

# Youth Sexuality: The Rochester Report

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## ABOUT THIS STUDY

This is the third in a series of reports issued by the Metro Council for Teen Potential, based on the results of the MCTP Countywide Youth Survey, an in-depth study of Monroe County youth. Collaborating with the University of Rochester, MCTP surveyed 2,198 adolescents by telephone between 1999 and 2002. Youth were asked about a range of subjects, including communication with parents, crime, substance abuse, sexuality and after-school activities.

MCTP conducted the telephone interviews with adolescents living in Monroe County in two rounds. 1,040 young people participated in 1999–2000 and 1,158 responded in 2001–2002.

MCTP worked with University of Rochester to develop the telephone survey questions. We generated random local telephone numbers and then contacted households. We obtained parental consent before talking with youth under the age of 18. Funding for this project was provided by the Centers for Disease Control and Prevention.

This report details responses from the 2001–2002 survey regarding youth sexual behaviors, attitudes about pregnancy, access to health care, and use of birth control. MCTP has issued two other reports that document additional youth survey responses, the community context, and national and local programs that have proved effective. These reports are called *Keeping Our Children Safe: The Rochester Report*; and *Drug and Alcohol Use Among Monroe County Youth*. In addition, the reports *Countywide Youth Survey, Round Two Results 2001–2002* and *Countywide Youth Survey, Round One Results 1998–1999* set out the youth responses to all of the questions. These reports are available on the MCTP web site: [www.metrocouncil.us](http://www.metrocouncil.us).

The following chart shows demographic information for the youth who responded to our 2001–2002 County wide telephone survey:

### Respondents to MCTP 2001–2002 telephone survey (1,158 total respondents)

Male	45.5%
Female	54.5%
City resident	63%
Suburban resident	37%
White	65%
Black	15%
Hispanic	15%
Other	5%
Average age	16.3
Still in school	89%

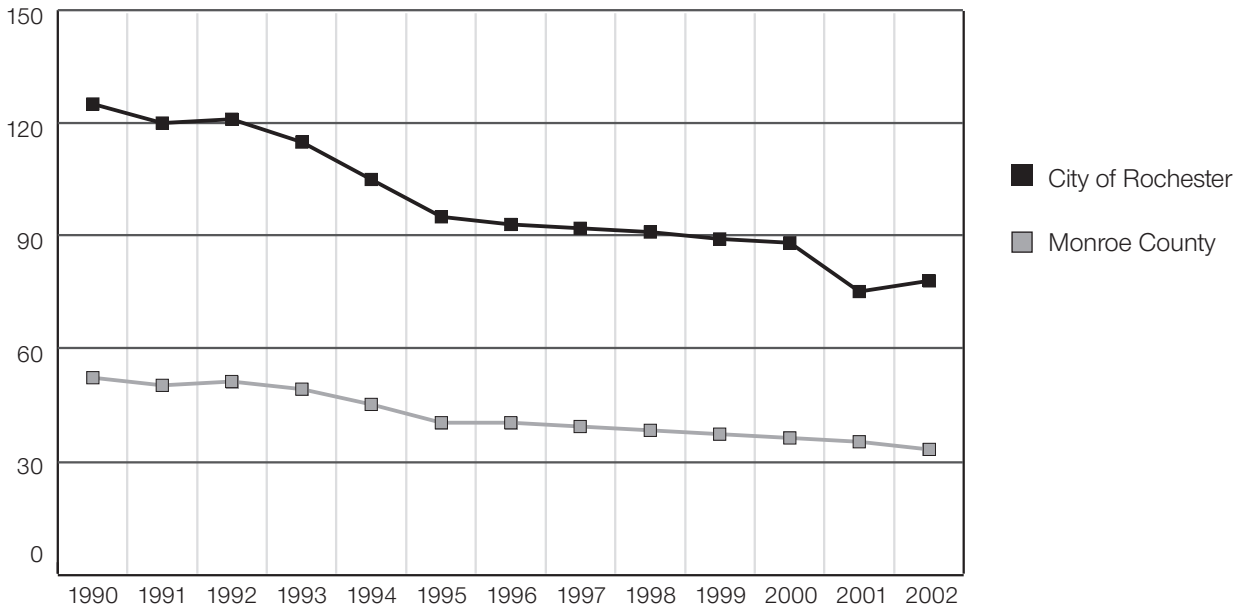
Source: MCTP Countywide Youth Survey

## NATIONAL AND LOCAL TRENDS

Monroe County mirrors national trends in that rates of pregnancy and birth are declining among teenagers. Between 1988 and 2000, teenage pregnancy rates declined in every state, according to a 2004 report by the Alan Guttmacher Institute. More teens are sexually abstinent, and more teens are using contraception.

