

Condom Availability Programs: Recommendations for Supervisory Unions/Districts and Schools

Purpose

The purpose of this document is to provide helpful information for Supervisory Unions/Supervisory Districts (SUs/SDs) and schools regarding 16 V.S.A. § 132, which requires that all secondary schools in Vermont provide condoms to all students. This law states:

In order to prevent or reduce unintended pregnancies and sexually transmitted diseases, each school district shall make condoms available to all students in its secondary schools, free of charge. School district administrative teams, in consultation with school district nursing staff, shall determine the best manner in which to make condoms available to students. At a minimum, condoms shall be placed in locations that are safe and readily accessible to students, including the school nurse's office. (Added 2019, No. 157 (Adj. Sess.), § 4, eff. July 1, 2021.)

<u>Secondary school</u> is defined as a "program of public-school education of six years, grades 7-12, adapted to the needs of students who have completed their elementary education."

The Agency of Education, in collaboration with the Vermont Department of Health and Planned Parenthood of Northern New England (PPNNE), has collected background information, identified steps for SUs/SDs and schools to implement condom availability in their schools, and created a template for schools to use when developing condom availability procedures.

Background Information

In an update to jointly issued guidance supportive of condom availability in 2016, the Vermont Department of Health and the Agency of Education jointly advised schools in 2020 that "to promote and protect the health of young Vermonters, we are recommending that school districts and supervisory unions have in place appropriate policies, procedures and/or practices to implement a comprehensive health curriculum that includes sexual health education and make barrier methods (condoms and dams) available to students."

<u>Research shows</u> that condom availability programs increase condom use in sexually active youth, promote delayed sexual initiation or abstinence, provide medical care costs savings, and reduce the risk of HIV, STD, and unplanned pregnancy.

 Results from the 2019 Vermont Youth Risk Behavior Survey (YRBS), which is an anonymous survey distributed to middle and high school students about a wide range

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- of health topics, showed that 40% of high school students have had sexual intercourse. This is an average across all grades and the percentage rises with each grade from 18% in 9th grade to $\sim 60\%$ in 12th grade.
- The 2019 YRBS also shows that only 50% of females and 59% of sexually active males are using condoms which leaves a large percentage of teens unprotected from teen pregnancy and sexually transmitted infections (STIs) such as chlamydia and gonorrhea.
- The CDC estimates that nearly 20 million new STIs occur every year in this country, half of those among young people aged 15–24. In our state, more than 70% of the chlamydia infections are among Vermonters ages 15 to 24. Minors in Vermont have a legal right to access a full range of reproductive and sexual health services without parent permission (18 V.S.A. § 4226). Minors are provided access to condoms in a variety of settings and may purchase them without parental consent.

Considerations to Support Condom Availability

SU/SD/schools

SU/SD and school administrators should coordinate with school district nursing staff and health educators to determine the best manner to make condoms available to students in secondary schools.

Sexual Health Education

Inclusive, developmentally appropriate <u>comprehensive sexual health education</u> should be incorporated into elementary and secondary health education. SU/SD/schools should ensure health curriculum, and in particular sexual health education, is coherent and coordinated across buildings and grade levels. Condom availability is a key element of comprehensive sexual health education.

Availability of Condoms

Condoms should be available in locations that are safe and readily accessible for students, without barriers to obtaining condoms or stigma surrounding access (e.g., should be available through health office or classroom, athletic trainer's office, guidance office or other locations students can comfortably access). Information about proper condom use that represents all students, inclusive of gender identity, sexuality, and ethnicity, should also be available.

PPNNE Program

A secondary school may request safer sex supplies from PPNNE, which are available free of charge to secondary schools, up to the limits of available funding. As a prerequisite for this program, PPNNE requires that the school has adopted a procedure on condom availability. If funding is not available or supplies run out, PPNNE is able to work with schools to purchase condoms at a reduced rate. Contact the PPNNE Education Department to access this support: education@ppnne.org. Alternatively, schools may wish to purchase safer sex supplies on their own, as many condom companies provide reduced rates for schools and nonprofit organizations.

