

State Profiles FISCAL YEAR 2016

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In Fiscal Year 2016,¹ the state of Alabama received:

- **Division of Adolescent and School Health funds totaling \$60,000**
- **Personal Responsibility Education Program funds totaling \$782,092**
- **Title V State Abstinence Education Program funds totaling \$1,357,675**

SEXUALITY EDUCATION LAW AND POLICY

STATE LAW

Alabama state law does not require the teaching of sexuality education; however, a resolution adopted by the Alabama State Board of Education in 1987 does require that students in grades 5–12 receive instruction about human immunodeficiency virus (HIV)/acquired immunodeficiency syndrome (AIDS) through a health education program.² Should schools choose to offer additional sex education, [Alabama State Code Section 16-40A-2](#) sets minimum requirements for what must be taught, but specific content is developed locally. Among other things, the code requires “sex education or the human reproductive process” programs or curricula to include and emphasize that:

- 1) abstinence from sexual intercourse is the only completely effective protection against unwanted pregnancy, sexually transmitted diseases (STDs), and AIDS when transmitted sexually.
- 2) abstinence from sexual intercourse outside of lawful marriage is the expected social standard for unmarried school-age persons.³

The code also states that:

- ...
- B) course materials and instruction that relate to sexual education or sexually transmitted diseases should be age-appropriate;
 - C) course materials and instruction that relate to sexual education or sexually transmitted diseases should include all of the following elements: ...
 2. An emphasis on the importance of self-control and ethical conduct pertaining to sexual behavior.
 3. Statistics based on the latest medical information that indicates the degree of reliability and unreliability of various forms of contraception, while also emphasizing the increase in protection against pregnancy and protection against STDs, including HIV and AIDS, afforded by the use of various contraceptive measures ...

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8. An emphasis, in a factual manner and from a public health perspective, that homosexuality is not a lifestyle acceptable to the general public and that homosexual conduct is a criminal offense under the laws of the state.⁴

Parents or guardians may remove their children from sexuality education and/or STD, including HIV, education classes. [This is referred to as an “opt-out” policy.](#)

STATE STANDARDS

In addition to this code, [Alabama Course of Study: Health Education](#) provides the foundation for the minimum content requirements for topics such as HIV, STDs, and pregnancy prevention. The sexuality topics covered include: “societal expectations of remaining abstinent until married;” the “physical, social, and emotional effects” of STDs; disease transmission; responsible decision-making; and refusal skills, among others.⁵

STATE LEGISLATIVE ACTIVITY

SIECUS tracks all state legislative session activity in our state legislative reports. For more information on bills related to school-based sexuality education that were introduced or passed in 2016, please see [SIECUS’ 2016 Sex Ed State Legislative Year-End Report: Top Topics and Takeaways.](#)

YOUTH SEXUAL HEALTH DATA

The following sexual health behavior and outcome data represent the most recent information available on adolescent sexual health in Alabama. While data can be a powerful tool to demonstrate the sexuality education and sexual health care needs of young people, it is important to be mindful that these behaviors and outcomes are impacted by systemic inequities present in our society that can and often do affect an individual’s sexual health and wellbeing. Additionally, there are significant limitations as to how and what data are currently collected. Young people are more than outcomes; for advocates, it is important to utilize the data in a manner that tracks our progress and pushes policies forward in a way that respects and supports the dignity of all young lives.

ALABAMA YOUTH RISK BEHAVIOR SURVEY (YRBS) DATA⁶

Reported ever having had sexual intercourse

- In 2015, 43.6% of female high school students and 49.5% of male high school students in Alabama reported ever having had sexual intercourse, compared to 39.2% of female high school students and 43.2% of male high school students nationwide.
- In 2015, 55.4% of black high school students and 41.9% of white high school students in Alabama reported ever having had sexual intercourse, compared to 48.5% of black high school students and 39.9% of white high school students nationwide.

Reported having had sexual intercourse before age 13

- In 2015, 3.8% of female high school students and 10.4% of male high school students in Alabama reported having had sexual intercourse before age 13, compared to 2.2% of female high school students and 5.6% of male high school students nationwide.