Local efforts to educate youth about the consequences of unprotected sex have helped to significantly reduce teen pregnancy. The following chart shows the marked decline in local birth rates per thousand girls, from 1990 through 2002.

### Birth Rates per 1,000 ages 15–19



Source: Monroe County Health Department

However, marked differences between city and suburbs continue. The birth rate among Rochester girls 15–19 in 2002 (80 births per 1,000 population) was more than seven times the rate among suburban girls (11 births per 1,000 population).

In the City of Rochester, teen pregnancy rates are significantly higher than teen birth rates. More information about teen pregnancy is provided later in this report.

# MCTP SURVEY RESPONSES

## Sexual Behaviors

The 1,158 teens who responded to the MCTP telephone survey in 2001–2002 reported the following:

<b>SEXUAL BEHAVIOR</b>		
<b>All respondents</b>	<b>City</b>	<b>Suburbs</b>
% ever had sexual intercourse		
All	46%	32%
Males	49%	30%
Females	44%	34%
Mean age when had sex for the first time		
	15.09	15.57
Among teens who are sexually experienced, number of sexual partners in the past 3 months		
0 persons	15%	12%
1 person	68%	75%
2 to 4 persons	16%	13%
5 to 7 persons	0%	0%
8 or more persons	1%	1%
<b>Sexually active teens</b>		
	<b>City</b>	<b>Suburbs</b>
Mean age of partner for teens who had one partner in past 3 months		
Males	17.37	17.53
Females	19.87	19.17
Mean age of oldest partner for teens who had more than one partner in past 3 months		
Males	19.14	19.22
Females	22.28	19.23
<b>All teens who have ever had sex</b>		
	<b>City</b>	<b>Suburbs</b>
% ever been forced / pressured to have sex		
Males	6%	3%
Females	13%	7%

Source: MCTP Countywide Youth Survey, University of Rochester and MCTP

## Birth control

Regarding use of birth control, respondents to the telephone survey reported the following:

<b>BIRTH CONTROL</b>		
<b>Sexually active teens</b>	<b>City</b>	<b>Suburbs</b>
Of sexually active teens, % who used a condom at last intercourse		
Males	76%	71%
Females	61%	71%
% of sexually active teens who used a condom "every time" in past 3 months		
Males	64%	62%
Females	43%	48%
% who used some other form of birth control "every time" in past 3 months		
Males	23%	30%
Females	32%	55%
<b>All teens who have ever had sex</b>	<b>City</b>	<b>Suburbs</b>
% talked to a partner about using a condom		
Males	77%	84%
Females	90%	91%
% who used any other form of birth control at last intercourse		
Males	37%	45%
Females	47%	61%
Of those, the % who used / partner used birth control pills		
Males	64%	87%
Females	62%	87%
Of those, the % who used / partner used depo provera		
Males	19%	5%
Females	28%	5%
% who had heard of emergency contraception		
	68%	84%
If heard of EC, % whose doctor / nurse had talked to them about EC		
All	42%	28%
Males	18%	17%
Females	56%	36%
% ever had sex without using a condom or other birth control		
Males	44%	45%
Females	57%	40%

Source: MCTP Countywide Youth Survey, University of Rochester and MCTP

A majority of the teens surveyed said they had used a condom the last time they had intercourse, and a high percentage (77–91%) said they had talked to a partner about condom use. However, significant numbers said they had had sex without a condom; fewer than half of the girls in the City of Rochester who are sexually active report using a condom “every time” in the past three months.

