

# MOAPPP Monitor

www.moapp.org

Winter 2007

MOAPPP's mission is to develop and strengthen policies and programs that promote adolescent sexual health, prevent adolescent pregnancy and support adolescent parents.

## Comprehensive Sexuality Education: Covering All the Bases

Since 1990, the teen pregnancy rate in Minnesota has decreased 37%, resulting in at least 1,800 fewer teen pregnancies (MDH, 2006). New research attributes roughly 85% of this decline to increased contraceptive use by sexually active teens, and less than 15% to abstinence from sexual intercourse (Santelli, 2007).

With so many young people involved in making important life decisions, what can we do to support their decision-making? How can we encourage teens to delay sexual activity? How can we support them in using contraception when they are sexually active?

MOAPPP believes that teen pregnancy prevention must be addressed with multifaceted efforts, including comprehensive sexuality education. Comprehensive sexuality education (CSE) is more than learning the nuts and bolts of reproduction and anatomy. CSE stresses abstinence and includes age-appropriate, medically accurate information about contraception. Messages introduce information on relationships, decision-making, assertiveness and skill building to resist pressures. CSE is developmentally appropriate for each age group throughout the educational experience.

Yet, controversy continues to swirl around the content of sexuality education programs: where sexuality education should be taught, which topics to cover, when to cover them and which values to emphasize.

### What Else is Being Taught?

In contrast to CSE, proponents of abstinence-only or abstinence-only-until-marriage programs promote sexual abstinence until marriage as the only truly healthy and correct choice for adolescents (Abstinence Clearinghouse and Kirby, 2001). These programs teach self-control, not

birth control, and will not condone condom education or distribution (Abstinence Clearinghouse). Federal funding for abstinence-only-until-marriage programs — **more than \$218 million dollars this year alone** — requires that they teach that “sexual activity outside of marriage is likely to have harmful psychological and physical effects” and that “a monogamous married relationship is the standard for sexual activity” (Kaiser, 2000). Programs may include activities that teach refusal skills to avoid sexual activity and build character as well as lessons that stress sex outside of “wedlock” is shameful and damaging (Abstinence Clearinghouse).

### What Does the Research Say?

In a field that is subject to controversy and conflict, it is fortunate that there is ample research to guide selection of effective curricula and program models. Recent research has identified 17 common characteristics of effective sexuality and HIV education programs (see inside for more details).

#### *Comprehensive Sexuality Education Works*

- CSE has demonstrated effectiveness at assisting young people to delay sexual activity, reduce the frequency of sex, reduce the number of sexual partners and increase the use of contraception (Kirby, 2001).
- CSE programs that discuss both abstinence and contraception, including condoms, do not increase sexual activity among teens (Kirby, 2001).

#### *No Evidence that Abstinence-Only-Until-Marriage Programs Work*

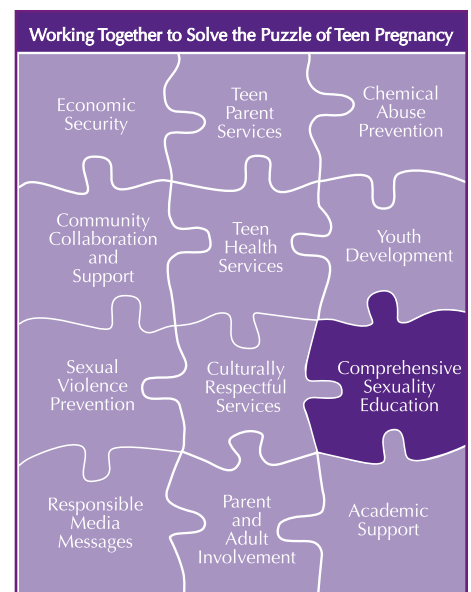
There is still no scientifically sound research to support the continued emphasis on abstinence-only-until-marriage programs. In fact, a recent analysis of federally funded abstinence-only curricula found that more than 80% contained false, misleading, or distorted information about reproductive health.

Specifically, they conveyed:

- False information about the effectiveness of contraceptives;
- False information about the risks of abortion;
- Religious beliefs as scientific fact;
- Stereotypes about boys and girls as scientific fact; and
- Medical and scientific errors of fact (Special Investigations Division, 2004).

In a bold statement following this report, the Society for Adolescent Medicine recently declared “abstinence-only programs threaten fundamental human rights to health, information, and life” (Santelli, 2006 and Society for Adolescent Medicine, 2006).

MOAPPP also believes that adolescents have a fundamental human right to accurate and effective sexual health information. Young people want and deserve our support in advancing their ability to make healthy decisions. To find out more about what MOAPPP does to support effective sexuality education, visit [www.moapp.org](http://www.moapp.org).



