



ALASKA

In Fiscal Year 2011¹, the state of Alaska received:

- Teen Pregnancy Prevention Initiative funds totaling \$599,985
- Personal Responsibility Education Program funds totaling \$250,000

In Fiscal Year 2011, local entities in Alaska received:

- Tribal Personal Responsibility Education Program funds totaling \$230,420

SEXUALITY EDUCATION LAW AND POLICY

Alaska does not have a law that governs sexuality education; therefore, schools are not required to teach sexuality or sexually transmitted disease (STD) education. However, the Department of Education supports “Programs that Work,” a list of evidence-based curricula compiled by the U.S. Centers for Disease Control and Prevention (CDC).² The department explains that it, “does not endorse specific curricula, but seeks to provide districts with the most up-to-date materials and research-based programs so schools can evaluate what best meets the needs of their student population.”³

In addition, the “Skills for a Healthy Life” section of the *Content and Performance Standards for Alaska Students* state that students should, among other things:

- understand the physical and behavioral characteristics of human sexual development and maturity;
- develop an awareness of how personal life roles are affected by and contribute to the well-being of families, communities, and cultures;
- understand how respect for the rights of self and others contributes to relationships; and
- take responsible actions to create safe and healthy environments.⁴

Alaska neither requires 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 *Content and Performance Standards for Alaska Students*.

RECENT LEGISLATION

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

YOUTH SEXUAL HEALTH DATA

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

Alaska Youth Risk Behavior Survey (YRBS) Data⁵

- In 2011, 37% of female high school students and 39% of male high school students in Alaska reported ever having had sexual intercourse, compared to 46% of female high school students and 49% of male high school students nationwide.
- In 2011, 2% of female high school students and 6% of male high school students in Alaska reported having had sexual intercourse before age 13, compared to 3% of female high school students and 9% of male high school students nationwide.
- In 2011, 8% of female high school students and 12% of male high school students in Alaska reported having had four or more lifetime sexual partners, compared to 13% of female high school students and 18% of male high school students nationwide.
- In 2011, 26% of female high school students and 24% of male high school students in Alaska reported being currently sexually active (defined as having had sexual intercourse in the three months prior to the survey), compared to 34% of female high school students and 33% of male high school students nationwide.
- In 2011, among those high school students who reported being currently sexually active, 55% of females and 64% of males in Alaska reported having used condoms the last time they had sexual intercourse, compared to 54% of females and 67% of males nationwide.
- In 2011, among those high school students who reported being currently sexually active, 21% of females and 16% of males in Alaska reported having used birth control pills the last time they had sexual intercourse, compared to 23% of females and 13% of males nationwide.
- In 2011, among those high school students who reported being currently sexually active, 16% of females and 21% of males in Alaska reported having used alcohol or drugs the last time they had sexual intercourse, compared to 18% of females and 26% of males nationwide.
- In 2011, 82% of high school students in Alaska reported having been taught about AIDS/HIV in school, compared to 84% of high school students nationwide.

Alaska Teen Pregnancy, HIV/AIDS, and Sexually Transmitted Disease Data

Teen Pregnancy, Birth, and Abortion

- In 2010, Alaska's teen birth rate ranked 18th (tied) in the United States, with a rate of 38.3 births per 1,000 young women ages 15–19, compared to the national rate of 34.3 births per 1,000.⁶ In 2010, there were a total of 956 live births to young women ages 15–19 reported in Alaska.⁷

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- In 2005, Alaska's teen pregnancy rate ranked 31st in the United States, with a rate of 61 pregnancies per 1,000 young women ages 15–19, compared to the national rate of 70 pregnancies per 1,000.⁸ In 2005, there were a total of 1,690 pregnancies among young women ages 15–19 in Alaska.⁹
- In 2005, Alaska's teen abortion rate ranked 25th in the United States, with a rate of 15 abortions per 1,000 young women ages 15–19, compared to the national rate of 19 abortions per 1,000.¹⁰

