



### NEW MEXICO

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

- **Personal Responsibility Education Program funds totaling \$346,571**

**In Fiscal Year 2010, local entities in New Mexico received:**

- **Teen Pregnancy Prevention Initiative funds totaling \$1,543,890**

#### SEXUALITY EDUCATION LAW AND POLICY

New Mexico does not mandate that schools teach sexuality education; however, it does mandate that “[e]ach school district...provide instruction about HIV and related issues in the curriculum of the required health education content area to all students in the elementary grades, in the middle/junior high school grades, and in the senior high school grades.”<sup>2</sup> This instruction must include “ways to reduce the risk of getting HIV/AIDS, stressing abstinence.”<sup>3</sup> Outcomes of such instruction should include the “ability to demonstrate refusal skills, overcome peer pressure, and use decision-making skills.”<sup>4</sup>

Educational materials and the grade levels at which they will be introduced are determined by local school districts. All instruction must be age-appropriate.<sup>5</sup> Local school boards must “insure [sic] the involvement of parents, staff, and students in the development of policies and the review of instructional materials.”<sup>6</sup> The state neither suggests curriculum nor limits what may or may not be included in sexuality education instruction.

New Mexico offers *Health Education Standards with Benchmarks and Performance Standards* that include abstinence and reproductive health beginning in grades three and four. Beginning in seventh and eighth grade, performance standards in health education include understanding “how healthy alternatives can replace unhealthy behaviors (i.e. abstinence, condom use, [and] other pregnancy prevention methods).”<sup>7</sup>

The *Health Education Standards with Benchmarks and Performance Standards* state that each school district must have a policy allowing parents to “request that their child be exempted from the parts of the health education curriculum that addresses [sic] the sexuality performance standards.”<sup>8</sup> Alternative lessons must be created for exempted students. This is referred to as an “opt-out” policy. Local school boards must include parents, staff, and students in developing their own opt-out policy.

See [New Mexico Administrative Code §§ 6.12.2.10 and 6.29.6.8](#); and [Health Education Standards with Benchmarks and Performance Standards](#).

#### RECENT LEGISLATION

*SIECUS is not aware of any proposed legislation regarding sexuality education in New Mexico.*

## YOUTH SEXUAL HEALTH DATA

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

### New Mexico Youth Risk Behavior Survey (YRBS) Data<sup>9</sup>

- In 2009, 5% of female high school students and 10% of male high school students in New Mexico 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, 12% of female high school students and 18% of male high school students in New Mexico 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 32% of male high school students in New Mexico 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 65% of males in New Mexico 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, 15% of females and 11% of males in New Mexico 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, 20% of females and 26% of males in New Mexico reported having used alcohol or drugs the last time they had sexual intercourse compared to 17% of females and 26% of males nationwide.
- In 2009, 77% of high school students in New Mexico reported having been taught about AIDS/HIV in school compared to 87% of high school students nationwide.

### New Mexico Teen Pregnancy, HIV/AIDS, and Sexually Transmitted Disease Data

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

- New Mexico's teen birth rate currently ranks 2<sup>nd</sup> in the United States, with a rate of 64.1 births per 1,000 young women ages 15–19 compared to the national rate of 41.5 births per 1,000.<sup>10</sup> In 2008, there were a total of 3,734 live births reported to young women ages 15–19 in New Mexico.<sup>11</sup>
- In 2005, New Mexico's teen pregnancy rate ranked 2<sup>nd</sup> in the United States, with a rate of 93 pregnancies per 1,000 young women ages 15–19 compared to the national rate of 70 pregnancies per 1,000.<sup>12</sup> There were a total of 6,770 pregnancies among young women ages 15–19 in New Mexico.<sup>13</sup>

- In 2005, New Mexico's teen abortion rate ranked 16<sup>th</sup> in the United States, with a rate of 18 abortions per 1,000 young women ages 15–19 compared to the national rate of 19 abortions per 1,000.<sup>14</sup>