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- In 2015, 14.1% of black high school students and 3.3% of white high school students in Alabama reported having had sexual intercourse before age 13, compared to 8.3% of black high school students and 2.5% of white high school students nationwide.

Reported being currently sexually active

- In 2015, 34.9% of female high school students and 34.8% of male high school students in Alabama reported being currently sexually active, compared to 29.8% of female high school students and 30.3% of male high school students nationwide.
- In 2015, 39.9% of black high school students and 33.1% of white high school students in Alabama reported being currently sexually active, compared to 33.1% of black high school students and 30.3% of white high school students nationwide.

Reported not using a condom during last sexual intercourse

- In 2015, 57.2% of female high school students and 41.1% of male high school students in Alabama reported not using a condom during their last sexual intercourse, compared to 48% of female high school students and 38.5% of male high school students nationwide.
- In 2015, 46.3% of black high school students and 51.1% of white high school students in Alabama reported not using a condom during their last sexual intercourse, compared to 36.3% of black high school students and 43.2% of white high school students nationwide.

Reported not using any method to prevent pregnancy during last sexual intercourse

- In 2015, 18.5% of female high school students and 17% of male high school students in Alabama reported not using any method to prevent pregnancy during their last sexual intercourse, compared to 15.2% of female high school students and 12.2% of male high school students nationwide.
- In 2015, 20.6% of black high school students and 15.1% of white high school students in Alabama reported not using any method to prevent pregnancy during their last sexual intercourse, compared to 15.9% of black high school students and 10.4% of white high school students nationwide.

Reported never having been tested for HIV

- In 2015, 81.5% of female high school students and 87.2% of male high school students in Alabama reported never having been tested for HIV, compared to 88.9% of female high school students and 90.7% of male high school students nationwide.

Reported having been physically forced to have sexual intercourse

- In 2015, 12.9% of female high school students and 7.8% of male high school students in Alabama reported having been physically forced to have sexual intercourse, compared to 10.3% of female high school students and 3.1% of male high school students nationwide.

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- In 2015, 11.3% of black high school students and 8.7% of white high school students in Alabama reported having been physically forced to have sexual intercourse, compared to 7.3% of black high school students and 6.0% of white high school students nationwide.

Reported experiencing physical dating violence

- In 2015, 13.9% of female high school students and 8.4% of male high school students in Alabama reported experiencing physical dating violence in the prior year, compared to 11.7% of female high school students and 7.4% of male high school students nationwide.
- In 2015, 10.0% of black high school students and 10.9% of white high school students in Alabama reported experiencing physical dating violence in the prior year, compared to 10.5% of black high school students and 9.0% of white high school students nationwide.

Reported experiencing sexual dating violence

- In 2015, 13.4% of female high school students and 6.1% of male high school students in Alabama reported experiencing sexual dating violence in the prior year, compared to 15.6% of female high school students and 5.4% of male high school students nationwide.
- In 2015, 9.5% of black high school students and 9.0% of white high school students in Alabama reported experiencing sexual dating violence in the prior year, compared to 10.0% of black high school students and 10.1% of white high school students nationwide.

Visit the Centers for Disease Control and Prevention's (CDC) [Youth Online](#) database for additional information on sexual behaviors.

ALABAMA TEEN PREGNANCY, HIV/AIDS, AND OTHER STD DATA

Teen Pregnancy, Birth, and Abortion

- In 2011, Alabama had the 14th highest teen pregnancy rate in the United States, with a rate of 59 pregnancies per 1,000 young women ages 15–19, compared to the national rate of 52 per 1,000.⁷ There were a total of 9,490 pregnancies among young women ages 15–19 reported in Alabama in 2011.⁸
- In 2015, Alabama had the 10th highest teen birth rate in the United States, with a rate of 30.1 births per 1,000 young women ages 15–19, compared to the national rate of 22.3 per 1,000.⁹ There were a total of 5,009 live births to young women ages 15–19 reported in Alabama in 2014, the most recent year of available data.¹⁰
- In 2011, Alabama had the 31st highest teen abortion rate in the United States, with a rate of 9 abortions per 1,000 young women ages 15–19, compared to the national rate of 14 per 1,000.¹¹ There were a total of 1,420 abortions among young women ages 15–19 reported in Alabama in 2011.¹²

