



Prevention of Teen Pregnancy and Sexually Transmitted Diseases

2023

**Pursuant to ACT 534
2014 Regular Session**

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1.0 INTRODUCTION AND BACKGROUND

As required by Act 534 of the 2014 Regular Session, the state superintendent of education, secretary of the Department of Children & Family Services (DCFS), and the secretary of the Louisiana Department of Health (LDH) shall review and evaluate the effectiveness of current state programs, including but not limited to sex education provided by public schools, aimed at reducing the rate of teen pregnancy and preventing the spread of HIV and other sexually transmitted diseases among youth of Louisiana.

The state superintendent of education, the DCFS secretary and the LDH secretary shall review and evaluate any programs that are available for implementation in Louisiana to educate the youth of Louisiana about the importance of preventing teen pregnancy and the spread of HIV and other sexually transmitted diseases by providing culturally competent education and outreach.

The state superintendent of education, the DCFS secretary, and the LDH secretary shall jointly submit a written report of their findings and recommendations, including proposed legislation if necessary, for a comprehensive strategy to reduce the rate of teen pregnancy and prevent the spread of HIV and other sexually transmitted diseases among the youth of Louisiana on an annual basis to the legislature.

2.0 DATA

1. Teen Births

Number of Births per 1,000 Females Aged 15 to 19 (2018): Louisiana, Neighboring States, and United States		
	Rate	Rank
United States	17.4	--
Louisiana	27.5	48
Alabama	25.2	41
Arkansas	30.4	50
Mississippi	27.8	49
Texas	25.3	42

Number of Births per 1,000 Females Aged 15 to 19 (2019): Louisiana, Neighboring States, and United States		
	Rate	Rank
United States	16.7	--
Louisiana	27.8	48
Alabama	25.6	46
Arkansas	30.0	50
Mississippi	29.1	49
Texas	24.0	42

Number of Births per 1,000 Females Aged 15 to 19 (2020): Louisiana, Neighboring States, and United States		
	Rate	Rank
United States	15.4	--
Louisiana	25.7	48
Alabama	24.8	46
Arkansas	27.8	49
Mississippi	27.9	50
Texas	22.4	42

Note: The citation below can be used for all the charts 2017-2020. The data source used was the same however, the information provided in the tables is filtered by the year in the chart title.

Citation: United States Department of Health and Human Services (U.S. DHHS), Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), Division of Vital Statistics, Natality public-use data 2016-2020, on CDC WONDER Online Database, October 2021. Accessed 2021

2. Chlamydia

New Cases of Chlamydia per 100,00 Residents Louisiana, Neighboring State, and United States, 2020		
	Rate	Trends from 2019
United States	481.3	↓
Louisiana	709.8	↓
Alabama	552.2	↓
Arkansas	531.9	↓
Mississippi	803.7	↓
Texas	466.0	↑

Source: CDC. Sexually Transmitted Disease Surveillance 2020. Atlanta: U.S. DHHS Services; 2021

3. Gonorrhea

New Cases of Gonorrhea per 100,00 Residents Louisiana, Neighboring State, and United States, 2020		
	Rate	Trends from 2019
United States	206.5	↑
Louisiana	333.1	↑
Alabama	294.2	↓
Arkansas	260.4	↑
Mississippi	462.8	↑
Texas	200.9	↑

Source: CDC. Sexually Transmitted Disease Surveillance 2020. Atlanta: U.S. DHHS; 2022.

4. Syphilis

New Cases of P & S Syphilis per 100,00 Residents Louisiana, Neighboring State, and United States, 2020		
	Rate	Trends from 2019
United States	12.7	↑
Louisiana	15.1	↑
Alabama	10.8	↓
Arkansas	16.6	↑
Mississippi	24.9	↑
Texas	9.3	↑

