

# State Profiles **FISCAL YEAR 2016**

## DELAWARE

In Fiscal Year 2016,<sup>1</sup> the state of Delaware received:

- **Division of Adolescent and School Health funds totaling \$400,000**
- **Personal Responsibility Education Program funds totaling \$250,000**

### SEXUALITY EDUCATION LAW AND POLICY

#### STATE LAW

[Delaware Administrative Code title 14, § 851](#) requires sexuality education as part of health education for kindergarten through 12th grade. This education must be coordinated by an employee in each school district and overseen by a District Consolidated Application Planning Committee. The committee must consist of teachers, parents, school nurses, community leaders, law enforcement, and other community members “with expertise in the areas of health, family life, and safe and drug-free schools and communities.”<sup>2</sup>

Sexuality education must include a human immunodeficiency virus (HIV) prevention program “that stresses the benefits of abstinence from high-risk behaviors.”<sup>3</sup>

Delaware administrative code also sets a minimum number of hours for “comprehensive health education and family life education.”<sup>4</sup> In kindergarten through fourth grade, the minimum is set at 30 hours per grade, 10 of which must be dedicated to drug/alcohol education. In grades five and six, the minimum is set at 35 hours per grade, 15 of which must be dedicated to drug/alcohol education. In grades seven and eight, the minimum is set at 60 hours per grade, 15 of which must be dedicated to drug/alcohol education. In order to graduate high school, students must receive 0.5 credits in comprehensive health education.

Delaware statute does not require parental permission for students to participate in sexuality or HIV/acquired immunodeficiency syndrome (AIDS) education.

#### STATE STANDARDS

Sexuality education courses must also follow the Department of Education’s standards and the [Delaware Health Education Curriculum](#), and the courses must include instruction on decision-making skills and the ability to practice health-enhancing behaviors. The Department of Education also provides model curricula [online](#).

#### 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 Delaware. 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.

### DELAWARE YOUTH RISK BEHAVIOR SURVEY (YRBS) DATA<sup>5</sup>

#### Reported ever having had sexual intercourse

- In 2015, 43.5% of female high school students and 49.2% of male high school students in Delaware 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, 64.1% of lesbian, gay, or bisexual (LGB) high school students, 26.5% of high school students who were unsure of their sexual orientation, and 46.2% of heterosexual high school students in Delaware reported ever having had sexual intercourse, compared to 50.8% of LGB high school students, 31.6% of high school students who were unsure of their sexual orientation, and 40.9% of heterosexual high school students nationwide.
- In 2015, 58.7% of black high school students, 47.9% of Hispanic high school students, 40.4% of white high school students, and 46.7% of high school students who identified with multiple races in Delaware reported ever having had sexual intercourse, compared to 48.5% of black high school students, 42.5% of Hispanic high school students, 39.9% of white high school students, and 49.2% of high school students who identified with multiple races nationwide.

#### Reported having had sexual intercourse before age 13

- In 2015, 2.4% of female high school students and 10.9% of male high school students in Delaware 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.
- In 2015, 12.5% of LGB high school students, 6.39% of high school students who were unsure of their sexual orientation, and 6.1% of heterosexual high school students in Delaware reported having had sexual intercourse before age 13, compared to 7.3% of LGB high school students, 8.8% of high school students who were unsure of their sexual orientation, and 3.4% of heterosexual high school students nationwide.
- In 2015, 14.4% of black high school students, 7.1% of Hispanic high school students, 2.7% of white high school students, and 2.1% of high school students who identified with multiple races in Delaware reported having had sexual intercourse before age 13, compared to 8.3% of black

high school students, 5% of Hispanic high school students, 2.5% of white high school students, and 5.8% of high school students who identified with multiple races nationwide.

