



## ARIZONA

**In Fiscal Year 2010<sup>1</sup>, the state of Arizona received:**

- **Personal Responsibility Education Program funds totaling \$1,099,599**
- **Title V State Abstinence Education Program funds totaling \$1,260,254**

**In Fiscal Year 2010, local entities in Arizona received:**

- **Teen Pregnancy Prevention Initiative funds totaling \$1,337,803**
- **Personal Responsibility Education Innovative Strategies funds totaling \$1,337,060**

### SEXUALITY EDUCATION LAW AND POLICY

Arizona law does not require schools to teach sexuality education or sexually transmitted disease (STD)/HIV education. However, Arizona law does state that if a school chooses to teach these topics, instruction must be age-appropriate and must stress abstinence. Further, if a school chooses to teach HIV education, such instruction must be medically accurate, but cannot promote a “homosexual lifestyle,” portray “homosexuality as a positive alternative life-style,” or “suggest that some methods of sex are safe methods of homosexual sex.”<sup>2</sup>

Arizona Administrative Code R7-2-303 states that schools may “provide a specific elective lesson or lessons concerning sex education as a supplement to the health course of study.” Schools that choose to provide sex education must have the lessons approved by the local governing board.<sup>3</sup> All sex education materials and instruction that discuss sexual intercourse must:

- stress that pupils should abstain from sexual intercourse until they are mature adults;
- emphasize that abstinence from sexual intercourse is the only method for avoiding pregnancy that is 100% effective;
- stress that sexually transmitted diseases have severe consequences and constitute a serious and widespread public health problem;
- include a discussion of the possible emotional and psychological consequences of preadolescent and adolescent sexual intercourse and the consequences of preadolescent and adolescent pregnancy;
- promote honor and respect for monogamous heterosexual marriage; and
- advise pupils of Arizona law pertaining to the financial responsibilities of parenting and legal liabilities related to sexual intercourse with a minor.<sup>4</sup>

In Arizona, parents or guardians may remove their children from sexuality or STD/HIV instruction. This is referred to as an “opt-out” policy. If a school chooses to provide a supplemental sexuality

education course, the state requires written consent from parents before students may attend. This is referred to as an “opt-in” policy.

See Arizona Revised Statutes §§ 15-711, 15-716, 15-102 and Arizona Administrative Code § R7-2-303.

## RECENT LEGISLATION

### *Bill to Strengthen Anti-bullying Policies*

House Bill 2268, introduced in January 2011, would have required that each school district’s governing board enforce policies and procedures to prohibit the harassment, intimidation, or bullying of students based on actual or perceived sexual orientation. The bill was assigned to the House Committees on Education, Judiciary, and Rules. The bill did not move out of committee and subsequently died.

### *Bill to Require Comprehensive Sex Education*

Senate Bill 1457, introduced in February 2011, would have amended the state’s sex education law to require all school districts with existing sex education curricula to provide instruction that is “medically accurate and comprehensive.” The bill would have also removed the stipulations that sexuality education courses may not include instruction that “promotes a homosexual life-style; portrays homosexuality as a positive alternative life-style; [or] suggests that some methods of sex are safe methods of homosexual sex.” The bill was assigned to the Senate Committee on Education and the Committee on Rules. The bill did not move out of committee and subsequently died.

## YOUTH SEXUAL HEALTH DATA

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

### **Arizona Youth Risk Behavior Survey (YRBS) Data<sup>5</sup>**

- In 2009, 45% of female high school students and 52% of male high school students in Arizona reported ever having had sexual intercourse compared to 46% of female high school students and 46% of male high school students nationwide.
- In 2009, 3% of female high school students and 8% of male high school students in Arizona 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, 10% of female high school students and 17% of male high school students in Arizona 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, 34% of female high school students and 34% of male high school students in Arizona 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, 50% of females and 71% of males in Arizona 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, 16% of females and 18% of males in Arizona 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, 16% of females and 28% of males in Arizona reported having used alcohol or drugs the last time they had sexual intercourse compared to 17% of females and 26% of males nationwide.

### **Arizona Teen Pregnancy, HIV/AIDS, and Sexually Transmitted Disease Data**

#### *Teen Pregnancy, Birth, and Abortion*

- Arizona's teen birth rate currently ranks 6<sup>th</sup> in the United States, with a rate of 56.2 births per 1,000 young women ages 15–19 compared to the national rate of 41.5 births per 1,000.<sup>6</sup> In 2008, there were a total of 7,877 live births reported to young women ages 15–19 in Arizona.<sup>7</sup>
- In 2005, Arizona's teen pregnancy rate ranked 4<sup>th</sup> in the United States, with a rate of 89 pregnancies per 1,000 young women ages 15–19 compared to the national rate of 70 pregnancies per 1,000.<sup>8</sup> There were a total of 18,100 pregnancies among young women ages 15–19 reported in Arizona.<sup>9</sup>
- In 2005, Arizona's teen birth rate ranked 6<sup>th</sup> in the United States, with a rate of 58.2 births per 1,000 young women ages 15–19 compared to the national rate of 40.5 births per 1,000.<sup>10</sup> There were a total of 11,828 live births reported to young women ages 15–19 in Arizona.<sup>11</sup>
- In 2005, Arizona's teen abortion rate ranked 18<sup>th</sup> in the United States, with a rate of 17 abortions per 1,000 young women ages 15–19 compared to the national rate of 19 abortions per 1,000.<sup>12</sup>