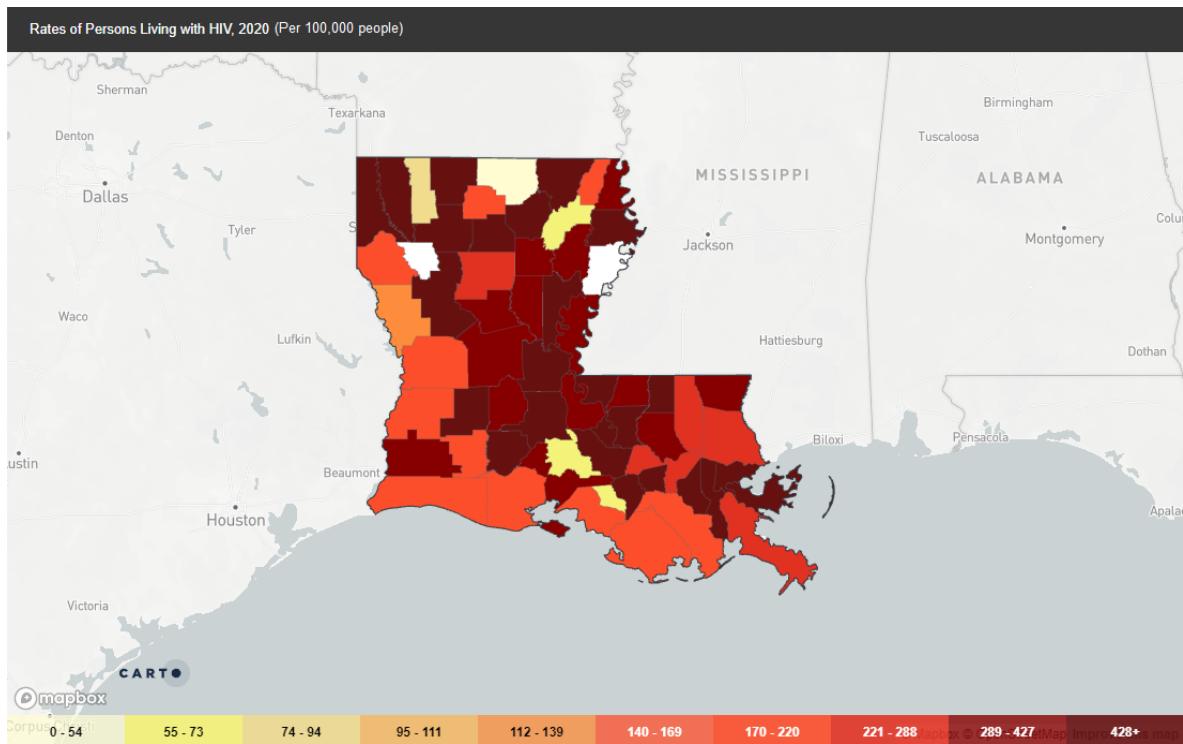
Source: CDC. Sexually Transmitted Disease Surveillance 2020. Atlanta: U.S. DHHS; 2022.

3. HIV/AIDS

2020 HIV National Rankings**						
	Louisiana		New Orleans MSA		Baton Rouge MSA	
	Value	Rank	Value†	Rank	Value†	Rank
HIV Case Rate*	15.6	4 th	17.3	9 th	18.4	7 th
HIV Case Count	723	10 th	220	28 th	158	42 nd

*Rates are per 100,000

**This table is based on case counts and rates reported in the CDC's 2018 HIV Surveillance Report



map.aidsvu.org

3.0 PROGRAMS AVAILABLE THROUGH THE DEPARTMENT OF HEALTH

1. Reproductive Health Program

LDH's Office of Public Health (OPH), Bureau of Family Health (BFH) worked to bring efficiency to the statewide network of direct-service parish health units (PHU) and sub-recipient sites located in federally qualified health centers, providing reproductive health services and assuring affordable access to family planning and related preventive services for women, men, and adolescents. In 57 service sites statewide, patients receive education and counseling on contraception, sexually transmitted infection (STI) risk, and family planning. Through Title X, all adolescents are required to have counseling regarding resisting sexual coercion. In 2021, 31,996 persons were seen through Title X. Of those, 526 were under 15 (390 female, 136 male), 1,870 were between 15-17 years old (1,522 female, 348 male), and 2,222 were 18-19 years old (1,717 female, 505 male). During orientation, new healthcare providers are trained to focus on the unique needs of adolescents.

