

State Profile

NORTH DAKOTA

In Fiscal Year 2010¹, the state of North Dakota received: Title V State Abstinence Education Program funds totaling \$76,707

SEXUALITY EDUCATION LAW AND POLICY

North Dakota does not mandate sexuality education nor does it address what can or cannot be taught in sexuality education classes. In 2008, the North Dakota Department of Public Instruction published the *North Dakota Health Content and Achievement Standards*, which establish benchmarks for health instruction at all grade levels. For example, in grade five, students are expected to be able to "[d]escribe changes that occur during puberty." The standards address "sexual behavior" beginning in grades seven and eight.²

North Dakota 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 North Dakota Health Content and Achievement Standards.

RECENT LEGISLATION

Bill Institutes Specific Guidelines for Teaching about Abstinence

House Bill 1229, introduced in January 2011, mandates that schools dedicate a portion of sexual health instruction to teaching the benefits of abstinence. The bill requires "each school district and nonpublic school" to ensure that any education regarding sexual health include "instruction pertaining to the risks associated with adolescent sexual activity and the social, psychological, and physical health gains to be realized by abstaining from sexual activity before and outside of marriage." The bill passed the legislature and was signed into law by Governor Dalrymple on May 20, 2011. The legislation will go into effect beginning July 1, 2012.

YOUTH SEXUAL HEALTH DATA

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

North Dakota Youth Risk Behavior Survey (YRBS) Data³

- In 2009, 47% of female high school students and 42% of male high school students in North Dakota reported ever having had sexual intercourse compared to 46% of female high school students and 46% of male high school students nationwide.
- In 2009, 2% of female high school students and 5% of male high school students in North Dakota 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, 12% of female high school students and 12% of male high school students in North Dakota 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, 37% of female high school students and 29% of male high school students in North Dakota 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, 25% of females and 15% of males in North Dakota 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, 24% of females and 26% of males in North Dakota 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, 88% of high school students in North Dakota reported having been taught about AIDS/HIV in school compared to 87% of high school students nationwide.

North Dakota Teen Pregnancy, HIV/AIDS, and Sexually Transmitted Disease Data

Teen Pregnancy, Birth, and Abortion

- North Dakota's teen birth rate currently ranks 42nd in the United States, with a rate of 28.6 births per 1,000 young women ages 15–19 compared to the national rate of 41.5 births per 1,000.⁴ In 2008, there were a total of 704 live births reported to young women ages 15–19 in North Dakota.⁵
- In 2005, North Dakota's teen pregnancy rate ranked 47th in the United States, with a rate of 45 pregnancies per 1,000 young women ages 15–19 compared to the national rate of 70 pregnancies per 1,000.⁶ There were a total of 990 pregnancies among young women ages 15–19 in North Dakota.⁷
- In 2005, North Dakota's teen abortion rate ranked 47th in the United States, with a rate of 8 abortions per 1,000 young women ages 15–19 compared to the national rate of 19 abortions per 1,000.⁸

HIV and AIDS

- North Dakota's HIV infection rate ranks 37th in the United States, with a rate of 2.5 cases per 100,000 individuals compared to the national rate of 19.5 cases per 100,000.⁹
- North Dakota ranks 37th in cases of HIV infection diagnosed in the United States among all age groups. In 2008, there were a total of 16 new cases of HIV infection diagnosed in North Dakota.¹⁰
- North Dakota's HIV infection rate among young people ages 13–19 ranks 34th in the United States, with a rate of 1.9 cases per 100,000 young people compared to the national rate of 9.1 cases per 100,000.¹¹
- North Dakota ranks 48th in number of reported AIDS cases in the United States among all age groups. In 2008, there were a total of 16 new AIDS cases reported in North Dakota.¹²
- North Dakota's AIDS rate ranks 47th in the United States, with a rate of 2.4 cases per 100,000 individuals compared to the national rate of 12.3 cases per 100,000.¹³
- North Dakota's AIDS rate among young people ages 13–19 ranks 41st in the United States with a rate of 0 cases per 100,000 young people compared to the national rate of 1.8 cases per 100,000.¹⁴

Sexually Transmitted Diseases

- North Dakota ranks 46th in reported cases of Chlamydia among young people ages 15–19 in the United States, with an infection rate of 10.67 cases per 1,000 compared to the national rate of 19.51 cases per 1,000. In 2008, there were a total of 527 cases of Chlamydia reported among young people ages 15–19 in North Dakota.¹⁵
- North Dakota ranks 45th in reported cases of gonorrhea among young people ages 15–19 in the United States, with an infection rate of 0.71 cases per 1,000 compared to the national rate of 4.52 cases per 1,000. In 2008, there were a total of 35 cases of gonorrhea reported among young people ages 15–19 in North Dakota.¹⁶
- There are no available statewide data on the rate of syphilis among young people.

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 ageappropriate 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 \$110 million in discretionary funding for Fiscal Year 2010. 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 evidencebased 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 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 North Dakota.

