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SOME MAINE FACTS – HIV & ADOLESCENTS

Maine has a low incidence of HIV infection compared to other states. However, a quarter of the young adults infected in Maine may have been infected in their adolescence. Sexually transmitted disease rates among adolescents have declined but young adolescent females continue to have higher rates, particularly of chlamydia. Maine has reduced its adolescent pregnancy rate to third in the country, but still has a high rate compared to European countries.

Out of our approximately 130 high schools that serve public school students, sixteen have health clinics. Most do not provide sexual health services – three do provide condoms. Maine adolescent females have the highest (by quite a margin) birth control pill use of any other state in the country. Thirty percent of high school females who are sexually active report birth control pill use (1997). Condom use has continued to increase as it has across the nation. Two-thirds of senior class males reported condom use at last intercourse in 1997. Condom use does, however, decline with age in high school, which may be caused by longer relationships and contraceptive pill use.

Maine's Family Planning Programs have been responsible for providing confidential reproductive health services to adolescents over the past twenty years. There has been a long history of state government support for sexuality education; however, there has been a lack of resources to provide local schools with incentives. Many schools do teach sexuality education in mandated health education (1/2 credit in high school) and many schools start at earlier grades. Maine is a local control state; so local school boards determine curricula content. Because of the existing health education mandate, we are one of the few states that did not mandate HIV education. Teachers report that there is not adequate time or resources or public commitment at the local school level to teach truly comprehensive sexuality education.

A plus is that Maine has no state level censorship of what schools can offer students. A number of schools have gone beyond what is primarily information and provide sexuality and HIV risk reduction skills education, plus provide condom availability. Gay, lesbian, bi-sexual, transgender and questioning youth issues have been incorporated into the Maine Department of Education's program since 1987. The department has been able to shape its HIV Prevention Education program on youth feedback, through focus groups, sexual behavioral surveys, as well as youth revised and evaluated HIV curricula.

We have made gains in the last decade. Maine is second highest in the country for the percent of schools that have a policy on confidentiality regarding students and staff who are HIV positive. Only one other state reports a higher level of schools reporting staff training on HIV infection.

Maine reports the highest percent of teachers teaching about the efficiency of condoms (85%) and the second highest teaching correct condom use (69%) –the state median was 43%. This data is from 1998.

~OVER~

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In an intensive evaluation of HIV prevention education at the 9/10th grade level in the spring of 1998, the following data was collected and reported by the Academy of Educational Development:

- 97% of the students reported refusal skills were covered in how to delay the onset of sexual intercourse**
- 77% of the students reported having practiced skills that delay the onset of sexual intercourse**
- 95% reported being taught how correctly use a condom (93% how to buy)**
- 95% reported skills covered in how to resist if someone wanted you to have sex without a condom**
- 94% reported skills covered in how to negotiate with partner about condoms if planning to have sexual intercourse**
- 25% reported practicing how to use a condom correctly in class**

This data represents the 53% of Maine high schools that have received researched, skill based HIV curricula training. These students were in schools where teachers teach the majority of the curriculum to fidelity.

Maine continues to make progress in supporting youth in making positive sexual health decisions. Access to free or low cost and confidential sexual health services is essential – Maine is very rural and services are far apart. Youth want caring, non-judgmental adults to listen to them and help them explore how they can manage the pressures and risks regarding sexual behaviors. Maine incorporates harm reduction messages around drug and alcohol use to ensure youth might be better able to protect themselves from HIV. Youth would like more opportunities to learn and explore relationship issues – what is love, how do I keep my relationship?

Young men who have sex with men are still at great risk for HIV infection. Targets of homophobia, they are often isolated. Maine does have a number of Outright support groups but still lacks equal protection under the Maine Human Rights Amendment. More efforts are needed to reach this group of adolescents. Some schools work hard to create a safe environment and provide inclusive sexuality education. Several schools have gay/straight student alliances.

A cadre of Maine educators and school personnel have used their energy and motivation to make real changes to assist young people with skills to help reduce their risk of HIV and other sexually transmitted diseases, as well as pregnancy. The challenge will be to increase the number of people committed to this effort, plus increase the breadth and depth of student focused responses to these unique health risks.