

Teens Speak Out:

National Survey Indicates That Most Teens Want More Than
Contraception From Their Sex Education Classes

Valerie Huber
President/CEO
Ascend

Research Conducted by Barna Group



For More Information, Contact
Ascend

1701 Pennsylvania Ave NW, Suite 300
Washington, DC 20006
(202) 248 5420

info@WeAscend.org
WeAscend.org

Executive Summary

Teens Speak Out is a commissioned study of 18 and 19 year olds who have completed high school or are entering the final months of their K-12 career. These young adults were asked a variety of questions about sex and their experience and thoughts about sex education classes.

When it comes to sex education, teens have a lot to say. In particular, the study found the following:

- Teens are feeling pressured to have sex.
- Most teens (including those who receive SRA education) receive information about contraception in their sex education classes.
- Sexually active students use contraception, regardless of what kind of sex education they received.
- Students indicate LARC may increase their sexual risk.
- Pregnancy prevention is not the most important topic teens want covered in sex education.
- Most young adults have had sex, but don't like "hooking up," and many wish they had waited longer for sex.
A sizeable minority of older teens are waiting for sex, but not primarily because of a fear of pregnancy or STDs
- The holistic nature of the SRA message is strongly supported by most teens.
- Teens think sex education classes should focus on healthy outcomes, not on controversial topics.

This study calls upon parents, policymakers and educators to look at the priorities they have for the sex education for America's youth. Do those priorities encourage or discourage sexual risk? Do teens feel pressured into risky behaviors that they might not participate in if they were hearing a different message from the influencers in their lives? What can we, as a nation and as influencers, do to ensure that the sex education for youth sends only the healthiest messages and provides meaningful and practical skills to improve their current and future prospects? How can we make sure that we do nothing to undermine their ability to build healthy relationships now and healthy families and communities in the future? The *Teens Speak Out* findings demand a new look at how we teach sex education in America and make needed corrections as we listen to how our sex education approaches are impacting teens.

Background

Teens Speak Out is a national survey of Americans that was conducted by *Barna Group*. The survey was commissioned by *Ascend* and the results are distributed by both *Barna Group* and *Ascend*. The survey asked 18 and 19 year olds a series of questions about their general views of sex and sex education. The results were stratified by age, gender, ethnicity, religious, ideological, and political views.

The *Teens Speak Out* research is unique in that it asked young adults to reflect upon their own sex education classes, what they found valuable, and their own subsequent beliefs about sex. We also wanted to know: does the type of sex education that students receive have any influence on their sexual opinions and behavior? What other factors may be at play?

The results of the *Teens Speak Out* research offer important clues on how to best communicate with high school students about sex, relationships and their futures. These results also provide a window on areas that are not being adequately discussed with teens, revealing some troubling unintended consequences that could happen as a result. What can we learn about the kind of controllable factors that can decrease teen sexual initiation? How do teens feel about sex and sex education? Some of the answers are surprising; others confirm what we already knew about older teens.

Key Findings

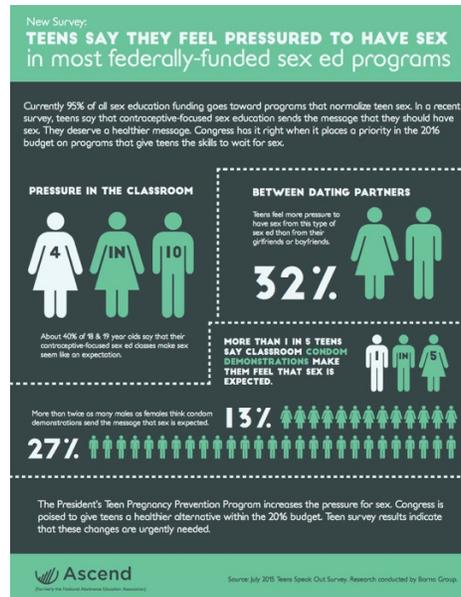
The key findings from the *Teens Speak Out* research are described below:

- **Teens are feeling pressured to have sex.** Not surprisingly, movies (60%), music (40%), social or news media (51%) and peers (55%) create the strongest advocacy for teen sex, according to the respondents. But their sex education classes are next.

Overall, almost 1 in 3 teens (29%) think that their sex ed classes make it seem like sexual activity is an expectation. For students who receive Sexual Risk Reduction (SRR or “comprehensive sex”) education, the pressure to have sex is more intense, with almost 2 in 5 saying that sex seems expected (38%). And in a surprising comparison, (28%) think that expectations from their dating partner give them the sense that teen sexual activity is normal or expected. In addition, students who received SRR education are much more likely to believe that condom demonstrations make sex an expected behavior (SRR: 21% vs SRA: 12%), with males feeling more pressure than females.

