



## U.S. OUTER TERRITORIES

**In Fiscal Year 2010<sup>1</sup>, the Federated States of Micronesia received:**

- **Personal Responsibility Education Program funds totaling \$250,000**

### AMERICAN SAMOA SEXUALITY EDUCATION LAW AND POLICY

The American Samoa Department of Education health education program includes an HIV/School Health Project, which provides education about HIV infection and AIDS to students. Students in grades seven through 12 also receive information on sexually transmitted diseases (STDs), HIV/AIDS, and teen pregnancy through the Teenage Health Teaching Modules (THTM), which address issues affecting adolescents. This program teaches students interpersonal communication, “refusal skills, self-esteem, decision-making, and role playing.”<sup>2</sup> With the goal of reducing HIV infection, schools encourage students “to abstain from sexual intercourse, to not inject drugs, and, when deemed appropriate, to consistently and correctly use latex condoms to prevent HIV infection, if they become sexually active.”

See *Office of Curriculum, Instruction, and Accountability Health Program Overview*.

### GUAM SEXUALITY EDUCATION LAW AND POLICY

The School Health Education Program (SHEP) of Guam addresses the “prevention of risk behaviors,” including “sexual behaviors that contribute to unintended pregnancy, HIV infection and other sexually transmitted diseases.” The goal of SHEP is to “improve educational outcomes in Guam’s schools.” Students receive education on family life and sexuality beginning in grade four. In middle school, students should be able to discuss methods of family planning and prevention of HIV and STDs in addition to abstinence; however, the content standards for high school students do not include any mention of contraception, and students are expected to “[d]evelop a personal contract to consider abstaining from sexual activity until such time that you consider yourself to be financially, physically, mentally, emotionally, socially and spiritually mature and are able to take full responsibility for your actions.”

See *Guam Public School System Health Education Program and HIV/AIDS Prevention/Coordinated School Health Program*.

## **REPUBLIC OF THE MARSHALL ISLANDS SEXUALITY EDUCATION LAW AND POLICY**

Sex education is a requirement for all schools in the Republic of the Marshall Islands (RMI). Following Marshallese custom, students are separated by gender for sexuality education classes; male students are taught by a male teacher and female students are taught by a female teacher. The sexuality education curriculum includes HIV education, which is taught to both primary and secondary school students.

See *Yokwe Online*, “Majuro Chamber of Commerce Holds Forum on Education in the RMI;” and United Nations General Assembly Special Session on HIV/AIDS, *Marshall Islands National Composite Policy Index 2007* and *Country Progress Report, Republic of the Marshall Islands, 2010*.

## **REPUBLIC OF PALAU SEXUALITY EDUCATION LAW AND POLICY**

The Comprehensive School Program health curriculum of the Republic of Palau includes information on HIV/AIDS and sexually transmitted diseases.

See Republic of Palau Ministry of Education, “Health Education.”

## **OTHER U.S. OUTER TERRITORIES SEXUALITY EDUCATION LAW AND POLICY**

SIECUS is unaware of any sex education law or policy for the Commonwealth of the Northern Mariana Islands or the Federated States of Micronesia.

## **RECENT LEGISLATION**

SIECUS is not aware of any proposed legislation regarding sexuality education in any of the U.S. Outer Territories.

## **YOUTH SEXUAL HEALTH DATA**

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

### **American Samoa Youth Risk Behavior Survey (YRBS) Data<sup>3</sup>**

- In 2007, 23% of female high school students and 43% of male high school students in American Samoa reported ever having had sexual intercourse compared to 46% of female high school students and 50% of male high school students nationwide.
- In 2007, 4% of female high school students and 12% of male high school students in American Samoa reported having had sexual intercourse before age 13 compared to 4% of female high school students and 10% of male high school students nationwide.

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- In 2007, 5% of female high school students and 19% of male high school students in American Samoa reported having had four or more lifetime sexual partners compared to 12% of female high school students and 18% of male high school students nationwide.
- In 2007, 14% of female high school students and 27% of male high school students in American Samoa 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 34% of male high school students nationwide.
- In 2007, among those high school students who reported being currently sexually active, 35% of females and 46% of males in American Samoa reported having used condoms the last time they had sexual intercourse compared to 55% of females and 69% of males nationwide.
- In 2007, among those high school students who reported being currently sexually active, 4% of females and 3% of males in American Samoa reported having used birth control pills the last time they had sexual intercourse compared to 19% of females and 13% of males nationwide.
- In 2007, among those high school students who reported being currently sexually active, 27% of females and 38% of males in American Samoa reported having used alcohol or drugs the last time they had sexual intercourse compared to 18% of females and 28% of males nationwide.
- In 2007, 55% of high school students in American Samoa reported having been taught about AIDS/HIV in school compared to 90% of high school students nationwide.