#### *HIV and AIDS*

- Arizona's HIV infection rate ranks 14<sup>th</sup> in the United States, with a rate of 14.3 cases per 100,000 individuals compared to the national rate of 19.5 cases per 100,000.<sup>13</sup>
- Arizona ranks 11<sup>th</sup> in cases of HIV infection diagnosed in the United States among all age groups. In 2008, there were a total of 928 new cases of HIV infection diagnosed in Arizona.<sup>14</sup>
- Arizona's HIV infection rate among young people ages 13–19 ranks 25<sup>th</sup> in the United States, with a rate of 4.5 cases per 100,000 young people compared to the national rate of 9.1 cases per 100,000.<sup>15</sup>
- Arizona ranks 17<sup>th</sup> in number of reported AIDS cases in the United States among all age groups. In 2008, there were a total of 589 new AIDS cases reported in Arizona.<sup>16</sup>

- Arizona’s AIDS rate ranks 19<sup>th</sup> in the United States, with a rate of 9.1 cases per 100,000 individuals compared to the national rate of 12.3 cases per 100,000.<sup>17</sup>
- Arizona’s AIDS rate among young people ages 13–19 ranks 34<sup>th</sup> in the United States, with a rate of 0.7 cases per 100,000 young people compared to the national rate of 1.8 cases per 100,000.<sup>18</sup>

*Sexually Transmitted Diseases*

- Arizona ranks 25<sup>th</sup> in reported cases of Chlamydia among young people ages 15–19 in the United States, with an infection rate of 18.76 cases per 1,000 compared to the national rate of 19.51 cases per 1,000. In 2008, there were a total of 8,176 cases of Chlamydia reported among young people ages 15–19 in Arizona.<sup>19</sup>
- Arizona ranks 36<sup>th</sup> in reported cases of gonorrhea among young people ages 15–19 in the United States, with an infection rate of 1.73 cases per 1,000 compared to the national rate of 4.52 cases per 1,000. In 2008, there were a total of 756 cases of gonorrhea reported among young people ages 15–19 in Arizona.<sup>20</sup>
- Arizona ranks 16<sup>th</sup> in reported cases of primary and secondary syphilis among young people ages 15–19 in the United States, with an infection rate of 0.03 cases per 1,000 compared to the national rate of 0.04 cases per 1,000. In 2008, there were a total of 14 cases of syphilis reported among young people ages 15–19 in Arizona.<sup>21</sup>

**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.

- Local entities in Arizona received \$1,337,803 in TPPI Tier 1 funding for Fiscal Year 2010.
- There are two TPPI Tier 1 grantees in Arizona: Maricopa County Department of Public Health and Touchstone Behavioral Health.

Maricopa County, \$859,620 (2010–2014)

The Maricopa County Department of Public Health, Family Health Partnerships (FHP) program is responsible for coordinating Maricopa County’s TPPI Tier 1 grant program. FHP “creates sustainable partnerships with communities, providers, and agencies to improve the maternal and child health of Maricopa County through health education.”<sup>22</sup> Maricopa County is the county seat of Phoenix, Arizona.

With its TPPI funding, Maricopa County replicates *Teen Outreach Program (TOP)* in schools and community-based settings across Phoenix. *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.”<sup>23</sup> 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.<sup>24</sup> 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.<sup>25</sup>

The Maricopa County program targets youth ages 14–18 and provides programming at 12 different community sites, including but not limited to, after-school clubs, detention centers, and three high schools in the Maryvale community.<sup>26</sup> The program also includes field trips, community service projects, and “interactive discussions about real life issues that teens face every day.”<sup>27</sup> FHP encourages parent involvement and conducts outreach to the parents of teenagers in order to support them in “understanding adolescent development, encouraging positive behaviors and reducing risky activities, strengthening connections between youth and...adult caregivers, promoting family cohesiveness,” and “providing parental guidance and encouraging healthy limit setting.”<sup>28</sup> Maricopa County plans for the program to reach approximately 300 youth per year.

