



Important Risk and Protective Factors Affecting Adolescent Sexual Behavior

PROTECTIVE FACTORS	RISK FACTORS
COMMUNITY	
High percent foreign born	Greater community social disorganization (high rates of violence, substance abuse, and hunger)
FAMILY	
Live with two biological parents Higher level of parental education High quality of family interactions & connectedness Sufficient parental supervision and monitoring Parental disapproval of premarital sex or teen sex Parental acceptance and support of contraceptive use *Parent/child communication about sex and contraception (greater factor for girls than boys)	Family disruption such as divorce or change to single parent household Household substance abuse Physical abuse or general maltreatment Mother's early age at first birth Older sibling's early sexual behavior and early age at first birth
PEERS	
*Positive peer norms or support for condom or contraceptive use *Peer use of condoms	Older age of peer group and close friends Peers' substance use and deviant behavior *Peers' pro-childbearing attitudes or behavior *Peers' permissive values about sex *Sexually active peers (or perception thereof)
PARTNER	
Partner support for condom and contraceptive use	Having a romantic or sexual partner who is older (greater factor for girls than for boys)
TEEN	
Connectedness to school/good school performance High educational aspirations and plans for the future Having a religious affiliation and/or frequent religious attendance Involvement in sports (factor for girls only) Higher level of cognitive development Greater internal locus of control *Belief in male responsibility for pregnancy prevention *Belief that condoms do not reduce sexual pleasure *Positive attitudes towards condoms & contraception *Valuing partner appreciation of condom use *Greater self-efficacy to demand condom use *Motivation to use condoms & contraception *Intention to use condoms *Perceived negative consequences of pregnancy *Taking a virginity pledge *Feelings of guilt about possibly having sex *Motivation to avoid pregnancy, HIV, & STD *Older age of first voluntary sex *Discussing pregnancy & STD prevention with partner *Previous effective use of condoms or contraception	Being behind in school or having school problems Being Latino or African American Older age of physical maturity or menarche Alcohol or drug use Physical fighting, carrying weapons, being part of a gang Other problem behaviors or delinquency Working for pay more than 20 hours per week Thoughts of suicide Dating more frequently Same-sex attraction or behavior Being married History of being sexually abused or coerced *Permissive attitudes toward premarital sex *Perceiving more personal & social benefits (than costs) of having sex *Greater frequency of sex *Being in a new sexual relationship *Greater number of sexual partners *Previous pregnancy or impregnation *History of recent STD

* Factors that are the most amenable to change by pregnancy & STD prevention programs.

Please Note:

1. Each individual risk or protective factor on this list impacts *one or more* of the following behaviors or outcomes:
 - initiation of sex
 - frequency of sex
 - number of sexual partners
 - condom or other contraceptive use
 - pregnancy
 - childbearing
 - STD transmission
2. The risk and protective factors in this list were shown to have been present *before* the occurrence of the behaviors and outcomes listed above. Often, but not always, the risk and protective factors on the list *cause* one or more of the behaviors. Common sense can tell us which factors are causal (such as a permissive attitude toward premarital sex), and which are merely associated with the behaviors (such as mother's early age at first birth). The report from which this list was developed analyzed hundreds of rigorous research studies on risk and protective factors.
3. For teen pregnancy prevention programs and other interventions, it is best to focus on risk and protective factors that meet both of these two criteria:
 - They have a significant causal impact on behaviors associated with pregnancy and STD
 - They can be markedly changed by interventions
4. It is most important to focus on the individual, "teen"-level factors.