

UTAH

In Fiscal Year 2013,¹ the state of Utah received:

- Division of Adolescent and School Health funds totaling \$59,635
- Personal Responsibility Education Program funds totaling \$526,292
- Title V State Abstinence Education Program funds totaling \$385,953

SEXUALITY EDUCATION LAW AND POLICY

Utah Code mandates that the state board of education establish curriculum requirements in grades 8–12 for the prevention of communicable diseases. This instruction must stress "the importance of abstinence from all sexual activity before marriage and fidelity after marriage as methods for preventing certain communicable diseases; and personal skills that encourage individual choice of abstinence and fidelity."

Among other limitations on what can be taught, the code states that "[a]t no time may instruction be provided, including responses to spontaneous questions raised by students, regarding any means or methods that facilitate or encourage the violation of any state or federal criminal law by a minor or adult." In Utah, consensual sexual intercourse outside of marriage is illegal.

Utah Code further requires that materials used for instruction in health do not include:

- the intricacies of intercourse, sexual stimulation, or erotic behavior;
- the advocacy of homosexuality;
- the advocacy or encouragement of the use of contraceptive methods or devices; or
- the advocacy of sexual activity outside of marriage.⁵

Utah Code requires that each newly hired or newly assigned educator who teaches or who will be teaching any part of a sexuality education class must attend a state-sponsored course offered annually that outlines the state-designed curriculum and Utah Code regarding the teaching of human sexuality.⁶

The Elementary Core Curriculum: Responsible Healthy Lifestyles 3–6 and Secondary Health Core Curriculum documents, suggested education standards produced by the Utah State Office of Education, provide greater detail regarding grade level and topics to be included. The Elementary Core Curriculum states that in grades 3–6, students should receive disease prevention and HIV/AIDS education.⁷ According to the Secondary Health Core Curriculum, students should receive instruction that abstinence is the best way to prevent unintended pregnancy and sexually transmitted infections beginning in grade 7.8 Instructors are told that a "strong abstinence message has always been and will continue to be an expected element" (emphasis in original) of sexuality education.⁹

Schools are not required to follow this framework. However, local school districts must establish a curriculum materials review committee. ¹⁰ This committee must make sure that all instructional material complies with "state law and state board rules" regarding sexuality education. ¹¹ Curricula must be adopted after "an open and regular" school board meeting in which parents and guardians have an opportunity to testify about the curricula. ¹²

Parents or guardians must give written permission in order for a student to participate in any form of sexuality education.¹³ This is referred to as an "opt-in" policy.

See <u>Utah Code § 53A-13-101</u>; <u>Utah Administrative Code §§ R277-474</u> and <u>R277-700</u>; <u>Elementary Core Curriculum</u>: <u>Responsible Healthy Lifestyles 3–6</u>; <u>Secondary Health Core Curriculum</u>; <u>A Resource Guide for Parents and Teachers on Teaching Human Sexuality—Junior High School</u>; and <u>A Resource Guide for Parents and Teachers on Teaching Human Sexuality—High School</u>.

2013 STATE LEGISLATIVE SESSION ACTIVTY

Bill to Require Creation of Online Sex Education Resource for Parents

Utah's Parental Responsibility for Sex Education Bill, SB 39, requires the State Board of Education to develop online sex education curricula for parents to teach their children about sexual health. The bill would not have Utah's existing sex education policy, but instead offered parents accessible information to assist with discussing sexual health with their children. After passing the State's Senate and House Education Committees, the bill failed on the House floor.

YOUTH SEXUAL HEALTH DATA

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

Utah Youth Risk Behavior Survey (YRBS) Data¹⁴

• In 2013, 7.7% of female high school students and 6.1% of male high school students in Utah who dated or went out with someone during the 12 months before the survey reported experiencing physical dating violence one or more times during that time period (defined as being hit, slammed into something, or injured with an object or weapon on purpose by someone they were dating or going out with), compared to 13% of female high school students and 7.4% of male high school students nationwide.

Visit the Centers for Disease Control and Prevention's <u>Youth Online database</u> for additional information on sexual behaviors.

Utah Teen Pregnancy, HIV/AIDS, and Other STD Data

Teen Pregnancy, Birth, and Abortion

- In 2010, Utah's teen pregnancy rate ranked 45th in the United States, with a rate of 38 pregnancies per 1,000 young women ages 15–19, compared to the national rate of 57 per 1,000.¹⁵ There were a total of 4,140 pregnancies among young women ages 15–19 in Utah in 2010.¹⁶
- In 2012, Utah's teen birth rate ranked 39th in the United States, with a rate of 23.3 births per 1,000 young women ages 15–19, compared to the national rate of 29.4 per 1,000.¹⁷ In 2012, there were a total of 2,494 live births to young women ages 15–19 reported in Utah.¹⁸
- In 2010, Utah's teen abortion rate ranked 50th in the United States, with a rate of four abortions per 1,000 young women ages 15–19, compared to the national rate of 15 per 1,000.¹⁹ There were a total of 440 abortions among young women ages 15–19 reported in Utah in 2010.²⁰

