



ADOLESCENT SEXUAL HEALTH PROMOTION AT A GLANCE

The following is an overview of the state of adolescent sexual health promotion efforts in Minnesota in Fiscal Year (FY) 2012 including sexuality education state laws and policy, sexual health data, and federal funding.

STATE LEVEL SEXUALITY EDUCATION LAW AND POLICY OVERVIEW

[Minnesota law](#) requires every school district to develop and implement a comprehensive risk-reduction program that includes discussion of human immune deficiency virus (HIV) and human papilloma virus (HPV). While the state does not provide a specific curriculum or set of standards, each school district must have a “comprehensive, technically accurate, and updated curriculum that includes helping students abstain from sexual activity until marriage” and must target “adolescents, especially those who may be at high risk of contracting sexually transmitted infections and diseases, for prevention efforts.” Parents or guardians may remove their children from school-based sexuality education and/or HIV/STD education classes (“opt-out”).

REPORTED SEXUAL ACTIVITY OF YOUNG PEOPLE IN MINNESOTA

- In 2010, 10% of males and 7% of females in the 9th grade in Minnesota said they have had sexual intercourse once or twice, while 12% of males and 11% of females said they have had sexual intercourse three times or more.
- In 2010, 10% of males and 7% of females in the 12th grade in Minnesota said they have had sexual intercourse once or twice, while 41% of males and 43% of females said they have had sexual intercourse three times or more.

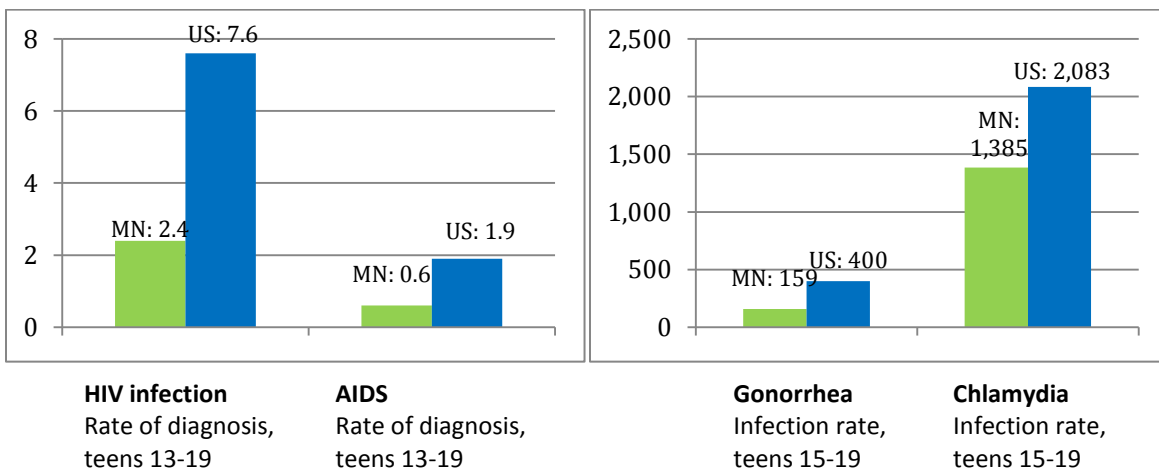
MINNESOTA TEEN PREGNANCY, BIRTH & ABORTION RATES

↓ Minnesota’s teen **pregnancy rate is lower than the national average**, with 42 pregnant teens per 1,000 compared to 68 pregnant teens per 1,000 nationwide in 2008.

↓ Minnesota’s teen **birth rate is lower than the national average**, with 19 teens per 1,000 giving birth compared to 31 teens per 1,000 nationwide in 2011.

↓ Minnesota’s teen **abortion rate is lower than the national average**, with ten teens per 1,000 having an abortion compared to 18 teens per 1,000 nationwide in 2008.

MINNESOTA’S YOUNG PEOPLE: HIV/AIDS & OTHER STD RATES IN 2011 (PER 100,000)

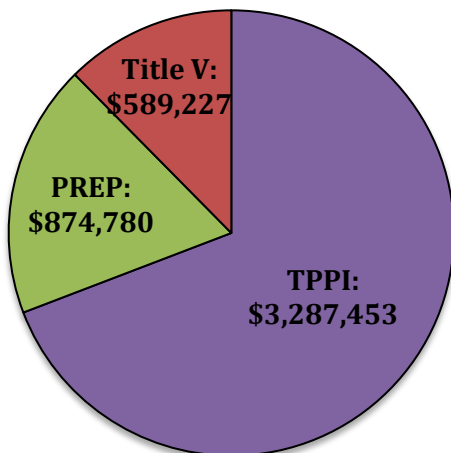


FY 2012 FEDERAL FUNDING IN MINNESOTA: TOTAL \$4,751,460

Title V AOUM Program (Title V) \$589,227

Minnesota has chosen to implement abstinence-only-until-marriage (AOUM) programs through Title V, matching every \$4 federal dollars with \$3 state dollars or in-kind contributions.

The Minnesota Title V AOUM program is administered by the Department of Health through sub-grants to the St. Paul Ramsey County Public Health Department who in turn sub-contracted with the Family Partnership, the YMCA of Greater Twin Cities, Teenwise MN, and the Neighborhood House. Programming is provided in both school and community-based settings for youth ages 11–14 residing in Ramsey County, specifically St. Paul charter school and White Bear Lake/Maplewood schools. The department is also implementing a parent education component and developing a community/youth mentoring project. The match is provided through a combination of in-kind funds and direct state revenue.



Teen Pregnancy Prevention Initiative (TPPI) \$3,287,453

Funds for local entities to implement evidence-based programs (Tier 1) or innovative strategies (Tier 2) to prevent teen pregnancy.

There is one TPPI Tier 1 grantee in Minnesota, Hennepin County, operating in Brooklyn Center, Brooklyn Park, Crystal, Hopkins, Minneapolis, New Hope, Richfield, and Robbinsdale through middle and high schools.

Personal Responsibility Education Program (PREP) \$874,780

Funds for states (PREP), local entities (PREIS), community/faith-based organizations (CPREP), and tribes (TPREP) to implement evidence-informed or innovative teen pregnancy- and HIV/STD-prevention, and adulthood preparation programs for young people.

The Minnesota Department of Health administers the state PREP grant program by directing the funding towards community-based organizations, juvenile detention centers, local public health agencies, social service agencies, clinics, foster care facilities, runaway/homeless youth facilities, tribal governments, and school alternative centers. Funded programs must demonstrate that they serve at least one of the following target populations: youth of color and American Indian youth ages 15–19, youth experiencing racial and ethnic disparities, youth in the juvenile justice system, youth attending area learning centers, youth in foster care, runaway/homeless youth, and gay/lesbian/bisexual/transgender youth. Programming takes place in Hennepin, Ramsey, Beltrami, Cass, and Mahnommen counties.

For further background on the federal programs, information on the grantees and the programs they are implementing, as well as citations, please see the FY 2012 Minnesota State Profile available at

www.siecus.org/Minnesota2012