



SIECUS

State Profile

ILLINOIS

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

- **Division of Adolescent and School Health funds totaling \$290,000**
- **Personal Responsibility Education Program funds totaling \$2,037,735**

In Fiscal Year 2013, local entities in Illinois received:

- **Teen Pregnancy Prevention Initiative funds totaling \$5,386,910**
- **Division of Adolescent and School Health funds totaling \$275,000**
- **Personal Responsibility Education Innovative Strategies funds totaling \$555,701**

SEXUALITY EDUCATION LAW AND POLICY

The Illinois Critical Health Problems and Comprehensive Health Education Act states that the following topics must be addressed in all elementary and secondary schools:

- human ecology and health;
- human growth and development;
- the emotional, psychological, physiological, hygienic, and social responsibilities of family life, including sexual abstinence until marriage;
- prevention and control of disease; and
- the transmission and spread of AIDS.

As of 2013, schools that teach sexuality education are no longer required to emphasize that “abstinence is the expected norm,” and are instead expected to teach both abstinence and contraception.² All courses that discuss sexual intercourse are to address “the hazards of sexual intercourse . . . [and] the latest medical information citing the failure and success rates of condoms,” and include “explanations of when it is unlawful for males to have sexual relations with females under the age of 18.”³ Course material must also include information regarding responsible parenting, the availability of confidential adoption services, and the procedure for anonymously relinquishing a newborn infant to law enforcement agencies or hospitals.

Illinois law also provides guidelines for family life education courses. These courses are “designed to promote wholesome and comprehensive understanding of the emotional, psychological, physiological, hygienic, and social responsibility aspects of family life,” and therefore, according to the law, “will include teaching alternatives to abortion, appropriate to the various grade levels.”⁴

The Illinois Superintendent of Education must prepare the course of instruction for family life education, make it available to schools districts, and “develop a procedure for evaluating and measuring the effectiveness of the family life courses of instruction in each local school district, including the setting of reasonable goals for reduced sexual activity, sexually transmitted diseases and premarital pregnancy.”⁵

ILLINOIS

Parents or guardians may remove their children from any or all sexuality education, family life programs, and/or STD/HIV-prevention programs. This is referred to as an “opt-out” policy.

See 105 Illinois Compiled Statutes §§ 110/2 and 110/3, 5/27-9.1–9.2, and 27-11; and 325 Illinois Compiled Statutes § 2/.

2013 STATE LEGISLATIVE SESSION ACTIVITY

Bill to Require Medically Accurate and Age-Appropriate Material

In August 2013, HB 2675 was signed into law, requiring schools that provide sex education to expand beyond an abstinence-only approach. The bill amends the School Code and the Critical Health Problems and Comprehensive Health Education Act to align with the National Sexuality Education Standards. It removes from the previous requirements the statement stipulating students be taught that abstinence outside of marriage is the “expected norm”; instead, the curriculum should also address methods of contraception and protection against STDs and HIV/AIDS. Course material must be based on evidence. Parents have the ability to “opt-out” their children. Illinois public schools retain the option to not teach sex education at all.

YOUTH SEXUAL HEALTH DATA

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

Illinois Youth Risk Behavior Survey (YRBS) Data⁶

- In 2013, 42.1% of female high school students and 47% of male high school students in Illinois 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, 3.1% of female high school students and 7.6% of male high school students in Illinois 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, 32.9% of female high school students and 33.3% of male high school students in Illinois 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, 13.7% of female high school students and 8.5% of male high school students in Illinois 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 in Illinois and Chicago.

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

Teen Pregnancy, Birth, and Abortion

- In 2010, Illinois's teen pregnancy rate ranked 23rd in the United States, with a rate of 57 pregnancies per 1,000 young women ages 15–19, compared to the national rate of 57 per 1,000.⁷ There were a total of 25,350 pregnancies reported in Illinois in 2010.⁸
- In 2012, Illinois's teen birth rate ranked 28th in the United States, with a rate of 27.9 births per 1,000 young women ages 15–19, compared to the national rate of 29.4 per 1,000.⁹ In 2012, there were a total of 12,098 live births reported to young women ages 15–19 in Illinois.¹⁰
- In 2011, Illinois's teen abortion rate ranked 13th in the United States, with a rate of 15 abortions per 1,000 young women ages 15–19, compared to the national rate of 15 per 1,000.¹¹ There were a total of 6,910 abortions among young women ages 15–19 reported in Illinois in 2010.¹²