### **Federated States of Micronesia Youth Risk Behavior Survey (YRBS) Data**

The Federated States of Micronesia did not participate in any recent Youth Risk Behavioral Surveillance Survey.

### **Guam Youth Risk Behavior Survey (YRBS) Data<sup>4</sup>**

- In 2007, 45% of female high school students and 45% of male high school students in Guam reported ever having had sexual intercourse compared to 46% of female high school students and 50% of male high school students nationwide.
- In 2007, 6% of female high school students and 10% of male high school students in Guam reported having had sexual intercourse before age 13 compared to 4% of female high school students and 10% of male high school students nationwide.
- In 2007, 10% of female high school students and 12% of male high school students in Guam reported having had four or more lifetime sexual partners compared to 12% of female high school students and 18% of male high school students nationwide.
- In 2007, 33% of female high school students and 27% of male high school students in Guam 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 34% of male high school students nationwide.

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- In 2007, among those high school students who reported being currently sexually active, 27% of females and 45% of males in Guam reported having used condoms the last time they had sexual intercourse compared to 55% of females and 69% of males nationwide.
- In 2007, among those high school students who reported being currently sexually active, 6% of females and 8% of males in Guam reported having used birth control pills the last time they had sexual intercourse compared to 19% of females and 13% of males nationwide.
- In 2007, among those high school students who reported being currently sexually active, 11% of females and 24% of males in Guam reported having used alcohol or drugs the last time they had sexual intercourse compared to 18% of females and 28% of males nationwide.
- In 2007, 85% of high school students in Guam reported having been taught about AIDS/HIV in school compared to 90% of high school students nationwide.

### **Northern Mariana Islands Youth Risk Behavior Survey (YRBS) Data<sup>5</sup>**

- In 2005, 46% of female high school students and 51% of male high school students in the Northern Mariana Islands reported ever having had sexual intercourse compared to 46% of female high school students and 48% of male high school students nationwide.
- In 2005, 6% of female high school students and 12% of male high school students in the Northern Mariana Islands reported having had sexual intercourse before age 13 compared to 4% of female high school students and 9% of male high school students nationwide.
- In 2005, 10% of female high school students and 18% of male high school students in the Northern Mariana Islands reported having had four or more lifetime sexual partners compared to 12% of female high school students and 17% of male high school students nationwide.
- In 2005, 34% of female high school students and 33% of male high school students in the Northern Mariana Islands reported being currently sexually active (defined as having had sexual intercourse in the three months prior to the survey) compared to 35% of female high school students and 33% of male high school students nationwide.
- In 2005, among those high school students who reported being currently sexually active, 38% of females and 49% of males in the Northern Mariana Islands reported having used condoms the last time they had sexual intercourse compared to 56% of females and 70% of males nationwide.
- In 2005, among those high school students who reported being currently sexually active, 9% of females and 6% of males in the Northern Mariana Islands reported having used birth control pills the last time they had sexual intercourse compared to 21% of females and 28% of males nationwide.
- In 2005, among those high school students who reported being currently sexually active, 17% of females and 37% of males in the Northern Mariana Islands reported having used alcohol or drugs the last time they had sexual intercourse compared to 19% of females and 28% of males nationwide.

- In 2005, 81% of high school students in the Northern Mariana Islands reported having been taught about AIDS/HIV in school compared to 88% of high school students nationwide.