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HIV and AIDS

- In 2015, the rate of diagnoses of HIV infection among adolescents ages 13–19 in Alabama was 5.4 per 100,000, compared to the national rate of 5.8 per 100,000.¹³
- In 2015, the rate of AIDS diagnoses among adolescents ages 13–19 in Alabama was 0.4 per 100,000, compared to the national rate of 0.7 per 100,000.¹⁴
- In 2015, the rate of diagnoses of HIV infection among young adults ages 20–24 in Alabama was 36.7 per 100,000, compared to the national rate of 31.1 per 100,000.¹⁵
- In 2015, the rate of AIDS diagnoses among young adults ages 20–24 in Alabama was 7.9 per 100,000, compared to the national rate of 5.6 per 100,000.¹⁶

STDs

- In 2015, Alabama had the 8th highest rate of reported cases of chlamydia among young people ages 15–19 in the United States, with an infection rate of 2,464 cases per 100,000, compared to the national rate of 1,857.8 per 100,000. In 2015, there were a total of 7,832 cases of chlamydia among young people ages 15–19 reported in Alabama.¹⁷
- In 2015, Alabama had the 7th highest rate of reported cases of gonorrhea among young people ages 15–19 in the United States, with an infection rate of 507.5 cases per 100,000, compared to the national rate of 341.8 per 100,000. In 2015, there were a total of 1,613 cases of gonorrhea among young people ages 15–19 reported in Alabama.¹⁸
- In 2015, Alabama had the 19th highest rate of reported cases of primary and secondary syphilis among young people ages 15–19 in the United States, with an infection rate of 5.3 cases per 100,000, compared to the national rate of 5.4 per 100,000. In 2015, there were a total of 17 cases of syphilis reported among young people ages 15–19 in Alabama.¹⁹

Visit the Office of Adolescent Health’s (OAH) [Alabama Adolescent Health Facts](#) for additional information.

FEDERAL FUNDING FOR SEXUALITY EDUCATION, UNINTENDED TEEN PREGNANCY, HIV AND OTHER STD PREVENTION, AND ABSTINENCE-ONLY-UNTIL-MARRIAGE PROGRAMS

FISCAL YEAR 2016 FEDERAL FUNDING IN ALABAMA

Grantee	Award
Division of Adolescent and School Health (DASH)	
Alabama Department of Health	\$60,000
TOTAL	\$60,000

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Personal Responsibility Education Program (PREP)	
PREP State-Grant Program	
Alabama Department of Public Health (federal grant)	\$782,092
TOTAL	\$782,092
Title V Abstinence-Only-Until-Marriage Program (Title V AOUM)	
Alabama Department of Public Health (federal grant)	\$1,357,675
TOTAL	\$1,357,675
GRAND TOTAL	\$2,199,767

DIVISION OF ADOLESCENT AND SCHOOL HEALTH

The Division of Adolescent and School Health (DASH), within the CDC, provides funding to state and local education agencies through several funding streams to better student health, implement HIV/STD prevention programs, collect and report data on young people’s risk behaviors, and expand capacity-building partnerships.

In FY 2016, DASH provided funding to 18 state and 17 local education agencies to help districts and schools strengthen student health through exemplary sexual health education (ESHE) that emphasizes HIV and other STD prevention, increases access to key sexual health services (SHS), and establishes safe and supportive environments (SSE) for students and staff. DASH funded seven national, non-governmental organizations (NGOs) to help state and local education agencies achieve these goals.

- In FY 2016, there were no DASH grantees in Alabama funded to strengthen student health through ESHE, SHS, and SSE (1308 Strategy 2).

In addition, DASH funds local education agencies and NGOs 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.

- In FY 2016, there were no DASH grantees in Alabama funded to deliver YMSM programming (1308 Strategy 4).

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 Surveillance (YRBS) and School Health Profiles data for policy and program improvements.

