warren, C.W., Harris, W.A., Collins, J.L., Williams, B.I., Ross, J.G., and Kolbe, L.J. "Youth Risk Behavior Surveillance -- United States, 1993." Vol. 44, No. SS-1 and "Youth Risk Behavior Surveillance -- United States, 1995." Vol. 45, No. SS-4.

SD 3.1

CIGARETTE SMOKING AMONG YOUTH

Cigarette smoking is the single most preventable cause of death in the United States. The Centers for Disease Control estimates that one in five deaths are caused by tobacco use.¹⁵ Youthful smoking can have severe, lifelong consequences because a large proportion of those who initiate smoking in adolescence will continue to smoke as adults.¹⁶ In addition, youths who smoke are also more likely to use illicit drugs and to drink more heavily than their peers who do not smoke.¹⁷

Data from two in-school national surveys, the Youth Risk Behavior Surveillance and The Monitoring the Future Survey, indicate that smoking among youth has increased in recent years.

- Daily smoking among 12th grade students had decreased sharply in the late 1970s, but has begun to increase again in recent years, as reflected by the Monitoring the Future Study. Between 1992 and 1996, the percentage of 12th graders who reported smoking daily increased from 17.2 percent to 22.2 percent (see Figure SD 3.1).
- Data for 8th and 10th grade students, available from 1991 through 1996, also show recent increases in the percentage of students who reported smoking daily, from 7.2 percent to 10.4 percent among 8th grade students and from 12.6 percent to 18.3 percent among 10th grade students (see Table SD 3.1.A).
- Increases in the prevalence of current smoking among youths are also reflected in the results from the Youth Risk Behavior Survey. Current smoking means smoking on one or more of the previous 30 days (see Table SD 3.1.B).

Differences by Age. In general, as age and/or grade increases, so does the prevalence of smoking. In 1996, the percentage of students who report daily smoking was 10.4 percent among 8th graders, 18.3 percent among 10th graders, and 22.2 percent among 12th grade students (see Figure SD 3.1).

Differences by Race.¹⁸ White students consistently have the highest rates of smoking, while black students consistently have the lowest (see Table SD 3.1.B). The prevalence of current¹⁹ smoking among white students is about twice that of black students. White students are twice as likely as Hispanic students and four times as likely as black students to be frequent²⁰ smokers.

¹⁵ Centers for Disease Control. *Cigarette Smoking-Attributable Mortality and Years of Potential Life Lost—United States, 1990*. *Morbidity and Mortality Weekly Report* 1993; 42:645-9.

¹⁶ *The Monitoring the Future Study, The University of Michigan*. "Cigarette Smoking among American teens rises again in 1995." *Press Release of December 15, 1995*.

¹⁷ Substance Abuse and Mental Health Services Administration. "Preliminary Estimates From the 1995 National Household Survey on Drug Abuse. Rockville, Maryland: Public Health Service, 1996." 1995 results indicate that youths age 12-17 who smoked were about 8 times as likely to use illicit drugs and 11 times as likely to drink heavily as nonsmoking youths.

¹⁸ Estimates for whites and blacks exclude Hispanics of those races.

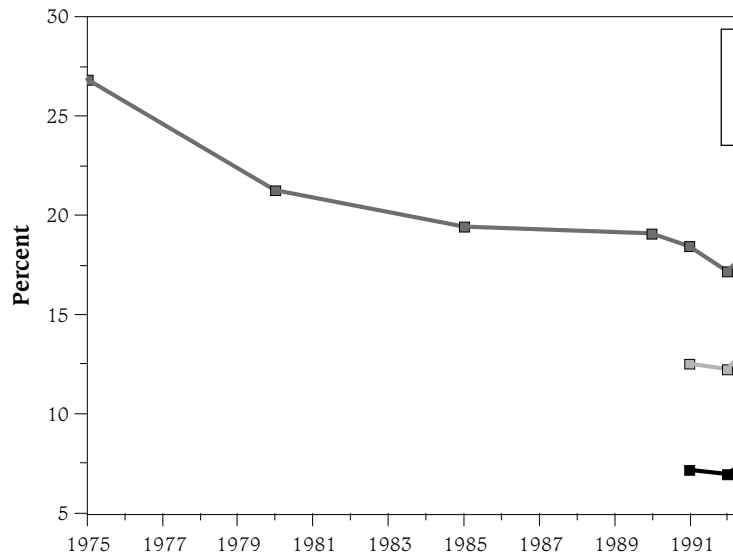
¹⁹ Current smoking is smoking on one or more of the previous 30 days.

²⁰ Frequent smoking is smoking on 20 or more of the previous 30 days.

Differences by Gender. There is little to no difference in the prevalence of smoking between males and females, with the exception of black youth. Among black youth in grades 9-12, black males were significantly more likely than black females in 1995 to report current smoking. This disparity became apparent only in 1995, when current and frequent smoking rates for black males increased over the previous year, while the comparable rates among black females had declined — the only group for whom a decline is seen (see Table SD 3.1.B).

Prevalence of smoking by frequency. Two to three times the percentage of students report current smoking (smoking on one or more of the previous 30 days) than report frequent (smoking on 20 or more of the previous 30 days) or daily smoking (see Table SD 3.1.B). This is apparent across all grades and for all the race and ethnic groups shown.

*Figure SD 3.1
Percentage of 8th, 10th, and 12th Grade Students Who Report
Smoking Cigarettes Daily Over the Previous 30 Days: 1975-1996*



Sources: Johnston, L.D., O'Malley, P.M. and Bachman, J.G. "National Survey Results on Drug Use from the Monitoring the Future Study, 1975-1995." Rockville, Maryland: National Institute of Health. National Institute on Drug Abuse, NIH Pub. No. 97-4139, 1997. Institute for Social Research, University of Michigan. 1996 data from: The Monitoring the Future Study, The University of Michigan. "Cigarette smoking continues to rise among American teenagers in 1996." Press release of December 19, 1996.

Table SD 3.1.A
Cigarette Smoking: Percentage of 8th, 10th, and 12th Grade Students Who Report Smoking Cigarettes Daily Over the Previous Thirty Days, by Gender: Selected Years, 1975-1996

	1975	1980	1985	1990	1991	1992	1993	1994	1995	1996
8th Grade										
Total	—	—	—	—	7.2	7.0	8.3	8.8	9.3	10.4
Male	—	—	—	—	8.1	6.9	8.8	9.5	9.2	—
Female	—	—	—	—	6.2	7.2	7.8	8.0	9.2	—
10th Grade										
Total	—	—	—	—	12.6	12.3	14.2	14.6	16.3	18.3
Male	—	—	—	—	12.4	12.1	13.8	15.2	16.3	—
Female	—	—	—	—	12.5	12.4	14.3	13.7	16.1	—
12th Grade										
Total	26.9	21.3	19.5	19.1	18.5	17.2	19.0	19.4	21.6	22.2
Male	26.9	18.5	17.8	18.6	18.8	17.2	19.4	20.4	21.7	—
Female	26.4	23.5	20.6	19.3	17.9	16.7	18.2	18.1	20.8	—

Sources: Johnston, L.D., O'Malley, P.M., Bachman, J.G. "National Survey Results on Drug Use from the Monitoring the Future Study, 1975-1995." Rockville, Maryland: National Institutes of Health. National Institute on Drug Abuse, NIH Pub. No. 97-4139, 1997. Institute for Social Research, the University of Michigan. Tables D-31 and D-32. 1996 data from: The Monitoring the Future Study, The University of Michigan. "Cigarette smoking continues to rise among American teenagers in 1996." Press release of December 19, 1996.

Table 3.1.B
Cigarette Smoking: Percentage of Students in Grades 9-12 Who Report Current Smoking and Frequent Smoking: 1991, 1993, and 1995

	CURRENT SMOKING ^a			FREQUENT SMOKING ^b		
	1991	1993	1995	1991	1993	1995
Total	28	31	35	13	14	16
Male	28	30	35	13	14	16
Female	27	31	34	12	14	16
White non-Hispanic	31	34	38	15	16	20
Male	30	32	37	15	16	18
Female	32	35	40	16	16	21
Black non-Hispanic	13	15	19	3	5	5
Male	14	16	28	5	5	9
Female	11	14	12	2	4	1
Hispanic	25	29	34	7	8	10
Male	28	30	35	8	9	11
Female	23	27	33	6	7	9
Grade						
9th	23	28	31	8	9	10
10th	25	28	33	11	13	13
11th	32	31	36	16	15	19
12th	31	35	38	16	18	21

Note: ^a Current smoking is smoking on one or more of the previous 30 days.

^b Frequent smoking is smoking on 20 or more of the previous 30 days.

Sources: Data for 1991 from U.S. Department of Health and Human Services, Preventing Tobacco Use Among Young People, A Report of the Surgeon General. U.S. Public Health Service, 1994. Data from 1993 from "Youth Risk Behavior Surveillance—United States 1993," Morbidity and Mortality Weekly Report, Vol. 44, No. SS-1, 1995. Data from 1995 from "Youth Risk Behavior Surveillance—United States 1995," Morbidity and Mortality Weekly Report, Vol. 45, No. SS-4, 1996.

SD 3.2

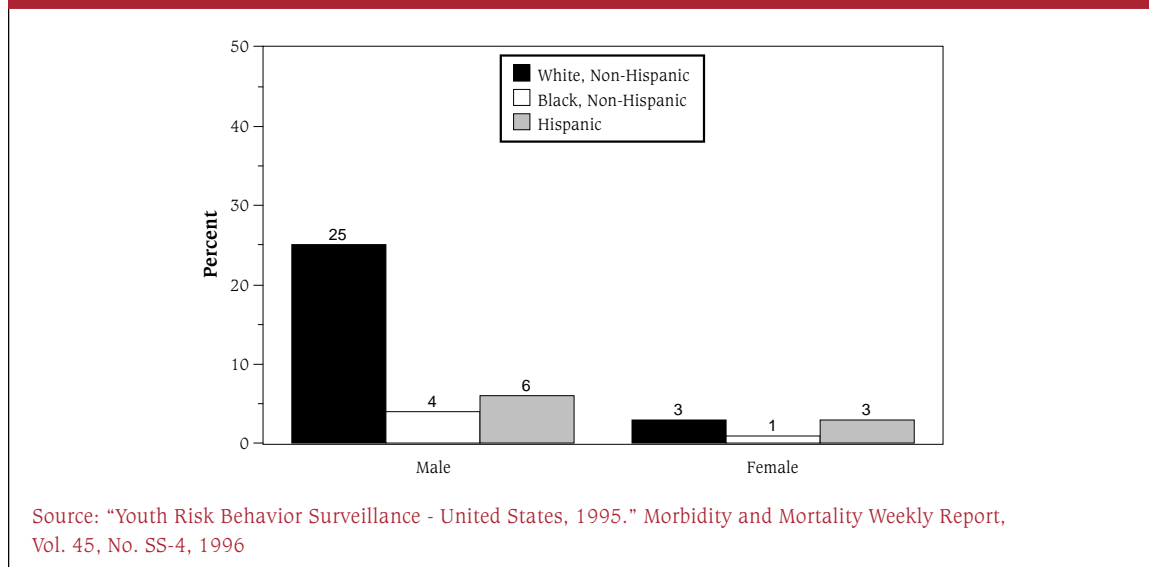
SMOKELESS TOBACCO USE AMONG YOUTH

The use of smokeless tobacco — snuff and chewing tobacco — is associated with a substantially higher risk of developing oral cancer.²¹ In 1995, eleven percent of students in grades 9-12 participating in a national in-school survey reported using smokeless tobacco in the last 30 days. The prevalence of smokeless tobacco use has remained fairly constant in recent years (see Table SD 3.2).

Differences by Gender. Unlike cigarette smoking, male students are significantly more likely to use smokeless tobacco than are female students, with 20 percent of males and only 2 percent of females reporting smokeless tobacco use in 1995.

Differences by Race.²² The use of smokeless tobacco is most prevalent among white, non-Hispanic male youth, with one-quarter reporting having used smokeless tobacco one or more times in the 30 days preceding the survey in 1995, compared to 6 percent of Hispanic male youth and 4 percent of black male youth (see Figure SD 3.2).

Figure SD 3.2
Smokeless Tobacco: Percentage of Youth in Grades 9-12 Who Report Having Used Smokeless Tobacco During the Previous Thirty Days, by Gender and Race/Ethnicity: 1995



²¹ Public Health Service. 1986. *The Health Consequences of Using Smokeless Tobacco. A Report to the Surgeon General.* DHHS Pub. No. (NIH) 86-2874. U.S. Department of Health and Human Services.

²² Estimates for whites and blacks exclude Hispanics of those races.

Table SD 3.2
Smokeless Tobacco: Percentage of Youth in Grades 9-12 Who Report Having Used Smokeless Tobacco During the Previous Thirty Days: 1991, 1993, and 1995

	1991			1993			1995		
	Total	Male	Female	Total	Male	Female	Total	Male	Female
Total	11	19	1	12	20	2	11	20	2
Race/Ethnicity									
White, Non-Hispanic	13	24	1	15	26	2	15	25	3
Black, Non-Hispanic	2	4	1	3	5	1	2	4	1
Hispanic	6	11	1	5	8	2	4	6	3

Sources: Data for 1991 from U.S. Department of Health and Human Services, Preventing Tobacco Use Among Young People, A Report of the Surgeon General. U.S. Public Health Service, 1994. Data for 1993 from "Youth Risk Behavior Surveillance-United States 1993," Morbidity and Mortality Weekly Report, Vol. 44, No. SS-1, 1995. Data for 1995 from "Youth Risk Behavior Surveillance -- United States, 1995." Morbidity and Mortality Weekly Report, Vol. 45, No. SS-4, 1996.

SD 3.3

BINGE DRINKING AMONG YOUTH

Alcohol use among adolescents is linked to a host of problems including motor vehicle crashes and deaths, difficulties in school and the workplace, fighting, and breaking the law.²³ In addition, binge drinking by youth—having five or more drinks in a row at some point in the previous two weeks—is associated with higher levels of illicit drug use.²⁴

Among 12th grade students, rates of binge drinking fell from a high of 41.2 percent in 1980 to 27.5 percent in 1993. Between 1993 and 1996, rates have edged up modestly to 30.2 percent.²⁵

Differences by Age. Binge drinking increases as students move into the upper grade levels (see Figure SD 3.3). In 1996, 15.6 percent of 8th grade students reported binge drinking, while nearly twice this percentage reported binge drinking in 12th grade. The larger increase in binge drinking appears to occur between the 8th and 10th grade, rather than in the period between the upper grade levels (see Table SD 3.3.A).

Differences by Gender. Male students report higher rates of binge drinking than do female students at all grade levels. The disparity in binge drinking rates between males and females is greater in the upper grades, with nearly 37 percent of males and 23 percent of females in the 12th grade reporting binge drinking in 1995.