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 North Dakota.

TPPI Tier 2: 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 are no TPPI Tier 2 Communitywide Initiatives grantees in North Dakota.

Personal Responsibility Education Program

The Personal Responsibility Education Program (PREP) totals \$75 million per year for Fiscal Years 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 Indian tribes and tribal organizations, and \$6.5 million for evaluation, training, and technical assistance. Details on the state-grant program and PREIS are included below. At the time of publication, the funding for tribes and tribal organizations had not yet been awarded.

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.

• North Dakota chose not to apply for PREP funds for Fiscal Year 2010.

Personal Responsibility Education Innovative Strategies (PREIS)

The PREIS Program 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 are no PREIS grantees in North Dakota.

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 Fiscal Years 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.

- The North Dakota Department of Health received \$76,707 in federal Title V abstinence-only funding for Fiscal Year 2010.
- The department provides sub-grants to two local public and private entities: Make a Sound Choice and Northern Lights Youth Services of Hillsboro. At the time of publication, the amount of each sub-grant had not yet been finalized.
- In North Dakota, sub-grantees contribute to the match through a combination of direct revenue and in-kind services.

The North Dakota Department of Health implements the state's Title V Abstinence-Only grant program, which provides funding to two local entities, Make a Sound Choice and Northern Lights Youth Services of Hillsboro, both whom are long-time recipients of the state's abstinence-only-until-marriage funding. Both sub-grantees provide programming to youth in multiple counties throughout the state. The Department of Health has approved three curricula for use by Title V Abstinence-Only sub-grantees: *A.C. Green's Game Plan, Navigator*, and *Quest.*

A.C. Green's Game Plan is a well-known abstinence-only-until-marriage curriculum that relies on messages of fear and shame, inaccurate and misleading information, and biased views of marriage, sexual orientation, and family structure to convince high school students to remain abstinent until marriage. In addition, *Game Plan* fails to provide important information on sexual health including how students can seek testing and treatment if they suspect they may have an STD. Finally, the format and underlying biases of the curriculum do not allow for cultural, community, and individual values, and discourage critical thinking and discussions of alternate points of view in the classroom. For example, *Game Plan* compares sex to fire and says: "In a fireplace, fire is beautiful and gives warmth to a home. Outside of the fireplace, it can cause serious harm." "What about sex? In a marriage relationship, sex can be beautiful. Outside of marriage, it can cause serious harm."¹⁷

Navigator also relies on messages of fear and shame, inaccurate and misleading information, and biased views of marriage, sexual orientation, and pregnancy options. The curriculum fails to provide important information on sexual health; and the format and underlying biases of the curriculum dictate specific values and discourage critical thinking. For example, the authors explain, "*Navigator* does not promote the use of contraceptives for teens. No contraceptive device is guaranteed to prevent pregnancy. Besides,

students who do not exercise self-control to remain abstinent are not likely to exercise self-control in the use of a contraceptive device."¹⁸

North Dakota TPPI, PREP, and Title V Abstinence-Only funding in FY 2010		
Grantee	Award	Fiscal Years
Title V Abstinence Education Grant Program (Title V Abstinence-Only)		
North Dakota Department of Health (federal grant)	\$76,707	2010
Sub-grantees		
Make a Sound Choice		2010
Northern Lights Youth Services of Hillsboro		2010
TOTAL	\$76,707	
GRAND TOTAL	\$76,707	2010

COMPREHENSIVE APPROACHES TO SEXUALITY EDUCATION

SIECUS is not aware of any examples of model programs, policies, or best practices being implemented in North Dakota 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 North Dakota public schools for inclusion in future publications of the SIECUS State Profiles. Please visit SIECUS' "Contact Us" webpage at <u>mmn.siecus.org</u> to share information. Select "state policy" as the subject heading.

POINTS OF CONTACT

Adolescent Health Contact¹⁹

Becky Bailey, RN, BNSC Director Coordinated School Health and School Nursing Division of Family Health North Dakota Department of Health 600 East Boulevard Avenue, Department 301 Bismarck, ND 58505 Phone: (701) 328-4526

Title V Abstinence-Only Grant Coordinator

Sandy Fetzer, RN, BSN Director Abstinence-Only Education Program Division of Family Health North Dakota Department of Health 600 East Boulevard Avenue, Department 301 Bismarck, ND 58505 Phone: (701) 328-4534

ORGANIZATIONS THAT SUPPORT COMPREHENSIVE SEXUALITY EDUCATION

ACLU of the Dakotas Phone: (651) 917-3880 www.aclund.org

Equality North Dakota Fargo, ND Phone: (701) 388-9227 www.equalitynd.org The League of Women Voters of North Dakota Fargo, ND Phone: (701) 297-6815 www.lwvnd.org

Planned Parenthood Minnesota, North Dakota, South Dakota St. Paul, MN Phone: (651) 698-2406 www.ppmns.org