- In FY 2016, there was one DASH grantee in Alabama funded to collect and report YRBS and School Health Profiles data (1308 Strategy 1): The Alabama Department of Health (\$60,000).

TEEN PREGNANCY PREVENTION PROGRAM

The Office of Adolescent Health (OAH), within the U.S. Department of Health and Human Services (HHS), administers the Teen Pregnancy Prevention Program (TPPP), which funds evidence-based (or innovative evidence-informed), medically accurate, and age-appropriate programs to reduce teen pregnancy. OAH provides program support, implementation evaluation, and technical assistance to grantees. In FY

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2016, total funding for TPPP was \$101 million, with an additional \$6.8 million authorized for evaluation purposes, supporting a total of 84 states, cities, non-profit organizations, school districts, universities, community-based organizations, and tribal organizations that were in year two of five TPPP funding tiers' five-year cooperative agreements in 33 states and territories, including the District of Columbia and the Marshall Islands. OAH provides program support, implementation evaluation, and technical assistance to grantees and receives an additional \$6.8 million in funding for evaluation purposes. There are five TPPP funding tiers:

- Tier 1A: Capacity building to support replication of evidence-based TPP programs.
- Tier 1B: Replicating evidence-based TPP programs to scale in communities with the greatest need.
- Tier 2A: Supporting and enabling early innovation to advance adolescent health and prevent teen pregnancy.
- Tier 2B: Rigorous evaluation of new or innovative approaches to prevent teen pregnancy.
- Tier 2C: Effectiveness of TPP programs designed specifically for young males.

- In FY 2016, there were no TPPP grantees in Alabama.

PERSONAL RESPONSIBILITY EDUCATION PROGRAM

The Family and Youth Services Bureau (FYSB), within the Administration for Children and Families (ACF) division of HHS, administers the Personal Responsibility Education Program (PREP), which includes \$75 million for the state-grant program; local entities through the competitively awarded Personal Responsibility Education Innovative Strategies (PREIS) program; and the Tribal PREP, which funds tribes and tribal organizations. In addition, provisions within the PREP statute enable a competitive application process for community- and faith-based organizations within states and territories that do not directly seek PREP state grants to apply for funding. Details on the state grants, PREIS, Tribal PREP, and CPREP are included below.

PREP State-Grant Program

State-grant PREP 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. In FY 2016, 43 states, the District of Columbia, the Federated States of Micronesia, Guam, Puerto Rico, and the Virgin Islands received PREP state-grant funds. 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.

- In FY 2016, The Alabama Department of Public Health received \$782,092 in federal PREP funds.²⁰
- The department provides sub-grants to four local public and private entities.²¹ The sub-grantee information is listed below.

Sub-grantee	Serving	Amount
Tuscaloosa County Health Department	See narrative below	Not reported
Dallas County Children’s Policy Council	See narrative below	Not reported
Decatur Youth Services	See narrative below	Not reported
Emerge Community Solutions	See narrative below	Not reported

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The Alabama PREP state-grant program serves young people ages 13–19, with a focus on those who are high-risk, vulnerable for pregnancies, or otherwise have special circumstances, including young people in or aging out of foster care, young people experiencing homelessness, young people living with HIV/AIDS, pregnant young people under age 20, mothers under age 20, and young people residing in areas with high birth rates among young people. Programming is administered in community-based settings in Colbert, Franklin, Jefferson, Lauderdale, Montgomery, Pickens, and Tuscaloosa counties. Alabama PREP state-level staff determined the three subjects for the adulthood preparation requirement are: adolescent development, healthy life skills, and healthy relationships.²²

Funded programs utilize the following curricula: [*Love Notes, Making Proud Choices, 17 Days \(formerly known as What Could You Do?\), Sexual Health and Adolescent Risk Prevention \(SHARP\), and Money Habitudes.*](#)²³

At the time of publication, information on award amounts and Emerge Community Solutions was unknown.