The “expectation” teens feel appears to translate into sexual behavior. For example, if teens are sexually active, they feel more pressure to have sex by their boyfriend or girlfriend (37%) than do their abstinent peers (16%).

Conversations with parents are important and the messages that parents communicate are vital. 14% of teens believe their parents communicated a message that teen sex is expected, with boys (17%) feeling this more than girls (10%). Sexually active teens who received SRR education were more than 3 times more likely to feel their parents expected them to have sex, and sexually active SRA students were nearly twice as likely to feel their parents considered teen sex “expected.”



- **Most teens (including those who receive SRA education) receive information about contraception in their sex education classes.** The majority of teens receive information about contraception in their sex ed classes (69%), with varying degrees of emphasis on waiting for sex. More than 1 in 5 teens do not receive sex education in school at all (21%). For those who do receive sex education, slightly more receive education that puts most or all of the emphasis on waiting for sex (44%), while slightly fewer receive sex education that places all or most of the emphasis on contraception (36%). 75% of all students who were enrolled in a SRA class say they received information about contraception thus confirming what Ascend has stated for some time – that SRA programs do provide information about contraception. 82% of students enrolled in an SRR (“comprehensive sex ed”) class say that they received “mostly information on contraception and how to have sex without experiencing a pregnancy,” a clearly unhealthy message for teens.
- **Sexually active students use contraception, regardless of what kind of sex education they received.** Critics of SRA education charge that if students have sex, they won’t use contraception, but the teens in this research add more evidence that this indictment is untrue. The type of sex education a teen receives doesn’t influence whether or not a teen uses contraception. For sexually active teens, SRA (86%) and SRR (87%) students were equally likely to use contraception at least some of the

times they had sex. They similarly preferred condoms, birth control pills and the morning after pills. They were also as likely to never use contraception (SRA 11.5%; SRR 11%).

- **Students indicate LARC may increase their sexual risk.** Long-acting reversible contraception (LARC) is being advocated as a “first-line” choice for teen pregnancy prevention by the CDC and others. LARC includes intrauterine devices (IUDs) and implants, which work to prevent pregnancy for three to ten years, depending upon the device. Because of provisions passed within the Affordable Care Act, most health insurance plans are required to cover contraceptives, including LARC, at no charge to the teen patient. However, it is clear that several important concerns require more research as well as a more tempered and thoughtful approach to the unique teen population, as evidenced in the responses by teens in the current study.
 - **LARC offers no protection against STDs,** but overall, only 43% of teens are certain of this fact. This means that 6 in 10 teens think that with LARC, they are protected from STDs when, in fact, they are not. After learning that LARC does not protect against STDs, only about half of teens say they would definitely also use a condom when they had sex (59%), suggesting that LARC may have some negative unintended consequences linked to increased risk for acquiring an STD.
 - **LARC increases the likelihood that teens will have sex.** A plurality of 44% say that knowing about LARC makes it more likely they will have sex, with males (50%) more likely than females (39%) to agree. Of note, females who receive SRR education are much more likely to have sex when they learn about LARC, compared to their SRA peers. (Females: SRR education: 49% vs SRA education: 35%). SRR students were almost 20% more likely to have sex than SRA students if they knew LARC could prevent pregnancy (51% vs. 42% SRA).
 - **LARC understanding differs by type of sex education.** It appears that SRR students are not receiving important health information regarding the limitations of LARC, the new preferred contraception among pro teen-sex groups and SRR providers. Though a small percentage, SRR students were far more likely to believe that LARC makes them totally safe from pregnancy (7% vs 2%) than their SRA peers. Similarly, SRR students were more likely to believe LARC keeps them totally safe from STDs (5.6% vs 0.5%).
- **Pregnancy prevention is not the most important topic teens want covered in sex education.** Teens say topics pertaining to social relationships are most *important* to include in high school sex ed: understanding healthy and unhealthy relationships (65%), avoiding sexual assault (64%), how alcohol impairs judgment (61%), and how to say “no” to sex without losing a relationship (57%). This data confirms what earlier research has revealed -that relationships are more important than sex to teens. It also confirms that for most teens, sex is more than a recreational activity. It has a relational context and matters of the heart rise to the top of emotional needs and priorities.