2. The Louisiana Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program

The Louisiana Maternal, Infant, and Early Childhood Home Visiting Family (LA MIECHV) program is a part of BFH. LA MIECHV is a no-cost, voluntary program that provides family support and coaching to improve the health and well-being of pregnant women and parenting families with young children. Families are paired with registered nurses or parent educators who provide personalized education, guidance, and referrals to services to empower families to reach their goals. Nurses and parent educators work with families in their homes or the family's preferred location. LA MIECHV implements two evidence-based models: Nurse-Family Partnership (NFP) and Parents as Teachers (PAT). Services provided to participating families include health education and coaching; support in building positive parenting skills and caregiving confidence; help setting and reaching personal goals, such as returning to school and/or work; and connecting families to services and resources in their communities.

LA MIECHV teams implementing NFP are in LDH administrative regions 2, 3, 4, 5, 6, 7, 8, and 9 and provide services and support to first-time mothers and families from pregnancy until the child's second birthday. To be eligible for the program, mothers must enroll before 29 weeks of pregnancy and be eligible at enrollment for Medicaid, Women, Infants, and Children (WIC), Temporary Assistance of Needy Families (TANF), or Supplemental Security Income (SSI). MIECHV teams implementing PAT are in LDH administrative regions 1, 6, 7, and 8 and provide services and support to expectant and parenting families from pregnancy until kindergarten entry. To be eligible for the program, families must have children 36 months or younger who are eligible at enrollment for Medicaid, WIC, TANF, or SSI. In State Fiscal Year (SFY) 2022, teams implementing NFP served 3,265 families, providing 32,424 home visits. Teams implementing PAT served 786 families, providing 6,189 home visits.

3. School-Based Health Centers

The STD/HIV/Hepatitis Program (SHHP) collaborates with school-based health centers (SBHCs) across the state to provide trainings on STD/HIV screening and counseling as requested. SHHP also provides financial assistance to approximately 20 SBHCs by covering the costs associated with HIV testing, STD testing, and HIV treatment. In addition, SHHP, OPH Laboratory and Adolescent School Health Program (ASHP) developed *Guidelines to Conduct STD and HIV Screenings in School-Based Health Centers* to aid SBHC personnel in the implementation of STD and HIV screening. The National School-Based Health Alliance has challenged all SBHCs to voluntarily adopt and report standardized performance measures. SBHCs under OPH management are required to report data to ASHP related to these five measures. One measure is the percentage of males and females who are sexually active and are screened for chlamydia. The CDC recommends screening all sexually active females under 25 for chlamydia and consider also screening high -risk adolescent males. In FY 22, the number of adolescent males who reported being sexually active equaled 1,070; of this number, 727 were tested for chlamydia. The number of adolescent females who reported being sexually active equaled 925 of this number; 639 were tested for chlamydia.

4. Louisiana Youth Responsibility and Education Program (LYREP)

The STD/HIV/Hepatitis Program (SHHP) receives federal funds through the Family and Youth Services Bureau (FYSB) to implement the Louisiana Youth Responsibility and Education Program (LYREP) in Louisiana. LYREP is focused on educating adolescents using evidence-based program models that have been proven to delay sexual activity, increase condom or contraceptive use for sexually active youth, and/or reduce pregnancy among youth. The program administers three Evidence-Based Teen Pregnancy Prevention program models at four community-based organizations in regions 2, 4 and 7 of the Louisiana. The programs include group discussions and activities relating to responsibility and teen pregnancy prevention to self-esteem, values, healthy relationships, human sexuality, decision-making, and goal setting, and SHHP measures the youth's change in attitudes based on both pre- and post-program surveys. LYREP prioritizes youth ages 11 to 18 who are in foster care, juvenile justice facilities, and those who live in geographical areas with high teen birth rates and STI/HIV prevalence rates. Approximately 3,969 youth have been reached through LYREP since its inception in 2011 and approximately 459 adolescents were reached in FY 22. In FY22, 49% of participants reported that they are less likely to have intercourse, 62% are more likely to use birth control, and 58% are more likely to use a condom during intercourse.