TUSCALOOSA COUNTY HEALTH DEPARTMENT (FY 2016)

The Tuscaloosa County Health Department (TCHD) provides sexually transmitted infection (STI) and pregnancy prevention services through its SMARTS project, or Setting Myself Apart Reaching Toward Success. TCHD serves high-risk young people ages 10-19 in Tuscaloosa, Bibb, and Pickens Counties. Some of the facilities served include Tuscaloosa County Juvenile Detention Center; Special Programming for Achievement Network; Re-Direction, Education, Accountability, Collaboration, Home Stability; Youth Build; Upward Bound; National Social Work Enrichment Program; and local foster care group homes. TCHD's curricula include [*Love Notes, 17 Days, and Making Proud Choices! for Youth in Out-of-Home Care.*](#)²⁴

DALLAS COUNTY CHILDREN'S POLICY COUNCIL (FY 2016)

The Dallas County Children's Policy Council (DCCPC) seeks to promote comprehensive, collaborative, and community-driven children and family services for residents throughout Dallas County. DCCPC, in partnership with the Alabama Department of Public Health, the Adolescent Pregnancy Prevention Branch, and local community-based organizations, educates at-risk young people using 10 sessions of evidence-based programming focused on reducing STIs and teen pregnancies through the Dallas County Personal Responsibility Education Program (DCPREP). DCPREP targets young people ages 10-19 who are identified as high risk, are in foster care or group homes, or are currently involved in the court system. The DCPREP sessions address healthy life skills, financial literacy, and healthy relationships.²⁵

CITY OF DECATUR, DECATUR YOUTH SERVICES (FY 2016)

Decatur Youth Services, through its L.I.F.E. (Life Improvement with Factual Education) program, and in partnership with the Alabama Department of Public Health and the Adolescent Pregnancy Prevention Branch, facilitates and encourages a community-wide effort in combating high rates of illiteracy, teen pregnancy, substance abuse, and juvenile delinquency. It uses evidence-based curricula to educate young people on abstinence and contraception to prevent STIs and unplanned pregnancy, including [*Making Proud Choices!*](#), [*Love Notes 2.1*](#), and [*17 Days*](#). The L.I.F.E. program will address adolescent development, healthy life skills, and healthy relationships.

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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.

- In FY 2016, there were no PREIS grantees in Alabama.

Tribal Personal Responsibility Education Program (Tribal PREP)

Tribal PREP supports the development and implementation of teen pregnancy prevention programs within tribes and tribal communities. Tribal PREP programs target young people ages 10–19 who are in or are aging out of foster care, young people experiencing homelessness, young people living with HIV/AIDS, young people who live in areas with high rates of adolescent births, and young people under age 21 who are pregnant and/or parenting. In FY 2016, eight tribes and tribal organizations from seven states received a total of \$3,436,621.

- In FY 2016, there were no Tribal PREP grantees in Alabama.

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. Only organizations and institutions in states and territories that did not apply for PREP state grants in either of the first two fiscal years after the call for PREP state-grant applications were eligible to submit competitive applications for CPREP grants. In FY 2016, 21 CPREP grants, totaling \$10.3 million, were awarded to 21 organizations in Florida, Indiana, North Dakota, Texas, and Virginia, as well as in American Samoa, Guam, and the Northern Mariana Islands.

- In FY 2016, Alabama received PREP state-grant funding. Therefore, entities in Alabama were not eligible for CPREP.

TITLE V STATE ABSTINENCE EDUCATION GRANT PROGRAM

The Title V state abstinence education grant program for abstinence-only-until-marriage (AOUM) programming, or the Title V AOUM program, is administered by FYSB, within ACF of HHS, and was funded at \$75 million in FY 2016. 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 exclusively promote abstinence from sexual activity and may provide mentoring, counseling, and adult supervision toward this end. Programs must be medically accurate and age-appropriate and must encourage abstinence as an expected outcome.

- In FY 2016, the Alabama Department of Public Health received \$1,357,675 in federal Title V AOUM funding.²⁶
- The department provides sub-grants to three local public and private entities. The sub-grantee information is listed below.²⁷
- In Alabama, the match is provided through in-kind support from the sub-grantees.