The respondents were given an opportunity to voice their own opinions on what they would like to be given more of an emphasis in sex education classes. The responses were varied, as evidenced by some very different replies by teens. One teen favored “a demonstration or video for how to have sex,” and another lamented that their sex education class was “too focused on the ‘inevitability’ that teens would have sex at a young age instead of promoting the positives of waiting.” However, there was a common theme throughout the open-ended responses that reinforced the importance of learning more about building healthy relationships and avoiding those that are unhealthy. Again and again, they responded with these verbatim suggestions for topics to include in sex education classes:

- *“I wish relationships were covered more. Not just sex in a relationship.*
- *Healthy vs unhealthy relationships.*
- *How to say no in relationships without losing it, and how sex can change a relationship.*
- *Developing healthy relationships with your potential partner that involve true love and trust.*
- *More about succeeding in school and building healthy relationships.*
- *More about ways to get out of an unhealthy relationship.*
- *How to make healthy relationships.*
- *How to prevent and/or handle sexual assault and more info about healthy and unhealthy relationships.*
- *How to avoid STDs, how to have a healthy relationship (how to get out of an unhealthy relationship), how to have a healthy marriage, and how to avoid nonconsensual sexual situations.*
- *How to determine healthy relationships and how to get out of situations where sex is being pressured.*
- *I wish we would have covered more of the healthy relationship aspect*
- *Positive relationships/ future marriage and family contexts.*
- *How to form healthy relationships/how to get away from a toxic relationship.*
- *The fact that sex should wait until marriage or especially until there is an established relationship built on unconditional love and trust.*
- *We didn't learn that much about healthy relationships, and how to tell if it is consensual. We mainly learned JUST about STDs and how to have protected sex.*

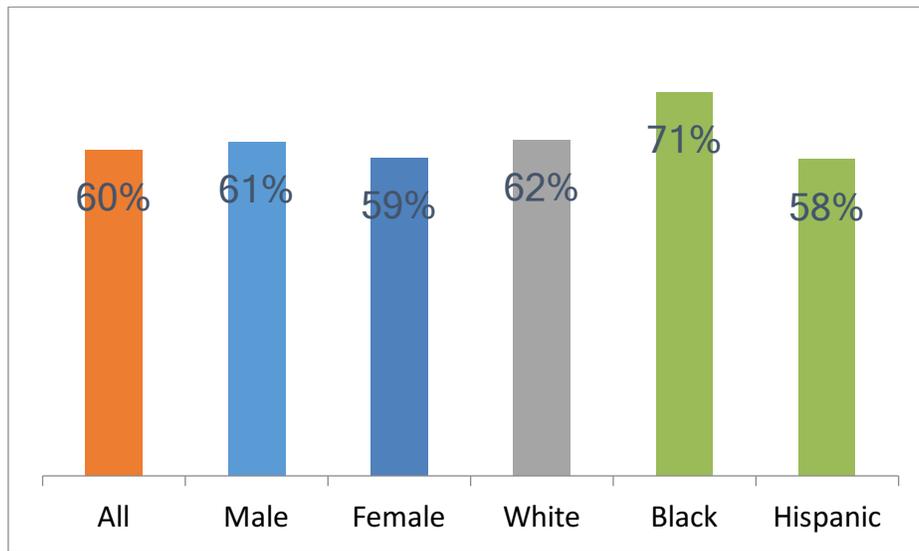
Relationships matter. Teens recognize this and a social science confirms it. Sex usually does not occur in a vacuum, despite arguments to the contrary. There is a gender-specific aspect, however. Three times more males (18%) than females (6%) believe that concerns other than avoiding pregnancy either don't matter or don't exist. But those percentages are small. The majority of both males and females (86%) believe there are a lot of other possible consequences to sex, aside from pregnancy. This confirms that the non-physical aspects of sexual activity are

important. While females believe this more strongly (94%), males also agree that pregnancy is not the only negative consequence to sex (78%).

Still, avoiding pregnancy (44%) is a motivator for sexual delay. However, teens overall (51%) and especially females (57%) say they would wait longer for sex if it meant a greater chance of having a better relationship or marriage in the future. Avoiding sexually-transmitted diseases (50%) is an even greater disincentive for sex than was avoiding pregnancy. Increasing one's chances to avoid or escape poverty (41%) or to attend college (42%) were important factors that teens say would cause them to wait longer for sex. These factors all have a greater influence on females than males.

