



CONNECTICUT

In Fiscal Year 2011¹, the state of Connecticut received:

- Personal Responsibility Education Program funds totaling \$599,877

In Fiscal Year 2011, local entities in Connecticut received:

- Teen Pregnancy Prevention Initiative funds totaling \$900,000
- Personal Responsibility Education Innovative Strategies funds totaling \$832,467

SEXUALITY EDUCATION LAW AND POLICY

Connecticut does not require schools to teach sexuality education, but does require that schools teach human growth and development and disease prevention. Connecticut law also states, “Each local and regional board of education shall offer during the regular school day planned, ongoing and systematic instruction on acquired immune deficiency syndrome, as taught by legally qualified teachers.”²

The Connecticut State Board of Education is charged with developing family life education curriculum guidelines that “shall include, but not be limited to, information on developing a curriculum including family planning, human sexuality, parenting, nutrition and the emotional, physical, psychological, hygienic, economic and social aspects of family life, provided the curriculum guides shall not include information pertaining to abortion as an alternative to family planning.”³ However, Connecticut statute also states that the instruction must be left to the discretion of local or regional boards of education.

Parents or guardians may remove their children from sexuality education and/or STD/HIV education classes with written notification. This is referred to as an “opt-out” policy.

See [Connecticut General Statutes §§ 164-10-16\(b\)–\(f\) and 164-10-19\(a\)–\(b\)](#).

RECENT LEGISLATION

SIECUS is not aware of any recent legislation regarding sexuality education in Connecticut.

YOUTH SEXUAL HEALTH DATA

SIECUS has compiled the following data to provide an overview of adolescent sexual health in Connecticut. The data collected represents the most current information available.

Connecticut Youth Risk Behavior Survey (YRBS) Data⁴

- In 2011, 42% of female high school students and 44% of male high school students in Connecticut reported ever having had sexual intercourse, compared to 46% of female high school students and 49% of male high school students nationwide.
- In 2011, 3% of female high school students and 7% of male high school students in Connecticut reported having had sexual intercourse before age 13, compared to 3% of female high school students and 9% of male high school students nationwide.
- In 2011, 9% of female high school students and 13% of male high school students in Connecticut reported having had four or more lifetime sexual partners, compared to 13% of female high school students and 18% of male high school students nationwide.
- In 2011, 32% of female high school students and 29% of male high school students in Connecticut reported being currently sexually active (defined as having had sexual intercourse in the three months prior to the survey), compared to 34% of female high school students and 33% of male high school students nationwide.
- In 2011, among those high school students who reported being currently sexually active, 53% of females and 68% of males in Connecticut reported having used condoms the last time they had sexual intercourse, compared to 54% of females and 67% of males nationwide.
- In 2011, among those high school students who reported being currently sexually active, 25% of females and 20% of males in Connecticut reported having used birth control pills the last time they had sexual intercourse, compared to 23% of females and 13% of males nationwide.
- In 2011, among those high school students who reported being currently sexually active, 18% of females and 19% of males in Connecticut reported having used alcohol or drugs the last time they had sexual intercourse, compared to 18% of females and 26% of males nationwide.
- In 2011, 91% of high school students in Connecticut reported having been taught about AIDS/HIV in school, compared to 84% of high school students nationwide.

Connecticut Teen Pregnancy, HIV/AIDS, and Sexually Transmitted Disease Data

Teen Pregnancy, Birth, and Abortion

- Connecticut's teen birth rate currently ranks 46th in the United States, with a rate of 18.9 births per 1,000 young women ages 15–19, compared to the national rate of 34.3 births per 1,000.⁵ In 2010, there were a total of 2,305 live births to young women ages 15–19 reported in Connecticut.⁶
- In 2005, Connecticut's teen pregnancy rate ranked 36th in the United States, with a rate of 57 pregnancies per 1,000 young women ages 15–19, compared to the national rate of 70 pregnancies per 1,000.⁷ There were a total of 6,880 pregnancies among young women ages 15–19 reported in Connecticut in 2005.⁸

CONNECTICUT

- In 2005, Connecticut's teen abortion rate ranked fifth in the United States, with a rate of 26 abortions per 1,000 young women ages 15–19, compared to the national rate of 19 abortions per 1,000.⁹

