

State Profiles **FISCAL YEAR 2016**

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

- Division of Adolescent and School Health funds totaling \$79,012
- Teen Pregnancy Prevention Program funds totaling \$965,988
- Personal Responsibility Education Program funds totaling \$514,313
- Title V State Abstinence Education Program funds totaling \$516,176

SEXUALITY EDUCATION LAW AND POLICY

STATE LAW

[Iowa Code 256.11](#) mandates that research-based, age-appropriate health education be taught in grades K–12, and details what must be covered in each grade. In grades 1–6, “the health curriculum shall include the characteristics of communicable diseases, including acquired immune deficiency syndrome [AIDS].”² In grades 7–8, health education must “include the characteristics of sexually transmitted disease [STD] and AIDS.”³ In grades 9–12, students are required to take one unit of health instruction, which must include information on “the prevention and control of disease, including [STDs] and [AIDS].”⁴ Additionally, health curricula must include information about human papillomavirus (HPV) and the HPV vaccine.

[Iowa Code §§ 279.50](#) mandates that the curriculum use materials that are up-to-date, age-appropriate, and research-based/medically accurate; furthermore, all information must be free of biases based on race, ethnicity, sexual orientation, or gender.⁵ School districts shall teach age-appropriate, science-based, comprehensive sexuality education as part of the health curriculum, but may also use abstinence-only materials so long as those materials fall within the parameters of the law.

Parents or guardians may remove their children from any part of health education courses if the course conflicts with the student’s religious beliefs. [This is referred to as an “opt-out” policy.](#)

STATE STANDARDS

Iowa provides the “[Iowa Core: K-12 21st Century Skills](#)” as guidance for curricula development. The only mention of sexual health in the standards is for students to be able to “describe the interrelationships of the wellness dimensions: physical, emotional, intellectual, environmental, social, sexual, and spiritual wellness during adolescence.”

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 Iowa. 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.

IOWA YOUTH RISK BEHAVIOR SURVEY (YRBS) DATA

Iowa chose not to participate in the 2013 or 2015 Youth Risk Behavior Survey. The state conducts its own youth risk behavior survey, but it does not ask about sexual risk behaviors. Visit the Centers for Disease Control and Prevention's (CDC) [Youth Online](#) database for 2011 YRBS data and the State of Iowa's [Youth Survey](#) publications for information on non-sexual health-related youth risk behaviors.

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

Teen Pregnancy, Birth, and Abortion

- In 2011, Iowa had the 41st highest teen pregnancy rate in the United States, with a rate of 39 pregnancies per 1,000 young women ages 15–19, compared to the national rate of 52 per 1,000.⁶ There were a total of 4,080 pregnancies among young women ages 15–19 reported in Iowa in 2011.⁷
- In 2015, Iowa had the 34th highest teen birth rate in the United States, with a rate of 18.6 births per 1,000 young women ages 15–19, compared to the national rate of 22.3 per 1,000.⁸ There were a total of 2,048 live births to young women ages 15–19 reported in Iowa in 2014, the most recent year of available data.⁹
- In 2011, Iowa 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 1,000.¹⁰ There were a total of 810 abortions among young women ages 15–19 reported in Iowa in 2011.¹¹

HIV and AIDS

- In 2015, the rate of diagnoses of HIV infection among adolescents ages 13–19 in Iowa was 1.4 per 100,000, compared to the national rate of 5.8 per 100,000.¹²
- In 2015, the rate of AIDS diagnoses among adolescents ages 13–19 in Iowa was 0.0 per 100,000, compared to the national rate of 0.7 per 100,000.¹³
- In 2015, the rate of diagnoses of HIV infection among young adults ages 20–24 in Iowa was 12.5 per 100,000, compared to the national rate of 31.1 per 100,000.¹⁴
- In 2015, the rate of AIDS diagnoses among young adults ages 20–24 in Iowa was 2.2 per 100,000, compared to the national rate of 5.6 per 100,000.¹⁵

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STDs

- In 2015, Iowa had the 36th highest rate of reported cases of chlamydia among young people ages 15–19 in the United States, with an infection rate of 1,547.7 cases per 100,000, compared to the national rate of 1,857.8 per 100,000. In 2015, there were a total of 3,292 cases of chlamydia among young people ages 15–19 reported in Iowa.¹⁶
- In 2015, Iowa had the 37th highest rate of reported cases of gonorrhea among young people ages 15–19 in the United States, with an infection rate of 194.2 cases per 100,000, compared to the national rate of 341.8 per 100,000. In 2015, there were a total of 413 cases of gonorrhea among young people ages 15–19 reported in Iowa.¹⁷
- In 2015, Iowa had the 31st 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 2.8 cases per 100,000, compared to the national rate of 5.4 per 100,000. In 2015, there were a total of 6 cases of syphilis reported among young people ages 15–19 in Iowa.¹⁸

Visit the Office of Adolescent Health's (OAH) [Iowa 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 IOWA

Grantee	Award
Division of Adolescent and School Health (DASH)	
Iowa Department of Education	\$79,012
TOTAL	\$79,012
Teen Pregnancy Prevention Program (TPPP)	
Planned Parenthood of the Heartland	\$965,988
TOTAL	\$965,988
Personal Responsibility Education Program (PREP)	
PREP State-Grant Program	
Iowa Department of Public Health (federal grant)	\$514,313
TOTAL	\$514,313
Title V Abstinence-Only-Until-Marriage Program (Title V AOUM)	
Iowa Department of Public Health	\$516,176
TOTAL	\$516,176
GRAND TOTAL	\$2,075,489

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 Iowa 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 Iowa 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 Iowa funded to collect and report YRBS and School Health Profiles data (1308 Strategy 1): The Iowa Department of Education (\$79,012).