ORGANIZATIONS THAT OPPOSE COMPREHENSIVE SEXUALITY EDUCATION

Diocese of Fargo Fargo, ND Phone: (701) 356-7900 www.fargodiocese.org North Dakota Right to Life P.O. Box Bismarck, ND 58502 Phone: (701) 258-3811 www.ndrl.org

North Dakota Family Alliance Fargo, ND Phone: (701) 364-0676 www.ndfa.org

MEDIA OUTLETS

Newspapers in North Dakota²⁰

Bismarck Tribune Bismarck, ND Phone: (701) 223-2500 www.bismarcktribune.com Devils Lake Journal Devils Lake, ND Phone: (701) 662-2127 www.devilslakejournal.com Dickinson Press Dickinson, ND Phone: (701) 225-8111 www.thedickinsonpress.com

Grand Forks Herald Grand Forks, ND Phone: (701) 780-1100 www.grandforksherald.com

Minot Daily News Minot, ND Phone: (701) 857-1900 www.minotdailynews.com

Williston Daily Herald Williston, ND Phone: (701) 572-2165 www.willistonherald.com The Forum Fargo, ND Phone: (701) 235-7311 www.in-forum.com

The Jamestown Sun Jamestown, ND Phone: (701) 252-3120 www.jamestownsun.com

Valley City Times-Record Valley City, ND Phone: (701) 845-0463 www.times-online.com

Political Blogs in North Dakota

Common Sense Has A Voice www.areavoices.com/commonsense/

NorthDecoder

www.northdecoder.com

Dakota Democrat www.anangrydakotademocrat.blogspot.com

Prairie Sun Rising www.prairiesunrising.blogspot.com

⁵ "VitalStats: Birth Data Files by State, Age of Mother in Years, 2008," (Atlanta, GA: Centers for Disease Control and Prevention), accessed 30 June 2011, <<u>http://www.cdc.gov/nchs/data_access/vitalstats/VitalStats_Births.htm</u>>.

¹⁰ Ibid.

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 2010 began on October 1, 2009 and ended on September 30, 2010.

² North Dakota Health Content and Achievement Standards (Bismarck, ND: North Dakota Department of Public Instruction, 2008), accessed 14 April 2010, <<u>http://www.dpi.state.nd.us/standard/content/health/health/2008.pdf</u>>, 16; Ibid., 26

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,

<<u>http://www.cdc.gov/mmwr/pdf/ss/ss5905.pdf</u>>. Note: North Dakota did not participate in the full 2009 YRBS. ⁴ "Births: Final Data for 2008," *National Vital Statistics Report*, vol. 59, (Atlanta, GA: Centers for Disease Control and Prevention, December 2010), accessed 29 June 2011, <<u>http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59_01.pdf</u>>, Table 12.

⁶ 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, <<u>http://www.guttmacher.org/pubs/USTPtrends.pdf</u>>, Table 3.1. ⁷ Ibid., Table 3.2.

⁸ U.S. Teenage Pregnancies, Births, and Abortions: National and State Trends and Trends by Race and Ethnicity, Table 3.3.

⁹ *HIV Surveillance Report, 2008,* (Atlanta, GA: Centers for Disease Control and Prevention, June 2010), accessed 28 June 2011, <<u>http://www.cdc.gov/hiv/surveillance/resources/reports/2008report/pdf/2008SurveillanceReport.pdf</u>>, Table 19.

¹¹ Slide 9: "Rates of Diagnoses of HIV Infection among Adolescents Aged13–19 Years, 2009—40 States and 5 U.S. Dependent Areas," *HIV Surveillance in Adolescents and Young Adults*, (Atlanta, GA: Centers for Disease Control and Prevention, July 2011), accessed 27 September 2011, <<u>http://www.cdc.gov/hiv/topics/surveillance/resources/slides/adolescents/index.htm</u>>.

¹² HIV Surveillance Report, 2008, Table 20.

¹³ Ibid.

¹⁴ Slide 18: "Rates of Diagnoses of AIDS Infection among Adolescents Aged13–19 Years, 2009—40 States and 5 U.S. Dependent Areas," *HIV Surveillance in Adolescents and Young Adults*, (Atlanta, GA: Centers for Disease Control and Prevention, July 2011), accessed 27 September 2011,

<<u>http://www.cdc.gov/hiv/topics/surveillance/resources/slides/adolescents/index.htm</u>>.

¹⁵ "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, <<u>http://wonder.cdc.gov</u>>; 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, <<u>http://www.cdc.gov/std/stats08/surv2008-Complete.pdf</u>>, 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 A.C. Green's Game Plan (Golf, IL: Project Reality, 2007). For more information, see SIECUS' review of A.C. Green's Game Plan at <<u>http://www.communityactionkit.org/curricula_reviews.html</u>>.

¹⁸ Need citation – was incorrect in source

¹⁹ The person listed represents the designated personnel in the state responsible for adolescent reproductive health.

²⁰ This section is a list of major newspapers in the state and is by no means exhaustive of local print outlets.