Sub-grantee	Setting	Amount
Aim for Hope/Abstinence in Motion Project	See narrative below	\$148,000
Crittenton Youth Services	See narrative below	\$168,860
Teens Getting Involved for the Future—Auburn University	See narrative below	\$341,913

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The state's Title V AOUM program provides instruction to sixth- and seventh-grade students in school-based settings and utilizes high school students as teen leaders. Programming takes place in the following counties: Barbour, Bullock, Butler, Chambers, Choctaw, Coffee, Conecuh, Crenshaw, Dallas, Dekalb, Escambia, Hale, Marengo, Marion, Marshall, Mobile, Monroe, Pike, Tuscaloosa, and Wilcox. Sub-grantees are required to implement the [Managing Pressures before Marriage \(MPM\)](#) curriculum and, in addition, use [Relationship Smarts Plus \(RS+\)](#), [Media Madness \(MM\)](#), and a module on STDs.²⁸

“SEXUAL RISK AVOIDANCE EDUCATION” GRANT PROGRAM

Administered by FYSB within ACF of HHS, the “sexual risk avoidance education” (SRAE), i.e., the AOUM grant program, provides competitive funding for programs that “teach young people to voluntarily refrain from non-marital sexual activity and prevent other youth risk behaviors.” These programs are also required by statute to “teach the benefits associated with self-regulation, success sequencing for poverty prevention, healthy relationships, goal setting, and resisting sexual coercion, dating violence, and other youth risk behaviors such as underage drinking or illicit drug use without normalizing teen sexual activity.” In FY 2016, \$10 million was appropriated for the SRAE grant program and \$8.98 million was awarded to 21 grantees in 12 states through a competitive application process.

- In FY 2016, there were no SRAE grantees in Alabama.

POINTS OF CONTACT

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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 2016 began on October 1, 2015, and ended on September 30, 2016.

² *Alabama Course of Study: Health Education* (Birmingham, AL: Alabama Department of Education, 2009), www.shelbyed.k12.al.us/instruction/doc/health_cos.pdf. No text for the 1987 Resolution to Provide Information to Students to Prevent the Spread of Acquired Immune Deficiency Syndrome Disease in the Public Schools of Alabama available online.

³ Ala. Code §§ 16-40A-2(a)(1) and (2), <http://alisondb.legislature.state.al.us/alison/codeofalabama/1975/16-40A-2.htm>.

⁴ Ala Code § 16-40A-2(b); Ala. Code §§ 16-40A-2(c)(1)–(2), (8). Regarding the provision that students must be informed that homosexual conduct is a criminal offense, the United States Supreme Court handed down a decision in *Lawrence v. Texas* that declared state laws criminalizing homosexual behavior to be unconstitutional in 2003, <http://alisondb.legislature.state.al.us/alison/codeofalabama/1975/16-40A-2.htm>.

⁵ *Alabama Course of Study: Health Education* (Birmingham, AL: Alabama Department of Education, 2009), www.shelbyed.k12.al.us/instruction/doc/health_cos.pdf.

⁶ “High School YRBS,” Centers for Disease Control and Prevention, <https://nccd.cdc.gov/youthonline/App/Default.aspx>.

⁷ Kost, K., and Maddow-Zimet, I., *U.S. Teenage Pregnancies, Births, and Abortions, 2011: State Trends by Age, Race, and Ethnicity* (New York: Guttmacher Institute, 2014), www.guttmacher.org/sites/default/files/report_pdf/us-teen-pregnancy-state-trends-2011_4.pdf, Table 1.1.

⁸ *Ibid.*, Table 1.2.

⁹ “Teen Birth Rate Comparison, 2015 Among Girls Age 15-19,” The National Campaign to Prevent Teen and Unplanned Pregnancy, <https://thenationalcampaign.org/data/compare/1701>.

¹⁰ “Teen Births in Alabama, Girls 15-19,” The National Campaign to Prevent Teen and Unplanned Pregnancy, <https://thenationalcampaign.org/data/state/alabama>.