Touchstone Behavioral Health, \$478,183 (2010–2014)

Touchstone Behavioral Health is a juvenile behavioral health organization with clinics in Mesa and Phoenix and a behavioral treatment center in Phoenix. The organization provides preventive programs and behavioral health services to youth and families in Maricopa County. Touchstone’s mission is to partner “with youth and their families to provide evidence-based services and support to help them acquire the skills to live productive and responsible lives.”<sup>29</sup>

With its TPPI funding, Touchstone provides programming to Latino youth ages 13–18 residing in the Maryvale community. The program uses *¡Cuidate!*, an evidence-based HIV-prevention curriculum adapted from the evidence-based curriculum, *Be Proud! Be Responsible!*, and tailored for use with Latino youth ages 13–18. The curriculum provides information about HIV and its transmission, addresses values and beliefs related to HIV and safer sex, and includes activities aimed to increase skills and self-efficacy for condom use, negotiating abstinence, and safer sex. The intervention consists of six, one-hour lessons and is designed for use with small, mixed-gender groups. It draws upon cultural beliefs, such as the importance of family and the responsibility of a man to care for his family, in order to provide messages that resonate with participants. The curriculum consists of educational games, small group discussions, videos, learning exercises, and skill-building activities. An evaluation of the curriculum published in the *Archives of Pediatrics & Adolescent Medicine* found that it reduced the frequency of sexual intercourse, number of sexual partners, and incidence of unprotected sex, while increasing condom use, among participants.<sup>30</sup>

The organization implements the program in schools, community centers, and faith-based organizations. Touchstone plans for its program to reach approximately 720 youth per year.

*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 Arizona.

*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 Arizona.

**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 Arizona Department of Health Services received \$1,099,599 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 Arizona Department of Health Services will award funding to local public and private entities to implement programming to young people ages 12–19 residing in the Greater Phoenix area, the Greater Tucson area, and select areas in Pinal and Santa Cruz counties. Funding will support the implementation of evidence-based programs in school- and community-based settings. The department has approved the following program models for use: *Be Proud! Be Responsible! Be Protective!*; *¡Cuidate!*; *Draw the Line/Respect the Line*; *Making Proud Choices!*; *Reducing the Risk*; and *Teen Outreach Program (TOP)*.<sup>31</sup> (Please see the *TPPI Tier 1: Evidence-Based Programs* section above for descriptions of *¡Cuidate!* and *TOP*.)

*Be Proud! Be Responsible! Be Protective!* is an evidence-based program that targets pregnant and parenting teens and focuses on the concept of maternal protectiveness to encourage adolescent mothers and soon-

to-be mothers to make healthy sexual decisions; take responsibility and be accountable for their sexual activity; and decrease risky sexual behavior. The curriculum is an adaptation of *Be Proud! Be Responsible!*, an evidence-based HIV-prevention curriculum designed for African-American males. *Be Proud! Be Responsible! Be Protective!* discusses the impact of HIV/AIDS on inner-city communities and particularly addresses its impact on pregnant women and their children, providing information on preventing transmission during pregnancy and the postpartum period. The curriculum consists of eight, one-hour lessons and uses interactive activities, group discussion, and videos to educate participants. It covers such topics as HIV risk and prevention; family planning and parenting; communication; attitudes and beliefs about HIV/AIDS and safer sex; condom use skills; stress and emotion management; and staying healthy. The intervention can be delivered in four, two-hour sessions or over the course of eight days and is appropriate for use in school-based settings.<sup>32</sup> An evaluation of the program published in *Family and Community Health* found, at a six-month follow-up, that program participants reported having significantly fewer sexual partners during the previous three months than participants in the control group.<sup>33</sup>

*Draw the Line/Respect the Line* is an evidence-based program designed to teach youth in grades six through eight to postpone sexual involvement while providing information about condoms and contraception. The school-based curriculum consists of 19 sessions divided between grades six through eight and includes group discussions, small group activities, and role playing exercises focused on teaching youth how to establish and maintain boundaries regarding sexual behavior. Lessons for sixth grade students address using refusal skills; lessons for the seventh grade focus on setting sexual limits, the consequences of unprotected sex, and managing sexual pressure; and eighth grade students practice refusal and interpersonal skills and receive HIV/STD-prevention education. The program also includes individual teacher consultations and parent engagement through homework activities. Although it is designed for use in the classroom, the program may also be delivered in a community-based setting. An evaluation of the program published in the *American Journal of Public Health* found, at a one-, two-, and three-year follow-up, that male participants were significantly less likely to report ever having had sexual intercourse or having had sexual intercourse during the previous 12 months compared to participants in the control group.<sup>34</sup>

*Making Proud Choices!* is an evidence-based STD-, HIV-, and pregnancy-prevention curriculum designed for use with African-American, Latino, and white adolescents ages 11–13. The curriculum aims to help youth understand the poor reasoning and decision making that can lead to STD/HIV infection and/or unintended pregnancy, as well as to increase their confidence, negotiation skills, and self-efficacy in using condoms. The program consists of eight, one-hour sessions and can be implemented in school- or community-based settings. *Making Proud Choices!* includes interactive and skill-building activities that are designed to “increase comfort with practicing condom use, address concerns about negative effects of practicing safer sex, and build skills in condom use and negotiation.”<sup>35</sup> An evaluation of the program published in the *Journal of the American Medical Association* showed that program participants reported more consistent condom use and less unprotected sex as well as a higher frequency of condom use than those in the control group.<sup>36</sup>

*Reducing the Risk: Building Skills to Prevent Pregnancy, STD and HIV* is an evidence-based, pregnancy-, STD-, and HIV-prevention curriculum designed for classroom use with students in the ninth and tenth grades. It is appropriate for use with multi-ethnic populations.<sup>37</sup> *Reducing the Risk* aims to reduce high-risk behaviors among participants and emphasizes strategies for abstaining from sex or practicing safer sex. The 16-lesson curriculum addresses both abstinence and contraception use and includes experiential activities that teach students to develop refusal, negotiation, and communication skills. An evaluation of the program published in *Family Planning Perspectives* found that it increased parent-child communication, especially among Latino youth, delayed the initiation of sexual intercourse, and reduced incidence of unprotected sex among lower-risk youth who participated in the program.<sup>38</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.

