

High-Risk Behaviors in Youth

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Adolescence is full of changes and challenges, but also growth and opportunities. Teens are particularly susceptible to high-risk behaviors. Parents and other concerned adults need to be aware of these behaviors, the factors that increase their likelihood, and what can be done to abate or prevent those risks.

What Are Risk Behaviors?

High-risk behaviors are those that can have adverse effects on the overall development and well-being of youth, or that might prevent them from future successes and development. This includes behaviors that cause immediate physical injury (e.g., fighting), as well as behaviors with cumulative negative effects (e.g., substance use). Risk behaviors also can affect youth by disrupting their normal development or preventing them from participating in typical experiences for their age group. For example, teen pregnancy can preclude youth from experiencing typical adolescent events such as graduating from school or from developing close friendships with peers.

High-risk behaviors can significantly impact the lives of youth and those around them. As such, it is essential that parents, educators, and other concerned adults become aware of the prevalence of these behaviors, the factors that increase their likelihood, and what can be done to abate or prevent those risks.

Types and Prevalence of High-Risk Behaviors

Several high-risk behaviors have been of particular interest to professionals because of their high prevalence in youth. Many of these behaviors cause a large number of teen deaths and injury and have negative impacts on broader society.

Self-Injurious Behaviors, Violence, and Suicide

Driving-related risks. Among teens, many of the most self-injurious behaviors are related to driving. Obtaining a driver's license is one of the most exciting milestones of the teen years, but unfortunately, car accidents are the leading cause of death in this age group. The risk of vehicular accidents tends to be highest for male teens and teen drivers who have just recently obtained their licenses. The risk of accidents also rises when teens are driving with other teens in the car.

Several factors increase driving-related injuries among youth. For example, the level of injury during a car accident and risk for death is greatly impacted by the use of seatbelts. Only 54 percent of youth nationwide report that they always

wear seatbelts as passengers — the lowest rate of seatbelt use in all age groups. The Centers for Disease Control reports that in 2010, 56 percent of youth killed in vehicular accidents were not wearing seatbelts.

Being distracted while driving is another serious safety concern. Although many individuals are certain that they can multitask effectively, the risk of distracted driving is real. In 2010, distracted driving caused over 3,000 deaths and 416,000 injuries. Over 32 percent of teen drivers reported having texted or emailed while driving in the past 30 days. Among drivers ages 18-20 who were involved in a car accident that they survived, 11 percent reported that they were texting when they crashed their vehicles.

The combination of alcohol use and driving also contributes to deaths among teens from car crashes. About 8 percent of teens reported that in the past month, they had driven a vehicle after drinking. Approximately 24 percent admitted riding in a car after the driver had been drinking. The good news is that the prevalence of driving-related risk behaviors has steadily decreased over the last few years. Nonetheless, driving-related risk behaviors continue to be a serious problem during the teen years.

Fighting and aggression. Fighting and aggression make up another group of injurious behaviors. It is second to vehicular accidents as the leading cause of death among those 15 to 34 years of age. Nationally, almost four out of 10 (38 percent) teens reported having been involved in physical fighting over the last year, with males (41 percent) outnumbering females (24 percent) dramatically. Almost 17 percent of students reported having carried a weapon over the last 30 days, and 5 percent reported having carried a gun. Males (8.6 percent) outnumbered females (1.4 percent) significantly.

Suicide. Suicide currently is one of the highest risk behaviors among youth. Close to 16 percent (almost one out of every five) of youth reported having considered suicide within the past year and 13 percent actually made plans to carry it out. Among teens, 7.8 percent attempt suicide every year. Suicide, which causes 13 percent of deaths among 10- to 24-year-olds, is now the fourth leading cause of death in that age group after motor vehicle crashes (26 percent), injuries (17 percent), and homicide (16 percent).

Substance Use

Substance use is another group of behaviors that contribute to immediate as well as long-term damage. Drinking and drug use have been linked to motor vehicle accidents, fighting/violence, problematic relationships and social interactions, and various diseases. Drinking and cigarette

smoking are among the most common in this group of behaviors. Because the legal drinking age in the United States is 21 and the legal smoking age is 18, smoking or drinking during the teen years is considered illicit. Over 38 percent of youth nationwide reported that they drank alcohol and 26 percent admitted to engaging in binge drinking (five or more drinks in a row) in the past month. Approximately 45 percent of teens have tried smoking and 18 percent reported having smoked in the past 30 days. One out of every 10 youth reported daily cigarette use. That is, they smoked at least one cigarette every day for the last 30 days. Like self-injurious behaviors, the prevalence of alcohol and cigarette use has either stayed steady or decreased over the last few years. Nonetheless, they continue to pose serious risks to adolescent health.

