



### IOWA

**In Fiscal Year 2011<sup>1</sup>, the state of Iowa received:**

- **Personal Responsibility Education Program funds totaling \$502,584**
- **Title V State Abstinence Education Program funds totaling \$358,102**

#### **SEXUALITY EDUCATION LAW AND POLICY**

Iowa law mandates that research-based, age-appropriate health education be taught in kindergarten through 12th grade, and details what must be included by grade. In first through sixth grade, “the health curriculum shall include the characteristics of communicable diseases including acquired immune deficiency syndrome [AIDS].”<sup>2</sup> In seventh and eighth grade, health education must “include the characteristics of sexually transmitted disease [STD] and acquired immune deficiency syndrome.”<sup>3</sup> In ninth through 12th grade, students are required to take one unit of health instruction, which must include information on “the prevention and control of disease, including sexually transmitted diseases and acquired immune deficiency syndrome.”<sup>4</sup> Additionally, health curricula must include information about human papillomavirus (HPV) and the HPV vaccine.

Iowa law mandates that the curriculum use materials that are up-to-date, age-appropriate, and research-based/medically accurate; furthermore, all information must be free of biases based on race, ethnicity, sexual orientation, or gender.<sup>5</sup> School districts may teach age-appropriate, science-based, comprehensive sexuality education as part of the health curriculum, but may also use abstinence-only materials so long as those materials fall within the parameters of the law.

Parents or guardians may remove their children from any part of health education courses if the course conflicts with the student’s religious beliefs. This is referred to as an “opt-out” policy.

See [Iowa Code §§ 279.50 and 256.11](#), and [Iowa Administrative Code § 281-12.5](#).

#### **RECENT LEGISLATION**

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

#### **YOUTH SEXUAL HEALTH DATA**

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

### **Iowa Youth Risk Behavior Survey (YRBS) Data<sup>6</sup>**

- In 2011, 44% of female high school students and 44% of male high school students in Iowa reported ever having had sexual intercourse, compared to 46% of female high school students and 49% of male high school students nationwide.
- In 2011, 3% of female high school students and 6% of male high school students in Iowa reported having had sexual intercourse before age 13, compared to 3% of female high school students and 9% of male high school students nationwide.
- In 2011, 13% of female high school students and 13% of male high school students in Iowa reported having had four or more lifetime sexual partners, compared to 13% of female high school students and 18% of male high school students nationwide.
- In 2011, 34% of female high school students and 32% of male high school students in Iowa reported being currently sexually active (defined as having had sexual intercourse in the three months prior to the survey), compared to 34% of female high school students and 33% of male high school students nationwide.
- In 2011, among those high school students who reported being currently sexually active, 56% of females and 67% of males in Iowa reported having used condoms the last time they had sexual intercourse, compared to 54% of females and 67% of males nationwide.
- In 2011, among those high school students who reported being currently sexually active, 26% of females and 22% of males in Iowa reported having used birth control pills the last time they had sexual intercourse, compared to 23% of females and 13% of males nationwide.
- In 2011, among those high school students who reported being currently sexually active, 15% of females and 21% of males in Iowa reported having used alcohol or drugs the last time they had sexual intercourse, compared to 18% of females and 26% of males nationwide.
- In 2011, 84% of high school students in Iowa reported having been taught about AIDS/HIV in school, compared to 84% of high school students nationwide.

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

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

- Iowa's teen birth rate currently ranks 38th in the United States, with a rate of 28.6 births per 1,000 young women ages 15–19, compared to the national rate of 34.3 births per 1,000.<sup>7</sup> In 2010, there were a total of 3,017 live births reported to young women ages 15–19 in Iowa.<sup>8</sup>
- In 2005, Iowa's teen pregnancy rate ranked 41st in the United States, with a rate of 51 pregnancies per 1,000 young women ages 15–19, compared to the national rate of 70 pregnancies per 1,000.<sup>9</sup> There were a total of 5,200 pregnancies among young women ages 15–19 reported in Iowa in 2005.<sup>10</sup>
- In 2005, Iowa's teen abortion rate ranked 35th in the United States, with a rate of 11 abortions per 1,000 young women ages 15–19, compared to the national rate of 19 abortions per 1,000.<sup>11</sup>

