



NATIONAL PROFILE of HIV, STD, AND TEEN PREGNANCY

Healthy kids make better students. A number of avoidable behaviors put the health of young people at risk. Addressing adolescent health determinants, especially behaviors that put young people at risk for HIV, other STDs, and teen pregnancy remains a challenge. It has been estimated that at least half of all new HIV infections are among individuals under the age of 25. People aged 13 to 24 accounted for 13 percent of HIV cases reported in areas with confidential HIV reporting. Each year approximately 870,000 teenagers become pregnant. HIV, other STDs, and teen pregnancy can impact students' capacity to excel at school and can be a contributing factor in decreasing high school graduation rates. The nation has seen a drop in teen pregnancy rates; however, rates of HIV and other STD infections have not declined.

The purpose of the CCSSO national profile is to provide information on HIV, STD, and teen pregnancy including data, policies, and school-based programs.

The national profile contains the following:

1. **School Demographics**: Number of students; ethnic breakdown of the students; and the number of school buildings, teachers, districts, building and district staff, dropouts, and high school completers
2. **National Income Demographics**: Per capita income, unemployment, and poverty rates
3. **Health Behaviors and Risks**: National statistics for sexual history, drug use, and contraception
4. **Teen Pregnancy**: National rate of teen pregnancy by age and ethnic group if available
5. **HIV/AIDS**: National rate of HIV/AIDS by age
6. **STDs**: National rates of STDs by age and ethnic group if available. Not all STDs could be listed due to current monitoring/data collection procedures. The STDs that are reported are chlamydia, gonorrhea, HIV/AIDS, and syphilis
7. **Policies**: Information about school policies on HIV, STD, and teen pregnancy knowledge topics, and skill building and services that schools provide related to HIV, STD, and teen pregnancy prevention
8. **Resources**: Links to provide additional information on HIV, teen pregnancy, and STDs
9. **References**: Data sources and notes

National and state profiles are available for public view and use at

[www.ccsso.org/projects/School Health Project/](http://www.ccsso.org/projects/School_Health_Project/)

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1) NATIONAL SCHOOL STATISTICS^{1,2,3}

National Center for Education Statistics (NCES) is the primary federal entity for collecting and analyzing U.S. education data. All NCES data and reports are publicly available and easily accessible. The most recent public school data available are for the school year 2001-2002, and the most recent private school data that provide state level data are for the school year 1999-2000.

| PUBLIC | | | |
|---------------------------------------|---------------------------------|---------------------------------|------------------------------|
| DATA CATEGORY | ELEMENTARY [†] | SECONDARY [∅] | UNGRADED ^μ |
| <i>Total Students</i> | 25,207,860 ¹ | 20,770,803 ¹ | 440,646 ¹ |
| <i>American Indian/Alaskan Native</i> | 256,623 (1.0%) ¹ | 246,049 (1.2%) ¹ | 3,932 (.9%) ¹ |
| <i>Asian/Pacific Islander</i> | 1,055,763 (4.2%) ¹ | 918,752 (4.4%) ¹ | 11,779 (2.7%) ¹ |
| <i>Black, Non-Hispanic</i> | 4,677,909 (18.6%) ¹ | 3,368,361 (16.2%) ¹ | 141,057 (32.0%) ¹ |
| <i>Hispanic</i> | 4,462,090 (17.7%) ¹ | 3,114,167 (15.0%) ¹ | 102,477 (23.2%) ¹ |
| <i>White, Non-Hispanic</i> | 14,755,475 (58.5%) ¹ | 13,123,474 (63.2%) ¹ | 181,401 (41.2%) ¹ |
| <i>Teachers</i> | 1,645,571 ¹ | 1,079,155 ¹ | 232,414 ¹ |

Total Number of Students in Public Schools: 46,419,309¹

Number of Public School Districts: 14,559²

Number of Public School Building Staff[‡]: 2,665,848¹

Number of Public School District Staff^β: 238,819¹

[†] "Elementary" numbers were calculated by adding grades kindergarten to 6th data sets.

[∅] "Secondary" numbers were calculated by adding grades 7th to 12th data sets.

^μ "Ungraded" are students who are assigned to programs or classes without a standard grade designation. States are requested to report teachers of "ungraded" classes even if all students are assigned a grade level.

[‡] "Building staff" are instructional aids, instructional coordinators and supervisors, elementary and secondary guidance counselors/directors, librarians, library staff, school administrative support staff, student support services, and all support services related jobs.