- Adult Identity Mentoring (AIM) is a group level intervention for youth ages 11 to 14. AIM encourages adolescents to envision a positive future self and discuss risk behaviors that could be a barrier to successful adulthood. The Baton Rouge Black Alcoholism Council/ Metro Health Education is implementing Project AIM in the Baton Rouge metro area.
- Becoming a Responsible Teen (BART) is a group level, peer-led, social skills training intervention aimed at reducing STI/HIV risk behavior among African American teenage boys and girls ages 14 to 18. BART emphasizes ethnic and gender pride, healthy relationships, and assertive communication. It is designed to enhance awareness of

STI/HIV risk reduction strategies with the goal of preventing teen pregnancies. The Acadiana Cares is implementing BART in Lafayette.

- Wise Guys is a group-level, male-oriented teen pregnancy prevention intervention aimed at reducing teen pregnancy and STI/HIV risk behaviors among adolescent males ages 11 to 18. Two organizations are implementing Wise Guys programs: the 100 Black Men Chapter of Metropolitan Baton Rouge and Oasis Outreach Group in Shreveport.

5. Medicaid and Managed Care Organizations

- Aetna Better Health of Louisiana (ABH-LA)
 - Enrollee newsletters are sent out on a quarterly basis and help to educate enrollees on annual well visits, immunizations, and STI screenings.
 - In 2022, we will launch an STI text campaign to inform enrollees of the importance of regular screenings. This was completed and will continue into 2023.
 - In 2022, we will launch an STI IVR campaign to inform enrollees of the importance of regular screenings. This was completed and will continue in 2023.
 - In 2022, we will host monthly community event days at Grambling State University as part of our Healthy Historically Black Colleges and Universities (HBCU) Initiative. We will provide STI education and screenings. This was completed and partnership with HBCUs will be increased and continued in 2023.
 - In collaboration with the Louisiana Mental Health and Perinatal Partnership, ABH-LA is working to improve safe prescribing and engagement in behavioral health services prenatal and postnatal.
 - In collaboration with the Louisiana American Academy of Pediatrics, ABH-LA aims to increase provider engagement in Adverse Childhood Experiences (ACEs/PEARLS) screening tools.
 - STI/STD testing is provided at select CVS Minute Clinic locations in the New Orleans area: <https://www.cvs.com/minuteclinic/clinic-locator/la/neworleans/std-testing.html>.
 - ABH-LA's Population Health team monitors and tracks the health of our enrollees and continues across all our teams, from incentivizing providers for improved quality measures to community-focused, enrollee-centric outreach efforts.
 - ABH-LA has several digital resources with available education for our enrollees. Enrollees will have access to a health and wellness library on our website, and a digital health platform, Active Health.
 - ABH-LA HEDIS outreach team performs live outreach calls to enrollees. One targeted group is Early Periodic Screening, Diagnosis, and Treatment (EPSDT) enrollees with gaps in care for provider visits, who had closed gaps in care the previous year.
 - ABH-LA is working with our text message vendor to create both a maternal health and an EPSDT nano-site, with condition-specific health-related information, information about provider visits, screenings and tests, behavioral health, new diagnoses,

pregnancy and birth control, questions to ask your doctor, and ways to connection to our SDoH vendor.