- Local entities in Arizona received \$1,337,060 in PREIS funds for Fiscal Year 2010.
- There are two PREIS grantees in Arizona: Child & Family Resources, Inc. and Teen Outreach Pregnancy Services.

Child & Family Resources, Inc., \$403,154 (2010–2014)

Child & Family Resources, Inc. is a private, community-based, non-profit organization that provides social services for children, youth, and families throughout southern Arizona. Its mission is to “make children’s lives better” by “promoting resilient children and families; excellent child care and education; and communities that value children and families.”<sup>39</sup> Among its youth programs, the organization provides sexual health education that “teaches teens about safe sex and how to make the best choices for themselves and their bodies.”

The organization uses its PREIS grant to implement and evaluate the *Go Grrrls* curriculum. Developed by Child & Family Services, Inc. and Arizona State University, *Go Grrrls* “is designed to help girls develop a lifelong perspective about living as a female in society” and aims to “provide a lasting base of information for girls transitioning from adolescent to adult life.”<sup>40</sup> The 14-hour curriculum addresses gender identity, positive body image, healthy peer relationships, responsible decision-making skills, sexuality, identifying health resources, and planning for the future.<sup>41</sup> The program serves 840 young women ages 12–14. Participants are drawn from a center against domestic violence, Girl Scout troupes, and three middle schools in Pima County, Arizona.

Teen Outreach Pregnancy Services, \$933,906 (2010–2014)

Teen Outreach Pregnancy Services (TOPS) is a community-based organization located in Tucson, Arizona that provides “teen-specific pregnancy, childbirth, and parenting educational support so teens and their families can experience a positive outcome.”<sup>42</sup>

With its PREIS grant, the organization implements and evaluates the *Prevent Secondary Pregnancy Project*. The program provides teenage mothers with 30 hours of health instruction, covering topics such as pre-natal health care, comprehensive sexuality education, and instruction on breastfeeding. It also provides “75 hours of supportive services through in-depth case management.”<sup>43</sup> The goal of the program is to reduce the number of teenage mothers who experience another teenage pregnancy; reduce the incidence of sexually transmitted diseases, including HIV; increase “positive maternal life-course outcomes;” and ensure that participants exclusively breastfeed their children, “which suppresses ovulation,” for a minimum of six months. The Project serves approximately 1,000 teen mothers annually.<sup>44</sup>

**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 Arizona Department of Health Services received \$1,260,254 in federal Title V abstinence-only funding for Fiscal Year 2010.
- The department has issued an application announcement for available funds under the state’s Title V abstinence-only grant program. At the time of publication, sub-grantees had not yet been determined.
- In Arizona, the match is provided through state revenue from the Arizona lottery.

The Arizona Title V abstinence-only program will sub-grant funds to local public and private entities to provide programming to youth ages 12–19 across the state. Programming may be provided in both school- and community-based settings. The department of health has approved the following programs for implementation: *Choosing the Best* curricula series; *Making a Difference!*; *Promoting Health Among Teens! (Abstinence-Only Intervention)*; a modified version of *TOP*, which will incorporate activities from *WAIT (Why Am I Tempted?) Training*; and *Worth the Wait*.

The *Choosing the Best* series is one of the more popular abstinence-only-until-marriage programs in the country. The series is comprised of a number of curricula for students from sixth grade through high school: *Choosing the Best WAY* (sixth grade), *Choosing the Best PATH* (seventh grade), *Choosing the Best LIFE* (eighth grade), *Choosing the Best JOURNEY* (ninth and 10<sup>th</sup> grades), and *Choosing the Best SOULMATE* (11<sup>th</sup> and 12<sup>th</sup> grades). The series has been recently revised and the information about STDs is now medically accurate. However, *Choosing the Best* curricula continue to promote heterosexual marriage, rely on messages of fear and shame, and include biases about gender, sexual orientation, and pregnancy options. For example, *Choosing the Best PATH* asks students to brainstorm the “emotional consequences” of premarital sex. Suggested answers include “guilt, feeling scared, ruined relationships, broken emotional bonds.”<sup>45</sup>