HIV and AIDS

- In 2010, the rate of diagnoses of HIV infection among adolescents aged 13-19 years in Alaska was 0.0 per 100,000 compared to the national rate of 7.9 per 100,000.¹¹
- In 2010, the rate of AIDS diagnoses among adolescents 13-19 years in Alaska was 0.0 per 100,000 compared to the national rate of 1.9 per 100,000.¹²
- In 2010, the rate of diagnoses of HIV infection among young adults aged 20-24 years in Alaska was 11.2 per 100,000 compared to the national rate of 36.9 per 100,000.¹³
- In 2010, the rate of AIDS diagnoses among young adults aged 20-24 years in Alaska was 7.8 per 100,000 compared to the national rate of 10.4 per 100,000.¹⁴

Sexually Transmitted Diseases

- In 2009, Alaska ranked sixth in the United States for reported cases of chlamydia among young people ages 15–19, with an infection rate of 28.23 cases per 1,000, compared to the national rate of 20.03 cases per 1,000. In 2009, there were a total of 1,486 cases of chlamydia among young people ages 15–19 reported in Alaska.¹⁵
- In 2009, Alaska ranked 25th in the United States for reported cases of gonorrhea among young people ages 15–19, with an infection rate of 3.31 cases per 1,000, compared to the national rate of 4.04 cases per 1,000. In 2009, there were a total of 174 cases of gonorrhea among young people ages 15–19 reported in Alaska.¹⁶

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 \$105 million in discretionary funding for FY 2011. 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 Alaska.

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 is one TPPI Tier 2 Innovative Approaches grantee in Alaska, the State of Alaska Department of Health and Social Services, Division of Public Health which received \$599,985 for FY 2011.

State of Alaska Department of Health and Social Services, Division of Public Health \$599,985 (FY 2011)

The Section of Women's, Children's and Family Health of the Division Public Health in the Alaska Department of Health and Social Services administers the state's Tier 2 grant. With the Tier 2 funds, the department implements an adaptation of *Promoting Health Among Teens!—Comprehensive*, using trained peer educators. The program serves at-risk youth ages 11–19 in five communities throughout Alaska, including young people in the juvenile justice system or in foster care, who are living in behavioral residential care facilities or transitional housing, and who attend alternative high schools. The program also serves Alaska Native youth in rural areas that experience high rates of teen pregnancy. The program plans to serve approximately 225 young people each year.

Promoting Health Among Teens! Comprehensive Version is an evidence-based STD-, HIV-, and pregnancy-prevention curriculum originally designed for use with African-American students in grades 6 and 7. It is designed to improve awareness and knowledge about HIV/STIs; increase understanding of how abstinence can prevent pregnancy, STIs, and HIV; strengthen behavioral beliefs that support condom use; and build refusal and negotiation skills for practicing abstinence as well as for effective condom use. The program consists of up to 12 modules and is designed to be delivered over two or three consecutive sessions for a period of eight or 12 hours. The program is structured around group discussions, videos, games, brainstorming activities, skill-building, and experiential exercises¹⁷. An evaluation of the program published in *Archives of Pediatrics & Adolescent Medicine* found that program participants were significantly less likely to report having had multiple sexual partners in the previous three months and reported significant reduction in the incidence of recent sexual intercourse at the 24 month follow up. The evaluation indicates that the *Promoting Health Among Teens! Comprehensive* intervention was especially effective with sexually experienced adolescents¹⁸.

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) implement the grant program in partnership with OAH.

- There are no TPPI Tier 2 Communitywide Initiatives grantees in Alaska.

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, \$3.5 million for the Tribal PREP Program for tribes and tribal organizations, and \$6.5 million for evaluation, training, and technical assistance. Details on the state-grant program, PREIS, and Tribal PREP 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 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 State of Alaska Department of Health and Social Services, Division of Public Health received \$250,000 in federal PREP funds for FY 2011.
- There is one sub-grantee for the Alaska PREP state-grant program: The Alaska Department of Education (\$150,000).¹⁹

The Alaska PREP state-grant program is implemented through a partnership between the Department of Health and Social Services, Section of Women’s, Children’s and Family Health, and the Department of Education and Early Development, Section of Teaching and Learning Support. Through the partnership, the Department of Health and Social Services provides training and technical assistance directly to school districts to implement *Fourth R—Alaska Perspectives* in traditional and alternative middle and high schools.²⁰