- The Next Best Action campaign is targeted outreach to provide education to enrollees, to promote health, behavior changes, and choices on various topics of focus, utilizing text messaging, microsite, and mailings. Direct messages with personalized checklists for each visit, are available to enrollees who are less likely to comply based on predictive modeling.
- ABHLA has executed IVR (interactive voice recognition) call campaigns to outreach to enrollees regarding the importance of receipt of provider visits and screenings. IVR calls target Aetna Medicaid enrollees identified as being non-compliant with receipt of a provider visit during the specified HEDIS timeframe.
- Gaps in Care reports are monitored, at minimum, quarterly and will be run to withdraw specific enrollees for community health workers outreach, to increase compliance and meet goals set on HEDIS measures.
- Community health workers will reach out to enrollees via live calls. The targeted group will be pregnant or post-partum enrollees with gaps in care for not having received prenatal services or postpartum services within the recommended timeframes, and to enrollees qualifying for MIECHV programs to facilitate enrollment into Nurse Family Partnership and/or Parents as Teachers programs (NFP/PAT).
- At the conclusion of each enrollee services call, the enrollee service representative checks for gaps in care and offers the enrollee assistance in finding a provider and scheduling and appointment or referring to care management as needed.
- An ABHLA care management representative who specializes in maternal health and/or pediatrics, physical health, behavioral health, trauma-informed care motivational interviewing, and Mental Health First Aid engages enrollees and guides activities based on identified needs and structured to support the highest degree of self-management.
- Ted E. Bear MD Club offers incentive gift cards for completing provider visits and screenings, as well as membership credits for afterschool programs and swim lessons. This will be discontinued in year 2023.
- ABH-LA collaborates with community partners including WIC/Healthy Start referrals, BFH, MIECVH, NFP/PAT referrals and participation in the March of Dimes Louisiana state work group.
- ABH-LA is looking forward to collaborating with school-based health systems throughout the state.
- ABH-LA offers value-based incentives to enrollees, such as the Welcome to Pregnancy Packet with Baby Book, the New Mom Welcome Kit with diaper bag, baby supplies and pregnancy education, and the Baby Bundle with diapers and postpartum education.
- ABH-LA is partnering with the Birthmark Doula Collective, a nationally renowned, racially-diverse, doula-owned collaborative and birth justice organization supporting

- and advocating for pregnant and parenting women and their families to provide doula services in Louisiana. We are creating a value-added benefit to pay for doula services: three prenatal visits, delivery support, and two or three postnatal doula visits.
- ABH-LA is researching Sista Midwife Productions surrounding doula services, prenatal and postpartum services, perinatal community health workers, and geographic area covered.
 - ABH-LA is researching Reaching Our Sisters Everywhere to enhance, encourage, support, promote, and protect breastfeeding by working to reduce breastfeeding disparities among African American women through mentoring, training, breastfeeding support groups, social support, outreach, education, legislation, health policies, and social marketing.
 - Virtual baby showers occur once a month and cover a variety of topics: preventing pregnancy, pregnancy, postpartum and newborn care, community resources and NFP/PAT referrals. These baby showers are also open to the public.
 - Community outreach investment with PALs (Pacifier Activated Lullaby) is in partnership with Franciscan Missionaries of Our Lady Health System.
 - We are partnered with the BREATHE program, which provides free and personalized education encompassing both the clinical and environmental management of asthma. This program provides:
 - Health education
 - Virtual home visits
 - We are partnered with Volunteers of America utilizing their CHW program to help increase colorectal cancer screenings and educate our enrollees on the importance of COL cancer screenings as well set-up appointments for them if necessary.
- Healthy Blue
 - Member resources on Healthy Blue website, via the Pregnancy and Women’s Health Section, includes, “Teens: Taking Care of Your Health Planning for the Future.” This includes critical health information for teens including general health, smoking, healthy relationships, and birth control.
 - Targeted provider education by an OB practice consultant to engage providers in best practices surrounding teen pregnancy and the importance of STI screenings.
 - Case management services, which includes maternal health case management and member support for screening of risk factors for early identification of pregnancy to ensure members and babies are healthy throughout the pregnancy. Family Planning Kits are also provided following identification of pregnancy.
 - OB incentive program for STI screenings
 - Member incentives for STI screenings ages 16 and older
 - Community support and events: 1) Fourth Annual Total Teen Takeover (virtual teen summit scheduled August 8, 2020), 2) Healthy improvement is a central theme — healthy minds, healthy bodies, healthy directions. Several workshops are offered

centering on self-love, positive decision-making, and teen concerns are addressed in a teen town hall meeting. 3) Healthy Blue baby showers (statewide), Community Birth Companion (Opelousas).