HIV and AIDS

- In 2011, the rate of diagnoses of HIV infection among adolescents ages 13–19 in Utah was 1 per 100,000, compared to the national rate of 7.6 per 100,000.²¹
- In 2011, the rate of AIDS diagnoses among adolescents ages 13–19 in Utah was 0.3 per 100,000, compared to the national rate of 1.9 per 100,000.²²
- In 2011, the rate of diagnoses of HIV infection among young adults ages 20–24 in Utah was 7.1 per 100,000, compared to the national rate of 36.3 per 100,000.²³
- In 2011, the rate of AIDS diagnoses among young adults ages 20–24 in Utah was 0.9 per 100,000, compared to the national rate of 10.9 per 100,000.²⁴

Sexually Transmitted Diseases

- In 2011, Utah ranked 51st in the United States for reported cases of chlamydia among young people ages 15–19 in the United States, with an infection rate of 971.1 cases per 100,000, compared to the national rate of 2,001.7 per 100,000. In 2012, there were a total of 2,153 cases of chlamydia among young people ages 15–19 reported in Utah.²⁵
- In 2012, Utah ranked 48th in the United States for reported cases of gonorrhea among young people ages 15–19 in the United States, with an infection rate of 24.4 cases per 100,000, compared to the national rate of 376.8 per 100,000. In 2012, there were a total of 54 cases of gonorrhea among young people ages 15–19 reported in Utah.²⁶
- In 2012, Utah joined nine other states with a primary and secondary syphilis infection rate of zero among young people ages 15-19, compared to the national rate of 4.1 cases per 100,000.²⁷

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 and minimize underlying behavioral risk factors or other associated risk factors.

• There are no TPPI Tier 1 grantees in Utah.

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 Utah.

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 Utah.

Division of Adolescent and Sexual 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 Utah 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 Utah 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 was one DASH grantee in Utah funded to collect and report YRBS and School Health Profiles data in FY 2013, the Utah Department of Health (\$59,635).

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 Utah.

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 State of Utah, Department of Health, received \$526,292 in federal PREP funds for FY 2013.
- The agency provides sub-grants to six²⁸ local public and private entities.²⁹

The Utah Department of Health, Division of Family Health and Preparedness implements the state's PREP grant, which provides funding to only community-based public and private entities. Funded programs serve young people ages 14–19 who belong to racial and ethnic minority groups or reside in areas with high teenage birth rates, as well as current teenage parents. They are administered in Box Elder, Grand, Morgan, Salt Lake, Tooele, Utah, and Weber counties. The Department of Health has identified four curricula that sub-grantees may use: <u>All4Youl</u>, Be Proud! Be Responsible! Be Protective!, ¡Cuidate!, and Teen Health Project.³⁰

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 Utah.

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 \$3.1 million.
- There are no Tribal PREP grantees in the Utah.

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 Utah.

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. ACF administers the grant program. 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 State of Utah Department of Health, Division of Family Health and Preparedness received \$385,953 in federal Title V AOUM funding for FY 2013.
- The agency provides sub-grants to seven³¹ local public and private entities.³²
- In Utah, sub-grantees provide the match through in-kind funds.

The Utah Department of Health implements the state's Title V AOUM program. Funded programs serve young people ages 10–16 that belong to racial and ethnic minority groups or reside in areas of the state with high teenage birth rates, as well as young people in the juvenile justice system. Programming is implemented in the following counties: Morgan, Salt Lake, Tooele, Utah, and Weber. Sub-grantees provide programming in both school- and community-based settings, and are using the following four curricula: <u>Choosing the Best, Making a Difference!</u>, <u>Teen Outreach Program (TOP)</u>, and <u>WAIT (Why Am I Tempted) Training</u>. 33

Competitive Abstinence Education (CAE) Grant

Administered by the ACF, the 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 Utah.

Utah TPPI, DASH, PAF, PREP, Title V AOUM, and CAE Funding in FY 2013

Grantee	Award	Fiscal Years
Division of Adolescent and School Health (DASH)		
Utah Department of Health	\$59,635	2013–2017
TOTAL	\$59,635	
Personal Responsibility Education Program (PREP)		
PREP State-Grant Program		
State of Utah, Department of Health, Division of Family		
Health and Preparedness (federal grant)	\$526,292	2013
TOTAL	\$526,292	
Title V Abstinence-Only-Until-Marriage Program (Title V AOUM)		
State of Utah, Department of Health, Division of Family	·	·
Health and Preparedness (federal grant)	\$385,593	2013
TOTAL	\$385,593	
GRAND TOTAL	\$971,520	2013

POINTS OF CONTACT

Adolescent Health Contact³⁴

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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 Utah Code §§ 53A-13-101(1)(b)(i)(A) and (B), http://le.utah.gov/~code/TTTLE53A/htm/53A13 010100.htm.

