

### U.S. VIRGIN ISLANDS

#### 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 kindergarten through 12.<sup>1</sup>

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

#### RECENT LEGISLATION

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) Data<sup>2</sup>

- In 2003, 37% of female high school students and 64% of male high school students in the U.S. Virgin Islands reported ever having had sexual intercourse compared to 45% of female high school students and 48% of male high school students nationwide.
- In 2003, 5% of female high school students and 32% of male high school students in the U.S. Virgin Islands reported having had sexual intercourse before age 13 compared to 4% of female high school students and 10% of male high school students nationwide.
- In 2003, 7% of female high school students and 35% of male high school students in the U.S. Virgin Islands reported having had four or more lifetime sexual partners compared to 11% of female high school students and 18% of male high school students nationwide.
- In 2003, 24% of female high school students and 42% of male high school students in the U.S. Virgin Islands reported being currently sexually active (defined as having had sexual intercourse in the three months prior to the survey) compared to 35% of female high school students and 34% of male high school students nationwide.

- In 2003, among those high school students who reported being currently sexually active, 72% of females and 87% of males in the U.S. Virgin Islands reported having used condoms the last time they had sexual intercourse compared to 57% of females and 69% of males nationwide.
- In 2003, among those high school students who reported being currently sexually active, 4% of females and 1% of males in the U.S. Virgin Islands reported having used birth control pills the last time they had sexual intercourse compared to 21% of females and 13% of males nationwide.
- In 2003, among those high school students who reported being currently sexually active, 8% of females and 15% of males in the U.S. Virgin Islands reported having used alcohol or drugs the last time they had sexual intercourse compared to 21% of females and 30% of males nationwide.
- In 2003, 89% of high school students in the U.S. Virgin Islands reported having been taught about AIDS/HIV in school compared to 88% of high school students nationwide.

# U.S. Virgin Islands Teen Pregnancy, HIV/AIDS, and Sexually Transmitted Disease Data Teen Pregnancy, Birth, and Abortion

• In 2008, there were a total of 51.1live births reported to young women ages 15–19 in the U.S. Virgin Islands compared to the national rate of 41.5 births per 1,000.<sup>3</sup>

#### HIV and AIDS

- In 2008, the HIV infection rate in the U.S. Virgin Islands was 28.6 cases per 100,000 individuals, compared to the national rate of 19.5 cases per 100,000.
- In 2008, there were a total of 31 new cases of HIV infection diagnosed in the U.S. Virgin Islands among all age groups.<sup>5</sup>
- In 2009, the U.S. Virgin Islands' HIV infection rate among young people ages 13–19 was 11.3 cases per 100,000 young people compared to the national rate of 9.1 cases per 100,000.
- In 2008, there were a total of 14 new AIDS cases reported in the U.S. Virgin Islands among all age groups.<sup>7</sup>
- In 2008, the U.S. Virgin Islands' AIDS rate among all age groups was 12.7 cases per 100,000 individuals compared to the national rate of 12.3 cases per 100,000.8
- In 2009, the U.S. Virgin Islands' AIDS rate among young people ages 13–19 was 0 cases per 100,000 young people compared to the national rate of 1.8 cases per 100,000.9

# 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 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 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.

#### 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 U.S. Virgin Islands chose not to apply for PREP funds for Fiscal Year 2010.<sup>10</sup>

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 the U.S. Virgin Islands.

#### 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 U.S. Virgin Islands chose not to apply for Title V abstinence-only funds for Fiscal Year 2010.

#### COMPREHENSIVE APPROACHES TO SEXUALITY EDUCATION

SIECUS is not aware of any examples of model programs, policies, or best practices being implemented in the U.S. Virgin Islands 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 more comprehensive approaches to sex education being implemented in the U.S. Virgin Islands public schools for inclusion in future publications of the SIECUS State Profiles. Please visit SIECUS' "Contact Us" webpage at <a href="https://www.siecus.org">www.siecus.org</a> to share information. Select "state policy" as the subject heading.

#### POINTS OF CONTACT

#### Adolescent Health Contact<sup>11</sup>

Sharon Williams
Director of Chronic Disease Prevention Program
Department of Health
Charles Howard Complex
3500 Estate Richmond
St. Croix, Virgin Islands 00820
Phone: (340) 773-1311 ext. 3100

#### ORGANIZATIONS THAT SUPPORT COMPREHENSIVE SEXUALITY EDUCATION

Community Foundation of the Virgin Islands Charlotte Amalie, St. Thomas U.S. Virgin Islands Phone: (340) 774-6031 www.cfvi.net

Virgin Islands Community AIDS Resource and Education, Inc. (VICARE) Christiansted, Virgin Islands Phone: (340) 692-9111 www.vicareinc.org

#### ORGANIZATIONS THAT OPPOSE COMPREHENSIVE SEXUALITY EDUCATION

SIECUS is not aware of any organizations opposed to comprehensive sexuality education in the U.S. Virgin Islands.

#### **MEDIA OUTLETS**

### Newspapers in the U.S. Virgin Islands<sup>12</sup>

The Virgin Islands Daily News St. Thomas, Virgin Islands Phone: (340) 774-8772

www.virginislandsdailynews.com

<sup>&</sup>lt;sup>1</sup> U.S. Virgin Islands Title XVII; Amended 2 August 2002.

<sup>&</sup>lt;sup>2</sup> Unless otherwise cited, all statistical information comes from: Jo Anne Grunbaum, et al., "Youth Risk Behavior Surveillance— United States, 2003," Surveillance Summaries, Morbidity and Mortality Weekly Report, vol. 53, no. SS-2 (21 May 2004): 1-108, accessed 13 December 2008, <a href="http://www.cdc.gov/mmwr/preview/mmwrhtml/ss5302a1.htm">http://www.cdc.gov/mmwr/preview/mmwrhtml/ss5302a1.htm</a>. Note: the YRBS was conducted again in 2005, 2007 and 2009 but the U.S. Virgin Islands did not participate in those surveys.

<sup>&</sup>lt;sup>3</sup> "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, <a href="http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59">http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59</a> 01.pdf>, Table 12. <sup>4</sup> 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 19. <sup>5</sup> Ibid.

<sup>&</sup>lt;sup>6</sup> Slide 9: "Rates of Diagnoses of HIV Infection among Adolescents 13-19 Years of Age, 2008—37 States and 5 U.S. Dependent Areas," HIV Surveillance in Adolescents and Young Adults, (Atlanta, GA: Centers for Disease Control and Prevention, December 2010), accessed 28 June 2011,

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

<sup>&</sup>lt;sup>7</sup> HIV Surveillance Report, 2008, Table 20.

<sup>&</sup>lt;sup>8</sup> Ibid.

<sup>9</sup> Slide 18: "Rates of AIDS Diagnoses among Adolescents 13-19 Years of Age, 2008-United States and Dependent Areas," HIV Surveillance in Adolescents and Young Adults, (Atlanta, GA: Centers for Disease Control and Prevention, December 2010), accessed 28 June 2011, http://www.cdc.gov/hiv/topics/surveillance/resources/slides/adolescents/index.htm.

<sup>&</sup>lt;sup>10</sup> 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.

<sup>11</sup> The person listed represents the designated personnel in the state responsible for adolescent reproductive health.

<sup>&</sup>lt;sup>12</sup> This section is a list of major newspapers in the state and is by no means exhaustive of local print outlets.