*HIV and AIDS*

- In 2010, the rate of diagnoses of HIV infection among adolescents aged 13-19 years in Iowa was 1.4 per 100,000 compared to the national rate of 7.9 per 100,000.<sup>12</sup>
- In 2010, the rate of AIDS diagnoses among adolescents 13-19 years in Iowa was 0.0 per 100,000 compared to the national rate of 1.9 per 100,000.<sup>13</sup>
- In 2010, the rate of diagnoses of HIV infection among young adults aged 20-24 years in Iowa was 9.5 per 100,000 compared to the national rate of 36.9 per 100,000.<sup>14</sup>
- In 2010, the rate of AIDS diagnoses among young adults aged 20-24 years in Iowa was 4.6 per 100,000 compared to the national rate of 10.4 per 100,000.<sup>15</sup>

*Sexually Transmitted Diseases*

- Iowa ranks 35th in the United States for reported cases of chlamydia among young people ages 15–19, with an infection rate of 14.86 cases per 1,000, compared to the national rate of 20.03 cases per 1,000. In 2009, there were a total of 3,230 cases of chlamydia reported among young people ages 15–19 in Iowa.<sup>16</sup>
- Iowa ranks 31st in the United States for reported cases of gonorrhea among young people ages 15–19, with an infection rate of 2.34 cases per 1,000, compared to the national rate of 4.04 cases per 1,000. In 2009, there were a total of 509 cases of gonorrhea reported among young people ages 15–19 in Iowa.<sup>17</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 \$105 million in discretionary funding for Fiscal Year (FY) 2011. TPPI consists of two funding tiers that provide grants to local public and private entities. Tier 1 totals \$75 million and provides funding for the replication of evidence-based programs proven to prevent unintended teen pregnancy and address underlying behavioral risk factors. Tier 2 totals \$25 million and provides funding to develop and test additional models and innovative strategies. A portion of the Tier 2 funds, \$15.2 million, was allocated for research and demonstration grants to test innovative approaches, while the remaining funding, \$9.8 million, was allocated for grants to support communitywide initiatives. TPPI also dedicates \$4.5 million in funding to conduct evaluations of individual programs.

#### *TPPI Tier 1: Evidence-Based Programs*

The TPPI Tier 1 grant program supports the replication of evidence-based programs proven effective through rigorous evaluation to prevent unintended teen pregnancy, underlying behavioral risk factors, or other associated risk factors.

- There are no TPPI Tier 1 grantees in Iowa.

*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 Iowa.

*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 Iowa.

**Personal Responsibility Education Program**

The Personal Responsibility Education Program (PREP) totals \$75 million per year for FYs 2010–2014 and is the first-ever dedicated funding stream for more comprehensive approaches to sexuality education. The U.S. Department of Health and Human Services, Administration for Children and Families (ACF) administers the grant. PREP includes a \$55 million state-grant program, \$10 million to fund local entities through the Personal Responsibility Education Innovative Strategies (PREIS) Program, \$3.5 million for the Tribal PREP Program for tribes and tribal organizations, and \$6.5 million for evaluation, training, and technical assistance. Details on the state-grant program, PREIS, and Tribal PREP are included below.

*PREP State-Grant Program*

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

- The Iowa Department of Public Health received \$502,584 in federal PREP funds for FY 2011.
- 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 Iowa Department of Public Health administers the state PREP grant program in both school and community-based settings. Target populations for programming include African-American and Latino youth, youth in foster care, and youth residing in areas of the state with the highest rates of teen birth. The Iowa Department of Health identified 15 counties as priority services areas for PREP programming based on 15 youth risk indicators, including teen birth rate, number of children living in poverty, high school drop-out rate, domestic violence, rates of juvenile crime and arrest, STD infection rates, and number of homeless youth and youth in foster care. The 15 counties identified include: Appanoose, Black Hawk, Buena Vista, Cerro Gordo, Clinton, Des Moines, Lee, Marshall, Muscatine, Pottawattamie, Polk, Scott, Wapello, Webster, and Woodbury. Sub-grantees will be required to replicate one of the following three curricula: *SiHLE (Sisters Informing, Healing, Living, and Empowering)*; *Teen Outreach Program (TOP)*; and *Wise*

*Guys Male Responsibility Curriculum (Wise Guys)*. In addition, programs must incorporate the following three adulthood preparation subjects: adolescent development, healthy life skills, and healthy relationships. Programs are also encouraged to address additional adulthood preparation subjects.

