



DELAWARE

Delaware Sexuality Education Law and Policy

Delaware requires sexuality education as part of health education in kindergarten through 12th grade. This education must be coordinated by an employee in each school district and must be overseen by a District Consolidated Application Planning Committee. The committee must consist of teachers, parents, school nurses, community leaders, law enforcement, and other community members “with expertise in the areas of health, family life and safe and drug free schools and communities.”¹ Sexuality education must include an “HIV-prevention program that stresses the benefits of abstinence from high-risk behaviors.”² Sexuality education courses must also follow the *Delaware Health Education Curriculum*.

Delaware law also sets a minimum number of hours for “comprehensive health education and family life education.”³ In kindergarten through grade four, this minimum is set at 30 hours in each grade, ten of which must be dedicated to drug/alcohol education. In grades five and six, the minimum is set at 35 hours per grade, 15 of which must be dedicated to drug/alcohol education. In grades seven and eight, the minimum is set at 60 hours per grade, 15 of which must be dedicated to drug/alcohol education. In order to graduate, high school students must receive one-half of a credit in comprehensive health education.

Delaware does not require parental permission for students to participate in sexuality or HIV/AIDS education nor does it say whether parents or guardians may remove their children from such classes.

See Delaware Administrative Code title 14, § 851, and *Delaware Health Education Curriculum*.

Recent Legislation

SIECUS is not aware of any proposed legislation regarding sexuality education in Delaware.

Delaware’s Youth: Statistical Information of Note⁴

- In 2009, 57% of female high school students and 58% of male high school students in Delaware reported ever having had sexual intercourse compared to 46% of female high school students and 46% of male high school students nationwide.
- In 2009, 6% of female high school students and 13% of male high school students in Delaware 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, 18% of female high school students and 24% of male high school students in Delaware 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.

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- In 2009, 44% of female high school students and 42% of male high school students in Delaware 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, 55% of females and 70% of males in Delaware 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, 22% of females and 18% of males in Delaware 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, 16% of females and 28% of males in Delaware 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, 89% of high school students in Delaware reported having been taught about AIDS/HIV in school compared to 87% of high school students nationwide.

Delaware Youth Sexual Health Statistics

Teen Pregnancy, Birth, and Abortion

- Delaware's teen pregnancy rate ranks 7th in the U.S., with a rate of 83 pregnancies per 1,000 young women ages 15–19 compared to the national rate of 70 pregnancies per 1,000.⁵ There were a total of 2,300 pregnancies among young women ages 15–19 reported in 2005, the most recent year for which data are available, in Delaware.⁶
- Delaware's teen birth rate ranked 16th in the U.S. in 2005, with a rate of 44 births per 1,000 young women ages 15–19 compared to the national rate of 40.5 births per 1,000.⁷ In 2005, there were a total of 1,225 live births reported to young women ages 15–19 in Delaware.⁸
- 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 2005.⁹ Delaware's teen birth rate decreased between 2005 and 2006, from 44.0 to 41.9 births per 1,000 young women ages 15–19.¹⁰
- Delaware's teen abortion rate ranks 2nd in the U.S., with a rate of 27 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 604 abortions reported among young women ages 15–19 in Delaware.¹¹

HIV and AIDS

- Delaware ranks 33rd in cases of HIV infection diagnosed in the U.S. among all age groups. In 2007, there were a total of 88 new cases of HIV infection diagnosed in Delaware.¹²
- Delaware's AIDS rate ranks 6th in the U.S., with a rate of 19.8 cases per 100,000 population compared to the national rate of 12.5 cases per 100,000.¹³

- Delaware ranks 34th in number of reported AIDS cases in the U.S. among all age groups. In 2007, there were a total of 171 new AIDS cases reported in Delaware.¹⁴
- In 2007, there were no AIDS cases reported among young people ages 13–19 in Delaware.¹⁵

Sexually Transmitted Diseases

- Delaware ranks 14th in reported cases of Chlamydia among young people ages 15–19 in the U.S., with an infection rate of 22.52 cases per 1,000 compared to the national rate of 19.51 cases per 1,000. In 2008, there were a total of 1,393 cases of Chlamydia reported among young people ages 15–19 in Delaware.¹⁶
- Delaware ranks 21st in reported cases of gonorrhea among young people ages 15–19 in the U.S., with an infection rate of 4.67 cases per 1,000 compared to the national rate of 4.52 cases per 1,000. In 2008, there were a total of 289 cases of gonorrhea reported among young people ages 15–19 in Delaware.¹⁷
- Delaware ranks 23rd in reported cases of primary and secondary syphilis among young people ages 15–19 in the U.S., with an infection rate of 0.02 cases per 1,000 compared to the national rate of 0.04 cases per 1,000 in Delaware.¹⁸