HIV and AIDS

- In 2011, the rate of diagnoses of HIV infection among adolescents ages 13–19 in Illinois was 9 per 100,000, compared to the national rate of 7.6 per 100,000.¹³
- In 2011, the rate of AIDS diagnoses among adolescents ages 13–19 in Illinois was 3 per 100,000, compared to the national rate of 1.9 per 100,000.¹⁴
- In 2011, the rate of diagnoses of HIV infection among young adults ages 20–24 in Illinois was 42.7 per 100,000, compared to the national rate of 36.3 per 100,000.¹⁵
- In 2011, the rate of AIDS diagnoses among young adults ages 20–24 in Illinois was 12.1 per 100,000, compared to the national rate of 10.9 per 100,000.¹⁶

Sexually Transmitted Diseases

- In 2012, Illinois ranked eighth in the United States for reported cases of chlamydia among young people ages 15–19, with an infection rate of 2,559.6 cases per 100,000, compared to the national rate of 2,001.7 cases per 100,000. In 2012, there were a total of 23,274 cases of chlamydia reported among young people ages 15–19 in Illinois.¹⁷
- In 2012, Illinois ranked seventh in the United States for reported cases of gonorrhea among young people ages 15–19, with an infection rate of 610.3 cases per 100,000, compared to the national rate of 376.8 cases per 100,000. In 2012, there were a total of 5,549 cases of gonorrhea reported among young people ages 15–19 in Illinois.¹⁸
- In 2012, Illinois ranked 10th in the United States for reported cases of primary and secondary syphilis among young people ages 15–19, with an infection rate of 6.4 cases per 100,000, compared to the national rate of 4.1 cases per 100,000. In 2012, there were a total of 58 cases of syphilis reported among young people ages 15–19 in Illinois.¹⁹

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.

- Local organizations in Illinois received \$5,386,910 in TPPI Tier 1 funding for FY 2013.
- There are two TPPI Tier 1 grantees in Illinois: Chicago Public Schools and Children's Home & Aid Society of Illinois.

Chicago Public Schools, \$3,943,607 (FY 2013)

Chicago Public Schools is the third-largest school district in the United States, with a total of 409,279 students attending 675 schools.²⁰ Eighty-six percent of the district's students come from low-income families.

The school district's TPPI Tier 1 grant supports its "Chicago Teen Pregnancy Prevention Initiative," which provides programming to students in ninth grade. The overall goal of the program is to reduce teen pregnancy by improving the life skills, healthy behaviors, and community engagement of Chicago's youth. The intervention is implemented in 40 target schools and includes a condom availability initiative, a teen health hotline, community service programming, a youth advisory committee, and a social media campaign. Chicago Public Schools aims to reach approximately 9,000 young people each year.²¹

Children's Home & Aid Society of Illinois, \$1,443,303 (FY 2013)

The Children's Home & Aid Society of Illinois is a social service agency that serves nearly 40,000 children and families suffering from poverty, abuse, and neglect throughout 40 Illinois counties. It provides counseling, foster care, and educational advocacy.²²

With its TPPI grant, the organization implements *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 Children's Home & Aid program targets primarily African-American students in fourth through sixth grade. The organization delivers the curriculum during after-school programs at three elementary schools on Chicago's South Side: Benjamin E. Mays Elementary Academy, Charles W. Earle Elementary School, and Nicholas Copernicus Elementary School.²³ The program serves approximately 180 young people each 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 Illinois.

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) administers the grant program in partnership with OAH.

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

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 establishing 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 were two DASH grantees in Illinois funded to strengthen student health through ESHE, SHS, and SSE in FY 2013, the Illinois State Board of Education (\$225,000) and Chicago Public Schools (\$225,000).

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 Illinois 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 are two DASH grantees in Illinois funded to collect and report YRBS and School Health Profiles data in FY 2013, the Illinois State Department of Education (\$65,000) and Chicago Public Schools (\$50,000).

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 Illinois.

Personal Responsibility Education Program

The Personal Responsibility Education Program (PREP) totals \$75 million per year for FYs 2010–2014 and is the first-ever dedicated funding stream for more comprehensive approaches to sexuality education. The U.S. Department of Health and Human Services, Administration for Children and Families (ACF) administers the grant. PREP includes a \$55 million state grant program, \$10 million to fund local entities through the Personal Responsibility Education Innovative Strategies (PREIS) program, \$3.1 million for Tribal PREP, for tribes and tribal organizations, and with remaining funds for evaluation, training, and technical assistance. In addition, provisions within the statute for PREP enable a competitive application process for community- and faith-based organizations within states and territories that do not directly seek PREP funding by the third year of the program; these competitive PREP (CPREP) grants were awarded to organizations in five states and three territories in FY 2013. Details on the state grant program, PREIS, Tribal PREP, and CPREP are included below.

