We all want children and youth to grow up safe and healthy. However, navigating the safe transition through the teen years to adulthood can be challenging—both for teenagers and their parents. During adolescence, teens develop their own identities by trying new behaviors and taking risks. Indeed, risk-taking is an important tool for asserting independence and defining and developing personalities. Parents play a critical role in helping their children engage in healthy risk-taking (i.e., playing sports, making new friends, volunteering) and avoid negative, unhealthy risk-taking (i.e., substance use and abuse, sexual activity, violence). Unfortunately, recent data show that at least 40 percent of North Carolina’s high school students engage in unhealthy risk behaviors and that parents’ often underestimate the likelihood that their own children are taking these risks.

Recent North Carolina surveys reveal a startling disconnect between what parents assume their teens are doing, and what their teens report they are doing when it comes to substance use and sexual behavior. Data show that most parents (76 percent) do not think their high school age children smoke or have sex. In contrast, surveys of teens reveal that many of them engage in these and other risky behaviors. When parents underestimate the likelihood that their teen is engaging in these types of behaviors, they are less likely to take effective action to prevent such behaviors or to help their teens make better decisions. Indeed, despite what many parents may think, teenagers’ decisions about risky behaviors are heavily influenced by their parents, and many concrete actions by parents can help protect their teens and positively influence teen decision making.

**7 Research-Based Strategies for Reducing Teen Risk Behaviors**

- **Eat Meals Together**
- **Give Voice to Values**
- **Lead By Example**
- **Set and Enforce Rules**
- **Monitor and Supervise Teens**
- **Incorporate Religion/Spirituality Into Family Life**
- **Involving Others in the Lives of Youth**

**WHAT TEENS DO, WHAT PARENTS ASSUME AND WHAT PARENTS CAN DO**

***Common Teenage Risk Behaviors (2005)***

<table>
<thead>
<tr>
<th>Behavior</th>
<th>Ever Used</th>
<th>Past 30 Days</th>
<th>Past 3 Months</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cigarette Use</td>
<td>50%</td>
<td>40%</td>
<td>30%</td>
</tr>
<tr>
<td>Marijuana Use</td>
<td>40%</td>
<td>30%</td>
<td>20%</td>
</tr>
<tr>
<td>Sexually Active</td>
<td>60%</td>
<td>50%</td>
<td>40%</td>
</tr>
<tr>
<td>Current Smoker</td>
<td>20%</td>
<td>15%</td>
<td>10%</td>
</tr>
<tr>
<td>Drunk Alcohol</td>
<td>30%</td>
<td>25%</td>
<td>20%</td>
</tr>
<tr>
<td>Currently Sexually Active</td>
<td>40%</td>
<td>30%</td>
<td>20%</td>
</tr>
</tbody>
</table>

*Data sources: Lifetime cigarette use comes from the 2003 N.C. Youth Tobacco Survey. All other data are from the 2005 N.C. Youth Risk Behavior Survey.*

Despite what many parents may think, teenagers’ decisions about risky behaviors are heavily influenced by their parents and many concrete actions by parents can help protect their teens and positively influence teen decision making.

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1. Parent survey data come from the N.C. Child Health Assessment and Monitoring Program survey. The adult most knowledgeable about the health of the child is asked to answer all survey questions. Usually, but not always, the respondent is a parent.

2. Data on youth in this report come from two surveys of high school students, the Youth Risk Behavior Survey and the North Carolina Youth Tobacco Survey. These surveys are administered in schools so they do not reach out-of-school youth.
The Disconnect Between Parents and Teens

The majority of North Carolina parents of high school students report talking to their children once a month or more about the dangers of tobacco use (84 percent), and most think their teens are following their advice. Fewer than 20 percent of parents think his or her child has ever smoked. However, more than 50 percent of high school students in North Carolina have smoked at least one cigarette, with 18 percent smoking their first cigarette before age 13.