- **Most young adults have had sex, but don't like "hooking up," and many wish they had waited longer for sex.** Overall, the CDC tells us good news about teens and sex. The majority of teens have not had sex, and, since 1991 (the first year the CDC began tracking youth risk behaviors), the percent of high school students who have never had sex has increased 28%. In real numbers, that means that nearly 6 in 10 teens are making the healthiest choice by waiting for sex.¹ The highest percent to date. But, the story is not so positive for 18 and 19 year olds.
 - **Most have had sex.** According to the CDC, by the time teens graduate from high school, most of them will have sex. In the most recent data, 58% of high school seniors have had sex, the grade most closely associated with 18 and 19-year-old students. Though too many high school seniors are sexually active, those numbers have decreased 13% since 1991, indicating a positive trend that should be reinforced with targeted SRA information and skills² The *Teens Speak Out* results show similar results. 60% of surveyed 18 and 19 year olds have had sex. 40% have not, corroborating the representative nature of the survey. The breakdown is similar for males (61%) and females (59%). Geographically, northeasterners are most likely to have had sex (68%) and Midwesterners are least likely (56%). These numbers are not tied to the type of sex education they had. Religiously, practicing Christians (48%) are much less likely to have had sex than their non-practicing counterparts (62%), indicating that faith is a protective factor against teen sex. However, if practicing Christians are sexually active, they started having sex earlier (median age 16 vs median age 17 for unchurched teens). Sexually active teens are more likely to want information, demonstration and distribution of contraception as a part of their sex education classes and less likely than their non-sexual counterparts to think that information on healthy relationships, STDs, sexual assault, consent, or skills to avoid sex is important.

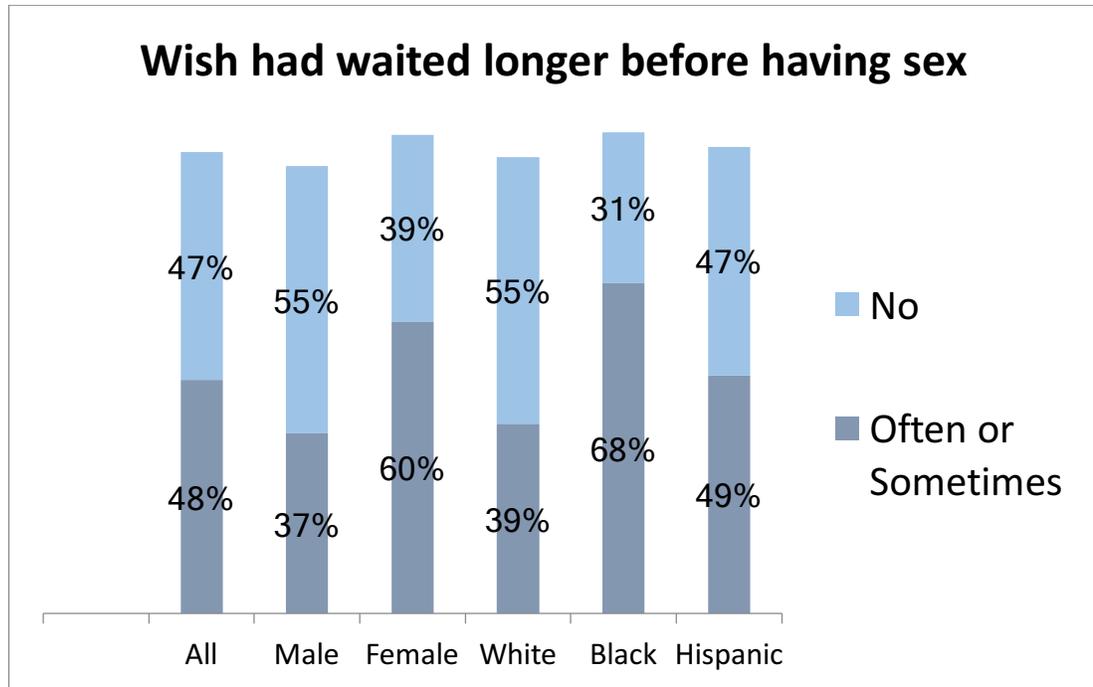
TABLE 1: HAVE HAD SEXUAL INTERCOURSE



- **Many wish they had waited longer.** About half (48%) of all sexually active students say that they often or sometimes wish they had waited longer before having sex, but females were much more likely to wish they had waited (60%) than their male counterparts (37%). Some teens gave reasons for their regrets:
 - “I’ve often wished that I had formed a real relationship with someone before having sex with them.”
 - “I wish I would have waited because I feel like I was too young to understand sex, and how it could change your life.”
 - “I wish I had waited for someone that really loved me and valued me.”
 - “Because I did it with someone I thought loved me.”
 - “It wasn’t special like it would have been with the person I would plan to spend the rest of my life with.”
 - “I wish I would have waited for the right person.”