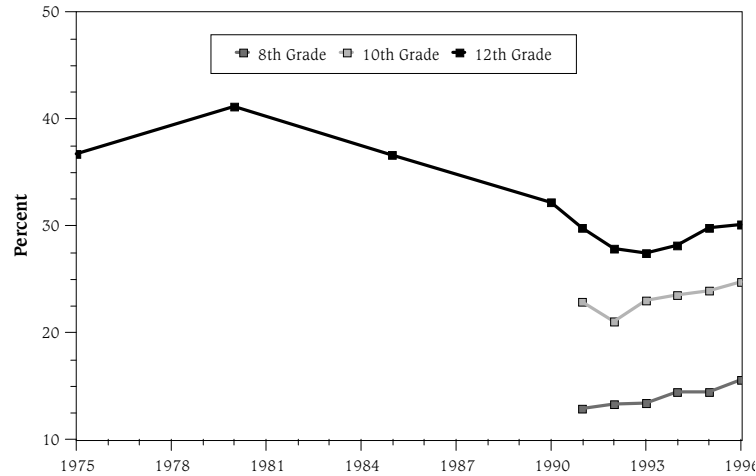
Differences by Race. Hispanic youth in the 8th grade are more likely than their white and black peers to engage in binge drinking. By the 12th grade, however, white students report a higher prevalence of binge drinking than do either Hispanic or black students. Black students consistently report the lowest prevalence of binge drinking; for all grades and across both time periods, less than 15 percent of black students report binge drinking (see Table SD 3.3.B).

²³ National Institute on Drug Abuse. *National Trends in Drug Use and Related Factors Among American High School Students and Young Adults, 1976-1986*. DHHS Pub. No. (ADM)87-1535. Washington, D.C.: U.S. Department of Health and Human Services, 1987.

²⁴ Substance Abuse and Mental Health Services Administration. *Preliminary Estimates From the 1995 National Household Survey on Drug Abuse*. Rockville, Maryland: Public Health Service, 1996. 1995 results indicate that among binge drinkers, 18 percent were illicit drug users. In this survey, binge drinking is defined as five or more drinks on the same occasion at least once in the past month.

²⁵ These percentages underestimate the rate of binge drinking among all youth, because school age youth who are not in school are somewhat more likely to binge drink than those in school. (Based on unpublished analyses of the National Health Interview Survey 1992 by Child Trends, Inc. and by unpublished prevalence rates of past month alcohol use among youths ages 12-17 by school status, enrolled or not-enrolled, from the 1994-95 National Household Surveys on Drug Abuse).

Figure SD 3.3
Binge Drinking: Percentage of 8th, 10th, and 12th Grade Students Who Reported Having Five or More Drinks in a Row in the Previous Two Weeks: 1975-1996



Sources: Johnston, L.D., O' Malley, P.M., Bachman, J.G., "National Survey Results on Drug Use from The Monitoring the Future Study, 1975-1995." Rockville, Maryland: National Institutes of Health, National Institute on Drug Abuse, NIH Publication No. 97-4139, 1997. Institute for Social Research, University of Michigan. Tables D-27 and D-28. 1996 data from: The Monitoring the Future Study, The University of Michigan. "The rise in drug use among American teens continues in 1996." Press release of December 19, 1996.

Table SD 3.3A
Binge Drinking: Percentage of 8th, 10th, and 12th Grade Students Who Reported Having Five or More Drinks in a Row in the Previous Two Weeks, by Gender: Selected Years, 1975-1996

	1975	1980	1985	1990	1991	1992	1993	1994	1995	1996
8TH GRADE										
Total	—	—	—	—	12.9	13.4	13.5	14.5	14.5	15.6
Male	—	—	—	—	14.3	13.9	14.8	16.0	15.1	—
Female	—	—	—	—	11.4	12.8	12.3	13.0	13.9	—
10TH GRADE										
Total	—	—	—	—	22.9	21.1	23.0	23.6	24.0	24.8
Male	—	—	—	—	26.4	23.7	26.5	28.5	26.3	—
Female	—	—	—	—	19.5	18.6	19.3	18.7	21.5	—
12TH GRADE										
Total	36.8	41.2	36.7	32.2	29.8	27.9	27.5	28.2	29.8	30.2
Male	49.0	52.1	45.3	39.1	37.8	35.6	34.6	37.0	36.9	—
Female	26.4	30.5	28.2	24.4	21.2	20.3	20.7	20.2	23.0	—

Sources: Johnston, L.D., O' Malley, P.M., Bachman, J.G., "National Survey Results on Drug Use from The Monitoring the Future Study, 1975-1995." Rockville, Maryland: National Institutes of Health, National Institute on Drug Abuse, NIH Publication No. 97-4139, 1997. Institute for Social Research, University of Michigan. Tables D-27 and D-28. 1996 data from: The Monitoring the Future Study, The University of Michigan. "The rise in drug use among American teens continues in 1996." Press release of December 19, 1996.

Table SD 3.3.B
Binge Drinking: Percentage of 8th, 10th, and 12th Graders Who Reported Having Five or More Drinks in a Row in the Previous Two Weeks, Variations by Race/Ethnicity Group: 1992-1993 and 1994-1995

	1992-1993 ^a				1994-1995 ^a		
	8th Grade	10th Grade	12th Grade		8th Grade	10th Grade	12th Grade
White	12.6	23.0	31.3	White	13.9	25.4	32.3
Black	10.7	14.8	12.6	Black	10.8	13.3	14.9
Hispanic	21.4	23.8	27.2	Hispanic	22.0	26.8	26.6

Note: ^aTo derive percentages for each racial subgroup, data for two years have been combined to increase subgroups sample sizes and thus provide more stable estimates.

Sources: Johnston, L.D., O' Malley, P.M., Bachman, J.G., "National Survey Results on Drug Use from The Monitoring the Future Study, 1975-1995." Rockville, Maryland: National Institutes of Health, National Institute on Drug Abuse, NIH Publication No. 97-4139, 1997. Institute for Social Research, University of Michigan. Tables D-27 and D-28.

SD 3.4

EXPOSURE TO DRUNK DRIVING

Motor vehicle crashes are a major cause of death in the U.S. for teenagers (13-19 year olds). Among young Americans of driving age, the issue of alcohol-impaired driving has particular significance. In all states, the purchase of alcohol by persons under age 21 is illegal; however, in 1994, 29 percent of the 2,610 traffic fatalities involving persons 15-17 years old were alcohol-related. For traffic deaths involving persons 18-20 years old, the percentage of alcohol involvement was 44 percent.²⁶

In 1995, 42 percent of teens in grades 9-12 reported that within the last month prior to the survey, they had either driven after drinking alcohol or had ridden with a driver who had been drinking alcohol — the same percentage as in 1991, and slightly higher than the 38 percent who reported doing so in 1993 (see Table SD 3.4).

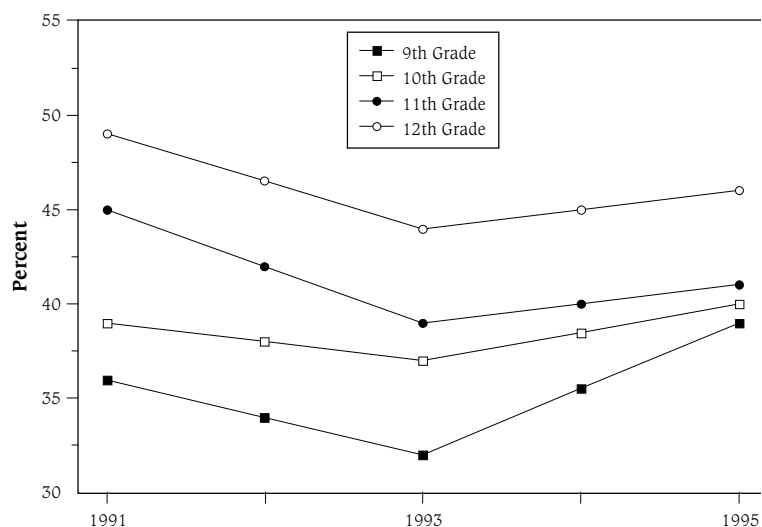
Differences by Age. Rates of exposure to drunk driving differed little by age. In 1995, 46 percent of 12th grade students reported taking this risk, compared with 39 percent of 9th grade students (see Figure SD 3.4).

Differences by Gender. In 1995, 43 percent of males and 40 percent of females reported driving after drinking alcohol or riding with someone who had been drinking.

Differences by Race and Ethnicity. In 1995, 52 percent of Hispanic, 41 percent of white, and 39 percent of black teens reported having been exposed to drunk driving within the last month.

²⁶ "Update: Alcohol-Related Traffic Crashes and Fatalities Among Youth and Young Adults — United States, 1982-1994." *Morbidity and Mortality Weekly Report* 44:869-874.

Figure SD 3.4
Drunk Driving: Percentage of Teens in Grades 9-12 Who Reported Driving After Drinking Alcohol, or Riding with a Driver Who Had Been Drinking Alcohol, Within the Last Thirty Days, by Grade: 1991, 1993, and 1995



Source: Youth Risk Behavior Surveillance -- United States, 1991, 1993 and 1995. Unpublished tabulations by L. Kann, Centers for Disease Control and Prevention, Department of Health and Human Services.

Table SD 3.4
Drunk Driving: Percentage of Teens in Grades 9-12 Who Report Driving After Drinking Alcohol, or Riding with a Driver Who Had Been Drinking Alcohol, Within the Last Thirty Days: 1991, 1993, and 1995

	1991	1993	1995
Total	42	38	42
Gender			
Male	44	40	43
Female	41	36	40
Grade			
9th	36	32	39
10th	39	37	40
11th	45	39	41
12th	49	44	46
Race/Ethnicity			
White	43	37	41
Black	38	41	39
Hispanic	49	45	52

Source: Youth Risk Behavior Surveillance — United States, 1991, 1993, and 1995. Unpublished tabulations by L. Kann, Centers for Disease Control and Prevention, Department of Health and Human Services.

SD 3.5

DRUG USE AMONG YOUTH: MARIJUANA, INHALANTS, HALLUCINOGENS, AND COCAINE

Drug use by youth has serious and often long-term individual, social, and economic consequences. Drug use contributes to crime, decreases economic productivity and requires a disproportionate share of health care services for those affected. Use of drugs is a preventable behavior that, when established in youth, can extend into adulthood. The health effects on individuals are striking for those drugs specified in this section.

- ▶ The use of cocaine has been linked with numerous health problems ranging from eating disorders to disability and even death from heart attack and stroke.²⁷
- ▶ Marijuana use holds both health and cognitive risks, particularly for damage to pulmonary functions as a result of chronic use.²⁸
- ▶ Hallucinogens can affect brain chemistry and result in problems both in learning new information and retaining knowledge.²⁹
- ▶ Chronic use of some inhalants may result in injury to the liver and kidneys as well as cause neurological damage, although it is not yet determined whether such damage is long-term.³⁰

Marijuana Use.³¹ From a high of 33.7 percent in 1980, large and steady declines in the percentage of 12th graders reporting marijuana use were evident until 1992. Since 1992, however, marijuana use among 12th grade students has increased from 11.9 percent to 21.9 percent by 1996 (see Figure SD 3.5.A). There have also been increases in marijuana use among 8th and 10th graders in recent years. The rise in marijuana use is also evident among 8th grade students whose use has increased from 3.2 percent in 1991 to 11.3 percent in 1996. Marijuana use by 10th graders rose from 8.7 percent in 1991 to 20.4 percent by 1996.

²⁷ Blanken, A.J. 1993. "Measuring Use of Alcohol and Other Drugs Among Adolescents." In *Public Health Reports, Journal of the U.S. Public Health Service, Volume 108, Supplement 1, 1993*.

²⁸ Blanken, A.J. 1993. "Measuring Use of Alcohol and Other Drugs Among Adolescents." In *Public Health Reports, Journal of the U.S. Public Health Service, Volume 108, Supplement 1, 1993*.

²⁹ "Measuring the Health Behavior of Adolescents: The Youth Risk Behavior Surveillance System and Recent Reports on High-Risk Adolescents." *Public Health Reports. Vol. 108, Supplement 1. Rockville, Maryland: Public Health Service. 1993*.

³⁰ *Ibid.*

³¹ *These percentages likely underestimate the rate of drug use among all youth, because school age youth who are not in school are somewhat more likely to use drugs than those in school. (Based on unpublished prevalence rates of past month marijuana use, past year cocaine use and past year inhalant use among youths ages 12-17 by school status, enrolled or not-enrolled, from the 1994-95 National Household Surveys on Drug Abuse.)*

Marijuana has consistently been used by higher percentages of 10th and 12th graders than any of the other drugs specified here. As of 1994, marijuana use among 8th grade students had surpassed prevalence rates of other drugs shown (see Table SD 3.5.A). This increase in the use of marijuana corresponds with a decline in its perceived harmfulness by students across all grade levels from 1991 to 1996.³²

Use of other specified drugs. Increases have also been shown in the use of cocaine and hallucinogens since 1991 across all grade levels. In recent years, cocaine use has been least prevalent in all grade levels, with a high of 2.0 percent of 12th grade students reporting use within a 30-day period in 1996 (see Figure SD 3.5.B). Hallucinogens have low prevalence rates among 8th graders (1.9 percent), although use increases with grade, eventually surpassing the use of inhalants for the upper grade levels. The use of inhalants is highest among 8th grade students and has increased since 1991, with 5.8 percent reporting use in the past 30 days in 1996.

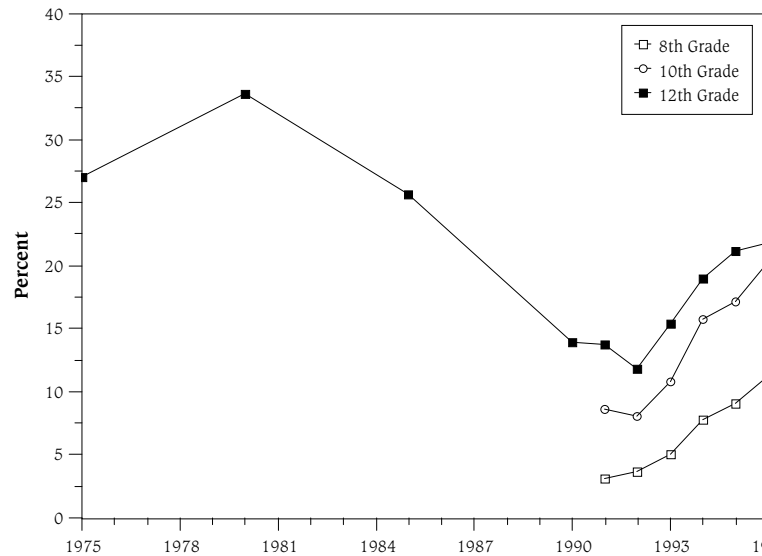
Differences by Age. As seen with cigarette and alcohol use (See Sections SD 3.1 and SD 3.3), use of both marijuana and hallucinogens increases with grade level. This increase is relatively small for hallucinogen use, but is substantial for marijuana use. In 1996, 11.3 percent of 8th grade students reported using marijuana in the last 30 days. Nearly double that percentage of 12th graders (21.9 percent) reported using marijuana within the last 30 days. In contrast, inhalant use is more prevalent in the 8th grade than in either the 10th or 12th grade level. The rate of inhalant use among 8th graders was 5.8 percent compared with 3.3 percent for 10th graders and 2.5 percent for high school seniors in 1996. The prevalence of cocaine use is somewhat lower among 8th graders, but is relatively similar across grade levels, never exceeding 2 percent in 1996.

