



SIECUS

OKLAHOMA

State Profile

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

- **Division of Adolescent and School Health funds totaling \$60,000**
- **Personal Responsibility Education Program funds totaling \$601,743**
- **Title V State Abstinence Education Program funds totaling \$603,447**

In Fiscal Year 2013, local entities in Oklahoma received:

- **Teen Pregnancy Prevention Initiative funds totaling \$431,543**
 - **Pregnancy Assistance Fund dollars totaling \$977,432**
- **Personal Responsibility Education Innovative Strategies funds totaling \$929,750**
- **Tribal Personal Responsibility Education Program funds totaling \$646,503**

SEXUALITY EDUCATION LAW AND POLICY

Oklahoma does not require schools to teach sexuality education. However, schools are required to provide HIV/AIDS-prevention education. This education must be limited to the “discussion of the disease AIDS and its spread and prevention.”² The class must be taught once during either grade 5 or 6, once during grades 7–9, and once during grades 10–12.³ All curricula and materials must be checked for medical accuracy by the Oklahoma Department of Health and must only include “factual medical information for AIDS prevention.”⁴

HIV/AIDS education must specifically teach that:

- engaging in homosexual activity, promiscuous sexual activity, intravenous drug use, or contact with contaminated blood products is now known to be primarily responsible for contact with the AIDS virus;
- avoiding the activities specified above is the only method of preventing the spread of the virus;
- artificial means of birth control are not a certain means of preventing the spread of the AIDS virus and reliance on such methods puts a person at risk for exposure to the disease; and
- sexual intercourse, with or without condoms, with any person testing positive for human immunodeficiency virus (HIV) antibodies, or any other person infected with HIV, places that individual in a high-risk category for developing AIDS.⁵

If a school district does choose to teach sexuality education, all curricula and materials must be approved for medical accuracy by the state and by the district superintendent.⁶ All materials must also be available to parents for review.⁷ In addition, all sexuality education classes must have as one of their primary purposes “the teaching of or informing students about the practice of abstinence.”⁸

A school district must provide written notification of all sexuality and HIV/AIDS-prevention classes. Parents or guardians can submit written notification if they do not want their children to participate in such classes.⁹ This is referred to as an “opt-out” policy. See Oklahoma Statutes 70-11-103.3, 70-11-105.1

2013 STATE LEGISLATIVE SESSION ACTIVITY

Bill to Require Comprehensive Sex Education

Introduced in February 2013, HB 1380 and companion bill, SB 185, require that students be provided with medically accurate, factually based sexual health education. Currently, Oklahoma state policy does not require the teaching of sex education. In addition to mandating sex education, HB 1380/SB 185 would grant parents and guardians the opportunity to inspect the curricula and opt their children out of any sex education. The legislation carries over into the second 2014 session of Oklahoma's 54th Legislature.

YOUTH SEXUAL HEALTH DATA

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

Oklahoma Youth Risk Behavior Survey (YRBS) Data¹⁰

- In 2013, 47.6% of female high school students and 52.5% of male high school students in Oklahoma 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, 2.4% of female high school students and 6.6% of male high school students in Oklahoma 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, 36.5% of female high school students and 35.9% of male high school students in Oklahoma 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, 11.3% of female high school students and 5.7% of male high school students in Oklahoma 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 youth risk behaviors.

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

Teen Pregnancy, Birth, and Abortion

- In 2010, Oklahoma's teen pregnancy rate ranked sixth in the United States, with a rate of 69 pregnancies per 1,000 young women ages 15–19, compared to the national rate of 57 per 1,000.¹¹ There were a total of 8,860 pregnancies among young women ages 15–19 in Oklahoma in 2010.¹²
- In 2012, Oklahoma's teen birth rate ranked second in the United States, with a rate of 47.3 births per 1,000 young women ages 15–19, compared to the national rate of 29.4 per 1,000.¹³ In 2012, there were a total of 5,844 live births to young women ages 15–19 reported in Oklahoma.¹⁴

O K L A H O M A

- In 2010, Oklahoma's teen abortion rate ranked 41st in the United States, with a rate of eight abortions per 1,000 young women ages 15–19, compared to the national rate of 15 per 1,000.¹⁵ There were a total of 970 abortions among young women ages 15–19 reported in Oklahoma in 2010.¹⁶

