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# News

The University of Texas Health Science Center at Dallas  
5323 Harry Hines Boulevard Dallas, Texas 75235 (214)688-3404

CONTACT: Ann Harrell  
Office: 214/688-3404  
Home: 214/369-2695  
Ann Williams  
214/688-3404  
Linda Harris  
214/920-2167

\*\*Cherish the Children: teens "turned on" earlier today.

DALLAS--Today angry moralists blame the increase in teenage sexual activity on "the pill" and complain about increased sexual stimulation in movies, TV advertising and fashions, and "swinging singles" behavior among young people. But a Dallas obstetrician-gynecologist says that neither the development of better birth control methods nor our more permissive society is the major reason for the increasing and earlier sexual activity of adolescents in this country.

Dr. Norman Gant, professor of Obstetrics-Gynecology at The University of Texas Health Science Center at Dallas, says that "taking all the pills in the world won't make a person sexually active. You've got to remember that in order to get a biological system going, you've got to turn it on."

That's where the problem begins: kids are "turning on" earlier today. And too often, there's no one to prepare the new adolescent for the very real physiological and emotional change in his or her body caused by what Gant calls "the most powerful biologic drive in the world."

"If you care for your child, you have to talk to that child," he says. "You have to explain what the young person is going through intellectually and emotionally--if you don't you starve them. You have no other choice."

Today young women in the United States are experiencing their menarche, or first menstrual period, at an earlier age than ever before. The average is now around 12, but the average is even a little younger for blacks. In 1847 in Norway, the first country to survey this information, the average age of menarche was 17. At that time young ladies were expected to finish their schooling and marry soon after. When a similar study was first done in the U.S. in 1900, the average age of beginning menstruation was 15. Usually the teenagers finished school the next year, married and began their families.

When a 12-year-old experiences the beginning of the monthly cycle that will permit her to bear children, she's a long way from finishing her education. She also is not necessarily expected to marry and have babies soon after.

"When the young woman of 1900 picked up her diploma, she had no expectations of becoming a doctor or a lawyer or an accountant--and certainly not a telephone repair-person," says Gant.

Yet today when a young woman's body is capable of reproduction at an earlier average time than ever before, there is a long time gap in both what society perceives as an appropriate time for such behavior and what is medically favorable. Also, the possibilities for further education and job and career plans are open as never before.

Why are our young women developing sexually and reproductively younger and younger?

The answer is nutrition, says Gant.

"We're feeding kids better and it's been established that the advent of menstruation is related to body weight, not body height."

According to studies done at the Harvard School of Epidemiology, when most girls reach an approximate 105 pounds, they experience their menarche.

Also, Gant says that Dr. Paul MacDonald, professor of Obstetrics-Gynecology at UTHSCD and associates have demonstrated how certain androgen, or male hormones, can be converted into estrogen, or female hormones, in fat tissue in the body. This is believed in simplistic terms to "turn on" the brain hormones that initiate puberty.

(over)



Most experts in human growth and development believe that young males are also maturing sexually at an earlier age, but definitive research has not been done.

"Turning kids loose with their new bodies and no emotional preparation or warning is like giving them the keys to a new Ferrari, parking it in the driveway and telling them they can't drive it. Meanwhile, they're seeing how much fun it is to drive a Ferrari in the movies, in pictures in magazines and on TV.

"Sometimes they see that Mom and Dad have separated--and each is off chasing new Ferraris of their own."

However, the physician says, remember that no matter what's going on in our society, the body has to be capable of reproducing to reproduce.

Much of the misunderstanding about the increase in teenage pregnancy comes from looking at the sheer numbers of teens who are pregnant.

"We often forget about the '60's baby boom," says the physician. "Now those women are having children of their own, and so there has been an increase in sheer numbers. But you have to look at the pregnancy rate per thousand to make a true comparison."

The birth rate per thousand, according to statistics, peaked for teenage girls in the early '60s before pills were readily available.

The problems of teen pregnancy are not going to go away, says the physician. Today 40 percent of young women have had intercourse by the time they're 16. The percentage for young men is 60 percent.

"What it means is that anyone who has a teenage daughter can estimate that four out of 10 girls on their street have had sex. Unfortunately, almost all think it's not their daughter."

This is the kind of attitude that leads to ignoring the problems of teenage sexuality, as well as the problems of teenage pregnancy.

"It's difficult taking care of a baby when you're not through being the baby in your family yet," says Gant.

In addition, pregnancies of young teenagers have a high rate of physical problems, such as high blood pressure, and often are associated with such conditions as neurological injuries brain damage and mental retardation in the child. There is also a higher death rate associated with both very young mothers and their babies, and child abuse is too frequently seen in the homes where "children had children" before growing up themselves.

If the parents are not able to confront their children on the sensitive subject of their sexuality, says the physician, someone must be responsible.

"I believe education is the only way. Too many times the homes, the churches and the physicians have all failed. There is one melting pot where young people can be reached, however: the schools."

Gant is a big supporter of the program in parenting education in the Dallas Independent School District. Currently 57 schools, most at the ninth grade level, are offering parenting education to teenagers who have their parents' permission. And 98 percent of the parents in the 24 pilot schools said "yes" when the opportunity was offered, perhaps because school administrators had the foresight to share curriculum packets with parents so they can study along with the students.

The course is for both boys and girls. And that's the way it should be, the physician says. Too often we have been educating young women and leaving the young men out. Boys is our society need to have readily available information, and appropriate counseling as well. In fact, good parenting education should stress that sex is a joint responsibility whether the decision is to become a parent, to be sexually involved without having a child or to refrain from sexual intercourse in a relationship.

Because of his strong convictions about the need to help solve the problems of teenage pregnancy, the medical educator has consented to be the Ob/Gyn consultant to Cherish the Children during the month of March in Dallas. Approximately 35 community agencies, groups and programs are planning special programs for Cherish the Children: Facing the Problems of Teenage Pregnancy, a community emphasis on these problems.

For information about Cherish the Children Speakers' Bureau, call Kaye Spencer at 214/688-2938.

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