HIV and AIDS

- In 2010, the rate of diagnoses of HIV infection among adolescents aged 13-19 years in Connecticut was 5.6 per 100,000 compared to the national rate of 7.9 per 100,000.¹⁰
- In 2010, the rate of AIDS diagnoses among adolescents 13-19 years in Connecticut was 1.2 per 100,000 compared to the national rate of 1.9 per 100,000.¹¹
- In 2010, the rate of diagnoses of HIV infection among young adults aged 20-24 years in Connecticut was 22.2 per 100,000 compared to the national rate of 36.9 per 100,000.¹²
- In 2010, the rate of AIDS diagnoses among young adults aged 20-24 years in Connecticut was 6.4 per 100,000 compared to the national rate of 10.4 per 100,000.¹³

Sexually Transmitted Diseases

- Connecticut ranks 32nd in the United States for reported cases of chlamydia among young people ages 15–19, with an infection rate of 15.54 cases per 1,000, compared to the national rate of 20.03 cases per 1,000. In 2009, there were a total of 3,947 cases of chlamydia reported among young people ages 15–19 in Connecticut.¹⁴
- Connecticut ranks 29th in the United States for reported cases of gonorrhea among young people ages 15–19, with an infection rate of 2.53 cases per 1,000, compared to the national rate of 4.04 cases per 1,000. In 2009, there were a total of 643 cases of gonorrhea reported among young people ages 15–19 in Connecticut.¹⁵
- Connecticut ranks 13th in the United States for reported cases of primary and secondary syphilis among young people ages 15–19, with an infection rate of 0.02 cases per 1,000, compared to the national rate of 0.05 cases per 1,000. In 2009, there were a total of five cases of syphilis reported among young people ages 15–19.¹⁶

FEDERAL FUNDING FOR SEX EDUCATION, TEEN PREGNANCY PREVENTION, AND ABSTINENCE-ONLY PROGRAMS

President's Teen Pregnancy Prevention Initiative

The President's Teen Pregnancy Prevention Initiative (TPPI) funds medically accurate and age-appropriate programs to reduce teen pregnancy. The U.S. Department of Health and Human Services, Office of Adolescent Health (OAH) administers the grant program, which totaled \$105 million in discretionary funding for Fiscal Year (FY) 2011. TPPI consists of two funding tiers that provide grants to local public and private entities. Tier 1 totals \$75 million and provides funding for the replication of evidence-based programs proven to prevent unintended teen pregnancy and address underlying behavioral risk factors. Tier 2 totals \$25 million and provides funding to develop and test additional models and innovative strategies. A portion of the Tier 2 funds, \$15.2 million, was allocated for research

CONNECTICUT

and demonstration grants to test innovative approaches, while the remaining funding, \$9.8 million, was allocated for grants to support communitywide initiatives. TPPI also dedicates \$4.5 million in funding to conduct evaluations of individual programs.

TPPI Tier 1: Evidence-Based Programs

The TPPI Tier 1 grant program supports the replication of evidence-based programs proven effective through rigorous evaluation to prevent unintended teen pregnancy, underlying behavioral risk factors, or other associated risk factors.

- There are no TPPI Tier 1 grantees in Connecticut.

TPPI Tier 2: Innovative Approaches

The TPPI Tier 2 grant program supports research and demonstration programs in order to develop, replicate, refine, and test additional models and innovative strategies for preventing teenage pregnancy.

- There are no TPPI Tier 2 Innovative Approaches grantees in Connecticut.

TPPI Tier 2: Integrating Services, Programs, and Strategies through Communitywide Initiatives

The TPPI Tier 2 grant program also supports communitywide initiatives to reduce rates of teenage pregnancy and births in communities with the highest rates. The program awards grants to national organizations as well as state- and community-based organizations. Funded national partners provide training and technical assistance to local grantees. The Centers for Disease Control and Prevention (CDC) administer the grant program in partnership with OAH.

- There is one TPPI Tier 2 Communitywide Initiatives grantee in Connecticut, the City of Hartford, which received \$900,000 for FY 2011.