- Family Roads of Baton Rouge
- Partnerships with Nurse Family Partnerships
- March of Dimes
- Louisiana Healthcare Connections, Inc. (LHCC)
 - LHCC conducts telephone, virtual, and recorded webinar education with primary care, OBs, and other relevant providers addressing healthcare topics/issues for all ages and provide age-appropriate resource materials for pregnancy (prenatal and postpartum care), hepatitis C screening and treatment, HPV immunization/screenings/education, Chlamydia screening, HIV, and more.
 - EPSDT Coordinator reaches out to providers to conduct regular and reoccurring EPSDT education, which includes Chlamydia screenings and HPV vaccines.
 - Care management refers members to Nurse Family Partnership during pregnancy. Nurse Family Partnership follows the member up to two years after the child is born as well as discusses family planning.
 - Care management also refers members to the Nurse Family Partnership "sister" program, Parents as Teachers. Members do not have to be pregnant but have a child under the age of 5.
 - Pregnant members enrolled in OB Care Management are educated on sexual health including STIs and family planning.
 - LHCC's member and provider website provides direct access to health education resource materials through the Krames Library. A variety of STI topics are included on LHCC member and provider website.
 - LHCC conducts direct outreach campaigns including HPV mailers, live direct member calls and IVR calls to which are triggered by the receipt of first HPV vaccine. Calls are designed to remind parents to finish the remaining doses for vaccines on schedule.
 - Provider incentives for PPC prenatal and postpartum care, HIV screening and appropriate treatment, Cervical Cancer screening, Immunizations for Adolescents (including HPV), and STI screening which includes Chlamydia, Syphilis, Hepatitis, Gonorrhea, and Herpes.
 - Member rewards for annual health screenings, STI screenings, Cervical Cancer Screening, Immunizations for Adolescents (including HPV), PPC prenatal and postpartum care, as well as Completion of notification of pregnancy.
 - Care Management reviews a daily report identifying members newly pregnant. High risk members receive regular periodic educational mailings that encourage a healthy lifestyle for pregnancy. OBGYN referrals are provided with information on prenatal and postpartum care.
 - Start Smart Louisiana Pregnancy APP for Member resources. The app provides resources to member by encouraging them to answer a short pregnancy survey, click to call rides to appointment, 24/7 click-to-call nurse advice, to-do list for each

- trimester of pregnancy, weigh, diaper and feeding tackers, direct connection to help plan recourses, and more.
- Member welcome packets, social media, and web portal content all encourage members to report pregnancy. Care Management also identifies members who are potentially pregnant through claims and will outreach to them to complete the NOP and offer resources, education, and care coordination as needed.
- UnitedHealthcare Community Plan of Louisiana (UHC)
 - UHC partnered with a community organization in Caddo Parish to address teen sexual health through in-person discussions with girls ages 10 to 17 on topics such as basic anatomy, emotional aspects of sexual health, STIs, contraception, empowerment, and consent.
 - UHC partnered with an organization in Rapides Parish to address STIs, violence, and pregnancy prevention in local schools.
 - UHC sponsors and coordinates outreach efforts including community baby showers and other events that support teens, women, and families across the state.
 - UHC's Healthy First Steps case management program provides outreach to pregnant and postpartum members to ensure that they are connected to providers and community resources, and provides education on pregnancy, maternal health, wellness, and family planning for up to one year after delivery.
 - The Healthy First Steps Rewards program provides incentives to members for attending prenatal and postpartum appointments. The website also provides education and resources for members.
 - UHC collaborates and partners with programs such as Nurse Family Partnership, Healthy Start, March of Dimes, FQHCs across the state, and other entities that provide preventative services, support, resources, and education to improve access to care for our members.

4.0 PROGRAMS AVAILABLE THROUGH THE DEPARTMENT OF CHILDREN & FAMILY SERVICES

1. Alternatives to Abortion

With funding from TANF, DCFS has 12 service providers who provide alternatives to abortion for all ages. These service providers are able to offer services statewide in all regions around the state. Contractors are required to provide intervention services including crisis intervention, counseling, mentoring, support services, prenatal care information, and education about the use of abstinence to avoid unplanned and out-of-wedlock pregnancies. Additionally, contractors facilitate information on referrals regarding healthy childbirth, adoption, and parenting to help ensure healthy and full-term pregnancies as an alternative to abortion. In SFY 21, 2,409 people were served.