*SiHLE* is an evidence-based HIV- and STD-prevention education program designed for African-American females ages 14–18 who are sexually active and at high risk for HIV. It is a peer-led, social-skills training intervention based on social cognitive theory and the theory of gender and power.<sup>18</sup> The program consists of four four-hour sessions that are implemented on consecutive Saturdays in a community-based setting. Sessions are led by an African-American female adult and two peer-facilitators, ages 18–21. The sessions are designed to reinforce ethnic and gender pride and address HIV-prevention strategies, the transmission of STDs, communication and negotiation skills, condom-use skills, self-efficacy, healthy relationships, and personal empowerment. The program incorporates group discussion, lectures, games, and role-playing. Participants also complete homework assignments that provide opportunity for reflection and skills practice. An evaluation of the program published in the *Journal of the American Medical Association* found that, at a six-month follow-up, program participants were significantly less likely to report being pregnant and significantly more likely to report having used condoms consistently in the previous six months than participants in the control group. In addition, at a twelve-month follow-up, participants were significantly more likely to report consistent condom use in the previous 30 days and having used a condom during last sexual intercourse than participants in the control group.<sup>19</sup>

*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>20</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>21</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>22</sup>

*Wise Guys* is a teen pregnancy prevention curriculum designed for adolescent males ages 11–17. The curriculum was developed by the Family Life Council of Greensboro, North Carolina. *Wise Guys* focuses on equipping youth to “make wiser and more responsible decisions” about their sexual health.<sup>23</sup> The curriculum includes 10 lessons that address self-esteem, personal and family values, goal-setting, stereotypes of masculinity, communication skills, reproductive anatomy, puberty, STDs, including HIV, delaying sexual intercourse, the consequences of teenage pregnancy/early parenthood, and other topics.<sup>24</sup> *Wise Guys* is appropriate for use in both school- and community-based settings.

#### *Personal Responsibility Education Innovative Strategies (PREIS)*

PREIS supports research and demonstration programs to develop, replicate, refine, and test innovative models for preventing unintended teen pregnancy. ACF administers the grant program in collaboration with OAH and provides a total of \$10 million in funding directly to local public and private entities.

- There are no PREIS grantees in Iowa.

#### *Tribal Personal Responsibility Education Program (Tribal PREP)*

Tribal PREP supports the development and implementation of comprehensive teen pregnancy prevention programs within tribes and tribal communities. Tribal PREP programs target youth ages 10-19 who are in or are aging out of foster care, homeless youth, youth with HIV/AIDS, pregnant and/or

parenting youth who are under 21 years of age, and youth who live in areas with high adolescent birth rates. Programs must address at least three of the following adulthood preparation subjects: healthy relationships, positive adolescent development, financial literacy, parent-child communication skills, education and employment skills, and healthy life skills.

- In FY 2011, 16 tribes and tribal organizations from nine states received a total of \$6.5 million.
- There are no Tribal PREP grantees in Iowa.

### **Title V State Abstinence Education Grant Program**

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

- The Iowa Department of Public Health–Division of Health Promotion and Chronic Disease Prevention received \$358,102 in federal Title V abstinence-only funding for FY 2011.
- 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.<sup>25</sup>
- In Iowa, the sub-grantees will be required to provide the match.

The Iowa Department of Public Health–Division of Health Promotion and Chronic Disease Prevention administers the state Title V Abstinence-Only Program. The state program targets young people in foster care, aftercare, or residing in an out-of-home care setting. Funded programs will choose between *Power Through Choices* and *Wise Guys*.<sup>26</sup>

*Power Through Choices* is an HIV-, STD-, and pregnancy-prevention curriculum designed for youth ages 14–18 residing in group homes, foster homes, or other residential care settings.<sup>27</sup> The curriculum focuses on reducing sexual risk behaviors related to unintended pregnancy and STD/HIV infection. It engages youth in interactive exercises “to build self-empowerment and increase their decision making skills.”<sup>28</sup> Additionally, the program provides instruction to help youth gain and practice skills for using contraception, communicating effectively, and accessing available resources and health services.<sup>29</sup> *Power Through Choices* consists of ten 90-minute sessions that are designed to be implemented twice a week over a period of five to six weeks. Lessons include activities, time for reflection, and group discussion.<sup>30</sup> An evaluation of the program pilot published in *Child Welfare* showed the curriculum held promise in reducing risky sexual behaviors among program participants.<sup>31</sup>

*Wise Guys* is a teen pregnancy prevention curriculum designed for adolescent males ages 11–17. The curriculum was developed by the Family Life Council of Greensboro, North Carolina. *Wise Guys* focuses on equipping youth to “make wiser and more responsible decisions” about their sexual health.<sup>32</sup> The curriculum includes 10 lessons that address self-esteem, personal and family values, goal-setting, stereotypes of masculinity, communication skills, reproductive anatomy, puberty, STDs, including HIV, delaying sexual intercourse, the consequences of teenage pregnancy/early parenthood, and other topics.<sup>33</sup> *Wise Guys* is appropriate for use in both school- and community-based settings.