Twenty-five percent of students report they are current smokers and 11 percent report being frequent smokers. Of those students who report current smoking, more than 50 percent have tried unsuccessfully to quit smoking in the past 12 months. Parents are even more likely to have ever talked to their children about what they expect their child to do—or not to do—when it comes to sex (97 percent) and about the chance of getting HIV/STDs (89 percent). Although an overwhelming majority of parents do not think their high-school-age children are sexually active (88 percent), the majority of high school students have had sex (51 percent) and many are currently sexually active (37 percent). Furthermore, 8 percent of students first had sex before age 13. Seventeen percent report having had four or more sexual partners in their lifetimes. Many teenagers do seem to be paying attention to the risk of HIV/STDs; 63 percent of sexually active students report using a condom the last time they had sex.

Although there are no data for North Carolina regarding the percentage of parents who talk to their children about alcohol and marijuana use or the percentage who think their high school student drinks alcohol or smokes marijuana, the results would likely be similar. It is probable that most parents would report talking to their children about the risks and most would assume their children follow their advice.

National data reveal that parents underestimate the availability of alcohol and drugs among youth; 80 percent of parents do not think alcohol and marijuana are usually available at parties their teens attend; however, 50 percent of teenagers report attending parties where one or both are available. Such availability contributes to alcohol and marijuana being widely used illegal substances during the high school years.

Data in North Carolina show that one-in-five high school students had their first alcoholic beverage before age 13; 42 percent report having had at least one alcoholic drink in the past 30 days. Additionally, 23 percent of high school students report binge drinking (consuming five or more drinks within a couple of hours) in the past 30 days. The numbers for marijuana use are just slightly lower than cigarette use with 40 percent of high school students reporting having used marijuana one or more times and 21 percent reporting use in the past 30 days. For other illicit drugs (inhalants, cocaine, methamphetamines), high school students report significantly lower rates. At least 12 percent of teens report ever having used some other illegal substance.

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\[\text{PAGE 2}\]

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\[\text{iv}\] Current smokers are those reporting having one or more cigarettes in the past 30 days. Frequent smokers are those reporting smoking on 20 or more of the past 30 days.

\[\text{v}\] Currently sexually active teens are those students reporting one or more sexual partners in the past three months.

\[\text{vi}\] More information about other drug use is available from the North Carolina Youth Risk Behavior Survey, online at: http://www.nchealthyschools.org/data/yrbs/.
For all of these indicators of teenage risk behavior, the younger the high school student, the less likely they are to report the behavior. Students 15 or younger are significantly less likely than their 16- and 17-year-old peers to have used cigarettes or alcohol in the past 30 days, to have ever used marijuana and to have ever had sex or to be currently sexually active. For tobacco, alcohol and marijuana, the differences by age increase steadily over four years (with 31 percent of 9th graders reporting at least one of these risk behaviors compared to 45 percent of 12th graders). In contrast, sexual behavior increases dramatically from age 15 to ages 16 and 17. Students 16 or older are more than one-and-a-half times more likely to have ever had sex and more than twice as likely to have had four or more sexual partners as their peers 15 or younger (36 percent vs. 60 percent and 9 percent vs. 22 percent, respectively).

Black and Hispanic high school students are significantly less likely than their white peers to have smoked in past 30 days, and black students are less likely than white students to drink. However, black students are more likely than their white and Hispanic peers to have ever had sex. There are no statistically significant differences in marijuana use by race/ethnicity.

**Variation By Age and Race**

<table>
<thead>
<tr>
<th>Behavior</th>
<th>15 or Younger</th>
<th>16 or 17</th>
</tr>
</thead>
<tbody>
<tr>
<td>Smoked Cigarettes in Past 30 Days</td>
<td>50%</td>
<td>45%</td>
</tr>
<tr>
<td>Drank Alcohol in Past 30 Days</td>
<td>30%</td>
<td>25%</td>
</tr>
<tr>
<td>Ever Used Marijuana</td>
<td>25%</td>
<td>15%</td>
</tr>
<tr>
<td>Had Sex in Past 3 Months</td>
<td>20%</td>
<td>10%</td>
</tr>
</tbody>
</table>

Data Sources: 2005 N.C. Youth Risk Behavior Survey

**Bridging the Gap**

There is a clear disconnect between the behaviors that parents want their children to avoid and the actions of children themselves. Survey data show that high school students are engaging in risky behaviors at rates much higher than parents think. So how can parents, who report they are already talking to their teens, help their teens make better decisions when it comes to risky behaviors?