Fourth R—Alaska Perspectives is an adaptation of *The Fourth R: Relationship Based Violence Prevention*, a Canadian curriculum and comprehensive school health program focused on reducing violence, substance abuse, and sexual risk behavior among youth. The concept of the “Fourth R” is to elevate teaching about relationships in school to the level of the other three R’s: Reading, wRiting, and aRithmetic. The curriculum is a medically accurate and evidence-based intervention that includes information on adolescent growth and development, healthy relationships, violence prevention, abstinence, contraception, and healthy sexuality among other topics. *Fourth R—Alaska Perspectives* is specifically adapted from *The Fourth R—Aboriginal Perspectives*, which, along with the core content, addresses the unique cultural needs of Alaska Native youth. The curriculum is delivered to students in grades seven through 10 and implemented in English and physical education courses.²¹

Teachers have already received training on the curriculum in the following areas of the state: Aleutians East Borough, Anchorage, Fairbanks, Juneau, Ketchikan, Matanuska-Susitna Borough, North Slope Borough, Sitka, Yukatat, and Yupitt. Through the PREP state-grant program, the health department intends to expand implementation of *The Fourth R* to additional areas of the state.²²

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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 Alaska.

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 youth 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 2011, 16 tribes and tribal organizations from nine states received a total of \$6.5 million.
- The Poarch Band of Creek Indians received \$230,420 in Tribal PREP funds for FY 2011. At the time of publication, more information on this grantee was not available.

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 FYs 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.

- Alaska chose not to apply for Title V abstinence-only funds for FY 2011.

Alaska TPPI, PREP, and Title V Abstinence-Only Funding in FY 2011

Grantee	Award	Fiscal Years
Teen Pregnancy Prevention Initiative (TPPI)		
<i>TPPI Tier 2: Innovative Approaches</i>		
State of Alaska, Department of Health and Human Services	\$599,985	2010–2014
TOTAL	\$599,985	
Personal Responsibility Education Program (PREP)		
<i>PREP State-Grant Program</i>		
State of Alaska Department of Health and Social Services (federal grant)	\$250,000	2011
TOTAL	\$250,000	

<i>Tribal Personal Responsibility Education Program</i>		
Poarch Band of Creek Indians	\$230,420	2011
TOTAL	\$230,420	
GRAND TOTAL	\$1,080,405	2011

COMPREHENSIVE APPROACHES TO SEXUALITY EDUCATION

SIECUS has identified some examples of model programs, policies, and best practices being implemented in Alaska public schools that provide a more comprehensive approach to sex education for young people.²³

Comprehensive Sex Education Programs in Public Schools

The Section of Women's, Children's and Family Health of the State of Alaska Department of Health and Social Services, Division of Public Health, provides teacher training and technical assistance to school districts across the state to implement medically accurate and evidence-based sexuality education programming in middle and high schools. The curriculum used, *Fourth R—Alaska Perspectives*, provides a comprehensive approach to sexuality education and focuses on reducing risk behaviors and encouraging healthy relationships among youth. (Please see the PREP State-Grant Program section above for more information.)

Northwest Coalition for Adolescent Health

The Northwest Coalition for Adolescent Health provides evidence-based teen pregnancy prevention programming to youth in school and community-based settings across five states in the Northwest. The coalition consists of six Planned Parenthood affiliates, including Planned Parenthood of the Great Northwest, Planned Parenthood of Greater Washington and North Idaho, Planned Parenthood of Columbia Willamette, Planned Parenthood of Montana, Planned Parenthood of Southwest Oregon, and Mt. Baker Planned Parenthood.

The coalition provides programming to young people with the support of a TPPI Tier 1 grant totaling \$4,000,000 over five years. Programming targets high-risk African American, Native American, Russian, and Ukrainian youth in grades seven through 12 living in both rural and urban communities with substantially high teen birth and pregnancy rates and health disparities. The coalition will implement *Teen Outreach Program (TOP)* at 73 schools and community agencies in 27 counties across Alaska, Idaho, Montana, Oregon, and Washington. Approximately 2,000 youth will be served annually through the program.