Reported being currently sexually active

- In 2015, 34.3% of female high school students and 31.6% of male high school students in Delaware 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, 47.6% of LGB high school students, 24.7% of high school students who were unsure of their sexual orientation, and 32.6% of heterosexual high school students in Delaware reported being currently sexually active, compared to 35.1% of LGB high school students, 22.9% of high school students who were unsure of their sexual orientation, and 30.1% of heterosexual high school students nationwide.
- In 2015, 40.6% of black high school students, 35.9% of Hispanic high school students, 28.9% of white high school students, and 31.7% of high school students who identified with multiple races in Delaware reported being currently sexually active, compared to 33.1% of black high school students, 30.3% of Hispanic high school students, 30.3% of white high school students, and 35.7% of high school students who identified with multiple races nationwide.

Reported not using a condom during last sexual intercourse

- In 2015, 52% of female high school students and 33.7% of male high school students in Delaware 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, 56% of LGB high school students and 40.7% of heterosexual high school students in Delaware reported not using a condom during their last sexual intercourse, compared to 52.5% of LGB high school students and 42.2% of heterosexual high school students nationwide.
- In 2015, 40.1% of black high school students, 44.9% of Hispanic high school students, and 44.2% of white high school students in Delaware reported not using a condom during their last sexual intercourse, compared to 36.3% of black high school students, 44.4% of Hispanic 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, 14.1% of female high school students and 11.6% of male high school students in Delaware 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, 31.2% of LGB high school students and 10.2% of heterosexual high school students in Delaware reported not using any method to prevent pregnancy during their last sexual

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intercourse, compared to 26.4% of LGB high school students and 12.4% of heterosexual high school students nationwide.

- In 2015, 17.1% of black high school students, 15% of Hispanic high school students, and 7.9% of white high school students in Delaware reported not using any method to prevent pregnancy during their last sexual intercourse, compared to 15.9% of black high school students, 20% of Hispanic high school students, and 10.4% of white high school students nationwide.

### Reported never having been tested for HIV

- In 2015, 86.4% of female high school students and 87.8% of male high school students in Delaware 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.
- In 2015, 76.9% of LGB high school students, 89.7% of high school students who were unsure of their sexual orientation, and 87.5% of heterosexual high school students in Delaware reported never having been tested for HIV, compared to 81.8% of LGB high school students, 87.2% of high school students who were unsure of their sexual orientation, and 90.7% of heterosexual high school students nationwide.
- In 2015, 83.1% of black high school students, 82% of Hispanic high school students, 90.7% of white high school students, and 86.1% of high school students who identified with multiple races in Delaware reported never having been tested for HIV, compared to 83.4% of black high school students, 88.9% of Hispanic high school students, 92.0% of white high school students, and 86.6% of high school students who identified with multiple races nationwide.

### Reported having been physically forced to have sexual intercourse

- In 2015, 8.6% of female high school students and 4.4% of male high school students in Delaware 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.
- In 2015, 20% of LGB high school students, 11.5% of high school students who were unsure of their sexual orientation, and 4.8% of heterosexual high school students in Delaware reported having been physically forced to have sexual intercourse, compared to 17.8% of LGB high school students, 12.6% of high school students who were unsure of their sexual orientation, and 5.4% of heterosexual high school students nationwide.
- In 2015, 7.6% of black high school students, 7.4% of Hispanic high school students, 5.9% of white high school students, and 7.8% of high school students who identified with multiple races in Delaware reported having been physically forced to have sexual intercourse, compared to 7.3% of black high school students, 7.0% of Hispanic high school students, 6.0% of white high school students, and 12.1% of high school students who identified with multiple races nationwide.