*Making a Difference!* is an evidence-based pregnancy-, STD-, and HIV-prevention education curriculum that emphasizes abstinence from sexual activity. Adapted from the evidence-based curriculum, *Be Proud! Be Responsible!*, *Making a Difference!* aims to increase participants’ knowledge about HIV, STD, and pregnancy prevention as well as their confidence to negotiate sexual pressure and intention to abstain from sex. It is designed for use with African-American, Latino, and white adolescents ages 11–13 and can be implemented in school- or community-based settings. The curriculum includes interactive activities, small group discussions, and skill-building exercises, including role-plays, aimed to increase comfort and efficacy with practicing abstinence. An evaluation of the curriculum published in the *Journal of American Medical Association* found that at a three-month follow-up, participants in the program were less likely to report having had sexual intercourse in the three months prior than peers in the control group. Evaluation results also showed that the program helped to delay sexual initiation among program participants who were sexually inexperienced.<sup>46</sup>

*Promoting Health Among Teens! (Abstinence-Only Intervention)* is an evidence-based curriculum developed to increase knowledge and awareness about STDs, including HIV, increase an understanding of how abstinence can prevent pregnancy and HIV/STDs, and build refusal and negotiation skills for practicing abstinence. *Promoting Health Among Teens!* aims for participants to abstain from vaginal, oral and anal intercourse until a time later in life when they are ready to handle the potential consequences of having sex and neither discourages nor encourages condom use.<sup>47</sup> Although originally intended for use with urban, African-American youth in small groups, the intervention can be adapted for use with larger groups and those in rural settings.<sup>48</sup> The curriculum is designed as eight, one-hour modules that include group discussions, videos, role-playing, skill-building activities, games, and other experiential exercises. It is appropriate for use in both school- and community-based settings. An evaluation of the program published in the *Archives of Pediatrics & Adolescent Medicine* found that at a 24-month follow-up, participants who were sexually inexperienced at the time of the program were significantly less likely to have initiated sex than participants in the control group.<sup>49</sup>

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The Arizona department of health has approved the use of a modified version of the evidence-based program, *TOP*. (Please see the *TPPI Tier 1: Evidence-Based Programs* section above for a description of *TOP*.) The department’s adaptation incorporates activities from *WAIT Training*, an abstinence-only-until-marriage curriculum that uses fear- and shame-based tactics to promote abstinence as the only appropriate behavior outside of marriage. SIECUS reviewed the most recent edition of *WAIT Training* and found that, similar to previous editions, it includes little medical or biological information about puberty and reproduction. Instead, it contains information and statistics promoting the benefits of marriage, activities and skill-building exercises for developing healthy relationships, and information on STDs, including HIV. It also contains messages promoting biased views of gender, sexual orientation, and family structure. For example, *WAIT Training* explains, “When it comes to sex, men are like microwaves and women are like crockpots...[M]en respond sexually by what they see and women respond sexually by what they hear and how they feel about it.”

SIECUS reviewed the 2003 edition of *Worth the Wait* and found that it covers some important topics related to sexuality such as puberty, anatomy, and sexual abuse, and that the curriculum is based on reliable sources of data. Despite these strengths, *Worth the Wait* relies on messages of fear, discourages contraceptive use, and promotes biased views of gender, marriage, and pregnancy options. For example, the curriculum explains, “teenage sexual activity can create a multitude of medical, legal, and economic problems not only for the individuals having sex but for society as a whole.”<sup>50</sup> The curriculum has been updated since SIECUS’ review.

**Arizona TPPI, PREP, and Title V Abstinence-Only Funding in FY 2010**

Grantee	Award	Fiscal Years
<b>Teen Pregnancy Prevention Initiative (TPPI)</b>		
<i>TPPI Tier 1: Replication of Evidence-Based Programs</i>		
Maricopa County Department of Public Health	\$859,620	2010–2014
Touchstone Behavioral Health	\$478,183	2010–2014
<b>TOTAL</b>	<b>\$1,337,803</b>	
<b>Personal Responsibility Education Program (PREP)</b>		
<i>PREP State-Grant Program</i>		
Arizona Department of Health Services (federal grant)	\$1,099,599	2010
<b>TOTAL</b>	<b>\$1,099,599</b>	
<i>Personal Responsibility Education Innovative Strategies</i>		
Child & Family Resources, Inc.	\$403,154	2010–2014
Teen Outreach Pregnancy Services	\$933,906	2010–2014
<b>TOTAL</b>	<b>\$1,337,060</b>	
<b>Title V Abstinence Education Grant Program (Title V Abstinence-Only)</b>		
Arizona Department of Health Services (federal grant)	\$1,260,254	2010
<b>TOTAL</b>	<b>\$1,260,254</b>	
<b>GRAND TOTAL</b>	<b>\$5,034,716</b>	<b>2010</b>

## **COMPREHENSIVE APPROACHES TO SEXUALITY EDUCATION**

*SIECUS is not aware of any examples of model programs, policies, or best practices being implemented in Arizona 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 Arizona public schools for inclusion in future publications of the SIECUS State Profiles. Please visit SIECUS' "Contact Us" webpage at [www.siecus.org](http://www.siecus.org) to share information. Select "state policy" as the subject heading.*