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 Iowa.

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 Iowa: Planned Parenthood of the Heartland

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(\$965,988).

PLANNED PARENTHOOD OF THE HEARTLAND, \$965,988 (FY 2016)

Planned Parenthood of the Heartland serves the Mills, Page, Pottawattamie, and Woodbury counties in Iowa and Dakota and Douglas counties in Nebraska. With TPPP 1B funding, Planned Parenthood will implement [*Get Real*](#) and [*Draw the Line/Respect the Line*](#) in middle schools and community-based organizations, and [*Be Proud! Be Responsible!*](#) and [*Making Proud Choices!*](#) in high schools. The organization aims to serve 2,775 young people per year.¹⁹

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 Iowa.

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

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

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

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

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 Iowa Department of Public Health received \$514,313 in federal PREP funds.²⁰
- The agency provides sub-grants to five local public and private entities. The sub-grantee information is listed below.²¹

Sub-grantee	Serving	Amount
Ottumwa Community School District	Wapello County	Not Reported
Bethany for Children & Families	Scott County	Not Reported

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Cerro Gordo County Department of Public Health	Cerro Gordo County	Not Reported
Planned Parenthood of the Heartland	Polk, Pottawattamie, and Woodbury Counties	Not Reported
Women's Health Services of Eastern Iowa, Inc.	Clinton County	Not Reported
Henry County Extension & Outreach	Henry County	Not Reported
Marshalltown Community School District	Marshall County	Not Reported

The Iowa Department of Public Health administers the PREP state-grant program in both school- and community-based settings and targets youth ages 10–19 residing in areas of the state with the highest teen birth rates. Funded programs take place in Black Hawk, Cerro Gordo, Clinton, Des Moines, Pottawattamie, Scott, and Woodbury Counties.

Multiple strategies have been used to create awareness and support for PREP within the community and among participants, such as promotions through social media and newspaper advertisements, and at community and sporting events. For example, the Iowa Department of Public Health, in partnership with Iowa State University Extension and Outreach, launched a blog-style website for Iowa teens that focuses on a variety of health issues. The website, IAMincontrol.org (Iowa Adolescents Making Choices to Control Their Future) includes questions, answers, and resources on a variety of adolescent health topics.

Sub-grantees must incorporate the following three adulthood preparation subjects in their programming: adolescent development, healthy life skills, and healthy relationships. They are also required to replicate one of the following two curricula: [Teen Outreach Program \(TOP\)](#) and [Wise Guys](#).²²

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 Iowa.

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 Iowa.

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.

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- In FY 2016, Iowa received PREP state-grant funding; therefore, entities in Iowa 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 Iowa Department of Public Health received \$516,176 in federal Title V AOUM funding.²³
- The agency provides sub-grants to four local public and private entities. The sub-grantee information is listed below.²⁴
- In Iowa, the match is provided through in-kind funds from sub-grantees.

Sub-grantee	Serving	Amount
Youth and Shelter Services, Inc.	See narrative below	\$70,330
Planned Parenthood of the Heartland	See narrative below	\$35,340
Unity Healthcare dba Trinity Muscatine	See narrative below	\$45,757
Community Opportunities dba New Opportunities	See narrative below	\$18,830

The Iowa Department of Public Health manages the Title V AOUM in Iowa. The agency assists four local public and private entities to provide both school- and community-based programming. The programming targets young people ages 10–19 in the following counties: Boone, Greene, Linn, Marshall, Muscatine, Polk, and Story. Sub-grantees are required to use evidence-based curricula or promising practices and the [Teen Outreach Program \(TOP\)](#) curriculum.²⁵

“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 Iowa.

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 Iowa Code § 256.11(3), <https://coolice.legis.iowa.gov/Cool-ICE/default.asp?category=billinfo&service=IowaCode&input=256.11>.

³ Iowa Code § 256.11(4), <https://coolice.legis.iowa.gov/Cool-ICE/default.asp?category=billinfo&service=IowaCode&input=256.11>.

⁴ Iowa Code § 256.11(5)(j), <https://coolice.legis.iowa.gov/Cool-ICE/default.asp?category=billinfo&service=IowaCode&input=256.11>.

⁵ Iowa Code § 279.50(9)(d)(2), www.legis.iowa.gov/DOCS/ACO/IC/LINC/Section.279.50.pdf.

⁶ 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.

⁷ *Ibid.*, Table 1.2.

⁸ “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>.

⁹ “Teen Births in Iowa, Girls 15-19,” The National Campaign to Prevent Teen and Unplanned Pregnancy, <https://thenationalcampaign.org/data/state/Iowa>.

¹⁰ 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.

¹¹ *Ibid.*, Table 1.2.

¹² 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.

¹³ 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.

¹⁴ 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.

¹⁵ 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.

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

¹⁷ *Ibid.*

¹⁸ *Ibid.*

¹⁹ “Planned Parenthood of the Heartland,” Grantees (IA) – TPP Tier 1B, U.S. Department of Health and Human Services, Office of Adolescent Health, www.hhs.gov/ash/oah/grants/grantees/tpp/1b/planned-parenthood-of-the-heartland.html.

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 Information provided by Addie Rasmusson, Community Health Consultant, Bureau of Family Health, Iowa Department of Public Health, May 10, 2016; “Personal Responsibility Education Program Grantee Profiles,” Family and Youth Services Bureau, Administration for Children & Families, U.S. Department of Health & Human Services, April 12, 2017.

²² *Ibid.*

²³ “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.

²⁴ Information provided by Mary Greene, Community Health Consultant, Bureau of Family Health, Iowa Department of Public Health, April 13, 2017.

²⁵ *Ibid.*