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

Grantee	Award	Fiscal Years
<b>Personal Responsibility Education Program (PREP)</b>		
<i>PREP State-Grant Program</i>		
Iowa Department of Public Health (federal grant)	\$502,584	2011
<b>TOTAL</b>	<b>\$502,584</b>	
<b>Title V Abstinence Education Grant Program (Title V Abstinence-Only)</b>		
Health Promotion and Disease Prevention	\$358,102	2011
<b>TOTAL</b>	<b>\$358,102</b>	
<b>GRAND TOTAL</b>		
	<b>\$860,686</b>	<b>2011</b>

**COMPREHENSIVE APPROACHES TO SEXUALITY EDUCATION**

SIECUS is not aware of any examples of model programs, policies, or best practices being implemented in Iowa 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 Iowa public schools for inclusion in future publications of the 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>34</sup>**

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 Bureau of Family Health  
 Iowa Department of Public Health  
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 Des Moines, IA 50319  
 Phone: (515) 281-6071

Mary Greene  
 Abstinence Education Coordinator  
 Bureau of Family Health  
 Iowa Department of Public Health  
 Lucas State Office Building  
 321 E. 12th Street  
 Des Moines, IA 50319  
 Phone: (515) 725-0047

**ORGANIZATIONS THAT SUPPORT COMPREHENSIVE SEXUALITY EDUCATION**

Family Planning Council of Iowa  
Des Moines, IA  
Phone: (515) 288-9028  
[www.fpcouncil.com](http://www.fpcouncil.com)

Planned Parenthood of Southeast Iowa  
Burlington, IA  
Phone: (319) 753-6209  
[www.plannedparenthood.org/ppsi](http://www.plannedparenthood.org/ppsi)

EyesOpenIowa  
Des Moines, IA  
Phone: 515-276-6788  
[www.eyesopeniowa.org](http://www.eyesopeniowa.org)

Planned Parenthood of the Heartland  
1.877.811.7526  
[www.plannedparenthood.org/heartland](http://www.plannedparenthood.org/heartland)

Iowa National Organization for Women  
Des Moines, IA  
[www.iowanow.org](http://www.iowanow.org)

The Project  
Des Moines, IA  
Phone: (515) 284-0245  
[www.aidsprojectci.org](http://www.aidsprojectci.org)

Planned Parenthood of Greater Iowa  
Des Moines, IA  
Phone: (515) 280-7004  
[www.ppgi.org](http://www.ppgi.org)

**ORGANIZATIONS THAT OPPOSE COMPREHENSIVE SEXUALITY EDUCATION**

Iowa Christian Alliance  
West Des Moines, IA  
Phone: (515) 225-1515  
[www.iowachristian.com](http://www.iowachristian.com)

Iowa Right to Life Committee  
Des Moines, IA  
Phone: (515) 244-1012  
[www.irlc.org](http://www.irlc.org)

Iowa Family Policy Center  
Pleasant Hill, IA  
Phone: (515) 263-3495  
[www.iowaprofamily.org](http://www.iowaprofamily.org)

**MEDIA OUTLETS**

**Newspapers in Iowa<sup>35</sup>**

*Courier*  
Waterloo, IA  
Phone: (800) 798-1741  
[www.wfcourier.com](http://www.wfcourier.com)

*The Daily Nonpareil*  
Council Bluffs, IA  
Phone: (712) 328-1811  
[www.nonpareilonline.com](http://www.nonpareilonline.com)

I O W A

*Des Moines Register*  
Des Moines, IA  
Phone: (515) 284-8590  
[www.desmoinesregister.com](http://www.desmoinesregister.com)

*The Gazette*  
Cedar Rapids, IA  
Phone: (319) 398-8254  
[www.gazetteonline.com](http://www.gazetteonline.com)

*Globe-Gazette*  
Mason City, IA  
Phone: (641) 421-0500  
[www.globegazette.com](http://www.globegazette.com)

*The Hawk Eye*  
Burlington, IA  
Phone: (319) 754-8461  
[www.thehawkeye.com](http://www.thehawkeye.com)

*The Messenger*  
Fort Dodge, IA  
Phone: (515) 573-2141  
[www.messengernews.net](http://www.messengernews.net)