Differences by Gender. Males are somewhat more likely than female high school students to report using inhalants, hallucinogens, and cocaine. The largest gender difference is seen in marijuana use and is most apparent in the upper grade levels. Among 8th grade students, 9.8 percent of males and 8.2 percent of females reported marijuana use within the preceding 30 days of the survey in 1995. In the 10th grade, males reported marijuana use 4 percentage points higher than that of females. This gender gap increases to 7 percentage points among high school seniors.

Differences by Race. For each category of drug use shown, black students consistently have the lowest rates of use across all grades (see Table SD 3.5.B).

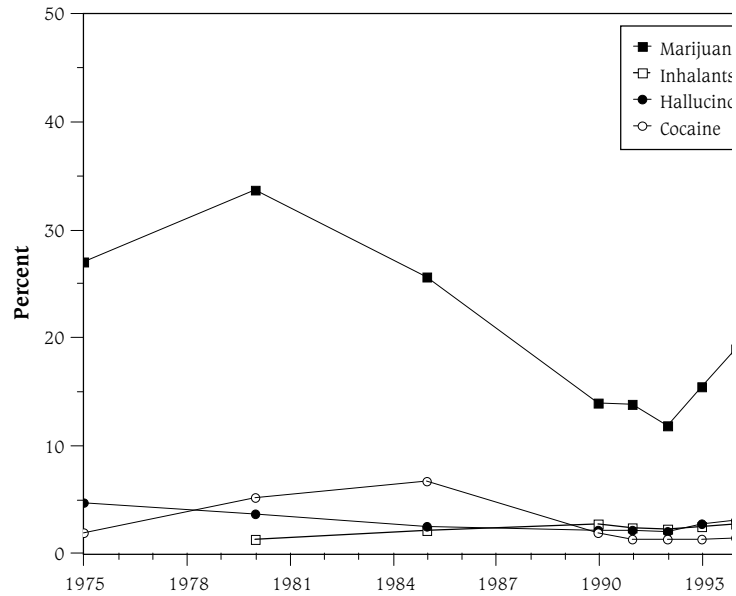
³² *The data on perceived harmfulness of specified drugs is not shown here but can also be obtained from The Monitoring the Future Study. The percentage of students who think that smoking marijuana occasionally or regularly is harmful, physically or in other ways, has dropped by at least 13 percentage points from 1991 to 1996 across all grade levels according to The Monitoring the Future Study. In 1996, 25.9 percent of 12th grade students perceived smoking marijuana occasionally to be harmful and 59.9 percent perceived smoking marijuana regularly to be harmful.*

Figure SD 3.5.A
Percentage of 8th, 10th, and 12th Grade Students Who Reported Having Used Marijuana Within the Previous Thirty Days: 1975-1996



Sources: Johnston, L.D., O'Malley, P.M., Bachman, J.G., "National Survey Results on Drug Use from the Monitoring the Future Study, 1975-1995." Rockville, Maryland: National Institutes of Health. National Institute on Drug Abuse. NIH Pub. No. 97-4139, 1997. Institute for Social Research, University of Michigan. 1996 data from: The Monitoring the Future Study, The University of Michigan. "The rise in drug use among American teens continues in 1996." Press release of December 19, 1996.

Figure SD 3.5.B
Percentage of High School Seniors Who Reported Having Used Specified Drugs Within the Previous Thirty Days: 1975-1996



Sources: Johnston, L.D., O'Malley, P.M., Bachman, J.G., "National Survey Results on Drug Use from the Monitoring the Future Study, 1975-1995." Rockville, Maryland: National Institutes of Health. National Institute on Drug Abuse. NIH Pub. No. 97-4139, 1997. Institute for Social Research, University of Michigan. 1996 data from: The Monitoring the Future Study, The University of Michigan. "The rise in drug use among American teens continues in 1996." Press release of December 19, 1996.

Table SD 3.5.A
Percentage of 8th, 10th, and 12th Grade Students Who Reported
Having Used Specified Drugs Within the Previous 30 Days: 1975-1996

	1975	1980	1985	1990	1991	1992	1993	1994	1995	1996
MARIJUANA/HASHISH										
8th	—	—	—	—	3.2	3.7	5.1	7.8	9.1	11.3
Male	—	—	—	—	3.8	3.8	6.1	9.5	9.8	—
Female	—	—	—	—	2.6	3.5	4.1	6.0	8.2	—
10th	—	—	—	—	8.7	8.1	10.9	15.8	17.2	20.4
Male	—	—	—	—	10.1	9.0	13.1	18.6	19.1	—
Female	—	—	—	—	7.3	7.1	8.6	12.8	15.0	—
12th	27.1	33.7	25.7	14.0	13.8	11.9	15.5	19.0	21.2	21.9
Male	32.3	37.8	28.7	16.1	16.1	13.4	18.2	23.0	24.6	—
Female	22.5	29.1	22.4	11.5	11.2	10.2	12.5	15.1	17.2	—
INHALANTS^a										
8th	—	—	—	—	4.4	4.7	5.4	5.6	6.1	5.8
Male	—	—	—	—	4.0	4.4	4.9	5.4	5.6	—
Female	—	—	—	—	4.7	4.9	6.0	5.8	6.6	—
10th	—	—	—	—	2.7	2.7	3.3	3.6	3.5	3.3
Male	—	—	—	—	2.9	2.9	3.7	3.9	3.8	—
Female	—	—	—	—	2.6	2.6	2.9	3.3	3.2	—
12th	—	1.4	2.2	2.7	2.4	2.3	2.5	2.7	3.2	2.5
Male	—	1.8	2.8	3.5	3.3	3.0	3.2	3.6	3.9	—
Female	—	1.0	1.7	2.0	1.6	1.6	1.7	1.9	2.5	—
HALLUCINOGENS^b										
8th	—	—	—	—	0.8	1.1	1.2	1.3	1.7	1.9
Male	—	—	—	—	0.9	1.1	1.3	1.5	1.8	—
Female	—	—	—	—	0.7	1.0	1.1	1.0	1.5	—
10th	—	—	—	—	1.6	1.8	1.9	2.4	3.3	2.8
Male	—	—	—	—	1.8	2.1	2.5	3.0	3.9	—
Female	—	—	—	—	1.4	1.4	1.3	1.7	2.7	—
12th	4.7	3.7	2.5	2.2	2.2	2.1	2.7	3.1	4.4	3.5
Male	6.0	4.8	3.4	3.2	3.1	2.9	3.6	4.3	5.8	—
Female	3.6	2.5	1.4	1.0	1.1	1.4	1.7	1.7	2.7	—
COCAINE										
8th	—	—	—	—	0.5	0.7	0.7	1.0	1.2	1.3
Male	—	—	—	—	0.7	0.6	0.9	1.2	1.1	—
Female	—	—	—	—	0.4	0.8	0.6	0.9	1.2	—
10th	—	—	—	—	0.7	0.7	0.9	1.2	1.7	1.7
Male	—	—	—	—	0.7	0.8	1.2	1.4	1.8	—
Female	—	—	—	—	0.6	0.6	0.5	0.9	1.5	—
12th	1.9	5.2	6.7	1.9	1.4	1.3	1.3	1.5	1.8	2.0
Male	2.5	6.0	7.7	2.3	1.7	1.5	1.7	1.9	2.2	—
Female	1.2	4.3	5.6	1.3	0.9	0.9	0.9	1.1	1.3	—

^aAll data are unadjusted for underreporting of nitrites.

^bAll data are unadjusted for underreporting of PCP.

Sources: Johnston, L.D., O'Malley, P.M., Bachman, J.G., "National Survey Results on Drug Use from The Monitoring the Future Study, 1975-1995." Rockville, Maryland: National Institutes of Health. National Institute on Drug Abuse. NIH Pub. No. 97-4139, 1997. Institute for Social Research, University of Michigan. Tables 2-3-12, 3-3-12, 5-3-12, 9-3-12, and 8. 1996 data from: The Monitoring the Future Study, The University of Michigan. "The rise in drug use among American teens continues in 1996." Press release of December 19, 1996.

Table SD 3.5.B
Percentage of 8th, 10th, and 12th Grade Students Who Reported
Using Specified Drugs Within the Previous Thirty Days:
Variations by Race/Ethnicity, 1992-1993 and 1994-1995

	1992-1993 ^a			1994-1995 ^a		
	8th Grade	10th Grade	12th Grade	8th Grade	10th Grade	12th Grade
MARIJUANA/HASHISH						
White	4.1	9.8	14.9	7.8	16.8	20.8
Black	2.9	4.9	8.1	6.6	13.8	16.8
Hispanic	8.3	12.4	12.5	12.9	17.7	17.9
INHALANTS						
White	5.4	3.2	2.6	6.6	3.9	3.3
Black	2.7	2.0	1.4	2.5	1.3	1.4
Hispanic	5.6	3.0	2.1	6.5	3.4	2.3
HALLUCINOGENS						
White	1.1	2.1	2.9	1.6	3.1	4.1
Black	0.4	0.3	0.5	0.4	0.8	0.7
Hispanic	1.9	1.8	1.7	1.9	2.7	3.4
COCAINE						
White	0.5	0.8	1.2	0.9	1.4	1.6
Black	0.4	0.2	0.4	0.4	0.6	0.5
Hispanic	1.8	1.2	2.4	2.5	2.4	2.3

Note: ^aData have been combined for two years to increase subgroup sample sizes, and provide more stable estimates.

Sources: Johnston, L.D., O'Malley, P.M., Bachman, J.G. "National Survey Results on Drug Use from the Monitoring the Future Study, 1975-1995." Rockville, Maryland: National Institutes of Health. National Institute on Drug Abuse, NIH Pub. No. 97-4139, 1997. Institute for Social Research, the University of Michigan. Table 10.

SD. 3.6

PEER ATTITUDES TOWARDS ALCOHOL, MARIJUANA, COCAINE, AND SMOKING

Drug use is correlated with attitudes and beliefs about drugs, both in terms of perceived health risks and the level of peer disapproval.³³ As children reach adolescence, peer influences on personal behavior can take on increasing importance in determining the use of drugs, alcohol and cigarettes.

The majority of high school seniors have long reported peer disapproval of drug and alcohol use and cigarette smoking as reflected in their responses to questions of the level of disapproval they would receive from their peers for: 1) taking one to two drinks nearly every day; 2) smoking marijuana even occasionally (as opposed to trying it once); 3) taking cocaine even occasionally (as opposed to trying it once); and, 4) smoking one or more packs of cigarettes per day (see Table SD 3.6).

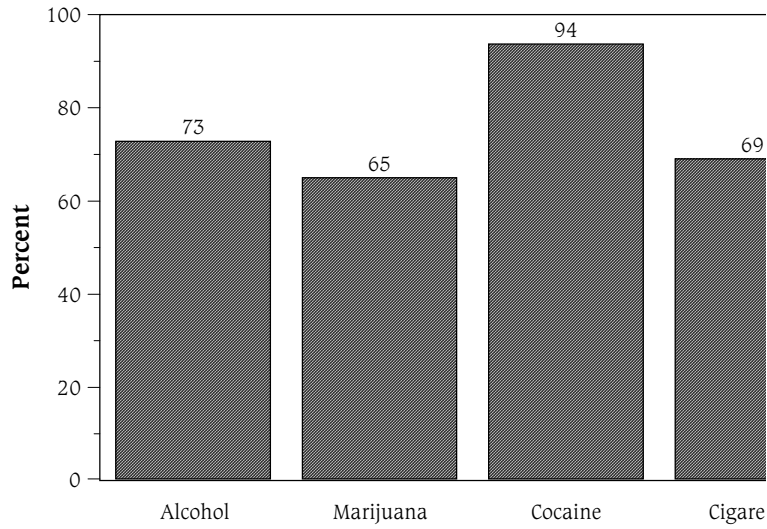
Peer disapproval of drinking and smoking marijuana among 12th graders increased from 1981 to 1992 to highs of 78 percent and 79 percent, respectively. Disapproval of both these actions began to decline in 1993. By 1995, the percentage of 12th grade students who reported peer disapproval of drinking was 73 percent, and of smoking marijuana was 65 percent (see Figure SD 3.6). Peer disapproval of smoking cigarettes has also declined since 1992, although disapproval levels had been relatively stable prior to that time. In 1995, 69 percent of 12th graders reported peer disapproval of smoking cigarettes, down from a high of 76 percent in 1992. Peer disapproval of cocaine use increased from 87 percent in 1986 to 95 percent in 1991 and has remained at this level. Cocaine use commands the highest level of peer disapproval for every year shown.

Differences by Gender. Male high school seniors have consistently reported lower levels of peer disapproval of drinking than have their female peers. In 1995, 65 percent of males reported peer disapproval of drinking, compared to 80 percent of females. Disapproval rates for cigarette use were similar for males and females until 1993, when male disapproval began to decrease. Male students also report somewhat lower peer disapproval of smoking marijuana.

Differences by Race. For 1995, rates of disapproval for drug use were generally similar for blacks and whites, with the exception of cigarette smoking. Among blacks, 81 percent reported peer disapproval of smoking compared to 67 percent among white students.

³³ *Substance Abuse and Mental Health Services Administration. "Preliminary Estimates from the 1995 National Household Survey on Drug Abuse." Rockville, Maryland: Public Health Service, 1996.*

Figure SD 3.6
Percentage of High School Seniors Who Reported that Peers Would Not Approve of Their Using Alcohol, Marijuana, Cocaine, or Cigarettes: 1995



Source: Johnston, L.D., Bachman, J.G. , O'Malley, P.M. "The Monitoring the Future: Questionnaire responses from the Nation's High School Seniors." 1981, 1986, 1991, 1992, 1993, 1994, 1995. (Form 4.) Ann Arbor, Michigan: Institute for Social Research, The University of Michigan.

Table SD 3.6
Percentage of High School Seniors Who Reported that Peers Would Not Approve of Their Using Alcohol, Marijuana, Cocaine, or Cigarettes: Selected Years 1981-1995

	1981	1986	1991	1992	1993	1994	1995
<i>Disapprove of taking one to two drinks nearly every day</i>							
Total	70	76	77	78	77	76	73
Gender							
Male	61	68	68	69	68	67	65
Female	79	84	85	85	85	83	80
Race							
White	69	75	77	77	76	76	72
Black	73	82	80	81	80	78	74
<i>Disapprove of smoking marijuana even occasionally</i>							
Total	56	64	76	79	74	69	65
Gender							
Male	54	60	73	78	72	63	62
Female	58	68	78	80	75	74	69
Race							
White	55	63	75	78	73	68	64
Black	62	72	86	84	76	70	69
<i>Disapprove of taking cocaine even occasionally^a</i>							
Total	--	87	95	94	94	94	94
Gender	--						
Male	--	84	93	93	92	91	92
Female	--	90	96	96	96	96	95
Race	--						
White	--	88	96	96	95	94	95
Black	--	89	97	91	89	94	92
<i>Disapprove of smoking one or more packs of cigarettes per day</i>							
Total	74	76	74	76	72	72	69
Gender							
Male	74	75	72	76	68	67	65
Female	74	77	77	75	75	77	74
Race							
White	74	75	72	77	71	69	67
Black	75	81	88	75	80	83	81

^aThe question regarding cocaine use was not included prior to 1986.

Source: Johnston, L.D., Bachman, J.G., O'Malley, P.M. "The Monitoring the Future: Questionnaire Responses from the Nation's High School Seniors." 1981, 1986, 1991, 1992, 1993, 1994, 1995. (Form 4) Ann Arbor, Michigan: Institute for Social Research, The University of Michigan. Data based on one of six questionnaire forms with a resulting sample size one-sixth of the total sample size for each year.

