



ADOLESCENT SEXUAL HEALTH PROMOTION AT A GLANCE

The following is an overview of the state of adolescent sexual health promotion efforts in New Jersey in Fiscal Year (FY) 2012 including sexuality education state laws and policy, sexual health data, and federal funding.

STATE LEVEL SEXUALITY EDUCATION LAW AND POLICY OVERVIEW

New Jersey law mandate at least 150 minutes of health education during each school week in grades one through 12. School districts must align their health education curricula with the New Jersey Department of Education's [Core Curriculum Content Standards for Comprehensive Health and Physical Education](#). In addition to the *Core Curriculum Content Standards*, the New Jersey Department of Education published the [Comprehensive Health Education and Physical Education Curriculum Framework](#), which includes detailed suggestions for teaching about HIV/AIDS, sexually transmitted diseases (STDs), and teen pregnancy prevention. State law also requires that all sexuality education programs and curricula stress abstinence. Parents or guardians may remove their children from school-based sexuality education and/or HIV/STD education classes ("opt-out").

REPORTED SEXUAL ACTIVITY OF YOUNG PEOPLE IN NEW JERSEY



Among New Jersey high school students in 2011, 41% of females and 48% of males reported **ever having had sexual intercourse, lower than the reported national average** of 46% of females and 49% of males.



Among New Jersey high school students in 2011, 31% of females and 34% of males reported being currently sexually active (having had sexual intercourse in the three months prior), **lower for females than the reported national average** of 34% of females and 33% of males.

NEW JERSEY TEEN PREGNANCY, BIRTH & ABORTION RATES



New Jersey's teen **pregnancy rate is lower than the national average**, with 62 pregnant teens per 1,000 compared to 68 pregnant teens per 1,000 nationwide in 2008.

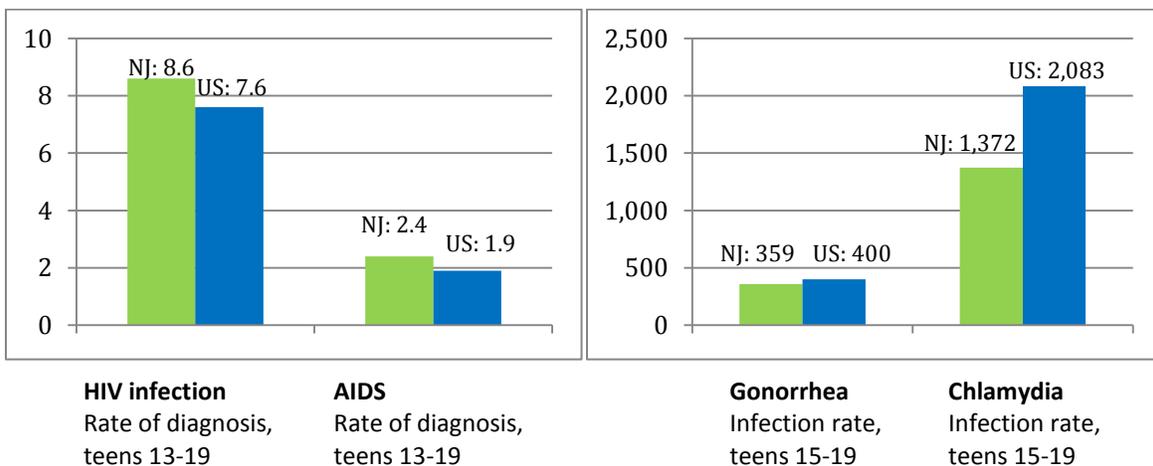


New Jersey's teen **birth rate is lower than the national average**, with 19 teens per 1,000 giving birth compared to 31 teens per 1,000 nationwide in 2011.



New Jersey's teen **abortion rate is higher than the national average**, with 30 teens per 1,000 having an abortion compared to 18 teens per 1,000 nationwide in 2008.

NEW JERSEY'S YOUNG PEOPLE: HIV/AIDS & OTHER STD RATES IN 2011 (PER 100,000)

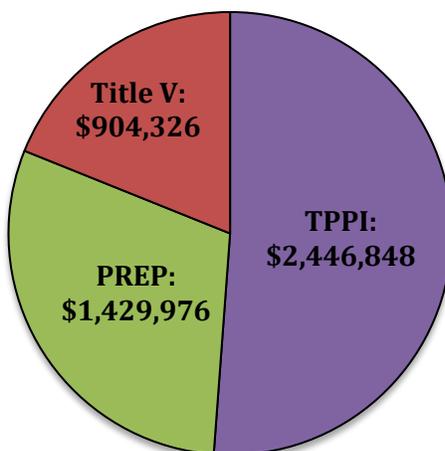


FY 2012 FEDERAL FUNDING IN NEW JERSEY: TOTAL \$4,781,150

Title V AOUM Program (Title V) \$904,326

New Jersey has chosen to implement abstinence-only-until-marriage (AOUM) programs through Title V, matching every \$4 federal dollars with \$3 state dollars or in-kind contributions.

The New Jersey Title V Abstinence-Only Program is implemented by the New Jersey Department of Health in collaboration with four local entities. Funded organizations provide programming to youth ages 10–14 who reside in one of the state’s 30 state-identified, high-risk municipalities. Programming takes place in both school- and community-based settings and sub-grantees must choose curricula that meet the federal A-H guidelines, while also being “medically accurate, effective, and non-stigmatizing to LGBTQ youth.”



Teen Pregnancy Prevention Initiative (TPPI) \$2,446,848

Funds for local entities to implement evidence-based programs (Tier 1) or innovative strategies (Tier 2) to prevent teen pregnancy.

There are two TPPI Tier 1 grantees in New Jersey: The Central Jersey Family Health Consortium (formerly the Regional Perinatal Consortium of Monmouth and Ocean County) and South Jersey Healthcare. There is also one Tier 2 Innovative Approaches grantee in New Jersey, Princeton Center for Leadership Training, which received \$965,522 for FY 2012.

Personal Responsibility Education Program (PREP) \$1,429,976

Funds for states (PREP), local entities (PREIS), community/faith-based organizations (CPREP), and tribes (TPREP) to implement evidence-informed or innovative teen pregnancy- and HIV/STD-prevention, and adulthood preparation programs for young people.

The New Jersey PREP state-grant program is implemented by the New Jersey Department of Health with the help of six local sub-grantees. The funded programs serve youth ages 10–19 living in the following municipalities: Atlantic City, Pleasantville, Seabrook, Trenton, and Vineland. The sub-grantees provide school- and community-based programming and address healthy relationships, parent-child communication, and adolescent development to meet the adulthood preparation subject requirement.

For further background on the federal programs, information on the grantees and the programs they are implementing, as well as citations, please see the FY 2012 New Jersey State Profile available at

www.siecus.org/NewJersey2012