

State Profiles **FISCAL YEAR 2016**

MISSOURI

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

- **Division of Adolescent and School Health funds totaling \$75,000**
- **Personal Responsibility Education Program funds totaling \$973,624**
- **Title V State Abstinence Education Program funds totaling \$1,372,460**

In Fiscal Year 2016, local entities in Missouri received:

- **Teen Pregnancy Prevention Program funds totaling \$1,249,997**
- **Sexual Risk Avoidance Education Grant Program funds totaling \$875,040**

SEXUALITY EDUCATION LAW AND POLICY

STATE LAW

Missouri schools are required by [Missouri Revised Statutes § 170.015](#) to teach health education, including human immunodeficiency virus (HIV)/acquired immunodeficiency syndrome (AIDS) prevention education, beginning in elementary school.² If a school chooses to provide additional sexuality education, Missouri law mandates that all instruction must be medically and factually accurate and “present abstinence from sexual activity as the preferred choice of behavior in relation to all sexual activity for unmarried pupils.”³ In addition, instruction must “advise students that teenage sexual activity places them at a higher risk of dropping out of school because of the consequences of sexually transmitted diseases [STDs] and unplanned pregnancy.”⁴

Among other requirements, the instruction must also:

- ...
- 2) Stress that [STDs] are serious, possible, health hazards of sexual activity. Pupils shall be provided with the latest medical information regarding exposure to [HIV], [AIDS], human papillomavirus [HPV], hepatitis, and other [STDs];
 - 3) Present students with the latest medically factual information regarding both the possible side effects and health benefits of all forms of contraception, including the success and failure rates for the prevention of pregnancy and [STDs]; or shall present students with information on contraceptives and pregnancy in a manner consistent with the provisions of the federal abstinence education law, 42 U.S.C. Section 510;
 - 4) Include a discussion of the possible emotional and psychological consequences of preadolescent and adolescent sexual activity and the consequences of adolescent pregnancy.⁵

MISSOURI

The statute was amended in 2015 to include instruction on “the dangers of sexual predators, including online predators when using electronic communication methods” and “the consequences, both personal and legal, of inappropriate text messaging.”⁶

The specific content of human sexuality instruction must be determined by the school board of a school district or charter school.⁷ School districts and charter schools are prohibited from providing abortion services and from allowing a person and/or entity that provides abortion services to “offer, sponsor, or furnish” course materials related to human sexuality and STDs.⁸

Prior to instruction, school districts and charter schools must make all curriculum materials available for public inspection.⁹ Parents have the right to remove their child from any part of the district’s or school’s human sexuality instruction.¹⁰ [This is referred to as an “opt-out” policy.](#)

STATE STANDARDS

Missouri provides the [Health Education Grade-Level Expectations](#) to guide schools in developing a health education curriculum. The transmission, treatment, and prevention of “sexually transmitted infections” is mentioned, as is “behaviors that could enhance HIV transmission.”

STATE LEGISLATIVE SESSION 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 Missouri. 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.

MISSOURI YOUTH RISK BEHAVIOR SURVEY (YRBS) DATA¹¹

Reported ever having had sexual intercourse

- In 2015, 35.1% of female high school students and 41.2% of male high school students in Missouri 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, 41.8% of black high school students, 40% of Hispanic high school students, and 37.1% of white high school students in Missouri reported ever having had sexual intercourse, compared

MISSOURI

to 48.5% of black high school students, 42.5% of Hispanic high school students, and 39.9% of white high school students nationwide.

Reported having had sexual intercourse before age 13

- In 2015, 2.9% of female high school students and 5.3% of male high school students in Missouri 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, 8.7% of black high school students, 8.6% of Hispanic high school students, and 2.9% of white high school students in Missouri reported having had sexual intercourse before age 13, compared to 8.3% of black high school students, 5% of Hispanic high school students, and 2.5% of white high school students nationwide.

