

Child TRENDS[®] RESEARCH BRIEF

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Trends and Recent Estimates: Contraceptive Use Among U.S. Teens and Young Adults

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Overview. *Even though the rates of teen pregnancy and childbearing in the United States have declined substantially since the early 1990s, these rates remain some of the highest in the industrialized world.¹ Moreover, the vast majority of teen pregnancies are unintended.² What is perhaps less well known is that unintended pregnancy and childbearing are also major concerns among young adults. In fact, young adults between the ages of 20 and 24 have the highest rate of unintended pregnancy in the United States.² Teens and young adults combined (aged 15-24) also account for roughly one-half of the 19 million new sexually transmitted diseases (STDs) diagnosed in the nation every year.³ Teens and young adults who choose to be sexually active can lower their risk of unintended pregnancy by using highly effective contraceptive methods and reduce their risk of STDs by using condoms consistently and correctly.*

This Research Brief draws on recently released 2006-08 data, as well as 2002 data, from the National Survey of Family Growth (NSFG) to provide updated information on contraceptive use among teens (aged 15-19) and young adults (aged 20-24). Child Trends looked at how respondents answered questions about having ever used contraception; using it when they first had sex; using it the most recent time they had sex; and using condoms consistently. We also examined important differences in contraceptive use between teens and young adults and by race/ethnicity. Our findings show that the increase in contraceptive use seen in the late 1980s and 1990s slowed substantially in the 2000s. However, some notable changes occurred between 2002 and 2006-08, including an increase in the percentage of young women who had used newer hormonal methods (such as the patch or the ring) and long-acting methods (such as the IUD or implants) at least once in their life and an increase in the percentage of young men who used a condom at most recent sex. Contraceptive use patterns continue to differ by age and by race/ethnicity.

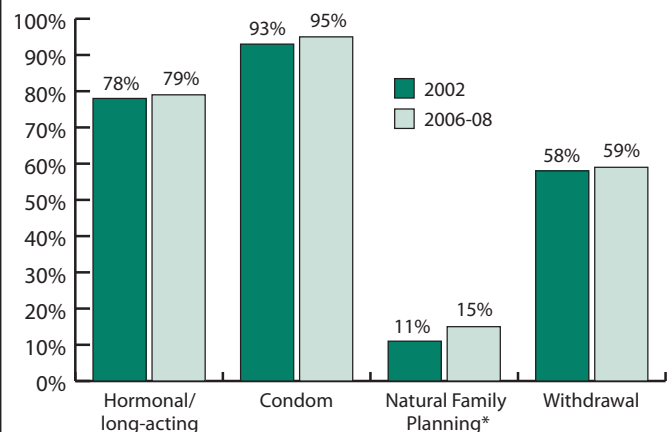
CONTRACEPTIVE METHODS USED AT LEAST ONCE

Knowing whether female respondents have used a contraceptive method at least once in their life provides important information on how many women try a particular method of birth control, regardless of whether they continue to use this method as their primary method, change methods, or discontinue use altogether.

The vast majority of sexually experienced teen and young adult women have used a birth control method at least once in their life. In 2002 and 2006-08, almost all (98-99 percent) teen and young adult women aged 15-24 who reported ever having sex (i.e. sexually experienced) reported having used some form of contraception at least once in their life (results not shown). Condoms, hormonal/long-acting methods, and withdrawal were the most common methods used (see Figure 1). However, only the

Figure 1

Percentage of sexually experienced[†] women aged 15-24 who have used select contraceptive methods at least once in their life, 2002 and 2006-08



Source: Child Trends' analyses of NSFG 2002 female data and NSFG 2006-08 female data
[†]Sexually experienced is defined as having ever had sexual intercourse
*p<.05

