



SIECUS

State Profile

DELAWARE

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

- **Personal Responsibility Education Program funds totaling \$250,000**
- **Division of Adolescent and School Health funds totaling \$286,616**

In Fiscal Year 2013, local entities in Delaware received:

- **Teen Pregnancy Prevention Initiative funds totaling \$589,877**

SEXUALITY EDUCATION LAW AND POLICY

Delaware state administrative code requires sexuality education as part of health education for kindergarten through 12th grade. This education must be coordinated by an employee in each school district and must be overseen by a District Consolidated Application Planning Committee. The committee must consist of teachers, parents, school nurses, community leaders, law enforcement, and other community members “with expertise in the areas of health, family life and safe and drug free schools and communities.”² Sexuality education must include an “HIV-prevention program that stresses the benefits of abstinence from high-risk behaviors.”³ Sexuality education courses must also follow the Department of Education’s standards and the *Delaware Health Education Curriculum*, and must include instruction on healthy relationships as part of teen dating violence prevention.

Delaware administrative code also sets a minimum number of hours for “comprehensive health education and family life education.”⁴ In kindergarten through fourth grade, the minimum is set at 30 hours per grade, 10 of which must be dedicated to drug/alcohol education. In grades 5 and 6, the minimum is set at 35 hours per grade, 15 of which must be dedicated to drug/alcohol education. In grades 7 and 8, the minimum is set at 60 hours per grade, 15 of which must be dedicated to drug/alcohol education. In order to graduate, high school students must receive 0.5 credits in comprehensive health education.

Delaware does not require 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 Delaware Administrative Code title 14, § 851, and Delaware Health Education Curriculum.

2013 STATE LEGISLATIVE SESSION ACTIVITY

SIECUS is not aware of any recent legislation regarding sexuality education in Delaware.

YOUTH SEXUAL HEALTH DATA

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

Delaware Youth Risk Behavior Survey (YRBS) Data⁵

- In 2013, 46% of female high school students and 51.4% of male high school students in Delaware reported ever having had sexual intercourse, compared to 46% of female high school students and 47.5% of male high school students nationwide.
- In 2013, 3.3% of female high school students and 8.6% of male high school students in Delaware reported having had sexual intercourse before age 13, compared to 3.1% of female high school students and 8.3% of male high school students nationwide.
- In 2013, 33.6% of female high school students and 34.3% of male high school students in Delaware reported being currently sexually active (defined as having had sexual intercourse in the three months prior to the survey), compared to 35.2% of female high school students and 32.7% of male high school students nationwide.
- In 2013, 10.7% of female high school students and 6.8% of male high school students in Delaware 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 [Youth Online database](#) for additional information on sexual behaviors.

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

Teen Pregnancy, Birth, and Abortion

- In 2010, Delaware's teen pregnancy rate ranked eighth in the United States, with a rate of 67 pregnancies per 1,000 young women ages 15–19, compared to the national rate of 57 per 1,000.⁶ There were a total of 2,130 pregnancies among young women ages 15–19 in Delaware in 2010.⁷
- In 2012, Delaware's teen birth rate ranked 34th in the United States, with a rate of 25 births per 1,000 young women ages 15–19, compared to the national rate of 29.4 per 1,000.⁸ In 2012, there were a total of 761 live births to young women ages 15–19 reported in Delaware.⁹
- In 2010, Delaware's teen abortion rate ranked second in the United States, with a rate of 28 abortions per 1,000 young women ages 15–19, compared to the national rate of 15 per 1,000.¹⁰ There were a total of 880 abortions among young women ages 15–19 reported in Delaware in 2010.¹¹

HIV and AIDS

- In 2011, the rate of diagnoses of HIV infection among adolescents ages 13–19 in Delaware was 3.8 per 100,000, compared to the national rate of 7.6 per 100,000.¹²
- In 2011, the rate of AIDS diagnoses among adolescents ages 13–19 in Delaware was 1.5 per 100,000, compared to the national rate of 1.9 per 100,000.¹³

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- In 2011, the rate of diagnoses of HIV infection among young adults ages 20–24 in Delaware was 29.3 per 100,000, compared to the national rate of 36.3 per 100,000.¹⁴
- In 2011, the rate of AIDS diagnoses among young adults ages 20–24 in Delaware was 12 per 100,000, compared to the national rate of 10.9 per 100,000.¹⁵