The most effective place to curb teenage substance abuse and sexual activity is the home, and parents are the most effective means. Parents have the tools and opportunities to shape children’s home environments and family experiences which, in turn, heavily influence their decisions when it comes to substance use and sexual activity. Parents need to understand that substance abuse and sexual activity are prevalent among today’s youth, that their children are at risk and that they themselves are the best means of preventing such behaviors. Parents, and other adults who play significant roles in the lives of youth, can take action to help reduce the likelihood that their teenager will engage in such behaviors.

Parents and others can have a tremendous positive impact on the decisions and behaviors of their adolescents; the practical, research-based tips presented here have all been shown to help protect children and youth from making poor decisions about substance use and sexual behavior.

**The most effective place to curb teenage substance abuse and sexual activity is the home and parents are the most effective means.**

PAGE 3
One way to protect children and youth from engaging in risky behaviors is to eat dinner (or another meal) together as a family most days. Youth whose families eat dinner together five or more nights a week are much less likely to be substance users or to be sexually active. Often as children age, quality time between parents and children decreases as youth spend more time outside the home with school, athletics and other extracurricular activities. It can be difficult for families with teenagers to find ways to spend time together, but teenagers still need that quality family time. Eating meals together is a way for parents and teens to spend time together as a family.

Meal time is often the time when parents and teens are able to connect and share information, a time when parents can gain valuable information about what their teenagers are doing and who they are spending time with. Although it may not seem to parents like the right time to discuss substance abuse and sex, a national survey of teens asking what they wished they could "honestly discuss with [their parents] at dinner," found that 42 percent said dating and 30 percent said substance abuse. Parents should take advantage of the opportunities that meals present to talk to their children about how to make healthy decisions about risky behaviors and keep the lines of communication open.

Parents often talk to teens about the first two, however, it is rarer for parents to have open, honest conversations with their teens about the morals and values behind their advice. Parents need to share not only their disapproval and the consequences of risky behavior but also their own values behind their disapproval. Doing so helps children and youth develop their own morals and values around such behaviors. Teens who have strong moral beliefs against substance abuse and sexual behavior are much less likely to engage in such behaviors than their peers. This means that when talking about sex, parents should not shy away from talking about love, relationships, emotions and the value of abstinence. Religious and cultural beliefs also play an important part in such conversations.

Additionally, parents should not let their own reluctance, or that of their teens, prevent such conversations from occurring. One way to spur such conversations is for parents to watch television with their teens. Many programs watched by high school students touch on substance abuse and sexual behavior. Watching together can provide the impetus to get such conversations going. Although teens and adults can be uncomfortable during such conversations, they are essential to protect teenagers from making poor decisions. Across all risk behaviors, teens report wishing they could have open, honest conversations with their parents; those who report such communication are less likely to engage in risk behaviors. Starting when children are young, having age-appropriate conversations about substance use and sexual behavior are essential to establishing open lines of communication during the teenage years.
3. Lead By Example

Although talking to children is important, if the talk is not backed up by behavior, it is unlikely that children will listen. Children often imitate parents’ health behaviors, both good and bad. Youth who have parents who smoke, do drugs or drink heavily are more likely to do so themselves.12 Parents must provide a good example for their children when it comes to substance use.

Parents should think about what their own actions are teaching their children. Parents who use tobacco or alcohol (or drugs) to relieve stress are teaching their children that using substances in this way is acceptable. For example, when parents come home from work and have a drink to unwind and say, “I’ve had such a hard day; I need a drink,” this implies that alcohol is an acceptable behavior-modifying substance. Excessive drinking at parties and other gatherings in front of children and teenagers teaches them that doing so is expected behavior at parties. Parents who leave cigarettes and alcohol (or drugs and drug paraphernalia) around the house are teaching their teenagers that it is okay for them to have access to these substances. One way to prevent children from becoming substance abusers is to not teach them such behaviors at home.

In addition to avoiding certain behaviors, parents should model an array of mentally and physically healthy lifestyle options. Families can exercise or prepare nutritious meals together. Parents can read the newspaper, talk about current events, keep up with hobbies and be active in the community. Leading by example includes exposing teenagers to healthy ways to relax and have fun.

4. Set and Enforce Rules

Parents who do not want their teenagers engaging in substance use and sexual behavior should lay out fair rules and expectations about such behaviors and enforce them. Parental disapproval expressed through conversations should be backed up by rules and expectations that reinforce their disapproval.