Reported being currently sexually active

- In 2015, 26.1% of female high school students and 29.2% of male high school students in Missouri 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, 25.9% of black high school students, 28.2% of Hispanic high school students, and 27.6% of white high school students in Missouri reported being currently sexually active, compared to 33.1% of black high school students, 30.3% of Hispanic high school students, and 30.3% of white high school students nationwide.

Reported not using a condom during last sexual intercourse

- In 2015, 46.5% of female high school students and 40.2% of male high school students in Missouri 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, 36.3% of black high school students, 48.1% of Hispanic high school students, and 45.2% of white high school students in Missouri 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, 10.5% of female high school students and 13% of male high school students in Missouri 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.

MISSOURI

- In 2015, 9.3% of white high school students in Missouri reported not using any method to prevent pregnancy during their last sexual intercourse, compared to 10.4% of white high school students nationwide.

Reported ever having been physically forced to have sexual intercourse

- In 2015, 11.9% of female high school students and 4.7% of male high school students in Missouri reported ever 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, 10.1% of black high school students, 15.9% of Hispanic high school students, 7.5% of white high school students in Missouri reported ever having been physically forced to have sexual intercourse, compared to 7.3% of black high school students, 7% of Hispanic high school students, and 6% of white high school students nationwide.

Reported experiencing physical dating violence

- In 2015, 10.2% of female high school students and 12.9% of male high school students in Missouri 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, 18.5% of black high school students and 10% of white high school students in Missouri reported experiencing physical dating violence in the prior year, compared to 10.5% of black high school students and 9% of white high school students nationwide.

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

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

Teen Pregnancy, Birth, and Abortion

- In 2011, Missouri had the 24th highest teen pregnancy rate in the United States, with a rate of 51 pregnancies per 1,000 young women ages 15–19, compared to the national rate of 52 per 1,000.¹² There were a total of 10,150 pregnancies among young women ages 15–19 reported in Missouri in 2011.¹³
- In 2015, Missouri had the 21st highest teen birth rate in the United States, with a rate of 25 births per 1,000 young women ages 15–19, compared to the national rate of 22.3 per 1,000.¹⁴ There were a total of 5,232 live births to young women ages 15–19 reported in Missouri in 2014, the most recent year of available data.¹⁵
- In 2011, Missouri had the 33rd highest teen abortion rate in the United States, with a rate of 8 abortions per 1,000 young women ages 15–19, compared to the national rate of 14 per 1,000.¹⁶

MISSOURI

There were a total of 1,650 abortions among young women ages 15–19 reported in Missouri in 2011.¹⁷

HIV and AIDS

- In 2015, the rate of diagnoses of HIV infection among adolescents ages 13–19 in Missouri was 5.4 per 100,000, compared to the national rate of 5.8 per 100,000.¹⁸
- In 2015, the rate of AIDS diagnoses among adolescents ages 13–19 in Missouri was 0.6 per 100,000, compared to the national rate of 0.7 per 100,000.¹⁹
- In 2015, the rate of diagnoses of HIV infection among young adults ages 20–24 in Missouri was 24.2 per 100,000, compared to the national rate of 31.1 per 100,000.²⁰
- In 2015, the rate of AIDS diagnoses among young adults ages 20–24 in Missouri was 6.5 per 100,000, compared to the national rate of 5.6 per 100,000.²¹

STDs

- In 2015, Missouri had the 16th highest rate of reported cases of chlamydia among young people ages 15–19 in the United States, with an infection rate of 2,093.4 cases per 100,000, compared to the national rate of 1,857.8 per 100,000. In 2015, there were a total of 8,280 cases of chlamydia among young people ages 15–19 reported in Missouri.²²
- In 2015, Missouri had the 9th highest rate of reported cases of gonorrhea among young people ages 15–19 in the United States, with an infection rate of 493.5 cases per 100,000, compared to the national rate of 341.8 per 100,000. In 2015, there were a total of 1,952 cases of gonorrhea among young people ages 15–19 reported in Missouri.²³
- In 2015, Missouri had the 28th 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 3.0 cases per 100,000, compared to the national rate of 5.4 per 100,000. In 2015, there were a total of 12 cases of syphilis reported among young people ages 15–19 in Missouri.²⁴