City of Hartford, \$900,000 (FY 2011)

The City of Hartford's Department of Health and Human Services implements the city's TPPI Tier 2 grant, which employs a multi-faceted strategy to provide teen pregnancy-prevention programming and clinical services to young people ages 13–19. The initiative primarily serves African-American and Latino youth from low-income communities. In addition, it works to educate community stakeholders and develop strategies to institutionalize programming and promote sustainability. The Department of Health and Human Services partners with several government agencies and local public and private entities to implement coordinated program services, including the Hartford Action Plan on Infant Health, Hartford Office of Youth Services, Hartford Public Schools system, 10 youth service agencies and six community health clinics, as well as additional private sector partners.¹⁷

Personal Responsibility Education Program

The Personal Responsibility Education Program (PREP) totals \$75 million per year for FYs 2010–2014 and is the first-ever dedicated funding stream for more comprehensive approaches to sexuality education. The U.S. Department of Health and Human Services, Administration for Children and Families (ACF) administers the grant. PREP includes a \$55 million state-grant program, \$10 million to fund local entities through the Personal Responsibility Education Innovative Strategies (PREIS) Program, \$3.5 million for the Tribal PREP Program for tribes and tribal organizations, and \$6.5 million for evaluation, training, and technical assistance. Details on the state-grant program, PREIS, and Tribal PREP are included below.

PREP State-Grant Program

The PREP state-grant program supports evidence-based programs that provide young people with medically accurate and age-appropriate information for the prevention of unintended pregnancy, HIV/AIDS, and other sexually transmitted infections (STIs). The grant program totals \$55 million per year and allocates funding to individual states. The grant does not require states to provide matching funds. Funded programs must discuss abstinence and contraception, and place substantial emphasis on both. Programs must also address at least three of the following adulthood preparation subjects: healthy relationships, positive adolescent development, financial literacy, parent-child communication skills, education and employment skills, and healthy life skills.

- The State of Connecticut Department of Public Health received \$599,877 in federal PREP funds for FY 2011.
- There are three sub-grantees for the Connecticut PREP state-grant program: Planned Parenthood of Southern New England (\$412,527); Connecticut State Department of Education (\$73,890); and the Connecticut Department of Children & Families (\$128,792).¹⁸

The State of Connecticut Department of Public Health uses the state’s PREP funds to provide sexuality education to youth in foster care across the state. The department partners with the State Department of Children and Families to serve youth ages 13–19 who are living in state-run facilities. This includes therapeutic group homes and Preparation for Adult Living facilities as well as youth enrolled in the Transitional Living Assistance Program, the Support Work Employment Training Program, and those who attend state-run residential schools. Programming is provided in a total of 47 facilities. Connecticut PREP uses two curricula to provide programming to youth: *Making Proud Choices!* and *Teen Talk*.¹⁹

Making Proud Choices! is an evidence-based STD-, HIV-, and pregnancy-prevention curriculum designed for use with African-American, Latino, and white adolescents ages 11–13. The curriculum aims to help youth understand the poor reasoning and decision making that can lead to STD/HIV infection and/or unintended pregnancy, as well as to increase their confidence, negotiation skills, and self-efficacy in using condoms. The program consists of eight one-hour sessions and can be implemented in school- or community-based settings. *Making Proud Choices!* includes interactive and skill-building activities that are designed to “increase comfort with practicing condom use, address concerns about negative effects of practicing safer sex, and build skills in condom use and negotiation.”²⁰ An evaluation of the program published in the *Journal of the American Medical Association* showed that program participants reported more consistent condom use and less unprotected sex as well as a higher frequency of condom use than those in the control group.²¹

Teen Talk is an intervention program developed by Planned Parenthood of Southern New England (PPSNE) with an overarching goal to decrease rates of teen pregnancy and STDs, including HIV, among teens aged 13-19. It is designed to provide reproductive health education and facilitate access to reproductive health care in order to delay sexual activity, prevent unplanned pregnancy, and prevent sexually transmitted diseases (STDs) and infections (STIs).²²

Personal Responsibility Education Innovative Strategies (PREIS)

PREIS supports research and demonstration programs to develop, replicate, refine, and test innovative models for preventing unintended teen pregnancy. ACF administers the grant program in collaboration with OAH and provides a total of \$10 million in funding directly to local public and private entities.

- There is one PREIS grantee in Connecticut, The Village for Families & Children, Inc., which received \$832,467 for FY 2011.