*HIV and AIDS*

- New Mexico's HIV infection rate ranks 21<sup>st</sup> in the United States, with a rate of 8.8 cases per 100,000 individuals compared to the national rate of 19.5 cases per 100,000.<sup>15</sup>
- New Mexico ranks 26<sup>th</sup> in cases of HIV infection diagnosed in the United States among all age groups. In 2008, there were a total of 175 new cases of HIV infection diagnosed in New Mexico.<sup>16</sup>
- New Mexico's HIV infection rate among young people ages 13–19 ranks 28<sup>th</sup> in the United States, with a rate of 3.2 cases per 100,000 young people compared to the national rate of 9.1 cases per 100,000.<sup>17</sup>
- New Mexico ranks 36<sup>th</sup> in number of reported AIDS cases in the United States among all age groups. In 2008, there were a total of 100 new AIDS cases reported in New Mexico.<sup>18</sup>
- New Mexico's AIDS rate ranks 33<sup>rd</sup> in the United States, with a rate of 5.1 cases per 100,000 individuals compared to the national rate of 12.3 cases per 100,000.<sup>19</sup>
- New Mexico's AIDS rate among young people ages 13–19 ranks 35<sup>th</sup> in the United States with a rate of 0.6 cases per 100,000 young people compared to the national rate of 1.8 cases per 100,000.<sup>20</sup>

*Sexually Transmitted Diseases*

- New Mexico ranks 20<sup>th</sup> in reported cases of Chlamydia among young people ages 15–19 in the United States, with an infection rate of 20.14 cases per 1,000 compared to the national rate of 19.51 cases per 1,000. In 2008, there were a total of 2,934 cases of Chlamydia reported among young people ages 15–19 in New Mexico.<sup>21</sup>
- New Mexico ranks 30<sup>th</sup> in reported cases of gonorrhea among young people ages 15–19 in the United States, with an infection rate of 2.71 cases per 1,000 compared to the national rate of 4.52 cases per 1,000. In 2008, there were a total of 395 cases of gonorrhea reported among young people ages 15–19 in New Mexico.<sup>22</sup>
- New Mexico ranks 31<sup>st</sup> in reported cases of primary and secondary syphilis among young people ages 15–19 in the United States, with an infection rate of 0.01 cases per 1,000 compared to the national rate of 0.04 cases per 1,000.<sup>23</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.

- There is one TPPI Tier 1 grantee in New Mexico, Capacity Builders, Inc., which received \$988,184 for Fiscal Year 2010.

#### Capacity Builders, Inc., \$988,184 (2010–2014)

Capacity Builders, Inc., uses its TPPI Tier 1 grant to support its “Navajo Youth Builders” program, which serves Navajo youth ages 11–19. The overall goal of the program is to “reduce and ultimately eliminate the occurrence of teen and child pregnancy in the Navajo Nation community.”<sup>24</sup>

Capacity Builders implements *Teen Outreach Program (TOP)*, 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>25</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>26</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>27</sup>

Capacity Builders implements the program at seven reservation-based Boys & Girls Clubs. In addition, participants spend time with Navajo elders and other adult role models by participating in community service and recreational activities. Capacity Builders, Inc., plans for the program to reach approximately 162 youth annually.

#### *TPPI Tier 2: Innovative Approaches*

The TPPI Tier 2 grant program supports research and demonstration programs in order to develop, replicate, refine, and test additional models and innovative strategies for preventing teenage pregnancy.

- There is one TPPI Tier 2 grantee in New Mexico, National Indian Youth Leadership Project, which received \$555,706 for Fiscal Year 2010.

#### National Indian Youth Leadership Project, \$555,706 (2010–2014)

The National Indian Youth Leadership Project (NIYLP) is a community-based organization whose “mission is to nurture the potential of Native youth to be contributors to a more positive world through adventure-based learning and service to family, community, and nature.”<sup>28</sup>

The organization uses its TPPI Tier 2 funds to implement the “Web of Life Project,” an adaptation of *Project Venture* and *Circle of Life*. The program is designed and culturally appropriate for use with Native American youth ages 12–17. The program will serve 1,200 young people in rural McKinley County.<sup>29</sup>

*Project Venture* is an evidence-based program created by NIYLP to reduce substance abuse in Native American youth. It “is an outdoor experiential youth development program” designed for young people in grades five through 8.<sup>30</sup> *Project Venture* was “designed to foster the development of positive self-concept, effective social interaction skills, a community service ethic, an internal locus of control, and improved decisionmaking and problem-solving skills.”<sup>31</sup> *Circle of Life: HIV/AIDS Curriculum for American Indian and Alaska Native Students* is a holistic, culture-based HIV/AIDS and STD prevention curriculum for elementary and middle school students. The curriculum incorporates traditional symbols and story-telling specific to Native American culture to instill pride and self-esteem and to encourage safe behaviors. *Circle of Life* also teaches caring and compassion for HIV-positive individuals. The curriculum includes parent-child activities that are designed to engage parents in their children’s learning and heighten community awareness of HIV/AIDS.<sup>32</sup>

#### *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 New Mexico.

### **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 New Mexico Department of Health received \$346,571 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 Family Planning Program of the New Mexico Department of Health implements the PREP state-grant program. The department will provide funding to local public and private entities to serve youth ages 12–18. Funded entities must implement *¡Cuidate!* or *Teen Outreach Program (TOP)*. (Please see the *TPPI Tier 1: Evidence-Based Programs* section above for more information on *TOP*.)