PREP State-Grant Program

The PREP state-grant program supports evidence-based programs that provide young people with medically accurate and age-appropriate information for the prevention of unintended pregnancy, HIV/AIDS, and other STDs. The grant program totals \$55 million per year and allocates funding to individual states. The grant does not require states to provide matching funds. Funded programs must discuss abstinence and contraception, and place substantial emphasis on both. Programs must also address at least three of the following adulthood preparation subjects: healthy relationships, positive adolescent development, financial literacy, parent-child communication skills, education and employment skills, and healthy life skills.

- The Illinois Department of Human Services received \$2,037,735 in federal PREP funds for FY 2013.
- There are 17 sub-grantees for the Illinois PREP state-grant program.²⁴

The Illinois PREP state-grant program is administered by the Department of Human Services and funds are sub-granted to providers who are required to “implement at least one evidence-based teen pregnancy prevention curriculum, work with a coalition, and deliver supplemental activities.” The program targets young people ages 11–18 living in geographical areas with high African American and/or Latino populations. Sub-grantees must choose to implement one of the following evidence-based curricula approved by the Illinois Department of Human Services: *Becoming A Responsible Teen (BART)*, *Be Proud! Be Responsible!*, *Cuidate!*, *Draw the Line/Respect the Line*, *Making a Difference!*, and *Making Proud Choices!*²⁵

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 is one PREIS grantee in Illinois, Demoiselle 2 Femme, NFP, which received \$555,701 for FY 2013.²⁶

Demoiselle 2 Femme, NFP, \$555,701 (FY 2013)

Demoiselle 2 Femme (D2F) is a community-based organization that provides “holistic services, education, instruction, and training to assist adolescent females in a successful transition to womanhood.”²⁷

The organization is an abstinence-only-until-marriage (AOUM) proponent and previously received funding from the federal Adolescent Family Life Act grant program and the Illinois Title V AOUM fund.

The organization uses its PREIS grant to implement and evaluate a teen pregnancy prevention model that combines its *3-D Pride* curriculum with seven of the eight modules included in *Making a Difference!*. The project serves 800 African-American young women ages 14–18 in eight high schools located on the south side of Chicago.

The *3-D* curriculum is a culturally competent and age-appropriate “holistic prevention education curriculum,” designed by D2F, that “challenges students to avoid sexual risk behaviors while also addressing the at-risk behaviors of violence, alcohol, tobacco and drug usage.”²⁸ The *3-D* curriculum also addresses issues such as self-esteem, decision-making skills, positive peer relationships, clothing, etiquette, and intimacy.

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 Illinois.

Competitive Personal Responsibility Education Program (CPREP)

CPREP grants support evidence-based programs that provide young people with medically accurate and age-appropriate information for the prevention of unintended pregnancy, HIV/AIDS, and other STDs. Organizations and institutions in states and territories that did not apply for PREP formula grants in either of the past two fiscal years were eligible to submit competitive applications for CPREP grants. Thirty-seven grants, totaling \$18.6 million, were awarded in FY 2013 to organizations in American Samoa, the Commonwealth of Northern Mariana Islands, Florida, Guam, Indiana, North Dakota, Texas, and Virginia.

- There are no CPREP grantees in Illinois.

Title V State Abstinence Education Grant Program

The Title V abstinence-only-until-marriage (Title V AOUM) program, administered by ACF, allocates \$50 million per year to states for FYs 2010–2014. 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.

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

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.

ILLINOIS

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 Illinois.

Illinois 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>		
Chicago Public Schools	\$3,943,607	2010–2014
Children’s Home & Aid Society of Illinois	\$1,443,303	2010–2014
TOTAL	\$5,386,910	
Division of Adolescent and School Health (DASH)		
Illinois State Board of Education	\$290,000	2013–2017
Chicago Public Schools	\$275,000	2013–2017
TOTAL	\$565,000	
Personal Responsibility Education Program (PREP)		
<i>PREP State-Grant Program</i>		
Illinois Department of Human Services (federal grant)	\$2,037,735	2012
TOTAL	\$2,037,735	
<i>Personal Responsibility Education Innovative Strategies</i>		
Demoiselle 2 Femme, NFP	\$555,701	2010–2014
TOTAL	\$555,701	
GRAND TOTAL		
	\$8,545,346	2013