The Village for Families & Children, Inc., \$832,467 (FY 2011)

The Village for Families & Children is a private, nonprofit mental health and human services agency that offers “programs and services for all age groups to ensure families and children in Hartford thrive physically and emotionally and become happy and productive citizens.”²³ The agency offers programs and services in three core areas: Placement and Permanency, including adoption, foster care, and family preservation programs; Children’s Behavioral Health; and Family and Community Support.²⁴

The organization uses its PREIS funding to conduct a trial of *FatherWorks*, an intervention designed to reduce the incidence of repeat fatherhood among young men. The trial includes 330 Latino and African-American young men in Hartford and Hartford County, ages 15–24, who have fathered a child with a woman under the age of 21.

FatherWorks “is a comprehensive intervention” that provides participants with the “motivation, opportunities and skills needed to change risk behavior.”²⁵ The program includes parenting and co-parenting education, case-management services, clinical group and individual therapy services, sex education, and vocational and employment opportunities.²⁶ Other services include anger-management education, relationship skills, financial literacy, activities involving participants’ children, and emergency financial assistance.

Tribal Personal Responsibility Education Program (Tribal PREP)

Tribal PREP supports the development and implementation of comprehensive teen pregnancy prevention programs within tribes and tribal communities. Tribal PREP programs target youth ages 10–19 who are in or are aging out of foster care, homeless youth, youth with HIV/AIDS, pregnant and/or parenting youth who are under 21 years of age, and youth who live in areas with high adolescent birth rates. Programs must address at least three of the following adulthood preparation subjects: healthy relationships, positive adolescent development, financial literacy, parent-child communication skills, education and employment skills, and healthy life skills.

- In FY 2011, 16 tribes and tribal organizations from nine states received a total of \$6.5 million.
- There are no Tribal PREP grantees in Connecticut.

Title V State Abstinence Education Grant Program

The Title V State Abstinence Education Grant Program (Title V Abstinence-Only Program) allocates \$50 million per year to states for FYs 2010–2014. ACF administers the grant program. The Title V Abstinence-Only Program requires states to provide three state-raised dollars or the equivalent in services for every four federal dollars received. The state match may be provided in part or in full by local groups. All programs funded by the Title V Abstinence-Only Program must promote abstinence from sexual activity as their exclusive purpose and may provide mentoring, counseling, and adult supervision toward this end. Programs must be medically accurate and age-appropriate and must ensure abstinence is an expected outcome.

- Connecticut chose not to apply for Title V abstinence-only funds for FY 2011.

CONNECTICUT

Connecticut TPPI, PREP, and Title V Abstinence-Only Funding in FY 2011

Grantee	Award	Fiscal Years
Teen Pregnancy Prevention Initiative (TPPI)		
<i>TPPI Tier 2: Communitywide Initiatives</i>		
City of Hartford	\$900,000	2010–2014
TOTAL	\$900,000	
Personal Responsibility Education Program (PREP)		
<i>PREP State-Grant Program</i>		
State of Connecticut Department of Public Health (federal grant)	\$599,877	2011
TOTAL	\$599,877	
<i>Personal Responsibility Education Innovative Strategies</i>		
The Village for Families & Children, Inc.	\$832,467	2010–2014
TOTAL	\$832,467	
GRAND TOTAL		
	\$2,332,344	2011

COMPREHENSIVE APPROACHES TO SEXUALITY EDUCATION

SIECUS is not aware of any examples of model programs, policies, or best practices being implemented in Connecticut public schools that provide a more comprehensive approach to sex education for young people.

We encourage you to submit any updated or additional information on comprehensive approaches to sex education being implemented in Connecticut public schools for inclusion in future publications of the State Profiles. Please visit SIECUS’ “Contact Us” webpage at www.siecus.org to share information. Select “state policy” as the subject heading.