*Quad-City Times*  
Davenport, IA  
Phone: (563) 383-2244  
[www.qctimes.com](http://www.qctimes.com)

*The Sioux City Journal*  
Sioux City, IA 51101  
Phone: (712) 293-4210  
[www.siouxcityjournal.com](http://www.siouxcityjournal.com)

*Telegraph Herald*  
Dubuque, IA  
Phone: (563) 588-5611  
[www.thonline.com](http://www.thonline.com)

**Political Blogs in Iowa**

*Blog for Iowa*  
[www.blogforiowa.com](http://www.blogforiowa.com)

*Bleeding Heartland*  
[www.bleedingheartland.com](http://www.bleedingheartland.com)

*The Iowa Independent*  
[www.iowaindependent.com/category/blog](http://www.iowaindependent.com/category/blog)

*Iowa Liberal*  
[www.iowaliberal.com](http://www.iowaliberal.com)

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<sup>1</sup> This refers to the federal government's fiscal year, which begins on October 1st and ends on September 30th. The fiscal year is designated by the calendar year in which it ends; for example, FY 2011 began on October 1, 2010, and ended on September 30, 2011.

<sup>2</sup> Iowa Code § 256.11(3), <http://www.legis.state.ia.us/IACODE/2001/256/11.html>.

<sup>3</sup> Iowa Code § 256.11(4), <http://www.legis.state.ia.us/IACODE/2001/256/11.html>.

<sup>4</sup> Iowa Code § 256.11(5)(j), <http://www.legis.state.ia.us/IACODE/2001/256/11.html>.

<sup>5</sup> Iowa Code § 279.50(9)(d)(2), <https://www.legis.iowa.gov/DOCS/ACO/IC/LINC/Section.279.50.pdf>.

<sup>6</sup> Danice K. Eaton, et. al., "Youth Risk Behavior Surveillance—United States, 2011," *Surveillance Summaries, Morbidity and Mortality Weekly Report*, vol. 61, no. SS-4 (June 8, 2012): accessed June 18, 2012, <http://www.cdc.gov/mmwr/pdf/ss/ss6104.pdf>.

<sup>7</sup> "Birth rate for U.S. teenagers reach historic lows for all age and ethnic groups," NCHS data brief, no. 89, (Hyattsville, MD: National Center for Health Statistics, 2012), accessed June 27, 2012, <http://www.cdc.gov/nchs/data/databriefs/db89.pdf>, Data table for figure 6.

<sup>8</sup> *Ibid.*

<sup>9</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 May 7, 2012, <http://www.guttmacher.org/pubs/USTPtrends.pdf>, Table 3.1.

<sup>10</sup> *Ibid.*, Table 3.2.

<sup>11</sup> *U.S. Teenage Pregnancies, Births, and Abortions: National and State Trends and Trends by Race and Ethnicity*, Table 3.1.

<sup>12</sup> Slide 9: "Rates of Diagnoses of HIV Infection among Adolescents Aged 13–19 Years, 2010—46 States and 5 U.S. Dependent Areas," *HIV Surveillance in Adolescents and Young Adults*, (Atlanta, GA: Centers for Disease Control and Prevention), accessed January 3, 2013, <http://www.cdc.gov/hiv/topics/surveillance/resources/slides/adolescents/index.htm>.