HIV and AIDS

- In 2011, the rate of diagnoses of HIV infection among adolescents ages 13–19 in Oklahoma was 5.2 per 100,000, compared to the national rate of 7.6 per 100,000.¹⁷
- In 2011, the rate of AIDS diagnoses among adolescents ages 13–19 in Oklahoma was 0.8 per 100,000, compared to the national rate of 1.9 per 100,000.¹⁸
- In 2011, the rate of diagnoses of HIV infection among young adults ages 20–24 in Oklahoma was 23.2 per 100,000, compared to the national rate of 36.3 per 100,000.¹⁹
- In 2011, the rate of AIDS diagnoses among young adults ages 20–24 in Oklahoma was 4.8 per 100,000, compared to the national rate of 10.9 per 100,000.²⁰

Sexually Transmitted Diseases

- In 2012, Oklahoma ranked 23rd in the United States for reported cases of chlamydia among young people ages 15–19, with an infection rate of 2,027.1 cases per 100,000, compared to the national rate of 2,001.7 per 100,000. In 2012, there were a total of 5,277 cases of chlamydia among young people ages 15–19 reported in Oklahoma.²¹
- In 2012, Oklahoma ranked 16th in the United States for reported cases of gonorrhea among young people ages 15–19 in the United States, with an infection rate of 421.4 cases per 100,000, compared to the national rate of 376.8 per 100,000. In 2012, there were a total of 1,097 cases of gonorrhea among young people ages 15–19 reported in Oklahoma.²²
- In 2012, Oklahoma ranked 34th in the United States for reported cases of primary and secondary syphilis among young people ages 15–19, with an infection rate of 1.2 cases per 100,000, compared to the national rate of 4.1 per 100,000. In 2012, there were a total of three cases of syphilis among young people ages 15–19 reported in Oklahoma.²³

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 to prevent unintended teen pregnancy, underlying behavioral risk factors, or other associated risk factors.

- There is one TPPI Tier 1 grantee in Oklahoma, Youth Services of Tulsa, Inc., which received \$431,543 for FY 2013.

Youth Services of Tulsa, Inc., \$431,543 (FY 2013)

Youth Services of Tulsa is a nonprofit community agency that provides “innovative services and activities designed to increase self discovery and instill positive core values and decision-making skills that will keep youth safe and allow them to lead healthy and productive lives.”²⁴ Its services and programs include an adolescent emergency shelter, counseling, and an LGBTQ support group.

With its TPPI funding, Youth Services implements the PregNot program, which uses *Sexual Health and Adolescent Risk Prevention (SHARP)*. The program serves young people ages 12–19 living or participating in six Tulsa Housing Authority public housing communities, three Juvenile Bureau District Court of Tulsa County detention centers (JBDC Detention Home, Lakeside Home, and Phoenix Rising), and five programs at Youth Services (the Adolescent Emergency Shelter, Street Outreach, First Offender Diversion, home-based counseling, and Transitional Living programs).²⁵ PregNot serves 1,400 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 are no TPPI Tier 2 Innovative Approaches grantees in Oklahoma.

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 Oklahoma.

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 no DASH grantees in Oklahoma funded to strengthen student health through ESHE, SHS, and SSE in FY 2013.

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 Oklahoma funded to deliver YMSM programming in FY 2013.

DASH also provides funding for state, territorial, and local education agencies and state health agencies to establish and strengthen systematic procedures to collect and report Youth Risk Behavior Survey (YRBS) and School Health Profiles data for policy and program improvements.

- There was one DASH grantee in Oklahoma funded to collect and report YRBS and School Health Profiles data in FY 2013, the Oklahoma Department of Health (\$60,000).

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 is one Pregnancy Assistance Fund grantee in Oklahoma, the Choctaw Nation of Oklahoma which received \$977,432 for FY 2013.

The Choctaw Nation of Oklahoma, \$977,432 (FY 2013)

The Choctaw Nation of Oklahoma uses PAF to implement the Choctaw Support for Pregnant and Parenting Teen program aims to provide comprehensive, medically appropriate services to participants, including linkages with critical resources, ongoing support for health and educational achievement, and evidence-based positive parenting and relationship skills instruction using a nationally validated model. Participants receive Parents as Teachers education twice a month; the evidence-based curriculum focuses on child development education, parent-child interaction activities, and family well-being discussions. Participants may also partake in a monthly group meeting combining Parents as Teachers curriculum with Choctaw-specific cultural activities. Each family receives a variety of assessments for each child, and goals are set and re-evaluated at each visit until they are met or are no longer desired by the family.²⁶

Personal Responsibility Education Program

The Personal Responsibility Education Program (PREP) totals \$75 million per year for FYs 2010–2014 and is the first-ever dedicated funding stream for more comprehensive approaches to sexuality education. The U.S. Department of Health and Human Services, Administration for Children and Families (ACF) administers the grant. PREP includes a \$55 million state grant program, \$10 million to fund local entities through the Personal Responsibility Education Innovative Strategies (PREIS) program, \$3.1 million for Tribal PREP, for tribes and tribal organizations, with remaining funds for evaluation, training, and technical assistance.

