

# **Risky Adolescent Sexual Relationships & Reproductive Health in Young Adulthood**

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*July 25, 2008*



**Funded by the Office of Population Affairs**

# Background

- Expanding literature on predictors of risky sex among adolescents
- More limited evidence on the consequences of risky sex during adolescence for sexual health outcomes in the transition to adulthood
- A cumulative risk factor approach suggests that most behaviors have multiple causes

# Research Question 1

1. Do teens who engage in risky sexual relationships in adolescence have heightened STI and unintended birth risks in young adulthood?

H1. Respondents who were exposed to more early risk factors in adolescent sexual relationships will have greater STI and unintended birth risks in young adulthood.

# Research Question 2

2. Which dimensions of risky adolescent relationships are most predictive of STI and unintended birth risk in young adulthood?

H2. Multiple dimensions of risky adolescent relationships will be important. The strongest predictor will be inconsistent contraceptive use in adolescence.

# Data and Sample

- 3 waves of Add Health data
  - Waves I and II: Adolescent relationship histories
  - Wave III: Young adult reproductive health outcomes
- Analyses are restricted to respondents:
  - Who participated in all 3 waves and had valid weights
  - Who were sexually experienced by Wave III
  - Who were 20-24 years old at Wave III
- N = 7,163 for the full sample
- N = 3,558 sexually experienced by Wave II

# Dependent Variables

- 4 outcomes measured at Wave III
- 3 indicators of STI risk:
  - Number of sexual partners in past year (mean=1.80)
  - STI diagnosis (17%)
    - Positive biomarker test result or told by doctor/nurse in the past year that he/she had an STI
  - Perceived STI risk (37.5%)
    - Believes chances are high that has either gonorrhea or Chlamydia
    - Has ever sought medical attention because thought he/she had an STI
    - Has ever been tested for an STI in the past year
- 1 indicator of unintended birth risk:
  - Had unintended birth (21%)
  - Had intended birth (8%)
  - Had no birth (71%)

# Key Independent Variables

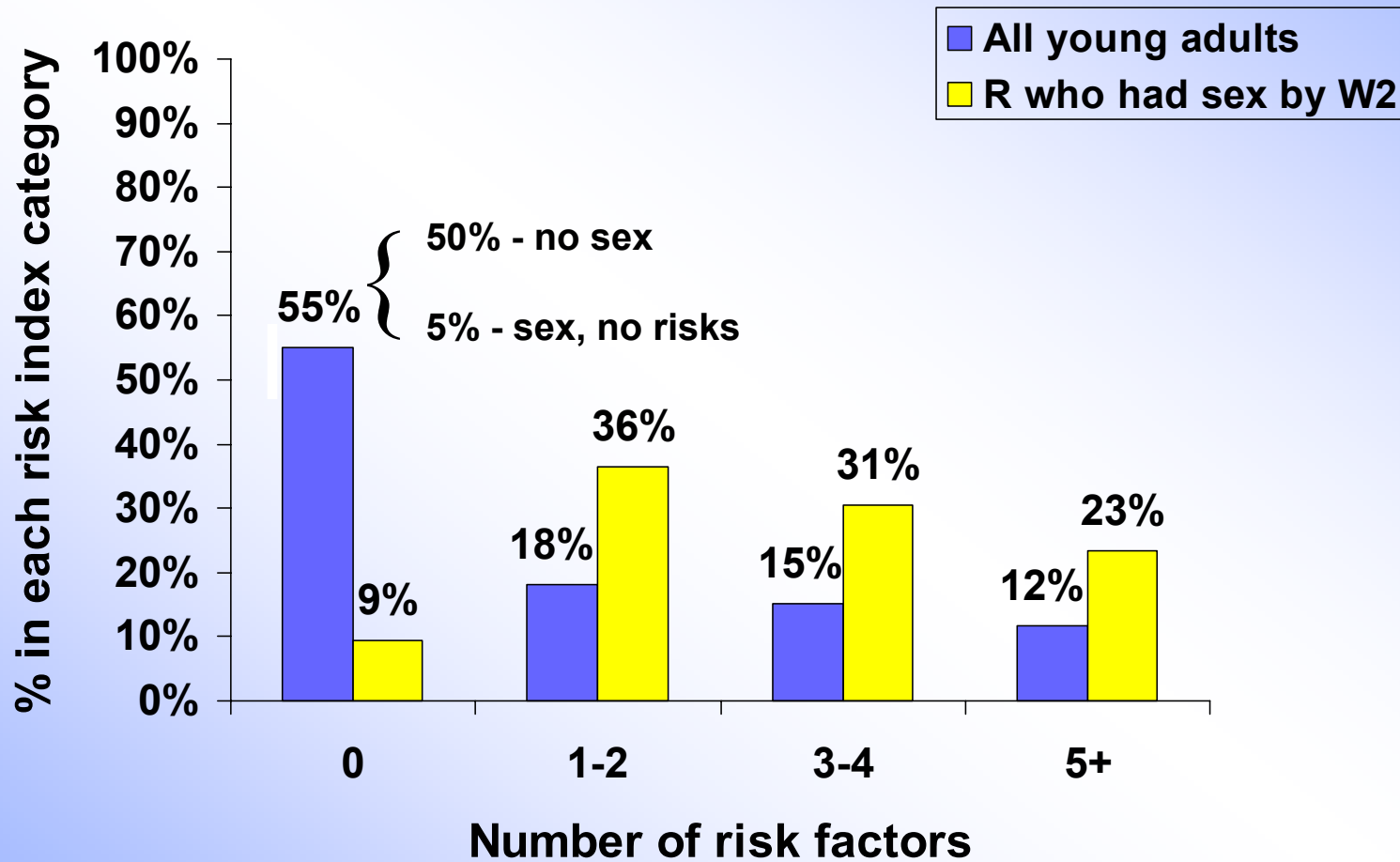
## Dimensions of risk within adolescent relationships:

- 1) Multiple sexual partners
- 2) Young age at sex (< 16 years)
- 3) Inconsistent contraceptive use
- 4) No discussion of birth control prior to first sex
- 5) Older partner (3+ years older)
- 6) Non-romantic partner
- 7) Non-monogamous relationship
- 8) One-night stand

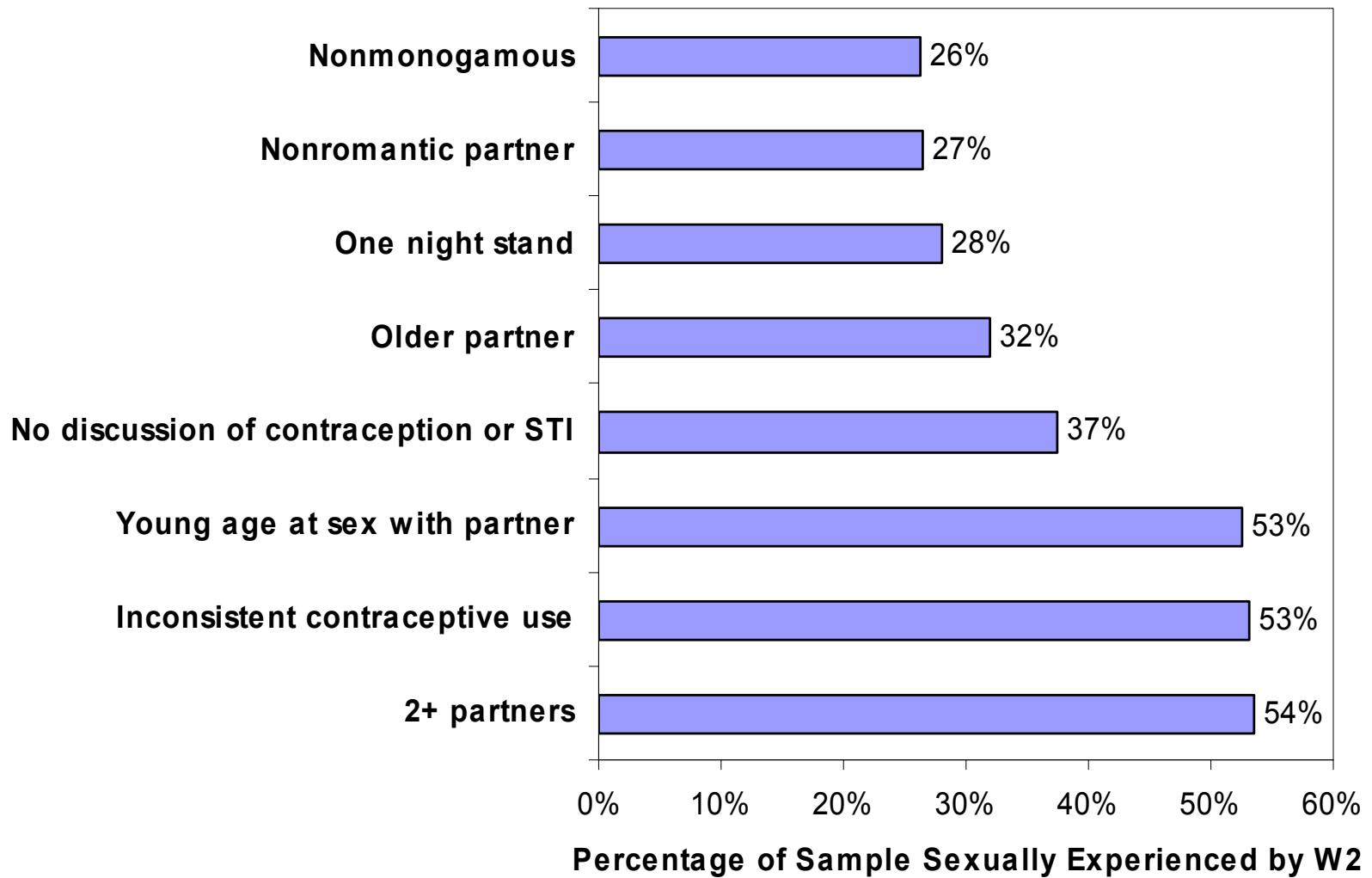
# Key Independent Variables

- Cumulative Risk Index
  - sum of all 8 factors
  - Range: 0-8
  - Mean:
    - All young adults = 1.46
    - Rs who had sex by W2 = 3.05

# Distribution of Cumulative Risk Index



# Distribution of Individual Risk Factors



# Control Variables

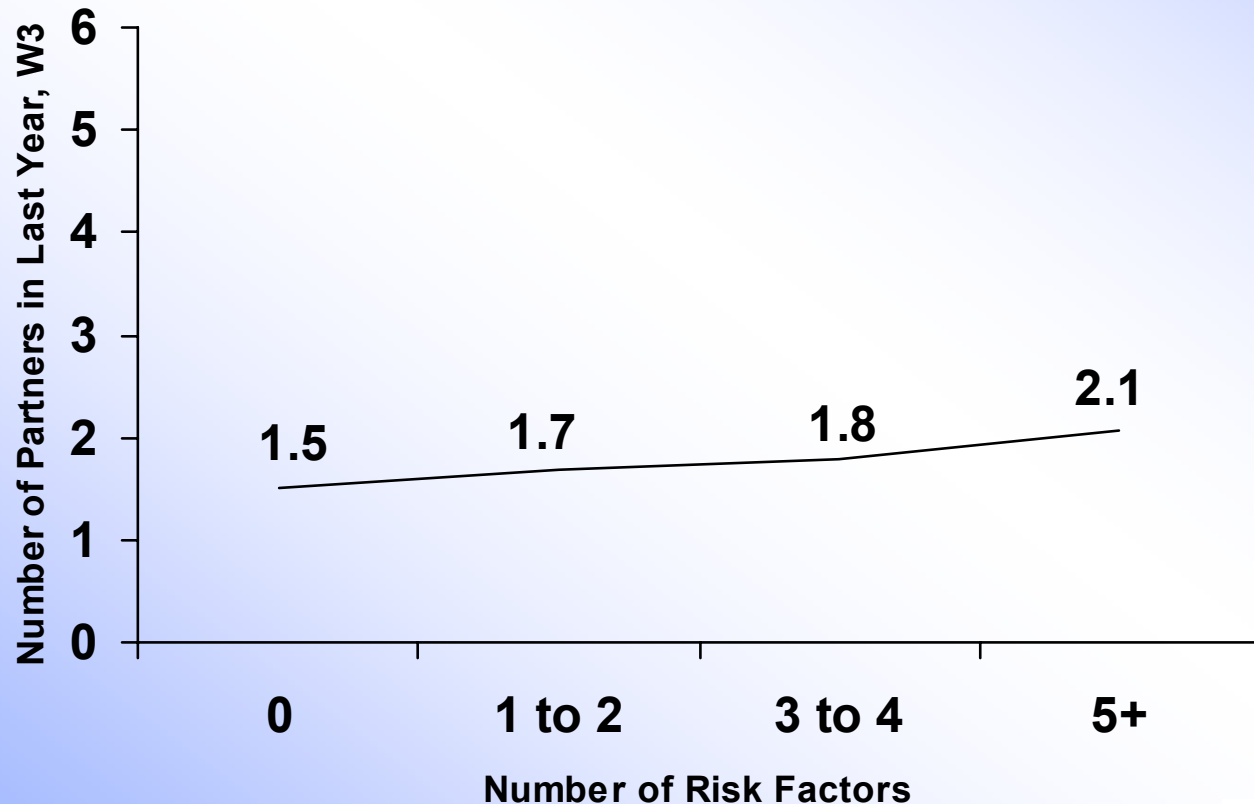
- Race/ethnicity
- Age
- Gender
- Parent education
- R's education at Wave III
- 2 biological/adoptive parents
- Parent-teen closeness
- Educational aspirations
- Picture Vocabulary Test score
- Ever used drugs