^β "District staff" are LEA administrators and administrative support staff.

| PRIVATE | | | |
|--------------------------------|--------------------------------|------------------------------|--------------------------------|
| DATA CATEGORY | ELEMENTARY [†] | SECONDARY [∅] | COMBINED [Ⓜ] |
| Total Students | 2,858,799 ³ | 810,511 ³ | 1,493,357 ³ |
| American Indian/Alaskan Native | 11,511 (0.4%) ³ | 3,249 (.5%) ³ | 7,708 (0.5%) ³ |
| Asian/Pacific Islander | 129,287 (4.5%) ³ | 36,938(4.6%) ³ | 68,926 (4.6%) ³ |
| Black, Non-Hispanic | 294,698 (10.3%) ³ | 62,812 (7.7%) ³ | 129,261 (8.7%) ³ |
| Hispanic | 271,820 (9.5%) ³ | 73,344 (9.0%) ³ | 86,017 (5.8%) ³ |
| White, Non-Hispanic | 2,151,483 (75.3%) ³ | 634,168 (78.2%) ³ | 1,201,445 (80.5%) ³ |
| Teachers | 191,144 ³ | 63,038 ³ | 141,131 ³ |

Total Number of Students in Private Schools: 5,162,667³

[†] "Elementary" numbers were calculated by adding grades kindergarten to 6th data sets.

[∅] "Secondary" numbers were calculated by adding grades 7th to 12th data sets.

[Ⓜ] "Combined" is a school that may include kindergarten to 6th grade and one or more grades from 9th to 12th.

NATIONAL DROP OUT RATES⁴

As previously stated, NCES is the primary federal entity for collecting, analyzing, and reporting U.S. education data. In 2000-01 (the most recent data available), 45 states reported dropouts using the NCES definition ^A. The dropout rate in reporting states ranged from 2.2 percent to 10.9 percent. For the majority of reporting states (26/45), the dropout rates ranged from 4.0 percent to 7.0 percent.

| DROP OUT RATES | Female | Male |
|--|--------|-------|
| High school dropout rates by gender [†] | 4.1% | 5.5% |
| Percent of ALL high school dropouts by gender [†] | 42.6% | 57.4% |

[†] Rates by ethnicity AND gender were not available for both dropout and completion rates. The rate reported is an annual event rate. This rate is calculated every year and a student's dropout status is determined by their classification on October 1st.

| HIGH SCHOOL COMPLETION | Female | Male |
|--|--------|-------|
| High school completer rates by gender [∅] | 88.1% | 84.9% |
| Percent of ALL high school completers by gender [∅] | 51.3% | 48.7% |

[∅] Rates by ethnicity AND gender were not available for both dropout and completion rates. The rate reported is an estimation of the cohort from the 9th to 12th grade. The rate represents the proportion of students who have left school as high school completers in a 4 year period.

| RACE | American Indian/ Alaskan Native | Asian/ Pacific Islander | Black | Hispanic | White |
|-------------------------------|------------------------------------|----------------------------|-------|----------|-------|
| Dropout Rates [†] | N/A ^μ | 3.5% | 6.1% | 7.4% | 4.1% |
| Completion Rates [∅] | N/A ^μ | 94.6% | 83.7% | 64.1% | 91.8% |

[†] Rates by ethnicity AND gender were not available for both dropout and completion rates. The rate reported is an annual event rate. This rate is calculated every year and a student's dropout status is determined by their classification on October 1st.

[∅] Rates by ethnicity AND gender were not available for both dropout and completion rates. The rate reported is an estimation of the cohort from the 9th to 12th grade. The rate represents the proportion of students who have left school as high school completers in a 4 year period.

^μ Due to small sample sizes, American Indians/Alaska Natives dropout and completion rates were not calculated. NCES did include the American Indian/American Native category in the total calculated dropout and completion rates.

2) NATIONAL INCOME DEMOGRAPHICS^{5,6,7}

The U.S. Census Bureau collects basic demographic information such as income, poverty, and health insurance on a yearly basis. The U.S. Department of Labor, Bureau of Labor Statistics collects data such as unemployment rates, inflation, and consumer spending. The most recent data from the U.S. Census Bureau and Department of Labor are for 2003.

| DATA CATEGORY | NATIONAL |
|---|----------|
| Per capita income ⁵ | \$43,527 |
| Unemployment Rate ⁶ (Percent of persons who are unemployed) | 6.0% |
| Poverty Rate ^{7,†} (Percent of persons living in poverty) | 12.5% |
| Poverty Rate for children under 18 ⁷ (Percent of children under 18 living in poverty) | 17.6% |

[†] In 2003, the "poverty" threshold for a family of four (two adults and two children) was set at \$18,660 or below and for a family of three (one adult and two children) set at \$18,725 or below.

