

RHODE ISLAND

In Fiscal Year 2010¹, the state of Rhode Island received:

• Personal Responsibility Education Program funds totaling \$250,000

SEXUALITY EDUCATION LAW AND POLICY

Rhode Island schools are required to provide "accurate information and instruction" on sexuality, HIV, and sexually transmitted diseases (STDs).² Schools must also teach "the responsibilities of family membership and adulthood, including issues related to reproduction, abstinence, dating and dating violence, marriage, and parenthood as well as information about sexually transmitted diseases, sexuality and sexual orientation." These classes must stress abstinence.

In addition, the state's department of elementary and secondary education must "establish comprehensive AIDS...instruction, which shall provide students with accurate information and instruction on AIDS transmission and prevention, and which course shall also address abstinence from sexual activity as the preferred means of prevention, as a basic education program requirement."

The commissioner of elementary and secondary education must establish a state health education curriculum for grades kindergarten through 12. Schools are required to use this curriculum, Rules and Regulations for School Health Programs, which is based on the Comprehensive Health Instructional and the Health Education Framework.

Parents must be notified of sexuality education classes and may view the curriculum by submitting a written request. Students may be removed from instruction by written notification from the parent to the principal.⁵ This is referred to as an "opt-out" policy.

See <u>Rhode Island General Laws §§ 16-1-5</u>, <u>16-22-17</u>, and <u>16-22-18</u>; as well as the <u>Rules and Regulations</u> for School Health Programs, Comprehensive Health Instructional Outcomes, and the <u>Health Education Framework</u>

RECENT LEGISLATION

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

YOUTH SEXUAL HEALTH DATA

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

Rhode Island Youth Risk Behavior Survey (YRBS) Data⁶

- In 2009, 43% of female high school students and 46% of male high school students in Rhode Island 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 8% of male high school students in Rhode Island 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, 9% of female high school students and 14% of male high school students in Rhode Island 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, 33% of female high school students and 32% of male high school students in Rhode Island 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 68% of males in Rhode Island 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 17% of males in Rhode Island 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, 15% of females and 21% of males in Rhode Island 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, 87% of high school students in Rhode Island reported having been taught about AIDS/HIV in school compared to 87% of high school students nationwide.

Rhode Island Teen Pregnancy, HIV/AIDS, and Sexually Transmitted Disease Data Teen Pregnancy, Birth, and Abortion

- Rhode Island's teen birth rate currently ranks 43rd in the United States, with a rate of 28.5 births per 1,000 young women ages 15–19 compared to the national rate of 41.5 births per 1,000.⁷ In 2008, there were a total of 953 live births reported to young women ages 15–19 in Rhode Island.⁸
- In 2005, Rhode Island's teen pregnancy rate ranked 27th in the United States, with a rate of 62 pregnancies per 1,000 young women ages 15–19 compared to the national rate of 70 pregnancies per 1,000.⁹ There were a total of 2,220 pregnancies among young women ages 15–19 in Rhode Island.¹⁰

In 2005, Rhode Island's teen abortion rate ranked 11th in the United States, with a rate of 22 abortions per 1,000 young women ages 15–19 compared to the national rate of 19 abortions per 1,000.¹¹

HIV and AIDS

- Rhode Island's AIDS rate ranks 24th in the United States, with a rate of 7.4 cases per 100,000 individuals compared to the national rate of 12.3 cases per 100,000.¹²
- Rhode Island ranks 38th in number of reported AIDS cases in the United States among all age groups. In 2008, there were a total of 78 new AIDS cases reported in Rhode Island.¹³
- Rhode Island's AIDS rate among young people ages 13–19 ranks 8th in the United States, with a rate of 2.5 cases per 100,000 young people compared to the national rate of 1.8 cases per 100,000.¹⁴

Sexually Transmitted Diseases

- Rhode Island ranks 39th in reported cases of Chlamydia among young people ages 15–19 in the United States, with an infection rate of 13.84 cases per 1,000 compared to the national rate of 19.51 cases per 1,000. In 2008, there were a total of 1,111 cases of Chlamydia reported among young people ages 15–19 in Rhode Island.¹⁵
- Rhode Island ranks 44th in reported cases of gonorrhea among young people ages 15–19 in the United States, with an infection rate of 0.88 cases per 1,000 compared to the national rate of 4.52 cases per 1,000. In 2008, there were a total of 71 cases of gonorrhea reported among young people ages 15–19 in Rhode Island.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 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 \$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 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 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 Rhode Island.