2. Not a #Number

Not a #Number is an interactive, five-module prevention curriculum designed to teach youth how to protect themselves from human trafficking and exploitation through information, critical thinking, and skill development. Not a #Number uses a holistic approach focusing on respect, empathy, and individual vulnerabilities. The nine independent living providers around the state were trained in the curriculum and are currently providing it to youth ages 14 to 21. Not a #Number is a curriculum that can only be offered in person and due to COVID-19 participation this SFY was not as high as it normally was prior to the pandemic. A total of 65 youth completed the curriculum.

Through open conversations, engaging activities, the use of media, and opportunities for self-disclosure, participants will:

- Raise their awareness of what constitutes human trafficking and exploitation
- Learn how to recognize recruitment tactics and understanding vulnerabilities
- Challenge harmful stereotypes and societal attitudes
- Identify healthy support systems
- Develop skills to safely navigate potential and existing exploitative situations

3. Life Skills Reimagined — Love and Sex

Life Skills Reimagined is a learner-centric, online platform that offers a course on Love and Sex. All youth between the ages of 14 and 21 participating in independent living programs or in extended foster care have access to the curriculum. There were 90 youth who completed the course in SFY 21-22. Love and Sex covers the below topics:

- Sex — Now or Later?
- Three Reasons to Consider Waiting
- Your Boundaries
- Are You Ready for Sex?
- Preparing for Sex
- Birth Control
- Sexual Transmitted Diseases (STDs)

5.0 PROGRAMS AVAILABLE THROUGH THE DEPARTMENT OF EDUCATION

The following programs and initiatives are in place at the Louisiana Department of Education (LDOE) addressing teen pregnancy and the spread of HIV and other sexually transmitted diseases.

1. YRBS and School Health Profiles

The CDC funds LDOE to assess the effectiveness of sexual health education programs using the Youth Risk Behavior Surveillance System (YRBS) and the School Health Profiles Survey (Profiles). In the current YRBS funding cycle, Louisiana was only eligible for Strategy 1 funding (School-Based

Surveillance). By law, Louisiana is unable to ask questions regarding sexual risk behaviors and is therefore ineligible to apply for Strategy 2 funding (School-Based HIV/STD Prevention).

LDOE biennially implements the YRBS, a national school-based survey of high school students, to monitor priority high-risk behaviors among youth. The survey is administered to randomly-selected high schools. Students are asked, but not required, to complete the survey. The survey focuses on priority risk behaviors including alcohol and other drug use, obesity, physical activity, mental health, tobacco, injury/accident prevention, and violence and bullying. Results from the YRBS are used to guide programs and policies that support health and set and track progress toward achieving school health and health promotion program goals.

A second survey, Profiles, is a school personnel survey that assesses school health policies and practices. Profiles, also conducted biennially, is used to assess school health policies and practices in states, large urban school districts, territories, and tribal governments. The survey monitors the status of school health education requirements and content, physical education and physical activity, school health policies related to HIV infection/AIDS, tobacco-use prevention, and nutrition, asthma management activities, family and community involvement in school health programs, and school health coordination.

Data from both surveys is shared with schools and school districts to inform decision-making regarding programs and policies related to student behavior and health.

2. Health Education Standards

Louisiana's Health Education Content Standards, which are contained in BESE Bulletin 103, offer a coherent vision of what it means to be health literate. Health literacy is the capacity of an individual to obtain, interpret, and comprehend basic health information and services and the competence to use such information and services in ways that are health enhancing for the individual, family, and community. These standards identify the knowledge and skills essential to the development of health literacy. In addition, the standards provide a guide for enhancing and continuing education of teachers and as a blueprint for local curriculum developers. The standards are broad enough to allow flexibility according to strengths or challenges identified in each community and to make them culturally relevant.