SD 3.7

ABUSE OF ALCOHOL OR OTHER CONTROLLED SUBSTANCES

The use of alcohol and other illicit drugs by teens has been related to numerous social problems such as delinquency, fighting, and early sexual activity,³⁴ and to a variety of short- and long-term health problems.³⁵ For many reasons, then, it is important that youth stay free of all such substances.

In 1995, 15 percent of 12 to 17 year olds reported either binge drinking or any use of an illicit drug during the previous month (see Table SD 3.7).

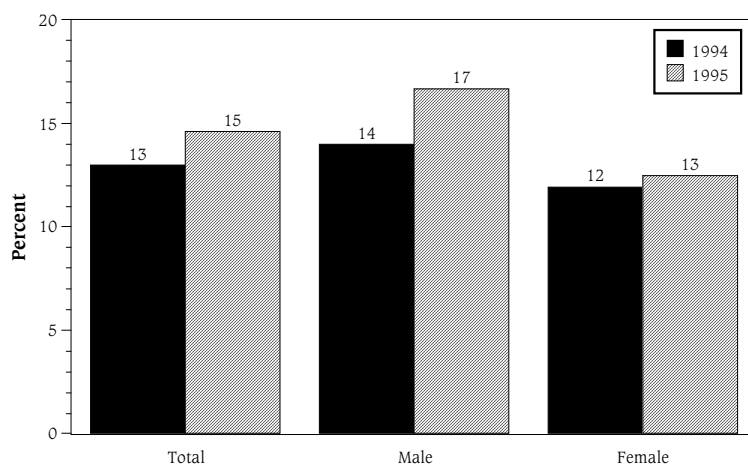
Differences by Gender. Rates of reported use in 1995 appear to be modestly higher among males at 17 percent, compared to 13 percent among female youth.

Differences by Race and Ethnicity. Rates of reported use differed little among whites, blacks, and Hispanics, ranging from 12 percent to 16 percent in 1995.

³⁴ National Institute of Drug Abuse. *National Trends in Drug Use and Related Factors Among American High School Students and Young Adults, 1976-1986*. DHHS Pub. No. (ADM)87-1535. Washington, D.C.: U.S. Department of Health and Human Services, 1987.

³⁵ *Measuring the Health Behavior of Adolescents: The Youth Risk Behavior Surveillance System and Recent Reports on High Risk Adolescents*. Public Health Reports. Volume 108, Supplement 1. Rockville, MD: Public Health Service. 1993.

Figure SD 3.7
Abuse of Alcohol or Other Controlled Substances: Percentage of Persons Reporting Using an Illicit Drug^a or Binge Drinking^b in the Past Month, by Sex for Persons 12-17 Years of Age, 1994-1995



Note: ^aIllicit drugs include marijuana, cocaine (including crack), heroin, hallucinogens (including PCP), inhalants, and nonmedical use of psychotherapeutics.

^bFive or more drinks on the same occasion on one or more days in the past 30 days.

Source: Office of Applied Studies, SAMHSA. National Household Survey on Drug Abuse.

Table SD 3.7
Abuse of Alcohol or Other Controlled Substances: Percentage of Persons Reporting Using an Illicit Drug^a or Binge Drinking^b in the Past Month, by Sex and Race for Persons 12-17 Years of Age, 1994-1995

	1994	1995
Total	13	15
Sex		
Male	14	17
Female	12	13
Race/Ethnicity		
White	15	16
Black	10	12
Hispanic	10	13

Note: ^aIllicit drugs include marijuana, cocaine (including crack), heroin, hallucinogens (including PCP), inhalants, and nonmedical use of psychotherapeutics.

^bFive or more drinks on the same occasion on one or more days in the past 30 days.

Source: Office of Applied Studies, SAMHSA. National Household Survey on Drug Abuse.

SD 4.1

SEXUALLY EXPERIENCED TEENS

Sexual experience, and particularly age at first intercourse, represent critical indicators of the risk of pregnancy and sexually transmitted diseases. Youth who begin having sex at younger ages are exposed to these risks over a longer period of time. Because sexual intercourse during the teen years, especially first intercourse, is often unplanned,³⁶ it is also often unprotected by contraception.³⁷ In addition, research has shown that youth who have early sexual experience are more likely at later ages to have more sexual partners and more frequent intercourse.³⁸

Trends over the past several decades show that increasing proportions of teens are sexually experienced — defined as ever having had sexual intercourse (see Table SD 4.1.A).

Trends Among Sexually Experienced Female Teens. Among female adolescents of all ages, the percentage who were sexually experienced has increased over time (see Table SD 4.1.A). For example, the percentage of 18-year-old females who were sexually experienced increased from 27 percent for the 1958-1960 cohort, to 35 percent for the 1970-1972 cohort, and to 52 percent for the 1985-1987 cohort. Cohorts are defined as those females who turned 20 in the specific time period presented.

Trends Among Sexually Experienced Male Teens. The percentage of male teens who were sexually experienced has also increased for male adolescents over age 14. For example, the percentage of 18-year-old males who were sexually experienced increased from 55 percent for the 1970-1972 cohort to 64 percent for the 1985-1987 cohort (see Table SD 4.1.A).

Differences by Age. Age is the most important correlate of teen sexual experience. By age 13, just under 1 in 10 males and only 1 in 50 females were sexually experienced, but by age 20, about 3 in 4 females and 4 in 5 males were sexually experienced (see Figure SD 4.1). By the late teen years, most teens are sexually experienced; however it is important to note that not all teens are sexually experienced. Among the 1985-1987 cohort of youth, nearly half of adolescent females and more than one-third of adolescent males had not had intercourse by age 18 (see Table SD 4.1.A). The pattern of more teenagers having had sex as age increases is reflected in the data for 1995 as well. Data from the Youth Risk Behavior Survey, a survey of students rather than all adolescents, show that, in the 9th grade, 37 percent of students report having had sexual intercourse. This percentage rises with each grade and reaches 66 percent by the 12th grade³⁹ (see Table SD 4.1.B).

³⁶ Lowenstein, G. and Furstenberg, F.F. 1991. "Is teenage sexual behavior rational?" *Journal of Applied Social Psychology* 21(12): 957-986.

³⁷ Forrest, J. D., and Singh, S. 1990. "The sexual and reproductive behavior of American women, 1982-1988." *Family Planning Perspectives* 22 (5): 206-214.

³⁸ Koyle, P., Jensen, L., Olsen, J., and Cundick, B. 1989. "Comparison of sexual behaviors among adolescents having an early, middle, and late first intercourse experience." *Youth and Society* 20(4): 461-475.

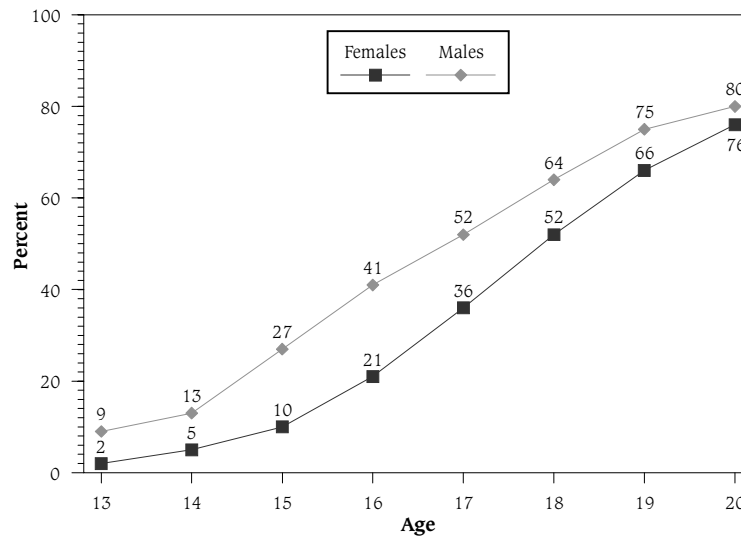
³⁹ Direct comparison with other years is not possible as grade in school does not accurately reflect age and data from the Youth Risk Behavior Survey only includes teens in school.

Differences by Gender. Until very recently, more teen males than females reported having had intercourse by a given age. Data from the 1985-1987 cohort suggest that the proportion of teen males at each year of age who report having sex was roughly equal to the number of sexually experienced teen females who are one year older (see Table SD 4.1.A). Caution should be exercised in interpreting these differences, however, since the data for males and females come from different surveys. Data for students from the Youth Risk Behavior Survey indicate that in 1995, gender differences were minimal or nonexistent, except for ninth grade (see Table SD 4.1.B).

Differences by Race.⁴⁰ Black students are more likely than white and Hispanic students to have had their first sexual experience while still in high school (see Table SD 4.1.B). Specifically, in 1995:

- 49 percent of both male and female white students reported having had sexual intercourse;
- 62 percent of Hispanic male students and 53 percent of Hispanic female students reported having had sexual intercourse;
- 81 percent of black male students and 73 percent of black female students reported having had sexual intercourse.

Figure SD 4.1
Percentage of Females and Males Who Have Had Intercourse by Each Age, Cohort Aged 20 in 1985-1987



Source: Alan Guttmacher Institute. (1994). *Sex and America's Teenagers*, New York, NY: Alan Guttmacher Institute. Based on data from the 1988 National Survey of Family Growth and the 1991 Survey of Men. Caution should be used in making direct comparisons of data from different surveys.

⁴⁰ Estimates for whites and blacks exclude Hispanics of those races.

Table SD 4.1.A
Sexually Experienced Teens: Percentage of Teens Who Have Had Intercourse by Each Age, Cohorts^a Aged 20 in 1958-1960, 1970-1972, and 1985-1987

FEMALES Who Turned Age 20 in:^b

Ages	1958-1960	1970-1972	1985-1987
13	1	0	2
14	2	1	5
15	3	4	10
16	8	9	21
17	16	20	36
18	27	35	52
19	46	53	66
20	61	68	76

MALES Who Turned Age 20 in:^b

Ages	1958-1960	1970-1972	1985-1987
13	--	11	9
14	--	15	13
15	--	20	27
16	--	30	41
17	--	41	52
18	--	55	64
19	--	67	75
20	--	74	80

Note: ^aCohorts are defined as those individuals who turned twenty-years-old within the specified time period.

^bData are based on females aged 30-32 and 42-44 in the 1982 National Survey of Family Growth (NSFG) and aged 21-23 and 36-38 in the 1988 NSFG and males aged 21-23 and 36-38 in the 1991 Survey of Men.

Source: Alan Guttmacher Institute, 1994. *Sex and America's Teenagers*, New York, NY. Alan Guttmacher Institute.

Table SD 4.1.B
Sexually Experienced Teens: Percentage of High School Students, Grades 9-12, Who Reported Ever Having Sexual Intercourse, by Sex, Race/Ethnicity, and Grade, 1995

	<u>Total</u>	<u>Male</u>	<u>Female</u>
Total	53	54	52
Grade			
9th	37	41	32
10th	48	50	46
11th	59	57	60
12th	66	67	66
Race/Ethnic Group			
White, Non-Hispanic	49	49	49
Black, Non-Hispanic	73	81	67
Hispanic	58	62	53

Source: Kann, L., Warren, C.W., Harris, W.A., Collins, J.L., Williams, B.I., Ross, J.G., Kolbe, L.J. *Youth Risk Behavior Surveillance — United States, 1995*. Morbidity and Mortality Weekly Report, Vol. 45, No. SS-4, 1996.

SD 4.2

SEXUALLY ACTIVE TEENS

Having become sexually experienced does not necessarily mean a teenager will be sexually active from that point on. They may still abstain from intercourse out of concern for the risk of pregnancy or sexually transmitted diseases, a preference for abstinence, or they may experience periods in which they do not have a sexual partner. Nevertheless, research indicates that once a person has had sex, they are likely to continue to be sexually active; among young adults aged 18-22 who had ever had intercourse, over 70 percent had a second experience of intercourse within six months of first intercourse.⁴¹

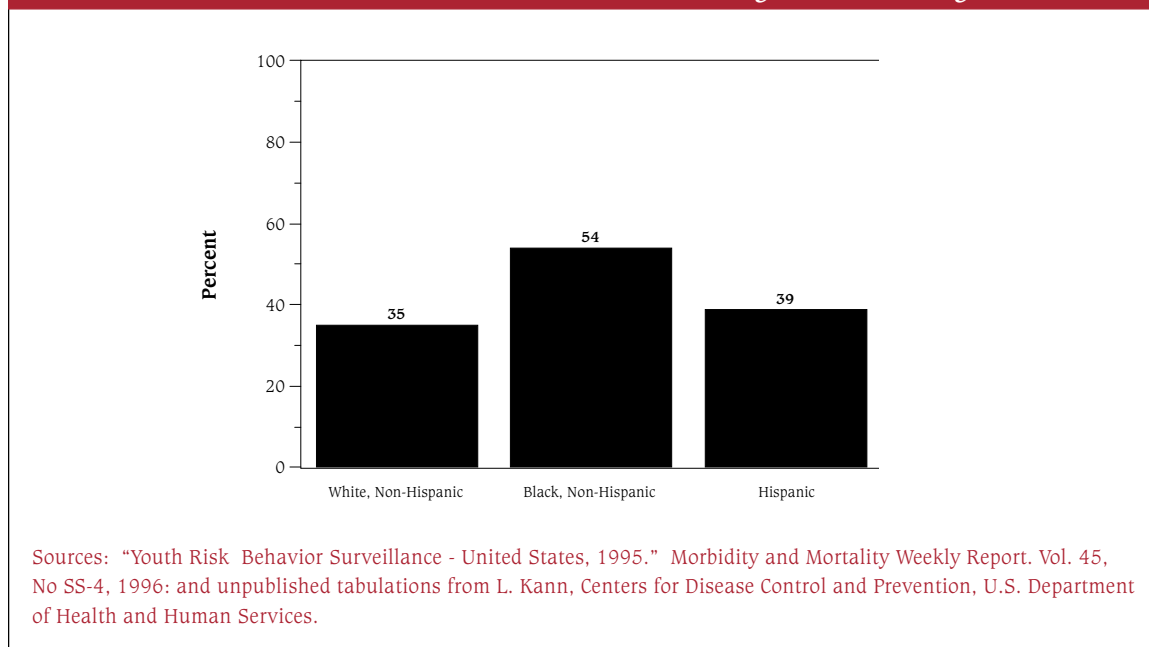
The percentage of teens in grades 9-12 who are sexually active — defined as having had sexual intercourse in the previous three months — has remained steady at 38 percent from 1991 to 1995 (see Table SD 4.2).

Differences by Gender. There is little difference between the percentages of male and female students who are sexually active. In 1995, 40 percent of males and 36 percent of females reported being sexually active.

Differences by Race.⁴² In 1995, black students were, at 54 percent, more likely than either non-Hispanic white (35 percent) or Hispanic (39 percent) students to be sexually active (see Figure SD 4.2).

Differences by Grade. The percentage of sexually active teens rises as grade increases. Twelfth grade students are nearly twice as likely to be sexually active than are 9th grade students.