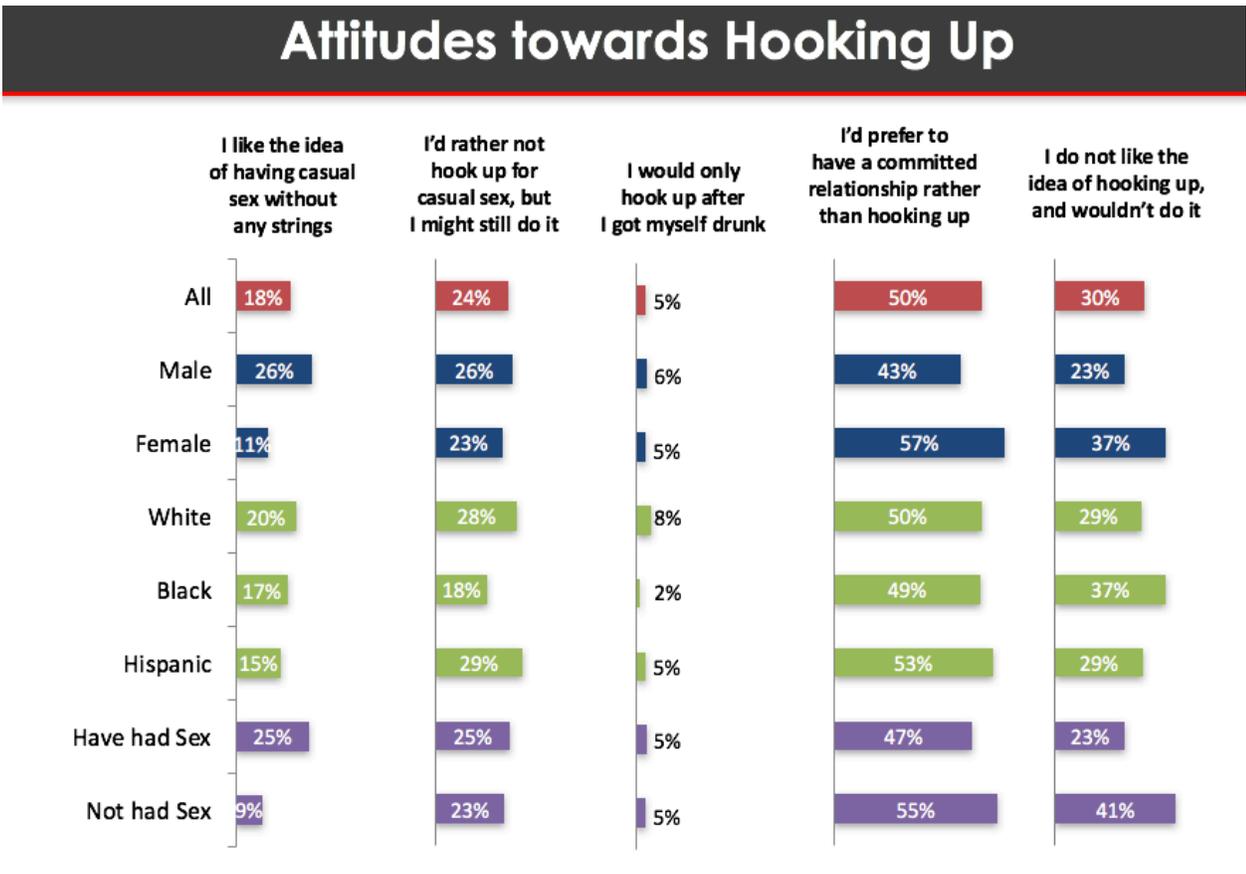
These statements are consistent with the majority view that waiting for sex until in a committed relationship is important to many teens. Others stated that they wish they had waited longer because having sex as a teen was against their values. The type of sex education a student received had little impact on their feeling of regret over having sex.

By race, black teens were most likely to wish they had waited (68%) and white teens were most likely to feel no regret for having sex (55%). Practicing Christians were about three times more likely to “often” wish they had waited as compared to their unchurched counterparts (31% vs. 10%).



- **Most don't like the idea of "hooking up."** Few students like the idea of casual sex without strings (18%) but SRR students are much more likely to say that they would hook up after getting themselves drunk (9% vs 1% SRA), an additional risk behavior that complicates due process in evaluating sexual consent. Overall, males (26%) are more than twice as likely to favor the idea of casual sex than females (11%). Females prefer a relationship over hooking up (57% vs. 43% for males). While most don't like the idea of hooking up, 1 in 4 teens say they still might do it. Among the sexually active, 25% like the idea of casual sex as opposed to 9% of their abstinent peers.