3) NATIONAL HEALTH BEHAVIOR AND RISKS⁸

The Youth Risk Behavior Surveillance (YRBS) was developed in 1990 to monitor priority health risk behaviors that contribute markedly to the leading causes of death, disability, and social problems among youth and adults (9th to 12th grade) in the U.S. The survey is administered every two years with the most current results published for 2003. Thirty-two states including the District of Columbia participated in the 2003 YRBS.

| DATA CATEGORY | National Female | National Male |
|--|-----------------|---------------|
| <i>Ever had sexual intercourse[†]</i> | 42.9% | 48.5% |
| <i>Had sexual intercourse during the past three months[†]</i> | 33.4% | 33.4% |
| <i>Ever had four or more sex partners[†]</i> | 11.4% | 17.2% |
| <i>Used a condom during last sexual intercourse[†]</i> | 51.3% | 65.1% |
| <i>Took birth control pills during last sexual intercourse[†]</i> | 21.1% | 14.9% |
| <i>Alcohol or drug use at last sexual intercourse[†]</i> | 20.7% | 30.9% |

[†] No data available for rates reflecting both ethnicity and gender in each of the data categories (i.e., no information available for the percentage of black females who ever had sexual intercourse).

| DATA CATEGORY | National Black | National White | National Hispanic | National Other ^Ø |
|--|----------------|----------------|-------------------|-----------------------------|
| <i>Ever had sexual intercourse[†]</i> | 60.8% | 43.2% | 48.4% | 40.1% |
| <i>Had sexual intercourse during the past three months[†]</i> | 45.6% | 31.3% | 35.9% | 30.2% |
| <i>Ever had four or more sex partners[†]</i> | 26.6% | 12.0% | 14.9% | 14.4% |
| <i>Used a condom during last sexual intercourse[†]</i> | 67.1% | 56.8% | 53.5% | 54.0% |
| <i>Took birth control pills during last sexual intercourse[†]</i> | 7.9% | 23.4% | 9.6% | 10.7% |
| <i>Alcohol or drug use at last sexual intercourse[†]</i> | 17.8% | 27.8% | 24.1% | 27.5% |

[†] No data available for rates reflecting both ethnicity and gender in each of the data categories.

^Ø Other category includes Asian/Pacific Islander, American Indian, Native Hawaiian or other Pacific Islander, as well as students who selected more than one ethnic category in the survey tool.

4) NATIONAL TEEN PREGNANCY^{9,10}

Birth rates have declined significantly for teenagers 15-19 years of age from 1991 to 2002, the birth rate has declined by 30 percent in the U.S. Rates are per 1,000.

| | 1991 National rates ⁹ | 2002 National rates ¹⁰ |
|-------------|----------------------------------|-----------------------------------|
| 15-17 years | 38.7 per 1,000 | 23.2 per 1,000 |
| 18-19 years | 94.4 per 1,000 | 72.8 per 1,000 |
| 15-19 years | 62.1 per 1,000 | 43.0 per 1,000 |

The most recent data available on birth rates by ethnic origin were reported in 2002. Rates are per 1,000 women.

| RACE | American Indian/ American Native ¹⁰ | Asian/ Pacific Islander ¹⁰ | Black ¹⁰ | Hispanic ¹⁰ | White ¹⁰ |
|-------------|---|--|---------------------|------------------------|---------------------|
| 15-19 years | 53.8 per 1,000 | 18.3 per 1,000 | 66.6 per 1,000 | 83.4 per 1,000 | 28.5 per 1,000 |

5) HIV/AIDS¹¹

HIV^B

The Centers for Disease Control and Prevention (CDC) used confidential HIV infection reporting in their latest HIV/AIDS surveillance report. Thirty-two states currently implement confidential HIV reporting. The prevalence rate for children living with HIV infection ranged from 0.4 per 100,000 in Idaho to 19.0 per 100,000 in New Jersey. Rates are reported from 2002.

| | National rates |
|--------------------------------------|-------------------|
| < 13 years (children) | 5.6 per 100,000 |
| Adolescents and adults (13 and over) | 127.8 per 100,000 |

AIDS^C

The prevalence rate for children living with AIDS ranged from 0.6 per 100,000 in Oklahoma to 74.5 per 100,000 in the District of Columbia. Rates are reported from 2002.

| | National rates |
|--------------------------------------|-------------------|
| < 13 years (children) | 3.7 per 100,000 |
| Adolescents and adults (13 and over) | 167.3 per 100,000 |

6) STDs¹²

Case reporting data for genital herpes simplex, genital warts, human papillomavirus, non-gonococcal urethritis, and trichomoniasis are not available. Current data does not provide the actual number of STD cases in the United States. Ongoing trend data are based on estimates from office visits in physician practices provided to the National Disease and Therapeutic Index. All rates reported are from 2003 surveillance reports.