## Attitudes about pregnancy

When asked about teen pregnancy, respondents reported:

ATTITUDES ABOUT PREGNANCY		
	City	Suburbs
Agree that having a baby in high school is not a problem at all		
Males	6%	2%
Females	8%	3%
Agree that having a baby in high school is a problem for the mother, baby & father		
Males	89%	94%
Females	85%	94%
If you got a girl pregnant now / if you became pregnant now, how would you feel?		
Upset		
Males	57%	65%
Females	60%	70%
Both upset & happy		
Males	35%	32%
Females	35%	29%
Happy		
Males	8%	3%
Females	5%	2%

Source: MCTP Countywide Youth Survey, University of Rochester and MCTP

While youth overwhelmingly agreed that having a baby in high school is a problem for both parents and child, many expressed conflicting feelings about pregnancy. The majority (57% to 70%) said they would be upset. But more than a third of males and females in the city, and slightly lower proportion countywide, said they would be both upset and happy about getting pregnant or getting a girl pregnant

## Pregnancy

The disparities between city and suburb are marked in reported pregnancies and births.

<b>PREGNANCY</b>		
<b>Females</b>	<b>City</b>	<b>Suburbs</b>
% who had ever been pregnant	40%	12%
If ever pregnant, number of times		
1 time	70%	63%
2 times	24%	38%
3 or more	6%	0%
If ever pregnant, number of children		
0	35%	83%
1 child	57%	17%
2 children	7%	0%
3 children	1%	0%

<b>Males</b>	<b>City</b>	<b>Suburbs</b>
% who had ever gotten someone pregnant	11%	11%
If ever gotten someone pregnant, number of times		
1 time	65%	100%
2 times	29%	
3 or more	6%	
If ever gotten someone pregnant, number of children		
0	73%	67%
1 child	27%	33%

Source: MCTP Countywide Youth Survey, University of Rochester and MCTP

In many City neighborhoods, pregnancy rates continue to be a major public health concern. (Pregnancy rates include live births, miscarriages, and abortions.) The following chart sets out teen pregnancy rates in selected City zip code areas for girls, ages 15 to 19. In zip code areas 14605, 14621 and 14611, 20% of teen girls become pregnant each year.

<b>Zip code areas</b>	<b>1995 to 1998</b>	<b>1998 to 2000</b>
14605	220 girls per thousand	226 girls per thousand
14621	212	198
14611	194	201
14613	183	186
14619	181	164
14608	175	179
14609	143	147
14615	114	112
14606	113	111
14607	102	76

Source: NYS Health Department

## Health care

A majority of the youth surveyed said that they usually received medical care at a doctor's office, although the proportion was much lower in the city (67%) than in the suburbs (84%). More than three-quarters of respondents said that their health care provider did provide assurances of confidentiality. A relatively high proportion of teens in the city (18%) said they usually received care at a hospital clinic.

HEALTH CARE		
	City	Suburbs
Where do you usually go to get medical care?		
Doctor's office	67%	84%
Neighborhood clinic or health care center	7%	8%
Mobile health van	0%	0%
Planned Parenthood	0.4%	0%
Health Department	2%	1%
Emergency room	0%	0.2%
Hospital clinic	18%	5%
School-based clinic	1%	0.7%
Threshold	0.5%	0%
Anthony Jordan Health Center	4%	0%
Nowhere	0.7%	0.2%
At last checkup, did provider discuss that the visit was confidential?		
Yes	78%	77%
No	19%	19%
Don't know	2%	3%
Don't remember	2%	1%
% who saw the doctor alone	83%	82%
If you saw the doctor alone, % who also saw the doctor w/ parents in the room	57%	67%
% whose doctor has discussed where to get confidential care	42%	40%
Ever seen a provider without parents' knowledge	17%	9%
If yes, where?		
Regular source	48%	38%
Some other place	52%	63%
If yes, care was for birth control or an STD	55%	73%
Ever wanted birth control and not gotten it because afraid parents would find out	5%	4%
Covered by health insurance	93%	97%

Source: MCTP Countywide Youth Survey, University of Rochester and MCTP

# Youth Risk Behavior Survey

The 2003 Monroe County Youth Risk Behavior Survey, conducted in area high schools, showed similar patterns to the MCTP Countywide Youth Survey regarding sexual behaviors and use of contraception. The Youth Risk Behavior Survey is a written survey that students complete. Of the 1,698 high school students completing the Youth Risk Behavior Survey:

- 43% had ever had sexual intercourse
- 29% were currently sexually active
- 12% had had four or more sex partners in their lifetime
- 92% of all students either abstained from sex in the past three months, or used a condom the last time they had sexual intercourse
- 69% of currently sexually active males used a condom the last time they engaged in intercourse
- 50% of currently sexually active females used a condom the last time they engaged in intercourse
- 22% of currently sexually active males and 26% of females used a birth control pill before their last sexual intercourse
- 46% had ever participated in oral sex

## Education and communication

Most teens who responded to the MCTP Countywide Youth Survey have received information about pregnancy and sexuality.