Illicit drug use is both a health and a public concern because of the obvious negative physical effects it has on users. Effects include, but are not limited to, brain damage and damage to major physical organs. It also has been linked to a host of other health-compromising behaviors such as risky driving, engagement in high-risk sexual behaviors, and violence. And because the brain is still developing during the teen years, risks for impairment are higher prior to adulthood. Recent estimates suggest that by age 13, a little over 8 percent of teens have tried marijuana. In a national survey by the Centers for Disease Control, 23 percent of 9th to 12th graders had used marijuana at least once in the 30 days prior to the survey.

In the United States, another growing concern is prescription drugs taken improperly or used without a doctor's prescription. Approximately 20 percent of students in 9th to 12th grade reported taking prescription drugs without a doctor's prescription. Examples of illicit prescription drugs include OxyContin®, Percocet®, and Adderall®.

In recent years, methamphetamine use has become a serious concern in the United States. The low cost of the drug and the ease at which many youth are able to access this substance have contributed significantly to its rapid spread. The serious, immediate, and long-term effects of methamphetamine have made it a top concern for many professionals and policy makers. Nationally, almost 4 percent of adolescents reported having tried or used methamphetamine.

Risky Sexual Behaviors

Engagement in sexual behavior is another high-risk behavior for youth because of the potential physical (e.g., STDs or sexually transmitted diseases) and socioemotional risks they present. Youth may or may not be ready for the social and emotional implications of sexual activity, and many sexually active youth do not use safe sexual practices. Approximately 47 percent of youth nationwide reported having engaged in sexual intercourse, and 6 percent had their first encounter at or before the age of 13.

Among those who reported currently engaging in sex (i.e., 33 percent of youth who had sex in the past three months prior to the survey), only 60 percent reported that they or their partner used a condom during their last intercourse and only 18 percent reported using alternative methods of birth control. Unprotected sex exacerbates risks because of the potential for developing STDs and the potential for unwanted pregnancy. Approximately half of the 19 million new STD cases diagnosed per year are youth ages 15-19.

Teen pregnancy is both a possible effect of risky behaviors as well as a risk factor in itself. Most teen pregnancies (four out of five) are unintended. This high rate is worrisome

because unintended pregnancies have increased risks for both the mother and the child. For example, girls and women who don't intend to get pregnant might not be taking the appropriate care needed for optimal pregnancy health (e.g., taking folic acid, avoiding alcohol and drugs). Close to 60 percent of teen pregnancies result in births, 26 percent in abortions, and about 14 percent in miscarriages.

Teen pregnancy has been linked to higher rates of school drop out, as well as other socioemotional risks. Each year, 750,000 girls and young women ages 15-19 get pregnant in the U.S. There has been a slight decline in teen pregnancy rates in the last few years, which some scholars attribute to better use of contraception and more teens waiting longer before engaging in sexual activity. Nonetheless, this rate remains the highest among countries with developed economies. For example, teenage pregnancy rates in the United States are still twice as high as in Canada and Sweden.

Behaviors Related to Obesity and Unhealthy Dieting

In recent years, the rate of obesity in the U.S. has reached epidemic levels. Nationally, 13 percent of adolescents are considered obese and an additional 34.5 percent of youth ages 12-19 are overweight. For this reason, many professionals have started to consider behaviors leading to being overweight and obesity as risky. While the U.S. Department of Health recommends that those ages 6 to 17 engage in 60 minutes of physical activity daily, only three out of 10 high school students reported having done so for each of the seven days prior to when they were surveyed. Approximately 14 percent reported that they had not engaged in at least 60 minutes of physical activity on any of those seven days prior to the survey.

Although an increasing number of youth are overweight or obese, a large number of youth also are engaging in unhealthy dietary behaviors to lose weight. Among youth, 5 percent reported having taken diet pills, powders, or liquids without their doctor's advice to lose weight or keep their weight down; 12 percent had not eaten for 24 or more hours; and 4 percent had purposely vomited or taken laxatives.