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.”²⁴ 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.²⁵ 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.²⁶

TOP will be primarily implemented during classroom instruction while in some communities the program will be implemented as after-school programming. Participants will meet once a week for a minimum of 25 meetings over the nine-month period of the program. The service-learning component will take place on weekday evenings and on weekends.²⁷

We encourage you to submit any updated or additional information on comprehensive approaches to sex education being implemented in Alaska public schools for inclusion in future publications of the State Profiles. Please visit SIECUS' "Contact Us" webpage at www.siecus.org to share information. Select "state policy" as the subject heading.

POINTS OF CONTACT

Adolescent Health Contact²⁸

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PREP State-Grant Coordinator

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Phone: (907) 269-4517

ORGANIZATIONS THAT SUPPORT COMPREHENSIVE SEXUALITY EDUCATION

ACLU of Alaska
Anchorage, AK
Phone: (907) 276-2258
www.akclu.org

The Interior AIDS Association
Fairbanks, Alaska
Phone: (907) 452-IAAA
www.interioraids.org

Alaska Alliance for Reproductive Justice
Anchorage, AK
Phone (907) 334-3055
www.alaskaprochoice.org

Juneau Pro-Choice Coalition
Juneau, AK
Planned Parenthood Juneau Telephone:
(800) 230-7526
www.juneauchoice.com

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The Gay, Lesbian and Straight Education
Network of Fairbanks
Fairbanks, AK
www.angelfire.com/biz3/glsen

Planned Parenthood of Alaska
Anchorage, AK
Phone: (907) 563-2229
www.plannedparenthoodalaska.org

ORGANIZATIONS THAT OPPOSE COMPREHENSIVE SEXUALITY EDUCATION

Alaska Interior Right to Life
Fairbanks, AK
Phone: (907) 479-LIFE
www.interiorrighttolife.org

Alaska Right to Life
Anchorage, AK
Phone: (907) 276-1912
www.alaskarighttolife.org

MEDIA OUTLETS

Newspapers in Alaska²⁹

Anchorage Daily News
Anchorage, AK
Phone: (907) 257-4300
www.adn.com

Fairbanks Daily News-Miner
Fairbanks, AK
Phone: (907) 459-7572
www.newsminer.com

Juneau Empire
Juneau, AK
Phone: (907) 586-3740
www.juneauempire.com

Ketchikan Daily News
Ketchikan, AK
Phone: (907) 225-3157
www.ketchikandailynews.com

Kodiak Daily Mirror
Kodiak, AK
Phone: (907) 486-3227 ext. 1037
www.kodiakdailymirror.com

Peninsula Clarion
Kenai, AK
Phone: (907) 283-7551
www.peninsulaclarion.com

Political Blogs in Alaska

The Back Porch
www.thebackporchak.blogspot.com

Bent Alaska
www.bentalaska.com

Blue Oasis
www.divasblueoasis.com

The Immoral Minority
www.theimmoralminority.blogspot.com

OMFG Alaska
www.omfgalaska.blogspot.com

Progressive Alaska
www.progressivealaska.blogspot.com

We're Not That Stupid
www.werenotthatstupid.blogspot.com

What Do I Know?
www.whatdoi-no-steve.blogspot.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 2011 began on October 1, 2010, and ended on September 30, 2011.

² The CDC no longer sponsors "Programs That Work." Although these programs were proven effective, information about them has been removed from the CDC website. For more information, contact SIECUS.

³ State of Alaska Department of Education & Early Development, "School Health: Other Health Education Programs and Related Information."

⁴ "Content and Performance Standards for Alaska Students," Alaska State Board of Education, p24–27, <http://www.eed.state.ak.us/standards/pdf/standards.pdf#page=26>.

⁵ Danice K. Eaton, 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>.

⁶ "Birth rate for U.S. teenagers reach historic lows for all age and ethnic groups," NCHS data brief, no. 89, (Hyattsville, MD: National Center for Health Statistics, 2012), accessed June 27, 2012,

<http://www.cdc.gov/nchs/data/databriefs/db89.pdf>, Data table for figure 6.

⁷ Ibid.

⁸ U.S. *Teenage Pregnancies, Births, and Abortions: National and State Trends and Trends by Race and Ethnicity*, (Washington, DC: Guttmacher Institute, January 2010), accessed May 7, 2012, <http://www.guttmacher.org/pubs/USTPtrends.pdf>, Table 3.1.

⁹ Ibid., Table 3.2.