Visit the Office of Adolescent Health's (OAH) [Missouri 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 MISSOURI

SIECUS STATE PROFILES FY2016
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MISSOURI

Grantee	Award
Division of Adolescent and School Health (DASH)	
Missouri Department of Elementary & Secondary Education	\$75,000
TOTAL	\$75,000
Teen Pregnancy Prevention Program (TPPP)	
TPPP Tier 1B	
Better Family Life, Inc.	\$1,249,997
TOTAL	\$1,249,997
Personal Responsibility Education Program (PREP)	
PREP State-Grant Program	
Missouri Department of Health and Senior Services (federal grant)	\$973,624
TOTAL	\$973,624
Title V Abstinence-Only-Until-Marriage Program (Title V AOUM)	
Missouri Department of Health and Senior Services (federal grant)	\$1,372,460
TOTAL	\$1,372,460
Sexual Risk Avoidance Education Grant Program (SRAE)	
The Curators of the University of Missouri-St. Louis	\$442,019
ThriVe St Louis	\$433,021
TOTAL	\$875,040
GRAND TOTAL	\$4,546,121

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 Missouri funded to strengthen student health through ESHE, SHS, and SSE (1308 Strategy 2).

MISSOURI

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 Missouri 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 Missouri funded to collect and report YRBS and School Health Profiles data in (1308 Strategy 1): The Missouri Department of Elementary and Secondary Education (\$75,000).

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.

- In FY 2016, there were no TPPP Tier 1A grantees in Missouri.

Tier 1B: Replicating evidence-based TPP programs to scale in communities with the greatest need.

- In FY 2016, there was one TPPP Tier 1B grantee in Missouri: Better Family Life, Inc. (\$1,249,997).

BETTER FAMILY LIFE, \$1,249,999 (FY 2016)

Better Family Life (BFL) is a non-profit that focuses on community development. Established in 1983 in response to "the crises within the African-American family," BFL aims to "plan and establish social, cultural, artistic, youth, economic, housing, and educational programs that help to promote positive and innovative changes within the metropolitan St. Louis area."²⁵ BFL's programs primarily serve the unemployed, underemployed, disadvantaged, and "skill-deficient." BFL previously received abstinence-only-until-marriage (AOUM) funding through the now-defunct Community-Based Abstinence Education (CBAE) grant program. Between FYs 2005 and 2007, the organization received \$2.4 million in CBAE funds. BFL was awarded an additional five-year CBAE grant in FY 2008 and received \$1.2 million from the

MISSOURI

grant before the program was eliminated in 2010. With the funds, BFL implemented [*Choosing the Best*](#), one of the more popular AOUM curricula series.

The organization's TPPP Tier 1B program aims to reduce teen birth rates in 28 counties within St. Louis City. BFL partners with middle schools, high schools, and after-school programs to implement the BFL Teen Pregnancy Prevention Program to young people using three evidence-based curricula: [*Sisters Saving Sisters*](#), [*Promoting Health Among Teens \(PHAT\)*](#), and [*Making Proud Choices!*](#). The program aims to reach 4,000 young people annually.²⁶

Tier 2A: Supporting and enabling early innovation to advance adolescent health and prevent teen pregnancy.

- In FY 2016, there were no TPPP Tier 2A grantees in Missouri.

Tier 2B: Rigorous evaluation of new or innovative approaches to prevent teen pregnancy.

- In FY 2016, there were no TPPP Tier 2B grantees in Missouri.

Tier 2C: Effectiveness of TPP programs designed specifically for young males.

- In FY 2016, there were no TPPP Tier 2C grantees in Missouri.