CHLAMYDIA (RATES per 100,000 POPULATION)¹²

Chlamydia is the most commonly reported sexually transmitted disease in the United States. For both men and women, the highest age-specific reported rates occurred among those 15 to 19 years old and 20 to 24 years old (2003). The overall reported rate among women in the United States was approximately three times higher than the reported rate of men. Rates are reported per 100,000 by age, sex, and race/ethnicity.

| RACE | White | | Black | | Hispanic | | Asian/ Pacific Islander | | American Indian/ American Native | |
|------------------|-------|---------|---------|---------|----------|---------|----------------------------|-------|-------------------------------------|---------|
| | M | F | M | F | M | F | M | F | M | F |
| <i>TOTAL</i> | 52.9 | 217.9 | 584.2 | 1,633.1 | 177.5 | 721.3 | 61.7 | 224.5 | 246.7 | 1,098.3 |
| <i>Age 10-14</i> | 1.8 | 52.6 | 44.3 | 481.6 | 9.7 | 124.8 | 1.6 | 35.7 | 15.9 | 250.5 |
| <i>Age 15-19</i> | 137.4 | 1,393.8 | 1,731.5 | 8,523.2 | 468.7 | 2,851.7 | 108.2 | 914.1 | 719.3 | 4,328.3 |

GONORRHEA (RATES per 100,000 POPULATION)¹²

Gonorrhea is the second most commonly reported sexually transmitted disease in the United States. Among females in 2003, 15 to 19 and 20 to 24 year olds had the highest rates and among males, 20 to 24 year olds had the highest rates. Rates are reported per 100,000 by age, sex, and race/ethnicity.

| RACE | White | | Black | | Hispanic | | Asian/ Pacific Islander | | American Indian/ American Native | |
|------------------|-------|-------|---------|---------|----------|-------|----------------------------|------|-------------------------------------|-------|
| | M | F | M | F | M | F | M | F | M | F |
| <i>TOTAL</i> | 26.0 | 39.1 | 699.6 | 616.1 | 64.6 | 79.2 | 19.6 | 25.8 | 69.5 | 136.6 |
| <i>Age 10-14</i> | .7 | 11.5 | 35.0 | 186.0 | 3.9 | 18.5 | .6 | 6.9 | 5.6 | 42.3 |
| <i>Age 15-19</i> | 37.7 | 204.8 | 1,464.1 | 2,947.8 | 125.3 | 321.3 | 26.7 | 99.6 | 141.1 | 484.6 |

SYPHILIS (RATES per 100,000 POPULATION)¹²

The overall rates of syphilis are at their lowest since reporting began in 1941. But, rates in the South and in some urban cities are still high. The highest age-specific rates among women occurred among 20 to 24 years old and among men 35 to 39 years old. Rates are reported per 100,000 by age, sex, and race/ethnicity.

| RACE | White | | Black | | Hispanic | | Asian/ Pacific Islander | | American Indian/ American Native | |
|------------------|-------|----|-------|-----|----------|-----|----------------------------|----|-------------------------------------|-----|
| | M | F | M | F | M | F | M | F | M | F |
| <i>TOTAL</i> | 2.9 | .2 | 11.7 | 4.2 | 5.0 | .8 | 2.0 | .1 | 4.2 | 1.5 |
| <i>Age 10-14</i> | 0 | 0 | .1 | .2 | 0 | .3 | 0 | 0 | 0 | .9 |
| <i>Age 15-19</i> | .4 | .4 | 6.0 | 7.5 | 1.7 | 2.3 | 1.2 | .2 | 0 | 0 |

OTHER STDs¹²

Case reporting for genital herpes simplex virus, genital warts, human papillomavirus, non-gonococcal urethritis, and trichomoniasis is not available.