*Figure SD 4.2
Sexually Active Teens: Percentage of Teens in Grades 9-12 Who Reported Having Had Sexual Intercourse in the Previous Three Months, by Race/Ethnicity: 1995*



⁴¹ Moore, K.A. and Peterson, J.L. August 1989. "The Consequences of Teenage Pregnancy." Final report to NICHD and ASPE/HHS, Grant number HD 21537.

⁴² Estimates for whites and blacks exclude Hispanics of those races.

Table SD 4.2
Sexually Active Teens: Percentage of Teens in Grades 9-12 Who Reported Having Had Sexual Intercourse in the Previous Three Months, by Gender, Race/Ethnicity, Grade, and Age: 1991, 1993, and 1995

	1991	1993	1995
Total	38	38	38
Sex			
Male	38	38	40
Female	37	38	36
Race			
White, Non-Hispanic	34	34	35
Black, Non-Hispanic	59	59	54
Hispanic	37	39	39
Grade			
9th	22	25	24
10th	33	30	34
11th	43	40	42
12th	51	53	50
Age			
15 years	24	25	28
16 years	38	35	37
15 or 16 years	31	31	32

Sources: "1990-1991 Youth Risk Behavior Surveillance System." Chronic Disease and Health Promotion Reprints from the Morbidity and Mortality Weekly Report, Public Health Service, Centers for Disease Control and Prevention. "Youth Risk Behavior Surveillance - United States, 1993." Morbidity and Mortality Weekly Report. Vol. 44, No. SS-1, 1995. "Youth Risk Behavior Surveillance - United States, 1995." Morbidity and Mortality Weekly Report. Vol. 45, No SS-4, 1996; and unpublished tabulations from L. Kann, Centers for Disease Control and Prevention, U.S. Department of Health and Human Services.

SD 4.3

CONTRACEPTIVE USE BY TEENS

Sexual intercourse without contraception puts a teen at risk of unintended pregnancy and of contracting sexually transmitted diseases such as HIV/AIDS. The vast majority of teens do not want to become pregnant. Data from a national survey show that among teens who had first intercourse at age 17 or younger, fewer than one in one hundred wanted a pregnancy to occur at that time. This was true for both males and females, and for both blacks and whites.⁴³

Condoms and birth control pills are the most common forms of contraception used by sexually active teenagers.⁴⁴ In 1995, over half (54 percent) of sexually experienced students in grades 9-12 reported use of a condom during their last sexual intercourse, while only 17 percent reported use of the birth control pill (see Tables SD 4.3.A and SD 4.3.B).

Condom use among sexually experienced students increased between 1990 to 1995 from 45 percent to 54 percent (see Table SD 4.3.A). Use of birth control pills has remained relatively steady from 1993 to 1995, with some subgroup differences that are discussed below (see Table SD 4.3.B).

Differences by Gender. Female students are less likely than male students to report having used a condom during their last intercourse (49 percent of females vs. 61 percent of males in 1995).

Differences by Grade. Use of condoms decreases as grade in school increases, while use of the pill increases with grade. In 1995, 63 percent of students in the 9th grade reported use of a condom compared with 50 percent of 12th grade students. In contrast, only 11 percent of 9th graders reported use of the pill, while a quarter of 12th graders reported its use (see Figure SD 4.3).

Differences by Race.⁴⁵ Black students report the highest use of condoms, while white students report the highest use of the pill. In 1995, white students were more likely to have used the pill during their last sexual intercourse (21 percent) than were either black students (10 percent) or Hispanic students (11 percent).

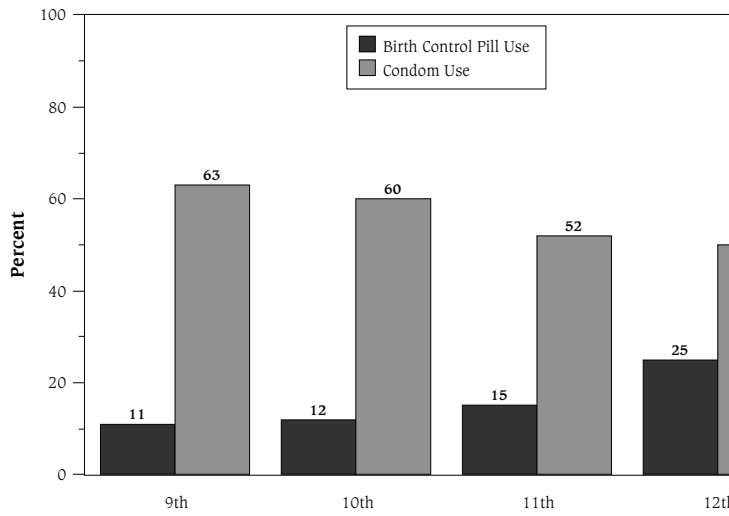
It is important to note that the data presented here include only those teens who are in school. Teens out of school are likely to have lower rates of contraceptive use as their access to education regarding the risks associated with unprotected sex, as well as guidance on how to obtain protection, is more limited.

⁴³ Moore, K.A. and Peterson, J.L. August, 1989. "The Consequences of Teenage Pregnancy." Final Report to NICHD and ASPE/DHHS, Grant No. HD 21537.

⁴⁴ Peterson, L.S. "Contraceptive Use in the United States: 1982-90." Advance Data, No. 260, February 14, 1995. Division of Vital Statistics, National Center for Health Statistics, Centers for Disease Control and Prevention. Data from the National Survey of Family Growth.

⁴⁵ Estimates for whites and blacks exclude Hispanics of those races.

Figure SD 4.3
Percentage of Sexually Experienced High School Students Who Reported Using a Contraceptive During Their Last Sexual Intercourse, by Method and Grade: 1995



Sources: "Youth Risk Behavior Surveillance- United States, 1993." Morbidity and Mortality Weekly Report. Vol. 44, No. SS-1, 1995. "Youth Risk Behavior Surveillance - United States, 1995." Morbidity and Mortality Weekly Report. Vol. 45, No. SS-4, 1996: and unpublished tabulations from L. Kann, Centers for Disease Control and Prevention, U.S. Department of Health and Human Services.

Table SD 4.3.A
Contraceptive Use: Percentage of Sexually Experienced High School Students Who Reported Using A Condom During Last Sexual Intercourse: 1990, 1993, and 1995

	1990			1993			1995		
	Total	Male	Female	Total	Male	Female	Total	Male	Female
Total	45	49	40	53	59	46	54	61	49
Grade									
9th	51	54	46	62	63	59	63	66	59
10th	48	53	43	55	63	46	60	68	52
11th	44	51	37	55	65	46	52	57	49
12th	42	45	38	47	52	41	50	57	43
Race/Ethnicity									
White, non-Hispanic	46	50	42	52	59	46	53	58	48
Black, non-Hispanic	47	55	37	57	64	48	66	72	61
Hispanic	38	47	28	46	55	37	44	56	33

Sources: "1990-1991 Youth Risk Behavior Surveillance System." Chronic Disease and Health Promotion Reprints from the Morbidity and Mortality Weekly Report Public Health Service, Centers for Disease Control and Prevention. "Youth Risk Behavior Surveillance-United States, 1993." Morbidity and Mortality Weekly Report. Vol. 44, No. SS-1, 1995. "Youth Risk Behavior Surveillance- United States, 1995." Morbidity and Mortality Weekly Report. Vol. 45, No. SS-4, 1996; and unpublished tabulations from L. Kann, Centers for Disease Control and Prevention.

Table SD 4.3.B**Contraceptive Use: Percentage of Sexually Experienced High School Students Who Reported Birth Pill Control Use During Last Sexual Intercourse: 1993 and 1995**

	1993			1995		
	Total	Male	Female	Total	Male	Female
Total	18	15	22	17	14	20
Grade						
9th	9	8	11	11	10	13
10th	14	10	17	12	9	16
11th	17	12	22	15	13	17
12th	26	23	29	25	21	29
Race/Ethnicity						
White, non-Hispanic	20	17	24	21	17	25
Black, non-Hispanic	15	11	21	10	8	12
Hispanic	12	10	15	11	14	9

Sources: "Youth Risk Behavior Surveillance- United States, 1993." Morbidity and Mortality Weekly Report. Vol. 44, No. SS-1, 1995. Youth Risk Behavior Surveillance - United States, 1995." Morbidity and Mortality Weekly Report. Vol. 45, No. SS-4, 1996: and unpublished tabulations from L. Kann, Centers for Disease Control and Prevention, U.S. Department of Health and Human Services.

SD 4.4

NUMBER OF SEXUAL PARTNERS

The greater the number of sexual partners a person has, the greater the risk of contracting sexually transmitted diseases including HIV/AIDS. While trend data on the sexual behavior of teens are limited, one study indicates that the proportion of sexually active females living in metropolitan areas who have had six or more sexual partners doubled from 1971 to 1988.⁴⁶

Differences by Gender. Male youth generally report a higher number of sexual partners than do female youth. In 1992, 31 percent of sexually active males and 18 percent of sexually active females ages 15-19 reported having six or more sexual partners. The number of sexual partners among sexually active females is concentrated at the lower end of the scale, with either one, two, or three partners reported (see Table SD 4.4.A). Among high school students surveyed in 1995, 21 percent of males reported having had four or more sexual partners compared to 14 percent of female students (see Table SD 4.4.B).

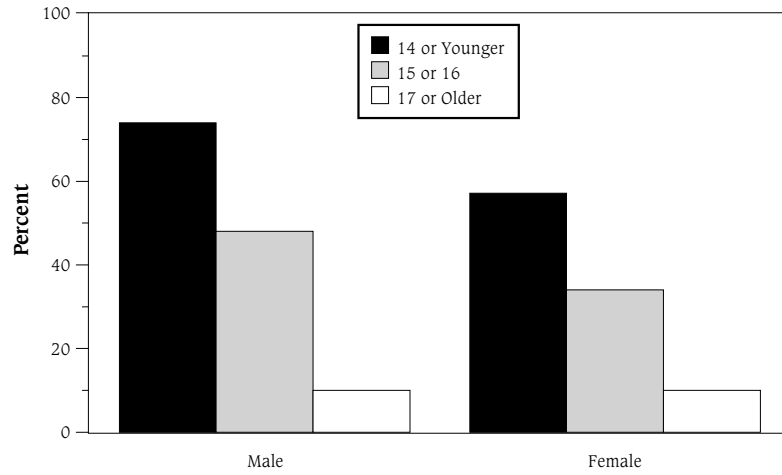
Differences by Race.⁴⁷ Black youth are more likely to have had four or more sexual partners than their white or Hispanic peers: 36 percent versus 14 and 18 percent, respectively (see Table SD 4.4.B).

Differences by Age at First Intercourse. Age at first intercourse has a strong association with the number of sexual partners a person has over a lifetime (see Table SD 4.4.C). Among teens who were age 20 in 1992, 74 percent of males who had sexual intercourse at age 14 or younger had six or more partners during their lifetime, compared to 48 percent of those who initiated sex at ages 15 or 16, and 10 percent of those who did not have intercourse until age 17 or older. A similar pattern exists for females (see Figure SD 4.4).

⁴⁶ Kost, K. and Forrest, J.D. 1992. "American women's sexual behavior and exposure to risk of sexually transmitted disease." *Family Planning Perspectives* 24 (6): 244-254. Based on data from the National Surveys of Young Women (1971, 1976, and 1979) and the 1988 National Survey of Family Growth.

⁴⁷ Estimates for whites and blacks exclude Hispanics of those races.

Figure SD 4.4
Percentage of Sexually Active Teens Age 20 With Six or More Lifetime Sexual Partners, by Age at First Intercourse: 1992



Source: 1992 National Health Interview Survey - Youth Risk Behavior Supplement. Tabulations by Child Trends, Inc.

Table SD 4.4.A
Sexual Partners: Percentage Distribution of Number of Lifetime Sexual Partners Among Sexually Active Teens Aged 15-19, by Gender, Race/Ethnicity and Poverty Level: 1992

	One Partner	2-3 Partners	4-5 Partners	≥ 6 Partners
Males	27	28	15	31
White, Non-Hispanic	31	29	15	26
Black, Non-Hispanic	12	26	17	45
Hispanic	24	31	12	33
Below poverty	22	23	15	40
At or above poverty	28	30	15	27
Females	36	32	15	18
White, Non-Hispanic	36	30	16	18
Black, Non-Hispanic	31	37	14	19
Hispanic	43	34	13	10
Below poverty	34	33	15	18
At or above poverty	37	30	15	18

Note: Percents may not sum to 100 due to rounding.
 Source: 1992 National Health Interview Survey - Youth Risk Behavior Supplement, Tabulations by Child Trends, Inc.

Table SD 4.4.B
Sexual Partners: Percentage of High School Students in Grades 9-12 Who Reported Having Four or More Sex Partners During Lifetime: 1993 and 1995

	1993			1995		
	Total	Male	Female	Total	Male	Female
Total	19	22	15	18	21	14
Grade						
9th	11	15	6	13	18	7
10th	16	19	13	16	20	11
11th	20	23	16	19	21	17
12th	27	31	23	23	25	21
Race/Ethnicity						
White, non-Hispanic	14	15	13	14	15	13
Black, non-Hispanic	43	59	27	36	52	22
Hispanic	19	26	11	18	24	12

Sources: "Youth Risk Behavior Surveillance- United States, 1993." Morbidity and Mortality Weekly Report. Vol. 44, No. SS-1, 1995. Youth Risk Behavior Surveillance - United States, 1995." Morbidity and Mortality Weekly Report. Vol. 45, No. SS-4, 1996: and unpublished tabulations from L. Kann, Centers for Disease Control and Prevention.

*Table SD 4.4.C
Sexual Partners: Percentage Distribution of Number of Lifetime Sexual Partners
Among Sexually Active Teens Age 20, by Age at First Intercourse: 1992*

	AGE AT FIRST INTERCOURSE		
	14 or Younger	15 or 16	17 or Older
Males			
One Partner	2	9	42
2-3 Partners	10	27	30
4-5 Partners	15	16	19
6 or More Partners	74	48	10
Females			
One Partner	2	10	45
2-3 Partners	26	28	33
4-5 Partners	16	28	13
6 or More Partners	57	34	10

Note: Percents may not sum to 100 due to rounding.

Source: 1992 National Health Interview Survey - Youth Risk Behavior Supplement, Tabulations by Child Trends, Inc.

SD 4.5

TEEN PREGNANCY

The overwhelming majority of U.S. teens do not want to become parents as teens.⁴⁸ Among all pregnancies to teens under age 20 at pregnancy outcome, 86 percent were unintended at conception.⁴⁹

From 1973 to 1990 the percentage of females aged 15-19 who became pregnant generally increased, rising from 9.6 percent in 1973 to 11.5 percent in 1990. This percentage had declined to 11.1 percent by 1992, the latest year for which estimates are available (see Table SD 4.5.A). In addition, among females ages 15 to 19, state data indicate that from 1991 through 1992, pregnancy rates decreased significantly in 30 of the 41 reporting states and the District of Columbia.⁵⁰

Differences by Age. Pregnancy is more prevalent among older teens. In 1992, 7.2 percent of teens ages 15-17 became pregnant, compared to 16.8 percent among teens aged 18-19.

Differences by Race.⁵¹ White teens ages 15-19 are less likely to become pregnant than are black teens and Hispanic teens. Among teens ages 15-17, Hispanics are more than two times more likely, and blacks are three times more likely, to become pregnant than are whites. Black and Hispanic teens ages 18-19 are at least twice as likely to become pregnant as their white peers (see Table SD 4.5.B).