ABOUT THE DATA SOURCE FOR THIS BRIEF

The National Survey of Family Growth (NSFG), conducted by the National Center for Health Statistics (NCHS), is a nationally representative survey designed to gather information on family life, marriage and divorce, pregnancy, infertility, use of contraception, and health of women and, more recently of men, aged 15 to 44. It was conducted in specific years through 2002 (including 1988, 1995, and 2002), and since 2006 has been conducted continuously. Statistics in this brief are based on original analyses by Child Trends of data from the 2002 and 2006-2008 cycles of the NSFG, supplemented in some cases with data published by NCHS.^{1,4}

In these analyses, we examined a variety of measures of contraceptive use for males and females aged 15 to 24, and sample sizes varied depending on the specific measure examined. The question of having ever used contraceptive methods was only asked of women; therefore, the sample was limited to sexually experienced (those who have ever had sexual intercourse) females aged 15-24 (n=1,770 in 2006-08 and n=1,764 in 2002). We assessed the measure of contraceptive use at first sex for all sexually experienced men and women aged 15-24 (n=3,290 in 2006-08). We assessed the measure of contraceptive use at most recent sex for all males and females aged 15 to 24 who had been sexually active in the past three months (n=2,130 in 2006-08 and 1,914 in 2002). Finally, we assessed the measure of condom consistency for all male and female teens aged 15 to 19 who had been sexually active in the past month (n=723 in 2006-08). All analyses were weighted and accounted for survey design effects. Statistically significant differences presented in this brief are significant at $p < .05$.

use of Natural Family Planning Methods (understanding the female's monthly fertility pattern and using abstinence or another method on her most fertile days) increased over this time period, from 11 percent in 2002 to 15 percent in 2006-08. In 2006-08:

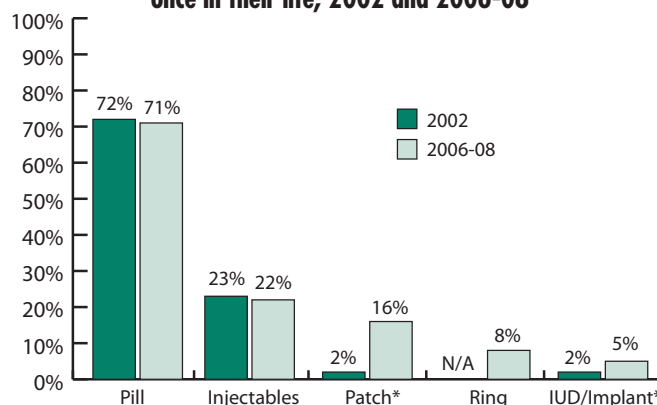
- Almost eight in 10 (79 percent) sexually experienced teen and young adult women had used at least one hormonal/long-acting method—including the Pill, an injectable (such as Depo-Provera), an IUD or implant, the ring, or the patch—at some point prior to the survey.
- The majority (95 percent) of sexually experienced teen and young adult women had used a condom.
- Approximately three in five (59 percent) sexually experienced teen and young adult women had used withdrawal.

Sexually experienced teen and young adult women have used a variety of hormonal and long-acting methods of birth control at least once in their life.

- In 2002 and in 2006-08, slightly more than 70 percent of sexually experienced teen and young adult women reported they had used the Pill at some point prior to the survey and slightly more than 20 percent reported they had used an injectable method of contraception (see Figure 2).
- Fewer teen and young adult women reported using newer hormonal contraceptive methods,

Figure 2

Percentage of sexually experienced† women aged 15-24 who have used select hormonal/long-acting methods at least once in their life, 2002 and 2006-08



Source: Child Trends' analyses of NSFG 2002 female data and NSFG 2006-08 female data

†Sexually experienced is defined as having ever had sexual intercourse

* $p < .05$

such as the contraceptive patch and ring, although this proportion is increasing. In 2006-08, 16 percent of sexually experienced teen and young adult women had used the patch at some point in their life, up from 2 percent in 2002. Roughly 8 percent of sexually experienced teen and young adult women in 2006-08 reported having used the recently introduced contraceptive ring at some point (FDA-approved in 2001 and therefore not included in the 2002 data).