**Republic of the Marshall Islands Youth Risk Behavior Survey (YRBS) Data<sup>6</sup>**

- In 2007, 47% of female high school students and 72% of male high school students in the Marshall Islands reported ever having had sexual intercourse compared to 46% of female high school students and 50% of male high school students nationwide.
- In 2007, 3% of female high school students and 14% of male high school students in the Marshall Islands reported having had sexual intercourse before age 13 compared to 4% of female high school students and 10% of male high school students nationwide.
- In 2007, 10% of female high school students and 29% of male high school students in the Marshall Islands reported having had four or more lifetime sexual partners compared to 12% of female high school students and 18% of male high school students nationwide.
- In 2007, 34% of female high school students and 45% of male high school students in the Marshall Islands 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 34% of male high school students nationwide.
- In 2007, among those high school students who reported being currently sexually active, 48% of females and 53% of males in the Marshall Islands reported having used condoms the last time they had sexual intercourse compared to 55% of females and 69% of males nationwide.
- In 2007, among those high school students who reported being currently sexually active, 6% of females and 9% of males in the Marshall Islands reported having used birth control pills the last time they had sexual intercourse compared to 19% of females and 13% of males nationwide.
- In 2007, among those high school students who reported being currently sexually active, 26% of females and 41% of males in the Marshall Islands reported having used alcohol or drugs the last time they had sexual intercourse compared to 18% of females and 28% of males nationwide.
- In 2007, 46% of high school students in the Marshall Islands reported having been taught about AIDS/HIV in school compared to 90% of high school students nationwide.

**Republic of Palau Youth Risk Behavior Survey (YRBS) Data<sup>7</sup>**

- In 2003, 29% of female high school students and 58% of male high school students in Palau reported ever having had sexual intercourse compared to 46% of female high school students and 48% of male high school students nationwide.

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- In 2003, 2% of female high school students and 15% of male high school students in Palau reported having had sexual intercourse before age 13 compared to 4% of female high school students and 10% of male high school students nationwide.
- In 2003, 5% of female high school students and 34% of male high school students in Palau reported having had four or more lifetime sexual partners compared to 11% of female high school students and 18% of male high school students nationwide.
- In 2003, 21% of female high school students and 39% of male high school students in Palau reported being currently sexually active (defined as having had sexual intercourse in the three months prior to the survey) compared to 35% of female high school students and 34% of male high school students nationwide.
- In 2003, 45% of high school students who reported being currently sexually active in Palau reported having used condoms the last time they had sexual intercourse compared to 57% of females and 69% of males nationwide.
- In 2003, 7% of high school students who reported being currently sexually active in Palau reported having used birth control pills the last time they had sexual intercourse compared to 21% of females and 13% of males nationwide.
- In 2003, 35% of high school students who reported being currently sexually active in Palau reported having used alcohol or drugs the last time they had sexual intercourse compared to 21% of females and 30% of males nationwide.
- In 2003, 74% of high school students in Palau reported having been taught about AIDS/HIV in school compared to 88% of high school students nationwide.

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

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

- In 2005, American Samoa's teen birth rate was 34.2 births per 1,000 young women ages 15–19 compared to the national rate of 40.5 births per 1,000.

#### *HIV and AIDS*

- In 2008, there were a total of 0 new cases of HIV infection diagnosed in American Samoa.<sup>8</sup>
- American Samoa's HIV infection rate is 0 cases per 100,000 individuals compared to the national rate of 19.5 cases per 100,000.<sup>9</sup>
- American Samoa's HIV infection rate among young people ages 13–19 is 0 cases per 100,000 young people compared to the national rate of 9.1 cases per 100,000.<sup>10</sup>
- In 2008, there were a total of 0 new AIDS cases reported in American Samoa.<sup>11</sup>

- American Samoa's AIDS rate is 0 cases per 100,000 individuals compared to the national rate of 12.3 cases per 100,000.<sup>12</sup>
- American Samoa's AIDS rate among young people is 0 cases per 100,000 young people compared to the national rate of 1.8 cases per 100,000.<sup>13</sup>

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

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

- In 2005, Guam's teen birth rate was 58.7 births per 1,000 young women ages 15–19 compared to the national rate of 40.5 births per 1,000.<sup>14</sup>

#### *HIV and AIDS*

- Guam's HIV infection rate is 3 cases per 100,000 individuals compared to the national rate of 19.5 cases per 100,000.<sup>15</sup>
- In 2008, there were a total of 5 new cases of HIV infection diagnosed in Guam.<sup>16</sup>
- Guam's HIV infection rate among young people ages 13–19 is 0 cases per 100,000 young people compared to the national rate of 9.1 cases per 100,000.<sup>17</sup>
- In 2008, there were a total of 5 new AIDS cases reported in Guam.<sup>18</sup>
- Guam's AIDS rate is 3.1 cases per 100,000 individuals compared to the national rate of 12.3 cases per 100,000.<sup>19</sup>
- Guam's AIDS rate among young people ages 13–19 is 0 cases per 100,000 young people compared to the national rate of 1.8 cases per 100,000.<sup>20</sup>