MOAPPP's Teen Pregnancy Puzzle illustrates the complexity of the issue and the need for comprehensive solutions based on research.

## DIRECTOR'S NOTES



Dear Friends,

Here in the Midwest, we have hunkered down for another winter season, such as it is. We are experiencing record high temperatures and very little snow - more of an Ohio winter than a Minnesota one. But, even if we're playing host to another state's winter weather, the calendar reminds us that we're in the middle of another Minnesota school year.

The school environment is such an important setting for seeing MOAPPP's mission - to promote adolescent sexual health, prevent adolescent pregnancy and support adolescent parents - in action. One of the most critical tools that schools can use in this arena is comprehensive sexuality education.

This issue of the MOAPPP Monitor focuses on comprehensive sexuality education as an important piece of the Teen Pregnancy Puzzle. Articles describe the empirical foundation for why we support its use, one method we use to promote it, and our ongoing efforts to ensure that all Minnesota youth have access to it.

Here, at the start of 2007, we continue to face fear mongering and muddled facts from those who believe that keeping information from adolescents is the best way to keep adolescents safe. Some adults refuse to believe that young people are capable of making mature decisions about their behavior when armed with accurate information. Thankfully, we know that there are school superintendents, principals and educators willing to stand up to that vocal minority and carry out their mission - to educate the youth of Minnesota.

In the coming months, look to MOAPPP for a report on the status of sexuality education in Minnesota public schools. We want this report to be a launching pad for action that brings comprehensive sexuality education to every corner of the state. Additionally, we plan to further promote our sexuality education resource reviews, and provide support to those school districts ready to lead the rest in providing quality information to their students.

To health and to hope for 2007.

Sincerely,

Brigid Riley  
Executive Director

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The Minnesota Organization on Adolescent Pregnancy, Prevention and Parenting, a non-profit organization, is composed of individuals and organizations in Minnesota that work to strengthen policies and programs related to adolescent pregnancy, prevention and parenting in Minnesota.

# Comprehensive Sexuality Education: Where Public Health, Public Opinion and Public Policy Meet

## Public Health Research

Comprehensive sexuality education refers to curricula and programs that include information about abstinence and about contraception and sexually transmitted infection prevention.

## COMPREHENSIVE SEXUALITY EDUCATION

- Stresses abstinence and includes medically accurate information about contraception and disease prevention
- Introduces information on relationships, decision-making, assertiveness and skill building to resist social/peer pressure
- Is developmentally appropriate for all ages throughout the educational experience



In 2001, sexuality education researcher, Douglas Kirby, reported that “effective programs shared two common attributes: (1) being clearly focused on sexual behavior and contraceptive use, and (2) delivering a clear message about abstaining from sex as the safest choice for teens and using protection against STDs and pregnancy if a teen is sexually active” (Kirby, *Emerging Answers*, 2001). He found that programs incorporating these components were successful in achieving positive behavioral outcomes among teenagers, including delayed initiation of sex, a reduction in the number of sexual partners, a reduction in the frequency of sex, a reduction in the incidence of unprotected intercourse and/or an increase in the use of condoms and contraception among sexually active teens (Kirby, 2001, Kirby et. al., 2005 Alford, 2003). Well-designed and well-delivered sexuality education programs led to positive long-term public health outcomes including lower rates of sexually transmitted infection and/or unintended pregnancy (Kirby, 2001, Kirby et. al., 2005 Alford, 2003).

## Public Opinion

Adults recognize that youth are confronted with complex life experiences, and support young people’s access to accurate information about sexual health topics. While parents are still their children’s primary sexuality educators, adults WANT schools to provide quality sexuality education. As shown in MOAPPP’s 2000 Minnesota Sexuality Education Survey:

- 7 out of 10 believe that sexuality education should include both abstinence and contraception;
- 9 out of 10 support comprehensive sexuality education in high schools;
- 8 out of 10 support comprehensive sexuality education in junior high schools.

Many other statistically significant public opinion surveys confirm these findings.

## Public Policy

If the public health research is clear, and if public opinion is so strong, then why is public policy so far behind? There are still NO federal or state funds that support comprehensive sexuality education. And yet, the federal government continues to finance abstinence-only-until-marriage programs at an unrelenting pace — another \$218 million was allocated this fiscal year, on top of the \$1 billion in federal and state dollars spent over the last decade.