## **POINTS OF CONTACT**

### **Adolescent Health Contact<sup>51</sup>**

Toni Means, MBA-HCM  
Chief, Office of Women's Health  
Bureau of Women's and Children's Health  
Arizona Department of Health Services  
150 North 18<sup>th</sup> Avenue, Suite 320  
Phoenix, AZ 85007  
Phone: (602) 364-1422

### **PREP State-Grant Coordinator**

Dorothy Hastings  
Education Section Manager  
Bureau of Women's and Children's Health  
Arizona Department of Health Services  
150 North 18<sup>th</sup> Avenue, Suite 320  
Phoenix, AZ 85007  
Phone: (602) 364-1423

### **Title V Abstinence-Only Grant Coordinator**

Dorothy Hastings  
Education Section Manager  
Bureau of Women's and Children's Health  
Arizona Department of Health Services  
150 North 18<sup>th</sup> Avenue, Suite 320  
Phoenix, AZ 85007  
Phone: (602) 364-1423

## **ORGANIZATIONS THAT SUPPORT COMPREHENSIVE SEXUALITY EDUCATION**

ACLU of Arizona  
Phoenix, AZ  
Phone: (602) 650-1854  
[www.acluaz.org](http://www.acluaz.org)

NARAL Pro-Choice Arizona  
Phoenix, AZ  
Phone: (602) 258-4091  
[www.prochoicearizona.org](http://www.prochoicearizona.org)

ARIZONA

The Arizona Coalition on Adolescent  
Pregnancy and Parenting  
Phoenix, AZ  
Phone: (602) 265-4337

Planned Parenthood of Central and  
Northern Arizona  
Phoenix, AZ  
Phone: (602) 277-PLAN  
[www.plannedparenthood.org/ppaz](http://www.plannedparenthood.org/ppaz)

Arizona Family Planning Council  
Phoenix, AZ  
Phone: (602) 258-5777  
[www.azfpc.org](http://www.azfpc.org)

Phoenix Pride  
Phoenix, AZ  
Phone: (602) 277-7433  
[www.azpride.org](http://www.azpride.org)

Equality Arizona  
Phoenix, AZ  
Phone: (602) 650-0900  
[www.equalityarizona.org/](http://www.equalityarizona.org/)

Southern Arizona AIDS Foundation  
Tucson, AZ  
Phone: (520) 628-7223  
[www.saaf.org](http://www.saaf.org)

**ORGANIZATIONS THAT OPPOSE COMPREHENSIVE SEXUALITY EDUCATION**

Alliance Defense Fund  
Scottsdale, AZ  
Phone: (800) TELL-ADF  
[www.alliancedefensefund.org](http://www.alliancedefensefund.org)

Goldwater Institute  
500 East Coronado Road  
Phoenix, AZ 85004  
Phone: (602) 462-5000  
[www.goldwaterinstitute.org](http://www.goldwaterinstitute.org)

The Center for Arizona Policy  
Phoenix, AZ  
Phone: (602) 424-2525  
[www.azpolicy.org](http://www.azpolicy.org)

**MEDIA OUTLETS**

**Newspapers in Arizona**<sup>52</sup>

*Arizona Daily Star*  
Tucson, AZ  
Phone: (520) 806-7754  
[www.azstarnet.com](http://www.azstarnet.com)

*Arizona Daily Sun*  
Flagstaff, AZ  
Phone: (928) 556-2241  
[www.azdailysun.com](http://www.azdailysun.com)

*The Arizona Republic*  
Phoenix, AZ  
Phone: (602) 444-8000  
[www.azcentral.com](http://www.azcentral.com)

*East Valley Tribune*  
Mesa, AZ  
Phone: (480) 898-6554  
[www.eastvalleytribune.com](http://www.eastvalleytribune.com)

*Tucson Citizen*  
 Tucson, AZ  
 Phone: (520) 573-4561  
[www.tucsoncitizen.com](http://www.tucsoncitizen.com)

## Political Blogs in Arizona

*Arizona B.S. Meter*  
[www.azbsmeter.blogspot.com](http://www.azbsmeter.blogspot.com)

*AZNetroots*  
[www.aznetroots.com](http://www.aznetroots.com)

*Blog for Arizona*  
[www.arizona.typepad.com](http://www.arizona.typepad.com)

*Democratic Diva*  
[www.democraticdiva.com](http://www.democraticdiva.com)

*LiberalDesert*  
[www.liberaldesert.blogspot.com](http://www.liberaldesert.blogspot.com)

<sup>1</sup> This refers to the federal government's fiscal year, which begins on October 1<sup>st</sup> and ends on September 30<sup>th</sup>. 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>2</sup> Ariz. Rev. Stat. §§ 15-716(C)(1)–(3), <<http://www.azleg.state.az.us/ars/15/00716.htm>>.

<sup>3</sup> Ariz. Admin. Code § R7-2-303, <[http://www.azsos.gov/public\\_services/title\\_07/7-02.htm#Article\\_3](http://www.azsos.gov/public_services/title_07/7-02.htm#Article_3)>.