Relationship Between Adolescence and High-Risk Behaviors

Adolescence is a time of rapid change. In a span of just a few years, teens transition dramatically in almost all realms of their lives. Physically, they grow in leaps and bounds and start to look like mature adults. Cognitively, their thinking becomes more sophisticated. Socially, they renegotiate relationships and develop the capacity to form deep, intimate relationships with others. At the same time, the roles that they occupy in society also change. Partly because teens start to look more mature, people surrounding them sometimes begin to treat them like adults — giving them mature responsibilities and adult expectations.

Although significant development occurs during the teen years, full maturity is by no means complete. Studies show that neurological development is not complete until the early 20s. Decision making and future-oriented thinking are not fully developed. Thus, while teens are entering into adult roles and might physically appear to be mature, they tend not to be fully equipped to deal with these new tasks and challenges. For this and various other reasons, the teen years can be an especially stressful and fragile time, making adolescents more susceptible to engaging in risky behaviors and less able to weigh their risks and benefits.

Risk Factors

Scholars have identified several factors that predispose youth to risky behaviors. At the individual level, youth who have low self-esteem, negative peer groups, and low school engagement or educational aspirations are more likely to engage in risky behaviors. Familial factors include poor parent-child communication, low parental monitoring (e.g., parents are unaware of the youth's whereabouts), and a lack of family support. Not surprisingly, when parents themselves engage in risky behaviors, teens also are more likely to do so. Extra-familial variables also play a role in the risk behaviors of youth. Youth who experience negative school climate, poor neighborhood quality, low socioeconomic status, and poor (or no) relationships with nonparental adults also are at more risk for negative behaviors.

Helping Strategies for Parents

Researchers suggest that despite the stereotype of adolescence as a period of "storm and stress", teens actually tend to maintain close relationships with their families during these years. For many, what actually happens during adolescence is that relationships are renegotiated, rather than broken. This means that while changes occur in the relationship, most parents and teens continue to maintain a close relationship during these years. This renegotiation and transition in the parent-child relationship is only natural as the teen is growing up and having an increased capacity for reasoning, self-discipline, and independence. Thus, teens naturally seek more independence and freedom to do things on their own.

As parents start to experience this renegotiation, it is important to remember that the most important relationship in teens' lives is the relationship they have with their parents. And even if conflict and resistance arise when parents show concern or try to discipline their teens, this is all part of the natural progression of relationships as their children grow.

Here are several strategies that parents might find helpful:

- **Monitor.** Even though teens might show a lot of independence and responsibility, it is still important for parents to monitor their children. This means that parents should make an effort to keep track of their children's whereabouts, including the types of activities they engage in, where they are, who their friends are, and how they are doing in school. To the best that they can, parents should try to get to know the significant people in their children's lives such as friends, boyfriends and girlfriends, teachers, coaches, and others.

Parental monitoring is linked to various measures of well-being for children and youth. Teens that are monitored are more likely to stay away from risky behaviors and are more likely to do better in school. Parents should clearly communicate their expectation to be kept abreast of their child's whereabouts, although they can probably negotiate and discuss how this monitoring can actually take place. For example, teens might not want their parents calling them on their cell phones when they are out with their friends but they might be more willing to periodically call their parents to let them know where they are and that they are safe, or check in with their parents via text messaging.

- **Clearly communicate expectations.** Families differ in the values that they hold (e.g., different religious beliefs) and in their expectations for their children (e.g., to do chores or not). As teens cannot read their

parents' minds, it is important that parents clearly communicate their expectations in terms of behaviors and standards. Parents also need to be clear about what expectations are negotiable and what are non-negotiable. For example, a parent might decide that the amount of chores might be negotiable but that staying abreast of where their children go after school is non-negotiable. They need to communicate these expectations to their children and particularly emphasize the non-negotiable rules within the family.

