

Connecticut 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."

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."² 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 proposed legislation regarding sexuality education in Connecticut.

Connecticut's Youth: Statistical Information of Note³

- In 2009, 38% of female high school students and 43% of male high school students in Connecticut reported ever having had sexual intercourse compared to 46% of female high school students and 46% of male high school students nationwide.
- In 2009, 3% of female high school students and 6% of male high school students in Connecticut reported having had sexual intercourse before age 13 compared to 3% of female high school students and 8% of male high school students nationwide.
- In 2009, 8% 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 11% of female high school students and 16% of male high school students nationwide.

- In 2009, 30% 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 36% of female high school students and 33% of male high school students nationwide.
- In 2009, among those high school students who reported being currently sexually active, 56% of females and 63% of males in Connecticut reported having used condoms the last time they had sexual intercourse compared to 54% of females and 69% of males nationwide.
- In 2009, among those high school students who reported being currently sexually active, 26% of females and 23% of males in Connecticut reported having used birth control pills the last time they had sexual intercourse compared to 23% of females and 16% of males nationwide.
- In 2009, among those high school students who reported being currently sexually active, 22% of females and 28% of males in Connecticut reported having used alcohol or drugs the last time they had sexual intercourse compared to 17% of females and 26% of males nationwide.
- In 2009, 82% of high school students in Colorado reported having been taught about AIDS/HIV in school compared to 87% of high school students nationwide.

Connecticut Youth Sexual Health Statistics

Teen Pregnancy, Birth, and Abortion

- Connecticut's teen pregnancy rate ranks 36th in the U.S., with a rate of 57 pregnancies per 1,000 young women ages 15–19 compared to the national rate of 70 pregnancies per 1,000.⁴ There were a total of 6,880 pregnancies among young women ages 15–19 reported in 2005, the most recent year for which data is available, in Connecticut.⁵
- Connecticut's teen birth rate ranked 48th in the U.S. in 2005, with a rate of 23.5 births per 1,000 young women ages 15–19 compared to the national rate of 40.5 births per 1,000.⁶ In 2005, there were a total of 2,813 live births reported to young women ages 15–19 in Connecticut.⁷
- In 2006, the U.S. teen birth rate increased for the first time in 15 years by 3% from 40.5 to 41.9 births per 1,000 young women ages 15–19, after having steadily declined between 1991 and 2005.8 Connecticut's teen birth rate also increased between 2005 and 2006, from 23.3 to 23.5 births per 1,000 young women ages 15–19.9
- Connecticut's teen abortion rate ranks 6th in the U.S., with a rate of 20 abortions per 1,000 young women ages 15–19 compared to the national rate of 19 abortions per 1,000. In 2005, there were a total of 2,648 abortions reported among young women ages 15–19 in Connecticut.¹⁰

HIV and AIDS

- Connecticut ranks 25th in cases of HIV infection diagnosed in the U.S. among all age groups. In 2007, there were a total of 259 new cases of HIV infection diagnosed in Connecticut. ¹¹
- Connecticut's AIDS rate ranks 9th in the U.S., with a rate of 15.1 cases per 100,000 population compared to the national rate of 12.5 cases per 100,000.¹²

- Connecticut ranks 21st in number of reported AIDS cases in the U.S. among all age groups. In 2007, there were a total of 528 new AIDS cases reported in Connecticut.¹³
- Connecticut ranks 16th in number of reported AIDS cases in the U.S. among young people ages 13–19. In 2007, there were a total of 10 AIDS cases reported among young people ages 13–19 in Connecticut.¹⁴

Sexually Transmitted Diseases

- Connecticut ranks 30th in reported cases of Chlamydia among young people ages 15–19 in the U.S., with an infection rate of 16.81 cases per 1,000 compared to the national rate of 19.51 cases per 1,000. In 2008, there were a total of 4,220 cases of Chlamydia reported among young people ages 15–19 in Connecticut.¹⁵
- Connecticut ranks 29th in reported cases of gonorrhea among young people ages 15–19 in the U.S., with an infection rate of 2.80 cases per 1,000 compared to the national rate of 4.52 cases per 1,000. In 2008, there were a total of 702 cases of gonorrhea reported among young people ages 15–19 in Connecticut.¹⁶
- Connecticut ranks 31st in reported cases of primary and secondary syphilis among young people ages 15–19 in the U.S., with an infection rate of 0.01 cases per 1,000 compared to the national rate of 0.04 cases per 1,000.¹⁷

Comprehensive Approaches to Sex 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 SIECUS State Profiles. Please visit SIECUS' "Contact Us" webpage at www.siecus.org to share information. Select "state policy" as the subject heading.