<sup>4</sup> Ibid.

<sup>5</sup> 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>>. Arizona did not participate in the full 2009 YRBS.

<sup>6</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, <[http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59\\_01.pdf](http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59_01.pdf)>, Table 12.

<sup>7</sup> “VitalStats: Birth Data Files by State, Age of Mother in Years, 2008,” (Atlanta, GA: Centers for Disease Control and Prevention), accessed 30 June 2011, <[http://www.cdc.gov/nchs/data\\_access/vitalstats/VitalStats\\_Births.htm](http://www.cdc.gov/nchs/data_access/vitalstats/VitalStats_Births.htm)>.

<sup>8</sup> *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.

<sup>9</sup> Ibid., Table 3.2.

<sup>10</sup> Joyce A. Martin, et. al., “Births: Final Data for 2006,” *National Vital Statistics Reports*, vol. 57, number 7 (Hyattsville, MD: Centers for Disease Control and Prevention, 7 January 2009), accessed 5 March 2010, <[http://www.cdc.gov/nchs/data/nvsr/nvsr57/nvsr57\\_07.pdf](http://www.cdc.gov/nchs/data/nvsr/nvsr57/nvsr57_07.pdf)>, Table B.

<sup>11</sup> *U.S. Teenage Pregnancies, Births, and Abortions: National and State Trends and Trends by Race and Ethnicity*, Table 3.2.

<sup>12</sup> *U.S. Teenage Pregnancies, Births, and Abortions: National and State Trends and Trends by Race and Ethnicity*, Table 3.3.

<sup>13</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>14</sup> Ibid.

<sup>15</sup> Slide 9: “Rates of Diagnoses of HIV Infection among Adolescents Aged 13–19 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>>.

<sup>16</sup> *HIV Surveillance Report, 2008*, Table 20.

<sup>17</sup> Ibid.

<sup>18</sup> Slide 18: “Rates of Diagnoses of AIDS Infection among Adolescents Aged 13–19 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>>.

<sup>19</sup> “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: “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.

- <sup>20</sup> 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.
- <sup>21</sup> Ibid; see also Table 33: “Primary and Secondary Syphilis—Reported Cases and Rates per 100,000 Population by Age Group and Sex: United States, 2004–2008,” *Sexually Transmitted Disease Surveillance 2008*, 121.
- <sup>22</sup> “Family Health Partnerships,” Maricopa County Department of Public Health, 2011, accessed 21 April 2011, <<http://www.maricopa.gov/PublicHealth/programs/FHP/>>.
- <sup>23</sup> 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](http://www.wymantop.org/pdfs/TOP_Positive_Well-Being.pdf)>, 3.
- <sup>24</sup> Ibid, 9.
- <sup>25</sup> “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](http://www.hhs.gov/ash/oah/prevention/research/programs/teen_outreach_program.html)>.
- <sup>26</sup> “Community Partnerships,” Maricopa County Department of Public Health Family Health Partnerships, 2011, accessed 21 April 2011, <<http://www.maricopa.gov/PublicHealth/programs/FHP/partnerships.aspx>>.
- <sup>27</sup> “Teen Pregnancy Prevention,” Maricopa County Department of Public Health, 2011, accessed 21 April 2011, <[http://www.maricopa.gov/Public\\_Health/Community/Programs/TPP/default.aspx](http://www.maricopa.gov/Public_Health/Community/Programs/TPP/default.aspx)>.
- <sup>28</sup> Ibid.
- <sup>29</sup> “The Touchstone Mission,” Touchstone Behavioral Health, accessed 21 April 2011, <<http://www.touchstonebh.org/>>.
- <sup>30</sup> “Cuidate!” Evidence-Based Programs, Resource Center for Adolescent Pregnancy Prevention (ReCAPP), ETR Associates, accessed 5 May 2010, <<http://www.etr.org/recapp/index.cfm?fuseaction=pages.ebpDetail&PageID=577&PageTypeID=2>>; see also *Science and Success: Sex Education and Other Programs That Work to Prevent Teen Pregnancy, HIV & Sexually Transmitted Infections, Second Edition* (Washington, DC: Advocates for Youth, 2008), accessed 30 March 2010, <<http://www.advocatesforyouth.org/storage/advfy/documents/sciencesuccess.pdf>>, 76–79.
- <sup>31</sup> Information provided by Dorothy Hastings, education section manager for the Bureau of Women’s and Children’s Health in the Arizona Department of Health Services, 11 February 2011.
- <sup>32</sup> “Be Proud! Be Responsible! Be Protective!” Evidence-Based Programs Resource Center for Adolescent Pregnancy Prevention (ReCAPP), ETR Associates, accessed 5 May 2010, <<http://www.etr.org/recapp/index.cfm?fuseaction=pages.ebpDetail&PageID=607&PageTypeID=2>>.
- <sup>33</sup> “Pregnancy Prevention Intervention Implementation Report: Be Proud! Be Responsible! Be Protective!,” 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/be\\_proud\\_responsible\\_protective.html](http://www.hhs.gov/ash/oah/prevention/research/programs/be_proud_responsible_protective.html)>.
- <sup>34</sup> “Draw the Line/Respect the Line,” *Emerging Answers* (Washington, DC: The National Campaign to Prevent Teen and Unplanned Pregnancy, 2007), accessed 1 July 2011, <[http://www.thenationalcampaign.org/ea2007/desc/draw\\_pr.pdf](http://www.thenationalcampaign.org/ea2007/desc/draw_pr.pdf)>; see also “Draw the Line/Respect the Line,” 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/draw\\_the\\_line\\_respect\\_the\\_line.html](http://www.hhs.gov/ash/oah/prevention/research/programs/draw_the_line_respect_the_line.html)>.
- <sup>35</sup> “Making Proud Choices!” Evidence-Based Programs, Resource Center for Adolescent Pregnancy Prevention (ReCAPP), ETR Associates, accessed 15 April 2010, <<http://www.etr.org/recapp/index.cfm?fuseaction=pages.ebpDetail&PageID=128>>.
- <sup>36</sup> Ibid.
- <sup>37</sup> *Science and Success: Sex Education and Other Programs That Work to Prevent Teen Pregnancy, HIV & Sexually Transmitted Infections* (Washington, DC: Advocates for Youth, 2008), accessed 30 March 2010, <<http://www.advocatesforyouth.org/storage/advfy/documents/sciencesuccess.pdf>>, 22.
- <sup>38</sup> Ibid., 23–24.
- <sup>39</sup> “Go Grrls: Testing the Effectiveness of a Girls-Only Pregnancy Prevention Curriculum,” *Application for Federal Funds SF-424, FY10 Teenage Pregnancy Prevention: Research and Demonstration Programs (Tier 2) and Personal Responsibility Education Program*, Child & Family Resources, Inc., (June 2010), 1. Information obtained through a Freedom of Information Act request submitted to the U.S. Department of Health and Human Services, Office of Adolescent Health.
- <sup>40</sup> “What is the *Go Grrls* Program?,” Arizona State University, 17 May 2011, accessed 5 September 2011, <<http://www.public.asu.edu/~lecroy/gogrrls/body.htm>>.
- <sup>41</sup> “The *Go Grrls* Curriculum,” Arizona State University, accessed 5 September 2011, <<http://www.public.asu.edu/~lecroy/gogrrls/curriculum.htm>>.
- <sup>42</sup> “Home,” Teen Outreach Pregnancy Services, accessed 5 September 2011, <<https://www.teenoutreachaz.org/>>.