# Analytic Methods

- OLS - Number of partners
- Logistic regression
  - STI diagnosis
  - Perceived STI risk
- Multinomial logit - Unintended birth
- All analyses weighted and adjusted for sampling design

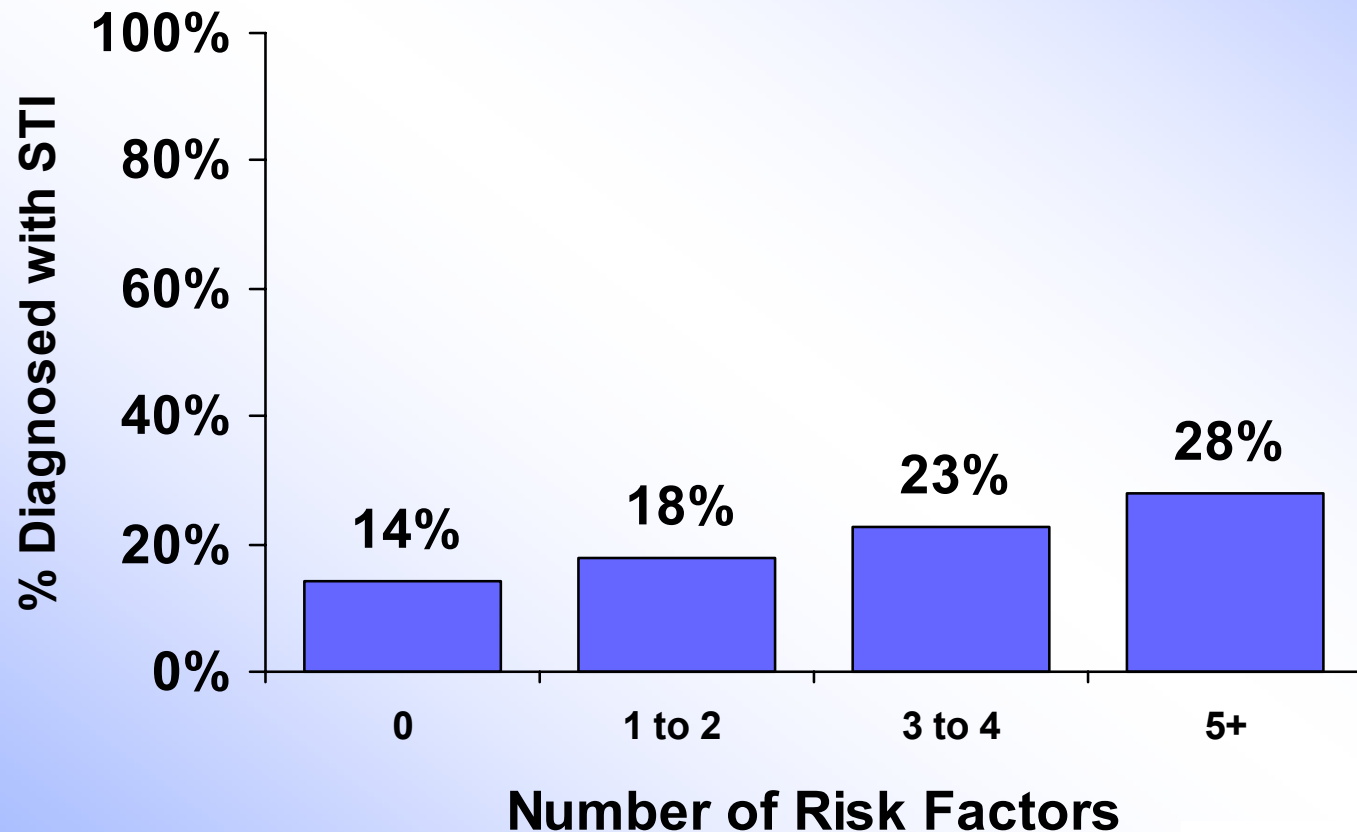
# Bivariate Results

**Respondents with more risk factors in adolescent relationships had a greater number of sexual partners in young adulthood.**



