

U.S. VIRGIN ISLANDS

In Fiscal Year 2013,¹ the U.S. Virgin Islands received:

Personal Responsibility Education Program funds totaling \$250,000

SEXUALITY EDUCATION LAW AND POLICY

The U.S. Virgin Islands requires sex education, including AIDS-prevention education, to be a component of the health curriculum taught to students in grades K–12.²

See U.S. Virgin Islands Code tit. XVII § 41.

2013 LEGISLATIVE SESSION ACTIVITY

SIECUS is not aware of any proposed legislation regarding sexuality education in the U.S. Virgin Islands.

YOUTH SEXUAL HEALTH DATA

SIECUS has compiled the following data to provide an overview of adolescent sexual health in the U.S. Virgin Islands. The data collected represents the most current information available.

U.S. Virgin Islands Youth Risk Behavior Survey (YRBS) Data³

The U.S. Virgin Islands did not participate in the 2013 Youth Risk Behavior Survey.

U.S. Virgin Islands Teen Pregnancy, HIV/AIDS, and Other STD Data

Teen Pregnancy, Birth, and Abortion

• In 2010, the U.S. Virgin Island's teen birth rate was 42.8 per 1,000 young women ages 15–19, compared to the U.S. national rate of 29.4 per 1,000.4

HIV and AIDS

- In 2011, the rate of diagnoses of HIV infection among adolescents ages 13–19 in the U.S. Virgin Islands was 13.4 per 100,000, compared to the U.S. national rate of 7.6 per 100,000.
- In 2011, the rate of AIDS diagnoses among adolescents ages 13–19 in U.S. Virgin Islands was 0 per 100,000, compared to the U.S. national rate of 1.9 per 100,000.
- In 2011, the rate of diagnoses of HIV infection among young adults ages 20–24 in U.S. Virgin Islands was 74.1 per 100,000, compared to the U.S. national rate of 36.3 per 100,000.

• In 2011, the rate of AIDS diagnoses among young adults aged 20–24 years in U.S. Virgin Islands was 0 per 100,000, compared to the U.S. national rate of 10.9 per 100,000.8

Sexually Transmitted Diseases

- In 2012, there were a total of 245 cases of chlamydia among young people ages 15–19 reported in the U.S. Virgin Islands.⁹
- In 2012, there were a total of 53 cases of gonorrhea among young people ages 15–19 reported in the U.S. Virgin Islands.¹⁰

FEDERAL FUNDING FOR SEX EDUCATION, TEEN PREGNANCY PREVENTION, AND ABSTINENCE-ONLY-UNTIL-MARRIAGE 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 \$105 million in discretionary funding for FY 2013. 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. OAH utilizes the remaining appropriated funds to provide program support, implementation evaluation, and technical assistance to grantees. TPPI also dedicates \$8.5 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 the U.S. Virgin Islands.

TPPI Tier 2: Innovative Approaches

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 2 Innovative Approaches grantees in the U.S. Virgin Islands.

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 the U.S. Virgin Islands.

Division of Adolescent and School Health

The Division of Adolescent and School Health (DASH), within the Centers for Disease Control and Prevention (CDC), provides funding to 17 state and 19 local education agencies to help districts and schools strengthen student health through exemplary sexual health education (ESHE) that emphasizes HIV and other STD prevention, increased access to key sexual health services (SHS), and the establishment of safe and supportive environments (SSE) for students and staff. In addition, DASH funds nine national nongovernmental organizations (NGOs) to help state and local education agencies achieve these goals.

• There were no DASH grantees in the U.S. Virgin Islands funded to strengthen student health through ESHE, SHS, and SSE in FY 2013.

DASH also funds three local education agencies and one NGO to implement multiple program activities to meet the HIV/STD-prevention needs of young men who have sex with men (YMSM) and develop strategic partnerships and collaborations between schools and community-based, mental health, and social services organizations to accomplish this work.

• There were no DASH grantees in the U.S. Virgin Islands funded to deliver YMSM programming in FY 2013.

DASH also provides funding for state, territorial, and local education agencies and state health agencies to establish and strengthen systematic procedures to collect and report Youth Risk Behavior Survey (YRBS) and School Health Profiles data for policy and program improvements.