POINTS OF CONTACT

Adolescent Health Contact²⁷

Donna Maselli, RN, MPH
 Nurse Consultant
 Connecticut Department of Public Health
 410 Capitol Avenue
 MS #11 MAT
 Hartford, CT 06106
 Phone: (860) 509-7505

C O N N E C T I C U T

PREP State-Grant Coordinator

Donna Maselli, RN, MPH
Nurse Consultant
Connecticut Department of Public Health
410 Capitol Avenue
MS #11 MAT
Hartford, CT 06106
Phone: (860) 509-7505

ORGANIZATIONS THAT SUPPORT COMPREHENSIVE SEXUALITY EDUCATION

ACLU of Connecticut
Hartford, CT
Phone: (860) 523-9146
www.acluct.org

NARAL Pro-Choice Connecticut
West Hartford, CT
Phone: (860) 523-1227
www.pro-choicect.org

Hartford Gay and Lesbian Health
Collective
Hartford, CT
Phone: (860) 278-4163
www.hglhc.org

Planned Parenthood of Connecticut
New Haven, CT
Phone: (203) 865-5158
www.ppct.org

GLSEN Connecticut
Stamford, CT
Phone: (203) 288-2399
www.glsen.org/connecticut

The Triangle Community Center
Norwalk, CT
Phone: (203) 853-0600
www.ctgay.org

Latino Community Services
Hartford, CT
Phone: (860) 296-6400
www.lcs-ct.org

ORGANIZATIONS THAT OPPOSE COMPREHENSIVE SEXUALITY EDUCATION

Connecticut Right to Life
Waterbury, CT
Phone: (203) 757-5213
www.ct4women.com

Family Institute of Connecticut
Hartford, CT
Phone: (860) 548-0066
www.ctfamily.org

MEDIA OUTLETS**Newspapers in Connecticut**²⁸*Connecticut Post*

Bridgeport, CT

Phone: (203) 333-0161

www.connpost.com*The Day*

New London, CT

Phone: (860) 701-4372

www.theday.com*The Hartford Courant*

Hartford, CT

Phone: (860) 241-6200

www.courant.com*Journal Inquirer*

Manchester, CT

Phone: (860) 646-0500

www.journalinquirer.com*New Haven Register*

New Haven, CT

Phone: (203) 789-5730

www.nhregister.com*The News-Times*

Danbury, CT

Phone: (203) 744-5100

www.newstimes.com*The Norwalk Advocate*

Stamford, CT

Phone: (203) 750-5325

www.norwalkadvocate.com*Norwich Bulletin*

Norwich, CT

Phone: (860) 887-9211

www.norwichbulletin.com*Record-Journal*

Meriden, CT

Phone: (203) 317-2245

www.myrecordjournal.com*Waterbury Republican-American*

Waterbury, CT

Phone: (203) 574-3636 ext. 1443

www.rep-am.com**Political Blogs in Connecticut***Blogs.courant*www.blogs.courant.com*CT Progressive*www.ctprogressive.net*My Left Nutmeg*www.myleftnutmeg.com

¹ This refers to the federal government's fiscal year, which begins on October 1st and ends on September 30th. The fiscal year is designated by the calendar year in which it ends; for example, Fiscal Year 2011 began on October 1, 2010, and ended on September 30, 2011.

² Conn. Gen. Stat. § 164-10-19(b) <http://www.cga.ct.gov/2011/pub/chap164.htm#Sec10-19.htm>.

³ Conn. Gen. Stat. § 164-10-16(c) <http://www.cga.ct.gov/2011/pub/chap164.htm#Sec10-16c.htm>.

⁴ Danice K. Eaton, et. al., "Youth Risk Behavior Surveillance—United States, 2011," *Surveillance Summaries, Morbidity and Mortality Weekly Report*, vol. 61, no. SS-4 (June 8, 2012): accessed June 18, 2012, <http://www.cdc.gov/mmwr/pdf/ss/ss6104.pdf>.

⁵ "Birth rate for U.S. teenagers reach historic lows for all age and ethnic groups," NCHS data brief, no. 89, (Hyattsville, MD: National Center for Health Statistics, 2012), accessed June 27, 2012, <http://www.cdc.gov/nchs/data/databriefs/db89.pdf>, Data table for figure 6.

⁶ Ibid.

⁷ U.S. *Teenage Pregnancies, Births, and Abortions: National and State Trends and Trends by Race and Ethnicity*, (Washington, DC: Guttmacher Institute, January 2010), accessed May 7, 2012, <http://www.guttmacher.org/pubs/USTPtrends.pdf>, Table 3.1.

⁸ Ibid., Table 3.2.

CONNECTICUT

⁹ *U.S. Teenage Pregnancies, Births, and Abortions: National and State Trends and Trends by Race and Ethnicity*, Table 3.1.