*¡Cuidate!* is 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>33</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. 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 New Mexico.

#### **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.

- New Mexico chose not to apply for Title V abstinence-only funds for Fiscal Year 2010.

**New Mexico 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>		
Capacity Builders, Inc.	\$988,184	2010–2014
<b>TOTAL</b>	<b>\$988,184</b>	
<i>TPPI Tier 2: Innovative Approaches</i>		
National Indian Youth Leadership Project	\$555,706	2010–2014
<b>TOTAL</b>	<b>\$555,706</b>	
<b>Personal Responsibility Education Program (PREP)</b>		
<i>PREP State-Grant Program</i>		
New Mexico Department of Health (federal grant)	\$346,571	2010
<b>TOTAL</b>	<b>\$346,571</b>	
<b>GRAND TOTAL</b>		
	<b>\$1,890,461</b>	<b>2010</b>

**COMPREHENSIVE APPROACHES TO SEXUALITY EDUCATION**

*SIECUS has identified some examples of model programs, policies, and best practices being implemented in New Mexico public schools that provide a more comprehensive approach to sex education for young people.*<sup>34</sup>

*Comprehensive Sex Education Programs in Public Schools*

New Mexico GRADS (Graduation Reality and Dual-Role Skills) Program

The New Mexico GRADS (Graduation Reality and Dual-Role Skills) Program was founded in 1989 to address the rate of high school drop-outs associated with teen pregnancy. GRADS is an educational program for pregnant and parenting high school students that focuses on “delaying repeat pregnancies,” “healthy choices for teens and their families,” “promoting safe family relationships,” and “encouraging prenatal and maternal care to prevent low birth-weight” infants as some of its primary objectives. It aims to “facilitate parenting teens’ graduation and economic independence,” “promote healthy multi-generational families,” and “reduce risk-taking behaviors [among participants].”<sup>35</sup> The program operated in 35 high schools during the 2008–2009 school year.<sup>36</sup>

One component of the program is comprehensive sex education.<sup>37</sup> The program uses *get Smart*, a high school peer-education program developed by Planned Parenthood, along with additional supplemental materials. *get Smart* provides students with “age appropriate sexual health and responsibility information” and trains them to become peer health educators for their network of friends.<sup>38</sup> The curriculum addresses such topics as sexual health behavior, contraception, pregnancy, and STDs, and works to dispel myths regarding sexual health practices.<sup>39</sup>

Santa Fe Public Schools

The Santa Fe public school district first began providing human sexuality education to students in the late 1990s in an effort to meet the needs of all students and address the high rate of teen pregnancy in the district. The district’s Health & Wellness committee worked to implement sex

education lessons in the schools. In 2002, the district developed a formal collaboration with Planned Parenthood of New Mexico and implemented human sexuality education lessons in grades seven and eight. The following year similar lessons were also provided to ninth grade students. Today, the school district provides human sexuality education in grades four through nine and offers in-school programs for high-risk students and parenting teens.<sup>40</sup>

In fourth and fifth grades, human growth and development lessons are taught by school nurses. These lessons address anatomy, human development and changes to the body, puberty, and body integrity, such as ‘good touch, bad touch.’ Fifth grade lessons also address sexual abuse and harassment and sexually transmitted diseases (STDs), including HIV, among other topics. Middle school human sexuality lessons are provided in science courses. Along with a review of growth and development information, these lessons address reproductive anatomy, pregnancy and birth, STDs/HIV, contraception, and communication skills among other topics. In seventh and eighth grades, lessons also address healthy relationships, self-advocacy, and refusal skills. Ninth grade students receive sex education, provided by Planned Parenthood educators, in health class. Topics include pregnancy and birth, healthy relationships, family planning, contraception, STDs, and HIV. The lessons for all human sexuality instruction in the district are locally produced and use elements of the *get Smart* curriculum developed by Planned Parenthood. (For more information on the *get Smart* curriculum please refer to the above section, “New Mexico GRADS (Graduation Reality and Dual Role Skills Program).”<sup>41</sup>

One class activity for eighth and ninth grade students, called the “empathy belly,” allows students to experience a simulated pregnancy by wearing a body vest.<sup>42</sup> Another includes a presentation by the district’s teen parent program panel, which consists of teen parents who are students in the district. During their presentation, the teens discuss their experiences as parents and offer a frank, peer perspective on the joys and hardships of early parenthood. The teen parents on the panel participate in a separate program run by the district that trains them to be peer sexual health educators. Students involved in the program give presentations in schools throughout the district.