### **Northern Mariana Islands Teen Pregnancy, HIV/AIDS, and Sexually Transmitted Disease Data**

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

- In 2005, the Northern Mariana Islands' teen birth rate was 31.6 births per 1,000 young women ages 15–19 compared to the national rate of 40.5 births per 1,000.<sup>21</sup>

#### *HIV and AIDS*

- Northern Mariana Islands's HIV infection rate ranks 41<sup>st</sup> in the United States, with a rate of 0 cases per 100,000 individuals compared to the national rate of 19.5 cases per 100,000.<sup>22</sup>
- Northern Mariana Islands ranks 41<sup>st</sup> in cases of HIV infection diagnosed in the United States among all age groups. In 2008, there were a total of 0 new cases of HIV infection diagnosed in Northern Mariana Islands.<sup>23</sup>

- Northern Mariana Islands’s HIV infection rate among young people ages 13–19 ranks 35<sup>th</sup> in the United States, with a rate of 0 cases per 100,000 young people compared to the national rate of 9.1 cases per 100,000.<sup>24</sup>
- Northern Mariana Islands ranks 55<sup>th</sup> in number of reported AIDS cases in the United States among all age groups. In 2008, there was a total of 1 new AIDS case reported in Northern Mariana Islands.<sup>25</sup>
- Northern Mariana Islands’s AIDS rate ranks 53<sup>rd</sup> in the United States, with a rate of 1.9 cases per 100,000 individuals compared to the national rate of 12.3 cases per 100,000.<sup>26</sup>
- Northern Mariana Islands’s AIDS rate among young people ages 13–19 ranks 37<sup>th</sup> in the United States, with a rate of 0 cases per 100,000 young people compared to the national rate of 1.8 cases per 100,000.<sup>27</sup>

*There are no youth sexual health data available for the Federated States of Micronesia, the Republic of the Marshall Islands, or the Republic of Palau.*

## **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 are no TPPI Tier 1 grantees in the U.S. Outer Territories.

#### *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 the U.S. Outer Territories.



*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 the U.S. Outer Territories.

**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 Federated States of Micronesia received \$250,000 in federal PREP funds for Fiscal Year 2010.

The Federated States of Micronesia National Department of Health Services, Education and Social Affairs implements the PREP grant, which supports programming for youth in Chuuk and Pohnpei states. The department partners with the Chuuk Women Advisory Council and a state-run multi-purpose youth center to implement programming in Chuuk. In Pohnpei, the state police department and a state-run multi-purpose youth center implement the grant. In both states, PREP funding will be used to provide school- and community-based programming to youth in grades kindergarten through 12.<sup>28</sup>

In Chuuk, PREP programming will be implemented as part of a broader rape and sexual violence prevention initiative run by the state. PREP funding will be used to support sexual violence-prevention education provided in schools. The initiative also provides programming, counseling, and legal services to women. In Pohnpei, the police department will work to implement programming to at-risk youth and youth involved in the juvenile justice system. Local youth service organizations will also receive sub-grants to implement programming in after school settings and to out-of-school youth, including the Pacific Missionary Fellowship, Aramas Kapw, and Sekere Youth Program.<sup>29</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. ACF administers the grant program in

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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 the U.S. Outer Territories.

**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.

- None of the U.S. Outer Territories chose to apply for Title V abstinence-only funds for Fiscal Year 2010.

**U.S. Outer Territories TPPI, PREP, and Title V Abstinence-Only Funding in FY 2010**

Grantee	Award	Fiscal Years
<b>Personal Responsibility Education Program (PREP)</b>		
<i>PREP State-Grant Program</i>		
Federated States of Micronesia (federal grant)	\$250,000	2010
<b>TOTAL</b>	<b>\$250,000</b>	
<b>GRAND TOTAL</b>	<b>\$250,000</b>	<b>2010</b>

**COMPREHENSIVE APPROACHES TO SEXUALITY EDUCATION**

*SIECUS is not aware of any examples of model programs, policies, or best practices being implemented in any U.S. Outer Territory’s 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 more comprehensive approaches to sex education being implemented in any of the U.S. Outer Territory public schools for inclusion in future publications of the SIECUS State Profile. 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>30</sup>

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Federated States of Micronesia  
Phone: (691) 320-2872