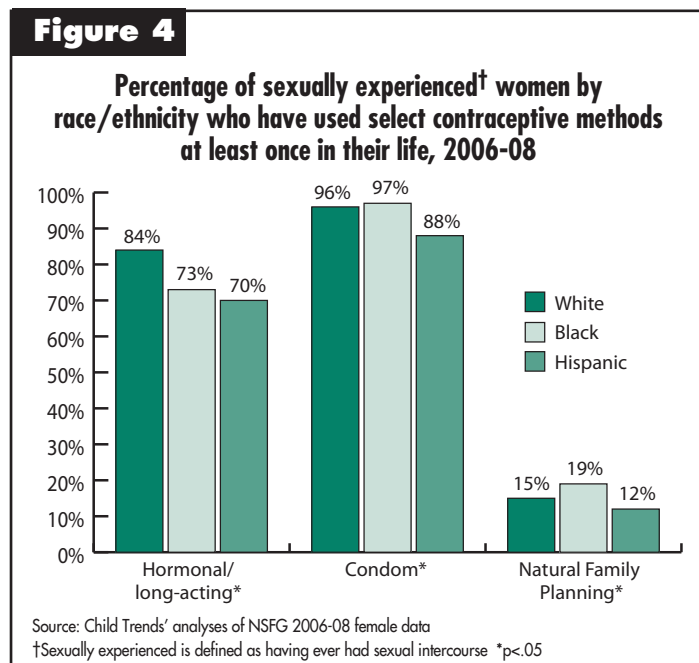
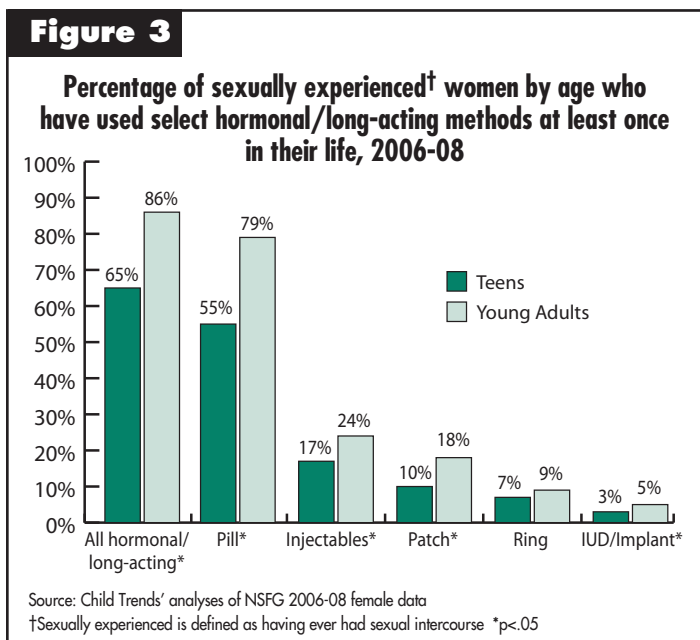
- The proportion of sexually experienced women who have used long-acting methods—such as an IUD or hormonal implant—at least once in their

life increased as well, from 2 percent in 2002 to 5 percent in 2006-08.

Sexually experienced young adult women are more likely than are their teen counterparts to have used a hormonal or long-acting method at some point prior to the survey. In 2006-08, 86 percent of sexually experienced young adult women reported having used a hormonal/long-acting method at least once in their life, compared with 65 percent of sexually experienced teen women (see Figure 3).

noting that the increase in Natural Family Planning between 2002 and 2006-08 was particularly pronounced among teen women (11 percent in 2002 and 17 percent in 2006-08).