• There were no DASH grantees in the U.S. Virgin Islands funded to collect and report YRBS and School Health Profiles data in FY 2013.

Pregnancy Assistance Fund

The Pregnancy Assistance Fund (PAF), administered by OAH, provides expecting and parenting teens, women, fathers, and their families with a network of support services. Established in FY 2010 through a 10-year authorization (FY 2010–FY 2019) in the Affordable Care Act (ACA), PAF is a \$25 million competitive grant program for state and tribal entities. PAF grants support programs that include at least one of the following four components: 1) support for expectant and parenting student services at institutions of higher education; 2) support for expectant and parenting teens, women, fathers, and their families at high schools and community centers; 3) improved services for pregnant women who are victims of domestic violence, sexual violence, sexual assault, and stalking; and 4) increased public awareness and education services for expectant and parenting teens, women, fathers, and their families. Now in the second round of awards, PAF supports 17 entities in 14 states and three tribal entities, most of which focus their efforts on serving teen parents.

• There are no PAF grantees in the U.S. Virgin Islands.

Personal Responsibility Education Program

The Personal Responsibility Education Program (PREP) totals \$75 million per year for FYs 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, \$3.1 million for Tribal PREP, for tribes and tribal organizations, and with remaining funds for evaluation, training, and technical assistance. In addition, provisions within the statute for PREP enable a competitive application process for community- and faith-based organizations within states and territories that do not directly seek PREP funding by the third year of the program; these competitive PREP (CPREP) grants were awarded to organizations in five states and three territories in FY 2013. Details on the state grant program, PREIS, Tribal PREP, and CPREP are included below.

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 STDs. 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 U.S. Virgin Islands Department of Human Services received \$250,000 in federal PREP funds for FY 2013.
- The agency does not sub-grant any of the U.S. Virgin Island PREP funds.¹¹

The Department of Human Services administers the PREP state-grant program for the Virgin Islands in collaboration with the Department of Education. Funding is not sub-granted to local entities. Funding is used to provide school-based programming, targeting middle school and high school students ages of 10–19 (and up to age 21) in public schools on the islands of St. Croix, St. John, and St. Thomas. The Virgin Islands PREP program addresses the following adulthood preparation subjects: healthy relationships, adolescent development, and parent-child communication. The curriculum approved for use under the grant program is <u>Reducing the Risk</u>. 12

Personal Responsibility Education Innovative Strategies (PREIS)

PREIS 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 the U.S. Virgin Islands.

Tribal Personal Responsibility Education Program (Tribal PREP)

Tribal PREP supports the development and implementation of comprehensive teen pregnancy prevention programs within tribes and tribal communities. Tribal PREP programs target young people ages 10–19 who are in or are aging out of foster care, homeless youth, youth with HIV/AIDS, pregnant and/or parenting youth who are under 21 years of age, and youth who live in areas with high adolescent birth rates. Programs must 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.

- In FY 2013, 16 tribes and tribal organizations from nine states received a total of \$6.5 million.
- There are no Tribal PREP grantees in the U.S. Virgin Islands.

Competitive Personal Responsibility Education Program (CPREP)

CPREP grants support evidence-based programs that provide young people with medically accurate and age-appropriate information for the prevention of unintended pregnancy, HIV/AIDS, and other STDs. Organizations and institutions in states and territories that did not apply for PREP formula grants in either of the past two fiscal years were eligible to submit competitive applications for CPREP grants. Thirty-seven grants, totaling \$18.6 million, were awarded in FY 2013 to organizations in American Samoa, the Commonwealth of Northern Mariana Islands, Florida, Guam, Indiana, North Dakota, Texas, and Virginia.

There are no CPREP grantees in the U.S Virgin Islands.

Title V State Abstinence Education Grant Program

The Title V abstinence-only-until-marriage (Title V AOUM) program, administered by ACF, allocates \$50 million per year to states for FYs 2010–2014. The Title V AOUM 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 Title V AOUM 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 U.S. Virgin Islands chose not to apply for Title V AOUM funds for FY 2013.