Comprehensive Approaches to Sex Education

*SIECUS has identified some examples of model programs, policies, and best practices being implemented in Delaware public schools that provide a more comprehensive approach to sex education for young people.*¹⁹

Comprehensive Sex Education Programs in Public Schools

The Delaware Department of Education works to ensure that all school districts provide “age-appropriate, culturally sensitive HIV-prevention education” in middle and high schools in compliance with state policies and regulations.²⁰ Through funding from the Centers for Disease Control and Prevention’s Division of Adolescent and School Health (CDC-DASH), the department provides professional development on HIV-prevention curricula to school educators across the state.²¹ School districts in the state with high poverty rates, percentage of minority students, and those with schools failing to make annual progress on providing sex education are targeted for professional development training by the department. Currently, the department provides services to 19 public school districts and 13 charter schools. The Department of Education contracts with Planned Parenthood of Delaware to assist with providing these trainings.²²

The department recommends *Making Proud Choices!*, an STD/HIV-prevention curriculum, and *Healthy Sexuality*, a comprehensive sex education curriculum, for use with middle school students. It suggests *Removing the Risk* and *Reducing the Risk*, HIV-prevention education curricula, for use in high schools.

Making Proud Choices! is an evidenced-based STD, HIV, and pregnancy prevention curriculum for young adolescents ages 11–13 that is appropriate for use with African-American, Latino, and white populations. The curriculum consists of activities that assist young adolescents in understanding poor reasoning and decision-making related to taking risks that can lead to STD/HIV infection and/or unintended pregnancy. Such activities 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.”²³ Findings from a program evaluation published in the *Journal of American Medical Association* show that participants reported more consistent and frequent condom use and less unprotected sex than peers who were not in the program.²⁴

Health Sexuality is a skills-based curriculum that emphasizes abstinence and provides information on STDs, including HIV and HPV. The curriculum consists of 11 activity-based lessons that help “define and promote healthy relationships,” “increase family communication about sexuality,” and “promote positive peer pressure regarding sexuality.” The program also provides students with assistance in developing supportive networks and opportunities to practice communication and decision-making skills.²⁵

Removing the Risk is an abstinence-only, HIV-prevention program for high school students. The curriculum includes 10 lessons that focus on helping teens develop the interpersonal and social skills needed to postpone sexual activity, build healthy relationships that do not involve sexual intercourse, and avoid high-risk behaviors associated with unintended pregnancy, STDs, and HIV infection.²⁶

Reducing the Risk: Building Skills to Prevent Pregnancy, STD and HIV is a comprehensive sexuality education curriculum designed for high school students in the ninth and tenth grades that is appropriate for use with multi-ethnic populations.²⁷ The curriculum includes experiential activities that teach students to develop refusal, negotiation, and communication skills. An evaluation of the program published in *Family Planning Perspectives* found that it increased parent-child communication, especially among Latino youth, delayed the initiation of sexual intercourse, and reduced incidence of unprotected sex among lower-risk youth.²⁸

We encourage you to submit any updated or additional information on comprehensive approaches to sex education being implemented in Delaware 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

Delaware did not receive abstinence-only-until-marriage funding in Fiscal Year 2009.²⁹

Title V Abstinence-Only-Until Marriage Funding

- Delaware chose not to participate in the Title V abstinence-only-until-marriage program in Fiscal Year 2009. The state was eligible for approximately \$93,978 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 are no CBAE grantees in Delaware.

Adolescent Family Life Act (AFLA) Funding

- There are no AFLA grantees in Delaware.

Abstinence-Only-Until-Marriage Curricula

SIECUS is not aware of any commercially available abstinence-only-until-marriage curricula used in Delaware.

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.