### PREP State-Grant Coordinator

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## ORGANIZATIONS THAT SUPPORT COMPREHENSIVE SEXUALITY EDUCATION

Samoa Family Health Association (SFHA)  
Apia, Samoa  
Phone: (685) 269-2968

## ORGANIZATIONS THAT OPPOSE COMPREHENSIVE SEXUALITY EDUCATION

*SIECUS is not aware of any organizations opposed to comprehensive sexuality education in the U.S. Outer Territories.*

## MEDIA OUTLETS

### Newspapers in U.S. Outer Territories<sup>31</sup>

*Pacific Daily News*  
Hagatna, Guam  
(671) 472-1736  
[www.guampdn.com](http://www.guampdn.com)

*Samoa News*  
Pago Page, American Samoa  
(684) 633-5599  
[www.samoanews.com](http://www.samoanews.com)

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<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> American Samoa *Office of Curriculum, Instruction, and Accountability Health Program Overview*.

<sup>3</sup> Unless otherwise cited, all statistical information comes from: Danice K. Eaton, et. al., "Youth Risk Behavior Surveillance—United States, 2007," Surveillance Summaries, Morbidity and Mortality Weekly Report 57.SS-4 (6 June 2008), accessed 4 June 2008, <<http://www.cdc.gov/HealthyYouth/yrbs/index.htm>>.

<sup>4</sup> Unless otherwise cited, all statistical information comes from: Danice K. Eaton, et. al., “Youth Risk Behavior Surveillance—United States, 2007,” *Surveillance Summaries, Morbidity and Mortality Weekly Report* 57.SS-4 (6 June 2008), accessed 4 June 2008, <<http://www.cdc.gov/HealthyYouth/yrbs/index.htm>>.

<sup>5</sup> D. K. Eaton, et. al., “Youth Risk Behavior Surveillance—United States, 2005,” *Surveillance Summaries, Morbidity and Mortality Weekly Report*, vol. 55, no. SS-5 (9 June 2006): 1-108, accessed 26 January 2007, <<http://www.cdc.gov/HealthyYouth/yrbs/index.htm>>. Note: the Northern Mariana Islands did not participate in the 2007 YRBS.

<sup>6</sup> Unless otherwise cited, all statistical information comes from: Danice K. Eaton, et. al., “Youth Risk Behavior Surveillance—United States, 2007.”

<sup>7</sup> Jo Anne Grunbaum, et al., “Youth Risk Behavior Surveillance—United States, 2003,” *Surveillance Summaries, Morbidity and Mortality Weekly Report*, vol. 53, no. SS-2 (21 May 2004): 1-108, accessed 13 December 2008, <<http://www.cdc.gov/mmwr/preview/mmwrhtml/ss5302a1.htm>>. Note: the Republic of Palau did not participate in the 2007 YRBS.

<sup>8</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>9</sup> Ibid.

<sup>10</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>11</sup> *HIV Surveillance Report, 2008*, Table 20.

<sup>12</sup> Ibid.

<sup>13</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>14</sup> Martin, et. al., Table B.

<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> Martin, et. al., Table B.

<sup>22</sup> *HIV Surveillance Report, 2008*, Table 19.

<sup>23</sup> Ibid.

<sup>24</sup> Slide 9: “Rates of Diagnoses of HIV Infection among Adolescents 13–19 Years of Age, 2008—37 States and 5 U.S. Dependent Areas,” *HIV Surveillance in Adolescents and Young Adults*, (Atlanta, GA: Centers for Disease Control and Prevention, December 2010), accessed 28 June 2011, <<http://www.cdc.gov/hiv/topics/surveillance/resources/slides/adolescents/index.htm>>.

<sup>25</sup> *HIV Surveillance Report, 2008*, Table 20.

<sup>26</sup> Ibid.

<sup>27</sup> Slide 18: “Rates of AIDS Diagnoses among Adolescents 13–19 Years of Age, 2008—United States and Dependent Areas,” *HIV Surveillance in Adolescents and Young Adults*, (Atlanta, GA: Centers for Disease Control and Prevention, December 2010), accessed 28 June 2011, <<http://www.cdc.gov/hiv/topics/surveillance/resources/slides/adolescents/index.htm>>.

<sup>28</sup> Information provided by Jane Elymore, assistant secretary for the Department of Health Services, Education and Social Affairs, Division of Social Affairs, 16 February 2011.

<sup>29</sup> Ibid.

<sup>30</sup> The person listed represents the designated personnel in the state responsible for adolescent reproductive health.

<sup>31</sup> This section is a list of major newspapers in the state and is by no means exhaustive of local print outlets.