Sexually experienced white, black, and Hispanic teen and young adult women differ in their use of specific methods of birth control. Although women in all racial/ethnic groups are equally likely to have used a method of contraception at some point in their life (results not shown), use of some methods varies by racial and ethnic identity (see Figure 4). In 2006-08:



- In 2006-08, slightly more than one-half (55 percent) of teen and almost eight in 10 (79 percent) young adult women had used the Pill at some point prior to the survey. Seventeen percent of teen and approximately one-quarter (24 percent) of young adult women had used an injectable method.
- In 2006-08, 10 percent of teen and 18 percent of young adult women had used the patch; 7 percent of teen and 9 percent of young adult women had used the ring (although this difference was not statistically significant); and 3 percent of teen and 5 percent of young adult women had used a long-acting method (the IUD or implant) at some point prior to the survey.
- Increases in use of the patch, the ring, and IUD/implant occurred for both teen women and young adult women between 2002 and 2006-08 (not shown).
- Teen and young adult women did not differ in their use of condoms, Natural Family Planning or withdrawal (not shown). However, it is worth

- Eighty-four percent of white women reported they had used a hormonal/long-acting method at some point prior to the survey, more than the 73 percent of black women and 70 percent of Hispanic women who reported the same. In particular, white women were more likely than were minority women to have used the Pill (results not shown).
- Hispanic women were less likely than were black and white women to have used a condom at some point in their life—88 percent, compared with 96 percent of white women and 97 percent of black women.
- Hispanic women were also less likely than were black women to have used Natural Family Planning methods at some point prior the survey. Almost one in five black women (19 percent) had used Natural Family Planning versus 12 percent of Hispanic women. The percentage of white women who had used Natural Family Planning at least once in their

life (15 percent) was not significantly different from either Hispanic or black women.

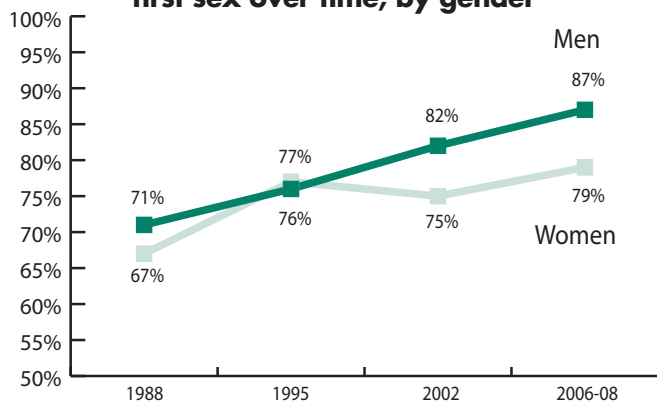
CONTRACEPTIVE USE AT THE FIRST SEXUAL EXPERIENCE

Trends in contraceptive use at first sex are important to understand because adolescents who use contraception the first time they have sex are more likely to continue to do so.⁵

In 2006-08, almost eight in 10 females (79 percent) and nine in 10 males (87 percent) reported using some form of contraception at first sex. The proportion of teens using contraception at first sex has increased substantially since 1988, when only 67 percent of females and 71 percent of males reported using contraception the first time they had sex. However, although contraceptive use at first sex was higher in 2006-08 than in 2002, this change was not statistically significant for either males or females (See Figure 5).

Figure 5

Percentage of teens using contraception at first sex over time, by gender



Sources: Abma JC et al, Teenagers in the United States: Sexual activity, contraceptive use, and childbearing, National Survey of Family Growth 2006-2008, National Center for Health Statistics. Vital and Health Statistics, 2010, 23(30); Abma et al. Teenagers in the United States: Sexual activity, contraceptive use, and childbearing, 2002. National Center for Health Statistics. Vital Health Stat 23(24). 2004

CONTRACEPTIVE USE AT THE MOST RECENT SEXUAL EXPERIENCE

Monitoring contraceptive use at most recent sex is important because it provides an understanding of the types of methods teens and young adults are using currently.