Sexually Transmitted Diseases

- In 2012, Delaware ranked 20th in the United States for reported cases of chlamydia among young people ages 15–19, with an infection rate of 2,082 cases per 100,000, compared to the national rate of 2,001.7 per 100,000. In 2012, there were a total of 1,294 cases of chlamydia reported among young people ages 15–19 in Delaware.¹⁶
- In 2012, Delaware ranked 25th in the United States for reported cases of gonorrhea among young people ages 15–19, with an infection rate of 288 cases per 100,000, compared to the national rate of 376.8 per 100,000. In 2012, there were a total of 179 cases of gonorrhea reported among young people ages 15–19 in Delaware.¹⁷
- In 2012, Delaware ranked third in the United States for reported cases of primary and secondary syphilis among young people ages 15–19, with an infection rate of 9.7 cases per 100,000, compared to the national rate of 4.1 per 100,000. In 2012, there were a total of six cases of syphilis among young people ages 15–19 reported in Delaware.¹⁸

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 is one TPPI Tier 1 grantee in Delaware, West End Neighborhood House, Inc., which received \$589,877 for FY 2013.

West End Neighborhood House, Inc., \$589,877 (FY 2013)

West End Neighborhood House is a Tier I grantee located in Wilmington, Delaware. Founded in the 1880s, West End began with the aim of assisting recent emigrants to the United States. Today, it exists as a nonprofit social service agency with a focus on promoting self-sufficiency among individuals in low-income communities. The agency serves over 10,000 individuals, providing services such as employment training, GED preparation, youth and adult socialization, and transitional housing, among others.¹⁹

West End’s TPPI-funded program targets students in grades 5–8 who attend low-income neighborhood and/or low-performing schools and reside largely in the west side of Wilmington, which has historically had high rates of teen pregnancy, school dropouts, and juvenile crime. The program aims to increase “attitudes favoring abstinence,” awareness of how to avoid teenage pregnancy, and knowledge about STDs, including HIV, among participants.²⁰

With its TPPI funding, West End implements the *Children’s Aid Society—Carrera Adolescent Pregnancy Prevention Program (CAS—Carrera)*, an evidence-based positive youth development program designed for students in grades 6–12. The program serves as an enhancement to West End’s existing summer camp programming and serves a minimum of 60 youth annually. All participants are required to commit to 12 months of the program. The program also includes a mandatory parent component. West End partners with Westside Family Healthcare, Junior Achievement of Delaware, and Jewish Family Services of Delaware in the implementation of the program. These partner organizations offers comprehensive health care, entrepreneurial training, and mental health counseling and treatment.²¹

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 Delaware.

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 Delaware.

Division of Adolescent and School Health

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

- There was one DASH grantees in Delaware funded to strengthen student health through ESHE, SHS, and SSE in FY 2013, the Delaware Department of Education (\$221,636).

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 to 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 Delaware 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 Delaware funded to collect and report YRBS and School Health Profiles data in FY 2013, the Delaware Department of Health and Social Services (\$64,980).

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 Delaware.

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, 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 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 Delaware Department of Health and Social Services received \$250,000 in federal PREP funds for FY 2013.
- There is one sub-grantee for the Delaware PREP state-grant program: Planned Parenthood of Delaware (\$246,166).²²

The Delaware Department of Health and Social Services, Division of Public Health awarded the state’s PREP funds to its sub-grantee, with the exception of a small amount of funding to be used for travel and audit costs. The sub-grantee, Planned Parenthood of Delaware, offers educational trainings and supplemental professional development opportunities for teachers and community providers serving high-risk youth populations. Among its primary goals, Planned Parenthood of Delaware aims to “develop and sustain a professional development infrastructure to empower and promote positive behavior change in adolescents” and “increase implementation of evidence-based programs in high-risk areas to reduce teen births, STDs and HIV rates for youth in Delaware.”²³ As the sub-grantee, Planned Parenthood of Delaware works in collaboration with the state Department of Education and the Division of Public Health to provide school- and community-based programming across the state, targeting the most at-risk populations first. Planned Parenthood of Delaware provides training on the following adulthood preparation subjects: adolescent development, healthy life skills, healthy relationships, and parent-child communication. Educators have been trained to implement *Making Proud Choices!* with middle school-aged youth and *Be Proud! Be Responsible!* with high school-aged youth.

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. The 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 Delaware.

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 2013, 16 tribes and tribal organizations from nine states received a total of \$3.1 million.
- There are no Tribal PREP grantees in Delaware.

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 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 Delaware.

Title V State Abstinence Education Grant Program

The Title V abstinence-only-until-marriage (Title V AOUM) program, administered by the ACF, allocates \$50 million per year to states for FYs 2010–2014. The Title V AOUM program requires states to provide three state-raised dollars or the equivalent in services for every four federal dollars received. The state match may be provided in part or in full by local groups. All programs funded by Title V AOUM must promote abstinence from sexual activity as their exclusive purpose and may provide mentoring, counseling, and adult supervision toward this end. Programs must be medically accurate and age-appropriate and must ensure abstinence is an expected outcome.

