Young People in Alabama Focus On Sexual And Reproductive Health

Across the United States, young people are at risk for unintended pregnancy and sexually transmitted infections (STIs) including HIV. Due to structural barriers and policies that do not support young people's rights to honest, medically accurate information and services, Alabama's youth are likelier to experience pregnancy, HIV, AIDS, and other STI diagnoses than most young people in the United States. Comprehensive sexuality education, health equity, and access to contraception are more important than ever to the health of young people in the state.

ALABAMA'S YOUTH POPULATION: AN OVERVIEW

- According to the 2014 American Communities Survey, Alabama's population is disproportionately made up of people of color as compared to the United States as a whole, at 69.7 percent white, 26.7 percent African American, 1.3 percent Asian, 4.1 percent Hispanic or Latino, .7 percent American Indian, and .1 percent Native Hawaiian or Pacific Islander.¹
- As of 2010, there were 675,000 young people ages 15-24 living in Alabama, making up 14 percent of the state's population.²
- Between 2000 and 2010 the Hispanic/Latino population in Alabama grew by 144.8 percent. Only South Carolina saw more rapid growth in this category.³

SEXUAL HEALTH OUTCOMES IN ALABAMA: YOUNG PEOPLE HAVE HIGH RATES OF PREGNANCY, HIV, AND STIS

- In 2010, there were 62 pregnancies per 1,000 women age 15-19 - the 15th highest teen pregnancy rate in the United States. However, there were only 9 abortions per 1,000 women age 15-19, the 34nd highest rate in the U.S.⁴
- There were 9.4 HIV diagnoses for every 100,000 young people aged 13-19 in Alabama, almost 1.5 times the national rate.⁵ The rate of AIDS diagnoses among young people 13-19 was 1.5 per 100,000 – about equal to national rate.⁶ Rates of HIV and

AIDS diagnoses above the national average also exist for young people 20-24 – at 39.2 per 100,000 and 14.5 per 100,000 - were both double the national rate. Adolescents and young adults in Alabama are twice as likely to acquire HIV as the average Alabamian.

- In 2013, Alabama had the third highest rates of chlamydia and gonorrhea among young people age 15-19.9
- According to the Alabama Youth Risk Behavior Survey, in 2013 35.8 percent of high school students reported being currently sexually active, compared with 34 percent nationwide. 49.8 percent of high school students reported ever having sex, with 7 percent reporting having sex before age 13 and 17 percent reporting having sex with four or more partners during their lifetime all slightly higher rates than nationwide. 14.1 percent of high schoolers in Alabama had used no method to prevent pregnancy during the last time they had sexual intercourse, compared with 13.7 percent nationwide. 11

SOCIAL AND STRUCTURAL FACTORS PUT YOUTH OF COLOR AND LGBTQ YOUTH IN ALABAMA AT RISK

- Racial disparities in health outcomes for young people in Alabama are stark: Although African Americans make up 26.7 percent of Alabama's population, in 2011 42 percent of births to women under 20 were to black women.¹² In 2013, 78.6 percent of new HIV diagnoses among young people ages 15-29 were among Black/African American young people.¹³
- Disparities in barriers to accessing healthcare services, poverty, structural exclusion, and disadvantage all contribute to young people's ability to prevent unintended pregnancy, HIV, and STIs.
- Lesbian, gay, bisexual, transgender, and queer (LGBTQ) youth in Alabama are marginalized, increasing their risk of HIV, STIs, and other negative health outcomes: the National Youth Risk Behavior Survey found that 11 percent to 30 percent of gay and les-



An African American or Black young person has a higher risk of being diagnosed with HIV or STIs even when they have the same or fewer risk behaviors than a white young person.²³

Young people who receive complete, accurate, and culturally sensitive information about abstinence, condoms, and contraception are significantly less likely to experience teen pregnancy and significantly more likely to use condoms once sexually active.24

Across the country, there is broad popular support among parents and voters from all walks of life for providing comprehensive sexuality education in schools.²⁵

bian students and 12 percent to 25 percent of bisexual students surveyed did not go to school at least one day during the prior month because of safety concerns. These concerns put LGBTQ youth at greater risk for depression, substance use, and sexual behaviors that place them at risk for HIV and STIs. As a result, in Alabama the HIV epidemic in the state is disproportionately concentrated among men who have sex with men, with over 70 percent of new acquisitions among men in 2013 related to male to male sexual contact. 15

ALABAMA LAW MANDATES FAILED, MISLEADING ABSTINENCE-ONLY-UNTIL-MARRIAGE PROGRAMS

- Under Alabama law, schools are not required to offer sex education, but any sex ed program must teach that "[a]bstinence from sexual intercourse outside of lawful marriage is the expected social standard for unmarried school-age persons."
- Sex education must also emphasize that homosexuality "is not a lifestyle acceptable to the general public" and that homosexual conduct is a criminal offense.
- Recent research on abstinence-only programs found them ineffective, with no impact on reducing teen pregnancy, delaying sexual initiation, or reducing STIs. Recent research on comprehensive sexuality education has shown that young people who receive complete and accurate information about abstinence, condoms, and contraception were not more likely to acquire an STI, but were significantly less likely to be involved in teen pregnancy and were significantly more likely to use condoms once sexually active.¹⁸
- Although Alabama youth face higher rates of HIV diagnoses than the national average, 19.4 percent of high school students in 2013 had never learned about HIV or AIDS in school, compared with 14.7 percent of high school students nationwide.
- In Fiscal Year 2014 agencies and organizations in Alabama received a total of \$426,172 in Teen Pregnancy Prevention Program (TPPP) grants, \$65,000 in Department of Adolescent & Sexual Health grants, and \$930,096 Personal Responsibility Education Program (PREP) and Tribal Personal Responsibility Education Program grants, to help implement targeted programs that have more comprehensive approaches to sexual health education for certain groups of young people. ²⁰ That year, agencies and

organizations in Alabama also received \$858,380in Title V Abstinence-Only-Until-Marriage funding.²¹

CONCLUSION

Young people in Alabama are at serious risk for unintended pregnancy, HIV and STIs. Youth of color and LGBT youth are at even higher risk for negative sexual health outcomes. To address these risks, research shows that comprehensive sexuality education and access to contraceptive services can help young people protect their health and well-being.²² In addition to helping young people choose healthier behaviors, we must also dismantle barriers to health equity (including poverty, lack of insurance, and disparities in education) and support structural interventions that help allow all young people to build healthy lives.

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