Sexually Experienced Teens. When the percentage of teens becoming pregnant is examined within the context only of those sexually experienced females aged 15-19, rather than all female teens aged 15-19, the percentage becoming pregnant has declined slightly, but steadily, from 25.4 percent in 1973 to 20.9 percent in 1991 (see Figure SD 4.5).

⁴⁸ Alan Guttmacher Institute, 1994. "Sex and America's Teenagers." New York, NY: Alan Guttmacher Institute.

⁴⁹ Unintended pregnancies tabulated by Alan Guttmacher Institute based on National Survey of Family Growth in "Facts at a Glance," Washington, D.C.: Child Trends, Inc., 1995.

⁵⁰ State-specific Pregnancy and Birth Rates Among Teenagers—United States, 1991, 1992," *Morbidity and Mortality Weekly Report*, Sept. 22, 1995.

⁵¹ Estimates for whites and blacks exclude Hispanics of those races.

Figure SD 4.5
Percentage of Females Ages 15-19 Experiencing Pregnancy Each Year,
All Teens and Sexually Experienced Teens: 1973-1992



Note: Pregnancies are calculated by summing the number of live births, the number of abortions, and the estimated number of spontaneous fetal losses. Spontaneous fetal losses are based on data from the National Survey of Family Growth conducted by the National Center for Health Statistics.

Sources: All data for 1973, and sexually experienced female data for 1976, are from Henshaw, S.K. (1994) U.S. Teenage Pregnancy Statistics, New NY: Alan Guttmacher Institute; and Alan Guttmacher Institute, 1994. All other data from Ventura, S.J., Taffel S.M., Mosher, W.D., Wilson, J.B., and Henshaw, S.K. (1995). "Trends in Pregnancies and Pregnancy Rates: Estimates for the United States, 1980-92," Monthly Vital Statistics Report, Volume 43, No. 11(S), May 25, 1995.

Table SD 4.5.A
Teen Pregnancy: Percentage of Females Ages 15-19 Experiencing Pregnancy Each Year, All Teens and Sexually Experienced Teens: 1973-1992

	1973	1975	1980	1985	1990	1991	1992
All Females Aged 14 or Less ^a	1.4	1.5	1.6	1.6	1.7	1.7	1.7
All Females Aged 15-17	6.7	6.9	7.3	7.1	7.6	7.5	7.2
All Females Aged 18-19	14.1	14.9	16.2	15.8	16.6	17.1	16.8
All Females Aged 15-19	9.6	10.1	11.0	10.7	11.5	11.5	11.1
Sexually Experienced Females Aged 15-19	25.4	24.3	23.5	21.4	20.9	20.9	n/a

Note: ^aDenominator is females aged 14.
 Pregnancies are calculated by summing the number of live births, the number of abortions, and the estimated number of spontaneous fetal losses. Spontaneous fetal losses are based on data from the National Survey of Family Growth conducted by the National Center for Health Statistics.

Sources: All data for 1973, and sexually experienced female data for 1976, are from Henshaw, S.K. (1994) U.S. Teenage Pregnancy Statistics, New NY: Alan Guttmacher Institute; and Alan Guttmacher Institute, 1994. All other data from Ventura, S.J., Taffel S.M., Mosher, W.D., Wilson, J.B., and Henshaw, S.K. (1995). "Trends in Pregnancies and Pregnancy Rates: Estimates for the United States, 1980-92," Monthly Vital Statistics Report, Volume 43, No. 11(S), May 25, 1995 and unpublished data from Ventura, Mosher, and Henshaw, National Center for Health Statistics.

*Table SD 4.5.B**Teen Pregnancy: Percentage of Females Ages 15-19 Experiencing Pregnancy Each Year by Age and Race/Ethnicity: 1990 and 1991*

	1990	1991
All Females Aged 15-17	7.6	7.5
White, Non-Hispanic	5.4	5.1
Black, Non-Hispanic	15.8	15.8
Hispanic	11.7	12.4
All Females Aged 18-19	16.6	17.1
White, Non-Hispanic	13.0	13.1
Black, Non-Hispanic	29.3	29.8
Hispanic	24.4	26.1
All Females Aged 15-19	11.5	11.5
White, Non-Hispanic	8.8	8.5
Black, Non-Hispanic	21.7	21.7
Hispanic	17.0	18.0

Source: Ventura, S.J., Taffel, S.M., Mosher, W.D., Wilson, J.B., and Henshaw, S. "Trends in Pregnancies and Pregnancy Rates: Estimates for the United States, 1980-92" Monthly Vital Statistics Report. Vol. 43, No. 11 (S), May 25, 1995.

SD 4.6

ABORTION AMONG TEENS

The proportion of teen females aged 15-19 who obtained an abortion during the previous year increased from 2.3 to 4.4 percent between 1973 and 1985, presumably influenced both by the legalization of abortion and increasing levels of sexual activity and pregnancy (see Table SD 4.6.A). By 1991, the proportion obtaining abortions had dropped to 3.8 percent. Similar patterns occurred among both younger teens (ages 15-17) and older teens (ages 18-19).

There has not been a steady trend in the propensity of pregnant teens to give birth versus obtaining an abortion over the past twenty years (see Figure SD 4.6). In 1972, the proportion of pregnancies (excluding miscarriages) to females aged 15-19 which ended in birth was 76 percent. During the rest of the 1970s this proportion declined as abortion increased. Throughout most of the 1980s, however, the proportion of teen pregnancies ending in birth remained fairly stable at around 55 percent. By 1992, there was an increase to 63 percent in the proportion of teen pregnancies ending in birth, indicating a trend towards fewer abortions among pregnant teens.

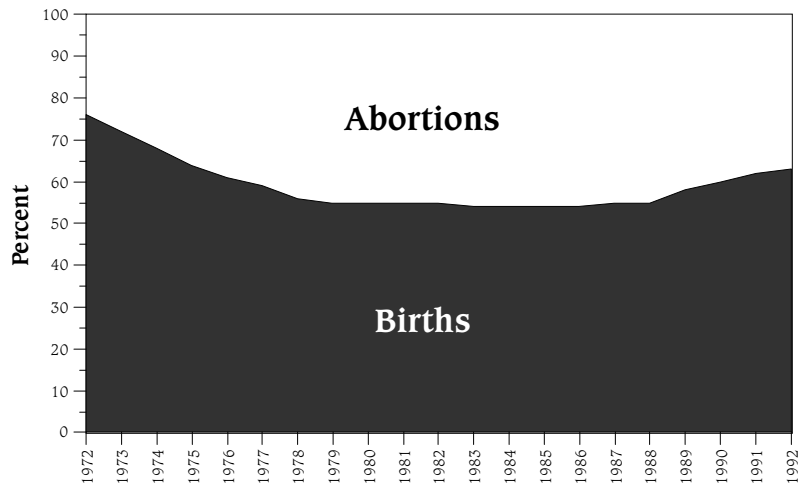
Differences by Age. Older teens aged 18-19 are more likely to have had an abortion than are younger teens aged 15-17. In 1992, 2.3 percent of younger teens and 5.4 percent of older teens obtained an abortion.

Differences by Race.⁵² Black teens are more likely to have had an abortion than are their white and Hispanic peers. Among black females ages 15-19, 8.1 percent obtained an abortion in 1991, compared to 2.8 percent of non-Hispanic white and 4.0 percent of Hispanic females (see Table SD 4.6.B).

Sexually Experienced Teens. The percent of teens who are sexually experienced has increased during the past several decades and, therefore, it is reasonable to consider abortion in light of this trend. When abortion rates are calculated among females aged 15-19 who have ever had intercourse, the data indicate that the proportion obtaining abortions increased from 5.9 percent in 1973 to 9.1 percent in 1980, then declined to 6.8 percent in 1991. Although a larger proportion of teen females were sexually experienced in 1990 than in 1980, a smaller proportion of these sexually experienced teens obtained abortions.

⁵² *Estimates for whites and blacks exclude Hispanics of those races.*

Figure SD 4.6
Percentage of Pregnancies Among Females Aged 15-19
Ending in Birth and Abortion: 1972-1992



Note: Pregnancies do not include miscarriage.

Sources: Alan Guttmacher Institute. (1991) "Sex and America's Teenagers," New York, NY: Alan Guttmacher Institute, Figure 33. Based on birth data from the National Center for Health Statistics and abortion data from the Alan Guttmacher Institute; Ventura, S.J., Taffel, S.M., Mosher, W.D., Wilson, J.B., and Henshaw, S., "Trends in Pregnancies and Pregnancy Rates: Estimates for the United States, 1980-92." Monthly Vital Statistics Report, Vol. 43, No. 11(S), May 25, 1995; and, unpublished data from S. Ventura, National Center for Health Statistics.

Table SD 4.6.A
Abortion: Percentage of Teen Females Obtaining an Abortion
During the Year, by Age Group: Selected Years, 1973-1992

	1973	1975	1980	1985	1990	1991	1992
All Females Aged 14 or Less ^a	0.6	0.7	0.8	0.9	0.8	0.7	0.8
All Females Aged 15 - 17	1.9	2.4	3.0	3.1	2.7	2.4	2.3
All Females Aged 18 - 19	2.9	4.2	6.1	6.2	5.8	5.6	5.4
All Females Aged 15 - 19	2.3	3.1	4.3	4.4	4.0	3.8	3.6
Sexually Experienced							
Females Aged 15-19	5.9	7.5	9.1	8.5	7.3	6.8	n/a

Note: ^aDenominator is females aged 14.

Data for sexually experienced teens for 1985 were interpolated from 1980 and 1988 data. Data for sexually experienced teens are not available for 1992.

Sources: Data for 1973 and 1975 are from Henshaw, S.K. (1994). U.S. "Teenage Pregnancy Statistics." New York, NY: Alan Guttmacher Institute; Alan Guttmacher Institute 1994. "Sex and America's Teenagers." New York, NY: Alan Guttmacher Institute, 1994; Based on data from abortion providers and sexual experience data from the National Survey of Family Growth. Data for 1980 - 1991 based on calculations from Ventura, S.J., Taffel, S.M., Mosher, W.D., Wilson, J.B., and Henshaw, S.K. (1995). Ventura, S.J., Taffel, S.M., Mosher, W.D., Wilson, J.B., and Henshaw, S. "Trends in Pregnancies and Pregnancy Rates: Estimates for the United States, 1980-92," Monthly Vital Statistics Report, Volume 43, No. 11(S), May 25, 1995 and unpublished tabulations from Ventura, Mosher and Henshaw.

Table SD 4.6.B
Abortion: Percentage of Teen Females Obtaining an Abortion
During the Year, by Age and Race/Ethnicity: 1990 and 1991

	1990	1991
All Females Aged 15-17	2.7	2.4
White, Non-Hispanic	2.1	1.8
Black, Non-Hispanic	5.8	5.5
Hispanic	2.4	2.5
All Females Aged 18-19	5.8	5.6
White, Non-Hispanic	4.7	4.3
Black, Non-Hispanic	11.7	11.6
Hispanic	6.0	6.3
All Females Aged 15-19	4.0	3.8
White, Non-Hispanic	3.2	2.8
Black, Non-Hispanic	8.4	8.1
Hispanic	3.9	4.0

Source: Ventura, S.J., Taffel, S.M., Mosher, W.D., Wilson, J.B., and Henshaw, S. "Trends in Pregnancies and Pregnancy Rates: Estimates for the United States, 1980-92." *Monthly Vital Statistics Report*. Vol. 43, No. 11 (S), May 25, 1995.

SD 4.7

TEEN BIRTHS

Research indicates that having a teen birth can have negative consequences on both mothers and their children over and above the effects of her disadvantaged background. Giving birth at an early age can limit a young woman's options regarding education and employment opportunities, increases the likelihood that she will need public assistance, and can have negative effects on the development of her children.⁵³

Between 1960 and 1985, birth rates for teens ages 15-19 dropped steadily from 89.1 to 51.0 per 1,000 teen women. This trend reversed between 1985 and 1991, and the teen birth rate increased to 62.1 per 1,000 teen women. Since 1991, the teen birth rate has again turned downward, declining to 56.9 births per 1,000 teen women by 1995 (see Figure SD 4.7).

Differences by Race/Ethnicity.⁵⁴ The trends described in the previous paragraph are evident for white and black women ages 15-19. In contrast, the birth rate for Hispanic teens increased from 82.2 per 1,000 teen women in 1980 (the first year in which data were available) to 106.7 per 1,000 teen women in 1991 and has remained fairly stable since then. Preliminary data for 1995 suggest a teen birth rate of 106.2 births per 1,000 Hispanic women ages 15-19 (see Table SD 4.7).

The birth rate for black teens has remained nearly twice that of white teens since 1960. In 1995, the birth rate for white teens was 50.3 per 1,000 teen women and for black teens it was 95.5 per 1,000 teen women. Black teens had the highest birth rate until 1994, when the rate for Hispanic teens surpassed that of blacks and remained at the higher level in 1995. Black teens experienced a sharp drop between 1994 and 1995, from 104.5 to 95.5 per 1,000 women ages 15-19 (see Table SD 4.7). From 1991 to 1995, the rate for black teens dropped by 17 percent.

Differences by Age.⁵⁵ Teen birth rates increase with age. In 1994, the birth rate for all teens ages 15-17 was 37.6 per 1,000 teen women and 91.5 per 1,000 teen women ages 18-19. Rates for teen females ages 10-14 (not shown) are considerably lower at 1.4 per 1,000.⁵⁶ For black and Hispanic teens, the birth rate among 18-19 year olds is twice that of the 15-17 year old teen females. The birth rate of white teen females ages 18-19 is nearly three times that of younger teens ages 15-17.

Fathers of Children Born to Teen Mothers. The most recent data available (from 1988, not shown), indicates that the majority of fathers of children born to teen mothers were not teenagers themselves. For mother's age 17, more than half (55 percent) of the fathers were age 20 or older.⁵⁷

⁵³ Moore, K.A. 1993. "Teenage Childbearing: A Pragmatic Perspective." *Child Trends, Inc. Washington, D.C. and Maynard, R.A. (ed). 1996. "Kids Having Kids: A Robin Hood Foundation Special Report on the Costs of Adolescent Childbearing." The Robin Hood Foundation. New York, NY.*

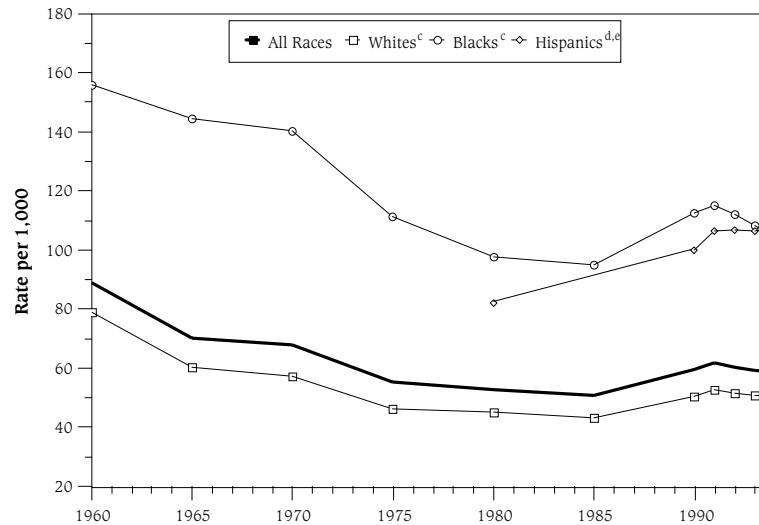
⁵⁴ Estimates for white and black teens include those of Hispanic origin. Teens of Hispanic origin may be of any race.