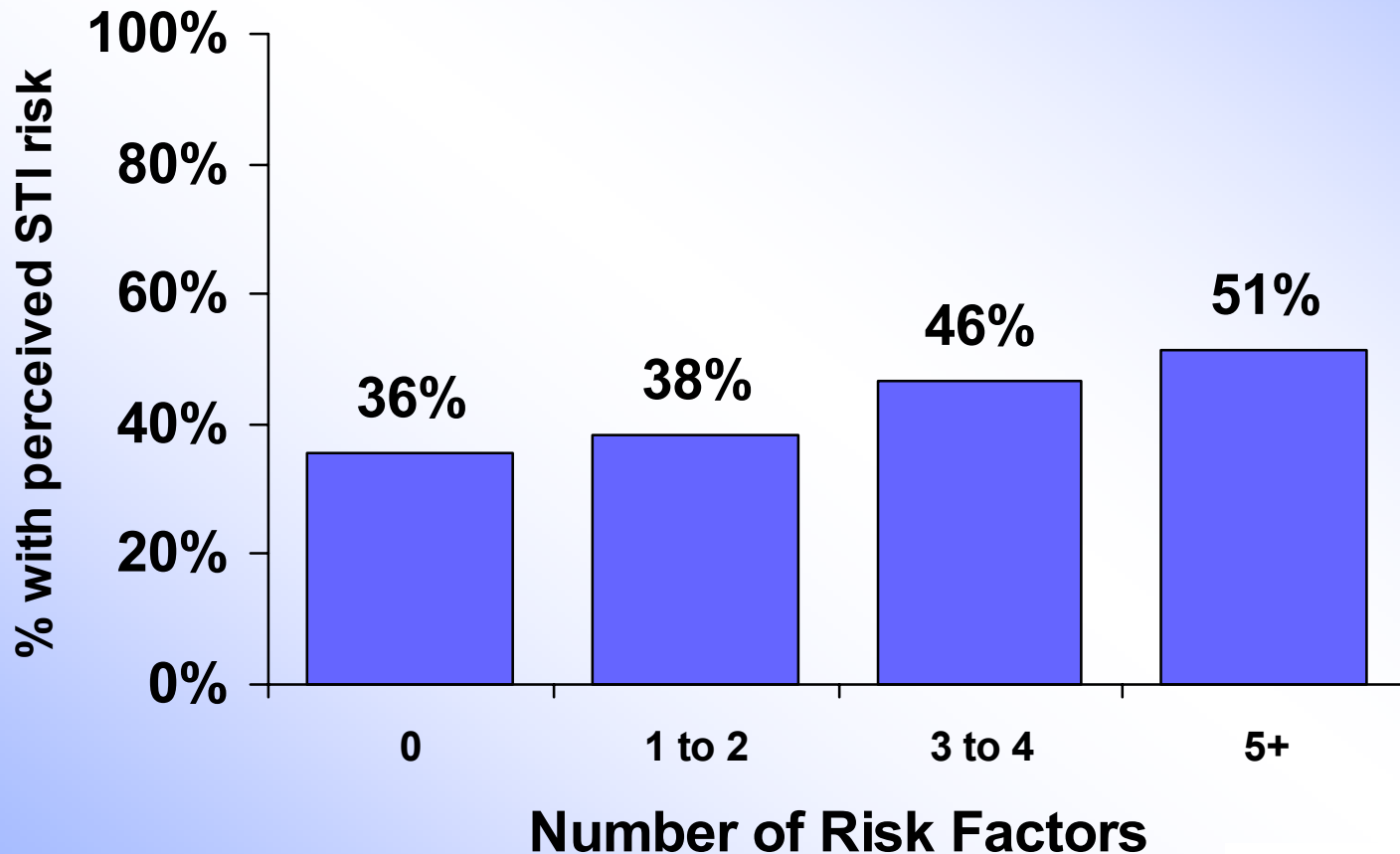
# Bivariate Results

Respondents with more risk factors in adolescent relationships were more likely to be diagnosed with an STI in young adulthood.