¹⁰ Slide 9: “Rates of Diagnoses of HIV Infection among Adolescents Aged 13–19 Years, 2010—46 States and 5 U.S. Dependent Areas,” *HIV Surveillance in Adolescents and Young Adults*, (Atlanta, GA: Centers for Disease Control and Prevention), accessed January 3, 2013, <http://www.cdc.gov/hiv/topics/surveillance/resources/slides/adolescents/index.htm>.

¹¹ Slide 18: “Rates of AIDS Diagnoses among Adolescents Aged 13–19 Years, 2010—United States and 6 U.S. Dependent Areas,” *HIV Surveillance in Adolescents and Young Adults*, (Atlanta, GA: Centers for Disease Control and Prevention), accessed January 3, 2013, <http://www.cdc.gov/hiv/topics/surveillance/resources/slides/adolescents/index.htm>.

¹² Slide 10: “Rates of Diagnoses of HIV Infection among Young Adults Aged 20–24 Years, 2010—46 States and 5 U.S. Dependent Areas,” *HIV Surveillance in Adolescents and Young Adults*, (Atlanta, GA: Centers for Disease Control and Prevention), accessed January 3, 2013, <http://www.cdc.gov/hiv/topics/surveillance/resources/slides/adolescents/index.htm>.

¹³ Slide 19: “Rates of AIDS Diagnoses among Young Adults Aged 20–24 Years, 2010—United States and 6 U.S. Dependent Areas,” *HIV Surveillance in Adolescents and Young Adults*, (Atlanta, GA: Centers for Disease Control and Prevention), accessed January 3, 2013, <http://www.cdc.gov/hiv/topics/surveillance/resources/slides/adolescents/index.htm>.

¹⁴ “Wonder Database: Sexually Transmitted Disease Morbidity for selected STDs by age, race/ethnicity and gender 1996–2009 Results,” (Atlanta, GA: Centers for Disease Control and Prevention, June 2011), accessed December 18, 2012, <http://wonder.cdc.gov>.

¹⁵ Ibid.

¹⁶ Ibid.

¹⁷ “Teenage Pregnancy Prevention: Integrating Services, Programs, and Strategies through Communitywide Initiatives – State- and Community-Based Organizations,” Division of Reproductive Health, Centers for Disease Control and Prevention, March 2, 2011, accessed August 29, 2011, <http://www.cdc.gov/TeenPregnancy/State-Community-Orgs.htm>.

¹⁸ Information provided by Donna Maselli, State Women’s Health Coordinator, Connecticut Department of Public Health, March 14, 2012.

¹⁹ Ibid.

²⁰ *Making Proud Choices!* Evidence-Based Programs, Resource Center for Adolescent Pregnancy Prevention (ReCAPP), ETR Associates, accessed April 15, 2010, <http://www.etr.org/recapp/index.cfm?fuseaction=pages.ebpDetail&PageID=128>.

²¹ Ibid.

²² Information provided by Pierrette Silverman, Vice President for Education and Training, Planned Parenthood of Southern New England, Inc., October 18, 2012.

²³ “FatherWorks Program,” The Village for Family and Children, Inc., accessed September 5, 2011, <http://www.villageforchildren.org/images/stories/PDF/Brochure.pdf>

²⁴ “Welcome to the Village,” The Village for Families & Children, Inc., accessed August 29, 2011, <http://www.villageforchildren.org/>.

²⁵ “Teen Pregnancy Prevention through Responsible Fathering: A Randomized Controlled Trial of the *FatherWorks* Program,” *Application for Federal Funds SF-424*, FY10 Teenage Pregnancy Prevention: Research and Demonstration Programs (Tier 2) and Personal Responsibility Education Program, The Village for Families & Children, Inc., (June 2010), 1. Information obtained through a Freedom of Information Act request submitted to the U.S. Department of Health and Human Services, Office of Adolescent Health.

²⁶ “Services and Programs Listing,” The Village for Family and Children, Inc., accessed September 5, 2011, <http://www.villageforchildren.org/our-work/all-services-and-programs.html>.

²⁷ The person listed represents the designated personnel in the state responsible for adolescent reproductive health.

²⁸ This section is a list of major newspapers in the state and is by no means exhaustive of local print outlets.