EDUCATION & COMMUNICATION		
	City	Suburbs
% had classes in school or some other place		
on how pregnancy occurs	93%	96%
% had classes on how to say no to sex	85%	91%
% had classes on abstinence or virginity	79%	88%
% had classes on methods of birth control	82%	84%
% seen ads about teens and sex	97%	98%
Ever heard of teen pregnancy prevention programs	50%	51%
<i>If yes, is there a TPP at your school</i>	24%	19%
Talked with parent about how pregnancy occurs		
Males	57%	60%
Females	68%	69%
Talked with parent about how to say no to sex		
Males	62%	53%
Females	70%	70%
Talked with parent about methods of birth control		
Males	49%	46%
Females	67%	60%
In last 6 months, number of times talked about sex with parent		
0 times	42%	38%
Once or twice	28%	39%
3 to 5 times	15%	15%
6 to 10 times	4%	4%
11 or more times	11%	4%

Source: MCTP Countywide Youth Survey, University of Rochester and MCTP

Nearly all the respondents had participated in classes about pregnancy and had seen advertisements about teens and sex. Yet only half said they had ever heard about teen pregnancy prevention programs. Of those who said they knew of such programs, fewer than one-fourth said such programs existed at their schools.

At home, boys were less likely than girls to talk with their parents about pregnancy, abstinence or birth control. Such conversations were apparently sporadic among both genders. A majority of youth said they had discussed the topic with their parents only once or twice, or not at all in the past six months.

## Activities

MCTP asked young people about how they spent their time.

<b>ACTIVITIES</b>	<b>City</b>	<b>Suburbs</b>
<b>Social interaction</b>		
Number of hours per week...		
Playing sports		
Males	8.5	7.0
Females	3.7	5.6
In school or community clubs		
Males	2.3	1.7
Females	2.6	2.3
Attending church, temple, religious services		
Males	1.6	1.2
Females	2.0	1.2
Hanging out with friends, with nothing special to do		
Males	14.0	11.8
Females	9.6	12.0
<b>TV, video games and computer use</b>		
Number of hours of TV on a typical weekday		
Males	2.9	2.0
Females	2.9	1.8
Number of hours of TV on a typical weekend day		
Males	3.3	2.9
Females	3.1	2.5
Number of hours of video games on a typical weekday		
Males	1.0	0.8
Females	0.3	0.2
Number of hours of video games on a typical weekend day		
Males	1.2	1.3
Females	0.4	0.2
Number of hours of computer use on a typical weekday		
Males	1.6	2.0
Females	1.9	2.1
Number of hours of computer use on a typical weekend day		
Males	1.7	2.4
Females	1.8	2.3

## Assets

Most youth reported a strong sense of self-worth. The study included a series of questions about young people's self-perceptions, support systems and their roles in the community. The overwhelming majority of young people agreed with the following statements:

- My parents are supportive of me.
- My family cares about what happens to me.
- My parents spend time with me.
- I feel good about myself.
- I have a lot to be proud of.
- I have a bright future ahead of me.

(For percentage breakdowns for each question, see MCTP Countywide Youth Survey, Round Two Results, at <http://www.metrocouncil.us>).

## WHAT YOUNG PEOPLE SAY

Many of the youth who responded to the MCTP telephone survey told us that they are behaving responsibly. Most report positive feelings about their families and other adults, and say that they are engaged in positive activities. Almost 100% of youth say they have access to health care. About half the youth from the City and about two-thirds of youth in the suburbs say they are not sexually active. Of youth who are sexually active, most have had one partner in the past three months.

But several of the responses in the survey are troubling. Less than half of the girls who are sexually active report using a condom “every time”; about two-thirds of boys report using a condom “every time”. Girls report that their male partners are older than they are; this is especially true among girls who have recently had more than one partner. 13% of City of Rochester girls say they have been forced or pressured to have sex. 8% of girls in the City agreed with the statement, “Having a baby in high school is not a problem at all.” About 40% of youth, in both the City and the suburbs, say they have not talked with their parents about sex in the past six months.