- <sup>13</sup> Slide 18: “Rates of AIDS Diagnoses among Adolescents Aged 13–19 Years, 2010—United States and 6 U.S. Dependent Areas,” *HIV Surveillance in Adolescents and Young Adults*, (Atlanta, GA: Centers for Disease Control and Prevention), accessed January 3, 2013, <http://www.cdc.gov/hiv/topics/surveillance/resources/slides/adolescents/index.htm>.
- <sup>14</sup> Slide 10: “Rates of Diagnoses of HIV Infection among Young Adults Aged 20–24 Years, 2010—46 States and 5 U.S. Dependent Areas,” *HIV Surveillance in Adolescents and Young Adults*, (Atlanta, GA: Centers for Disease Control and Prevention), accessed January 3, 2013, <http://www.cdc.gov/hiv/topics/surveillance/resources/slides/adolescents/index.htm>.
- <sup>15</sup> Slide 19: “Rates of AIDS Diagnoses among Young Adults Aged 20–24 Years, 2010—United States and 6 U.S. Dependent Areas,” *HIV Surveillance in Adolescents and Young Adults*, (Atlanta, GA: Centers for Disease Control and Prevention), accessed January 3, 2013, <http://www.cdc.gov/hiv/topics/surveillance/resources/slides/adolescents/index.htm>.
- <sup>16</sup> “Wonder Database: Sexually Transmitted Disease Morbidity for selected STDs by age, race/ethnicity and gender 1996–2009 Results,” (Atlanta, GA: Centers for Disease Control and Prevention, June 2011), accessed December 18, 2012, <http://wonder.cdc.gov>.
- <sup>17</sup> Ibid.
- <sup>18</sup> *Sisters Informing, Healing, Living, Empowering (SiHLE)*, Evidence-Based Programs, Resource Center for Adolescent Pregnancy Prevention (ReCAPP), ETR Associates, accessed July 1, 2011, <http://www.etr.org/recapp/index.cfm?fuseaction=pages.ebpDetail&PageID=567&PageTypeID=2>.
- <sup>19</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 July 1, 2011, <http://www.advocatesforyouth.org/storage/advfy/documents/sciencesuccess.pdf>, 98–101; see also “Pregnancy Prevention Intervention Implementation Report: Sisters Informing, Healing, Living, and Empowering (SiHLE),” Programs for Replication – Intervention Implementation Reports, U.S. Department of Health and Human Services, accessed July 1, 2011, <http://www.hhs.gov/ash/oah/prevention/research/programs/sihle.html>.
- <sup>20</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 July 1, 2011, <http://wymancenter.org/wordpress/wp-content/uploads/2011/08/TOP-Promoting-Positive-Well-Being-in-Adolescents.pdf>, 3.
- <sup>21</sup> Ibid, 9.
- <sup>22</sup> “Pregnancy Prevention Intervention Implementation Report: Teen Outreach Program,” Programs for Replication – Intervention Implementation Reports, U.S. Department of Health and Human Services, accessed July 1, 2011, [http://www.hhs.gov/ash/oah/oah-initiatives/tpp/programs/teen\\_outreach\\_program.pdf](http://www.hhs.gov/ash/oah/oah-initiatives/tpp/programs/teen_outreach_program.pdf).
- <sup>23</sup> “Welcome,” Wise Guys, accessed August 15, 2011, <http://www.wiseguysnc.org/default.asp>.
- <sup>24</sup> “Curriculum Chapter Synopsis,” Wise Guys, accessed August 15, 2011, [http://www.wiseguysnc.org/ch\\_synopsis.htm](http://www.wiseguysnc.org/ch_synopsis.htm).
- <sup>25</sup> Information provided by Mary Greene, Abstinence Education Coordinator, Bureau of Family Health, Iowa Department of Public Health, October 29, 2012.
- <sup>26</sup> Ibid.
- <sup>27</sup> “Power Through Choices,” Massachusetts Alliance on Teen Pregnancy, accessed August 18, 2011, <http://www.massteenpregnancy.org/sites/default/files/PTC%20Overview.pdf>.
- <sup>28</sup> “Power Through Choices – Sexuality,” NRCYS Online Catalog, accessed May 5, 2010, <http://www.nrcys.ou.edu/catalog/product.php?productid=116>.
- <sup>29</sup> “Power Through Choices,” Massachusetts Alliance on Teen Pregnancy.
- <sup>30</sup> Ibid.
- <sup>31</sup> *Preventing Teen Pregnancy Among Marginalized Youth: Developing a Policy, Program, and Research Agenda for the Future*, (Baltimore, MD: Healthy Teen Network, September 8, 2008), accessed May 5, 2010, [http://www.healthyteennetwork.org/index.asp?Type=B\\_PR&SEC={2AE1D600-4FC6-4B4D-8822-F1D5F072ED7B}&DE={235FD1E7-208D-4363-9854-4E6775EB8A4C}](http://www.healthyteennetwork.org/index.asp?Type=B_PR&SEC={2AE1D600-4FC6-4B4D-8822-F1D5F072ED7B}&DE={235FD1E7-208D-4363-9854-4E6775EB8A4C}).
- <sup>32</sup> “Welcome,” Wise Guys, accessed August 15, 2011, <http://www.wiseguysnc.org/default.asp>.
- <sup>33</sup> “Curriculum Chapter Synopsis,” Wise Guys, accessed August 15, 2011, [http://www.wiseguysnc.org/ch\\_synopsis.htm](http://www.wiseguysnc.org/ch_synopsis.htm).
- <sup>34</sup> The person listed represents the designated personnel in the state responsible for adolescent reproductive health.
- <sup>35</sup> This section is a list of major newspapers in the state and is by no means exhaustive of local print outlets.