A fundamental mission of schools is the promotion of healthy behaviors by providing individuals with knowledge, abilities, and skills to become healthy and productive citizens. Optimal health leads to effective living, learning, and enjoyment of life for all individuals. It is also an asset for students facing intense competition, peer pressure, stress, and a full program of intellectual and physical activities. The primary purpose of health education is the translation and integration of health concepts into personal behavior. Alcohol, tobacco, and other drug use as well as low levels of physical activity, poor nutrition, injuries, teenage pregnancy, STIs, and stress contribute to a lower health status and result in loss of work and school time.

Health education in schools is essential to enable students to acquire the knowledge and skills needed to practice good health. Implementation of planned, sequential health curricula has

been linked to changes in students' attitudes and behaviors. Poor health habits often carry over into adulthood. Students who follow good health habits are more alert, perform at a higher level, are absent less, and have greater self-esteem.

Traditionally, the health education curriculum has been organized around health content topic areas. Today, greater emphasis is placed on health and wellness. The Health Education Content Standards are an ideal means for providing guidelines for curriculum addressing high-risk behaviors and healthy lifestyles.

The CDC has identified six risk behaviors that are incorporated in the organization of the Health Education Content Standards:

- Tobacco use
- Sedentary lifestyle/poor physical activity pattern
- Alcohol and drug abuse
- Unhealthy dietary behaviors
- Behaviors that result in accidents and injuries
- Sexual behaviors that result in STIs and unintended pregnancy

The Louisiana Health Education Content Standards framework is designed to guide the process of reforming health education in this state. It provides the following:

- A framework for developing a comprehensive K-12 health education curriculum
- A catalyst for insightful discussion of the fundamental nature of health education
- A guide for evaluating progress and achieving health education benchmarks among the students of Louisiana
- A vision of health education for the state
- A tool to enable local districts, schools, and educators to grasp the nature, purpose, and role of health education

6.0 RECOMMENDATIONS

- LDH and DCFS recommend that the legislature considers the inclusion of the Youth Risk Behavior Survey Sexual Behavior questions. Adding these questions to inform our programming will allow the development of evidence-based goals specific to Louisiana, rather than relying on national information, as the Louisiana student population may not mirror the average student in the United States. Asking these questions will also open Louisiana up to additional funding.
- A partnership between the LDOE, DCFS, and LDH is recommended to develop specific goals regarding teen pregnancy prevention through evidence-based interventions and education in supporting abstinence, delaying of sexual debut, and risk reduction education for STIs, as well as improved contraceptive counseling and delivery.
- Community collaboration between families, faith-based organizations, non-profit organizations, and government entities is encouraged to address the rising STI rates in

Louisiana through faith-based and school-based programs. The inclusion of peer education and counseling is especially successful in addressing rising STI rates.

- DCFS, LDOE, and LDH should collaborate to focus on youth ages 11 to 18 who are in foster care, juvenile justice facilities, and those who live in geographical areas with high teen birth rates and STI/HIV prevalence rates using evidence-based interventions with adult female and male counselors. Examples of some recommended, effective, evidence-based interventions:
 - Fathers Raising Responsible Men is a curriculum that is delivered to the fathers (parents) of adolescent males to encourage delay of sexual activity and prevent teenage pregnancy.
 - The Adult Identity Mentoring (AIM) curriculum is a group level intervention for African American and Latino youth ages 11 to 14. AIM encourages young people to envision a positive future self and discuss risk behaviors that could be a barrier to successful adulthood.
 - The Becoming a Responsible Teen (BART) curriculum is a group-level, peer-led, social skills training intervention aimed at reducing STD/HIV risk behavior among African American teenage boys and girls ages 14 to 18. BART emphasizes ethnic and gender pride, healthy relationships, and assertive communication, and enhances awareness of STD/HIV risk reduction strategies with the goal of preventing teen pregnancies.
 - The Wise Guys curriculum is a group-level, male-oriented teen pregnancy prevention intervention aimed at reducing teen pregnancy and STD/HIV risk behaviors among adolescent males ages 11 to 18.