In Minnesota, state statute requires that public school districts offer sexuality education, but the statute is somewhat confusing in that it requires schools to have a “comprehensive, technically accurate and updated sexual health curriculum” — which is good — but goes on to restrict the curricula offerings to those that “include(s) helping students to abstain from sexual activity until marriage” — which is limiting. The result is varying programs from district to district, school to school and classroom to classroom.

## Sexuality Education for Life Coalition

The Sexuality Education for Life Coalition, co-convened by MOAPPP and the Minnesota AIDS Project, advocates for research-proven comprehensive sexuality education as a standard for all public schools. This standard would ensure that students receive age appropriate, medically accurate sexual health information, preparing them to take personal responsibility for important life decisions. By writing comprehensive sexuality education into state statute, Minnesota can create a model public policy - one that is supported by public health research and public opinion.

## SUPPORT COMPREHENSIVE SEXUALITY EDUCATION.

Join the Sex Ed for Life Coalition at [www.sexedforlife.org](http://www.sexedforlife.org) or by calling 651-644-1447 x12

## Sexuality Education Resource

Sitting in a classroom, a community center or a youth center is a young person who will soon be introduced, possibly for the first time, to a big topic: "SEX." Ever question how health teachers, youth workers or other educators of young people make a decision about what curricula to use? How do they know what works? What criteria are the curricula selections based on? Where can educators go to find material comprehensive in scope around healthy sexuality, suitable for their audience, amendable to the cultural norms of their community?

Choosing the appropriate resources to suit an intended audience can be a difficult task. Questions such as why one curriculum works and another curriculum fails, and how much expertise is needed to obtain good results, along with a barrage of other questions can hinder the process of choosing the best resource. MOAPPP assists educators in their search with a valuable resource: Minnesota Sexuality Education Resource Review Panel (MSERRP).

MSERRP was created to ensure that high quality HIV prevention and sexuality education materials are purchased and used by schools, public agencies and community organizations throughout Minnesota. The purpose of the panel is to review and recommend sexuality education and HIV prevention curricula and resources, using specific criteria based on current research and best practice. The panel consists of 30 members with expertise in sexuality education and HIV prevention, and includes teachers, public health professionals, health educators, youth workers and religious leaders. Although panel members represent a diversity of community-based and statewide organizations, each member supports **comprehensive** sexuality education as the most effective approach to educating youth and families about healthy sexuality and HIV prevention.

MSERRP convenes on a quarterly basis and panelists receive materials to review in advance of each meeting. Through large- and small-group discussion, panelists assess the resources based on a 10-criterion scale. Individual assessments are compiled into

MSERRP was created to ensure that high quality HIV prevention and sexuality education materials are purchased and used by schools, public agencies and community organizations throughout Minnesota.



comprehensive reviews that detail the strengths and limitations of the materials and give the resources ratings on each criterion. Reviews are distributed through a variety of sources including the MOAPPP website and MOAPPP quarterly newsletter.

In the past five years, 78 resources have been reviewed, with 62 recommended by the panel. One recent highly recommended resource was "*The Talk: An Intercourse on Coming of Age*," an educational film and discussion guide created by the Youth Performance Company. The film and accompanying discussion guide examine a broad range of topics including: body image, puberty, sexual decision-making, condom use and sexual pressure. It is comprehensive in scope and offers a humorous and engaging way for youth and adults to start having "the talk." For access to this review in its entirety, a complete list of other reviewed resources (curricula and videos), and a complete description of the review process, visit MOAPPP's website at [www.moappp.org](http://www.moappp.org).

MSERRP is coordinated by MOAPPP and is supported by the Minnesota Department of Education, Coordinated School Health. If you have any questions, please call or e-mail Jocelyn Broyles at MOAPPP, 651-644-1447 x19, [jocelyn@moappp.org](mailto:jocelyn@moappp.org), or Kathy Brothen at the Department of Education, 651-582-8842, [kathy.brothen@state.mn.us](mailto:kathy.brothen@state.mn.us)



### TWO MSERRP HIGHLY RECOMMENDED COMPREHENSIVE SEXUALITY CURRICULA IN 2006

- \* *Our Whole Lives: Sexuality Education for Grades 10 - 12.* Unitarian Universalist Association.
- \* *Sex Ed 101: A Collection of Sex Education Lessons.* The Center for Family Life Education, Planned Parenthood of Greater Northern New Jersey, Inc.