In addition, provisions within the statute for PREP enable a competitive application process for community- and faith-based organizations within states and territories that do not directly seek PREP funding by the third year of the program; these competitive PREP (CPREP) grants were awarded to organizations in five states and three territories in FY 2013. Details on the state grant program, PREIS, Tribal PREP, and CPREP are included below.

PREP State-Grant Program

The PREP state-grant program supports evidence-based programs that provide young people with medically accurate and age-appropriate information for the prevention of 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 Oklahoma State Department of Health received \$601,743 in federal PREP funds for FY 2013.
- There are two sub-grantees for the Oklahoma PREP state-grant program: Oklahoma City-County Health Department (\$349,464) and the Tulsa City-County Health Department (\$345,063).²⁷

The Oklahoma State Department of Health Maternal and Child Health Service implements the state's PREP grant program, in collaboration with two sub-grantees, through both community- and school-based programming. The funded programs target youth ages 11–19 in Oklahoma City and Tulsa metropolitan statistical areas. Sub-grantees, along with school personnel and parents, decide which three adulthood preparation topics to address. Oklahoma PREP uses the following three curricula: *Making a Difference!*, *Making Proud Choices!*, and *Reducing the Risk!*²⁸

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 Oklahoma, Oklahoma Institute for Child Advocacy, which received \$929,750 for FY 2013.²⁹

Oklahoma Institute for Child Advocacy, \$929,750 (FY 2013)

The Oklahoma Institute for Child Advocacy (OICA) is a community-based organization located in Oklahoma City with the mission of “creating awareness, taking action and changing policy to improve the health, safety and well-being of Oklahoma’s children.”³⁰ With its PREIS grant, OICA implements and evaluates the *POWER Through Choices* sexuality education curriculum, an adaptation of *Power Through Choices* specifically designed for youth in foster care. The program serves young people ages 13–18 in the foster care system in California, Maryland, and Oklahoma.

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.

- Three local entities in Oklahoma received a total of \$646,503 in Tribal PREP funds for FY 2013: Cherokee Nation (\$308,828), Choctaw Nation of Oklahoma (\$195,418), and Iowa Tribe of Oklahoma (\$142,257). At the time of publication, more information on these grantees was not available.

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 Oklahoma.

Title V State Abstinence Education Grant Program

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

- The Oklahoma Department of Health received \$603,447 in federal Title V AOUM funding for FY 2013.
- The agency provides sub-grants to five³¹ local public and private entities.³²
- In Oklahoma, the match is made through direct state revenue and sub-award grantee funds.

The Oklahoma Department of Health administers the Title V AOUM program in collaboration with five local entities. The funded programs target elementary and middle school-aged children and their parents, focusing on younger students while working collaboratively with the state's TPPI grantee, which works with older youth. Sub-grantees provide programming in Beckham, Caddo, Carter, Oklahoma, and Washita counties using the following curricula: *Basic Training*, *Choosing the Best*, and *Raising Healthy Children*.³³

Competitive Abstinence Education Grant Program

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

- There are no CAE grantees in Oklahoma.

OKLAHOMA

Oklahoma 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>		
Youth Services of Tulsa, Inc.	\$431,543	2010–2014
TOTAL	\$431,543	
Division of Adolescent and School Health (DASH)		
Oklahoma State Department of Health	\$60,000	2013-2017
TOTAL	\$60,000	
Pregnancy Assistance Fund (PAF)		
Chocotaw Nation of Oklahoma	\$977,432	2013
TOTAL	\$977,432	
Personal Responsibility Education Program (PREP)		
<i>PREP State-Grant Program</i>		
Oklahoma State Department of Health (federal grant)	\$601,743	2013
TOTAL	\$601,743	
<i>Personal Responsibility Education Innovative Strategies</i>		
Oklahoma Institute for Child Advocacy	\$929,750	2010–2014
TOTAL	\$929,750	
<i>Tribal Personal Responsibility Education Program</i>		
Cherokee Nation	\$308,828	2010–2014
Chocotaw Nation of Oklahoma	\$195,418	2010–2014
Iowa Tribe of Oklahoma	\$142,257	2010–2014
TOTAL	\$646,503	
Title V Abstinence-Only-Until-Marriage Program (Title V AOUM)		
Oklahoma State Department of Health (federal grant)	\$603,447	2013
TOTAL	\$603,447	
GRAND TOTAL		
	\$4,250,418	2013