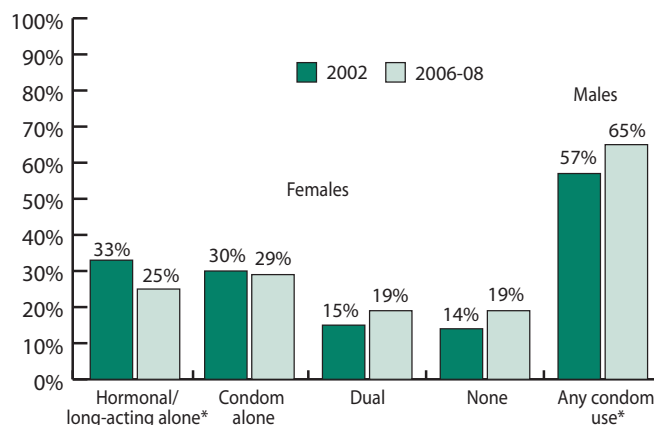
Male condom use at most recent sex has increased since 2002. In 2006-08, 65 percent of never married sexually active teen and young adult men reported using a condom at most recent sex, up from 57 percent in 2002 (see Figure 6). Much of the increase is attributed to more reports of dual

method use—condoms in conjunction with a hormonal/long-acting method.

Fewer sexually active teen and young adult women reported using a hormonal/long-acting method alone. In 2006-08, 25 percent of never married sexually active teen and young adult women reported using a hormonal or long-acting method by itself at most recent sex; 29 percent reported that a condom alone was used; 19 percent reported use of a condom along with a hormonal/long-acting method (dual method); and 19 percent did not use any method (other methods of contraception not included in figure). Use of specific methods of contraception at most recent sex in 2006-08 changed little since 2002, with the exception of the use of hormonal/long-acting methods by themselves, which declined from 33 percent in 2002 (see Figure 6).

Figure 6

Method used at most recent sex by never married sexually active females and males aged 15-24, 2002 and 2006-08



Source: Child Trends' analyses of NSFG 2002 and NSFG 2006-08 female and male data
*p<.05

Teens were more likely than were young adults to have used a condom at most recent sex. In 2006-08, teen women were slightly more likely than were young adult women to report that a condom was used at most recent sex and less likely to report use of a hormonal/long-acting method alone; however the differences were only marginally significant. Teen men were more likely than were young adult men to use a condom at most recent sex (79 percent and 57 percent, respectively, results not shown).

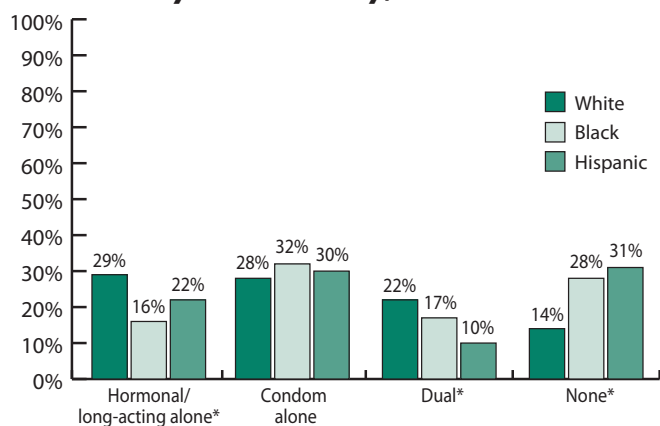
Among females, use of contraception at most recent sex differed by race/ethnicity.

■ In 2006-08, among sexually active never married women aged 15-24, whites were more

likely than were blacks to use a hormonal/long-acting method at most recent sex (29 percent and 16 percent, respectively) and were more likely than were Hispanics to use dual methods (22 percent versus 10 percent). Whites were also less likely than were blacks and Hispanics to report not using any method at most recent sex. Only 14 percent of white females aged 15-24 reported not using contraception at most recent sex, compared with 28 percent of blacks and 31 percent of Hispanics (See Figure 7).

Figure 7

Method used at most recent sex by never married sexually active women aged 15-24, by race/ethnicity, 2006-08



Source: Child Trends' analyses of NSFG 2006-08 female data
 Note: Other forms of contraception not included *p<.05

■ Among never married sexually active men aged 15-24, the percentage of men using a condom at most recent sex, alone or in combination with a hormonal method, did not differ significantly by race/ethnicity (results not shown).