⁵⁵ For 1995, data are not available for ages 15-17 and ages 18-19.

⁵⁶ Ventura, S.J., Martin, J.A., Mathews, T.J. and S.C. Clarke. "Advance Report of Final Natality Statistics, 1994." *Monthly Vital Statistics Report, Vol. 44, No. 11, Supplement. Hyattsville, Maryland: National Center for Health Statistics. 1996.*

⁵⁷ 1988 National Maternal and Infant Health Survey tabulations by the Alan Guttmacher Institute. Calculations by Child Trends, Inc.

Figure SD 4.7
Teen Birth Rates^a (Births per 1,000 Teen Women Aged 15-19),
by Race/Ethnicity: 1960-1995^b



Notes: ^aBirths by race of mother 1980-1995. Tabulations prior to 1980 were by race of child, which assigns the child to the race of the nonwhite parent, if any, or to the race of the father, if both are nonwhite.

^bData for 1995 are preliminary.

^cIncludes persons of Hispanic origin.

^dPersons of Hispanic origin may be of any race.

^eData for Hispanics have been available only since 1980, with 22 states reporting in 1980, representing 90 percent of the Hispanic population. Hispanic birth data was reported by 23 states and DC in 1985; 48 states and DC in 1990; 49 states and DC in 1991 and 1992; and 50 states and the District of Columbia in 1993, 1994 and 1995. Rates in 1985 were not calculated for Hispanics because estimates for populations were not available.

Sources: Ventura, S.J., Martin, J.A. Mathews, T.J., Clarke, S.C., Advance Report of Final Natality Statistics, 1994. Monthly Vital Statistics Report, Vol. 44, No. 11, Supplement. Hyattsville, Maryland: National Center for Health Statistics, 1996. Also previous issues of this annual report. Ventura, S.J., "Births of Hispanic Parentage, 1980." Monthly Vital Statistics Report, Vol. 32, No. 6. Supplement, Hyattsville, Maryland: National Center for Health Statistics, 1983. 1995 preliminary data from: Rosenberg, H.M., Ventura, S.J., Maurer, J.D., Heuser, R.L., and Freedman, M.A. "Births and Deaths: United States, 1995." Monthly Vital Statistics Report, Vol. 32, No. 6, Supplement 2. Hyattsville, Maryland: National Center for Health Statistics, 1996.

Table SD 4.7
Teen Birth Rates by Age of Mother and Race/Ethnicity:
Selected Years, 1960-1995 (Births per 1,000 Teen Women)

	1960	1965	1970	1975	1980 ^a	1985 ^a	1990 ^a	1991 ^a	1992 ^a	1993 ^a	1994 ^a	1995 ^{a,b}
All Races												
Age 15-17	43.9	36.6	38.8	36.1	32.5	31.0	37.5	38.7	37.8	37.8	37.6	--
Age 18-19	166.7	124.5	114.7	85.0	82.1	79.6	88.6	94.4	94.5	92.1	91.5	--
Age 15-19	89.1	70.5	68.3	55.6	53.0	51.0	59.9	62.1	60.7	59.6	58.9	56.9
White^c												
Age 15-17	35.5	27.8	29.2	28.0	25.5	24.4	29.5	30.7	30.1	30.3	30.7	--
Age 18-19	154.6	111.9	101.5	74.0	73.2	70.4	78.0	83.5	83.8	82.1	82.1	--
Age 15-19	79.4	60.6	57.4	46.4	45.4	43.3	50.8	52.8	51.8	51.1	51.1	50.3
Black^c												
Age 15-17	--	99.3	101.4	85.6	72.5	69.3	82.3	84.1	81.3	79.8	76.3	--
Age 18-19	--	227.6	204.9	152.4	135.1	132.4	152.9	158.6	157.9	151.9	148.3	--
Age 15-19	156.1	144.6	140.7	111.8	97.8	95.4	112.8	115.5	112.4	108.6	104.5	95.5
Hispanic^{d,e}												
Age 15-17	--	--	--	--	52.1	--	65.9	70.6	71.4	71.7	74.0	--
Age 18-19	--	--	--	--	126.9	--	147.7	158.5	159.7	159.1	158.0	--
Age 15-19	--	--	--	--	82.2	--	100.3	106.7	107.1	106.8	107.7	106.2

Notes: ^aBirths by race of mother. Tabulations prior to 1980 were by race of child, which assigns the child to the race of the nonwhite parent, if any, or to the race of the father, if both are nonwhite.

^bData for 1995 are preliminary.

^cIncludes persons of Hispanic origin.

^dPersons of Hispanic origin may be of any race.

^eData for Hispanics have been available only since 1980, with 22 states reporting in 1980, representing 90% of the Hispanic population. Hispanic birth data was reported by 48 states and DC in 1990; 49 states and DC in 1991 and 1992; and 50 states and the District of Columbia in 1993, 1994 and 1995. Rates in 1985 were not calculated for Hispanics because estimates for populations were not available.

Sources: National Center for Health Statistics. *Vital Statistics of the United States, 1992, Vol. I, Natality*. Washington: Public Health Service, 1995 (table 1-9). Ventura, S.J., Martin, J.A. Mathews, T.J., Clarke, S.C., "Advance Report of Final Natality Statistics, 1994." *Monthly Vital Statistics Report, Vol. 44, No. 11, Supplement*. Hyattsville, Maryland: National Center for Health Statistics, 1996. Also previous issues of this annual report. Ventura, S.J., "Births of Hispanic Parentage, 1980." *Monthly Vital Statistics Report, Vol. 32, No. 6, Supplement*. Hyattsville, Maryland: National Center for Health Statistics, 1983. 1995 preliminary data from Rosenberg, H.M., Ventura, S.J., Maurer, J.D., Heuser, R.L., and Freedman, M.A. "Births and Deaths: United States, 1995." *Monthly Vital Statistics Report, Vol. 45, No. 3, Supplement 2*. Hyattsville, Maryland: National Center for Health Statistics, 1996.

SD 4.8

TEEN NONMARITAL BIRTHS

Nonmarital childbearing has consequences for the child, the parent, and society. Raising a child is a challenging task, even for two parents. A large body of research suggests that the absence of a father is associated with negative outcomes for children when they grow up.⁵⁸ For example, studies have linked growing up with a single parent to lower educational attainment for the child.⁵⁹ About 30 percent of nonmarital births are to teenagers. Bearing children outside of marriage is a particularly troubling development for this age group because these young women often have little education and lack the ability to support their families economically, especially as a single parent.

Nonmarital childbearing has increased among teens of all ages and across all racial and ethnic groups since 1960 (see Figure SD 4.8). Among all teens aged 15-19, 15 percent of births were nonmarital in 1960, compared to 75 percent in 1994 (see Table SD 4.8). The percentage of births to teens that occurred outside of marriage has risen fairly steadily and in 1994 reached 75 percent. However, the rather sharp increase between 1993 and 1994 (from 71 to 75 percent) is largely if not completely the result of improvements in the identification of nonmarital births in two states, Texas and Michigan.⁶⁰

Differences by Race.⁶¹ Nonmarital childbearing is higher among black teens than among white and Hispanic teens. In 1994, 95 percent of births to black females aged 15-19 were nonmarital, compared to 68 percent for whites and 70 percent for Hispanics.

Differences by Age. Younger teens who give birth are more likely to be unmarried when they deliver than are older teens in each year and across race/ethnic groups. In 1994, 84 percent of births to 15-17 year olds were to unmarried mothers, compared with 70 percent among 18-19 year olds.

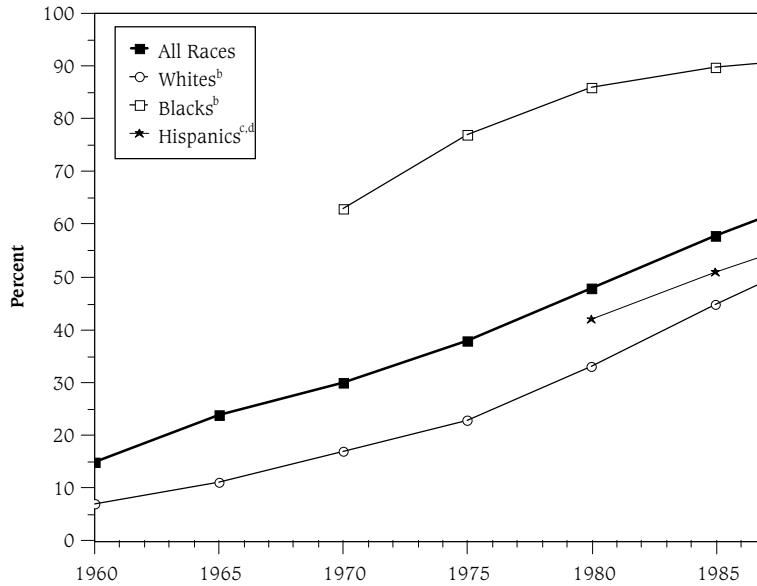
⁵⁸ McLanahan, S., and Sandefur, G. 1994. *Growing up with a single parent: What hurts, what helps*. Cambridge, MA: Harvard University Press; Haveman, R. and Wolfe, B. 1994. *Succeeding generations: On the effects of investments in children*. New York, NY: Russell Sage Foundation.

⁵⁹ Knox, V. and Bane, M.J. 1994. "Child support and schooling": In I. Garfinkel, S. McLanahan, and P. Robins (Eds.), *Child Support and Child-Well-Being*. Washington, DC: The Urban Institute.

⁶⁰ Ventura, S.J., Martin, J.A., Mathews, T.J. and S.C. Clarke. "Advance Report of Final Natality Statistics, 1994." *Monthly Vital Statistics Report*, Vol. 44, No. 11, Supplement. Hyattsville, Maryland: National Center for Health Statistics. 1996.

⁶¹ Estimates for white and black teens include those of Hispanic origin. Teens of Hispanic origin may be of any race.

Figure SD 4.8
Percentage of Teen Births^a Ages 15-19 to
Unmarried Teens Ages 15-19: 1960-1994^e



Notes: ^aBirths by race of mother 1980-1994. Tabulations prior to 1980 were by race of child, which assigns the child to the race of the nonwhite parent, if any, or to the race of the father, if both are nonwhite.

^bIncludes persons of Hispanic origin.

^cPersons of Hispanic origin may be of any race.

^dData for Hispanics have been available only since 1980, with 22 states reporting in 1980, representing 90% of the Hispanic population. Hispanic birth data was reported by 23 states and DC in 1985; 48 states and DC in 1990; 49 states and DC in 1991 and 1992; and all states in 1993 and 1994.

^eIncreases between 1993 and 1994 were due primarily to improvements in the identification of non-marital births in Texas and Michigan.

Sources: Ventura S.J. "Births to Unmarried Mothers: United States, 1992." National Center for Health Statistics. Vital and Health Statistics, Series 21, No. 53. 1993; Ventura S.J., Martin, J.A. Mathews, T.J. Clarke, S.C. "Advance Report of Final Natality Statistics, 1994." Monthly Vital Statistics Report, Vol. 44, No. 11, Supplement. Hyattsville, Maryland: National Center for Health Statistics. 1996. Also previous issues of this annual report.

Table SD 4.8
Nonmarital Births: Percentage of All Teen Births to Unmarried Teens,
by Age and Race/Ethnicity of Mother: 1960-1994

	1960	1965	1970	1975	1980 ^a	1985 ^a	1990 ^a	1991 ^a	1992 ^a	1993 ^a	1994 ^{a,e}
All Races											
Ages 15-17	24	33	43	51	62	71	78	79	79	80	84
Ages 18-19	11	15	22	30	40	51	61	63	65	66	70
Ages 15-19	15	21	30	38	48	58	67	69	70	71	75
White^b											
Ages 15-17	12	17	25	33	45	58	68	70	71	72	78
Ages 18-19	5	9	14	17	27	38	51	53	55	57	62
Ages 15-19	7	11	17	23	33	45	56	59	60	62	68
Black^b											
Ages 15-17	--	--	76	87	93	96	96	96	96	96	98
Ages 18-19	--	--	52	68	80	86	89	90	90	91	93
Ages 15-19	--	--	63	77	86	90	92	92	93	93	95
Hispanic^{c,d}											
Ages 15-17	--	--	--	--	51	61	68	69	69	69	77
Ages 18-19	--	--	--	--	36	46	54	56	57	58	65
Ages 15-19	--	--	--	--	42	51	59	61	62	63	70

Notes: ^aBirths by race of mother. Tabulations prior to 1980 were by race of child, which assigns the child to the race of the nonwhite parent, if any, or to the race of the father, if both are nonwhite.

^bIncludes persons of Hispanic origin.

^cPersons of Hispanic origin may be of any race.

^dData for Hispanics have been available only since 1980, with 22 states reporting in 1980, representing 90% of the Hispanic population. Hispanic birth data was reported by 23 states and DC in 1985; 48 states and DC in 1990; 49 states and DC in 1991 and 1992; and all states in 1993 and 1994.

^eIncreases between 1993 and 1994 were due primarily to improvements in the identification of non-marital births in Texas and Michigan.

Sources: Ventura S.J. "Births to Unmarried Mothers: United States, 1980-1992." National Center for Health Statistics. Vital and Health Statistics, Series 21, No. 53. 1993; Ventura S.J., Martin, J.A. Mathews, T.J. Clarke, S.C. "Advance Report of Final Natality Statistics, 1994." Monthly Vital Statistics Report, Vol. 44, No. 11, Supplement. Hyattsville, Maryland: National Center for Health Statistics. 1996. Also previous issues of this annual report.

SD 4.9

SECOND AND HIGHER ORDER BIRTHS TO TEENS

Bearing a child during adolescence is associated with poor outcomes for young women and their children.⁶² Giving birth to a second child while still a teen further increases these risks.⁶³ For teen mothers on AFDC, a subsequent birth during adolescence reduces the likelihood of getting off welfare.⁶⁴ Yet recent analyses of nationally representative data indicate that in the two years following the first birth, teen mothers have a second birth at about the same rate as older mothers.⁶⁵

In 1995, nearly one in every five births to teen mothers was a birth of second order or higher. The proportion of teen births that were second or higher order increased from 22 percent in 1980 to peak at 25 percent in 1991, and has since declined to a preliminary estimate of 21 percent in 1995. This pattern is evident across racial and ethnic groups and regardless of marital status (see Table SD 4.9).

Differences by Race. Births to black and Hispanic teens are more likely to be subsequent births than births to white teens. Preliminary estimates for 1995 indicate 26 percent of births to black teens, 23 percent of births to Hispanic teens, and 19 percent of births to white teens were second or higher order births.

Differences by Marital Status. A higher proportion of births among married teens are second or higher order than births to unmarried teens. In 1994, 26 percent of births to married teens were second or higher order, compared to 20 percent among unmarried teens.