³ Utah Code § 53A-13-101(1)(b)(ii), http://le.utah.gov/~code/TTTLE53A/htm/53A13_010100.htm.

⁴ Utah Code § 76-7-104(1), http://le.utah.gov/~code/TITLE76/htm/76 07 010400.htm.

⁵ Utah Code §§ 53A-13-101(1)(c)(iii)(A)(I)–(IV), http://le.utah.gov/~code/TITLE53A/htm/53A13_010100.htm.

⁶ Utah Admin. Code § R277-474-5(A), http://www.rules.utah.gov/publicat/code/r277/r277-474.htm.

⁷ Elementary Core Curriculum: Responsible Healthy Lifestyles 3–6 (Salt Lake City, UT: Utah State Office of Education, 1997), accessed April 15, 2010, http://www.schools.utah.gov/CURR/healthpe/Core-Curriculum/3-6HealthCore.aspx, 6.

⁸ Secondary Health Core Curriculum (Salt Lake City, UT: Utah State Office of Education, 1997), accessed April 15, 2010, http://bit.ly/ligyUO0, 11.

⁹ Ibid., 2.

¹⁰ Utah Admin. Code § R277-474-5(C).

¹¹ Utah Code § 53A-13-101(1)(c)(iii)(A).

¹² Utah Code § 53A-13-101(1)(c)(iii)(B).

- ¹⁷ Martin, J.A., et al., *Births: Final Data for 2012*. National Vital Statistics Reports, Vol. 62, No. 9 (December 30, 2013), accessed July 30, 2014, http://www.cdc.gov/nchs/data/nvsr/nvsr62/nvsr62 09.pdf, Table 12.
- ¹⁸ Centers for Disease Control and Prevention, VitalStats Interactive Data Tables, Hyattsville, MD: National Center for Health Statistics, http://www.cdc.gov/nchs/vitalstats.htm.
- ¹⁹ Kost, K., and S. Henshaw, U.S. Teenage Pregnancies, Births, and Abortions, 2010: State Trends by Age, Race, and Ethnicity (New York: Guttmacher Institute, 2014), accessed July 8, 2014, http://www.guttmacher.org/pubs/USTPtrendsState08.pdf, Table 3.1.

 ²⁰ Ibid., Table 3.2.
- ²¹ 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.ly/1dbYpAI.
- ²² 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, http://bit.ly/1dbYpAI.
- ²³ 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, <a href="http://bit.ly/1dbYpA].
- ²⁴ 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.lv/1dbYpAI.
- ²⁵ NCHHSTP Atlas, "STD Surveillance Data" (Atlanta, GA: Centers for Disease Control and Prevention), accessed June 10, 2013, http://gis.cdc.gov/GRASP/NCHHSTPAtlas/main.html.
- 26 Ibid.27 Ibid.
- ²⁸ Specific funding amounts are not available. Sub-grantees include: Bear River Health Department, Boys & Girls Clubs of Greater Salt Lake, Centro Hispano in Utah County, City of Moab (Club Red: Moab Teen Center), Teen Mother and Child Program, and Weber-Morean Health Department.
- ²⁹ Information provided by Elizabeth Gerke, PREP and abstinence-education coordinator, Maternal and Infant Health Program, Utah Department of Health, June 2, 2014.
- 30 Ibid.
- ³¹ Sub-grantees include: Midvale Community Building Community Initiative (\$50,000), National Tongan American Society (\$62,412), Planned Parenthood Association of Utah (\$61,212), Pregnancy Resource Center of Salt Lake (\$69,180), Tooele County Health Department (\$49,536); Utah County Health Department (\$35,826), and Weber-Morgan Health Department (\$75,826).
- ³² Information provided by Elizabeth Gerke, PREP and abstinence-education coordinator, Maternal and Infant Health Program, Utah Department of Health, July 18, 2014.
- ³³ Ibid.
- ³⁴ The person listed represents the designated personnel in the state responsible for adolescent reproductive health.

¹³ Utah Admin. Code § R277-474-1(H).

¹⁴ Kann, Laura, et al., "Youth Risk Behavior Surveillance—United States, 2013," *Surveillance Summaries, Morbidity and Mortality Weekly Report*, Vol. 63, No. 4 (June 13, 2014): accessed July 17, 2014, http://www.cdc.gov/mmwr/pdf/ss/ss6304.pdf. Note: Utah did not participate in the full 2013 YRBS.

¹⁵ Kost, K., and S. Henshaw, U.S. Teenage Pregnancies, Births, and Abortions, 2010: State Trends by Age, Race, and Ethnicity (New York: Guttmacher Institute, 2014), accessed July 8, 2014, http://www.guttmacher.org/pubs/USTPtrendsState08.pdf, Table 3.1.

¹⁶ Ibid., Table 3.2.