Resources



- Sexual Health Education Resource Guide
- PPNNE Population Health and Education
- PPNNE Advocates for Sexual Knowledge (A.S.K.) Peer Education Program PPNNE's peer education program, A.S.K., equips youth ages 14-18 with the knowledge and skills they need to serve as sexual health resources for their peers. This unique leadership opportunity empowers youth to be agents of positive change for themselves, their peers, and their communities. A.S.K. Peer Educators act as resources for friends, peers, and families by answering questions and facilitating activities and events in schools and the community.
- VDH Adolescent Health Webpages
- Center of Disease Control Adolescent Health Webpages

Legal Reference(s):

16 V.S.A. § 906

16 V.S.A. § 131

16 V.S.A. § 132

16 V.S.A. § 134

18 V.S.A. § 4226

APPENDIX A: Sample SU/SD/school Condom Availability Procedure

Purpose

It is the intent of _______ to implement a program promoting lifelong sexual health. This includes comprehensive sexual health education and the provision of, or referrals to, age-appropriate sexual health services. These activities support an effective sexually transmitted infections (STI), human immunodeficiency virus (HIV), and pregnancy-prevention program. Research shows that well-designed, well-implemented school-based STI prevention programs can significantly reduce sexual risk behaviors among students. Outcomes of such programs include a delay in first sexual intercourse, a decrease in the number of sex partners and an increase in condom or contraceptive use. There is no evidence that participation in such programs increases the likelihood of students engaging in sexual activity.

Comprehensive Sex Education

The SU/SD/school shall provide comprehensive sex education programs as required by state law and regulations of the State Board of Education. The SU/SD/school shall develop curricular programs intended to accomplish applicable goals enumerated in the National Health Education Standards, the National Sexuality Education Standards, and 16 V.S.A. § 131. In particular, the district shall provide sex education in its Comprehensive Health Education program that will include instruction in skills and information about barrier methods, including proper condom use and dental dams.

Parental Requests

- A. The curriculum will be made available to parents and community members for viewing upon request.
- B. Any pupil whose parent/guardian shall present to the school principal a signed statement that the teaching of disease, its symptoms, development and treatment, conflicts with the parents' religious convictions shall be exempt from such instruction, and no child so exempt shall be penalized by reason of that exemption. (16 V.S.A. § 134)

Sexual Health Services

Sexual Health Services is defined by the Centers for Disease Control and Prevention to include: HIV and other STI testing and treatment; pregnancy testing; access to condoms and condom-compatible lubricants, access to contraceptives other than condoms; Human Papilloma Virus (HPV) vaccination, and medications to prevent the spread of HIV.

Condom Access

Goals for Condom Availability

A. As part of a comprehensive sexual health program, the _____ shall provide condoms in locations that are readily accessible for students, without unnecessary barriers to obtaining condoms or stigma surrounding access.



B. The district shall also provide information about proper condom use that is inclusive of all students in locations where condoms are available.

C. The district will ensure that condoms are available either through funding or donation from community partners. When possible, the district provides a variety of latex, non-latex, internal and external condoms and dental dams.

Implementation of Condom Availability

A. Each school that serves secondary students will identify suitable locations for students to access condoms in a confidential and safe manner (e.g., school nurse or health office, health education classrooms, athletic training room, school counselor's office). Information about condom use will be made available in these same locations. Other locations may be added as appropriate.

B. School staff in those locations will receive training on how to talk with young people about sexual health and answer questions about condoms. A conversation with staff is not required as part of condom availability; staff may give information and answer questions as requested by students.

C. Information will be provided by the SU/SD/school to students and families to promote awareness of the condom availability program. This will include parent letters, announcements during comprehensive sex education instruction, one-to-one meetings with student support services staff, and/or posters.