Reported experiencing physical dating violence

- In 2015, 9.8% of female high school students and 7.2% of male high school students in Delaware 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, 12.3% of LGB high school students, 23.4% of high school students who were unsure of their sexual orientation, and 7.5% of heterosexual high school students in Delaware reported experiencing physical dating violence in the prior year, compared to 17.5% of LGB high school students, 24.5% of high school students who were unsure of their sexual orientation, and 8.3% of heterosexual high school students nationwide.
- In 2015, 9.1% of black high school students, 11.3% of Hispanic high school students, 7.4% of white high school students, and 11.4% of high school students who identified with multiple races in Delaware reported experiencing physical dating violence in the prior year, compared to 10.5% of black high school students, 9.7% of Hispanic high school students, 9.0% of white high school students, and 16% of high school students who identified with multiple races nationwide.

Reported experiencing sexual dating violence

- In 2015, 9.8% of female high school students and 5.7% of male high school students in Delaware 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, 17.1% of LGB high school students, 15.9% of high school students who were unsure of their sexual orientation, and 6.2% of heterosexual high school students in Delaware reported experiencing sexual dating violence in the prior year, compared to 22.7% of LGB high school students, 23.8% of high school students who were unsure of their sexual orientation, and 9.1% of heterosexual high school students nationwide.
- In 2015, 5.3% of black high school students, 11.7% of Hispanic high school students, 8.1% of white high school students, and 12.5% of high school students who identified with multiple races in Delaware reported experiencing sexual dating violence in the prior year, compared to 10% of black high school students, 10.6% of Hispanic high school students, 10.1% of white high school students, and 14.2% of high school students who identified with multiple races nationwide.

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

## **DELAWARE TEEN PREGNANCY, HIV/AIDS, AND OTHER SEXUALLY TRANSMITTED DISEASE (STD) DATA**

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

- In 2011, Delaware had the 10th highest teen pregnancy rate in the United States, with a rate of 60 pregnancies per 1,000 young women ages 15–19, compared to the national rate of 52 per 1,000.<sup>6</sup>

There were a total of 1,850 pregnancies among young women ages 15–19 reported in Delaware in 2011.<sup>7</sup>

- In 2015, Delaware had the 35th highest teen birth rate in the United States, with a rate of 18.1 births per 1,000 young women ages 15–19, compared to the national rate of 22.3 per 1,000.<sup>8</sup> There were a total of 616 live births to young women ages 15–19 reported in Delaware in 2014, the most recent year of available data.<sup>9</sup>
- In 2011, Delaware had the 2nd highest teen abortion rate in the United States, with a rate of 23 abortions per 1,000 young women ages 15–19, compared to the national rate of 14 per 1,000.<sup>10</sup> There were a total of 700 abortions among young women ages 15–19 reported in Delaware in 2011.<sup>11</sup>

### HIV and AIDS

- In 2015, the rate of diagnoses of HIV infection among adolescents ages 13–19 in Delaware was 3.6 per 100,000, compared to the national rate of 5.8 per 100,000.<sup>12</sup>
- In 2015, the rate of AIDS diagnoses among adolescents ages 13–19 in Delaware was 0.0 per 100,000, compared to the national rate of 0.7 per 100,000.<sup>13</sup>
- In 2015, the rate of diagnoses of HIV infection among young adults ages 20–24 in Delaware was 22.3 per 100,000, compared to the national rate of 31.1 per 100,000.<sup>14</sup>
- In 2015, the rate of AIDS diagnoses among young adults ages 20–24 in Delaware was 4.8 per 100,000, compared to the national rate of 5.6 per 100,000.<sup>15</sup>

### STDs

- In 2015, Delaware had the 14th highest rate of reported cases of chlamydia among young people ages 15–19 in the United States, with an infection rate of 2,120.1 cases per 100,000, compared to the national rate of 1,857.8 per 100,000. In 2015, there were a total of 1,271 cases of chlamydia among young people ages 15–19 reported in Delaware.<sup>16</sup>
- In 2015, Delaware had the 20th highest rate of reported cases of gonorrhea among young people ages 15–19 in the United States, with an infection rate of 323.6 cases per 100,000, compared to the national rate of 341.8 per 100,000. In 2015, there were a total of 194 cases of gonorrhea among young people ages 15–19 reported in Delaware.<sup>17</sup>
- In 2015, Delaware had the 26th 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 3.3 cases per 100,000, compared to the national rate of 5.4 per 100,000. In 2015, there were a total of 2 cases of syphilis reported among young people ages 15–19 in Delaware.<sup>18</sup>