For more information on these and other MSERRP recommended sexuality education materials, please visit [www.moappp.org/resources/curriculum\\_review.html](http://www.moappp.org/resources/curriculum_review.html)

## SAVE THE DATE

MOAPPP's  
16th Annual  
Conference

May 3-4, 2007

Earle Brown  
Heritage Center,  
Brooklyn Center,  
MinnesotaConference brochures  
will be in the mail and on  
the MOAPPP website in  
late February, 2007.**BROADENING OUR PERSPECTIVE**  
*refining our approach*

The MOAPPP Conference is the annual gathering of Minnesota professionals committed to teen pregnancy prevention and support for pregnant and parenting teens. Join more than 400 colleagues for two days of dynamic speakers, challenging workshops and countless opportunities for networking and conversation.

Below is a sample of our speakers from across the state and nation.

- **Kathryn Edin**, PhD, University of Pennsylvania, Philadelphia, PA  
"Promises I Can Keep: Why Poor Women Choose Motherhood Before Marriage"
- **Lawrence Wallack**, DrPH, Portland State University, Portland, OR  
"Framing the Issues We Care About"
- **Verna Cornelia Price**, J. Cameron and Associates, Minneapolis, MN  
"The Power of You: Creating and Sustaining Positive Change"
- **Rick Brown**, Wise Guys, Greensboro, NC  
"What's Up With Guys? Sexual Decision-Making Issues for Teen Males"
- **Cordelia Anderson**, Sensibilities, Inc., Minneapolis, MN  
"Countering Normalization of Sexual Harm: Strategies for Teen Pregnancy Prevention"
- **Monica Rodriguez**, SIECUS, Washington, D.C.  
"What's Good: Sexuality Education and Youth Culture"

## 17

**Characteristics of Effective Curriculum-Based Pregnancy, STI and HIV Prevention Programs for Young Adults**

In 2006, researchers from ETR Associates published a report titled, *Sex and HIV Education Programs for Youth: Their Impact and Important Characteristics*. This report identifies 17 characteristics of programs found to be effective in changing behaviors that lead to STIs, HIV and unintended pregnancy among young people. Listed below are the 17 characteristics, divided into three categories. The full report can be found at <http://etr.org/recapp/programs/SEXHIVedProgs.pdf>.

**CATEGORY ONE: CHARACTERISTICS OF CURRICULUM DEVELOPMENT**

1. Involved multiple people with different backgrounds to develop the curriculum
2. Assessed relevant needs and assets of a targeted group
3. Used a logic model approach to develop the curriculum
4. Designed activities consistent with community values and available resources
5. Pilot-tested the program

**CATEGORY TWO: CHARACTERISTICS OF CURRICULUM CONTENT**

6. Focused clearly on at least one of three health goals
7. Focused narrowly on specific behaviors leading to the health goals
8. Addressed multiple sexual psychosocial risk and protective factors

9. Created a safe social environment for youth to participate
10. Included multiple activities to change targeted risk and protective factors
11. Employed instructionally sound teaching methods
12. Employed appropriate activities, methods and messages
13. Covered topics in a logical sequence

**CATEGORY THREE: CHARACTERISTICS OF CURRICULUM IMPLEMENTATION**

14. Secured at least minimal support from appropriate authorities
15. Selected educators with desired characteristics, trained them and supervised them
16. If needed, implemented activities to recruit and retain youth
17. Implemented virtually all activities with reasonable fidelity

## Come See Who We Really Are

### ADOLESCENT parent network

“Having a baby changes everything but it doesn’t mean you have to give up on your dreams” says author Deborah Davis in *You Look*

*too Young to be a Mom*<sup>1</sup>. In 2004, there were 6,800 births to 15-19-year-olds in Minnesota. These young mothers face the daunting and often competing demands of simultaneously being parents, students, workers and teenagers. The media are filled with stories of teen parents overwhelmed by the task, who have dropped out of school and are “costing” taxpayers money. There are few stories about competent young parents or the programs that have made a difference in their lives. Though not always recognized, there are daily success stories in Minnesota — young mothers, fathers and children excelling and thriving, working hard to beat the odds.

One story that needs telling is of 18-year-old Lateicha Tenhoff, a soon-to-be graduate of the Teen Pregnancy Program (TPP) at Anoka-Hennepin School District and mother of La’Myjah, a spunky, bright-eyed 18-month-old. You don’t need to spend much time with Lateicha to know she is a young woman bound for great things. Though becoming a mom at 16, giving birth prematurely at 25 weeks and spending the summer visiting her daughter in the hospital were not part of her plan, she is creating a life story filled with new priorities, proud moments and major accomplishments.

Lateicha graduates in March, 2007. She will spend next semester earning a nursing assistant certificate and will begin college next fall to become a registered nurse. Lateicha has big dreams for herself and La’Myjah - graduating college, living a better life, and in the distant future, having another child. Though independent and self directed, Lateicha attributes much of her success to her supportive family and friends, and to her experience at TPP. She lives with her grandparents; relies on friends to listen and let her be a teenager...sometimes; and flourishes in a flexible school program that offers small classes, on-site childcare, access to public health nurses and connections to community resources.