- Delaware chose not to apply for Title V AOUM funds for FY 2013.

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Competitive Abstinence Education Grant Program

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

- There are no CAE grantees in Delaware.

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

Grantee	Award	Fiscal Years
Teen Pregnancy Prevention Initiative (TPPI)		
<i>TPPI Tier 1: Replication of Evidence-Based Programs</i>		
West End Neighborhood House, Inc.	\$589,877	2010–2014
TOTAL	\$589,877	
Division of Adolescent and School Health (DASH)		
Delaware Department of Education	\$221,636	2013–2017
Delaware Department of Health and Social Services	\$64,980	
TOTAL	\$286,616	
Personal Responsibility Education Program (PREP)		
<i>PREP State-Grant Program</i>		
Delaware Health and Social Services (federal grant)	\$250,000	2013
TOTAL	\$250,000	
GRAND TOTAL		
	\$1,126,493	2013

POINTS OF CONTACT

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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 Del. Admin. Code title 14, § 851(1.1.2) <http://regulations.delaware.gov/AdminCode/title14/800/851.pdf>.
- ³ Del. Admin. Code title 14, § 851(1.1.4) <http://regulations.delaware.gov/AdminCode/title14/800/851.pdf>.
- ⁴ Del. Admin. Code title 14, § 851(1.1.3.1), <http://regulations.delaware.gov/AdminCode/title14/800/851.pdf>.
- ⁵ 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>.
- ⁶ 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/USTPtrends10.pdf>, Table 3.1.
- ⁷ *Ibid.*, Table 3.2.
- ⁸ 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.
- ⁹ Centers for Disease Control and Prevention, VitalStats Interactive Data Tables, Hyattsville, MD: National Center for Health Statistics, <http://www.cdc.gov/nchs/vitalstats.htm>.
- ¹⁰ 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/USTPtrends10.pdf>, Table 3.1.
- ¹¹ *Ibid.*, Table 3.2.
- ¹² 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/1dbYpAJ>.
- ¹³ 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/1dbYpAJ>.
- ¹⁴ Slide 10: “Rates of Diagnoses of HIV Infection among Young Adults Aged 20–24 Years, 2011—United States and 6 Dependent Areas,” *HIV Surveillance in Adolescents and Young Adults* (Atlanta, GA: Centers for Disease Control and Prevention), accessed May 30, 2013, <http://bit.ly/1dbYpAJ>.
- ¹⁵ Slide 19: “Rates of Stage 3 (AIDS) Classifications among Adolescents Aged 20–24 Years with HIV Infection, 2011—United States and 6 Dependent Areas,” *HIV Surveillance in Adolescents and Young Adults* (Atlanta, GA: Centers for Disease Control and Prevention), accessed May 30, 2013, <http://bit.ly/1dbYpAJ>.
- ¹⁶ NCHHSTP Atlas, “STD Surveillance Data” (Atlanta, GA: Centers for Disease Control and Prevention), accessed July 16, 2014, <http://gis.cdc.gov/GRASP/NCHHSTPAtlas/main.html>.
- ¹⁷ *Ibid.*
- ¹⁸ *Ibid.*
- ¹⁹ “Our History,” West End Neighborhood House, Inc., accessed April 14, 2011, <http://www.westendnh.org/history>.
- ²⁰ “Teenage Pregnancy Prevention: Summary of Funded Evidence-Based Programs for 2010,” U.S. Department of Health and Human Services, accessed April 14, 2014, <http://www.hhs.gov/ash/oah/oah-initiatives/tpp/grantees/tpp-tier1.pdf>.
- ²¹ “West End Announces New Teen Pregnancy Prevention Program,” West End Neighborhood House, Inc., October 22, 2010, accessed April 14, 2010, <http://www.westendnh.org/2010/10/22/west-end-announces-new-teen-pregnancy-prevention-program>.
- ²² Information provided by Gloria James, bureau chief, Adolescent and Reproductive Health, Division of Public Health, State of Delaware Health and Social Services, June 2, 2014.
- ²³ “Request for Proposal—Developing and Sustaining a Statewide Professional Development Partnership to Promote Healthy Outcomes and Reduce Sexual Risk Behaviors among Adolescents in Delaware,” State Department of Health and Social Services, Division of Public Health (November 2010). Information provided by Gloria James, bureau chief, Adolescent and Reproductive Health, Division of Public Health, State of Delaware Health and Social Services, February 7, 2011.
- ²⁴ The person listed represents the designated personnel in the state responsible for adolescent reproductive health.