Visit the Office of Adolescent Health's (OAH) [Delaware 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 DELAWARE

Grantee	Award
<b>Division of Adolescent and School Health (DASH)</b>	
Delaware Department of Education	\$320,000
Delaware Department of Health and Social Services	\$80,000
<b>TOTAL</b>	<b>\$400,000</b>
<b>Personal Responsibility Education Program (PREP)</b>	
<i>PREP State-Grant Program</i>	
Delaware Health and Social Services (federal grant)	\$250,000
<b>TOTAL</b>	<b>\$250,000</b>
<b>GRAND TOTAL</b>	<b>\$650,000</b>

### 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 was one DASH grantee in Delaware funded to strengthen student health through ESHE, SHS, and SSE (1308 Strategy 2): The Delaware Department of Education (\$320,000).

### DELAWARE DEPARTMENT OF EDUCATION, \$320,000 (FY 2016)

With its 1308 Strategy 2 funds, the Delaware Department of Education is training teachers on exemplary sexual health education curricula for middle, high, and alternative schools. The goal of the training is to help districts identify curricula that is consistent with community norms and that is aligned with the department's curricula framework. In order to ensure that students can comfortably access services and receive needed

assistance, the department is providing professional development to district and school staff to identify youth-friendly community health services and resources. To help create safe and supportive environments in which students, staff, and the community feel supported and respected, the department is providing professional development, technical assistance, and follow-up support for school staff to review and monitor anti-bullying and anti-sexual harassment policies.<sup>19</sup>

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 Delaware 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 Delaware funded to collect and report YRBS and School Health Profiles data (1308 Strategy 1): The Delaware Department of Health and Social Services (\$80,000).

#### **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 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 Delaware.



## 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 Delaware Department of Health and Social Services received \$250,000 in federal PREP funds.<sup>20</sup>
- There were two sub-grantees for the Delaware PREP state-grant program: Planned Parenthood of Delaware (\$246,166) and Delaware Department of Education.<sup>21</sup>

The Delaware Department of Health and Social Services, Division of Public Health, awarded the state's PREP funds to its sub-grantees, with the exception of a small amount of funding to be used for travel and audit costs. Planned Parenthood of Delaware works in collaboration with the state Department of Education and the Division of Public Health to provide school- and community-based programming across the state, targeting "the most at-risk populations" first.<sup>22</sup> As the sub-grantee, Planned Parenthood of Delaware offers educational trainings and supplemental professional development opportunities for teachers and community providers serving high-risk youth populations.<sup>23</sup> Both sub-grantees will address the following adulthood preparation subjects: adolescent development, healthy life skills, and healthy relationships. Educators have been trained to implement [\*Making Proud Choices!\*](#) with middle school-aged youth and [\*Be Proud! Be Responsible!\*](#) with high school-aged youth. With the funds, the sub-grantees hope to serve pregnant and parenting young people; young people experiencing homelessness; young people in the juvenile justice system; and lesbian, gay, bisexual, and transgender (LGBT) young people.<sup>24</sup>

### 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 Delaware.

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 Delaware.

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, Delaware received PREP state-grant funding; therefore, entities in Delaware 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, Delaware chose not to apply for Title V AOUM funds.

**“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 Delaware.

## POINTS OF CONTACT

### DASH Contacts

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<sup>1</sup> 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.

<sup>2</sup> Del. Admin. Code title 14, § 851(1.1.2) <http://regulations.delaware.gov/AdminCode/title14/800/851.pdf>.

<sup>3</sup> Del. Admin. Code title 14, § 851(1.1.4) <http://regulations.delaware.gov/AdminCode/title14/800/851.pdf>.