## WHAT WORKS

Our community has paid significant attention to the issue of healthy teen sexuality and the problem of teen pregnancy over the past ten years, and these efforts have paid off. More young people are acting responsibly. Rates of teen birth have dropped significantly in both the City and the County. But the MCTP youth survey confirms that a significant percentage of young people continue to put themselves at risk for teen pregnancy, STD infections and HIV. It is important that the community continue to commit the resources and attention required to reach all youth.

A **comprehensive and “science-based”** approach is needed that engages parents, schools, faith groups, youth serving organizations, health care providers and the media. Only a combination of strategies, operating at the family, school and community level, will be successful in changing youth attitudes and behavior. A science-based approach is designed to respond to local risk factors and issues, relies on strategies that have

been proven effective, and incorporates program evaluations to determine whether specific strategies are making a difference. The following approaches have proven successful and deserve support.

### ■ **Parent child communication**

Young people consistently say that their conversations with their parents about sexuality are few and far between, and they would welcome more guidance and information from their parents. To address this need, Metro Council for Teen Potential and Family Resources Centers of Rochester have developed a parent workshop series called *Family Talk*. Since 2001, Family Resource Center of Rochester has delivered this five part interactive workshop series to over 600 parents in community agencies, schools and supported housing sites. Parents consistently report in pre and post tests that the workshop series helps them to feel more comfortable and more knowledgeable in starting conversations with their children about sexuality, gender issues, pregnancy and HIV.

### ■ **Youth Development Programs**

Young people make healthy choices and postpone pregnancy and premature sexual activity when they have a path to a future. After school programs, school to work programs, tutoring and mentoring programs, sports and arts programs are essential in all neighborhoods. In the MCTP telephone survey, City teen boys reported that they spent 35 hours per week hanging out with friends “with nothing special to do” or watching TV. Teen girls in the City spent about 31 hours a week hanging out with friends “with nothing special to do” or watching TV. Young people who grow up without the supports and relationships that can come from structured youth development programs are at greater risk of academic failure and teen pregnancy.

### ■ **Comprehensive sexuality education in schools and community settings**

Educational programs for teens must do more than simply convey information about pregnancy and STDs. Young people need an understanding of the emotional consequences of sex, and they need support and practice to increase their skills so that they can better manage their personal relationships. Douglas Kirby, known nationally for his research on adolescent sexuality, has identified best practices of effective interventions in schools and community settings that change the sexual behaviors of teens. Those best practice elements are:

1. Focus on reducing the sexual behaviors that lead to STDs or unintended pregnancies.
2. Based on theoretical approaches that influence behaviors and sexual antecedents to be targeted.
3. Deliver and consistency enforce a clear message about abstinence, condoms and contraception.
4. Provide basic, accurate information about risks and ways to avoid intercourse or to use protection.
5. Include activities that address social pressures that influence sexual behaviors.
6. Provide examples of, and practice with communication, negotiations and refusal skills.
7. Employ teaching methods that involve the participants and help them personalize the information.

8. Incorporate behavioral goals, teaching methods, and materials that are appropriate to the age, sexual experience, and culture of the students.
9. Last a sufficient length of time—more than a few hours.
10. Select teachers/leaders who believe in the program and provide them with adequate training.  
(D. Kirby, *Emerging Answers, National Campaign to Prevent Teen Pregnancy, 2001*)

Locally, the Rochester City School District promotes programs for its health classes that help youth improve their communication, negotiation, decision making and refusal skills. The City School District health teachers use two curricula identified as effective by the Centers for Disease Control and Prevention. These curricula, *Reducing the Risk* and *Safer Choices*, are skills-based, and incorporate information about healthy relationships, contraception, and HIV prevention. Most students in the City School District take a health class once in middle school and once in high school.

In addition, MCTP and the City School District collaborated to produce a video based curriculum, called *What's Next*. The *What's Next* dramatic video stories use real world language, music and video style to engage youth where they are. Each of the three video stories has won a Telly Award, a national award given to cable and independently produced videos. A teaching curriculum sets out interactive exercises to help young people communicate with their partner, delay sexual behavior, seek health care and other supports, and resist abusive relationships and substance use. A program evaluation of *What's Next* is currently underway.