¹⁰ U.S. *Teenage Pregnancies, Births, and Abortions: National and State Trends and Trends by Race and Ethnicity*, Table 3.1.

¹¹ Slide 9: "Rates of Diagnoses of HIV Infection among Adolescents Aged 13–19 Years, 2010—46 States and 5 U.S. Dependent Areas," *HIV Surveillance in Adolescents and Young Adults*, (Atlanta, GA: Centers for Disease Control and Prevention), accessed January 3, 2013, <http://www.cdc.gov/hiv/topics/surveillance/resources/slides/adolescents/index.htm>.

¹² Slide 18: "Rates of AIDS Diagnoses among Adolescents Aged 13–19 Years, 2010—United States and 6 U.S. Dependent Areas," *HIV Surveillance in Adolescents and Young Adults*, (Atlanta, GA: Centers for Disease Control and Prevention), accessed January 3, 2013, <http://www.cdc.gov/hiv/topics/surveillance/resources/slides/adolescents/index.htm>.

¹³ Slide 10: "Rates of Diagnoses of HIV Infection among Young Adults Aged 20–24 Years, 2010—46 States and 5 U.S. Dependent Areas," *HIV Surveillance in Adolescents and Young Adults*, (Atlanta, GA: Centers for Disease Control and Prevention), accessed January 3, 2013, <http://www.cdc.gov/hiv/topics/surveillance/resources/slides/adolescents/index.htm>.

¹⁴ Slide 19: "Rates of AIDS Diagnoses among Young Adults Aged 20–24 Years, 2010—United States and 6 U.S. Dependent Areas," *HIV Surveillance in Adolescents and Young Adults*, (Atlanta, GA: Centers for Disease Control and Prevention), accessed January 3, 2013, <http://www.cdc.gov/hiv/topics/surveillance/resources/slides/adolescents/index.htm>.

¹⁵ "Wonder Database: Sexually Transmitted Disease Morbidity for selected STDs by age, race/ethnicity and gender 1996–2009 Results," (Atlanta, GA: Centers for Disease Control and Prevention, June 2011), accessed December 18, 2012, <http://wonder.cdc.gov>.

¹⁶ Ibid.

¹⁷ "Pregnancy Prevention Intervention Implementation Report: Promoting Health Among Teens—Comprehensive Abstinence and Safer Sex Intervention (PHAT—Comprehensive)," Programs for Replication – Intervention Implementation Reports, U.S. Department of Health and Human Services, accessed January 11, 2013, http://www.hhs.gov/ash/oah/oah-initiatives/tpp/programs/comprehensive_intervention.pdf.

¹⁸ Jemmott, J. B., III, Jemmott, L. S., & Fong, G. T. (2010). *Efficacy of a Theory-Based Abstinence-Only Intervention Over 24 Months: A Randomized Controlled Trial with Young Adolescents*. *Archives of Pediatrics & Adolescent Medicine*, 164(2), 152-159.

¹⁹ Information provided by Sophie Wenzel, Adolescent Health Program Manager for the Alaska Department of Health and Social Services, Division of Public Health, August 24, 2012.

²⁰ Ibid.

²¹ Ibid.

²² Ibid.

²³ This is by no means a complete list of all comprehensive programming and policies related to sexuality education, but rather some examples of best practices and model programs that SIECUS identified.

²⁴ 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 July 1, 2011, <http://wymancercenter.org/wordpress/wp-content/uploads/2011/08/TOP-Promoting-Positive-Well-Being-in-Adolescents.pdf>, 3.

²⁵ Ibid, 9.

²⁶ "Pregnancy Prevention Intervention Implementation Report: Teen Outreach Program," Programs for Replication – Intervention Implementation Reports, U.S. Department of Health and Human Services, accessed July 1, 2011, http://www.hhs.gov/ash/oah/oah-initiatives/tpp/programs/teen_outreach_program.pdf.

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²⁷ Information provided by Willa Marth, Director of Education and Organizational Effectiveness for Planned Parenthood of the Great Northwest, June 21, 2011.

²⁸ The person listed represents the designated personnel in the state responsible for adolescent reproductive health.

²⁹ This section is a list of major newspapers in the state and is by no means exhaustive of local print outlets.