<sup>4</sup> Del. Admin. Code title 14, § 851(1.1.3.1), <http://regulations.delaware.gov/AdminCode/title14/800/851.pdf>.

<sup>5</sup> "High School YRBS," Centers for Disease Control and Prevention, <https://nccd.cdc.gov/youthonline/App/Default.aspx>.

<sup>6</sup> 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](http://www.guttmacher.org/sites/default/files/report_pdf/us-teen-pregnancy-state-trends-2011_4.pdf), Table 1.1.

<sup>7</sup> Ibid., Table 1.2.

<sup>8</sup> "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>.

<sup>9</sup> "Teen Births in Delaware, Girls 15-19," The National Campaign to Prevent Teen and Unplanned Pregnancy, <https://thenationalcampaign.org/data/state/delaware>.

<sup>10</sup> 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](http://www.guttmacher.org/sites/default/files/report_pdf/us-teen-pregnancy-state-trends-2011_4.pdf), Table 1.1.

<sup>11</sup> Ibid., Table 1.2.

<sup>12</sup> Slide 17: “Rates of Diagnoses of HIV Infection among Adolescents Aged 13–19 Years 2015—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](http://www.cdc.gov/hiv/pdf/library/slidesets/cdc-hiv-surveillance-adolescents-young-adults-2015.pdf).

<sup>13</sup> Slide 20: “Rates of Diagnosed HIV Infection Classified as Stage 3 (AIDS) among Adolescents Aged 13–19 Years, 2015—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](http://www.cdc.gov/hiv/pdf/library/slidesets/cdc-hiv-surveillance-adolescents-young-adults-2015.pdf).

<sup>14</sup> Slide 18: “Rates of Diagnoses of HIV Infection among Young Adults Aged 20–24 Years 2015—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](http://www.cdc.gov/hiv/pdf/library/slidesets/cdc-hiv-surveillance-adolescents-young-adults-2015.pdf).

<sup>15</sup> Slide 21: “Rates of Diagnosed HIV Infection Classified as Stage 3 (AIDS) among Young Adults Aged 20–24 Years, 2015—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](http://www.cdc.gov/hiv/pdf/library/slidesets/cdc-hiv-surveillance-adolescents-young-adults-2015.pdf).

<sup>16</sup> NCHHSTP Atlas, “STD Surveillance Data” (Atlanta, GA: Centers for Disease Control and Prevention), <http://gis.cdc.gov/GRASP/NCHHSTPAtlas/main.html>.

<sup>17</sup> Ibid.

<sup>18</sup> Ibid.

<sup>19</sup> Centers for Disease Control and Prevention, Adolescent and School Health, Funded State Agencies, Atlanta, GA, [www.cdc.gov/healthyyouth/partners/funded\\_states.htm#de](http://www.cdc.gov/healthyyouth/partners/funded_states.htm#de).

<sup>20</sup> “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](http://www.acf.hhs.gov/fysb/resource/2016-state-prep-awards).

<sup>21</sup> Information provided by Gloria James, PhD, Bureau Chief, Adolescent and Reproductive Health, Division of Public Health, State of Delaware Health and Social Services, April 12, 2017.

<sup>22</sup> “Request for Proposal—Developing and Sustaining a Statewide Professional Development Partnership to Promote Healthy Outcomes and Reduce Sexual Risk Behaviors among Adolescents in Delaware,” State Department of Health and Social Services, Division of Public Health (November 2010). Information provided by Gloria James, bureau chief, Adolescent and Reproductive Health, Division of Public Health, State of Delaware Health and Social Services, February 7, 2011.

<sup>23</sup> Ibid.

<sup>24</sup> Personal Responsibility Education Program Grantee Profiles,” Family and Youth Services Bureau, Administration for Children & Families, U.S. Department of Health & Human Services, April 10, 2017.