Federal Funding for Abstinence-Only-Until-Marriage Programs

A community-based organization in Connecticut received \$599,800 in federal funds for abstinence-only-until-marriage programs in Fiscal Year 2009.¹⁸

Title V Abstinence-Only-Until Marriage Funding

• Connecticut chose not to participate in the Title V abstinence-only-until-marriage program in Fiscal Year 2009. The state was eligible for approximately \$344,944 in funding. Due to the expiration of the grant program on June 30, 2009, three months prior to the end of the federal fiscal year, the state would have received three quarters of the total funding allocated for the full fiscal year.

Community-Based Abstinence Education (CBAE) Funding

• There is one CBAE grantee in Connecticut, the Opportunities Industrialization Center of New Britain, which received \$599,800 in CBAE funding for Fiscal Year 2009.

Adolescent Family Life Act (AFLA) Funding

• There are no AFLA grantees in Connecticut.

Abstinence-Only-Until-Marriage Curricula Used by Grantees

The abstinence-only-until-marriage grantee in Connecticut uses at least one commercially available curriculum:

• Families United to Prevent Teen Pregnancy/Healthy Marriages

To read reviews of abstinence-only-until-marriage curricula commonly used by federal grantees please visit the "Curricula and Speaker Reviews" webpage of SIECUS' Community Action Kit at www.communityactionkit.org.

Federal Funding for Abstinence-Only-Until-Marriage Programs in FY 2009¹⁹

Abstinence-Only-Until-Marriage Grantee	Title V	CBAE (Length of Grant)	AFLA (Length of Grant)
Opportunities Industrialization Center of New Britain www.oicnb.org		\$599,800 (2006–2011)	

Adolescent Health Contact²⁰

Barbara Pickett Maternal and Child Health Unit Connecticut Department of Health 410 Capitol Avenue, MS #11 MAT P.O. Box 340308 Hartford, CT 06106

Phone: (860) 509-8057

www.hglhc.org

Connecticut Organizations that Support Comprehensive Sexuality Education

ACLU of Connecticut

2074 Park Street, Suite L

Hartford, CT 06106

Phone: (860) 523-9146

www.acluct.org

GLSEN Connecticut

P.O. Box 2405

Stamford, CT 06906

Phone: (203) 288-2399

www.glsen.org/connecticut

Hartford Gay and Lesbian Health
Collective
P.O. Box 2094
Hartford, CT 06145
Phone: (860) 278-4163
Latino Community Services
184 Wethersfield Avenue
Hartford, CT 06114
Phone: (860) 296-6400
www.lcs-ct.org

NARAL Pro-Choice Connecticut

P.O. Box 270390

West Hartford, CT 06127 Phone: (860) 523-1227 www.pro-choicect.org

The Triangle Community Center

P.O. Box 4062

Norwalk, CT 06852 Phone: (203) 853-0600

www.ctgay.org

Planned Parenthood of Connecticut

345 Whitney Avenue New Haven, CT 06511 Phone: (203) 865-5158

www.ppct.org

Connecticut Organizations that Oppose Comprehensive Sexuality Education

Connecticut Right to Life

P.O. Box 2343

Waterbury, CT 06722 Phone: (203) 757-5213 www.ct4women.com Family Institute of Connecticut

77 Buckingham Street Hartford, CT 06126 Phone: (860) 548-0066 www.ctfamily.org

Newspapers in Connecticut²¹

Connecticut Post The Day
Newsroom Newsroom

410 State Street47 Eugene O'Neill DriveBridgeport, CT 06604New London, CT 06320Phone: (203) 333-0161Phone: (860) 701-4372www.connpost.comwww.theday.com

The Hartford Courant Journal Inquirer
Newsroom Newsroom

285 Broad Street
Hartford, CT 06115
Phone: (860) 241-6200
www.courant.com

306 Progress Drive
Manchester, CT 06040
Phone: (860) 646-0500
www.journalinquirer.com

New Haven RegisterThe News-TimesNewsroomNewsroom40 Sargent Drive333 Main StreetNew Haven, CT 06511Danbury, CT 06810Phone: (203) 789-5730Phone: (203) 744-5100www.nhregister.comwww.newstimes.com

The Norwalk Advocate Newsroom 75 Tresser Boulevard Stamford, CT 06901 Phone: (203) 750-5325

www.norwalkadvocate.com

Record-Journal
Newsroom
11 Crown Street
Meriden, CT 06450
Phone: (203) 317-2245
www.myrecordjournal.com

Norwich Bulletin
Newsroom
66 Franklin Street
Norwich, CT 06360
Phone: (860) 887-9211
www.norwichbulletin.com

Waterbury Republican-American

Newsroom

389 Meadow Street Waterbury, CT 06702

Phone: (203) 574-3636 ext. 1443

www.rep-am.com

Political Blogs in Connecticut

Blogs.courant www.blogs.courant.com

My Left Nutmeg www.myleftnutmeg.com CT Progressive

www.ctprogressive.net

¹ Conn. Gen. Stat. § 164-10-19(b) http://www.cga.ct.gov/2005/pub/Chap164.htm#Sec10-19.htm

² Conn. Gen. Stat. § 164-10-16(c) < http://www.cga.ct.gov/2005/pub/Chap164.htm#Sec10-16c.htm>

³ Danice K. Eaton, et. al., "Youth Risk Behavior Surveillance—United States, 2009," *Surveillance Summaries, Morbidity and Mortality Weekly Report*, vol. 59, no. SS-5 (4 June 2010): 98–109, accessed 4 June 2010,

http://www.cdc.gov/mmwr/pdf/ss/ss5905.pdf>.