TABLE 2: REPRESENTATION OF ATTITUDES OF ALL TEENS



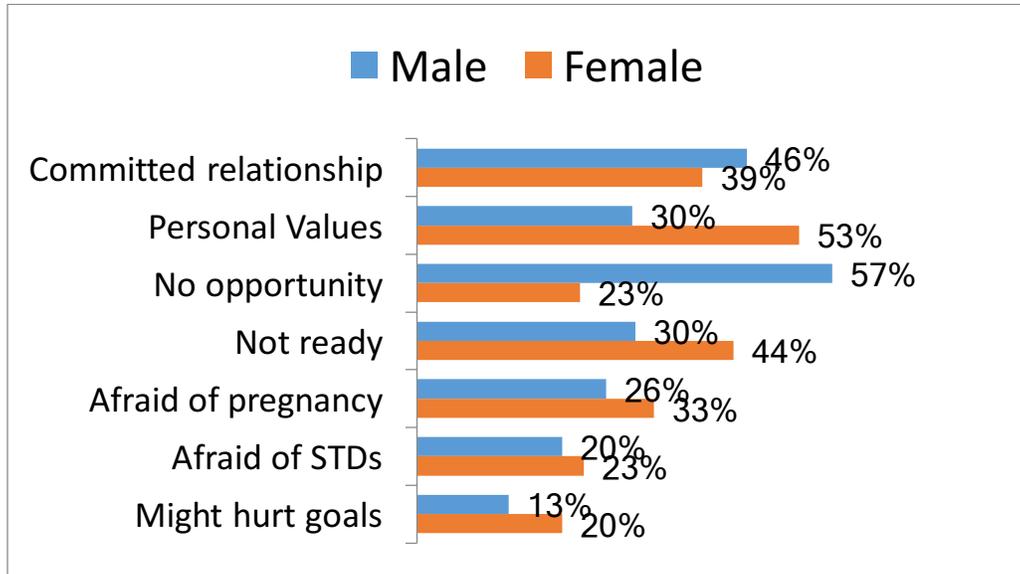
- A sizeable minority of older teens are waiting for sex, but not primarily because of a fear of pregnancy or STDs.** Of those teens who have not had sex, they were most likely to indicate that their personal values (42%) or a desire to be in a committed relationship first (42%) compelled them to wait. Separated by gender, however, the reasons are vastly different. Females overwhelmingly cite their personal values for why they have not had sex (53%), but males cite a lack of opportunity as their top reason (57%). A concern that having sex could negatively impact their goals is the least likely reason for their not having sex, and fear of pregnancy or STDs provide little incentive to wait for sex.

However, teens believe that waiting for sex is possible. Only 1% of older teens believe that it is impossible not to have sex and 65% believe it is possible to make this choice at any age.

The type of sex education a student received influences their reasons for waiting. Waiting for a committed relationship was one of the top two reasons for students who received both SRR (42%) and SRA (48%) education. However, the second most popular reason given by students differed greatly by the type of sex ed that they received. For SRA students, 47% indicated that their own personal values

compelled them to wait for sex, but many SRR students had not yet had sex simply because the opportunity had yet to present itself (42%).

TABLE 3: WHY TEENS ARE WAITING FOR SEX



Why Teens Are Waiting To Have Sex

It's Not Just About Avoiding Pregnancy

Why Teens Don't Have Sex

- 42% Personal values
- 42% Waiting for a committed relationship
- 30% Afraid of pregnancy
- 22% Afraid of STDs

53% Teens Have Not Had Sex

Federally-Funded Sex Ed.

Pregnancy prevention is not the main reason teens wait. Yet, the primary focus of most federally-funded sex education programs is teen pregnancy prevention.

Pregnancy Prevention 95%

Other 5%

It's time to give them more than pregnancy-prevention-only programs. It's time to give them the skills they need to achieve their goals and avoid sexual risk.

IT'S TIME TO SUPPORT HEALTHY DECISIONS.

Ascend
Formerly, National Abstinence Education Association (NAEA)

Source: July 2015 Teens Speak Out Survey. Research Conducted by Bama Group on 18 and 19-year-old teens.

- **The holistic nature of the SRA message is strongly supported by most teens.** SRA education contextualizes the “waiting for sex” discussion around a practical conversation designed to help students see the importance of avoiding negative risk behaviors in order to improve their chances for a successful future. Teens want to know how to develop healthy relationships both now and in the future. The key topics shared in SRA classes were all deemed important by a huge percentage of teen participants, an important sign that the SRA message resonates with them. Teens believe that these key SRA topics are important.
 - Eliminating the risk of acquiring STDs (98%)
 - Learning how to form healthy relationships (96%)
 - Developing skills for a healthy marriage and family (89%)
 - Avoiding smoking (91%)
 - Avoiding drinking (87%)
 - Learning the skills to wait for sex (83%)
 - Waiting for sex at least until after high school (71%)

Females are significantly more likely than males to want a high school discussion of how alcohol affects judgment (72% vs 59%), information about contraception (67% vs 55%), understanding healthy relationships (79% vs. 64%), avoiding sexual assault (71% vs 64%), how to avoid sex and still keep the relationship (70% vs 56%), understanding consent (65% vs 50%), avoiding sexual assault (71% vs 64%), and information on STDs (83% vs 72%).