Lateicha offers sage advice to other young parents: “Don’t give up and don’t live up to the negative stereotypes people try to put on you. You don’t have to become that; you can be much better than that.” At the same time, she challenges the rest of us to recognize that, “we aren’t bad people because we had babies early. We can do a lot by ourselves - but not everything, because we aren’t supermen. Come see who we really are; come be with us, work with us so we are not just another statistic, but real people.”

Research and experience tell us we can have many more stories like Lateicha’s. Given the proper programs and services, young mothers and fathers can finish high school, become self sufficient, be effective parents and raise children who experience healthy growth and development. Young parents have a big job to do, and we have a responsibility to encourage their success.

“(I) used to be a trouble maker but I shy away from that now. I try to stay away from conflicts. I have to be a role model now - my daughter sees and copies everything I do.”  
Lateicha, age 18



The MOAPPP website has a variety of new resources for providers of adolescent parent services:

- The newly updated Minnesota Adolescent Parent Network Resource Directory, <http://www.moappp.org/apn/search.php>, a web-based guide to adolescent parent programs and services. To add your program to the directory, contact Marilyn Colby Rivkin at [marilyn@moappp.org](mailto:marilyn@moappp.org).
- Updated fact sheets with links to additional resources and information.
- Advocacy information and action alerts.
- Links to the latest publications and research.

#### Citations:

1. Davis, Deborah, ed. (2004). *You look too young to be a mom*. New York: Penguin Group (USA) Inc.

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## RESOURCES

### **Advocates for Youth**

Advocates for Youth provides information, training and strategic assistance to youth-serving organizations, policy makers, youth activists, and the media in the United States and the developing world.

[www.advocatesforyouth.org](http://www.advocatesforyouth.org)

### **ETR - Resource Center for Adolescent Pregnancy Prevention**

ReCAPP provides practical tools and information to effectively reduce sexual risk-taking behaviors. Teachers and health educators will find up-to-date, evaluated programming materials for their work with teens, including a listing of evidence-based curriculum.

[www.etr.org/recapp](http://www.etr.org/recapp)

### **Guttmacher Institute**

The Guttmacher Institute focuses on sexual and reproductive health research, policy analysis and public education. *Sex education: Needs, programs and policies* brings together the latest research and analysis on sexuality education in the United States and its effectiveness in preventing unintended pregnancies and sexually transmitted infections (STIs) among teenagers. [www.guttmacher.org](http://www.guttmacher.org)

### **Kaiser Family Foundation**

Kaiser includes a focused youth and HIV/STIs project which includes national surveys on adolescent behaviors, research and resources. Kaiser daily and weekly e-mails provide current news and research on reproductive health.

[www.kff.org](http://www.kff.org)

### **Minnesota Departments of Education and Health - Coordinated School Health**

Assists school personnel and local public health providers in providing prevention and education services aimed at reducing the short- and long-term impact of negative health behaviors including sexuality and HIV/AIDS. Provides resources and trainings on evidence-based sexual health curriculum and youth behavior data with the Minnesota student survey. Direct questions to Kathy Brothen at the Minnesota Department of Education [kathy.brothen@state.mn.us](mailto:kathy.brothen@state.mn.us) or 651-582-8842 or Cara McNulty at the Minnesota Department of Health [cara.mculty@state.mn.us](mailto:cara.mculty@state.mn.us) or 651-201-5438.

### **National Campaign to Prevent Teen Pregnancy**

The campaign is a national clearinghouse on research and resources for teen pregnancy prevention including comprehensive sexuality education.

[www.teenpregnancy.org](http://www.teenpregnancy.org)

### **Sexuality Education for Life - MN**

A coalition of educational, religious, health, social service and advocacy organizations, as well as concerned individuals that promotes lifelong healthy sexuality by advocating for policies on comprehensive sexuality education and access to confidential health care services. Their website provides current advocacy updates, facts sheets and events.

[www.sexedforlife.org](http://www.sexedforlife.org)

### **Sexuality Information and Education Council of the United States**

SIECUS provides training, information and resources for educators, health professionals, parents and policy makers across the country to ensure that people of all ages, cultures and backgrounds receive high quality, comprehensive education about sexuality.

[www.siecus.org](http://www.siecus.org)

## MOAPPP Monitor

Newsletter of the Minnesota  
Organization on Adolescent  
Pregnancy, Prevention and Parenting

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Adolescent Pregnancy, Prevention and Parenting  
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