MCTP also promotes the *Teen Outreach* curriculum, a nationally renowned youth development curriculum proven effective in preventing teen pregnancy and increasing school success. *Teen Outreach* employs a two part strategy of community service and small group discussion. The program brings youth together with their peers in discussions facilitated by a trained adult; to talk about school, family, friends, relationships, sex, their future, and their community. Community service is a core component of the *Teen Outreach* Program. Young people work together to design, carry out, and then reflect on individual and team service projects. These experiences help youth develop confidence in their own abilities and a greater connection to their communities. At the same time, youth learn concrete skills, including team work, problem solving, negotiation, and evaluation.

*Teen Outreach* has been evaluated in numerous settings across the country. *Teen Outreach* participants, randomly assigned, showed greater academic achievement, lower drop out rates and lower incidences of teen pregnancy when compared to youth with similar backgrounds and profiles who did not participate in the program. MCTP offers staff training and staff coaching in both the *Teen Outreach* and the *What's Next* curricula.

## ■ Access to Health Care

The respondents to our survey reported that they did have access to health care, and 75% of teens said that their health care providers gave them assurances of confidentiality. Locally, Strong Hospital, Rochester General, Threshold Center for Youth, Westside Health Services and Planned Parenthood are among the health organizations that provide outreach and medical services to teens. Since the MCTP survey was conducted, the Jordan Teen Center has closed, impacting youth access to care. Currently, Jordan is working with University of Rochester Medical Center to re-establish an adolescent medicine program onsite.

The Rochester City School District supports six comprehensive school based health centers: **East High School**/University of Rochester Community School of Nursing; **Edison Tech**/Rochester General Hospital/Via Health; **Franklin**/Threshold Alternative Center for Youth Services; **Marshall**/Rochester General Hospital/Via Health;

**School No. 9**/Anthony Jordan Health Center; and **School No. 33**/Rochester General Hospital/Via Health. A seventh school based health clinic is planned at **Freddie Thomas Learning Center** with Rochester General Hospital/Via Health as the service providers. The clinic is projected to be open during the 2004–05 school year. The goal of these school based health centers is to diagnose and treat minor and acute medical conditions; provide comprehensive health assessments; and provide mental health services including assessments, crisis intervention, counseling and referrals.

A one-of-a-kind (in New York State) “school based community health center” is in place at **School No. 17** with Unity Health Systems providing services to students, families, and the community in general.

The Rochester City School District is working with the Finger Lakes Health Systems Agency to assess the needs and opportunities for increasing the number of school based health centers in the city. Priority school sites and partner health care providers for each site are being identified in preparation for future State Health Department requests for proposals for new school based health centers.

### ■ Faith-Based Organizations

Faith-based organizations have the relationships and the credibility to encourage young people to act responsibly, and to encourage parents to communicate with their children and to set appropriate limits. Several faith-based organizations have developed curricula and programs for youth and parents. The national Religious Coalition for Reproductive Choice developed a program for parents called *Breaking the Silence: A Faith Based Model for Adult Dialogue on Sex and Sexuality*. The NYS Health Department distributes *A Guide to HIV/AIDS Education in Religious Settings*. MCTP and Family Resource Center of Rochester present the Family Talk workshop series in faith based settings. The Council of Religious AIDS Networks and the Balm in Gilead support faith communities to address the HIV/AIDS crisis.

### ■ Supports for Teen Parents

Our community has had considerable success in the past 12 years in supporting teen parents and reducing the rate of repeat teen births. In the years 1990 to 1993 in the City of Rochester, over 300 babies were born annually to teen mothers, ages 15 to 19, who had already given birth. In 2002, the number of second births to teen mothers in the City has fallen to about 150 (the total population of girls ages 15 to 19 has increased slightly during this timeframe.) These statistics should give us hope and renew our commitment to programs that work for teen parents.

It is essential that we continue to support teen parents so that they raise their children successfully, and are encouraged to postpone another pregnancy. With the right supports, teen parents are less likely to have a second teen birth; and the babies born to teen parents are less likely to become teen parents themselves. MCTP has written a report called: *Breaking the Cycle, A Strength Based Practice Guide for Case Managers Who Work with Teen Parents*; the report is available on our web site. This guide sets out essential best practices including:

- a youth centered approach;
- a focus on the young parent’s strengths and capabilities;
- services of sufficient duration and intensity;
- and appropriate linkages and referrals.