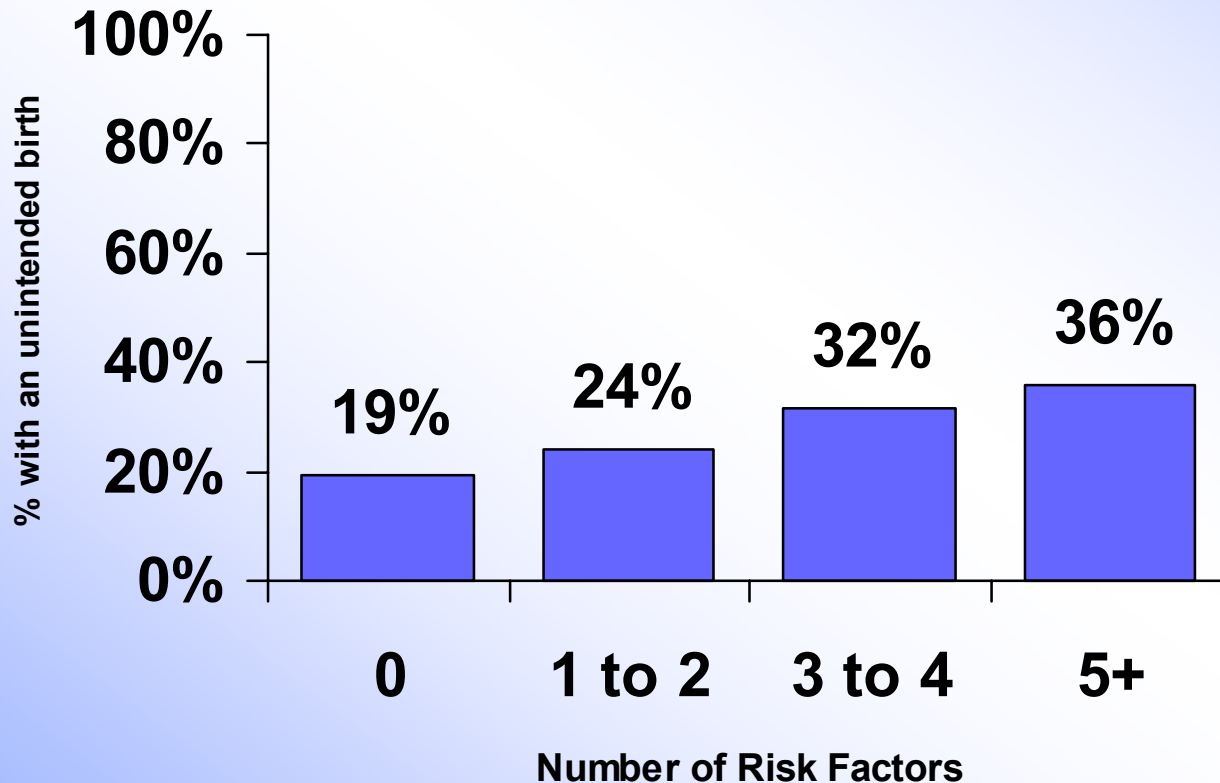
# Bivariate Results

Respondents with more risk factors in adolescent relationships had higher perceived STI risk in young adulthood.



# Bivariate Results

Respondents with more risk factors in adolescent relationships were more likely to have an unintended birth by young adulthood.



# Multivariate Results – Cumulative Index

	<i># of Partners</i>	<i>Diagnosed with STI</i>	<i>Perceived STI Risk</i>
<hr/> <b><u>Among All Young Adults</u></b>			
<b>Cumulative Risk Index</b>	<b>+</b>	<b>+</b>	<b>+</b>
 <b><u>Among R Who Had Sex Before W2</u></b>			
<b>Cumulative Risk Index</b>	<b>+</b>	<b>+</b>	<b>+</b>

Note: Models also include the full set of control variables.

# Multivariate Results – Cumulative Index

	<i>Unintended Birth vs. No Birth</i>	<i>Intended Birth vs. No Birth</i>	<i>Unintended vs. Intended Birth</i>
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## Among All Young Adults

<b>Cumulative Risk Index</b>	<b>+</b>	<b>+</b>	
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## Among R Who Had Sex Before W2

<b>Cumulative Risk Index</b>	<b>+</b>	<b>+</b>	
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Note: Models also include the full set of control variables.

# Multivariate Results – Dimensions of Risk

	<i># of Partners</i>	<i>Diagnosed w/ STI</i>	<i>Perceived STI Risk</i>
<b><u>Among R Who Had Sex Before W2</u></b>			
<b>Multiple partners in adolescence</b>	<b>+</b>		
<b>Young age at sex</b>			
<b>Inconsistent contraceptive use</b>	<b>+</b>		
<b>No discussion of contraception</b>			
<b>Older partner</b>			
<b>Non-romantic partner</b>	<b>+</b>	<b>+</b>	
<b>One-night stand</b>			
<b>Non-monogamous relationship</b>			<b>+</b>

Note: Models also include the full set of control variables.