Rules should be consistent with the values expressed in conversations and the behaviors adults model at home.

Only 23 percent of parents explicitly prohibit their children from drinking alcohol before age 21; teens who say their parents would strongly disapprove of their having alcohol every day drink at one-third the rate of children whose parents think it is acceptable (15 percent vs. 41 percent).13 Rules about behaviors are concrete ways of exhibiting what parents do and do not think are acceptable behaviors. Rules help to reinforce messages about avoiding risky behaviors.

Setting and enforcing rules about behaviors that teens often hide from their parents can be quite difficult. However, there are a number of behaviors associated with higher levels of risk behaviors that parents can easily monitor. Teenagers who see many R-rated movies in a month are more likely to be substance users as are those who see two or fewer.14 Television exposure to substance use has also been shown to increase the likelihood that teenagers will engage in such behaviors.15 A recent study shows that teens who listen to music with sexually degrading lyrics are more likely to have sex.16 Setting rules about what types of media youth can use (and how often) are ways to decrease their risk of substance abuse and sexual activity.

Teenagers who spend more than ten hours a week with a boyfriend/girlfriend are more likely to smoke, drink and use drugs.17 Additionally, teenagers who date someone two or more years older are more likely to be substance users and sexually active.18 Setting rules that young teens may not go on individual dates but can go on group dates, limiting the time spent with a significant other or limiting the age difference of the person with whom they are involved are examples of fair and enforceable rules that can help protect teenagers.

Providing sufficient supervision and guidance while also encouraging autonomy for teenagers is a delicate balancing act. Research shows that overly controlling, strict parenting—or overly permissive parenting—actually increases the risk of teen substance abuse and sexual activity.19 Keeping the lines of communication open will help parents navigate these tricky waters.
Parents can lower the likelihood that their teen will engage in risky behaviors by knowing where their teenager is, who they are with and what they are doing. It is important for parents to spend time getting to know their children’s friends and, if possible, their children’s friends’ parents. Monitoring who teens spend time with is important because teens who report that their friends are substance users or sexually active are more likely to engage in such behaviors themselves. Parents who are very familiar with their teenagers’ schedules and peers are more likely to be able to prevent risky situations.20

Supervising teens in the home—the television shows they watch, the websites they visit, the friends they call—is also important. Monitoring what teens watch allows parents to ensure children are watching age-appropriate shows and can set the stage for conversations about substance use and sexual behavior if such acts are part of the television show. Parents should also provide supervision when teens have friends over. One-third of teens report attending a party where alcohol and drugs were being used while a parent was at home.21 Whether a few friends or a larger group are visiting, parental supervision, such as popping into the area of the house teens are in to say hello, helps reduce the likelihood of such behaviors.

In recent years, the Internet has exploded as a place for teens to spend time sharing information about themselves and chatting with others. Parents need to familiarize themselves with the ways their teenagers use the Internet. Parents may be surprised at the type of personal information teens often share, such as: home address, cell phone numbers, after-school activities and, occasionally, information about their substance use or sexual activity.

Monitoring not only how your teenager uses the Internet but also the type of information they share is an important step to keeping teens safe.23

Keeping tabs on the types of websites teenagers use and with whom they chat (both online and on the telephone) may seem invasive to both parents and youth, but finding a way to do so without being too overbearing can help parents keep tabs on their teenagers social networks.

Parents can lower the likelihood that their teen will engage in risky behaviors by knowing where their teenager is, who they are with and what they are doing.

6. Incorporate Religion/Spirituality Into Family Life

Youth who think of themselves as strongly religious or spiritual or who attend religious services frequently are less likely to engage in risky behaviors. Religion has been repeatedly shown to be a protective factor for teenagers against substance use and being sexually active.24 It does not seem to matter how one interacts with religion—through conventional formal religious practices or deeply felt personal beliefs. Families can incorporate religion or spirituality into their family life in many ways, such as saying prayers before meals, sharing religious stories or celebrating religious holidays. Incorporating such rituals into family life starting as early as possible helps to ensure youth have the kind of religious foundation which can help prevent risky behaviors during adolescence.
7. Involve Others in the Lives of Youth

Family members, neighbors and other caring adults can play an important role in reducing the chance that teens will engage in risky behaviors. Having many knowledgeable and caring adults involved in the lives of teenagers improves the odds that a teen has an adult to turn to with difficult or uncomfortable questions. Positive role models outside the family help reinforce messages teens get from their parents. Neighborhoods and communities that provide such role models and hold high expectations for their youth protect children from engaging in risky behaviors.