Both sexes put highest importance on learning more about healthy relationships, sexual assault, how alcohol impairs judgment, especially pertaining to sexual activity, and STDs.

However, gender differences were pronounced on some subjects. Even though these topics are relatively low on the priority list for sex education class, males are significantly more likely than females to want information on sexual pleasure (31% vs 22%), masturbation (31% vs 24%), and promotion of various sexual activities that do not cause pregnancy (30% vs 23%).

The results confirm that while both men and women place common SRA themes very high on their sex education priority lists, there are definite gender differences between the sexes. Despite the fact that some argue that differing genitalia is all that separates male from female, the *Teens Speak Out* results indicate important differences that need to be considered.

- **Teens think sex education classes should focus on healthy outcomes, not on controversial topics.** Increasingly, SRA critics are calling for more and more topics to be included in sex education classes. Even federally funded sex education programs are placing a much greater emphasis on these controversial topics, making them a required or encouraged topic for discussion. Most teen respondents

believe that it is more important for high school students to receive skills to say “no” to sex without losing a relationship (63%) and practical skills to wait for sex (40%), than promoting non-intercourse sexual activity (27%) and sexual pleasuring (26%).

When asked to rank topics for inclusion in sex education, controversial topics enjoyed little support. Discussing gender identity, encouraging sexual activity that doesn’t cause pregnancy, including masturbation, were low on the list for high school sex education classes, as illustrated below. The majority of 18 and 19 year olds did not think these topics were essential for a sex education class:

- LGBTQ lifestyles
- Gender identity
- Demonstrate contraception
- Abortion
- Masturbation
- Distribute contraception
- Sexual pleasuring your partner
- Promote sexual activity that doesn’t cause pregnancy

Observations and Recommendations

The *Teens Speak Out* survey offers a representative view of what older teens think about sex and sex education. Some of the results are surprising. Others are not. But one thing is certain – teens care about their current reality, as well as their future prospects.

The survey results largely paint a picture that mirrors the intended goals and practical realities of so many SRA programs across the nation. The SRA approach to sex education casts a vision for youth to set and pursue their future goals; to help them gain the understanding that healthy habits begin early, and avoiding all the risks associated with teen sex is an important way to clear the path for a bright future. SRA programs focus on building healthy relationships that can pave the way for healthy marriages and families in the future. Teens care about that. A lot.

Parents, teachers and policymakers would be wise to consider the physical, social and cultural realities of these young adults and discuss ways to improve healthy outcomes:

- Teens are feeling pressured to have sex. How can we decrease the pressure, both in the general culture – and in the sex ed. classroom?
- Most teens (including those who receive SRA education) receive information about contraception in their sex education classes and are no less likely to use contraception if they are sexually active. The SRA-bashing regarding this topic must end. How can we decrease the often deliberate misinformation?

- Students indicate LARC may increase their sexual risk. In our haste to find an answer to teen pregnancy, the CDC and others may have prematurely deemed LARC the silver bullet solution. However, a more deliberate and careful process needs to be implemented regarding LARC. Do we know enough about the health or other unintended consequences of a wholesale LARC advocacy campaign for teens?
- Pregnancy prevention is not the most important topic teens want covered in sex education. Policy-makers, both in the halls of Congress and around the school board table need to take note. Sex education needs to return to a more holistic approach that prioritizes the avoidance of all sexual risk and increased chances for youth to thrive, both now and in the future.
- Most young adults have had sex, but don't like "hooking up," and many wish they had waited longer for sex. Are we, as a culture – and as the adult voices speaking into the lives of teens – normalizing sex and 'hooking up'? How can we normalize healthier messages that eliminate sexual risk in favor of optimal health?
- Teens are waiting for sex, but not primarily because of a fear of pregnancy or STDs. Sex education programs must be sensitive to the needs of the students they serve. They care about relationships more than pregnancy prevention techniques. Does the sex education syllabus provide the appropriate context and emphasis?
- The holistic nature of the SRA message is strongly supported by most teens, who think sex education classes should focus on healthy outcomes, not on controversial topics. Policymakers, take note. Health and relevance should trump political agendas every time.