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<sup>43</sup> Administration for Children and Families, “Teen Pregnancy Prevention: Summary of Personal Responsibility Education Program Innovative Strategies Programs Funded in FY2010,” U.S. Department of Health and Human Services, 14 October 2010, accessed 5 September 2011, <[http://www.acf.hhs.gov/programs/fysb/content/docs/prep\\_abstracts.htm](http://www.acf.hhs.gov/programs/fysb/content/docs/prep_abstracts.htm)>.

<sup>44</sup> Ibid.

<sup>45</sup> Bruce Cook, *Choosing the Best* (Marietta, GA: Choosing the Best, Inc., 2001-2007). Bruce Cook, *Choosing the Best* (Marietta, GA: Choosing the Best, Inc., 2001-2007). For more information, see SIECUS’ review of the *Choosing the Best* series at <[http://www.communityactionkit.org/curricula\\_reviews.html](http://www.communityactionkit.org/curricula_reviews.html)>.

<sup>46</sup> “Making a Difference!” Evidence-Based Programs, Resource Center for Adolescent Pregnancy Prevention (ReCAPP), ETR Associates, accessed 1 July 2011, <<http://www.etr.org/recapp/index.cfm?fuseaction=pages.ebpDetail&PageID=127&PageTypeID=2>>.

<sup>47</sup> Ibid.

<sup>48</sup> “Promoting Health Among Teens! Abstinence-Only,” Evidence-Based Programs, Resource Center for Adolescent Pregnancy Prevention (ReCAPP), ETR Associates, accessed 1 July 2011, <<http://www.etr.org/recapp/index.cfm?fuseaction=pages.ebpDetail&PageID=575&PageTypeID=2>>.

<sup>49</sup> “Pregnancy Prevention Intervention Implementation Report: Promoting Health Among Teens! Abstinence-Only Intervention,” 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/promoting\\_health.html](http://www.hhs.gov/ash/oah/prevention/research/programs/promoting_health.html)>.

<sup>50</sup> Patricia Sulak, *Worth the Wait* (Temple, TX: Scott & White Memorial Hospital, 2003). For more information, see SIECUS’ review of *Worth the Wait* at <[http://www.communityactionkit.org/curricula\\_reviews.html](http://www.communityactionkit.org/curricula_reviews.html)>.

<sup>51</sup> The person listed represents the designated personnel in the state responsible for adolescent reproductive health.

<sup>52</sup> This section is a list of major newspapers in the state and is by no means exhaustive of local print outlets.