It’s All About Having Strong, Supportive, Loving Families

These seven strategies for what parents can do to help protect youth against making poor decisions about substance abuse and sexual behavior all have to do with promoting family interactions to ensure strong, caring environments for teenagers. Research overwhelmingly shows that being a part of a close, loving family is the best way to protect youth can have against engaging in risky behaviors. Being caring and supportive early and often in life and continuing to do so as children grow helps them develop into young adults who are happy and confident enough to make good decisions about their health and well-being.

Providing for children and making sure their needs are met can be easier with young children whose needs are much more evident. However, parents must continue to be “hands on” as their children turn into teenagers and young adults. Even as teens start to pull away and assert their independence, parents must continue to stay involved in their lives, while making age-appropriate adjustments in parenting. The types of conversations, ways of supervising, and rules that are right for young children are not the same as those for older youth. However, many of the ways parents can protect their youth do not change: providing healthy role models, setting fair rules, incorporating religion into family life and eating meals as a family are beneficial to children of all ages. In most cases, this does not require enormous changes to family life. Indeed, making some adjustments so that teenagers continue to feel close to their families as they grow older is the best way to protect teens from making poor decisions about substance abuse and sexual behaviors.

Data Sources

Parent survey information comes from the N.C. Child Health Assessment and Monitoring Program (CHAMP) Survey, conducted in 2005. CHAMP is a North Carolina survey developed to measure the health characteristics of children, ages 0 to 17. The adult most knowledgeable about the health of the child is asked to answer all survey questions. Usually, but not always, the respondent is a parent. Responses used in this paper are limited to responses regarding teenagers in high school, with an upper age limit of 17. The sample included approximately 1,000 respondents.

More information about CHAMP is available online at: http://www.schs.state.nc.us/SCHS/champ/index.html.

High school student survey information comes from two sources (both of which are administered in schools and, therefore, do not reach out-of-school youth):

- Data about lifetime cigarette use comes from the N.C. Youth Tobacco Survey (NC YTS), 2005. The NC YTS was completed by 3,140 public high school students across the state in 2005. The age range of students is from 11- to 18-years-old, with 94 percent of respondents in the 14- to 17-year-old range. More information on the NC YTS is available online at: http://www.communityhealth.dhhs.state.nc.us/tobacco.htm.
- All other high school student data come from the N.C. Youth Risk Behavior Survey (YRBS), 2005. The YRBS reached approximately 4,000 public high school students across the state in 2005. Respondents range from 14- to 19-years-old, with 90 percent of respondents in the 14- to 17-year-old range. More information on the YRBS is available online at: http://www.nchealthyschools.org/data/yrbs/.

It should be noted that parent surveys reached parents of children up to age 17, but did not include parents of 18- or 19-year olds while the youth surveys reached all high school students regardless of age (approximately 10 percent of those sampled in schools were 18 or older).

All risk behaviors discussed increase with age so the parent-youth data do not match up perfectly, however, the results when 18-year-olds are removed are similar to those presented here. For example, the risk behavior with the greatest spread between ninth and twelfth grade is sexual activity, with 36 percent of students 15 or younger having ever had sex; 60 percent of those 16 and 17 have ever had sex; 64 percent of those 18 or older have ever had sex.

Data are only available at the state level.
Additional Resources for Parents

For more information on how to talk to teenagers about substance use and abuse, visit:

- The National Partnership for Drug-Free America, online at: http://www.drugfree.org/Parent/Connecting/. Information is available in English and Spanish.

For more information about how to talk to teenagers about sex, see Parent Power: What Parents Need to Know and Do to Help Prevent Teen Pregnancy from the National Campaign to Prevent Teenage Pregnancy (http://www.teenpregnancy.org/resources/imaging/parentpower/default.asp). Information is available in English and Spanish.


Endnotes

15. Ibid.
20. Ibid.
21. Ibid.
22. Ibid.