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 Missouri Department of Health and Senior Services received \$973,624 in federal PREP funds.²⁷
- The department provides sub-grants to 15 local public and private entities. The sub-grantee information is listed below.²⁸

MISSOURI

Sub-grantee	County	Amount
Alternative Opportunities	Butler, Carter, Dallas Scott, Francois, Greene, Howell, Jasper, Laclede, McDonald, Phelps, Ripley, St. Washington, and Wright Counties	\$93,795
The Community Partnership	Phelps County	\$20,025
Della Lamb	Jackson County	\$80,000
Greater KC LINC	Greater KC Area (Clay, Jackson, and Patte Counties)	\$28,080
Helping Ministries	Pemiscot	\$50,000
Hickory County Health Department	Hickory County	\$27,324
Kansas City CARE	Jackson County	\$66,000
Kennett School District	Dunklin and Pemiscot Counties	\$42,303
Morgan County R-1 School	Morgan County	\$25,000
Pais Youth Development Center	St. Louis City	\$66,000
Pettis County Health Center	Pettis County	\$27,907
Susanna Wesley Family Learning Center	Mississippi, Pemiscot, and Scott Counties	\$66,000
Thomas Business Enterprises	St. Louis City	\$19,508
Washington County Community Partnership	Washington County	\$20,439
Washington County Health Department	Washington County	\$85,467

The Missouri Department of Health and Senior Services implements the state's PREP grant program to young people ages 12–18 in schools, local public health agencies, private entities through bids, and foster care agencies. The grant is also used to fund an evaluator. Programming uses either the [Teen Outreach Program \(TOP\)](#), [Becoming a Responsible Teen \(BART\)](#), or [Making Proud Choices!](#) curriculum, each of which address three of the following adulthood preparation subjects: healthy relationships, adolescent development, parent-child communication, education and career skills, and healthy life skills.²⁹

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 Missouri.

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.

MISSOURI

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

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, Missouri received PREP state-grant funding; therefore, entities in Missouri were not eligible for CPREP.
- However, Future Leaders Outreach Network in Texas, which received \$667,687 in CPREP funds, appears to implement some programming in Kansas City, Missouri.

TITLE V STATE ABSTINENCE EDUCATION GRANT PROGRAM

The Title V state abstinence education grant program for 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 Missouri Department of Health and Senior Services received \$1,372,460 in federal Title V AOUM funding.³⁰
- The department provides sub-grants to three local agencies.³¹
- The Missouri Broadcasters Association runs an advertisement campaign that provides the match required for the grant.

Sub-grantee	County	Amount
Lincoln University Extension Cooperative	Kansas City (Jackson County), St. Louis County, and various counties in southeast Missouri	\$430,150
Missouri State University Social Work Graduate Program	Various counties in Southwest Missouri	\$252,984
Missouri Broadcasters Association	Not reported	\$121,785

The Missouri Department of Health and Senior Services coordinates the state's federal Title V AOUM grant. The department serves young people ages 10–19 or in grades 6–12 in both school- and community-based settings and targets African American and Hispanic youth in areas of high teen birth rates. Sub-grantees must use curricula that are medically accurate and follow the [A–H guidelines](#) per the federal grant guidance. Curricula used include [Choosing the Best](#), the community-service learning component from [Changing](#)

MISSOURI

[Scenes](#), [Making a Difference!](#), [Hablemos](#), [Within My Reach](#), and a pilot with a new curriculum adapted from [Choosing the Best](#) and [WAIT Training](#). The sub-grantee, Missouri Broadcasters Association, additionally runs an advertisement campaign on the radio that focuses on encouraging parents and caregivers to communicate with their teens in order to promote positive youth development and healthy decision-making.³²

“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 two SRAE grantees in Missouri: The Curators of the University of Missouri-St. Louis (\$442,019) and Thrive St. Louis (\$433,021).³³
- These local entities received a total of \$875,040 in SRAE grant funding.