⁴ U.S. Teenage Pregnancies, Births, and Abortions: National and State Trends and Trends by Race and Ethnicity, (Washington, DC: Guttmacher Institute, January 2010), accessed 5 March 2010, http://www.guttmacher.org/pubs/USTPtrends.pdf, Table 3.1. ⁵ Ibid., Table 3.2.

⁶ Joyce A. Martin, et. al, "Births: Final Data for 2006," *National Vital Statistics Reports*, vol. 57, number 7 (Hyattsville, MD: Centers for Disease Control and Prevention, 7 January 2009), accessed 5 March 2010,

http://www.cdc.gov/nchs/data/nvsr/nvsr57/nvsr57 07.pdf>, Table B.

⁷ U.S. Teenage Pregnancies, Births, and Abortions: National and State Trends and Trends by Race and Ethnicity, Table 3.2.

⁸ Martin, et. al, "Births: Final Data for 2006," 4.

⁹ Ibid., Table B.

¹⁰ U.S. Teenage Pregnancies, Births, and Abortions: National and State Trends and Trends by Race and Ethnicity, Table 3.5.

¹¹ "Cases of HIV Infection and AIDS in the United States and Dependent Areas, 2007," HIV/AIDS Surveillance Report, vol. 19, (Atlanta, GA: Centers for Disease Control and Prevention, February 2009), accessed 5 March 2010,

http://www.cdc.gov/hiv/topics/surveillance/resources/reports/2007report/pdf/2007SurveillanceReport.pdf, Table 18.

12 Ibid.; "AIDS Case Rate per 100,000 Population, All Ages, 2007," (Menlo Park, CA: Kaiser Family Foundation), accessed 5

March 2010, http://www.statehealthfacts.org/comparetable.jsp?ind=513&cat=11&sub=120&yr=62&typ=1&sort=a.

13 Ibid., Table 16.

¹⁴ Slide 15: "Reported AIDS Cases among Adolescents 13 to 19 Years of Age, 2007—United States and Dependent Areas," *HIV/AIDS Surveillance in Adolescents and Young Adults (through 2007)*, (Atlanta, GA: Centers for Disease Control and Prevention, May 2009), accessed 25 March 2010, http://www.cdc.gov/hiv/topics/surveillance/resources/slides/adolescents/index.htm. "Wonder Database: Selected STDs by Age, Race/Ethnicity, and Gender, 1996-2008 Results," (Atlanta, GA: Centers for Disease Control and Prevention), 30 June 2009, accessed 5 March 2010, http://wonder.cdc.gov/; see also Table 10:

"Chlamydia: Reported Cases and Rates Per 100,000 Population by Age Group and Sex: United States, 2004–2008," Sexually Transmitted Disease Surveillance 2008, (Atlanta, GA: Centers for Disease Control and Prevention, Division of STD Prevention, November 2009), accessed 5 March 2010, http://www.cdc.gov/std/stats08/surv2008-Complete.pdf>, 95.

¹⁶ Ibid; see also Table 20: "Gonorrhea—Reported Cases and Rates per 100,000 Population by Age Group and Sex: United States, 2004–2008," Sexually Transmitted Disease Surveillance 2008, 106.

¹⁷ Ibid; see also Table 33: "Primary and Secondary Syphilis—Reported Cases and Rates per 100,000 Population by Age Group and Sex: United States, 2004–2008," Sexually Transmitted Disease Surveillance 2008, 121.

¹⁸ 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 2009 began on October 1, 2008 and ended on September 30, 2009.

¹⁹ Through the Fiscal Year 2010 appropriations process, Congress eliminated all discretionary funding for abstinence-only-until-marriage programs, including the entire CBAE program and the abstinence-only-until-marriage portion of AFLA. The grant years listed in the chart reflect the years for which funding was originally approved; however, the grants effectively ended in Fiscal Year 2009.

²⁰ SIECUS has identified this person as a state-based contact for information on adolescent health and if applicable, abstinence-only-until-marriage programs.

²¹ This section is a list of major newspapers in your state with contact information for their newsrooms. This list is by no means exhaustive and does not contain the local level newspapers which are integral to getting your message out to your community. SIECUS strongly urges you to follow stories about the issues that concern you on the national, state, and local level by using an internet news alert service such as <u>Google alerts</u>, becoming an avid reader of your local papers, and establishing relationships with reporters who cover your issues. For more information on how to achieve your media goals visit the SIECUS <u>Community Action Kit</u>.