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 Rhode Island.

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 Rhode Island.

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.

- The Rhode Island Department of Health received \$250,000 in federal PREP funds for Fiscal Year 2010.
- The department has issued an application announcement for available funds under the state's PREP grant program. At the time of publication, sub-grantees had not yet been determined.

The Rhode Island Department of Health will implement the state's PREP grant program in collaboration with the departments of education; human services; and children, youth and families, all of which will serve on the state's Implementation Advisory Committee. PREP funds will support teen pregnancy-

prevention programming in an effort to reduce unintended teen pregnancy within communities with the highest rates in the state—those with rates higher than 25 births per 1,000 young women ages 15–19. Programming will specifically target youth ages 18 and 19 in Providence, with the aim of reducing secondary births among pregnant and parenting teens within this age group, as well as address teen pregnancy among youth in foster care.¹⁷

Sub-grants will be provided to local public and private entities that have the capacity and expertise to work with youth populations and provide youth services. Collaborations between community-based organizations and schools will be highly encouraged. PREP-funded programs will be required to implement *Teen Outreach Program (TOP)* in school or community-based settings.¹⁸

TOP is an evidence-based youth development program that engages young people in experiential learning activities in order to "prepare for successful adulthood and avoid problem behaviors." The program is designed for youth ages 12–17 and focuses on reducing rates of school failure, school suspension, and teen pregnancy. TOP consists of a nine-month curriculum that addresses such topics as relationships, peer pressure, decision making, values clarification, goal-setting, adolescent development, and sexual health. It also includes a 20-hour community service component that engages participants in activities to enhance knowledge and develop skills, including self-efficacy, communication, conflict-management, and self-regulation. TOP can be delivered as an in-school, after-school, or community-based program. An evaluation of the program published in *Child Development* found that young women, ages 15–19, who participated in TOP were significantly less likely to report a pregnancy during the program than participants in the control group. To the program than participants in the control group.

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 Rhode Island.

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.

• Rhode Island chose not to apply for Title V abstinence-only funds for Fiscal Year 2010.

Rhode Island TPPI, PREP, and Title V Abstinence-Only Funding in FY 2010

Grantee	Award	Fiscal Years
Personal Responsibility Education Program (PREP)		
PREP State-Grant Program		
Rhode Island Department of Health (federal grant)	\$250,000	2010
TOTAL	\$250,000	
GRAND TOTAL	\$250,000	2010

COMPREHENSIVE APPROACHES TO SEXUALITY EDUCATION

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

POINTS OF CONTACT

Adolescent Health Contact²²

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PREP State-Grant Coordinator

Rosemary Reilly-Chammat, EdD Adolescent Health Manager Rhode Island Department of Health 3 Capitol Hill Providence, RI 02908 Phone: (401) 222-5922

RHODE ISLAND

ORGANIZATIONS THAT SUPPORT COMPREHENSIVE SEXUALITY EDUCATION

ACLU of Rhode Island PFLAG of Rhode Island

Providence, RI Providence, RI

Phone: (401) 831-7171 Phone: (401) 751-7571 www.riaclu.org www.pflagprovidence.org

AIDS Care Ocean State Planned Parenthood of Rhode Island

Providence, RI Providence, RI

Phone: (401) 521-3603 Phone: (421) 421-9620

www.aidscareos.org www.ppri.org

AIDS Project of Rhode Island Rhode Island Alliance for Lesbian and Gay

Providence, RI Civil Rights
Phone: (401) 831-5522 Providence, RI

www.aidsprojectri.org Phone: (401) 521-GAYS

Gay Lesbian Bisexual Transgender Center Rhode Island National Organization

Providence, RI for Women
Phone: (401) 751-7571 Warwick, RI
www.pflagprovidence.org www.rinow.org