Santa Fe Public Schools also offers a 25 week-long sex education program for at-risk students in middle school that includes a service learning component.<sup>43</sup>

*We encourage you to submit any updated or additional information on comprehensive approaches to sex education being implemented in New Mexico 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>44</sup>

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**ORGANIZATIONS THAT SUPPORT COMPREHENSIVE SEXUALITY EDUCATION**

ACLU of New Mexico  
Albuquerque, NM  
Phone: (505) 266-5915  
[www.aclu-nm.org](http://www.aclu-nm.org)

New Mexico Teen Pregnancy Coalition  
Albuquerque, NM  
Phone: (505) 254-8737  
[www.nmtpc.org](http://www.nmtpc.org)

Equality New Mexico  
Albuquerque, NM  
Phone: (505) 224-2766  
[www.eqnm.org](http://www.eqnm.org)

Planned Parenthood of New Mexico  
Albuquerque, NM  
Phone: (505) 265-5976  
[www.plannedparenthood.org/new-mexico](http://www.plannedparenthood.org/new-mexico)

New Mexico Gay-Straight Alliance  
Network  
Tesuque, NM  
Phone: (505) 983-6158  
[www.nmgsa.org](http://www.nmgsa.org)

Southwest Care Center  
Santa Fe, NM  
Phones: (888) 320-8200  
[www.southwestcare.org](http://www.southwestcare.org)

New Mexico Religious Coalition for  
Reproductive Choice  
Albuquerque, NM  
Phone: (505) 890-1010  
[www.nmrcrc.org](http://www.nmrcrc.org)

Southwest Women's Law Center  
Albuquerque, NM  
Phone: (505) 244-0502  
[www.swwomenslaw.org](http://www.swwomenslaw.org)

New Mexicans for Responsible Sexuality  
Education (NMRSE)  
Albuquerque, NM  
Phone: (505) 254-8737  
[www.nmrse.org](http://www.nmrse.org)

**ORGANIZATIONS THAT OPPOSE COMPREHENSIVE SEXUALITY EDUCATION**

New Mexico Abstinence Education  
Coalition  
[www.nmaec.org](http://www.nmaec.org)

Right to Life Committee of New Mexico  
Albuquerque, NM  
Phone: (505) 881-4563  
[www.rtlnm.org](http://www.rtlnm.org)

## MEDIA OUTLETS

### Newspapers in New Mexico<sup>45</sup>

*Albuquerque Journal*

Albuquerque, NM

Phone: (505) 823-3800

[www.abqjournal.com](http://www.abqjournal.com)

*Current-Argus*

Carlsbad, NM

Phone: (505) 887-5501

[www.currentargus.com](http://www.currentargus.com)

*Clovis News Journal*

Clovis, NM

Phone: (505) 763-3431

[www.cnjonline.com](http://www.cnjonline.com)

*The Daily Times*

Farmington, NM

Phone: (505) 325-4545

[www.daily-times.com](http://www.daily-times.com)

*Hobbs News-Sun*

Hobbs, NM

Phone: (505) 391-5440

[www.hobbsnews.com](http://www.hobbsnews.com)

*Independent*

Gallup, NM

Phone: (505) 863-6811

[www.gallupindependent.com](http://www.gallupindependent.com)

*Las Cruces Sun-News*

Las Cruces, NM

Phone: (505) 541-5400

[www.lcsun-news.com](http://www.lcsun-news.com)

*Roswell Daily Record*

Roswell, NM

Phone: (505) 622-7710

[www.roswell-record.com](http://www.roswell-record.com)

*The Santa Fe New Mexican*

Santa Fe, NM

Phone: (505) 983-3303

[www.santafenewmexican.com](http://www.santafenewmexican.com)

### Political Blogs in New Mexico

*Democracy for New Mexico*

[www.democracyfornewmexico.com](http://www.democracyfornewmexico.com)

*New Mexico Politics, New Mexico Voices*

[www.nmfbihop.com](http://www.nmfbihop.com)

*The New Mexico Independent*

[www.newmexicoindependent.com](http://www.newmexicoindependent.com)

[/category/blog](http://www.newmexicoindependent.com/category/blog)

*NM Politics*

[www.nmpolitics.net](http://www.nmpolitics.net)

<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> N.M. Admin. Code § 6.12.2.10(C)(1), <<http://www.nmcpr.state.nm.us/nmac/parts/title06/06.012.0002.htm>>.