- **Focus on what is important.** Adolescence is a time of identity seeking and experimentation of different roles. This can be irritating and bewildering to parents. But as painful as it may be to watch, the teenage years is a time when youth are trying on different personas. Parents should give their child room to experiment within limits. Parents should identify and communicate what is negotiable (e.g., trying on different "looks") and non-negotiable (e.g., experimenting with substances). Parents should refrain from making a big fuss about issues that are minor, but still be clear and firm about the limits within which they would allow their teens to operate. Parents can save their concern and action for safety. Safety is a non-negotiable issue. Safety rules need to be stated clearly and enforced consistently. *Example: Drinking is not acceptable. If you have a party here, no beer, wine, or hard liquor is allowed, and an adult must be present at any party you attend.*
- **Listen to your teen.** The most important thing parents can do for their adolescents is to **listen** to them. Parents must recognize and respect the value of what they say. Too often parents dismiss or underestimate the significance of the pressure their children feel and the problems they face. Listening to teens and valuing their ideas promotes effective communication. Listening to a teen does not mean giving advice and attempting to correct or control the situation. Sometimes, all a teen needs is for a parent to listen and to know that the parent is there for him or her.
- **Act on teachable moments.** Talking with teens does not always have to happen in planned one-on-one serious talks. Teachable moments can emerge at various times of the day, often in the context of doing shared tasks or engaging in mundane activities like cooking, driving home, or eating dinner. Issues such as death, sexual behavior, or substance abuse can come up anytime. Take advantage of these windows of opportunity, even if they are only 30 seconds long. Parents who are aware and sense that youth need to talk will look for these teachable moments. They are more important over the long run than long lectures.
- **Be willing to be unpopular.** Parents need to accept that there will be times when adolescents will disagree with them and possibly even act as if they have stopped liking them. It is essential to remember that parenting, not being a buddy, is a parent's primary role. Research suggests that conflicts and arguments do not necessarily equate to negative relationships. The relationship can still be generally close and positive if the individuals engage in arguments and disagreements in ways that are respectful and they are still able to communicate without the goal being simply to win.
- **Be respectful.** Parents get offended when children treat them discourteously. But they need to be careful that they do not do the same to them. *Example: Parents*

would be very offended if their teen used offensive and hurtful language. Parents should also make sure that they are not verbally assaulting their teens.

- **Help teens learn from experience.** No matter how hard parents try to protect their teens from risky behaviors, they cannot watch their teens 24 hours a day or protect them from every risk. Should negative consequences arise, parents can try to use those situations to help their children learn from the experience. They can reflect on what went wrong and how to avoid this in the future. Sometimes, dealing with the consequences of their own actions inspires sensible behavior more effectively than any lecture or discussion.
- **Encourage participation in positive activities.** One effective way of discouraging negative behaviors is to encourage participation in positive activities. There are many enjoyable activities teens can be involved in that encourage the development of various competencies. For instance, finding volunteer opportunities and developing a supportive network of family and friends will help buffer high-risk behaviors.
- **Help youth make healthy decisions.** Parents cannot be there all the time to help their children make healthy choices; thus, it is important to equip teens with the skills needed to make decisions on their own. An important skill in decision making is assessing benefits and costs. In helping youth do this, parents should be honest in helping teens examine the benefits **and** the costs of various behaviors. For instance, in talking to teens about smoking, parents should be honest about both sides. Positive consequences might be that some people find it enjoyable or even “cool”. Negative consequences include adverse health conditions, the financial cost, and the fact that smoking can cause unpleasant odors. Similarly, in talking about engaging in sexual behaviors, teens might consider the benefits (e.g., they feel close to someone and want to take the next step), but also consider the risks (e.g., STDs, emotional consequences).

Conclusion

Adolescence is a unique period of the life span. It is full of changes and challenges, but also of growth and opportunities. Adolescents are particularly susceptible to high-risk behaviors so parents and other concerned adults need to support youth as they go through this period.

The process surrounding high-risk behaviors can be complex. Often it is not enough just to tell a child to say “no” to engaging in these behaviors. Risk-behavior prevention must cover a wide range of issues that adolescents face to be most effective. Parents and community organizations must address issues such as family violence, poverty, psychiatric illness, poor interpersonal skills, learning deficits, and the dysfunctional development that might be associated with such behaviors. Parents must clearly express their expectations. They also must help equip youth to assess risks, to be assertive, and to have the self-esteem and forbearance to withstand external pressures that might push them toward behaviors that lead to negative outcomes.

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**Index: Families
Adolescence and Youth**
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