¹¹ Kost, K., and Maddow-Zimet, I., *U.S. Teenage Pregnancies, Births, and Abortions, 2011: State Trends by Age, Race, and Ethnicity* (New York: Guttmacher Institute, 2014), www.guttmacher.org/sites/default/files/report_pdf/us-teen-pregnancy-state-trends-2011_4.pdf, Table 1.1.

¹² *Ibid.*, Table 1.2.

¹³ Slide 6: “Rates of Adolescents Aged 13–19 Years Living with Diagnosed HIV Infection, Year-end 2014—United States and 6 Dependent Areas,” *HIV Surveillance in Adolescents and Young Adults* (Atlanta, GA: Centers for Disease Control and Prevention), www.cdc.gov/hiv/pdf/library/slidesets/cdc-hiv-surveillance-adolescents-young-adults-2015.pdf.

¹⁴ Slide 10: “Rates of Adolescents Aged 13–19 Years Living with Diagnosed HIV Infection Ever Classified as Stage 3 (AIDS), Year-end 2014—United States and 6 Dependent Areas,” *HIV Surveillance in Adolescents and Young Adults* (Atlanta, GA: Centers for Disease Control and Prevention), www.cdc.gov/hiv/pdf/library/slidesets/cdc-hiv-surveillance-adolescents-young-adults-2015.pdf.

¹⁵ Slide 7: “Rates of Young Adults Aged 20–24 Years Living with Diagnosed HIV Infection, Year-end 2014—United States and 6 Dependent Areas,” *HIV Surveillance in Adolescents and Young Adults* (Atlanta, GA: Centers for Disease Control and Prevention), www.cdc.gov/hiv/pdf/library/slidesets/cdc-hiv-surveillance-adolescents-young-adults-2015.pdf.

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¹⁶ Slide 11: “Rates of Young Adults Aged 20–24 Years Living with Diagnosed HIV Infection Ever Classified as Stage 3 (AIDS), Year-end 2014—United States and 6 Dependent Areas,” *HIV Surveillance in Adolescents and Young Adults* (Atlanta, GA: Centers for Disease Control and Prevention), www.cdc.gov/hiv/pdf/library/slidesets/cdc-hiv-surveillance-adolescents-young-adults-2015.pdf.

¹⁷ NCHHSTP Atlas, “STD Surveillance Data” (Atlanta, GA: Centers for Disease Control and Prevention), <http://gis.cdc.gov/GRASP/NCHHSTPAtlas/main.html>.

¹⁸ Ibid.

¹⁹ Ibid.

²⁰ “2016 State Personal Responsibility Education Program (PREP) Awards,” Family and Youth Services Bureau, Administration for Children & Families, U.S. Department of Health & Human Services, www.acf.hhs.gov/fysb/resource/2016-state-prep-awards.

²¹ “Alabama Personal Responsibility Education Program,” Alabama Public Health, Adolescent Pregnancy Prevention Branch, <http://adph.org/teenpregnancyprevention/Default.asp?id=4995>.

²² Information provided by Leigh Sanders, J.D., Director, Adolescent Pregnancy Prevention Branch, Women and Children’s Health Division, Bureau of Family Health Services, Alabama Department of Public Health, May 5, 2016.

²³ Ibid.

²⁴ “Tuscaloosa County Health Department,” Alabama Public Health, Adolescent Pregnancy Prevention Branch, <http://adph.org/teenpregnancyprevention/index.asp?id=5530>.

²⁵ “Dallas County Children’s Policy Council,” Alabama Public Health, Adolescent Pregnancy Prevention Branch, <http://adph.org/teenpregnancyprevention/index.asp?id=7740>.

²⁶ “2016 Title V State Abstinence Education Program Grant Awards,” Family and Youth Services Bureau, Administration for Children & Families, U.S. Department of Health & Human Services, www.acf.hhs.gov/fysb/resource/2016-title-v-grant-awards.

²⁷ Information provided by Leigh Sanders, J.D., Director, Adolescent Pregnancy Prevention Branch, Women and Children’s Health Division, Bureau of Family Health Services, Alabama Department of Public Health, May 5, 2016.

²⁸ Ibid.