Locally, SPCC, YWCA, Unity Health, Strong Hospital, Urban League, City School District and other organizations have developed successful comprehensive teen parent programs.

## ■ The Media

For the most part, television, film and popular music do everything wrong when it comes to teen sexuality. Teens are overwhelmed with images of casual sex, sex without consequences, abusive relationships, and bullying behavior.

Some positive media messages have been developed and these can be effective in reinforcing the messages teens hear from parents, schools and their community regarding responsible sexual behavior. *Not Me Not Now*, a campaign created by the Monroe County Health Department, integrates TV and radio peer to peer messages with in-school instruction and parental workshops to deliver an abstinence message to young people, ages 9 to 14. MCTP broadcasts the *What's Next* video stories on public access television to reach older teens and parents with a message to make responsible choices. Rochester Community Television has partnered with MCTP to create a series of talk shows to complement the *What's Next* video stories. Media campaigns are most effective when they are planned and implemented with extensive community involvement.

## ABOUT OUR ORGANIZATION

The Metro Council for Teen Potential is a membership organization advocating a comprehensive, coordinated and community-wide strategy that works in the City of Rochester to foster youth assets and encourage young people to make healthier choices. The organization provides health communications, program coordination, staff training, youth leadership training, technical assistance, program evaluation, data collection and data analysis. Members of MCTP include many youth development organizations, the City School District, the City of Rochester, the Monroe County Health Department, the Rochester Monroe County Youth Bureau, and other concerned citizens, youth development organizations, faith groups, schools and colleges throughout Monroe County.

This survey was conducted by MCTP in collaboration with Jonathan D. Klein and Premini Sabaratnam of the University of Rochester. Klein is associate professor of pediatric adolescent medicine, and Sabaratnam is a senior health project coordinator with Pediatric Adolescent Medicine at UR. Funding for the survey was provided by the Centers for Disease Control and Prevention.

## FOR MORE INFORMATION

A digital copy of this report, other reports in the series, and full responses to rounds 1 and 2 of the MCTP Countywide Youth Survey can be found on the MCTP Web site, at <http://www.metrocouncil.us>

Other helpful resources include:

**Knowledge Path: Adolescent Pregnancy Prevention**

Maternal and Child Health Library  
[www.mchlibrary.info/KnowledgePaths](http://www.mchlibrary.info/KnowledgePaths)

**Council of Religious AIDS Networks**

[www.aidsfaith.com](http://www.aidsfaith.com)

***Emerging Answers: Research Findings on Programs to Reduce Teen Pregnancy***

Douglas Kirby  
[http://www.teenpregnancy.org/resources/data/report\\_summaries/emerging\\_answers/default.asp](http://www.teenpregnancy.org/resources/data/report_summaries/emerging_answers/default.asp)

***Leading Health Indicators, Monroe County 2002***

Finger Lakes Health Systems Agency  
<http://www.monroecounty.gov/documentView.asp?docID=2334>

***Monroe County 2003 Youth Risk Behavior Survey***

Monroe County Health Department  
<http://www.monroecounty.gov/documentView.asp?docID=4045>

**National Campaign to Prevent Teen Pregnancy**

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

**Planned Parenthood Federation of America, Inc.**

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

**Religious Coalition for Reproductive Choice**

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

***Science and Success, Sex Education and Other Programs that Work to Prevent Teen Pregnancy, HIV and Sexually Transmitted Infections,***

Advocates for Youth  
[www.advocatesforyouth.org/programsthatwork](http://www.advocatesforyouth.org/programsthatwork)

***The Truth About Adolescent Sexuality***

Sexuality Information and Education Council of the United States  
<http://www.siecus.org/pubs/fact/fact0020.html>

***This is My Reality: The Price of Sex...An Inside Look at Black Urban Youth Sexuality and the Role of the Media***

MEE Productions  
[www.meeproductions.com](http://www.meeproductions.com)

***U.S. Teenage Pregnancy Statistics — 2004 report, with statewide statistics***

Alan Guttmacher Institute  
[http://www.siecus.org/media/pdf/AGI\\_TeenPregnancyByState.pdf](http://www.siecus.org/media/pdf/AGI_TeenPregnancyByState.pdf)