CONSISTENT USE OF CONDOMS AMONG TEENS

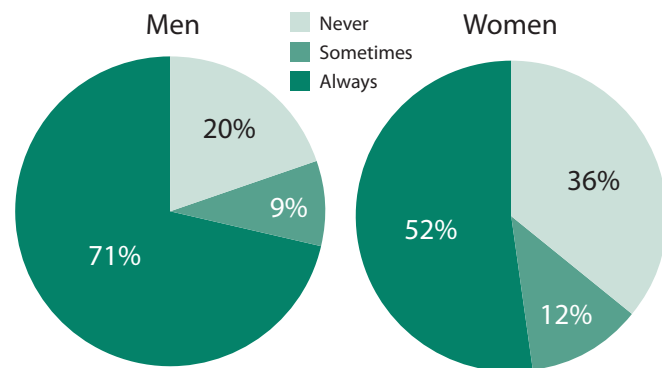
Teens are more likely to report using condoms at most recent sex than using hormonal methods of birth control. Therefore, using condoms consistently—every time they have sex—is vital for effective pregnancy prevention. Additionally, consistency of condom use is an important indicator of how well teens are protecting themselves against STDs.

More than one-half of sexually active teens used a condom for contraception every time they had sex in the past month. Among teens who reported having sex in the past month, just over one-half (52 percent) of females and almost three-quarters (71 percent) of males reported a condom was used every time they had sex. Conversely, 36 percent of females and 20 percent of males

reported a condom was never used when they had sex in the past month; and an additional 9 percent of males and 12 percent of females reported only occasional condom use (see Figure 8).

Figure 8

Consistency of condom use in the past month for sexually active teens, by gender, 2006-08



Source: Abma JC et al, Teenagers in the United States: Sexual activity, contraceptive use, and childbearing, National Survey of Family Growth 2006-2008, National Center for Health Statistics. Vital and Health Statistics, 2010, 23(30)

EMERGENCY CONTRACEPTION

Emergency contraception—also called the “morning after pill”—is not intended to be used as a regular birth control method. However, it can be taken by a woman up to five days after unprotected intercourse to prevent pregnancy, although is more effective when taken earlier. It is at least 75% effective when taken within 72 hours of unprotected sex.⁶ Since April 2009, emergency contraception has been available for purchase over-the-counter by men and women aged 17 and older and available by prescription to those who are younger.

The percentage of teen and young adult women who have used emergency contraception at least once in their life has increased. In 2006-08, 17 percent of teen and young adult women reported having used emergency contraception at some point prior to the survey, up from 9 percent in 2002. Young adult women (21 percent) were more likely to have used emergency contraception than were teen women (11 percent); and white and Hispanic women were more likely to have used emergency contraception (19 percent and 18 percent, respectively) than were black women (11 percent).

SUMMARY AND DISCUSSION

This *Research Brief* has provided up-to-date information on the contraceptive use of teens and young adults in the United States. The findings highlight several notable patterns and trends.

With a few important exceptions, the proportion of teens and young adults who have used contraception at some point in their life changed little between 2002 and 2006-08. These exceptions include the increased use of some newer hormonal methods of birth control (such as the ring and the patch) and of long-acting methods (such as the IUD and implant) over this period. This change suggests that while the Pill and condom remain popular, young women are taking advantage of birth control methods that have lower user-failure rates and last for longer periods of time than does the Pill, which must be taken on a daily basis.⁶

Additionally, more teen and young adult women reported having used a Natural Family Planning method at least once in their life. The reason behind this choice may be linked to concerns about the side effects associated with hormonal birth control methods;⁷ difficulty remembering to take a daily pill; and the perception that barrier methods are more trouble than they are worth.⁸ However, Natural Family Planning methods, as typically used, are among the least effective methods in preventing pregnancy.⁶

The proportion of teens and young adults using contraception at first and most recent sex has also changed little since 2002. Although 87% of teenage men and 79% of teenage women reported using a contraceptive method at first sex, there was no significant change in this measure between 2002 and 2006-08. It is notable, however, that more teen men than women reported using a contraceptive method at first sex. This pattern could be related to the fact that female teens tend to have older partners when they first have sex and, therefore, may be less able to negotiate contraceptive use, particularly condom use.⁹