Adolescent Health Contact³⁰

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Delaware Department of Health and Social Services
Division of Public Health
Jesse Cooper Building
P.O. Box 637
Dover, DE 19903
Phone: (302) 744-5409

Delaware Organizations that Support Comprehensive Sexuality Education

ACLU of Delaware
100 West 10th Street, Suite 603
Wilmington, DE 19801
Phone: (302) 654-3966
www.aclu-de.org

AIDS Delaware
100 West 10th Street, Suite 315
Wilmington, DE 19801
Phone: (302) 652.6776
www.aidsdelaware.org

Camp Rehoboth Community
Center
37 Baltimore Avenue
Rehoboth Beach, DE
Phone: (302) 227-5620
www.camprehoboth.com

Delaware Women's Conference
P.O. Box 7855
Newark, DE 19714
Phone: (302) 577-5287
www.delawarewomen.org

Planned Parenthood of Delaware
625 Shipley Street
Wilmington, DE 19801
Phone: (302) 655-7296
www.ppdell.org

Delaware Organizations that Oppose Comprehensive Sexuality Education

Delaware Pro-Life Coalition
400 New London Road
Newark, DE 19711
Phone: (302) 368-0329
www.delawareprolife.org

Delaware Right To Life
P.O. Box 1222
Wilmington, DE 19899
Phone: (302) 832-9600
www.derighttolife.org

Intercollegiate Studies Institute
3901 Centerville Road
P.O. Box 4431
Wilmington, DE 19807
Phone: (302) 652-4600
www.isi.org

Newspapers in Delaware³¹

DoverPost

Newsroom

P.O. Box 664

Dover, DE 19903

Phone: (302) 678-8291

www.doverpost.com

The News Journal

Newsroom

P.O. Box 15505

Wilmington, DE 19850

Phone: (302) 324-2851

www.delawareonline.com

Political Blogs in Delaware

Delaware Watch

<http://delawarewatch.blogspot.com>

Delaware Politics

www.delawarepolitics.net

Paul's Progressive Postings

<http://paulprogressive.blogspot.com>

¹ Del. Admin. Code title 14, § 851(1.1.2) <<http://regulations.delaware.gov/AdminCode/title14/800/851.pdf>>

² Del. Admin. Code title 14, § 851(1.1.4) <<http://regulations.delaware.gov/AdminCode/title14/800/851.pdf>>

³ Del. Admin. Code title 14, § 851(1.1.3.1), <<http://regulations.delaware.gov/AdminCode/title14/800/851.pdf>>

⁴ Unless otherwise cited, all statistical information comes from: 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>>.

⁵ *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.

⁶ *Ibid.*, Table 3.2.

⁷ 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.

⁸ *U.S. Teenage Pregnancies, Births, and Abortions: National and State Trends and Trends by Race and Ethnicity*, Table 3.2.

⁹ Martin, et. al. "Births: Final Data for 2006," 4.

¹⁰ *Ibid.*, Table B.

¹¹ *U.S. Teenage Pregnancies, Births, and Abortions: National and State Trends and Trends by Race and Ethnicity*, Table 3.5.

¹² "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.

¹³ *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>>.

¹⁴ *Ibid.*, Table 16.

¹⁵ 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>>.

¹⁶ "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.

¹⁷ 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.

¹⁸ 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.

¹⁹ This is by no means a complete list of all comprehensive programming and policies related to sexuality education, but rather some examples of best practices and model programs that SIECUS identified.

²⁰ “State Agencies: Delaware”, *Healthy Youth!* (Atlanta, GA: National Center for Chronic Disease Prevention and Health Promotion), accessed 23 May 2010, <<http://www.cdc.gov/HealthyYouth/states/de.htm>>.

²¹ Ibid.

²² Information provided by Janet Ray Arns, school health programs education associate for the Delaware Department of Education, 17 February 2010.

²³ “Making Proud Choices?” Evidence Based Programs, Resource Center for Adolescent Pregnancy Prevention (ReCAPP), ETR Associates, accessed 15 April 2010,

<<http://www.etr.org/recapp/index.cfm?fuseaction=pages.ebpDetail&PageID=128>>.

²⁴ Ibid.

²⁵ “Health Sexuality: An Abstinence-Based Curriculum for Middle School,” Rocky Mountain Center for Health Promotion and Education, accessed 24 May 2010, <http://www.rmc.org/Training/health_sexuality.html>.

²⁶ “Removing the Risk” Evidence Based Programs, Resource Center for Adolescent Pregnancy Prevention (ReCAPP), ETR Associates, accessed 24 May 2010, < >.

²⁷ *Science and Success: Sex Education and Other Programs That Work to Prevent Teen Pregnancy, HIV & Sexually Transmitted Infections* (Washington, DC: Advocates for Youth, 2008), accessed 30 March 2010,

<<http://www.advocatesforyouth.org/storage/advfy/documents/sciencesuccess.pdf>>, 22.

²⁸ Ibid., 23–24.

²⁹ 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.

³⁰ SIECUS has identified this person as a state-based contact for information on adolescent health and if applicable, abstinence-only-until-marriage programs.

³¹ 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 [Google alerts](#), 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 [Community Action Kit](#).