7) NATIONAL POLICIES AND LEGISLATION¹³

The School Health Policies and Programs Study (SHPPS) 2000 is the most comprehensive study of school health policies and programs ever conducted. SHPPS 2000 assessed the characteristics of school health policies and programs at the classroom, district, school, and state levels nationwide.^D

This table indicates if the state requires schools to teach these health topics.

| KNOWLEDGE TOPIC | Elementary | Middle School | High School |
|-----------------------------|------------|---------------|-------------|
| <i>HIV Prevention</i> | 32 states | 36 states | 36 states |
| <i>Pregnancy Prevention</i> | 14 states | 23 states | 23 states |
| <i>STD Prevention</i> | 22 states | 31 states | 32 states |
| <i>Human Sexuality</i> | 13 states | 24 states | 24 states |

The following tables describe the percentage of schools (national) at each level teaching topics and skills related to pregnancy prevention, HIV prevention, and other STD prevention in at least one required class or course, by skills, as reported by the SHPPS 2000.

SHPPS data are separated into two tables. The first table focuses on relationship and risk factors, transmission of HIV and STDs, and contraception topics being taught in schools. The second table describes skill building topics being taught and how to find resources in the community for HIV and STD services for high school students.

RISK FACTORS, TRANSMISSION OF HIV AND STDs, and CONTRACEPTION[†]

| TOPIC | All Schools | Elementary Schools | Middle High Schools | Senior High Schools |
|--|-------------|--------------------|---------------------|---------------------|
| DATA | | | | |
| <i>How many students are sexually active</i> | 42.2% | 10.9% | 55.5% | 79.0% |
| <i>Number of teenage pregnancies</i> | 48.6% | 14.3% | 66.7% | 82.8% |
| <i>Number of students who get an STD or HIV</i> | 54.4% | 25.3% | 67.0% | 88.2% |
| RELATIONSHIP AND RISK FACTORS | | | | |
| <i>Dating and relationships</i> | 63.7% | 34.9% | 82.5% | 86.2% |
| <i>Risk associated with having multiple sexual partners</i> | 91.9% | 68.7% | 92.5% | 98.5% |
| <i>Risk associated with teen pregnancy</i> | 85.1% | N/A [∅] | 81.9% | 80.5% |
| TRANSMISSION OF DISEASE | | | | |
| <i>How HIV is transmitted</i> | 93.5% | 85.4% | 97.3% | 99.2% |
| <i>How an STD, other than HIV, is transmitted</i> | 94.8% | 76.1% | 97.8% | 98.6% |
| <i>Signs and symptoms of STD</i> | 85.9% | 42.9% | 90.0% | 98.3% |
| <i>Compassion for persons living with HIV or AIDS</i> | 81.3% | 78.5% | 82.7% | 83.2% |
| <i>Abstinence is the most effective method to avoid pregnancy, HIV, or other STD</i> | 71.7% | 40.8% | 91.5% | 96.1% |
| CONTRACEPTION | | | | |
| <i>Methods of contraception</i> | 67.9% | 32.8% | 61.8% | 87.0% |
| <i>How to correctly use a condom</i> | 33.6% | N/A [∅] | 20.8% | 55.1% |
| <i>Condom efficacy</i> | 64.8% | N/A [∅] | 54.1% | 82.9% |

[†] This is a sample of schools that participated in the SHPPS. No state-level data are available. Currently, no state level data are available from the SHPPS 2000 to determine if pregnancy, HIV, or other STD prevention topics or classes are taught or required. National data are provided.

[∅] The question was not asked to participants who teach in elementary schools.

SKILL BUILDING TOPICS AND AVAILABLE HIV AND STD SERVICES[†]

| SKILLS | All Schools | Elementary Schools | Middle High Schools | Senior High Schools |
|--|-------------|--------------------|---------------------|---------------------|
| SKILL BUILDING | | | | |
| <i>Communication skills related to sexual behaviors</i> | 57.9% | 24.5% | 78.0% | 87.0% |
| <i>Decision-making skills related to sexual behaviors</i> | 59.3% | 33.4% | 74.0% | 83.7% |
| <i>How students can influence or support others to make healthy decisions related to sexual behavior</i> | 62.3% | 37.5% | 76.7% | 84.8% |
| <i>Resisting peer pressure to engage in sexual behavior</i> | 68.4% | 40.4% | 86.8% | 90.5% |
| HOW TO FIND SERVICES | | | | |
| <i>How to find valid information or services related to HIV or HIV testing</i> | 61.3% | 33.4% | 72.7% | 83.8% |
| <i>How to find valid information or services related to pregnancy or pregnancy testing</i> | 79.6% | 47.9% | 79.2% | 90.4% |
| <i>How to find valid information or services related to STD or STD testing</i> | 77.0% | 48.7% | 77.4% | 88.6% |

[†] This is a sample of schools that participated in the SHPPS. No state-level data are available. Currently, no state level data are available from the SHPPS 2000 to determine if pregnancy, HIV, or other STD prevention topics or classes are taught or required. National data are provided.