Competitive Abstinence Education Grant Program

Administered by the ACF, the Competitive Abstinence Education (CAE) grant program provides grants for "abstinence education" as defined by the A–H statute in Title V of the Social Security Act, as well as for mentoring, counseling, and adult supervision that promotes abstinence outside of marriage. As currently implemented by ACF, the programs must also be medically accurate. In FY 2013, \$4.3 million was granted through a competitive application process to 10 grantees across nine states, in addition to the nine grantees implementing the second year of their CAE awards in some overlapping and additional states, for a total of 19 CAE grantees in 14 states.

• There are no CAE grantees in the U.S. Virgin Islands.

U.S. Virgin Islands TPPI, DASH, PAF, PREP, Title V AOUM, and CAE Funding in FY 2013

Grantee	Award	Fiscal Years
Personal Responsibility Education Program (PREP)		
PREP State-Grant Program		
Virgin Islands Department of Human Services	\$250,000	2013
TOTAL	\$250,000	
GRAND TOTAL	\$250,000	2013

POINTS OF CONTACT

Adolescent Health Contacts¹³

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¹ This refers to the federal government's fiscal year, which begins on October 1 and ends on September 30. The fiscal year is designated by the calendar year in which it ends; for example, FY 2013 began on October 1, 2012, and ended on September 30, 2013.

² U.S. Virgin Islands Title XVII; Amended August 2, 2002.

³ Eaton, Danice K., et al., "Youth Risk Behavior Surveillance—United States, 2011," *Surveillance Summaries, Morbidity and Mortality Weekly Report*, Vol. 61, No. SS-4 (June 8, 2012): accessed June 18, 2012, http://www.cdc.gov/mmwr/pdf/ss/ss6104.pdf. Note: The U.S. Virgin Islands last participated in the Youth Risk Behavior Survey in 2003.

⁴ Martin, J.A., et al. "Births: Final data for 2010," National Vital Statistics Reports, Vol. 61, No. 1. Hyattsville, MD: National Center for Health Statistics. 2012, accessed December 19, 2012, http://www.cdc.gov/nchs/data/nvsr/nvsr61/nvsr61_01.pdf, Table B.

⁵ Slide 9: "Rates of Diagnosis of HIV Infection among Adolescents Aged 13–19 Years, 2011—United States and 6 Dependent Areas," HIV Surveillance in Adolescents and Young Adults (Atlanta, GA: Centers for Disease Control and Prevention), accessed May 30, 2013, http://bit.lv/1dbYpAI.

⁶ Slide 18: "Rates of Stage 3 (AIDS) Classifications among Adolescents Aged 13–19 Years with HIV Infection, 2011—United States and 6 Dependent Areas," *HIV Surveillance in Adolescents and Young Adults* (Atlanta, GA: Centers for Disease Control and Prevention), accessed May 30, 2013, https://bit.ly/ldbYpAI.

⁷ Slide 10: "Rates of Diagnoses of HIV Infection among Young Adults Aged 20–24 Years, 2011—United States and 6 Dependent Areas," HIV Surveillance in Adolescents and Young Adults (Atlanta, GA: Centers for Disease Control and Prevention), accessed May 30, 2013, http://bit.lv/1dbYpAI.

⁸ Slide 19: "Rates of Stage 3 (AIDS) Classifications among Adolescents Aged 20–24 Years with HIV Infection, 2011—United States and 6 Dependent Areas," *HIV Surveillance in Adolescents and Young Adults* (Atlanta, GA: Centers for Disease Control and Prevention), accessed May 30, 2013, http://bit.ly/1dbYpAI.

⁹ NCHHSTP Atlas, "STD Surveillance Data" (Atlanta, GA: Centers for Disease Control and Prevention), accessed July 16, 2014, http://gis.cdc.gov/GRASP/NCHHSTPAtlas/main.html.

¹⁰ Ibid.

¹¹ Information provided by Syida Huggins-Richards, PREP Coordinator, JOBS Program, Division of Family Assistance, U.S. Virgin Islands Department of Human Services, June 02, 2014.

¹² Ibid

¹³ The person listed represents the designated personnel in the state responsible for adolescent reproductive health.