POINTS OF CONTACT

Adolescent Health Contact²⁹

Kim Fornero
 Bureau Chief
 Bureau of Positive Youth Development
 Division of Family and Support Services
 Illinois Department of Human Services
 401 S. Clinton Street, 4th floor
 Springfield, IL 60607
 Phone: (312) 793-1628

PREP State-Grant Coordinator

Mary White
 Administrator
 Teen Pregnancy Prevention Program
 Illinois Department of Human Services
 823 East Monroe Street
 Springfield, IL 62701
 Phone: (217) 524-5993
 Email: mary.d.white@illinois.gov

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 Illinois Code 105 ILCS 5/27-9.1, Section (b), <http://bit.ly/1jk0SXY>.

³ 105 Ill. Comp. Stat. §§ 5/27-9.1(c)(5) and (7).

⁴ 105 Ill. Comp. Stat. § 5/27-9.2,

<http://www.ilga.gov/legislation/ilcs/ilcs4.asp?DocName=010500050HArt.+27&ActID=1005&ChapAct=105%26nbsp%3BILCS%26nbsp%3B5%2F&ChapterID=17&ChapterName=SCHOOLS&SectionID=49363&SeqStart=149700000&SeqEnd=156200000&ActName=School+Code>.

⁵ Ibid.

⁶ 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>.

⁷ 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.

⁸ Ibid., Table 3.2.

⁹ 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.

¹⁰ Centers for Disease Control and Prevention, VitalStats Interactive Data Tables, Hyattsville, MD: National Center for Health Statistics, <http://www.cdc.gov/nchs/vitalstats.htm>.

¹¹ 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.

¹² Ibid., Table 3.2.

¹³ 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>.

¹⁴ 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>.

¹⁵ 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>.

¹⁶ 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>.

¹⁷ NCHHSTP Atlas, "STD Surveillance Data." (Atlanta, GA: Centers for Disease Control and Prevention), accessed June 10, 2013, <http://gis.cdc.gov/GRASP/NCHHSTPAtlas/main.html>.

¹⁸ Ibid.

¹⁹ Ibid.

²⁰ "Stats and Facts," Chicago Public Schools, October 2009, accessed June 1, 2011, http://www.cps.edu/About_CPS/At-a-glance/Pages/Stats_and_facts.aspx.

²¹ "Teenage Pregnancy Prevention: Summary of Funded Evidence-Based Programs for 2010," U.S. Department of Health and Human Services, accessed April 14, 2011, <http://www.hhs.gov/ash/oah/grants/grantees/tier1-il-chicago.html>.

²² "About Us," Children's Home & Aid Society of Illinois, accessed July 1, 2011, <http://www.childrenshomeandaid.org/page.aspx?pid=199>.

²³ "Carrera Adolescent Pregnancy Prevention Program," Children's Home & Aid Society, accessed June 1, 2011, <http://www.childrenshomeandaid.org/page.aspx?pid=1016>.

ILLINOIS

²⁴ Sub-grantees are: Aunt Martha's Youth Service Center (\$91,434); Bremen Youth Services (\$94,799); Champaign-Urbana Public Health District (\$147,733); Chestnut Health Systems (\$91,500); Corazon Community Services (\$99,869); Danville Housing Authority (\$158,406); Family Focus, Inc. (\$334,244); Future Foundation (\$107,779); Hoyleton Youth (\$154,250); Lake County Health Department (\$193,619); Macon County Health Department (\$302,594); Martin Luther King, Jr. (\$94,287); Pioneer Center (\$41,028); Prevention Partnership (\$216,049); Southern Seven Health Department (\$131,507); The Success Center (\$171,471); Youth Outreach Services (\$352,994).

Information provided by Crystal Reinhart, Research Program Specialist, Center for Prevention Research and Development, June 13, 2014.

²⁵ Ibid.

²⁶ The grantee declined to provide SIECUS with any updated information for federal fiscal year 2013. Information provided is from FY 2011.

²⁷ "Welcome to Demoiselle 2 Femme," Demoiselle 2 Femme, NFP, accessed September 5, 2011, <http://www.demoiselle2femme.org>.

²⁸ "3-D Curriculum," Demoiselle 2 Femme, NFP, accessed September 5, 2011, <http://demoiselle2femme.org/3-d-curriculum>.

²⁹ The person listed represents the designated personnel in the state responsible for adolescent reproductive health.