Over 80 percent of youth reported using some method of contraception at most recent sex, with no change between 2002 and 2006-08. However, the percentage of women using a hormonal/long-acting method by itself the most recent time they had sex did fall during this time period. This decline appears to be offset by a rise in dual method use (combining a hormonal/long-acting method with a condom) and in not using any method, although those changes were not statistically significant. More encouragingly, the proportion of men who reported using a condom at most recent sex increased between 2002 and 2006-08 to almost two-thirds, due in part to a rise in reported dual method use. This rise represents good news in that combining a hormonal or long-acting method with a con-

dom is the most effective way to prevent both pregnancy and STDs.

Not all teens use condoms consistently. While over half of teens used a condom every time they had sex in the past month, a significant percentage (36 percent of females and 20 percent of males) reported they had not used a condom in the past month, putting them at risk of contracting an STD or experiencing an unintended pregnancy (if no other method is used).

Use of emergency contraception is on the rise. Although it is not intended to be used as a regular method of birth control, emergency contraception is increasingly being used to help avoid unwanted pregnancy. The proportion of teen and young adult women who had used emergency contraception at least once in their life almost doubled from 9 percent in 2002 to 17 percent in 2006-08. The fact that emergency contraception became available over-the-counter in 2006 (for those 18 and older and in 2009 for those 17 and older)¹⁰ and that it has been more actively marketed in recent years¹¹ may have contributed to this rise, especially among young adult women.

Teen and young adult patterns of contraceptive use show both similarities and differences. Teens and young adults were equally likely to report having used condoms, Natural Family Planning methods, and withdrawal at some point in their life. However, teen women were less likely than were young adult women to have used a hormonal/long-acting method of birth control (65 percent versus 86 percent). This pattern may reflect the tendency of teen women to have episodic sexual relationships—short-term relationships occurring one after another—and are thus less likely to transition to a hormonal method.¹² It is also the case that most hormonal and long-acting methods—such as the Pill, the patch, the ring, and injectables—require a prescription, and therefore a visit to a health care provider. Adolescents have more difficulty getting to health care clinics than young adults, may experience more discomfort and embarrassment in health care settings, and are often concerned about the confidentiality of services.¹³

Conversely, at most recent sex, young adult women and men were less likely than were teens to use condoms. Young adults are more likely than are teens to be in longer-term monogamous relationships,¹² where their risk of contracting an STD may be reduced.¹⁴ However, to the extent that young adults in more casual relationships or with multiple sex

partners are also less likely than their teen counterparts to use condoms, they may be more at risk of contracting STDs.

Patterns of contraceptive use differ by race/ethnicity. Sexually experienced white women aged 15-24 were more likely than were black and Hispanic women to have used highly effective hormonal/long-acting birth control methods at least once, and to have used such a method the last time they had sex. White women and men were also less likely than were minority women to report not using any method at most recent sex. Early childbearing is more common among black and Hispanic youth and may be considered more normative.¹⁵ However, there are also well-documented disparities in the use of reproductive health care services—white women tend to have greater access to health care services and more trust in health care providers than do other women.¹⁶ Additionally, research has found that minority young adult women are more likely to be concerned about the side effects of hormonal methods and to underestimate the effectiveness of the Pill.⁷

CONCLUSION

While abstinence from all sexual contact is the only completely fail-safe way for teens and young adults to avoid early and unintended pregnancies and STDs, many young people are having sex. These youth can lower their risk of unintended pregnancy by using highly effective contraceptive methods—such as the Pill and other hormonal methods of birth control—and of STDs by using condoms consistently and correctly. However, as our Research Brief shows, teens and young adults do not always choose highly effective methods and are not perfect users of condoms. Our results indicate a continuing need for policies and programs that promote consistent condom use among teens and young adults as well as improve access to hormonal and long-acting methods for this population.

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