⁶² Moore, K.A., Myers, D.E., Morrison, D.R., Nord, C.W., Brown, B.B. and Edmonston, B. 1993. "Age at first childbirth and later poverty." *Journal of Research on Adolescence* 3(4):393-422 and Maynard, R.A. (ed). 1996. "Kids Having Kids: A Robin Hood Foundation Special Report on the Costs of Adolescent Childbearing." *The Robin Hood Foundation*. New York, NY.

⁶³ Kalmuss, D. And Namerow, P.B. 1992. "The mediators of educational attainment among early childbearers." *Unpublished manuscript*. Columbia University, Center for Population and Family Health.

⁶⁴ Moore, K.A. and Hofferth, S. 1978. "The consequences of age at first childbirth: Female headed-families and welfare reciprocity". *Working paper 1146-05*. Washington, DC: *The Urban Institute*.

⁶⁵ Moore, K.A., Morrison, D.R., Nord, C.W., and C. Blumenthal. 1993. "The consequences of early childbearing in the 1980s." *Unpublished tables*. Washington, DC: *Child Trends, Inc.*

Table SD 4.9
Percentage of All Teen Births That are Second or Higher Order,
by Marital Status and Race/Ethnicity of Mother: 1980, 1985, 1991, 1994, and

	<u>1980</u>	<u>1985</u>	<u>1991</u>	<u>1994</u>	<u>1995^a</u>
All Births	22	23	25	22	21
Race/Ethnicity					
White	19	20	21	19	19
Black	27	28	32	28	26
Hispanic	20	25	26	23	23
Other	22	25	25	23	22
Marital Status					
Married	24	26	28	26	--
Single	19	20	23	20	--

Note:^aEstimates for 1995 are preliminary.

Sources: Ventura, S.J., Martin, J.A., Mathews, T.J., Clarke, S.C. "Advance Report of Final Natality Statistics, 1994." Monthly Vital Statistics Report, Vol. 44, No. 11, Supplement. Hyattsville, Maryland: National Center for Health Statistics. 1996; also previous issues of this annual report. Division of Vital Statistics, National Center for Health Statistics. Unpublished tabulations. Preliminary 1995 data from "Births and Deaths: United States, 1995." Monthly Vital Statistics Report. Vol. 45, No. 3, Supplement 2. Hyattsville, Maryland: National Center for Health Statistics. 1996. Calculations by Child Trends, Inc.

SD 4.10

SEXUALLY TRANSMITTED DISEASES AMONG ADOLESCENTS

Sexually transmitted diseases (STDs) have potentially severe consequences. Women can develop pelvic inflammatory disease which in turn may lead to adverse reproductive consequences such as infertility, ectopic pregnancy, or the birth of children with physical and mental developmental disabilities. The increase in sexual activity among teenagers described in Section SD 4.1 has exposed a growing number of young people to the risk of sexually transmitted diseases. Despite this increased risk, the reported rate of incidence has declined among adolescents for both gonorrhea and syphilis.⁶⁶

Decline in Gonorrhea Rates. Since 1975, the reported gonorrhea rate for all youth has declined (see Table SD 4.10.A). Among youth ages 15-19, rates decreased by almost half, from 1275.1 cases of gonorrhea per 100,000 youth in 1975, to 664.6 cases per 100,000 youth in 1995. Gonorrhea rates also decreased among youth ages 10-14, but the decline started later and has not been as dramatic as among older youth. The rate for this age group peaked at 68.9 cases per 100,000 youth in 1990; by 1995, the reported rate had declined to 42 cases per 100,000 youth age 10-14.

Differences in Gonorrhea Rates by Gender. For youth ages 15-19 and ages 10-14, females have had consistently higher reported rates of gonorrhea than males (see Figure SD 4.10.A). In 1994 rates for females ages 15-19 were 839.7 per 100,000, versus 498.4 per 100,000 males of the same age.

Differences in Gonorrhea Rates by Race and Ethnicity. Blacks have consistently had the highest reported rates of gonorrhea, more than 10 times the rate of any other race or ethnic group. However, rates for blacks are falling, in contrast to gonorrhea rates among Hispanics, which have risen since 1990, the first year for which data by race and ethnicity are available (see Table S.D. 4.10.A).

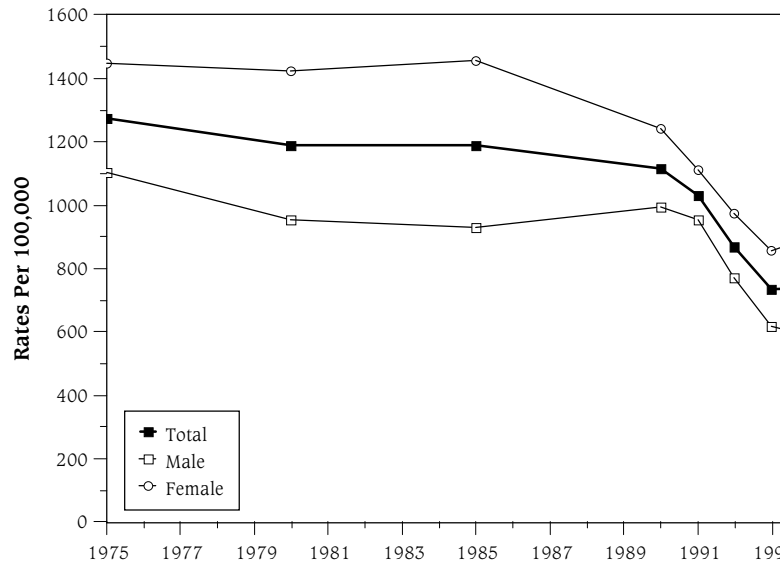
Decline in Syphilis Rates. Table SD 4.10.B shows that reported rates for primary and secondary syphilis have decreased for youth, ages 10-14 and 15-19, since their peak in 1990. While the rate for both groups has decreased, the rate for teens ages 15-19 is substantially higher than the rate for youth ages 10-14. For example, the reported rate for syphilis in 1995 for teens ages 15-19 was 10.0 cases per 100,000 youth compared to 0.6 cases per 100,000 for youth 10-14.

Higher Syphilis Rates Among Females. Females from both age groups have reported more cases of syphilis than their male counterparts (see Figure 4.10.B). For example, teenage females ages 15-19 had a rate of 13.6 cases per 100,000, about double the male rate of 6.6 cases per 100,000.

Differences in Syphilis Rates by Race and Ethnicity. Blacks ages 15-19 had rates of syphilis more than 10 times higher than all other racial and ethnic groups throughout the period 1990-1995. Rates have been falling for all groups except Native Americans, whose reported syphilis rates have fluctuated between 1990 and 1995 (see Table SD 4.10.B).

⁶⁶ *There has been a considerable increase in reported rates of chlamydia but this trend reflects "increased screening, recognition of asymptomatic infection (mainly in women), and improved reporting capacity rather than true trends in disease incidence" (p. 5 in Division of STD Prevention, Sexually Transmitted Disease Surveillance, 1994. U.S. Department of Health and Human Services, Public Health Service. Atlanta: Centers for Disease Control and Prevention, September 1995).*

Figure SD 4.10.A
Reported Gonorrhea Rates (per 100,000 Population), by Gender, Ages 15-19:
Selected Years, 1975-1995

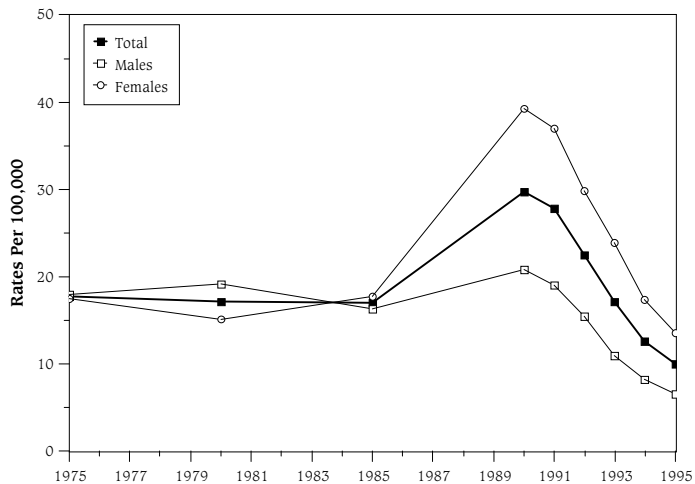


Notes: Although most areas generally adhere to the case definitions for STD found in Case Definitions for Public Health Surveillance (MMWR 1990; 39: 1-43) there are significant differences between individual areas in case definitions as well as in the policies and systems for collecting surveillance data. In many areas reporting from publicly supported institutions (e.g., STD clinics) was more complete than from other sources (e.g., private practitioners).

For 1994 Georgia only reported gonorrhea cases to CDC for part of the year. Therefore, Georgia cases and population were excluded from gonorrhea figures and tables. In past years, Georgia has been among the states reporting the highest gonorrhea rates.

Source: Division of STD Prevention. Sexually Transmitted Disease Surveillance, 1980. U.S. Department of Health and Human Services, Public Health Service. Atlanta: Centers for Disease Control and Prevention. Plus additional yearly updates of this report.

Figure SD 4.10.B
Reported Syphilis Rates (per 100,000 Population), by Gender,
Ages 15-19: Selected Years, 1975-1995



Note: Although most areas generally adhere to the case definitions for STD found in Case Definitions for Public Health Surveillance (MMWR 1990; 39: 1-43) there are significant differences between individual areas in case definitions as well as in the policies and systems for collecting surveillance data. In many areas, reporting from publicly supported institutions (e.g., STD clinics) was more complete than from other sources (e.g., private practitioners).

Cases and population denominators for Baltimore, MD have been excluded for 1993 because age was not reported for most cases.

Source. Division of STD Prevention. *Sexually Transmitted Disease Surveillance*, 1980. U.S. Department of Health and Human Services, Public Health Service. Atlanta: Centers for Disease Control and Prevention. And yearly updates of this report.

Table 4.10.A
Gonorrhea: Reported Rates^a (per 100,000 Population)
by Age, Gender, and Race/Ethnicity: 1975-1995

	1975	1980	1985	1990	1991	1992	1993	1994 ^b	1995
AGES 10-14									
Total	46.7	48.7	47.7	68.9	64.6	57.8	48.8	48.6	42.0
Gender									
Male	20.9	23.6	23.8	32.1	32.4	26.2	20.6	16.0	12.6
Female	73.6	74.8	72.9	107.5	98.3	91.0	78.5	82.8	72.8
Race^c									
White	—	—	—	14.3	12.9	12.1	9.3	10.6	9.0
Black	—	—	—	386.8	364.7	322.4	282.0	275.8	238.6
Hispanic	—	—	—	15.3	16.5	17.7	21.5	20.5	21.3
Asian	—	—	—	4.5	9.9	6.2	4.5	5.8	5.3
American Indian	—	—	—	22.7	28.9	19.6	31.8	25.1	16.4
AGES 15-19									
Total	1,275.1	1,187.3	1,189.9	1,114.4	1,031.4	869.6	733.3	739.2	664.6
Gender									
Male	1,103.9	953.4	930.5	993.7	954.6	771.0	615.7	589.7	498.4
Female	1,446.4	1,424.6	1,455.1	1,241.6	1,112.2	973.6	857.4	896.8	839.7
Race^c									
White	—	—	—	230.3	196.7	165.9	137.2	151.2	142.7
Black	—	—	—	6,316.2	5,963.9	4,973.1	4,333.4	4,327.6	3,843.2
Hispanic	—	—	—	268.7	273.1	279.3	279.5	256.7	286.4
Asian	—	—	—	70.0	91.5	77.4	75.8	79.1	72.8
American Indian	—	—	—	414.6	366.0	317.5	311.3	305.1	248.7

Notes: ^a Although most areas generally adhere to the case definitions for STD found in *Case Definitions for Public Health Surveillance* (MMWR 1990; 39: 1-43) there are significant differences between individual areas in case definitions as well as in the policies and systems for collecting surveillance data. In many areas, reporting from publicly supported institutions (*e.g.*, STD clinics) was more complete than from other sources (*e.g.*, private practitioners).

^b For 1994 Georgia only reported gonorrhea cases to CDC for part of the year. Therefore, Georgia cases and population were excluded from gonorrhea figures and tables. In past years, Georgia has been among the states reporting the highest gonorrhea rates.

^c For the following years, the states/areas listed did not report race/ethnicity for most cases: 1992 (New York City and New York State); 1993 (New York City, New York State, and Georgia); 1994 (New York City, New York State, and Georgia); and 1995 (Georgia, New Jersey, New York City and New York State).

Source: Division of STD Prevention. *Sexually Transmitted Disease Surveillance, 1980 et seq.* U.S. Department of Health and Human Services, Public Health Service. Atlanta: Centers for Disease Control and Prevention.

Table 4.10.B
Primary and Secondary Syphilis: Reported Rates^a (per 100,000 Population)
by Age, Gender, and Race/Ethnicity: 1975-1995

	1975	1980	1985	1990	1991 ^b	1992	1993 ^c	1994	1995
AGES 10-14									
Total	1.1	0.9	0.9	1.8	1.4	1.3	1.0	0.6	0.6
Gender									
Male	0.7	0.5	0.5	0.5	0.4	0.3	0.3	0.1	0.1
Female	1.5	1.3	1.4	3.2	2.5	2.3	1.7	1.2	1.0
Race									
White	—	—	—	0.1	0.1	0.1	0.1	0.1	0.0
Black	—	—	—	10.6	8.6	8.2	6.0	3.8	3.5
Hispanic	—	—	—	1.1	0.4	0.4	0.1	0.1	0.1
Asian	—	—	—	0.2	0.3	0.0	0.2	0.0	0.0
American Indian	—	—	—	0.5	0.0	0.0	0.0	0.0	0.0
AGES 15-19									
Total	17.8	17.2	17.0	29.8	27.8	22.5	17.2	12.7	10.0
Gender									
Male	18.0	19.2	16.3	20.9	19.1	15.5	11.0	8.3	6.6
Female	17.5	15.1	17.7	39.2	37.0	29.9	23.9	17.4	13.6
Race									
White	—	—	—	2.9	2.6	2.0	1.6	1.4	1.1
Black	—	—	—	174.6	164.8	136.6	105.7	77.6	60.8
Hispanic	—	—	—	15.2	12.5	8.5	6.1	3.0	2.5
Asian	—	—	—	1.7	1.9	1.4	1.0	0.8	0.4
American Indian	—	—	—	2.8	7.0	2.7	0.5	2.1	3.5
<p>Note: ^a Although most areas generally adhere to the case definitions for STD found in <i>Case Definitions for Public Health Surveillance</i> (MMWR 1990; 39: 1-43) there are significant differences between individual areas in case definitions as well as in the policies and systems for collecting surveillance data. In many areas reporting from publicly supported institutions (<i>e.g.</i>, STD clinics) was more complete than from other sources (<i>e.g.</i>, private practitioners).</p> <p>^b Cases and population denominators for Kentucky have been excluded for 1991 because race/ethnicity was not reported for most cases.</p> <p>^c Cases and population denominators for Baltimore, Maryland have been excluded for 1993 because age was not reported for most cases.</p>									
<p>Source: Division of STD Prevention. <i>Sexually Transmitted Disease Surveillance, 1980 et seq.</i> U.S. Department of Health and Human Services, Public Health Service. Atlanta: Centers for Disease Control and Prevention.</p>									