ORGANIZATIONS THAT OPPOSE COMPREHENSIVE SEXUALITY EDUCATION

CareNet Rhode Island Rhode Island Right to Life

Cranston, RI Providence, RI

Phone: (401) 941-4357 Phone: (401) 521-1860

www.carenetri.org www.rirtl.org

MEDIA OUTLETS

Newspapers in Rhode Island²³

The Call The Newport Daily News

Woonsocket, RI Newport, RI

Phone: (401) 767-3000 Phone: (401) 849-3300

<u>www.woonsocketcall.com</u> <u>www.newportdailynews.com</u>

The Providence Journal-Bulletin The Times
Providence, RI Pawtucket, RI

Phone: (401) 277-7303 Phone: (401) 722-4000 www.projo.com www.pawtucketttimes.com

Political Blogs in Rhode Island

Closing Argument Hard Deadlines

<u>www.rijustice.wordpress.com</u> <u>www.torvex.com/jmcdaid</u>

RIFuture.org Projo Politics

www.rifuture.org www.politicsblog.projo.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 2010 began on October 1, 2009 and ended on September 30, 2010.

² R.I. Gen. Laws § 16-22-17(a), http://www.rilin.state.ri.us/Statutes/TTTLE16/16-22/16-22-17.HTM>.

³ Rules and Regulations for School Health Programs (Rhode Island: Rhode Island Department of Elementary and Secondary Education and Rhode Island Department of Health, proposed 2008), accessed 14 April 2010,

http://www.thriveri.org/documents/Rules Regs School Health 2008.pdf, 5.1.7.

⁴ R.I. Gen. Laws § 16-22-17(a), http://www.rilin.state.ri.us/Statutes/TTTLE16/16-22/16-22-17.HTM>.

⁵ R.I. Gen. Laws §§ 16-22-18(b) and (c), < http://www.rilin.state.ri.us/Statutes/TTTLE16/16-22/16-22-18.HTM>.

⁶ 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>.

⁷ "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, http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59 01.pdf>, Table 12.

⁸ "Wonder Database: Selected Births by Demographic Characteristics of Mother by State/County, Age of Mother, 2008, Results," (Atlanta, GA: Centers for Disease Control and Prevention), accessed 30 June 2011, http://wonder.cdc.gov>.

⁹ 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. ¹⁰ Ibid., Table 3.2.

¹¹ U.S. Teenage Pregnancies, Births, and Abortions: National and State Trends and Trends by Race and Ethnicity., Table 3.3.

¹² HIV Surveillance Report, 2008, (Atlanta, GA: Centers for Disease Control and Prevention, June 2010), accessed 28 June 2011, http://www.cdc.gov/hiv/surveillance/resources/reports/2008report/pdf/2008SurveillanceReport.pdf, 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,

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

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, http://wonder.cdc.gov; see also Table 10:

[&]quot;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 Information provided by Rosemary Reilly-Chammat, adolescent health manager for the Rhode Island Department of Health, 28 February 2011.

¹⁸ Ibid.

¹⁹ Saras Chung and Annie Philipps, *Promoting Mental Health and Well-being in Adolescents:* Recommendations for Wyman's Teen Outreach Program, (Eureka, MO: Wyman Teen Outreach Program, 2010), accessed 1 July 2011,

http://www.wymantop.org/pdfs/TOP_Positive_Well-Being.pdf, 3.

²⁰ Ibid, 9

²¹ "Pregnancy Prevention Intervention Implementation Report: Teen Outreach Program," Programs for Replication – Intervention Implementation Reports, U.S. Department of Health and Human Services, accessed 1 July 2011,

http://www.hhs.gov/ash/oah/prevention/research/programs/teen-outreach-program.html>.

²² The person listed represents the designated personnel in the state responsible for adolescent reproductive health.

²³ This section is a list of major newspapers in the state and is by no means exhaustive of local print outlets.