The survey results tell us where the sex education community is doing well – and where it needs to improve. The results provide a strong endorsement of SRA education as a preferred choice for sex education. Parents and policymakers alike should be encouraged that this support is in good company with a deep bench of research-informed practices, theories, and implementation strategies that offer the best sexual health outcomes for America's youth.

The *Teens Speak Out* research should open up a new conversation about sex, health, and relationships. Youth deserve it. And the results clearly show this is also what they want.

About the Survey

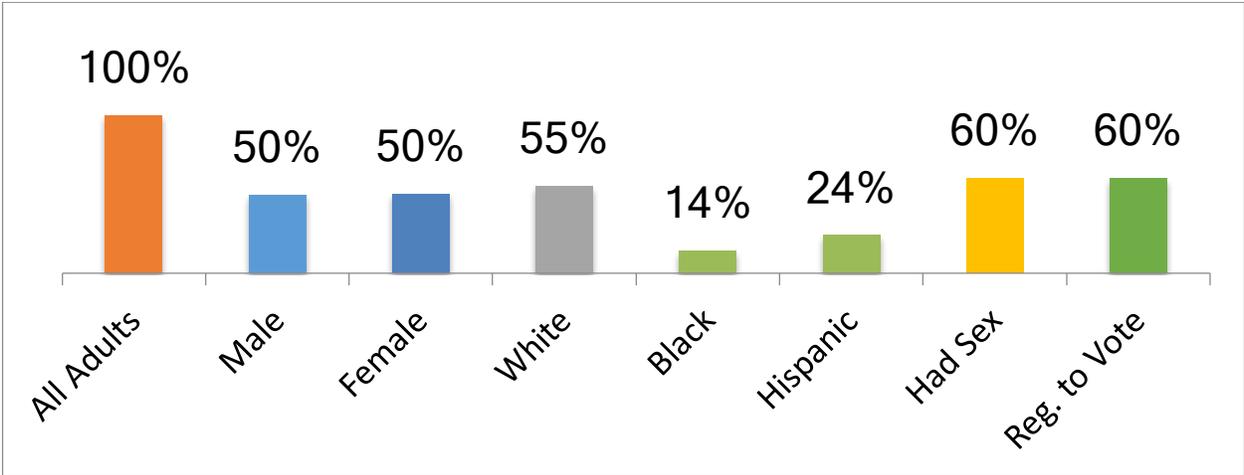
The findings in this report are based on a 20-minute online survey that was conducted between July 9-17, with 533 U.S. Teens ages 18 and 19 from the Toluna Research Panel, an online consumer research panel. This data is representative of "adult" teens (no consent needed for participation) who have access to the internet in some form.³ Due to the personal and sensitive nature of these topics, the confidential form of an online survey, versus phone survey, produces more reliable results. Analyses show that

respondents to phone surveys exhibit “interviewer bias,” in which a proportion try to give socially acceptable answers to the phone interviewer.

Headquartered in Ventura, California, Barna Group has conducted hundreds of studies and over a million interviews over the course of its 30-year history, earning it an esteemed place of regard concerning social and cultural issues. It is a respected source for understanding how Americans view and interpret culture and cultural issues that impact everyday life.

Data were weighted to represent the demographics of adults aged 18 and 19 in the United States. The margin of sampling error for the full sample is +/- 4.2% percentage points with a 95% level of confidence. This means that if the same questions were asked of other representative samplings of 18 – 19 year olds, the results would be within 4 percentage points of those found in this study.

The population samples mirror the most recent Census Bureau data for 18 – 19 year olds and include the following stratification:



¹ CDC (2016) United States, High School Youth Risk Behavior Survey, 2015. Atlanta: Author. Retrieved June 2016 at <https://nccd.cdc.gov/youthonline/App/Results.aspx?TT=A&OUT=0&SID=HS&QID=QQ&LID=XX&YID=2015&LID2=&YID2=&COL=S&ROW1=N&ROW2=N&HT=QQ&LCT=LL&FS=S1&FR=R1&FG=G1&FSL=S1&FRL=R1&FGL=G1&PV=&TST=False&C1=&C2=&QP=G&DP=1&VA=CI&CS=Y&SYID=&EYID=&SC=DEFAULT&SO=ASC> YRBS trend data shows that the percent of teens who have never had sex increased from 45.9 in 1991 to 58.8 in 2015

² Ibid. Most teens have not had sex through the 11th grade, but this changes by their senior year.

³ Anderson, M., Perrin, A. (2015, July 28). Factank: News in the Numbers: 15% of Americans don’t use the internet. Who are they?,” Washington DC: Pew Research. Accessed June 1, 2016 at (<http://www.pewresearch.org/fact-tank/2015/07/28/15-of-americans-dont-use-the-internet-who-are-they/> /))