THE CURATORS OF THE UNIVERSITY OF MISSOURI-ST. LOUIS, \$442,019 (FY 2016)

The Curators of the University of Missouri-St. Louis’ Missouri Institute of Mental Health (MIMH) “improve[s] and transform[s] mental health outcomes through innovative research and program development, program evaluation, community outreach, and professional training.”³⁴ MIMH uses [Promoting Health Among Teens \(PHAT\)](#) curriculum to serve young black people ages 12-17.³⁵ At the time of publication, more information on MIMH’s use of SRAE funds was unknown.

THRIVE ST. LOUIS, \$433,021 (FY 2016)

Thrive St. Louis (Thrive) provides low- and no-cost medical services, including pregnancy testing, STD testing referrals, ultrasound services, and life skills classes.³⁶ Thrive uses [Promoting Health Among Teens \(PHAT\)](#) and *Live U 2* curricula to serve young people ages 12-14 in school-based settings.³⁷ At the time of publication, more information on Thrive’s use of SRAE funds was unknown.

POINTS OF CONTACT

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MISSOURI

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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 Missouri School Improvement Program Integrated Standards and Indicators Manual: Accreditation Standards for Public School Districts in Missouri (Missouri: Missouri Department of Elementary and Secondary Education, 2001), http://dese.mo.gov/sites/default/files/MSIP_4thCycle_6-04.pdf.

³ Mo. Rev. Stat. § 170.015(1)(1), www.moga.mo.gov/statutes/C100-199/1700000015.HTM.

⁴ Ibid.

⁵ Mo. Rev. Stat. §§ 170.015(2)-(4).

⁶ Mo. Rev. Stat. § 170.015(7).

⁷ Mo. Rev. Stat. § 170.015(4).

⁸ Mo. Rev. Stat. § 170.015(8)(7).

⁹ Mo. Rev. Stat. § 170.015(8)(6).

¹⁰ Mo. Rev. Stat. § 170.015(5)(2).

¹¹ "High School YRBS," Centers for Disease Control and Prevention, <https://nccd.cdc.gov/youthonline/App/Default.aspx>.

¹² 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.

¹³ Ibid., Table 1.2.

MISSOURI

- ¹⁴ “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>.
- ¹⁵ “Teen Births in Missouri, Girls 15-19,” The National Campaign to Prevent Teen and Unplanned Pregnancy, <https://thenationalcampaign.org/data/state/Missouri>.
- ¹⁶ 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.
- ¹⁷ Ibid., Table 1.2.
- ¹⁸ 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.
- ¹⁹ 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.
- ²⁰ 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.
- ²¹ 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.
- ²² NCHHSTP Atlas, “STD Surveillance Data” (Atlanta, GA: Centers for Disease Control and Prevention), <http://gis.cdc.gov/GRASP/NCHHSTPAtlas/main.html>.
- ²³ Ibid.
- ²⁴ Ibid.
- ²⁵ “About Us,” Better Family Life, Inc., www.betterfamilylife.org/profile/.
- ²⁶ “Better Family Life, Inc.,” Grantees (MO) – TPP Tier 1B, U.S. Department of Health and Human Services, Office of Adolescent Health, www.hhs.gov/ash/oah/grants/grantees/tpp/1b/better-family-life-inc.html.
- ²⁷ “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.
- ²⁸ Information provided by Andra Jungmeyer, Adolescent Health Coordinator, Missouri Department of Health and Senior Services, May 31, 2016.
- ²⁹ Ibid.
- ³⁰ “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.
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- ³² Ibid.
- ³³ “2016 Sexual Risk Avoidance Education (SRAE) 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-srae-grant-awards.
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- ³⁶ “Home,” Thrive St. Louis, <http://thrivelouis.org/>.
- ³⁷ “Sexual Risk Avoidance Education Program Grantee Profiles,” Family and Youth Services Bureau, Administration for Children & Families, U.S. Department of Health & Human Services, May 3, 2017.