<sup>3</sup> N.M. Admin. Code § 6.12.2.10(C)(3)(e).

<sup>4</sup> N.M. Admin. Code § 6.12.2.10(C)(3)(h).

<sup>5</sup> N.M. Admin. Code § 6.12.2.10(C)(2).

<sup>6</sup> N.M. Admin. Code § 6.12.2.10(D).

<sup>7</sup> *Health Education Standards with Benchmarks and Performance Standards* (New Mexico: New Mexico Public Education Department), accessed 14 April 2010, <[http://www.ped.state.nm.us/div/sipds/health/dl/022706\\_docs/HE%20Standards.pdf](http://www.ped.state.nm.us/div/sipds/health/dl/022706_docs/HE%20Standards.pdf)>, 29.

<sup>8</sup> *Ibid.*, 1.

- <sup>9</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>>. Note: New Mexico did not participate in the full 2009 YRBS.
- <sup>10</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>11</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>12</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>13</sup> *Ibid.*, Table 3.2.
- <sup>14</sup> *U.S. Teenage Pregnancies, Births, and Abortions: National and State Trends and Trends by Race and Ethnicity*, Table 3.3.
- <sup>15</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>16</sup> *Ibid.*
- <sup>17</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>18</sup> *HIV Surveillance Report, 2008*, Table 20.
- <sup>19</sup> *Ibid.*
- <sup>20</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>21</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>22</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>23</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>24</sup> “Teenage Pregnancy Prevention: Summary of Funded Evidence-Based Programs for 2010,” U.S. Department of Health & Human Services, accessed 14 April 2011, <[http://www.hhs.gov/ash/oah/prevention/grantees/models\\_2010\\_programs.html](http://www.hhs.gov/ash/oah/prevention/grantees/models_2010_programs.html)>.
- <sup>25</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>26</sup> *Ibid.*, 9.
- <sup>27</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>28</sup> “Mission and Vision Statement,” The National Indian Youth Leadership Project, accessed 30 August 2011, <<http://www.niylp.org/mission-vision.htm>>.
- <sup>29</sup> “Teenage Pregnancy Prevention: Summary of Funded Research and Development Programs for 2010,” U.S. Department of Health & Human Services, accessed 30 August 2011, <[http://www.hhs.gov/ash/oah/prevention/grantees/research\\_2010\\_projects.html](http://www.hhs.gov/ash/oah/prevention/grantees/research_2010_projects.html)>.
- <sup>30</sup> *Project Venture* (NREPP—SAMHSA’s National Registry of Evidence-Based Programs and Practices: Washington, DC, 2007), accessed 30 August 2011, <<http://nrepp.samhsa.gov/ViewIntervention.aspx?id=102>>.
- <sup>31</sup> *Ibid.*
- <sup>32</sup> *Ibid.*; see also “Circle of Life, Elementary Curriculum K–6,” North Dakota Department of Public Instruction, Coordinated School Health, accessed 14 July 2011, <<http://www.dpi.state.nd.us/health/HIV/colelementary.pdf>>.
- <sup>33</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.

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<sup>34</sup> This is by no means a complete list of all comprehensive programming and policies related to sexuality education, but rather some examples of best practices and model programs that SIECUS identified.

<sup>35</sup> “Our Mission,” New Mexico GRADS, accessed 23 May 2010, <<http://www.nmgrads.org/>>.

<sup>36</sup> Ibid.

<sup>37</sup> “Quick Facts,” New Mexico GRADS, accessed 23 May 2010, <<http://www.nmgrads.org/facts.html>>.

<sup>38</sup> “get Smart,” Planned Parenthood Trust of San Antonio and South Central Texas, accessed 23 May 2010, <<http://parenthoodwww.ppcnj.org/pptrustsanantonio/get-smart-31892.htm>>.

<sup>39</sup> Ibid.

<sup>40</sup> Conversation between Morgan Marshall and Johnny Wilson, vice president of education, Planned Parenthood of New Mexico, 1 June 2010.

<sup>41</sup> Ibid.

<sup>42</sup> Ibid.

<sup>43</sup> Ibid.

<sup>44</sup> The person listed represents the designated personnel in the state responsible for adolescent reproductive health.

<sup>45</sup> This section is a list of major newspapers in the state and is by no means exhaustive of local print outlets.