8) NATIONAL RESOURCES

HIV/AIDS

The Centers for Disease Control/Division of Adolescent Health (CDC/DASH)

<http://www.cdc.gov/HealthyYouth/>

The website has surveillance data and publications available on HIV and STDs.

National Minority AIDS Council (NMAC)

www.nmac.org

The website has resources and publications on HIV/AIDS and information tailored for minorities.

TEEN PREGNANCY

The National Campaign to Prevent Teen Pregnancy

www.teenpregnancy.org

The website contains research, resources, and information on teen pregnancy. The organization also lists publications related to teen pregnancy prevention.

STDs

The American Social Health Association

www.ashastd.org

The website contains an STD glossary, introduction to STDs, and basic facts and statistics about STDs.

National Coalition of STD Directors (NCSD)

www.NCSDDC.org

The website contains additional publications, resources, and a list of STD programs and directors. The site can also link SEA staff to their state health department's STD directors.

POLICY

National Association of State Boards of Education (NASBE)

www.nasbe.org/HealthySchools/States/State_Policy.html

NASBE's complementary effort to SHPPS was designed to gather actual written policies in key areas of school health policy. ^D

National Conference of State Legislatures (NCSL)

<http://www.ncsl.org/public/leglinks.cfm>

The website has a database that contains information collected from the websites of the 50 state legislatures, the District of Columbia, and the U.S. territories. Find specific content materials (such as, bills, press rooms, statutes) for each state, District of Columbia, and the territories.

<http://www.ncsl.org/programs/health/adoles.htm>

This is the direct link to NCSL's Adolescent & School Health website and select information on teenage birth rates, asthma rates, and sexual risk behaviors, are among the health topics the website covers.

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NOTES

- A. Dropout rate (this is an annual event dropout rate) is calculated by the number of dropouts for a school year divided by the number of students enrolled at the beginning of that school year. In 2000-01, dropout rates for four states (California, Colorado, Indiana, and Michigan) and the District of Columbia were not reported by NCES because these states did not report dropouts that were consistent with NCES definition.
- B. HIV stands for Human Immunodeficiency Virus. This is the virus that causes AIDS. This virus is passed from one person to another through blood-to-blood and sexual contact. Infected pregnant women can pass HIV to their babies during pregnancy or delivery, and breast feeding.
- C. AIDS stands for Acquired Immunodeficiency Syndrome. AIDS is caused by an HIV infection. HIV attacks CD4+ T cells, known as helper cells. The helper cells fight off infections and diseases in the body. When the helper cells numbers are below 200, a person is then diagnosed by their physician as having AIDS. Physicians will diagnose a patient with AIDS even if the helper cell count is over 200. This only applies if a person has HIV and certain diseases such as tuberculosis or *Pneumocystis carinii pneumonia* (PCP).
- D. Both the Centers for Disease Control and Prevention (CDC), through its School Health Policies and Programs Study (SHPPS), and the National Association of State Boards of Education (NASBE), through its State-Level School Health Policy Database, collect information on state policies. Information from these two systems and other similar sources of data do not always match. For example, CDC's [SHPPS 2000](#) reports that 35 states allowed students to use their own asthma inhalers, while NASBE's Database reports that 30 states allowed student self-medication as of April 2004. These and other differences may be attributed to differences of methodology, timeframe, interpretation, or the ambiguities inherent to any discussion of policy and practice.

The SHPPS 2000 state-level data were collected by self-administered mail questionnaires completed by designated respondents in state education agencies. In those questionnaires, "policy" was defined as "any mandate issued by the state school board, state legislature, or other state agency". NASBE collects written policies directly from states and then summarizes the information contained in those policies. Subjective interpretation is unavoidable both when persons are responding to questions about the policies under which they work and when others are analyzing written policies that vary in content, depth, and completeness. Across states, awareness, dissemination, interpretation, and enforcement of policies also vary tremendously. As a result, policy measurement and policy analysis — like policy making — remain both an art and a science.