

The Honorable Tom Harkin
Chairman
Labor, Health and Human Services,
Education and Related Agencies
Appropriations Subcommittee
United States Senate
Washington, DC 20510

The Honorable Jerry Moran
Ranking Member
Labor, Health and Human Services,
Education and Related Agencies
Appropriations Subcommittee
United States Senate
Washington, DC 20510

The Honorable Jack Kingston
Chairman
Labor, Health and Human Services,
Education and Related Agencies
Appropriations Subcommittee
U.S. House of Representatives
Washington, DC 20515

The Honorable Rosa DeLauro
Ranking Member
Labor, Health and Human Services,
Education and Related Agencies
Appropriations Subcommittee
U.S. House of Representatives
Washington, DC 20515

April 26, 2013

Dear Chairmen Harkin and Kingston and Ranking Members Moran and DeLauro:

The undersigned 38 national organizations dedicated to the health and welfare of our nation's youth, respectfully request that you invest in programs in the Fiscal Year (FY) 2014 Labor-HHS-Education appropriations bill that provide our nation's young people with the medically accurate and age-appropriate education to make safe and healthy decisions and reduce their risk of unintended pregnancy, HIV, and other sexually transmitted infections (STIs). We urge you to fund the Teen Pregnancy Prevention Initiative (TPPI) at \$130 million, as well as \$8.5 million for evaluation of teen pregnancy prevention approaches; the Centers for Disease Control and Prevention's (CDC's) Division of Adolescent and School Health (DASH) at \$50 million; and eliminate funding for the competitive abstinence education grant program. Recognizing the constraints of the current federal budget, providing the resources to equip young people with the information and skills they need to make responsible decisions is vital not only to their health and well-being, but also for the overall health of our nation.

Recent data highlight the need for investing in these programs and comprehensive sex education. The U.S. continues to have one of the highest teen pregnancy rates in the industrialized world, with 725,000 young women between the ages of 15 and 19 becoming pregnant each year. While comprising only 25 percent of the sexually active population in the U.S., young people aged 15 – 24 contract about half of the 19 million annually contracted STDs. Additionally, young people account for one-in-four of the estimated 50,000 new HIV infections diagnosed each year, with young men who have sex with men accounting for 69 percent of the new HIV infections among young people aged 13 – 29. Every month, 1,000 young people acquire HIV in the U.S.

High rates of unintended teen pregnancy and STIs raise serious concerns and highlight the need for better sex education for our nation's young people. Research shows that well-designed and well-implemented HIV/STI/pregnancy prevention programs can decrease sexual risk behaviors among students, including delaying sexual intercourse, increasing condom or contraceptive use, reducing the number of partners, and decreasing the frequency of unprotected sex.

Strong evidence indicates that sex education programs that promote abstinence as well as the use of condoms do not increase sexual risk taking behavior. In addition, research has found that teens who report receiving comprehensive approaches to sex education are 50 percent less likely to experience an unintended pregnancy.

Preventing unintended pregnancy and STIs, including HIV, furthers achievement in meeting our nation's public health goals and is cost effective. According to the Guttmacher Institute, unintended pregnancy for all women in the U.S. costs taxpayers roughly \$11 billion each year. Were we to successfully prevent all of the nearly 20,000 annual new HIV infections among those under the age of 29, an astounding \$6.6 billion would be saved in lifetime medical costs. In these economic times, we must make strategic investments in effective and far-reaching programs.

We are pleased that the President's FY 2014 budget requested continued funding for pregnancy prevention and underlying risk behaviors through TPPI. This funding has been utilized to provide five-year cooperative agreements to more than 100 public and private entities nationwide that will administer evidence-based or promising programs that are medically accurate and age-appropriate to more than 800,000 young people over the life of the program. The requested \$130 million for TPPI would support these efforts and allow 100,000 more youth to receive the sex education and positive youth development programs they need to make safe and healthy decisions. This funding also address the need for further administration and technical assistance support that has continually decreased since the program's creation, most recently as a result of the sequester. In addition, the continuation of \$8.5 million for TPPI evaluation we request the Committee to fund is vital to further ongoing evaluation efforts and to expand the list of evidence-based programs available for preventing unintended teen pregnancy.

DASH is a unique source of support for HIV prevention efforts in our nation's schools. Just as schools are critical to preparing students academically and socially, they are also vital partners in helping young people learn to take responsibility for their health and adopt health-enhancing attitudes and behaviors that can last a lifetime. As a result of the sequester and a devastating 25 percent cut in FY 2012, DASH is currently funded at its lowest level in over ten years. For the first time in over a decade, however, more than 15% of students reported not being taught about AIDS or HIV in school. Rather than being strengthened to correct this downward trend, DASH resources are being scaled back; the formerly nationwide program that had funded more than 80 states, territories, tribes and local education agencies will now be reduced to funding fewer than 30 education agencies. The \$50 million we request the Committee to fund for DASH would be a critical step toward restoring the nationwide investments in school-based interventions across the country providing sexual health information to students.

We are also pleased that the President's budget once again included zero budget authority funding for failed abstinence-only-until-marriage programs. We encourage your Committees not to include funding for ineffective abstinence-only-until-marriage programs. More now than ever, given the current fiscal constraints, we need to strategically fund programs that provide all young people with the information and skills they need to make responsible decisions about their health. Evidence-based programs that achieve this goal are those that emphasize abstinence as the safest choice and also discuss contraceptive and condom use as a way to reduce the risk for pregnancy and STIs, including HIV. An overwhelming body of evidence has found abstinence-only-until-marriage programs to be ineffective; a federal evaluation found that federally funded Title V abstinence-only-until-marriage programs failed to delay sexual initiation. In fact, comprehensive approaches are actually more effective at getting young people to delay sex than are abstinence-only-until-marriage programs.

Thank you for considering these requests. We look forward to working with you to ensure that our nation's young people receive the information and tools they need to make responsible and healthy decisions.

Sincerely,

Advocates for Youth
AIDS Alliance for Women, Infants, Children, Youth & Families
AIDS Community Research Initiative of America
American Academy of Pediatrics
American Association of University Women (AAUW)
American Congress of Obstetricians and Gynecologists
American Medical Student Association
American Sexual Health Association
Association of Reproductive Health Professionals (ARHP)
Catholics for Choice
Choice USA
General Board of Church and Society, United Methodist Church
Global Justice Institute
Healthy Teen Network
HIV Prevention Justice Alliance
Human Rights Campaign
Jewish Women International
Metropolitan Community Churches
National Asian Pacific American Women's Forum
National Coalition of STD Directors
National Council of Jewish Women
National Family Planning & Reproductive Health Association
National Latina Institute for Reproductive Health
National Native American AIDS Prevention Center
National Organization for Women
National Partnership for Women & Families
National Women's Health Network
Physicians for Reproductive Health
Planned Parenthood Federation of America
Population Connection
Population Institute
Religious Coalition for Reproductive Choice
Sexuality Information and Education Council of the U.S. (SIECUS)
Society for Adolescent Health and Medicine (SAHM)
The AIDS Institute
The Women's Collective
Union for Reform Judaism
Unitarian Universalist Association

CC: U.S. Senate Committee on Appropriations
U.S. House of Representatives Committee on Appropriations