D. No secondary student will be refused access to condoms through this program. Minors in Vermont have a legal right to access a full range of reproductive and sexual health services without parent permission. Minors are provided access to condoms in variety of settings and may purchase them without parental consent. (18 V.S.A § 4226)

Program Evaluation - The SU/SD/school will use data from the <u>Youth Risk Behavior Survey</u> and the <u>School Health Profiles</u> (released every other year) to assess and inform progress.

Date Warned:

Date Adopted:

Date Revised:

Legal Reference(s):

16 V.S.A. § 906

16 V.S.A. § 131

16 V.S.A. § 132

16 V.S.A. § 134

18 V.S.A. § 4226



APPENDIX B: Template for School Condom Availability Procedures

<<School Name>> Condom Availability Procedure

Background/Purpose

In order to promote and protect the health of young Vermonters, Vermont State Law requires that school districts, supervisory unions/districts, and independent schools have in place appropriate policies, procedures and/or practices to implement a comprehensive health education curriculum that includes sexual health education and to make condoms available to all secondary students. Research shows that well-designed, well-implemented school-based STI prevention programs can significantly reduce sexual risk behaviors among students. Outcomes of such programs include a delay in first sexual intercourse, a decrease in the number of sex partners and an increase in condom or contraceptive use. There is no evidence that participation in such programs increases the likelihood of students engaging in sexual activity. To support preventative health and wellness initiatives for <<School Name>> students and in accordance with 16 V.S.A. § 132, condoms will be made available at <<School Name>> grades X-XX.

Sexual Health Education

Sexual Health Education instruction will be provided as part of the health curriculum and will include instruction in skills and information about barrier methods, including proper condom use and dental dams. Students do not have to have completed this instruction to access barrier methods; additional information on use of condoms will be provided at access points. Public health and health care organizations with expertise in sexual and reproductive health (the National Association of School Nurses, the American Academy of Pediatrics, the American Medical Association, the American Public Health Association, the American College of Obstetricians and Gynecologists, etc.) support comprehensive sexual health education as best practice and recommend that it is provided to youth of all ages.

Delegation of Responsibilities

School teams, in consultation with school district nursing and administrative staff, shall determine the best manner in which to make condoms available to students. <<School Name>> shall provide condoms and dams in locations that are safe and readily accessible for students, without unnecessary barriers to obtaining condoms or stigma surrounding access. Information about proper use that represents all students, inclusive of gender identity, sexual orientation and ethnicity, will also be available. The <<School Name>> point person will coordinate with the individual responsible for ensuring that <<SU/SD/IS>> supply of condoms is maintained.

Implementation of Condom Availability

<School Name>> has identified the following locations where condoms, safely stored in a container will be made accessible to students: << list of locations at school, e.g.: the school nurse and health office, the athletic trainer's office, guidance counselors, and specific teachers >>. Information about condom use will be made available in these same locations. Other locations may be added as appropriate. Any student in good standing with the Advocates for Sexual Knowledge Peer Educator Program from PPNNE may also give out safer sex supplies and educational information at school as part of their peer educator duties and if they so choose.



Information will be provided by <<School Name>> to students and families to promote awareness of the condom availability program. This will include parent communication, announcements during comprehensive sex education instruction, one-to-one meetings with student support services staff, and/or posters.

Authorizing Information	
Date reviewed	Signed by

References

Memo: Comprehensive Sexual Health Education and Condom Availability Programs. Mark Levine, M.D., Commissioner, Department of Health, Daniel M. French, Ed.D., Secretary, Agency of Education, (January 30, 2020). Retrieved from https://education.vermont.gov/documents/memo-comprehensive-sexual-health-condom-availability.

National Association of School Nurses. Position Statement: Sexual Health in Schools.

Vermont Youth Risk Behavior Survey. (2019). Retrieved from <<Insert link to your school YRBS>>

Legal references:

16 V.S.A. § 131 16 V.S.A. § 132 18 V.S.A. § 4226