# Multivariate Results – Dimensions of Risk

	<i>Unintended Birth vs. No Birth</i>	<i>Intended Birth vs. No Birth</i>	<i>Unintended vs. Intended Birth</i>
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## Among R Who Had Sex Before W2

Multiple partners in adolescence

Young age at sex

Inconsistent contraceptive use **+**

No discussion of contraception

Older partner	<b>+</b>	<b>-</b>
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Non-romantic partner

One-night stand

Non-monogamous partner

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Note: Models also include the full set of control variables.

# Summary of Findings

- Young adults engaged in a substantial number of risk factors in their teen sexual relationships.
  - 27% of all young adults had 3+ adolescent sexual risk factors
  - 54% of those sexually experienced in adolescence had 3+ risk factors
- The most common risk factors were having two or more partners & inconsistent contraceptive use.
- The least common risk factor was having a non-monogamous relationship.

# Summary of Findings

- Cumulative risk in adolescent relationships was consistently linked to higher STI risk and unintended birth risk in young adulthood.
- There was no clear pattern of associations between the individual risk components and the outcome measures.
- Overall, it is the *amount* of risk in adolescent relationships, rather than the specific *type* of risk, that matters.

# Implications

- Parents and program providers should be cognizant that many teens are engaging in multiple risky behaviors which may increase their chances of adverse reproductive health outcomes in young adulthood.
- Focusing on preventing single types of risk in adolescent relationships may be less effective in helping teens avoid later STIs and unintended births than taking a more comprehensive approach that targets diverse risky sexual behaviors.