POINTS OF CONTACT

Adolescent Health Contact³⁴ and PREP State-Grant Coordinator

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¹ This refers to the federal government’s fiscal year, which begins on October 1 and ends on September 30. The fiscal year is designated by the calendar year in which it ends; for example, FY 2013 began on October 1, 2012, and ended on September 30, 2013.

² Okla. Stat. § 70-11-103.3(A), <http://www.oscn.net/applications/oscn/DeliverDocument.asp?CiteID=90134>.

³ Ibid.

⁴ Okla. Stat. § 70-11-103.3(C).

⁵ Okla. Stat. §§ 70-11-103.3(D)–(E).

⁶ Okla. Stat. § 70-11-103.3(B).

⁷ Okla. Stat. § 70-11-103.3(C).

⁸ Okla. Stat. § 70-11-105.1(B), <http://www.oscn.net/applications/oscn/DeliverDocument.asp?CiteID=90144>.

⁹ Okla. Stat. § 70-11-105.1(B).

¹⁰ Eaton, Danice K., et al., “Youth Risk Behavior Surveillance—United States, 2011,” *Surveillance Summaries, Morbidity and Mortality Weekly Report*, Vol. 61, No. SS-4 (June 8, 2012): 24–29, accessed June 18, 2012, <http://www.cdc.gov/mmwr/pdf/ss/ss6104.pdf>.

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 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.

¹⁴ Centers for Disease Control and Prevention, VitalStats Interactive Data Tables, Hyattsville, MD: National Center for Health Statistics, <http://www.cdc.gov/nchs/vitalstats.htm>.

¹⁵ 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.

¹⁶ Ibid., Table 3.2.

¹⁷ 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/1mYVJHs>.

¹⁸ 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/1mYVJHs>.

¹⁹ 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/1mYVJHs>.

²⁰ 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/1mYVJHs>.

²¹ 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>.

²² Ibid.

²³ Ibid.

²⁴ Youth Services of Tulsa, Inc., “About Us,” accessed July 14, 2011, http://www.yst.org/yst/About_Us.asp?SnID=18281247.

²⁵ Youth Services of Tulsa, Inc., “Youth Services Receives Grant to Tackle Teen Pregnancy,” October 11, 2010, accessed July 14, 2011, http://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=1&ved=0CGUQFjAA&url=http%3A%2F%2Fwww.yst.org%2Fimages%2Fyst%2FDocs%2FYST%2520Receives%2520Pregnancy%2520Prevention%2520Grant.doc&ei=LulaULudEcPI0QGOyYDoCA&usg=AFOqjCNGWAFJITkVTfhmMdlqGu9_Mp-JQKg&sig2=m3nZT1lijpmpfl.doGAnZnA.

²⁶ “Choctaw Nation of Oklahoma (OK) - Pregnancy Assistance Fund,” Office of Adolescent Health, U.S. Department of Health and Human Services, accessed September 23, 2014, <http://www.hhs.gov/ash/oah/grants/grantees/paf-ok.html>.

²⁷ Information provided by Amy Terry, adolescent health coordinator, Oklahoma State Department of Health, June 25, 2014.

²⁸ Ibid.

²⁹ The grantee declined to provide SIECUS with any updated information for FY 2012. Information provided is from FY 2011.

³⁰ “Our Story,” Oklahoma Institute for Child Advocacy, accessed February 16, 2014, <http://oica.org/who-we-are>.

³¹ Sub-grantees include: Big Brothers Big Sisters of Oklahoma (\$69,440); Cities in Schools, Inc. (\$13,698); Committee of Concern, dba Multi-County Youth Services (\$86,950); Oklahoma Southeast Jurisdiction COGIC, dba Sarafin Learning Center (\$156,901); YW8, Inc. (\$125,000); .

³² The state declined to provide SIECUS with any information for FY 2013. Information provided is from FY 2012, by Amy Dederling, child guidance service programs manager, Oklahoma State Department of Health, September 5, 2013.

³³ Ibid.

³⁴ The person listed represents the designated personnel in the state responsible for adolescent reproductive health.

³⁵ The person listed represents the designated personnel in the state responsible for adolescent reproductive health.